



**CHAMPAIGN COUNTY
DEVELOPMENTAL
DISABILITIES BOARD**
**CHAMPAIGN COUNTY
MENTAL HEALTH BOARD**

Champaign County Mental Health Board (CCMHB) Meeting Agenda

Wednesday, March 17, 2021 at 5:45PM

Putman Room, Brookens Administrative Building

1776 East Washington Street, Urbana, IL

<https://us02web.zoom.us/j/81393675682>

312-626-6799, Meeting ID: 813 9367 5682

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

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

1. Call to Order
2. Roll Call
3. Zoom Instructions (**page 3**)
4. Citizen Input/Public Participation
The CCMHB reserves the authority to limit individual public participation to 5 minutes and limit total time to 20 minutes.
5. Approval of Agenda*
6. President's Comments
7. Executive Director's Comments
8. New Business
 - A. Election of Officers*
Nomination and election of Board President and Secretary/Vice President. Action is requested.
 - B. CCMHB By-Laws (**pages 4-7**)
The Board's Bylaws, as amended February 2017, are included for information only.
 - C. CCMHB FY 2020 Annual Report (**pages 8-44**)*
The Draft FY2020 Annual Report is including in the board packet for review and approval. Action is requested.
 - D. CCMHB: A Review of Needs & 2010-2019 Data (**pages 45-53**)
For information only, the packet includes a final report prepared by Dr. Garthe and Fall 2020 Social Work Research Methods Students, incorporating community needs assessment reports and aggregated CCMHB data for a nine-year period.
 - E. First Followers Application (**pages 54-55**)*

- The agency requests an exception to application deadline. Action is requested.*
- F. **Application Review Process (page 56)**
Included for information only is a spreadsheet which lists agency requests for PY22 funding and reviewers for each. Staff program summaries will support Board discussion of applications in April.
 - G. **Agency Acronym List and Glossary (pages 57-67)**
A list of agency and program name acronyms and glossary of terms is included in the packet for information only.
 9. **Agency Information**
The CCMHB reserves the authority to limit individual public participation to 5 minutes and limit total time to 20 minutes. Included in the packet is an article on state funding awarded to two agencies with programs funded by the CCMHB.
 10. **Old Business**
 - A. **CILA Facilities Project Update (pages 68-71)**
As follow up to the January 20 and February 17 discussions, a briefing memo is included for information only.
 - B. **Contract Amendment Report (page 72)**
A briefing memorandum on contract amendments issued is included in the packet for information only.
 - C. **Schedules & Allocation Process Timeline (pages 73-76)**
Updated copies of CCMHB and CCDDDB meeting schedules and CCMHB allocation timeline are included in the packet.
 11. **CCDDDB Information**
 12. **Approval of CCMHB Minutes* (pages 77-81)**
Minutes from the February 17, 2021 meeting and February 24, 2021 study session are included in the packet. Action is requested.
 13. **Staff Reports**
Due to staff attention to the review of agency applications for funding and the development of recommendations to the Board, staff reports are deferred.
 14. **Board to Board Reports**
 15. **Expenditure List* (pages 82-92)**
Copy of the Expenditure List is included in the packet. Action is requested to accept the list and place it on file.
 16. **Board Announcements**
 17. **Adjournment**

**Board action requested*

Instructions for participating in Zoom Conference Bridge for CCMHB Meeting March 17, 2021 at 5:45 p.m.

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

Go to Join Zoom Meeting

<https://us02web.zoom.us/j/81393675682>

Meeting ID: 813 9367 5682

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Meeting ID: 813 9367 5682

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

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

Join with computer audio.

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

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

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

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

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

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CHAMPAIGN COUNTY MENTAL HEALTH BOARD
BY-LAWS

(J.B.)

I. PURPOSE AND FUNCTIONS:

- A. The Champaign County Mental Health Board (CCMHB) is established under the Illinois Community Mental Health Act, as amended, (IL Revised Statutes, Chapter 91-1/2, Sections 301-314, inclusive) in order to “construct, repair, operate, maintain and regulate community mental health facilities to provide mental health services as defined by the local community mental health board, including services for the intellectually and developmentally disabled and for the substance user, for residents (of Champaign County) and/or to contract therefore with any private or public entity which provides such facilities and services...”
- B. In order to accomplish these purposes, the CCMHB performs the following functions:
 - 1. Planning for the mental health, intellectual and developmental disabilities, and substance use disorder services system to assure accomplishment of the CCMHB goals.
 - 2. Allocation of local funds to assure the provision of a comprehensive system of community based mental health, intellectual and developmental disabilities, and substance use disorder services.
 - 3. Coordination of affiliated providers of mental health, intellectual and developmental disabilities, and substance use disorder services to assure an inter-related accessible system of care.
 - 4. Evaluation of the system of care to assure that services are provided as planned and that services are effective in meeting the needs and values of the community.
- C. The CCMHB shall perform those duties and responsibilities as specified in Sections 3e and 3f of the Community Mental Health Act, as amended.

II. MEMBERSHIP:

- A. The membership of the CCMHB shall include nine (9) members, of which one person shall be a County Board member.
- B. The members of the CCMHB shall be appointed by the Chairperson of the Champaign County Board, with the advice and consent of the Champaign County Board. The CCMHB shall recommend nominees for membership to the Chairperson of the Champaign County Board.

(4)

- C. Members of the CCMHB shall be residents of Champaign County and, as nearly as possible, be representative of interested groups of the community, such as local health departments, medical societies, local comprehensive health planning agencies, hospital boards, lay associations concerned with mental health, as well as the general public. To the extent possible, members of the CCMHB shall represent the geographic areas of the County. No member of the CCMHB may be a full-time or part-time employee of the Department of Mental Health / Developmental Disabilities (DMH/DD) or Department of Alcohol and Substance Abuse (DASA) or a Board member or employee of any facility or service operating under contract to the CCMHB. All terms shall be measured from the first day of the calendar year of appointment. Vacancies shall be filled for an expired term in the same manner as original appointments.
- D. Any member of the CCMHB may be removed by the appointing officer for absenteeism, neglect of duty, misconduct or malfeasance in office, after being given a written statement of the charges and an opportunity to be heard thereon.

III. MEETINGS:

- A. The CCMHB shall meet at such time and location as the CCMHB shall designate.
- B. The CCMHB may meet in Study Session during the intervals between monthly meetings to receive reports, discuss issues, and develop recommendations on matters brought to it by the Executive Director and the President.
- C. Special meetings may be called by the President or upon the written request of two members, filed with the secretary, to conduct such business that cannot be delayed until the regular meeting date.
- D. The Executive Director shall prepare an agenda for all meetings of the CCMHB and shall cause the notice of the meeting and the agenda to be sent to all members at least five (5) days in advance of the meeting.
- E. Public notices and the conduct of all meetings shall be in conformance with the Illinois Open Meetings Act (IL Revised Statutes, Chapter 102, Sections 41 etseq).
- F. The presence of five (5) members shall constitute a quorum for any meeting of the CCMHB. For a member to attend a meeting "electronically" (e.g. by teleconference or video conference), a majority of members must be physically present at the properly-noticed meeting, and a majority of physically present members must agree to allow the electronic attendance. Such attendance may only be due to: personal illness or disability, employment purposes or CCMHB business; or a family or other emergency.

IV. OFFICERS:

- A. The officers of the CCMHB shall be a President and a Vice-President/Secretary.
- B. Election of the officers shall take place at the January meeting of the CCMHB.
- C. Officers shall be elected for one year, beginning February 1. No member shall hold the same office for more than two (2) consecutive years, except that officers may remain in their then current positions until their successors can be chosen.
- D. Duties of Officers:

- 1. President:

Subject to the control and direction of the CCMHB. The President shall maintain a current general overview of the affairs and business of the CCMHB. The President shall have the privilege of voting in all actions by the CCMHB. The President shall have the authority to sign all legal documents and expenditure authorizations approved by the CCMHB.

- 2. Vice-President / Secretary:

The Vice-President / Secretary shall act in place of the President in the latter's absence, including signature authority for legal documents and expenditures.

V. STAFF:

The CCMHB shall employ an Executive Director who, subject to the control and direction of the Board, shall have general charge, oversight and directions of the affairs and business of the CCMHB and shall be its responsible managing head. The Executive Director shall have the responsibility for the employment and discharge of staff pursuant to the provisions of the CCMHB Personnel Policies. The Executive Director shall have the authority to sign on behalf of the CCMHB all necessary papers pursuant to CCMHB action and shall have the authority with the endorsement of the President to make contracts and expenditures within the approved program and budget. The Executive Director or delegate shall attend all meetings of CCMHB. The Executive Director shall also be liaison between the CCMHB, staff, and affiliated agencies and implement policies regarding communications between them.

VI. FISCAL AND GRANT YEARS:

- A. The fiscal year of the CCMHB shall be the same as that of the County of Champaign, i.e., January 1 through December 31.
- B. CCMHB contracts for mental health, intellectual and developmental disabilities, and substance use disorder services shall be allocated on the same fiscal year as the State of Illinois, i.e., July 1 through June 30.

VII. RULES OF ORDER:

Roberts' Rules of Order shall be followed in deliberations of the Board unless otherwise precluded by these By-laws.

IX. CHANGE OF BY-LAWS:

Any or all of these By-laws may be altered, amended or repealed by a majority vote of the Board at any regular or special meeting, provided that written notice of the proposed action is given in the call to the meeting and that a quorum is present.

Approved as amended by the CCMHB on February 22, 2017.



8.C.

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

DECISION MEMORANDUM

DATE: March 17, 2021
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Lynn Canfield, Stephanie Howard-Gallo
SUBJECT: CCMHB Annual Report for Fiscal Year 2020

Attached for review and approval is the Annual Report for Fiscal Year 2020, January 1 to December 31, 2020. The preparation of the Annual Report is a collaboration among staff members and Board president. Included are a financial accounting of revenue and expenditures, agency program allocations, service activity totals by agency and program (with explanations as introduced in the FY2016 Annual Report), aggregate demographic and residency data, and service sector charts for the past year. The Three-Year Plan (FY 2019 – FY 2021) with One-Year Objectives for FY2021, approved at the November 2020 meeting, is also presented.

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

Decision Section

Motion: Move to approve the Champaign County Mental Health Board Fiscal Year 2020 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, 2020 through December 31, 2020.

The CCMHB's Three-Year Plan for the period January 1, 2019 through December 31, 2021 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, 2021 through December 31, 2021.

Any questions or comments regarding the CCMHB's activities or the county's behavioral health and developmental disability 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 2020 Annual Report & Three-Year Plan 2019-2021

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Three-Year Plan with FY20 Objectives	

LISTING OF 2020 BOARD MEMBERS AND STAFF

BOARD MEMBERS

Mr. Joseph Omo-Osagie
(President)

Mr. Kyle Patterson
(Vice President)

Dr. Susan Fowler

Dr. Thom Moore

Ms. Elaine Palencia

Dr. Julian Rappaport

Ms. Jane Sprandel

Ms. Kathleen Wirth-Couch

Dr. Jon Paul Youakim

STAFF MEMBERS

Lynn Canfield
Executive Director

Kim Bowdry
Associate Director for Intellectual and Developmental Disabilities

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

Stephanie Howard-Gallo
Operations & Compliance Coordinator

Shandra Summerville
Cultural & Linguistic Competence Coordinator

Chris Wilson
Financial Manager



CCMHB President's Report

As President, it is my pleasure on behalf of the Champaign County Mental Health Board (CCMHB/Board) to present to the citizens of Champaign County the 2020 Annual Report. The report is statutorily required under the Illinois Community Mental Health Act (405 ILCS 20/). The Board meets the mandated reporting requirements and provides additional information detailing funded services and performance as well as including the Three-Year Plan with objectives for the new year. The following pages include a financial accounting of 2020 expenditures, amounts allocated to community agencies by program, and for the two CILA homes. Detailed descriptions of funded services by program and reported utilization follow and is accompanied by charts aggregating reported service data and the commitment of financial resources by the Board. Closing out the report is the Three-Year Plan with Fiscal Year 2021 Objectives.

We started 2020 aware that provider agencies operate in an increasingly challenging fiscal and regulatory environment, with a growing workforce shortage, inadequate state rates for vital services, enrollment and claims issues related to Medicaid managed care, and alarming rates of addiction and suicidality across the country. We talked about the Diseases of Despair and the deadly threat of stigma. 2020 quickly turned into something else, as the COVID-19 pandemic reached the US. The Board took a great interest in its impacts and added service flexibility to all agency contracts. The pandemic has revealed the frailty and disparities of our service systems, with deeply unequal health outcomes across the population. Violence of all sorts continued to plague our communities, with a record number of gun related incidents in Champaign County. While services have been stretched by COVID and its effects, we see less of a demarcation between health and mental health, as well as greater common ground across the urban/rural divide for basic human rights and needs.

During 2020, the Board was again able to offer a family-based model for addressing needs of youth, contracting with Cunningham Children's Home for Families Stronger Together. Another significant achievement is the collaborative effort between the Board and the Champaign County Developmental Disabilities Board to improve the CILA Facilities Project established in 2014, to offer lower rental amounts to the service provider, to transfer ownership for better alignment with the Acts, and to update all related agreements. In an effort to provide long-standing programs with some security regarding current contracts, the Board approved extending the term of ten contracts representing 33% of 2020 awards. The amount of funding the Board has awarded to local agencies has continued to increase over the last four years. For contract year 2020 (7/1/10-6/30/20), the Board awarded \$4,562,151, compared to contract year 2021 (7/1/20-6/30/21) awards of \$4,943,804. As you will see in the following pages, these funds support services to the very young to the very old, to residents of our large towns and cities to our very small rural communities.

In closing, I want to thank you for your interest in the work of the CCMHB. What has been accomplished would not be possible without the commitment of my fellow volunteer board members, including outgoing members Dr. Thomas Moore and Ms. Kathleen Wirth-Couch, and the dedicated staff team, including Mr. Mark Driscoll, who has retired after twenty-two years of outstanding service to our community.

Respectfully,

Joseph Omo-Osagie
CCMHB President, 2020



SECTION I: Financial Reports and Service Data

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CHAMPAIGN COUNTY MENTAL HEALTH BOARD

ANNUAL FINANCIAL REPORT

1/1/20 - 12/31/20

	2019	2020
Beginning of the Year Fund Balance	\$ 3,225,111	\$ 3,440,634
REVENUE		
General Property Taxes	\$ 4,813,598	\$ 4,802,522
Back Taxes, Mobile Home Tax & Payment in Lieu of Taxes	13,155	-
		1,088
Local Government Revenue		
Champ County Developmental Disabilities Board	409,175	346,706
Interest Earnings	45,950	7,627
Gifts and Donations	4,706	2,900
Disability Expo	14,275	13,805
Miscellaneous	129,028	-
TOTAL REVENUE	\$ 5,429,887	\$ 5,174,648
EXPENDITURES		
Administration & Operating Expenses:		
Personnel	\$ 517,053	\$ 544,001
Commodities	11,147	12,362
Services	286,377	288,560
Interfund Transfers*	406,505	5,819
Capital Outlay	-	-
Sub-Total	\$ 1,221,082	\$ 850,742
Grants and Contributions:		
Program	3,993,283	4,495,820
Capital	-	-
Sub-Total	\$ 3,993,283	\$ 4,495,820
TOTAL EXPENDITURES	\$ 5,214,364	\$ 5,346,562
Fund Balance at the End of the Fiscal Year	\$ 3,440,634	\$ 3,268,719

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

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CHAMPAIGN COUNTY CILA FACILITIES

ANNUAL FINANCIAL REPORT

1/1/20 - 12/31/20

REVENUE	2019	2020
From Mental Health Board	\$ 300,000.00	\$ -
From Developmental Disabilities Board	\$ 50,000.00	\$ 50,000.00
Rent	\$ 21,676.00	\$ 16,500.00
Other Misc Revenue	\$ 669.56	\$ 1,995.46
TOTAL REVENUE	<u>\$ 372,345.56</u>	<u>\$ 68,495.46</u>

EXPENDITURES

Mortgage Principal	\$ 398,002.48	\$ -
Mortgage Interest	\$ 10,771.34	\$ -
Commodities	\$ -	\$ 5,536.60
Professional Fees	\$ 6,000.00	\$ 6,000.00
Utilities	\$ 903.92	\$ 738.58
Building/Landscaping Maintenance	\$ 15,041.79	\$ 13,697.45
Building Improvements	\$ -	\$ -
Other Services	\$ 33.62	\$ 2,653.12
TOTAL EXPENDITURES	<u>\$ 430,753.15</u>	<u>\$ 28,625.75</u>

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
PROGRAM ALLOCATIONS -- FY2020
1/1/20 - 12/31/20**

