



## Champaign County Mental Health Board

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

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

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

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

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**Champaign County Mental Health Board**

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

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# **LISTING OF 2016 BOARD MEMBERS AND STAFF**

## **BOARD MEMBERS**

Dr. Deborah Townsend  
(President)

Dr. Susan Fowler  
(Vice President)

Dr. Astrid Berkson

Dr. Thom Moore

Ms. Elaine Palencia

Ms. Judi O'Connor

Dr. Julian Rappaport

Dr. Anne Robin

Ms. Margaret White

## **STAFF**

Peter Tracy  
Executive Director

Lynn Canfield  
Associate Director for Developmental Disabilities

Nancy K. Crawford  
Business Unit Comptroller

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

Stephanie Howard-Gallo  
Developmental Disabilities Contract Specialist

Shandra Summerville  
Cultural & Linguistic Competence Coordinator

## CCMHB President's Report

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

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

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

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

Respectfully,

Dr. Susan Fowler  
CCMHB President, 2017

## SECTION I: Financial Reports and Service Data

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD**

**ANNUAL FINANCIAL REPORT**

12/01/15 - 12/31/16

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

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

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