AGENCY/PROGRAM	TOTAL PAID
CHAMPAIGN COUNTY CHILDREN'S ADVOCACY CENTER	52,754.00
CHAMPAIGN COUNTY CHRISTIAN HEALTH CENTER Mental Health Care	13,000.00
CHAMPAIGN COUNTY HEALTH CARE CONSUMERS CHW Outreach and Benefit Enrollment Justice Involved CHW Services & Benefits	68,630.00 64,957.00
Agency Total	133,587.00
CHAMPAIGN COUNTY REGIONAL PLANNING COMMISSION Headstart - Early Childhood Mental Health Services Headstart - Social/Emotional Development Services** Homeless Services System Coordination Justice Diversion Program Youth Assessment Center	212,286.00 93,608.00 52,744.00 43,211.00 76,350.00
Agency Total	478,199.00
CHAMPAIGN URBANA AREA PROJECT TRUCE (6 months)	0.00
COMMUNITY SERVICE CENTER OF NORTHER CHAMPAIGN COUNTY Resource Connection	67,596.00
COURAGE CONNECTION Courage Connection	127,947.00
CRISIS NURSERY Beyond Blue Champaign County	75,000.00
CUNNINGHAM CHILDREN'S HOME ECHO Housing and Employment Support Families Stronger Together (6 months) Parenting Model Planning/Implementation (6 months)	98,689.00 201,553.00 140,483.00
Agency Total	440,725.00
DEVELOPMENTAL SERVICES CENTER Family Development Center **	586,488.00
DON MOYER BOYS & GIRLS CLUB CU Neighborhood Champions Community Coalition Summer Youth Programs CU Change Youth and Family Services	131,035.00 107,000.00 101,762.00 160,000.00
Agency Total	499,797.00
DREAAM HOUSE DREAAM	80,000.00
EAST CENTRAL ILLINOIS REFUGEE ASSISTANCE CENTER Family Support and Strengthening	56,440.00
FAMILY SERVICE Counseling	30,000.00

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**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
PROGRAM ALLOCATIONS -- FY2020
1/1/20 - 12/31/20**

AGENCY/PROGRAM	TOTAL PAID
Self Help Center	28,676.00
Senior Counseling and Advocacy	162,350.00
Agency Total	221,026.00
FIRST FOLLOWERS	
FirstSteps Community Re-Entry House (6 months)	19,800.00
Peer Mentoring for Re-entry	95,000.00
Agency Total	114,800.00
GROW IN ILLINOIS	
Peer Support	70,548.00
MAHOMET AREA YOUTH CLUB	
BLAST	15,000.00
Members Matter!	18,000.00
Agency Total	33,000.00
NATIONAL ALLIANCE ON MENTAL ILLINOIS	
NAMI Champaign County	10,000.00
PROMISE HEALTHCARE	
Mental Health Services with Promise	161,502.00
Promise Healthcare Wellness	38,668.00
Agency Total	200,170.00
RAPE ADVOCACY COUNSELING EDUCATION SERVICES	
Sexual Violence Prevention Education	66,864.00
RATTLE THE STARS	
Youth Suicide Prevention Education	70,750.00
ROSECRANCE CENTRAL ILLINOIS	
Criminal Justice PSC	293,591.00
Crisis, Access, & Benefits	203,960.00
Fresh Start	79,310.00
Prevention Services	60,000.00
Recovery Home	200,000.00
Specialty Courts	203,000.00
Agency Total	1,039,861.00
UP CENTER OF CHAMPAIGN COUNTY (UNITING PRIDE)	
Children, Youth, and Families Program	31,768.00
URBANA NEIGHBORHOOD CONNECTIONS	
Community Study Center	25,500.00
GRAND TOTAL	4,495,820.00

** Programs for people with ID/DD, per Intergovernmental Agreement with the Champaign County Developmental Disabilities Board

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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 Promise Healthcare, Rosecrance Central Illinois, and 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.

Utilization Summaries for PY2020
Champaign County Mental Health Board Funded Programs

Detail on each program's performance toward defined consumer outcomes during the funding year of July 1, 2019 to June 30, 2020 is available at <http://ccmhddbrds.org>, among downloadable public files toward the bottom of the page. The relevant document is titled "CCMHB PY20 Performance Outcome Reports."

TPC = Treatment Plan Client

NTPC = Non-Treatment Plan Client

CSE = Community Service Event

SC = Screening Contact or Service Contact

Other, as defined in individual program contract

Priority: Intellectual/Developmental Disabilities - Collaboration with Champaign County Developmental Disabilities Board (CCDDB)

Champaign County Regional Planning Commission Head Start/Early Head Start Social Emotional Development Services \$112,004 (CCMHB & CCDDB)

Program seeks to identify and address social-emotional concerns in the early childhood period, as well as to promote mental health among all Head Start children. The social-emotional portion of the program focuses on aiding the development of self-regulation, problem solving skills, emotional literacy, empathy, and appropriate social skills. Accomplishments in these areas will affect a child's ability to play, love, learn and work within the home, school and other environments. All fit together to form the foundation of a mentally healthy person.

Utilization targets: 80 TPC, 70 NTPC, 20 CSE, 700 SC, 10 Other (newsletter articles, staff training)

Utilization actual: 52 TPC, 29 NTPC, 17 CSE, 638 SC, 16 Other

Developmental Services Center

Family Development Center \$579,148

Program serves children birth to five years old, with or at risk of developmental disabilities, and their families. FDC responds to needs with culturally responsive, innovative, evidence-based services. Early detection and prompt, appropriate intervention can improve developmental outcomes for children with delays and disabilities and children living in at-risk environments. Family-centered intervention maximizes the gifts and capacities of families to provide responsive intervention within familiar routines and environments.

Utilization targets: 655 TPC, 200 SC, 300 CSE

Utilization actual: 724 TPC, 146 SC, 374 CSE

Individual Advocacy Group CILA Expansion \$50,000 (CCMHB and CCDDB)

This annual investment pays for mortgage and property management costs of two of the three local small group homes run by Individual Advocacy Group, which was selected in 2014 through an RFP process to provide services to people with I/DD living in MHB/DDB owned-homes. During 2019, the CCMHB contributed a larger share in order to pay off

the mortgage loan in full; the CCDDDB continues to transfer \$50,000 into the fund each year until their total payments are equal to the CCMHB contribution.

Utilization: 6 TPCs with staffing ratios from 1:4 to 2:3 and a choice between IAG 'Flexible Day Experience' and community day programs run by other local providers.

Priority: System of Care for Children, Youth, and Families

Champaign County Children's Advocacy Center (CAC)

Children's Advocacy \$52,754

Promoting healing and justice for children/youth who have been sexually abused. The CAC provides: a family-friendly initial investigative interview site; supportive services for the child and non-offending family, promoting healing; and abuse investigation coordination. Most of the young people served are victims of sexual abuse. CAC services are also provided to those children/youth who are victims of severe physical abuse and to victims of child trafficking. Trauma inflicted by these crimes is deep; with the right help the young person can begin to heal.

Utilization targets: 200 TPC, 25 NTPC, 225 SC, 12 CSE

Utilization actual: 329 TPC, 53 NTPC, 257 SC, 9 CSE

Champaign County RPC Head Start/Early Head Start

Early Childhood Mental Health Services \$214,668

Support from an Early Childhood Mental Health Assistant including: assisting teaching staff and parents in writing individualized social-emotional goals to include in lesson plans for children identified through screening; developing with parents and teaching staff an Individual Success Plan for children who exhibit challenging behaviors; offering teachers social and emotional learning strategies; monitoring children's progress and outcomes; and providing information to families and staff. Facilitation of meetings with a child's parent(s) and teaching staff throughout the process of the child receiving services as well as supporting parents and teaching staff with resources, training, coaching, and modeling.

Utilization targets: 50 TPC, 50 NTPC, 1800 SC, 5 CSE, 50 Other

Utilization actual: 105 TPC, 325 NTPC, 3417 SC, 20 CSE, 325 Other

Champaign Urbana Area Project

TRUCE \$25,000 (six months)

TRUCE addresses gun violence preventively from a public health perspective. Under this public health approach, first posited by Gary Slutkin, the epidemiologist creator of "Cease Fire" at the University of Chicago, the spread of violence is likened to the spread of an infectious disease and should be treated in much the same way: go after the most infected and stop it at its source. TRUCE engages the community in reducing violence by: 1) interrupting the transmission of the violence; 2) reducing the risk of the highest risk; and 3) changing community norms.

Utilization targets: 16 NTPC, 125 SC, 190 CSE, 25 Other

Utilization actual: 26 NTPC, 52 SC, 416 CSE, 6 Other (three quarters)

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(First two quarters: 15 NTPC, 33 SC, 303 CSE, 6 Other)

Courage Connection

Courage Connection \$127,000

A family's immediate safety is intimately connected to their long-term success. A community's stability is threatened when any family is in danger. Courage Connection helps victims and survivors of domestic violence rebuild their lives through advocacy, housing, counseling, court advocacy, self-empowerment, community engagement, and community collaborations.

Utilization targets: 425 TPC, 110 NTPC, 600 SC, 150 CSE

Utilization actual: 537 TPC, 174 NTPC, 899 SC, 117 CSE

Crisis Nursery

Beyond Blue – Champaign County \$75,000

Beyond Blue serves mothers who have or are at risk of developing perinatal depression (PD), targeting mothers who demonstrated risk factors for PD and are pregnant or have a child under age one. Individual and group support and education to facilitate healthy parent-child engagement. Research suggests that 10-20% of mothers suffer from PD, nearly half are undiagnosed. Addresses risk factors that lead to emotional disturbances and multiagency and system involvement in children. Works to increase awareness of PD and reduce stigma.

Utilization targets: 33 TPC, 77 NTPC, 522 SC, 128 CSE, 2275 Other (hours of in-kind/respite care)

Utilization actual: 30 TPC, 90 NTPC, 472 SC, 138 CSE, 654 Other

Cunningham Children's Home

Parenting Model Planning & Implementation (NEW) \$280,995

Works closely with individuals who are homeless or at risk of homelessness, through intensive case management and care coordination geared towards promoting permanent housing and employment and resolving barriers. The Case Manager takes a holistic approach to supportive services by countering possible barriers to goal stability (e.g., basic needs, child care, physical health, and mental health). Participants receive weekly services that last until 90 days after obtaining both housing and employment.

Utilization targets: 13 TPC, 12 NTPC

Utilization actual: 6 TPC, 5 NTPC, 154 SC, 14 CSE

DREAAM House

DREAAM \$80,000

DREAAM is a prevention and early intervention program for boys aimed at cultivating academic excellence and social emotional health. Designed to increase positive outcomes (academic achievement, self-efficacy, social mobility) and decrease negative outcomes (suspensions, low educational performance, violence). Evidence-informed components: 1) day-long summer program, 2) 5-day week, after-school program, 3) school-based mentoring, 4) Saturday athletic activities, and 5) family engagement and training. Embedded in each component

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is social emotional learning and behavioral health instruction to foster transfer of skills from DREAM House to school to home.

Utilization actual: 65 TPC, 100 NTPC, 215 SC, 25 CSE

Utilization actual: 80 TPC, 111 NTPC, 208 SC, 28 CSE

Don Moyer Boys & Girls Club

CU Change \$100,000

The program seeks to impact under-resourced youth with potential for high school graduation by providing group and individual support, counseling, life skills training, and exposure to positive cultural and healthy life choices.

Emphasizes academic support, community engagement, interactive, hands on learning experiences and exposure to positive life alternatives. Assists youth with navigating obstacles to success in the school environment, increasing positive peer and community involvement and developing a positive future plan.

Utilization targets: 50 TPC, 42 NTPC, 550 SC, 150 CSE

Utilization actual: 56 TPC, 34 NTPC, 175 SC, 66 CSE

Don Moyer Boys & Girls Club

CU Neighborhood Champions \$110,195

An initiative designed to increase community understanding of trauma and expand community capacity to implement trauma-informed practices and procedures. Goals are: addressing the needs of those impacted by trauma and violence and creating more supportive and healed communities. Accomplished through training community members, focusing on youth leaders and elder helpers, and educating the community about trauma and trauma-informed care to support the creation of community-based trauma response teams.

Utilization targets: 40 TPC, 35 NTPC, 255 SC, 23 CSE

Utilization actual: 37 TPC, 60 NTPC, 537 SC, 112 CSE

Don Moyer Boys & Girls Club

Community Coalition Summer Initiatives \$107,000

An initiative designed to increase community understanding of trauma and expand community capacity to implement trauma-informed practices and procedures. Goals are: addressing the needs of those impacted by trauma and violence and creating more supportive and healed communities. Accomplished through training community members, focusing on youth leaders and elder helpers, and educating the community about trauma and trauma-informed care to support the creation of community-based trauma response teams.

Utilization targets: 875 NTPC, 17600 SC, 60 CSE, 1000 Other

Utilization actual: 675 NTPC, 20250 SC, 60 CSE, 1000 Other

Don Moyer Boys & Girls Club

Youth and Family Services \$160,000

Family-driven, youth-guided services for and with families and children experiencing mental health and/or emotional challenges. Supports are offered at home, in school, and in the community for optimal recovery. Partnering with

caregivers to provide the best-fit, most comprehensive services and supports possible. Peer-driven support from those with lived experiences and challenges, educational opportunities to make informed decisions, and technical support to help navigate complicated systems for the best possible outcomes for each individual and their family.

Utilization targets: 30 TPC, 70 NTPC, 500 SC, 50 CSE

Utilization actual: 21 TPC, 12 NTPC, 552 SC, 32 CSE

Mahomet Area Youth Club

Bulldogs Learn & Succeed Together (BLAST) \$15,000

MAYC's BLAST Programming for students K-12 includes enrichment activities, academic help, and cultural and community-based programming. MAYC partnered with Mahomet Seymour Schools District in this endeavor for several reasons: it allows the use of district facilities, providing a safe and structured environment, children participate in activities in their own school community, additional contact with teachers, school staff, social workers, and guidance counselors, specialized learning spaces (including computer labs, gyms, music and art rooms), access to a variety of caring community volunteers, and most importantly, an inclusive environment that brings students from all economic backgrounds together. Open to all students but targeting low income and/or struggling students, making the program available at no cost.

Utilization targets: 4 TPC, 116 NTPC, 2500 SC, 1000 CSE

Utilization actual: 33 TPC, 125 NTPC, 2216 SC, 1040 CSE

Mahomet Area Youth Club

MAYC Members Matter! \$18,000

Program for students K-12 includes enrichment activities, academic help, and cultural and community-based programming. Partnered with Mahomet Seymour Schools to allow for the use of district facilities, provide a safe and structured environment, participation in activities in school community, additional contact with teachers, school staff, social workers, and guidance counselors, specialized learning spaces, access to caring community volunteers, and an inclusive environment bringing students from all economic backgrounds together.

Utilization targets: 5 TPC, 130 NTPC, 2000 SC, 200 CSE

Utilization actual: 10 TPC, 163 NTPC, 1737 SC, 146 CSE

NAMI Champaign County

NAMI Champaign County (NEW) \$10,000

NAMI Champaign County Illinois offers free information and support to people living with mental health problems and their families. NAMI Ending the Silence is an engaging presentation that helps audience members learn about the warning signs of mental health conditions and what steps to take if you or a loved one are showing symptoms of a mental illness. Other program offerings include: NAMI Family-to-Family; NAMI in Our Own Voice (IOOV); and NAMI Family Support Group.

Utilization targets: 45 CSE

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Utilization actual: 54 CSE

Rape Advocacy, Counseling & Education Services

Sexual Violence Prevention Education \$63,000

Rape Advocacy, Counseling & Education Services (RACES) is the only agency charged with providing comprehensive services to victims of sexual assault in Champaign County. Trauma-informed counseling, 24-hour crisis hotline, and in-person advocacy at hospital Emergency Departments and at meetings with law enforcement or Courthouse. Also offers prevention education to thousands of local children and adults per year and conducts community events to further the aim to create a world free of sexual violence.

Utilization targets: 1500 (# attending) SC, 200 CSE, 40 Other (media contacts)

Utilization actual: 4242 (# attending) SC, 624 CSE, 19 Other

Rosecrance Central Illinois

Prevention Services \$60,000

An evidence-based life skills and drug education curriculum for Champaign County students. Programs available for preschool through high school. Sessions on health risks associated with the use of alcohol, tobacco and other drugs. Life skills sessions may include instruction on and discussion of refusal skills, self-esteem, communicating with parents, and related social issues. Prevention team are active members of several anti-drug and anti-violence community-wide coalitions working to reduce youth substance abuse.

Utilization targets: 975 CSE

Utilization actual: 1021 CSE

UP Center of Champaign County

Children, Youth & Families Program \$31,768

Program serves LGBTQ adolescents aged 11-18; LGBTQ families; and children dealing with issues related to the stigmatization of their gender and sexual identifications and identities. Services include provision of social-emotional supports, non-clinical crisis intervention, case management referrals, risk reduction strategies, strengths development, community-building events, and management of adult volunteers within this program. Program provides a weekly adolescent non-clinical support group.

Utilization targets: 3 TPC, 30 NTPC, 60 SC, 40 CSE

Utilization actual: 0 TPC, 51 NTPC, 162 SC, 100 CSE

Urbana Neighborhood Connections

Community Study Center \$25,500

Empowerment zone which youth benefit from productive year-round academic, recreational, and social-emotional supplements. Point of contact for information, linkage and referral to community resources. Study Center provides opportunity to engage school aged youth in non-traditional, practical intervention and prevention approaches for addressing difficulties. In individual and group

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activities facilitated/supervised by program staff and volunteers, participants can process feelings in a secure and supportive environment.

Utilization targets: 150 NTPC

Utilization actual: 158 NTPC

Priority: Behavioral Health Supports for People with Justice Involvement

Champaign County Health Care Consumers

Justice Involved CHW Services & Benefits (NEW) \$54,775

Community Health Worker services (as below), for people at the Champaign County jail. Services are offered on-site, to improve access to care upon discharge/release. Provider also coordinates with related programs and coalitions, toward improved response for those in crisis or incarcerated.

Utilization targets: 140 TPC, 20 NTPC, 350 SC, 6 CSE, 30 Other (Rx fund)

Utilization actual: 58 TPC, 11 NTPC, 142 SC, 20 CSE, 3 Other (Rx fund)

Champaign County Regional Planning Commission – Community Services

Justice Diversion Program \$75,308

The Justice Diversion Program is the primary connection point for case management and services for persons who have Rantoul Police Department Crisis Intervention Team (CIT) and/or domestic contacts, offering case management with a goal to reduce criminal recidivism and help clients develop and implement plans to become successful and productive members of the community, offering law enforcement an alternative to formal processing. The JDP develops additional community resources and access to services in Rantoul.

Utilization targets: 50 TPC, 70 NTPC, 250 SC, 24 CSE

Utilization actual: 9 TPC, 53 NTPC, 143 SC, 16 CSE

Champaign County Regional Planning Commission – Community Services

Youth Assessment Center (YAC) \$76,350

The YAC screens youth for risk factors and links youth/families to support and restorative community services. The YAC provides an alternative to prosecution for youth involved in delinquent activity. Case managers, using Trauma Informed Care and BARJ principles, screen juvenile offenders referred to our program to identify issues that might have influenced the offense and link youth to services to address the identified issues. Focused on helping youth be resilient, resourceful, responsible and contributing members of society.

Utilization targets: 63 TPC, 20 NTPC, 50 SC, 60 CSE, 60 Other (1st time refer)

Utilization actual: 35 TPC, 1 NTPC, 31 SC, 29 CSE, 61 Other (1st time referral)

Family Service of Champaign County

Counseling \$30,000

Affordable, accessible counseling services to families, couples and people of all ages. Clients are given tools and supports to successfully deal with life

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challenges such as divorce, marital and parent/child conflict, depression, anxiety, abuse, substance abuse/dependency and trauma. Strength-based, client driven services utilize family and other natural support systems and are respectful of the client's values, beliefs, traditions, customs and personal preferences.

Utilization targets: 35 TPC, 30 NTPC

Utilization actual: 38 TPC, 24 NTPC

First Followers

Peer Mentoring for Re-entry \$95,000

Mission is to build strong and peaceful communities by providing support and guidance to the formerly incarcerated, their loved ones, and the community. Offers assistance in job searches, accessing housing and identification as well as emotional support to assist people during the transition from incarceration to the community. In addition, we carry out advocacy work aimed at reducing the stigma associated with felony convictions and attempt to open doors of opportunity for those with a criminal background.

Utilization targets: 42 TPC, 240 NTPC, 45 SC, 10 CSE

Utilization actual: 37 TPC, 45 NTPC, 23 SC, 9 CSE

Rosecrance Central Illinois

Criminal Justice PSC \$304,350

Individuals at the Champaign County Jail receive screening and, as appropriate, mental health assessment, substance abuse assessment, counseling, case management, individual and/or intensive outpatient substance abuse treatment, and linkage to additional supports as needed in the community.

Utilization targets: 150 TPC, 265 NTPC

Utilization actual: 70 TPC, 143 NTPC, 535 SC, 128 Other (group sessions)

Rosecrance Central Illinois

Fresh Start \$79,310

Aimed at addressing the root cause of the violence, customized for our community in coordination with the Champaign Community Coalition's Fresh Start Initiative, involving a 3-pillar approach – Community, Law Enforcement, and a Case Manager. Identifies and focuses on individuals with history of violent, gun-related behaviors. Participants are offered an alternative to violence, with intensive case management, assistance accessing services (such as medical, dental, behavioral health) to address immediate personal or family issues and to overcome barriers to employment, housing, education.

Utilization targets: 23 TPC, 10 NTPC, 10 SC, 120 CSE, 40 Other

Utilization actual: 16 TPC, 14 NTPC, 10 SC, 261 CSE, 43 Other

Rosecrance Central Illinois

Specialty Courts \$203,000

People sentenced to Champaign County Drug Court receive substance use disorder assessment, individualized treatment planning, individual counseling sessions, and a wide array of education and therapeutic groups. Case manager

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provides intensive case management to connect the clients to overcome barriers to treatment, such as access to food, clothing, medical and dental services, mental health treatment, employment, housing, education, transportation, and childcare.

Utilization targets: 80 TPC, 1600 SC, 5 CSE, Other 300 hours case management, 1200 hours counseling. "Other" represents services funded by other sources leveraged through CCMHB support for non-billable activities crucial to the operation of the Specialty Court.

Utilization actual: 51 TPC, 1467 SC, 3 CSE, Other 35 hours assessment, 962.64 hours case management, 4784.91 hours counseling.

Priority: Innovative Practices and Access to Community Based Behavioral Health Services

Champaign County Christian Health Center

Mental Health Care at CCCHC (NEW) \$13,000

CCCHC patients may receive mental health screenings, primary care, prescriptions, and referrals to specialized care as needed. Any uninsured and underinsured resident of Champaign County, typically between the ages of 18 and 64, is eligible. Primary care providers treat or refer those with MH conditions, especially anxiety and depression. With this grant CCCHC will recruit new psychiatrists, psychologists, and counselors to provide direct MH care, greatly enhancing community resources. Recruiting strategies: contacting hospitals and health care facilities to promote CCCHC; targeting organizations that have potential MH volunteers; and connecting with a psychiatrist who runs a residency program to bring services to CCCHC patients.

Utilization targets: 80 TPC, 50 NTPC, 6 CSE

Utilization actual: 127 TPC, 0 NTPC, 1 CSE

Champaign County Health Care Consumers

CHW Outreach & Benefit Enrollment (NEW) \$59,300

Enrollment in health insurance and other public benefit programs; help with maintenance of benefits; case management; education and outreach. Enrollment in Medicaid, Medicaid Managed Care, private plans through ACA Marketplace, Medicare for those eligible by virtue of age or disability, Medicare Extra Help, Medicare Savings Program to reduce the out of pocket costs, hospital/clinic financial assistance programs. Help applying for Promise Healthcare's sliding scale and completing the new patient packet. In-house Rx Fund for low-income individuals, enrollment in pharmaceutical assistance programs, SNAP and SafeLink phone program. Access to affordable dental and vision care. Case-management, referrals and advocacy to access other benefits and social services.

Utilization targets: 275 TPC, 45 NTPC, 650 SC, 7 CSE, 40 Other (Rx fund)

Utilization actual: 90 TPC, 44 NTPC, 596 SC, 38 CSE, 24 Other (Rx fund)

Champaign County Regional Planning Commission – Community Services
Homeless Services System Coordination (NEW) \$51,906

Homeless Services System Coordination program supports a position to: support, facilitate, and direct the IL-503 Continuum of Care (CoC); to support the body's mission to end homelessness in Champaign County through a coordinated network of resources for those who are homeless or at-risk of becoming homeless; coordinate efforts across the CoC membership to support its goals and the Homeless Emergency and Rapid Transition to Housing (HEARTH) Act regulations; and build and maintain collaborative partnerships with CoC membership and affiliates, working closely with the CoC Executive Committee.

Utilization targets: 15 NTPC, 40 SC, 18 CSE

Utilization actual: 22 NTPC, 53 SC, 27 CSE

Community Service Center of Northern Champaign County
Resource Connection \$67,596

A multi-service program aimed at assisting residents of northern Champaign County with basic needs and connecting them with mental health and other social services. Serves as a satellite site for various human service agencies providing mental health, physical health, energy assistance, and related social services. Features an emergency food pantry, prescription assistance, clothing and shelter coordination, and similar services for over 1,700 households in northern Champaign County.

Utilization targets: 1400 NTPC, 5900 SC, 2850 Other (contacts with other agencies using CSCNCC as a satellite site)

Utilization actual: 1309 NTPC, 4031 SC, 1886 Other

Cunningham Children's Home
ECHO \$95,773

Works closely with individuals who are homeless or at risk of homelessness, through intensive case management and care coordination geared towards promoting permanent housing and employment and resolving barriers. The Case Manager takes a holistic approach to supportive services by countering possible barriers to goal stability (e.g., basic needs, child care, physical health, and mental health). Participants receive weekly services that last until 90 days after obtaining both housing and employment.

Utilization targets: 24 TPC, 20 NTPC, 876 SC, 24 CSE

Utilization actual: 25 TPC, 5 NTPC, 980 SC, 46 CSE

East Central IL Refugee Mutual Assistance Center
Family Support and Strengthening \$56,440

Supports and strengthens refugee and immigrant families transitioning and adjusting to American culture and expectations. Provides orientation, information/referral, counseling, translation/interpretation services, culturally

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appropriate educational workshops, and help accessing entitlement programs. Bi-monthly newsletter and assistance to refugee/immigrant mutual support groups. Staff speaks nine languages and accesses community volunteers to communicate with clients in languages not on staff.

Utilization targets: 75 CSE, 30 Other (hours of workshops)

Utilization actual: 111 CSE, 17.5 Other

Family Service of Champaign County

Self-Help Center \$28,430

Information about and referral to local support groups. Provides assistance to develop new support groups and maintaining and strengthening existing groups. Program maintains a database of Champaign County support groups, national groups, and groups in formation. Information is available online and in printed directory and specialized support group listings. Provides consultation services, workshops, conferences, educational packets and maintains a lending library of resource materials.

Utilization target: 270 CSE

Utilization actual: 271 CSE

Family Service of Champaign County

Senior Counseling & Advocacy \$162,350

For Champaign County seniors and their families. Services are provided in the home or in the community. Caseworkers assist with needs and challenges faced by seniors, including grief, anxiety, depression, isolation, other mental health issues, family concerns, neglect, abuse, exploitation and need for services or benefits acquisition. Assists seniors providing care for adult children with disabilities and adults with disabilities age 18-59 experiencing abuse, neglect or financial exploitation.

Utilization targets: 285 TPC, 550 NTPC, 7500 SC

Utilization actual: 418 TPC, 531 NTPC, 1937 SC

GROW in Illinois

Peer Support \$77,239

Mutual-help; peer to peer 12-step program provides weekly support groups for mental health sufferers of all races and genders. GROW compliments the work of professional providers by connecting people with others in similar situations and empowering participants to do that part which they can and must be doing for themselves and with one another. While professional providers offer diagnosis and treatment, consumer-providers offer essential rehabilitation and prevention services because of firsthand experience with the recovery process.

Utilization targets: 110 NTPC, 1000 SC, 4 CSE

Utilization actual: 94 NTPC, 791 SC, 73 CSE

Promise Healthcare

Mental Health Services with Promise \$242,250

Promise Healthcare provides on-site mental health services to achieve the integration of medical and behavioral health care as supported by both the

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National Council for Community Behavioral Healthcare and the National Association of Community Health Centers. Mental health and medical providers collaborate, make referrals, and even walk a patient down the hall to meet with a therapist. Patients receive mental illness treatment through counselor, psychiatrist or primary care provider. Includes child and adolescent psychiatric services (fall 2019 only).

Utilization targets: Counseling Services: 370 TPC, 2000 SC. Psychiatric Services: 1600 in psychiatric practice, 850 getting psych meds through primary care, 7500 psychiatric service encounters, 10 lunch and learn sessions. Pediatric Psychiatric Services: 200 SC and 70 TPC

Utilization actual: Counseling Services: 334 TPC, 1814 SC. Psychiatric Services: 1829 in psychiatric practice, 1097 getting psych meds through primary care, 8914 psychiatric service encounters, 3 lunch and learn sessions. Pediatric Psychiatric Services: 122 SC and 39 TPC

Promise Healthcare

Promise Healthcare Wellness \$58,000

Provides support, case management, and benefit enrollment for patients with non-clinical barriers to achieving optimum medical and mental health. Targets hundreds of patients who have a mental health diagnosis and a chronic medical condition and those at risk of or who have had a justice system encounter. Coordinators work with patients to remove barriers to optimum medical and mental health. Facilitates care at satellite location, and supports collaborations with other agencies, and community outreach.

Utilization actual: 150 TPC, 150 NTPC, 600 SC, 27 CSE, 2000 Other (enrolled in healthcare coverage)

Utilization actual: 202 TPC, 250 NTPC, 1337 SC, 21 CSE, 1456 Other

Rattle the Stars

Youth Suicide Prevention Education \$55,000

Designed to build skills and improve competence to encourage intervention between peers, and by parents and adults. Covering three core areas for intervention: what to look for to recognize mental illness, mental health crises, and suicidal thoughts; how to intervene by using appropriate and effective communication skills; and accessing necessary resources for professional care. Program is developed from evidence informed models and adheres to best practices suggested by nationally recognized mental health and suicide prevention agencies.

Utilization targets: 150 CSE

Utilization actual: 74 CSE

Rosecrance Central Illinois

Crisis, Access, & Benefits \$203,960

A 24-hour program including Crisis Team and Crisis Line. Clinicians provide immediate intervention by responding to crisis line calls and conducting crisis assessments throughout Champaign County. The Crisis Team works closely with

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hospitals, local police, the University, and other local social service programs. Offers access services including information, triage, screening, assessment, and referral for consumers and members of the community.

Utilization targets: 500 NTPC (intake screening or mental health assessments), 3000 SC (crisis calls), 15 CSE, Other = 150 benefits applications

Utilization actual: 536 NTPC (intake screening or mental health assessments), 2857 SC (crisis calls), 24 CSE, Other = 160 benefits applications. Program also reports 1129 Crisis team contacts (not a subset of crisis calls) and 1119 mental health assessments by Crisis team.

Rosecrance Central Illinois

Recovery Home \$200,000

Therapeutic interventions that facilitate: removal of barriers for safe/supportive housing; 12-Step support involvement; independent living skills; education/vocational skills; identification and use of natural supports; use of community resources; and peer support. Evidence based practices to be used include: 12-Step model and peer support; Level system; Case Management; and Contingency management initiatives.

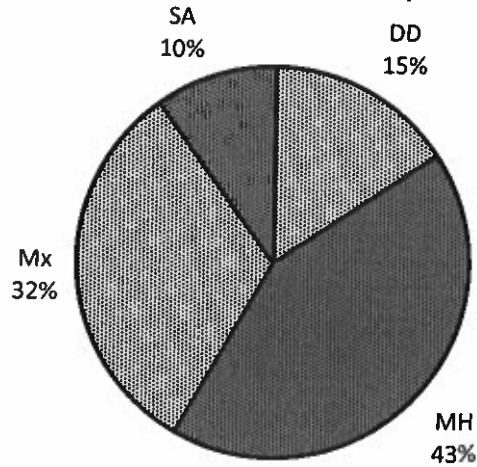
Utilization targets: 45 TPC, 56 SC

Utilization actual: 23 TPC, 84 SC

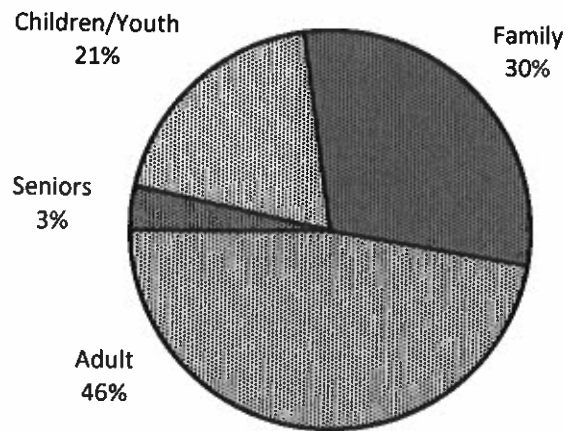
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Funding by Sector, Population, and Service in Program Year 2020 (PY20)

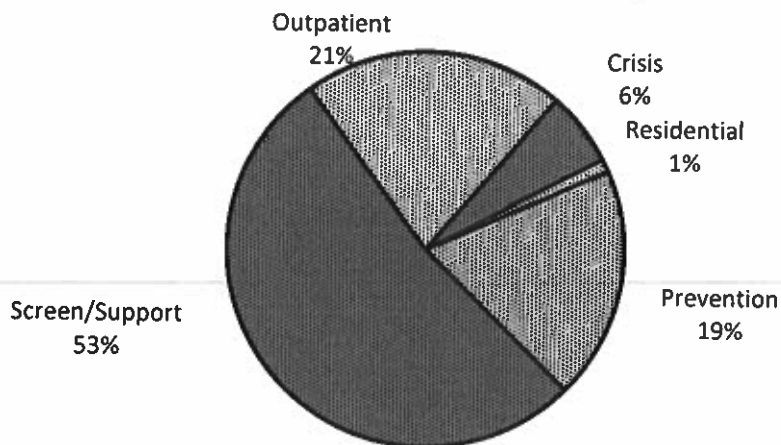
CCMHB PY20 Appropriation by Community Mental Health Sector



CCMHB PY20 Appropriation by Target Population



CCMHB PY20 Appropriation by Type of Service

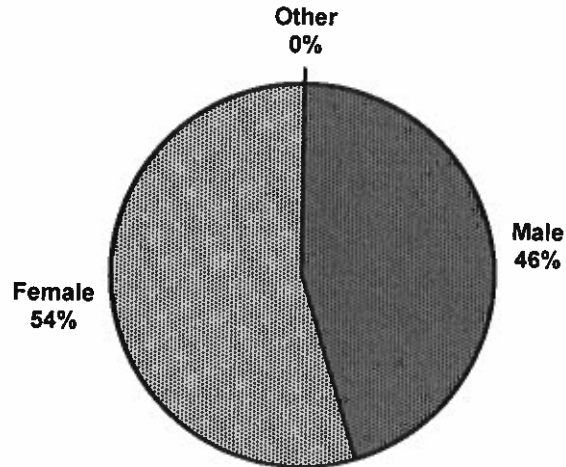


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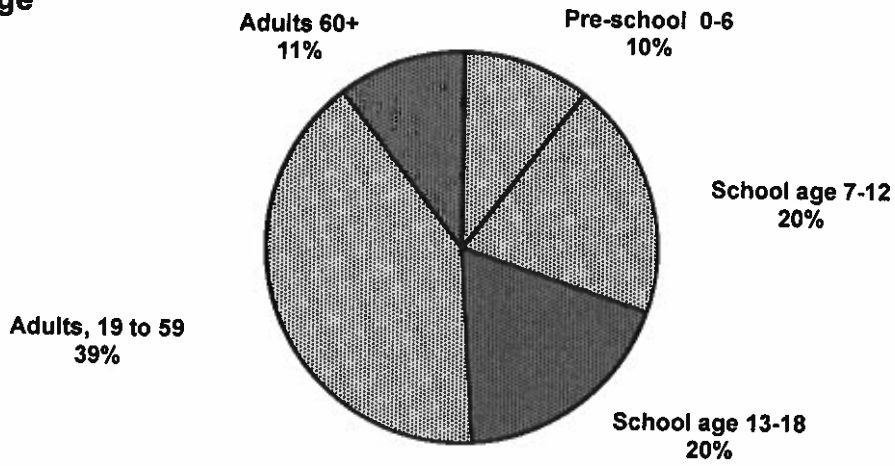
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Demographic and Residency Data for Persons Served in Program Year 2020

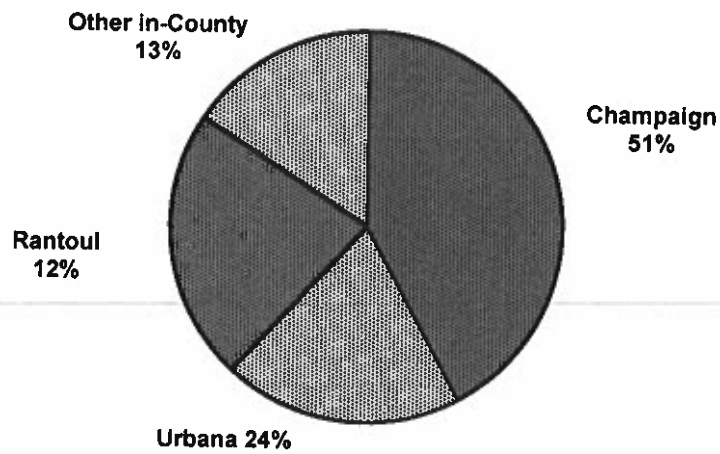
Gender



Age



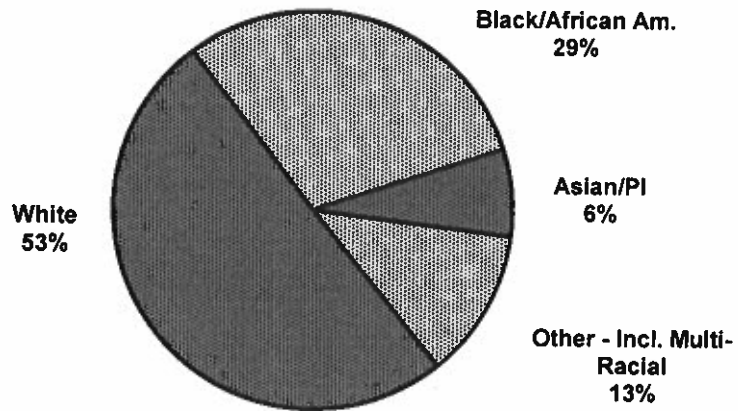
Residency



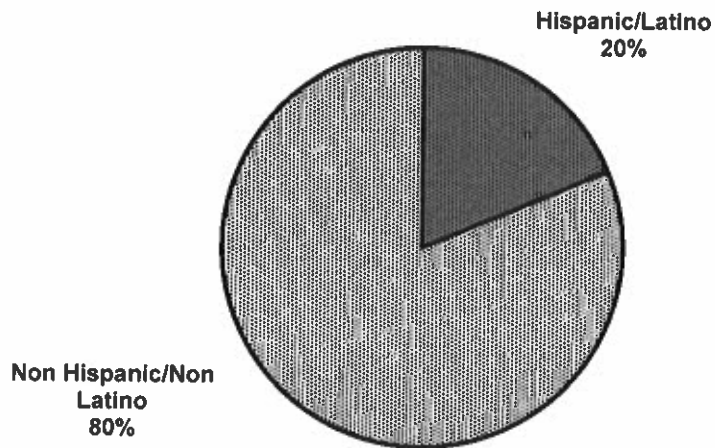
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Demographic and Residency Data for Persons Served in Program Year 2020

Race



Ethnic Origin



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**SECTION II: Three-Year Plan 2019-2021
with FY 2021 One-Year Objectives**

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**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
THREE-YEAR PLAN
FOR**

**FISCAL YEARS 2019 - 2021
(1/1/19 – 12/31/2021)**

**WITH
ONE YEAR OBJECTIVES
FOR**

**FISCAL YEAR 2021
(1/1/21 – 12/31/21)**

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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, persons with a developmental disability or substance use disorder, for residents thereof and/or to contract therefor..."

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 use 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 and developmental disabilities, and substance use disorder 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 improve the quality of life experienced by individuals with mental or emotional disorders, substance use disorders, or intellectual and/or developmental disabilities and their families residing in Champaign County.

Objective #1: Expand use of evidence-informed, evidence-based, best practice, recommended, 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. (Allocation Priority/Criteria Objective)

Objective #2: Promote wellness for people with mental illnesses, substance use disorders, or intellectual and/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. (Allocation Priority/Criteria Objective)

Objective #3: Support development or expansion of residential and employment supports for persons with behavioral health diagnosis not covered under expansion of Medicaid or the Affordable Care Act. (Allocation Priority/Criteria Objective)

Objective #4: Support broad based community efforts to prevent opiate overdoses and expand treatment options. (Allocation Priority/Criteria Objective)

Objective #5: Build resiliency and support recovery e.g. Peer Supports, outside of a clinical setting. (Allocation Priority/Criteria Objective)

Objective #6: Build evaluation capacity of contracted providers utilizing expertise of evaluators from the Department of Psychology at the University of Illinois to further positive outcomes of those engaging in funded services. (Policy Objective)

Objective #7: Increase providers understanding of the value of setting internal goals for advancing program performance outcome evaluation. (Policy Objective)

Objective #8: Support targeted efforts for workforce recruitment and retention initiatives, such as scholarships, loan repayment, and assistance with professional licensure fees, with level of assistance linked to length of service commitment. (Allocation Priority/Criteria Objective)

Objective #9: Enable providers to implement flexible responses to operations during the COVID-19 pandemic, such as supporting telehealth or other virtual service options, to maintain access and engagement with clients and community. (Collaboration/Coordination Objective)

Goal #2: Sustain commitment to addressing health disparities experienced by underrepresented and marginalized populations.

Objective #1: Support culturally responsive and family driven support networks for underrepresented populations, underserved populations, and general populations of Champaign County. (Allocation Priority/Criteria Objective)

Objective #2: Provide technical assistance in support of continuous improvement of cultural and linguistic competence plans to meet the needs of the population served. (Collaboration/Coordination Objective)

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

Objective #4: Where families and communities are disproportionately impacted by incarceration, encourage the development of social networks and improved access to resources. (Policy Objective)

Objective #5: Address the needs of residents of rural areas and encourage greater engagement by community-based organizations. (Policy Objective)

Objective #6: Review data on the impact of COVID-19 on Champaign County residents with particular attention to underserved populations and promote provider response to mitigate the adverse impact, as resources allow. (Collaboration/Coordination Objective)

Goal #3: Improve consumer access to and engagement in services.

Objective #1: Participate in various coordinating councils whose missions align with the needs of the populations of interest to the Board with the intent of strengthening coordination between providers in the delivery of services. (Collaboration/Coordination Objective)

Objective #2: 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. (Collaboration/Coordination Objective)

Objective #3: Engage with CUPHD, United Way, Carle Foundation Hospital, and OSF in the collaborative planning process for the next Community Health Improvement Plan. (Collaboration/Coordination Objective)

Objective #4: Increase awareness of community services and access to information on when, where, and how to apply for services. (Collaboration/Coordination Objective)

Objective #5: Explore feasibility of co-locating services in neighborhood community centers to reach underserved and underrepresented populations, including rural areas. (Collaboration/Coordination Objective)

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

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

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

Objective #3: With the CCDDDB, continue financial commitment to community-based housing for people with I/DD from Champaign County and as part of that sustained commitment, review the Community Integrated Living Arrangement (CILA) fund and recommend any changes. (Allocation Priority/Criteria Objective)

Objective #4: Collaborate with the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability on promoting inclusion and respect for people with I/DD. (Collaboration/Coordination Objective)

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), sustain the SAMHSA/IDHS system of care model.

Objective #1: Support the efforts of the Champaign Community Coalition and other system of care initiatives. (Collaboration/Coordination Objective)

Objective #2: Sustain support of Champaign County family-run organizations that incorporate family-driven and youth-guided principles in use of peer support specialists, and other peer-to-peer supports to assist multi-system involved youth and their families (Allocation Priority/Criteria Objective)

Objective #3: Support development of a coordinated response to community violence, including gun violence, that leverages existing investments by the Board in prevention and early intervention services for children, youth, and families, with funds from other funders to mitigate the public health crisis associated with community violence and in particular gun violence. (Policy Objective)

Objective #4: Promote and support those targeted interventions that specifically address historical trauma experienced by African American and other minority youth disproportionately impacted in multiple systems. (Allocation Priority/Criteria Objective)

Objective #5: Sustain commitment to building systems that are trauma-informed, justice informed, family-driven, youth-guided, and culturally responsive. (Policy Objective)

Objective #6: Recognizing alignment with the work of the Community Coalition, Support the goals and objectives of the Illinois Criminal Justice Information Authority "Illinois HEALS (Helping Everyone Access Linked Systems) Action Plan" and support broad based efforts to secure funding as available through Illinois HEALS. (Collaboration/Coordination Objective)

Objective #7: Review research on racial trauma as a mental health issue and develop an appropriate response. (Policy Objective)

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CRIMINAL JUSTICE AND MENTAL HEALTH SYSTEM COLLABORATION

Goal #6: Divert from the criminal justice system, as appropriate, persons with behavioral health needs or intellectual/developmental disabilities.

Objective #1: Continue involvement in the Crisis Intervention Team Steering Committee in support of increased collaboration between law enforcement and crisis service providers on implementing mobile crisis response in the community. (Collaboration/Coordination Objective)

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 such as the Champaign County Problem Solving Court and reentry services. (Allocation Priority/Criteria Objective)

Objective #3: Support integrated planning and service coordination for adults involved in the criminal justice system through participation in the Champaign County Reentry Council or similar body to address needs identified in the Sequential Intercept Map gaps analysis. (Collaboration/Coordination Objective)

Objective #4: Through the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD), in its partnership with the National Association of Counties (NACo), use and promote technical assistance and support through collaborative and mentorship opportunities aimed at improving outcomes for those with behavioral health needs and justice system involvement. (Collaboration/Coordination Objective)

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

Objective #1: Support initiatives providing housing and employment supports for persons with a mental illness, substance use disorder, and/or intellectual and developmental disabilities through the Champaign County Continuum of Care or other local collaboration. (Allocation Priority/Criteria Objective)

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

Objective #3: Support the "One Door" initiative or similar service design for mobile crisis response, assessment, referral, and post-crisis support and engagement. (Allocation Priority/Criteria Objective, Collaboration/Coordination Objective)

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: Through participation on the Youth Assessment Center Advisory Board, advocate for community and education-based interventions contributing to positive youth development and decision-making. (Collaboration/Coordination Objective)

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Objective #2: Through participation and engagement in the Champaign Community Coalition and other community focused initiatives, promote and encourage multi-system collaborative approaches for prevention and reduction of youth violence. (Collaboration/Coordination Objective)

Objective #3: Utilize the principles from "Models for Change" to reduce the disproportionate minority contact with law-enforcement and involvement with the juvenile justice system. (Policy Objective)

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 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 promote inclusion and challenge stigma and discrimination, such as the disABILITY Resource Expo: Reaching Out for Answers, Ebertfest, National Children's Mental Health Awareness Day, and other related community education events. (Collaboration/Coordination Objective)

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

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. (Collaboration/Coordination Objective)

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

Objective #5: Support Mental Health First Aid for Adults and Youth to encourage community members to provide first responder support for people that may be experiencing signs and symptoms of a crisis. (Collaboration/Coordination Objective)

Objective #6: Support development of web-based resources to make information on community services more accessible and user-friendly.

Goal #10: Engage with other local, state, and federal stakeholders on emerging issues.

Objective #1: Monitor implementation of State Plan amendments, 1115 waiver pilot projects, and Managed Care by the State of Illinois, and advocate through active participation in the Association of Community Mental Health Authorities of Illinois (ACMHA) and other statewide associations and advocacy groups. (Collaboration/Coordination Objective)

Objective #2: Track state implementation of class action suit settlements involving persons with intellectual and/or developmental disabilities or mental illness, e.g. Ligas Consent Decree and Williams Consent Decree, and

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advocate for the allocation of state resources sufficient to meet needs of clients returning to home communities or seeking fuller integration in their communities. (Policy Objective)

Objective #3: Maintain active participation in the National Association of County Behavioral Health and Developmental Disability Directors (NACHBDD), National Association of Counties (NACo), and like-minded national organizations, to understand trends, best practices, and innovations and to advocate at the federal level. (Collaboration/Coordination Objective)

Objective #4: Monitor State actions to implement terms of the NB vs Norwood Consent Decree to improve access and treatment to children and youth for community based mental health and behavioral health care under the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) provisions of the Medicaid Act. (Policy Objective)

Objective #5: Advocate at the state and federal level on the issue of behavioral health and intellectual and developmental disability workforce shortages. (Policy Objective)

Approved November 18, 2020

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J.D.

Champaign County Mental Health Board: A Review of Needs & 2010-2019 Data

Report prepared by Dr. Rachel Garthe
& Fall 2020 Social Work Research Methods (SOCW427) Students



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Background: The Champaign County Mental Health Board (CCMHB) was connected with Dr. Garthe's Social Work Research Methods course by the Community Learning Lab at the School of Social Work (University of Illinois at Urbana-Champaign). During the fall semester of 2020, Dr. Garthe's 17 students assisted with the analysis of CCMHB data from 2010 to 2019. Additionally, they completed a brief needs assessment of mental health in Champaign County. Their findings are listed in this report.

A special thanks to Lynn Canfield & Mark Driscoll who met with Dr. Garthe and her students to discuss and refine these data and this report.

SOCW 427C Fall 2020 students:

1. Connor Burch
2. Victoria Cisneros
3. Lucero Gonzalez
4. Liz Guenther
5. Rachel Kaufman
6. Michael Kosinski
7. Kalyn Kupcik
8. Jake Majernik
9. Mariah Maldonado
10. David Martinez
11. David Mowry
12. Sabrina O'Connor
13. Ashley Reubling
14. Jazmine Saavedra
15. Natalia Villa
16. Maddie Welsh
17. Amanda Yeazel

Suggested citation:

Garthe, R.C., & Fall 2020 Social Work Research Methods (SOCW427) students (2020, December). Champaign County Mental Health Board: A review of needs & 2010-2019 data. *University of Illinois at Urbana-Champaign School of Social Work*.

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Part I: Champaign County Population & Mental Health Needs

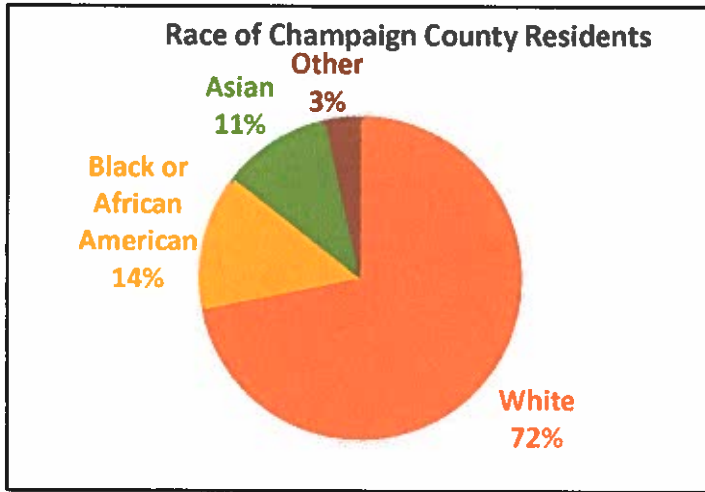
Champaign County Population

According to the U.S. Census in 2019¹, there were an estimated 209,689 people living in Champaign County (which reflects a 4.3% increase since 2010). Approximately 19% of these people were under the age of 18.

The race of Champaign County residents is listed in the figure (72% White, 14% Black or African American). About 6% of the county reported a Hispanic or Latino/Latina/Latinx ethnicity.

Finally, about 19% of the county is in poverty, which is higher than the United States population (10.5% in poverty).

Within Champaign County, the three largest cities or villages include the cities of Champaign and Urbana, and the village of Rantoul. Select Census information was pulled for these three cities/villages:



88,909 people in Champaign
(9.4% increase since 2010)
16.7% under the age of 18

**City of Champaign:
Race of Residents**

6.2% Hispanic/Latinx
26.3% in poverty

42,214 people in Urbana
(0.2% increase since 2010)
11.5% under the age of 18

**City of Urbana:
Race of Residents**

6.4% Hispanic/Latinx
30.8% in poverty

12,493 people in Rantoul
(-3.6% decrease since 2010)
31.5% under the age of 18

**Village of Rantoul:
Race of Residents**

11.1% Hispanic/Latinx
20% in poverty

¹<https://www.census.gov/quickfacts/fact/table/rantoulvillageillinois,urbanacityillinois,champaigncityillinois,champaigncountyillinois,US/PST045219>

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Mental Health Needs

An estimated one in five adults in the United States have a diagnosable mental health condition, which equates to roughly 44 million people.² However, slightly over half (56%) of these adults are not receiving any type of mental health treatment. Similar rates are seen in Illinois:

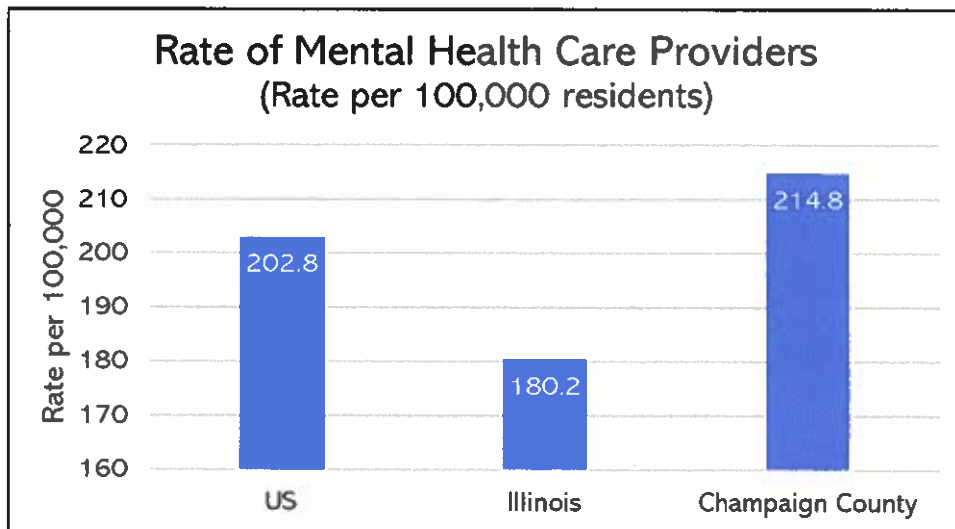
In Illinois: about 18.06% of adults have a mental health condition

About 1 in 4 Illinois adults are unable to receive treatment needed

Adults may not seek mental health treatment for one or more of these reasons: 1) no insurance, 2) lack of insurance coverage, 3) lack of mental health care providers and services, 4) lack of available treatment options, 5) disconnect between healthcare systems, 6) insufficient finances, 7) Other reasons.²

Champaign County has a higher rate of mental health care providers (per 100,000 residents) compared to the U.S. and to the state.²

However, in a 2017 Community Health Plan, 51% of the adult sample indicated that Champaign County had inadequate or very inadequate mental health services. This plan also illustrated that mental health was a top priority for county residents, across race, ethnicity, and income levels.³



² <https://www.mhanational.org/mentalhealthfacts>

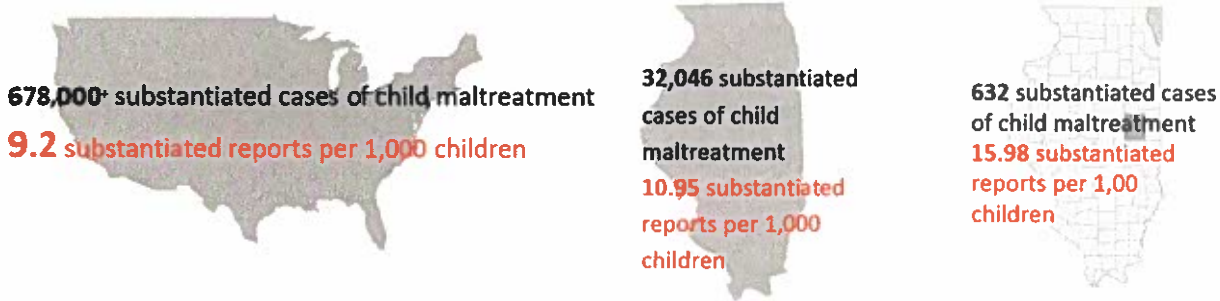
³ https://www.osfhealthcare.org/media/filer_public/7f/62/7f62e38f-7dda-430c-8fa8-3c4299227727/2017_champaign_county_illinois_community_health_plan.pdf

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Additional Information

We also reviewed a recent needs assessment of violence in the county,⁴ given how closely violence exposure and mental health are linked. Some of the key findings from the needs assessment include:

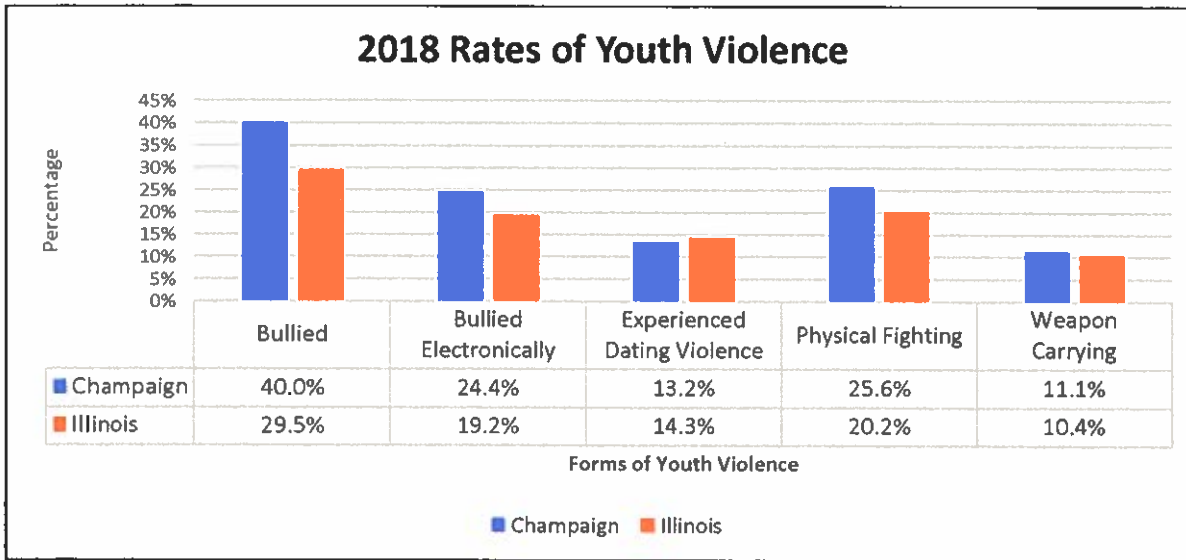
1) Champaign county had a higher rate of substantiated child maltreatment reports compared to the state and national rates.



2) Youth in Champaign county were surveyed in the Illinois Youth Survey in 2018:⁵

- 19.9% of youth indicated serious thoughts of suicide in the past year
- 38.7% indicated depressive feelings
- 11.5% felt unsafe at school

They also reported rates of violence. Champaign county youth reported higher levels of bullying, cyber-bullying, and physical fighting than the state.

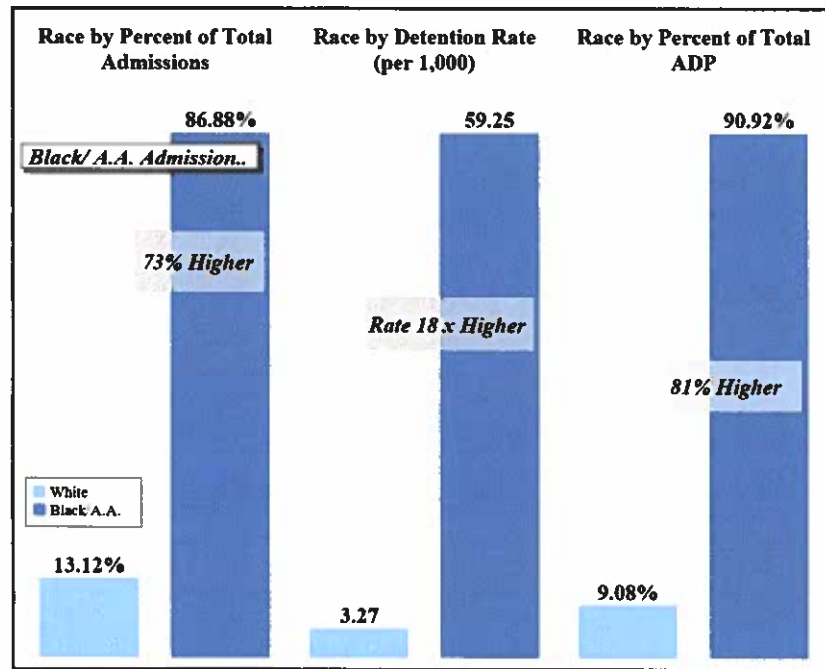


⁴ Garthe & Freeman (2020)

⁵ Illinois Youth Survey: <https://iys.cprd.illinois.edu/>

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3) Finally, significant disparities were found when examining juvenile detention rates for violent offenses. Black and African American youth were detained for violent offenses at a substantially higher rate than White youth.



For a full review of violence and crime data for Champaign county, please email Dr. Garthe: rcgarthe@illinois.edu

These data highlighted that there is a great need for quality mental health services, violence prevention programming, family-based programs, and programming to eliminate racial disparities.

Next, we next examined trends in CCMHB data from 2010-2019. CCMBH aims to address these mental health needs through the variety of programming they fund. We were particularly interested to see if there were any changes to who received services over time. Data analyzed included:

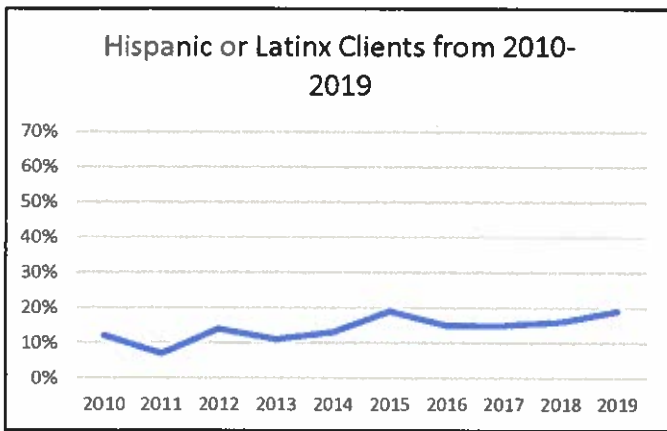
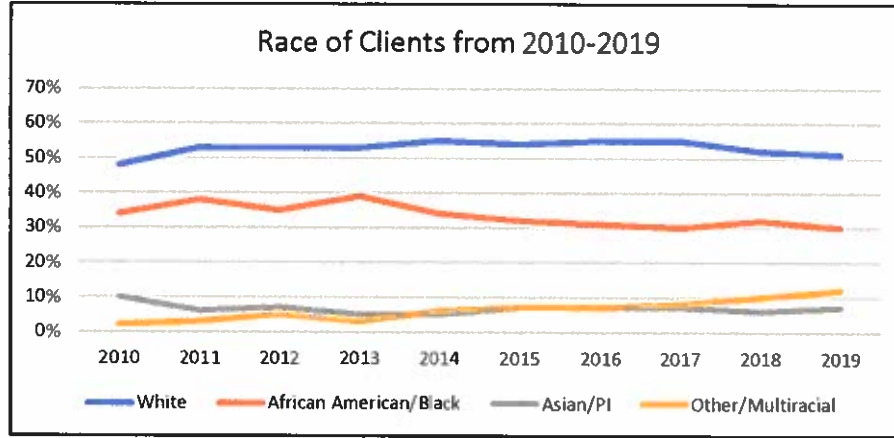
- a) Demographics: who were the populations served through CCMHB funded programs?
- b) What did appropriations look like by sector, type of service, and target populations?
- c) What types of services took place over time?

All descriptive statistic analyses took place using Excel.

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Part II: CCMHB Data 2010-2019

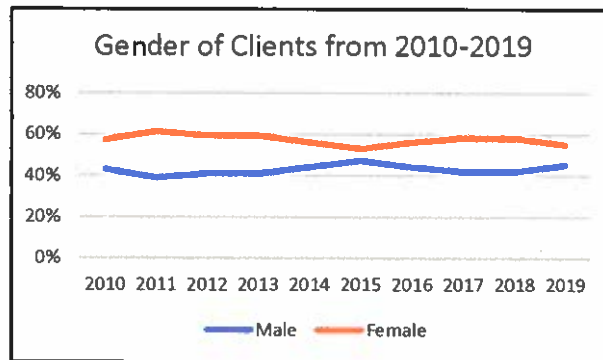
First, we examined the percentage of clients served from 2010 to 2019 in terms of race and ethnicity. The majority of clients served were White, followed by African American or Black clients. About 14% of the county identifies as Black or African American, and between 30-40% of CCMHB services reached this population.



There has been a slight increase in services for Hispanic or Latinx clients. However, these numbers may remain low due to the lack of bilingual or Spanish-speaking mental health professionals.

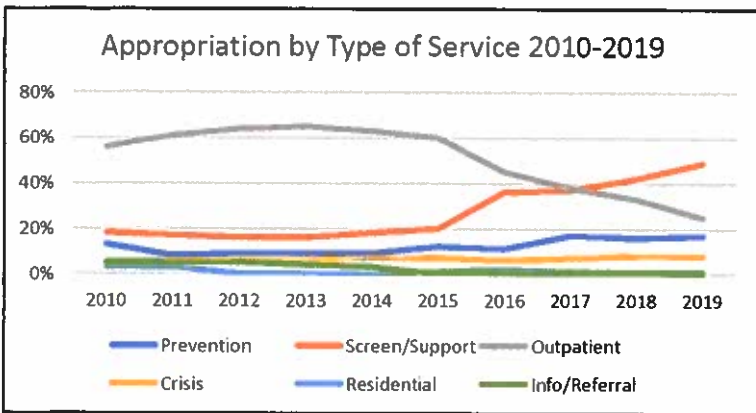
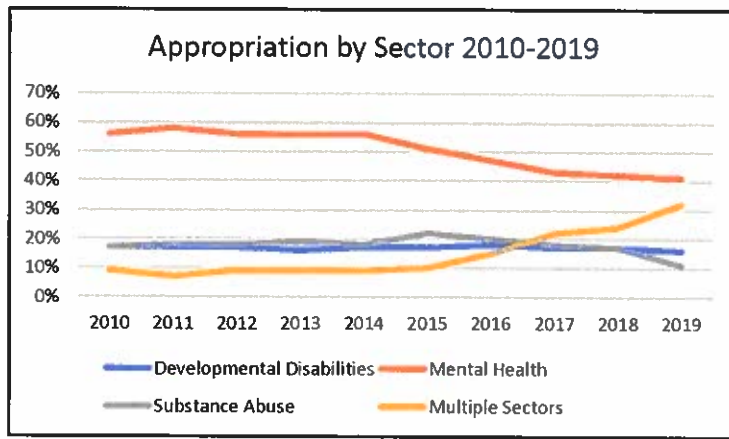
More females than males accessed services in the past 10 years. A good number of programs funded by CCMHB are focused on family services, and often maternal figures are bringing in their children for services.

More recently, agencies have also been providing more gender-diverse self-report options for clients (e.g., transgender, gender nonbinary, etc.). This reporting change has yet to be reflected in the data.



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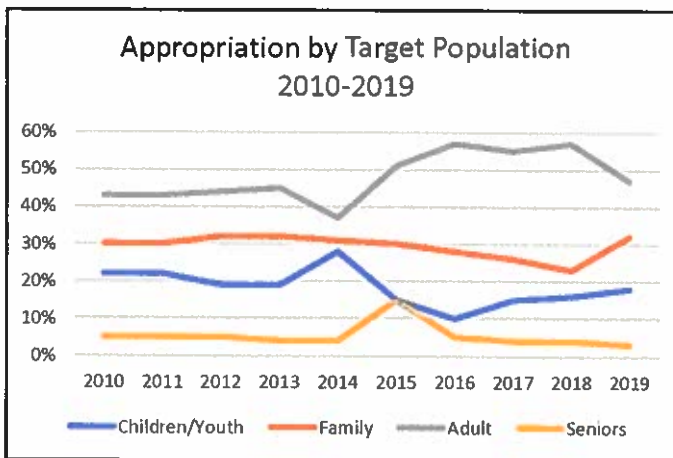
Since 2010, there has been an increase in multiple sectors appropriation. More providers are implementing services that cut across mental health, development, and substance abuse.



As outpatient services as declined since 2015, screening/support services have steadily increased.

There has also been a slight increase in prevention services in recent years.

Most services are for adults, followed by families and children/youth. Seniors receive the fewest services.



Finally, there were about 21 organizations funded by CCMHB per year (which also equates to an average of 41 programs funded each year). The annual reports from 2010-2019 provide information on service hours by type (e.g., community service events, service contacts, and treatment plan and non-treatment plan clients) for each of these programs. In review of these data, many service hours were dedicated to service contacts.

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From this review of the data, Lynn met with the SOCW 427 class to discuss some of these trends. A few of these discussion points included:

- Changes in funding often resulted from state budget changes (e.g., lack of an Illinois budget for 3 year) or policies (e.g., Affordable Care Act).
- Changes also reflect different organizations and programs that apply and are funded each year (e.g., some years only one or two organizations are providing services in a specific area or with a specific population).
- CCMHB priorities have shifted from 2010-2019, which directs how funding is appropriated. For a detailed review, please see the annual reports for priorities.
- Recruitment for programming has expanded throughout the county (beyond the cities of Champaign and Urbana) in the last ten years.

Conclusions

We hope you find this presentation of need and CCMHB data trends informational and useful in shaping future directions. Tremendous work has happened in the country through the CCMHB. Looking forward, we hope to see efforts continuing to fund quality mental health services, while also increasing the number of violence prevention programs, family-based programs, and programming to eliminate racial disparities.

If the board would ever like additional data or analyses conducted, our class would be happy to assist!

Data provided by CCMHB (Lynn Canfield) & Annual Reports (2010-2019)

References:

- Champaign County (2019). Mental Health Board and Board for the Care & Treatment of Persons with a Developmental Disability. <http://co.champaign.il.us/mhbddb/PublicDocuments.php>
- Garthe, R. & Freeman, S. (2020). *Illinois 2020 Statewide Violence Prevention Planning: Champaign County*. Presented at the Champaign County Community Coalition Meeting.
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- OSF Healthcare (2017). Community Health Improvement Plan: 2018-2020 Champaign County Illinois. https://www.osfhealthcare.org/media/filer_public/7f/62/7f62e38f-2dda-430c-8fa8-3c4299227727/2017_champaign_county_illinois_community_health_plan.pdf
- U.S. Census Bureau (2019). Quick Facts for Champaign County. <https://www.census.gov/quickfacts/fact/table/rantoulvillageillinois.urbanacityillinois.champaigncityillinois.champaigncountyillinois.US/PST045219>

J.E.



**401 E. Park St.
P.O. Box 8923
Champaign IL 61826**

Website: www.firsttfollowersreentry.org

Email: firstfollowerscu@gmail.com

March 8, 2021

Dear Lynn,

We thank you very much for giving us this opportunity to present our case for re-consideration of our funding proposal for FY 2022.

First of all, we fully accept the blame for failing to submit an application on time. This letter is not an attempt to make excuses or try to shift the blame for our oversight. We simply didn't pay close enough attention to the proposal deadline. Nonetheless, the impact is devastating-we stand to lose about 30% of our total budget which seriously debilitates two of our key programs: the drop-in center and FirstSteps Transition House. We make this request not because we want you to ignore our mistake but because we feel it is our duty to not create gaps in our services to our constituency.

Over the course of the past five years, FirstFollowers has grown from an idea to a vibrant, unique organization. We recognize and appreciate the role the Mental Health Board has played in supporting that evolution. We are the county's only service provider staffed and led by formerly incarcerated people that is completely dedicated to addressing the challenges faced by people coming back to the community after incarceration. Given the demographics of our membership, staff and our constituency we have also become an important voice for racial justice in this community. We believe that a major reduction in our capacity to operate would be a huge blow to the cause of justice in Champaign County; especially for the Black community.

At the same time, we fully understand and appreciate that the Mental Health Board has developed a structure and set of rules to follow. No agency as important as the MHB can afford to operate in a chaotic manner or in a way that benefits certain organizations or a certain sector of the community at the expense of others.

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All things considered, we humbly ask you to take into account the unique role we play in providing service to a very underserved constituency and to re-consider our funding proposal for FY 2022, either by providing us with an opportunity to submit a late proposal, which will mirror our FY20 & 21 proposals, or by helping us find an alternative path to recoup the funding lost from the absence of MHB support for FY 2022.

We thank you, your staff, and the Board for considering this. We also thank you for all the support you have provided us over the years, and clearly without that support FirstFollowers would not be where it is today.

Sincerely,

Marlon Mitchell

Marlon Mitchell, Executive Director, First Followers

James Kilgore

James Kilgore, Co-Director, FirstFollowers

CCMHB PY2022 (30) APPLICATIONS TO BE REVIEWED				Primary Reviewer	Secondary Reviewer
Agency	Program	Request	Selected Priority		
CCRPC - Community Services	Justice Diversion Program	\$207,948	(old priority)	Elaine	NEW1
	Youth Assessment Center	\$76,350	(old priority)	Elaine	NEW1
Champaign County Children's Advocacy Center	Children's Advocacy	\$56,425	(old priority)	Susan	Elaine
Champaign County Christian Health Center	Mental Health Care at CCCHC	\$33,000	Innovative/Access	Joe	Jane
Champaign County Head Start/Early Head Start	Early Childhood Mental Health Service	\$326,369	System of Care	Jon	Susan
Champaign County Health Care Consumers	CHW Outreach and Benefit Enrollment	\$80,274	Innovative/Access	Julian	NEW2
	Justice Involved CHW Services & Benefits	\$77,394	(old priority)	Kyle	Julian
	Disability Services	\$71,500	NEW - Innovative/Access	Julian	NEW2
Community Svc Center of Northern Champaign County	Resource Connection	\$68,609	Innovative/Access	Jane	NEW2
Crisis Nursery	Beyond Blue-Champaign County	\$90,000	System of Care	Susan	Jon
DREAAM House	DREAAM House	\$100,000	System of Care	Jon	Susan
DSC	Family Development I/DD request	\$596,522	DD - Young Children	Susan	Jon
Don Moyer Boys and Girls Club (DMBGC)	C-U CHANGE	\$100,000	System of Care	Jon	Julian
	CUNC	\$110,000	System of Care	Julian	NEW1
	Community Coalition Summer Initiative	\$107,000	System of Care	Elaine	Kyle
	Youth and Family Services	\$160,000	System of Care	Susan	Julian
East Central IL Refugee Mutual Assistance Center	Family Support & Strengthening	\$62,000	Innovative/Access	Jon	NEW2
Family Service of Champaign County	Counseling	\$30,000	Crisis Response	Jane	Joe
	Self-Help Center	\$28,430	Innovative/Access	Julian	Jane
	Senior Counseling & Advocacy	\$162,350	Innovative/Access	Joe	Jane
Mahomet Area Youth Club	Bulldogs Learning and Succeeding	\$15,000	System of Care	Jon	NEW1
	MAYC Members Matter!	\$21,905	System of Care	Susan	NEW2
Rape Advocacy, Counseling & Education Services	Sexual Violence Prevention Education	\$63,000	(old priority)	Jane	Kyle
Rattle the Stars	Youth Suicide Prevention Education	\$86,500	Innovative/Access	Elaine	Jane
Rosecrance Central Illinois	Fresh Start	\$85,409	(old priority)	Elaine	Joe
	Prevention	\$60,000	System of Care	Joe	Kyle
	Specialty Courts	\$169,464	(old priority)	Kyle	Elaine
Terrapin Station Sober Living	Recovery Home	\$47,000	NEW - Innovative/Access	Joe	Kyle
The UP Center of Champaign County	Children, Youth, & Families Program	\$86,603	System of Care	Jane	Joe
Urbana Neighborhood Connections	Community Study Center	\$25,500	System of Care	Kyle	Julian
WIN Recovery		\$69,488	NEW - Crisis Response	Kyle	Joe
		CCMHB only \$3,274,040			
			includes 1 or 2 DD applications		
			excludes MX yr		

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J.C.

Agency and Program acronyms

BLAST – Bulldogs Learning and Succeeding Together, a program of Mahomet Area Youth Club

CAC - Children's Advocacy Center

CC – Community Choices

CCCHC – Champaign County Christian Health Center

CCDDB – Champaign County Developmental Disabilities Board

CCHCC – Champaign County Health Care Consumers

CCHS – Champaign County Head Start, a department of the Regional Planning Commission (also CCHS-EHS, for Head Start-Early Head Start)

CCMHB – Champaign County Mental Health Board

CCRPC – Champaign County Regional Planning Commission

CN - Crisis Nursery

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

Courage Connection – previously The Center for Women in Transition

DMBGC - Don Moyer Boys & Girls Club

DREAAM – Driven to Reach Excellence and Academic Achievement for Males

DSC - Developmental Services Center

ECHO – a Housing and Employment Support program of Cunningham Children's Home

ECIRMAC – East Central Illinois Refugee Mutual Assistance Center, also The Refugee Center

ECMHS - Early Childhood Mental Health Services, a program of Champaign County Regional Planning Commission Head Start Department

FD – Family Development, previously Family Development Center, a DSC program

FN - Frances Nelson previously known as Frances Nelson Health Center Health Center. The Federally Qualified Health Center operated by Promise Healthcare

FS - Family Service of Champaign County

FST – Families Stronger Together, a program of Cunningham Children's Home

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

IAG – Individual Advocacy Group, Inc., a provider of I/DD services

JDP – Justice Diversion Program, a Regional Planning Commission program

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.

NAMI – National Alliance on Mental Illness

PEARLS - Program to Encourage Active Rewarding Lives

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

RCI – Rosecrance Central Illinois

RPC – Champaign County Regional Planning Commission

UNCC – Urbana Neighborhood Community Connections Center

UP Center – Uniting Pride

UW – United Way of Champaign County

WIN Recovery – Women in Need Recovery

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

ACEs – Adverse Childhood Experiences

ACMHAI – Association of Community Mental Health Authorities of Illinois

ANSA – Adult Needs and Strengths Assessment

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 Drug 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

CDS – Community Day Services, day programming for adults with I/DD

C-GAF – Children's Global Assessment of Functioning

CHW – Community Health Worker

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 Quality 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 Therapy (children), or Developmental Training (adults), now Community Day Services

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

ICJIA - Illinois Criminal Justice Authority

ID – Intellectual Disability, or I/DD for Intellectual/Developmental Disability

IDOC – Illinois Department of Corrections

I&R – Information and Referral

IPLAN - Illinois Project for Local Assessment of Needs. The Illinois Project for Local Assessment of Needs (IPLAN) is a community health assessment and planning process that is conducted every five years by local health jurisdictions in Illinois. Based on the *Assessment Protocol for Excellence in Public Health* (APEX-PH) model, IPLAN is grounded in the core functions of public health and addresses public health practice standards. The completion of IPLAN fulfills most of the requirements for Local Health Department certification under Illinois Administrative Code Section 600.400: Certified Local Health Department Code Public Health Practice Standards. The essential elements of IPLAN are:

1. an organizational capacity assessment;
2. a community health needs assessment; and
3. a community health plan, focusing on a minimum of three priority health problems.

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

LGTBQ – 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.

MCO – Managed Care Organization. Entity under contract with the state to manage healthcare services for persons enrolled in Medicaid.

MCR – Mobile Crisis Response. Previously known as SASS. It is a state program that provides crisis intervention for children and youth on Medicaid.

MDT – Multi-Disciplinary Team

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

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

NACO – National Association of Counties

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

ODU/SUD – Opioid Use Disorder/Substance Use Disorder

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

PSR – Patient Service Representative; staff position providing support services to patients and medical staff.

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.

PWI – Personal Well-being Index

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.

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.

SDOH – Social Determinants of Health

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

SEDS – Social Emotional Development Specialist.

SEL – Social Emotional Learning

SOAR - SSI/SSDI Outreach, Access, and Recovery. Assistance with completing applications for Social Security Disability and Supplemental Income, provided to homeless population

SSI – Supplemental Security Income, a program of Social Security

SSDI – Social Security Disability Insurance, a program of Social Security

SSPC - Social Skills and Prevention Coaches.



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.

TPITOS - The Pyramid Infant-Toddler Observation Scale. Used by Champaign County Head Start.

TPOT - Teaching Pyramid Observation Tool. Used by Champaign County Head Start.

TPS – Truce Peace Seekers

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.

10.A.



BRIEFING MEMORANDUM

DATE: March 17, 2021
TO: Members, Champaign County Mental Health Board
FROM: Lynn Canfield and Kim Bowdry
SUBJECT: Unmet Residential Support Needs

Background:

This memorandum offers updates to Board discussions during the January 20 and February 17, 2021 meetings of the CCMHB and the Champaign County Developmental Disabilities Board (CCDDB). These included technical and programmatic aspects of the Boards' shared Community Integrated Living Arrangement (CILA) Facilities project, a draft Request for Proposals, and data on unmet needs of eligible county residents. Subsequent developments relate to proposed state and federal legislation and budgets, as well as additional information on local service needs and provider capacity.

Local Updates:

CCDDB/CCMHB CILA Facilities Project

Individual Advocacy Group (IAG) remains committed to the residents, families, and staff of one of our CILA homes. The previous residents of the second home now receive services out of county; one parent reports that the new arrangement is off to a good start. Whether IAG can continue to operate in Champaign County may depend on the outcome of state and federal budget discussions and IAG's flexibility to meet the needs of people waiting for traditional CILA and other state-funded services. The same issues impact capacity of other local providers of services for people with Intellectual/Developmental Disabilities (I/DD).

Current Unmet Needs in Champaign County

As reported last month, the Independent Service Coordination Unit estimates that 90 Champaign County residents want CILA placement in Champaign County. Of these, 74 do not yet have funding, 13 are seeking CILA placement now, and 3 more likely will in the summer. Matching providers to individuals' personal preferences should not be overlooked even when resources are scarce: this is a rights issue, and bad matches are costly to all. At the same time, maintaining sufficient provider capacity in a single community, let alone statewide, has not been possible with state rates falling behind over two decades. At the time of this writing, there is recognition at state and federal levels of the need to strengthen this and all long-term support systems.

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Results of Brief Local Provider Survey

Two providers, DSC and Community Choices, responded to the brief survey developed by Kim Bowdry and distributed to five organizations. Answers are edited for space and relevance to CILA services.

How many DSPs does your agency currently have working to support people with IDD in Champaign County?

DSC = 120 DSPs

CC = 5 DSPs and 4 QIDPs

How many DSP vacancies does your agency currently have?

DSC = 30

CC = 0. Should the full applications be funded for FY22, we would be looking to hire 3 additional people, ideally DSPs and at least 2 of them QIDPs. When we needed to hire a QIDP a few years back... generally it was difficult to find someone with the required educational background and experience who was interested in the position.

What would enhance your agency's ability to attract and retain quality DSPs? (improved compensation/benefits, implementation of professional standards, ongoing educational opportunities, certification standards, incentivization, etc.)

DSC = Compensation might help, but at this time there just aren't enough job seekers in the field. We are not sure if professional standards would be a help to the turnover and vacancies. We have increased referral incentives over the past few years.

CC = 90% of our staff have been with us for at least 1 year. 80% of us have been there for over 3 years. While I will acknowledge that our positions are much different than direct front-line support staff in more congregate settings like group homes and day programs, much of what our staff do is comparable to the work of many DSPs across the state. Some of the factors that I believe have helped us retain quality staff are:

- Pay rate. Our starting salary is around 35K, or \$17/hour. This is near the 150% of minimum wage that DDD has suggested as a goal for all DSPs.
- Insurance - we are now able to offer quality health insurance which has been a huge help in hiring and retention.
- Flexibility and professionalism - we strive to offer all staff many many opportunities for continued professional development. In addition to conferences, there are so many free web-based resources (even before COVID) that staff can easily participate in to increase their knowledge, interest, and excitement in the field. People tend to stay at jobs that are stimulating in some way and this is a way to give staff new tools and ideas they can apply to their day to day jobs. It's also a great way to bring new ideas back to the organization.

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NOTE: State funding does not support the indicated level of salary enhancement for DSPs serving people who have state waiver awards such as CILA. Using "third-party payments" to enhance DSP salaries directly is Medicaid supplementation, which can be penalized by the third-party payment (County taxes, in this case) being refunded to the state or, worse yet, by extrapolated fines leading to closure of an agency. Otherwise, this strategy would help expand CILA capacity wherever extra funds are available.

Another Provider Survey Opportunity

In the March 2, 2021 newsletter "DDD [Division of Developmental Disabilities] Communication," Director Stark announced that DHS and the Human Services Research Institute will use the National Core Indicators survey to learn about the DSP workforce "who provide support, training, supervision, and personal assistance to adults with intellectual and developmental disabilities. The survey is being administered by National Core Indicators (NCI) on behalf of Illinois. State policymakers and advocates will use the data to guide decisions. While the management of the survey will be done by the Division of Developmental Disabilities (DDD) Bureau of Quality Management (BQM), it is not associated with any survey or review being conducted by BQM, or the DDD. This survey is meant to identify trends, discrepancies, and advancement in the area of DSP employment. Any provider that employs DSPs is eligible and encouraged to participate. In the upcoming weeks, you will receive an email from NCI with directions on how to access and complete the survey. If you believe you are eligible to participate in this survey and have not received an introductory email regarding it, please send an email to: Cynthia.schierlspreen@illinois.gov to get enrolled."

We encourage local providers of state waiver funded services to participate in the survey. For more information about the Staff Stability Survey and previous years' results, see: <https://www.nationalcoreindicators.org/staff-stability-survey/>

State Updates:

We continue to monitor proposed legislation through state association legislative and I/DD committees. No current bills directly address the issues raised here.

The Governor's FY22 Introduced budget has good news and bad news. It appropriates \$1.5 billion to transition 700 people from the PUNS List and into community-based services. Most DDD grants remain at FY21 levels, but Respite will be reduced by \$2.5 million. The budget adds \$77 million to DDD to address recommendations of the Guidehouse rates study. If passed and signed into law, these changes start July 1:

- DSP wage increase to \$15/hr (for CILA and Community Day Services), although this does not achieve the full rate increase recommendation;
- QIDP, RN, and Supervisor wage increases to the full recommendation;
- Pay for the 2 unfunded CILA hours (in 5-8 bed houses), i.e., to 19 hours per day;
- Replace the CILA 'bed hold' with a vacancy factor;
- End the CILA 'earned income' collection requirement;
- For intermittent CILA, move to an hourly rate for DSPs;
- For Host Family CILA, stop using shift staff methodology;

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- Move Community Day Services to a rate methodology, limit to 5 hours a day and continue the 1100-hour annual cap;
- CDS rates will be moved to the recommended levels, except for DSP wage; and
- Limit Supported Employment Program hours to 300 per year, also within the 1100-hour annual cap.

The changes in rates and in calculation of host family could be helpful to our CILA Facilities Project provider as well as to other local providers of DD waiver services.

Federal Updates:

At the end of February, the House passed a new federal COVID relief bill which, in its current form, could be helpful to Illinois Medicaid-waiver programs. The bill will now be considered in the Senate where it can be passed by a simple majority using reconciliation. The helpful provision increases the Federal Medical Assistance Percentage (FMAP) match for Home and Community Based Services by 7.35% for one year. Increased payments to the state could stabilize some long-term support arrangements, but the state would gain back that financial risk a year later, so this might not be enough.

Next Steps:

In February, we presented a few ideas which might strengthen the workforce, but the Boards might not have clear statutory authority to implement them. The Community Mental Health Act authorizes Mental Health Boards to establish scholarships, so the CCMHB might consider using some of what is set aside for annual I/DD allocations to fund a scholarship program. Because the trainings for both DSP and QIDP certification are defined and paid for by the state, a different educational opportunity would have to be the local focus. The CCMHB/CCDDB's monthly case management workshops offer free trainings and continuing education units (CEUs), essentially a scholarship program for QIDPs. Developing a similar series for DSPs is not immediately helpful because they do not have an annual CEU requirement.

The National Association of State Directors of Developmental Disabilities Services and Polk County, Iowa designed a DSP certification curriculum not only to offer the existing workforce relevant training but also to add incentive payments for completion of the series, a way of bridging the pay gap. More information about this model may be of interest. Given that Illinois' Governor's proposed budget does not fully implement the new rates recommendations, the best-case scenario (i.e., passage of the budget) establishes \$15/hr or \$31,200/year for the coming fiscal year. In contrast, the recommended increase to DSP rates is \$16.50/hr or \$34,320/yr, a gap of \$3,120 per DSP.

In addition to watching for relevant budget and rule changes, we remain interested in whether such a program could be launched locally and whether it is an appropriate use of CCMHB/CCDDB funds.



10.B.



BRIEFING MEMORANDUM

TO: Members, Champaign County Mental Health Board
FROM: Lynn Canfield and Chris Wilson
DATE: March 17, 2021
RE: Contract Amendment Report

The Funding Guidelines include a section on contract amendments which gives the Executive Director authority to review and act on amendments, allows for the Board President and the Executive Director to choose which amendments should be brought to the Board for action, and stipulates certain requests requiring Board approval. In all cases, the Board is to be informed of contract amendments.

Mahomet Area Youth Club (MAYC): The PY20 BLAST contract was converted to a multi-year contract per Board action November 20, 2019, extending the contract's term through June 30, 2021, per **Amendment #2**. The extended term came with the condition excess revenue from the first twelve-month term of the contract not be carried over into the second twelve-month term, with all unspent funds to be returned by the Provider to the Board.

That condition was subsequently waived, and **Amendment #3** reallocated PY20 BLAST excess revenue in the amount of \$5,054 from PY20 to PY21, at the agency's written request and citing COVID-19 impact on the program. The PY20 BLAST contract maximum was reduced to \$9,946 and PY21 BLAST increased to \$20,054. Use of the reallocated excess revenue is restricted to the operation of PY21 BLAST, not to be allocated to PY21 Members Matter.

Because this condition does not preclude the reallocation of any portion of the original PY21 BLAST award of \$15,000 to PY21 Members Matter, and because the agency has requested such in writing (see attached) due to a COVID-related shift in scope of service (as noted in all PY21 contracts), a new amendment allows for a decrease in PY21 BLAST and a separate amendment increases the PY21 Members Matter contract maximum by the same amount:

BLAST PY21 Adjusted Contract Maximum:	$\$20,054 - \$5,768 = \$14,286$
Members Matter PY21 Adjusted Contract Maximum:	$\$18,000 + \$5,768 = \$23,768$

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10.C.

CCMHB 2021 Meeting Schedule

5:45PM Wednesday after the third Monday of each month
Brookens Administrative Building, 1776 East Washington Street, Urbana, IL
<https://us02web.zoom.us/j/81393675682>
312-626-6799, Meeting ID: 813 9367 5682

- February 24** – Putman Room - *study session*
- March 17** – Putman Room
- March 24**- Putman Room - *study session*
- April 21** – Shields Room
- April 28** – Shields Room - *study session*
- May 12** – Shields Room - *study session*
- May 19** – Shields Room
- June 23** – Shields Room
- July 21** – Shields Room
- September 15** – Shields Room – *joint study session*
- September 22** – Shields Room
- October 20** – Shields Room
- October 27** – TBD – *study session*
- November 17** – Shields Room
- December 15** – Shields Room - *tentative*

This schedule is subject to change due to unforeseen circumstances.

Please email stephanie@ccmhb.org to confirm meetings or to request alternative format documents, language access, or other accommodation needed to participate.

All meetings and study sessions include time for members of the public to address the Board.

Meetings are archived at <http://www.co.champaign.il.us/mhbddb/MHBMeetingDocs.php>

Public Input: All are welcome to attend the Board's meetings, using the Zoom options or in person, in order to observe and to offer thoughts during the "Public Participation" period of the meeting. For support to participate in a meeting, let us know how we might help by emailing stephanie@ccmhb.org. If the time of the meeting is not convenient, you may still communicate with the Board by emailing stephanie@ccmhb.org any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated, but be aware that the time for each person's comments may be limited to five minutes.

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CCDDDB 2021 Meeting Schedule

9:00AM Wednesday after the third Monday of each month
Brookens Administrative Building, 1776 East Washington Street, Urbana, IL

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

312-626-6799, Meeting ID: 815 5912 4557

March 17 – Staff Office, Pod 200

March 24 – Putman Room – *tentative study session*

April 21 – Shields Room

May 19 – Shields Room

June 23 – Shields Room

July 21 – Shields Room

August 18 – Shields Room – *tentative*

September 15 5:45PM – Shields – *study session with CCMHB*

September 22 – Putman Room

October 20 – Shields Room

November 17 – TBD

December 15 – Shields Room - *tentative*

This schedule is subject to change due to unforeseen circumstances.

Please email stephanie@ccmhb.org to confirm meetings or to request alternative format documents, language access, or other accommodation needed to participate.

All meetings and study sessions include time for members of the public to address the Board.

Meetings are posted in advance and recorded and archived at

<http://www.co.champaign.il.us/mhbddb/DDBMeetingDocs.php>

Public Input: All are welcome to attend the Board's meetings, using the Zoom options or in person, in order to observe and to offer thoughts during the "Public Participation" period of the meeting. For support to participate in a meeting, let us know how we might help by emailing stephanie@ccmhb.org. If the time of the meeting is not convenient, you may still communicate with the Board by emailing stephanie@ccmhb.org any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated, but be aware that the time for each person's comments may be limited to five minutes.

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DRAFT January to December 2021 Meeting Schedule with Subject and Allocation Timeline for PY2022 continued, moving into PY2023

The schedule provides dates and subject matter of meetings of the Champaign County Mental Health Board through 2021. 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 with potential dates listed; topics will be based on issues raised at meetings, brought by staff, or in conjunction with the Champaign County Developmental Disabilities Board. Included are tentative dates for steps in the funding allocation process for Program Year 2022 (July 1, 2021 – June 30, 2022) and deadlines related to PY2021 agency contracts. **2021 meetings are scheduled to begin at 5:45PM; these may be confirmed by contacting Board staff.**

- 1/04/21 *Online System opens for Agency Registration and Applications for PY2022*
- 1/20/21 **Regular Board Meeting:** Election of Officers
- 1/27/21 **Study Session:** Mid-Year Program Presentations
- 1/29/21 *Agency PY21 2nd Q Reports and CLC Progress Reports due*
- 2/12/21 *Agency deadline for submission of applications for PY2022 funding. Online system will not accept forms after 4:30PM.*
- 2/16/21 *List of Requests for PY2022 Funding assembled*
- 2/17/21 **Regular Board Meeting**
Discussion of Board Members' Review of Proposals;
Mid-year updates on new agency programs
- 2/24/21 **Study Session:** Mid-Year Program Presentations
- 3/17/21 **Regular Board Meeting:** FY2020 Annual Report
(includes utilization data from agencies for PY20)
- 3/24/21 **Study Session**
- 4/14/21 *Program summaries released to Board, copies posted online with CCMHB April 21, 2021 meeting agenda*
-
- 4/21/21 **Regular Board Meeting**
Program Summaries Review and Discussion
- 4/28/21 **Study Session**
Program Summaries Review and Discussion
- 4/30/21 *Agency PY2021 3rd Quarter Reports due*

5/5/21 *Allocation recommendations released to Board; copies posted online with CCMHB meeting agenda*

5/12/21 **Study Session:** Allocation Recommendations

5/19/21 **Regular Board Meeting:**
Allocation Decisions; Authorize Contracts for PY2022

6/23/21 **Regular Board Meeting**
Approve FY2022 Draft Budgets

6/23/21 *PY2022 Contracts Completed*

7/21/21 **Regular Board Meeting**

8/27/21 *Agency PY2021 4th Q Reports, CLC Progress Reports, and Annual Performance Measure Reports due*

9/15/21 **Joint Study Session with CCDDB**

9/22/21 **Regular Board Meeting**
Draft Three Year Plan 2022-2024 with 2022 Objectives

10/20/21 **Regular Board Meeting**
Release Draft Program Year 2023 Allocation Criteria

10/27/21 **Study Session**

10/28/21 *Agency Independent Audits, Reviews, or Compilations Due*

10/29/21 *Agency PY2022 First Quarter Reports Due*

11/17/21 **Regular Board Meeting**
Approve Three Year Plan with FY2022 Objectives
Allocation Decision Support – PY23 Allocation Criteria

12/13/21 *Public Notice to be published on or before this date, giving at least 21-day notice of application period.*

12/15/21 **Regular Board Meeting - tentative**

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**CHAMPAIGN COUNTY
MENTAL HEALTH BOARD
REGULAR MEETING**

Minutes—February 17, 2021

This meeting was held remotely and at the Brookens Administrative Center, Urbana, IL

5:45 p.m.

MEMBERS PRESENT: Susan Fowler, Thom Moore, Joseph Omo-Osagie, Elaine Palencia, Julian Rappaport, Jane Sprandel, Jon Paul Youakim

MEMBERS EXCUSED: Kyle Patterson

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

OTHERS PRESENT: Andy Kulczycki, CCNCC; Laura Lindsey, Courage Connection; Danielle Matthews, Nicole Sikora, DSC; Lisa Benson, Ashlee Salinetto, CCRPC; Hannah Sheets, Darya Shahgheibi, Uniting Pride; Thomas Bates, CCRPC; James Kilgore, First Followers; Isabelle Rosado, Lena Andrus Walker, Daphne Maurer, Citizens; Kayla DeCant, RACES; Pat Ege, Cunningham Children's Home;

CALL TO ORDER:

Mr. Joe Omo-Osagie called the meeting to order at 5:45 p.m. Executive Director Canfield was present at the Brookens Administrative Center as per the Open Meetings Act.

ROLL CALL:

Roll call was taken and a quorum was present.

CITIZEN INPUT / PUBLIC PARTICIPATION:

None.

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APPROVAL OF AGENDA:

The agenda was in the packet for review. The agenda was approved unanimously by a roll call vote.

PRESIDENT'S COMMENTS:

Mr. Joe Omo-Osagie made some brief comments.

EXECUTIVE DIRECTOR'S COMMENTS:

Director Lynn Canfield reviewed the agenda and the Associate Director search process.

NEW BUSINESS:

Champaign County Regional Planning Commission "Homeless Service System Coordination" Mid-Year Report:

There was a presentation by Coordinator Thomas Bates and Human Services Director Lisa Benson. Materials were in the Board packet.

First Followers "First Steps Reentry House" Mid-Year Report:

There was a presentation by Co-Director James Kilgore.

PY22 Application List:

A list of applicants and amounts requested by program was distributed in advance of the meeting.

Application Review Process Discussion:

A Briefing Memorandum with a checklist was included in the packet.

211 Calendar Year 2020 Fourth Quarter Data:

211 call data summary report was included in the packet.

Agency Update on Covid-19 Response:

A Briefing Memorandum with agency updates on operation of funded services during COVID-19 pandemic gleaned from PY21 second quarter reports was included in the packet.

AGENCY INFORMATION:

None.

OLD BUSINESS:

CILA Facilities Project Update:

As follow up to the January 20 discussion, a Briefing Memo was included in the packet for information only.

Schedules & Allocation Process Timeline:

Updated copies of CCMHB and CCDDDB meeting schedules and CCMHB allocation timeline were included in the packet.

CCDDDB Information:

The CCDDDB met earlier in the day. The CCDDDB meeting had similar agenda items as the CCMHB.

Approval of CCMHB Minutes:

Minutes from the January 20, 2021 meeting and the January 27, 2021 study session were included in the Board packet.

MOTION: Dr. Moore moved to approve the CCMHB minutes from January 20, 2021 and January 27, 2021. Ms. Palencia seconded the motion. A roll call vote was taken. Dr. Fowler abstained from the vote. The motion passed.

Staff Reports

Written staff reports from Kim Bowdry, Mark Driscoll, Stephanie Howard-Gallo, and Shandra Summerville were included in the Board packet.

Board to Board Reports:

None.

Expenditure List:

A copy of the Expenditure List was included in the packet.

MOTION: Dr. Fowler moved to accept the Expenditure List as presented. Ms. Sprandle seconded the motion. A roll call vote was taken and the motion passed unanimously.

BOARD ANNOUNCEMENTS:

Dr. Thom Moore was thanked for his 16 year Board service. Kathleen Wirth-Couch has resigned from the CCMHB.

ADJOURNMENT:

The meeting adjourned at 7:10 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDDB Staff

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

CHAMPAIGN COUNTY MENTAL HEALTH BOARD

STUDY SESSION

Minutes—February 24, 2021

This Meeting Was Held Remotely and at the Brookens Administrative Center

5:45 p.m.

MEMBERS PRESENT: Susan Fowler, Joe Omo-Osagie, Elaine Palencia, Julian Rappaport, Jane Sprandel, Jon Paul Youakim

MEMBERS EXCUSED: Kyle Patterson

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

OTHERS PRESENT: Pat Ege, Marie Duffin, Cunningham Children's Home; Nicole Sikora, DSC; Gail Raney, Joey King, Erika Kendrick, Rosecrance Inc.; Claudia Lenhoff, Champaign County Health Care Consumers (CCHCC); Diane Zell, Teklii DeyKoontz, NAMI

CALL TO ORDER:

Joe Omo-Osagie called the study session to order at 5:45 p.m. Executive Director Canfield was present in the Lyle Shields Room at the Brookens Administrative Center as per the Open Meetings Act.

ROLL CALL:

Roll call was taken and a quorum was present.

CITIZEN INPUT / PUBLIC PARTICIPATION:

None.

PRESIDENT'S COMMENTS:

None.

STUDY SESSION:

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Champaign County Health Care Consumers (CCCHC)

“CHW Outreach and Benefit Enrollment” Mid-Year Report

“Justice Involved CHW Services & Benefits” Mid-Year Report

Presentations were by Claudia Lennhoff. She reported on the programs that were supported by CCMHB funds.

NAMI Champaign County:

“NAMI Champaign County” Mid-Year Report

Presentation was by Teklii DeyKoontz, Executive Director. A copy of the presentation was in the Board packet.

Rosecrance Central Illinois

“Recovery Home” Mid-Year Report

Presentation was by Gail Raney.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 7:03 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDB Staff

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

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CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

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108	CHAMPAIGN COUNTY TREASURER									
		2/11/21 80 VR 53- 436			616513	2/12/21	090-000-172.00-00	REVENUES	RFND DDB ADMIN FY20	16,260.85
									VENDOR TOTAL	16,260.85 *
									BALANCE SHEET TOTAL	16,260.85 *
12	CHAMPAIGN COUNTY TREASURER									
		2/10/21 04 VR 53- 59			616505	2/12/21	090-053-522.06-00	POSTAGE, UPS, FED EXPRESSMENT	HLTH PSTG JAN	111.03
									VENDOR TOTAL	111.03 *
16	CHAMPAIGN COUNTY TREASURER									
		2/11/21 81 VR 53- 433			616506	2/12/21	090-053-533.29-00	COMPUTER/INF TCH SERVICESFY20	COMPUTER SV 09	536.69
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 AUDITOR SERV	4,573.19
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 HLTH/LIFE 020	2.31
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 HLTH/LIFE 020	5.99
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 HLTH/LIFE 020	606.11
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 AUDITOR SERV	349.40
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 AUDITOR SERV	568.20
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 HLTH/LIFE 020	.29
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 HLTH/LIFE 020	.74
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 HLTH/LIFE 020	75.31
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 AUDITOR SERV	43.41
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 AUDITOR SERV	1,759.77
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 HLTH/LIFE 020	.89
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 HLTH/LIFE 020	2.31
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 HLTH/LIFE 020	233.23
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY20 AUDITOR SERV	134.45
		2/18/21 80 VR 53- 429			616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING	SERVCSFY19 OUTSID AUDT 10	547.00

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VENDOR NO	VENDOR NAME	TRN B	TR	TRNS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
25	CHAMPAIGN COUNTY TREASURER										
	3/03/21 01 VR 53-	94						RENT-GENERAL CORP			
	2/18/21 80 VR 53-	429				616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING SERVC SFY19 OUTSID AUDT 09		706.00
	2/18/21 80 VR 53-	429				616759	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING SERVC SFY19 OUTSID AUDT 10		17.00
									VENDOR TOTAL		10,162.29 *
41	CHAMPAIGN COUNTY TREASURER										
	3/03/21 01 VR 53-	94				617161	3/05/21	090-053-533.50-00	FACILITY/OFFICE RENTALS MAR OFFICE RENT		1,883.72
									VENDOR TOTAL		1,883.72 *
41	CHAMPAIGN COUNTY TREASURER										
	2/08/21 02 VR 620-	11				616508	2/12/21	090-053-513.06-00	EMPLOYEE HEALTH/LIFE INS JAN HI, LI & ADMIN		4,087.00
	3/01/21 01 VR 620-	29				617162	3/05/21	090-053-513.06-00	EMPLOYEE HEALTH/LIFE INS FEB HI, LI & ADMIN		4,017.00
	3/04/21 03 VR 620-	40				617162	3/05/21	090-053-513.06-00	EMPLOYEE HEALTH/LIFE INS MAR-MAY EAP		29.70
									VENDOR TOTAL		8,133.70 *
76	CHAMPAIGN COUNTY TREASURER										
	2/18/21 80 VR 53-	430				616763	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING SERVC SFY20 WK COMP 020 09		29.27
	2/18/21 80 VR 53-	430				616763	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING SERVC SFY20 UNEMP 020 090		25.42
	2/18/21 80 VR 53-	430				616763	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING SERVC SFY20 WK COMP 020 10		3.64
	2/18/21 80 VR 53-	430				616763	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING SERVC SFY20 UNEMP 020 101		3.16
	2/18/21 80 VR 53-	430				616763	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING SERVC SFY20 WK COMP 020 10		11.26
	2/18/21 80 VR 53-	430				616763	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING SERVC SFY20 UNEMP 020 108		9.78
									VENDOR TOTAL		82.53 *
88	CHAMPAIGN COUNTY TREASURER										
	2/11/21 01 VR 88-	3				616510	2/12/21	090-053-513.02-00	IMRF - EMPLOYER COST IMRF 1/29 PR		1,101.32
	2/18/21 80 VR 53-	431				616765	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING SERVC SFY20 IMRF 020 090		334.30
	2/18/21 80 VR 53-	431				616765	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING SERVC SFY20 IMRF 020 101		41.54
	2/18/21 80 VR 53-	431				616765	2/19/21	090-053-533.01-00	AUDIT & ACCOUNTING SERVC SFY20 IMRF 020 108		128.64
	2/25/21 01 VR 88-	4				616927	2/26/21	090-053-513.02-00	IMRF - EMPLOYER COST IMRF 2/12 PR		1,107.95
									VENDOR TOTAL		2,713.75 *
104	CHAMPAIGN COUNTY TREASURER										
									HEAD START FUND 104		

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*** FUND NO. 090	MENTAL HEALTH									
108	CHAMPAIGN COUNTY TREASURER	3/03/21 01 VR 53- 74	617167	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR SOC/EMOT DEV SV				8,301.00
									VENDOR TOTAL	25,793.00 *
	CHAMPAIGN COUNTY TREASURER	2/11/21 80 VR 53- 435	616513	090-053-571.08-00	TO DEV DISABILITY FUND108TFR	REV SHARE 090				5,818.81
									VENDOR TOTAL	5,818.81 *
161	CHAMPAIGN COUNTY TREASURER	3/03/21 01 VR 53- 75	617169	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR HOMELESS COORD				4,325.00
		3/03/21 01 VR 53- 75	617169	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR JUSTICE SYS DIV				6,275.00
		3/03/21 01 VR 53- 75	617169	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR YOUTH ASSMT CTR				6,362.00
									VENDOR TOTAL	16,962.00 *
176	CHAMPAIGN COUNTY TREASURER	3/04/21 03 VR 119- 14	617170	090-053-513.04-00	WORKERS' COMPENSATION INSWC	2/12, 2/26 PR				293.89
									VENDOR TOTAL	293.89 *
179	CHAMPAIGN COUNTY TREASURER	3/03/21 01 VR 53- 72	617172	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR CAC				4,396.00
									VENDOR TOTAL	4,396.00 *
188	CHAMPAIGN COUNTY TREASURER	2/11/21 01 VR 188- 7	616520	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER FICA	1/29 PR				1,226.36
		2/18/21 80 VR 53- 432	616769	090-053-533.01-00	AUDIT & ACCOUNTING SERVC	FY20 FICA 020 090				349.85
		2/18/21 80 VR 53- 432	616769	090-053-533.01-00	AUDIT & ACCOUNTING SERVC	FY20 FICA 020 101				43.47
		2/18/21 80 VR 53- 432	616769	090-053-533.01-00	AUDIT & ACCOUNTING SERVC	FY20 FICA 020 108				134.62
		2/25/21 01 VR 188- 10	616932	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER FICA	2/12 PR				1,233.74
									VENDOR TOTAL	2,988.04 *
544	AAIM EMPLOYERS ASSOCIATION	3/02/21 03 VR 53- 70	617175	090-053-533.07-00	PROFESSIONAL SERVICES	INV 46812 2/28				554.50
									VENDOR TOTAL	554.50 *

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4990	ASSN OF COMMUNITY MENTAL HLTH AUTH OF IL SUITE 27C							
	2/10/21 05 VR 53- 62	616538	2/12/21	090-053-533.93-00	DUES AND LICENSES	INV 1120 2/2 1ST PT		8,000.00
						VENDOR TOTAL		8,000.00 *
8799	BOOT BOOKS, LLC.							
	3/02/21 03 VR 53- 69	617191	3/05/21	090-053-533.98-00	DISABILITY EXPO	INV 007 3/1		4,500.00
						VENDOR TOTAL		4,500.00 *
15184	CHAMPAIGN COUNTY HEALTH CARE CONSUMERS SUITE 208							
	3/03/21 01 VR 53- 73	617202	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR CHW OUTRCH/BENF		6,496.00
	3/03/21 01 VR 53- 73	617202	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR JUSTICE INVOLVE		6,261.00
						VENDOR TOTAL		12,757.00 *
15400	CHAMPAIGN MULTIMEDIA GRP-MHB 99226307 DBA NEWS GAZETTE							
	2/10/21 04 VR 53- 57	616556	2/12/21	090-053-533.70-00	LEGAL NOTICES, ADVERTISING303453933 1/8			677.60
	2/10/21 04 VR 53- 57	616556	2/12/21	090-053-533.70-00	LEGAL NOTICES, ADVERTISING303463459 1/31			149.00
						VENDOR TOTAL		826.60 *
18230	COMMUNITY SERVICE CENTER OF NORTHERN CHAMPAIGN COUNTY							
	3/03/21 01 VR 53- 76	617215	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR RESOURCE CONNEC		5,633.00
						VENDOR TOTAL		5,633.00 *
18430	CONSOLIDATED COMMUNICATIONS							
	2/25/21 02 VR 28- 9	616984	2/26/21	090-053-533.33-00	TELEPHONE SERVICE	21738437760 2/1		29.58
						VENDOR TOTAL		29.58 *
19260	COURAGE CONNECTION							
	3/03/21 01 VR 53- 77	617222	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR COURAGE CONNECT		10,583.00
						VENDOR TOTAL		10,583.00 *
19346	CRISIS NURSERY							
	3/03/21 01 VR 53- 78	617224	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR BEYOND BLUE		6,250.00

*** FUND NO. 090 MENTAL HEALTH

6,250.00 •

VENDOR TOTAL

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VENDOR NO	VENDOR NAME	TRN B TR	TRNS NO	PO NO	CHECK NUMBER	DATE	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
20271	CUNNINGHAM CHILDREN'S HOME								
	3/03/21 01 VR 53-	79	617225	090-053-533.92-00	3/05/21	CONTRIBUTIONS & GRANTS	MAR ECHO HOUSING/EM	8,467.00	
	3/03/21 01 VR 53-	79	617225	090-053-533.92-00	3/05/21	CONTRIBUTIONS & GRANTS	MAR FAMILIES STRONG	33,592.00	
							VENDOR TOTAL	42,059.00 *	
22300	DEVELOPMENTAL SERVICES CENTER OF CHAMPAIGN COUNTY INC								
	3/03/21 01 VR 53-	80	617227	090-053-533.92-00	3/05/21	CONTRIBUTIONS & GRANTS	MAR FAM DEV CENTER	49,710.00	
							VENDOR TOTAL	49,710.00 *	
22730	DON MOYER BOYS & GIRLS CLUB #770								
	3/03/21 01 VR 53-	81	617230	090-053-533.92-00	3/05/21	CONTRIBUTIONS & GRANTS	MAR CU CHANGE	8,333.00	
	3/03/21 01 VR 53-	81	617230	090-053-533.92-00	3/05/21	CONTRIBUTIONS & GRANTS	MAR CU NGHBRHD CHAM	9,182.00	
	3/03/21 01 VR 53-	81	617230	090-053-533.92-00	3/05/21	CONTRIBUTIONS & GRANTS	MAR YOUTH/FAMILY SV	13,333.00	
							VENDOR TOTAL	30,848.00 *	
24215	EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR SUITE 4D								
	2/24/21 04 VR 53-	13	617000	090-053-533.92-00	2/26/21	CONTRIBUTIONS & GRANTS	JAN FAM SUP/STRENGT	4,703.00	
	2/24/21 04 VR 53-	66	617000	090-053-533.92-00	2/26/21	CONTRIBUTIONS & GRANTS	FEB FAM SUP/STRENGT	4,703.00	
	3/03/21 01 VR 53-	82	617233	090-053-533.92-00	3/05/21	CONTRIBUTIONS & GRANTS	MAR FAM SUP/STRENGT	4,703.00	
							VENDOR TOTAL	14,109.00 *	
26000	FAMILY SERVICE OF CHAMPAIGN COUNTY GRANTS								
	3/03/21 01 VR 53-	83	617239	090-053-533.92-00	3/05/21	CONTRIBUTIONS & GRANTS	MAR COUNSELING	2,500.00	
	3/03/21 01 VR 53-	83	617239	090-053-533.92-00	3/05/21	CONTRIBUTIONS & GRANTS	MAR SELF HELP CENTE	2,410.00	
	3/03/21 01 VR 53-	83	617239	090-053-533.92-00	3/05/21	CONTRIBUTIONS & GRANTS	MAR SENIOR CNSL/ADV	13,529.00	
							VENDOR TOTAL	18,439.00 *	
30550	GROW IN ILLINOIS								
	3/03/21 01 VR 53-	84	617251	090-053-533.92-00	3/05/21	CONTRIBUTIONS & GRANTS	MAR PEER SUPPORT	6,436.00	
							VENDOR TOTAL	6,436.00 *	
35050	I3 BROADBAND - CU								

*** FUND NO. 090 MENTAL HEALTH

2/10/21 04 VR 53- 60 616589 2/12/21 090-053-533.29-00 COMPUTER/INF TCH SERVICESINV 20250101 2/4 144.95
VENDOR TOTAL 144.95 *

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42352	THE LAND CONNECTION					SUITE 400			
	2/23/21 05 VR 53-	64	617034	2/26/21	090-053-533.89-00	PUBLIC RELATIONS	INV 427054 2/16		190.00
							VENDOR TOTAL		190.00 *
44570	MAHOMET AREA YOUTH CLUB								
	3/03/21 01 VR 53-	85	617279	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR BLAST		1,250.00
	3/03/21 01 VR 53-	85	617279	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR MEMBERS MATTER		1,500.00
							VENDOR TOTAL		2,750.00 *
47690	MINUTEMAN PRESS					SUITE B			
	2/10/21 05 VR 53-	63	616617	2/12/21	090-053-533.98-00	DISABILITY EXPO	INV 62607 1/25		45.75
	2/10/21 90 VR 53-	434	616617	2/12/21	090-053-533.98-00	DISABILITY EXPO	INV 61090 9/19		29.83
							VENDOR TOTAL		75.58 *
49870	NATIONAL ALLIANCE ON MENTAL ILLNESS								
	3/03/21 01 VR 53-	86	617286	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR NAMI		833.00
							VENDOR TOTAL		833.00 *
58118	QUILL CORPORATION (MH)					ACCOUNT QL8197518			
	2/10/21 04 VR 53-	58	616634	2/12/21	090-053-522.02-00	OFFICE SUPPLIES	INV 14088529 1/25		320.96
							VENDOR TOTAL		320.96 *
59434	RAPE, ADVOCACY, COUNSELING & EDUC SRVCS					SUITE 211			
	3/03/21 01 VR 53-	87	617306	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR SEX VIOL PREV/E		5,250.00
							VENDOR TOTAL		5,250.00 *
59472	RATTLE THE STARS								
	3/03/21 01 VR 53-	88	617307	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR YTH SUIC PREV/E		7,208.00
							VENDOR TOTAL		7,208.00 *
61780	ROSECRANCE, INC.								
	3/03/21 01 VR 53-	89	617316	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR CRIMNL JUSTC PS		25,362.00

*** FUND NO. 090 MENTAL HEALTH

CHAMPAIGN COUNTY

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VENDOR NO	VENDOR NAME	TRN B	TR	CD	NO	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
***	FUND NO. 090	MENTAL HEALTH											
76609	UNITED WAY OF CHAMPAIGN COUNTY												
	3/03/21 01 VR 53-	89	617316	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR CRIS/ACCSS/BENF		16,996.00				
	3/03/21 01 VR 53-	89	617316	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR FRESH START		6,609.00				
	3/03/21 01 VR 53-	89	617316	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR PREVENTION SVCS		5,000.00				
	3/03/21 01 VR 53-	89	617316	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR RECOVERY HOME		16,666.00				
	3/03/21 01 VR 53-	89	617316	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR SPECIALTY COURT		16,916.00				
							VENDOR TOTAL		87,549.00 *				
76867	UNIV OF IL SPONSORED PROG & RESEARCH ADM												
	3/03/21 01 VR 53-	92	617328	3/05/21	090-053-533.07-00	PROFESSIONAL SERVICES	3RD QTR 211 PATH SV		5,332.50				
							VENDOR TOTAL		5,332.50 *				
77280	UP CENTER OF CHAMPAIGN COUNTY												
	3/03/21 01 VR 53-	90	617329	3/05/21	090-053-533.07-00	PROFESSIONAL SERVICES	MAR MHB21-039 CONSL		6,683.00				
							VENDOR TOTAL		6,683.00 *				
78120	URBANA NEIGHBORHOOD CONNECTION CENTER												
	3/03/21 01 VR 53-	91	617331	3/05/21	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAR CHLD/YTH/FAM PR		2,647.00				
							VENDOR TOTAL		2,647.00 *				
78888	VISA CARDMEMBER SERVICE - MENTAL HEALTH												
	2/23/21 05 VR 53-	65	617091	2/26/21	090-053-533.98-00	DISABILITY EXPO	3930 REV.COM 1/14		84.00				
	2/23/21 05 VR 53-	65	617091	2/26/21	090-053-533.98-00	DISABILITY EXPO	3930 REV.COM 1/25		75.00				
							VENDOR TOTAL		159.00 *				
81610	XEROX CORPORATION												
	2/10/21 04 VR 53-	61	616689	2/12/21	090-053-533.85-00	PHOTOCOPY SERVICES	INV 230329356 2/1		199.06				
							VENDOR TOTAL		199.06 *				

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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
602835	BRAUCHT, LAURA	2/22/21 03 VR 53-	67	617103	2/26/21	2/26/21	090-053-533.98-00	DISABILITY EXPO	INV 15031 2/20	60.00
									VENDOR TOTAL	60.00 *
625543	KINSEL, MELISSA D.	2/22/21 03 VR 53-	68	617126	2/26/21	2/26/21	090-053-533.98-00	DISABILITY EXPO	INV 1443 12/10	170.00
		3/02/21 03 VR 53-	71	617378	3/05/21	3/05/21	090-053-533.98-00	DISABILITY EXPO	INV 1507 2/18	100.00
									VENDOR TOTAL	270.00 *
									DEPARTMENT TOTAL	411,870.49 *
									FUND TOTAL	428,131.34 *

*** FUND NO. 090 MENTAL HEALTH

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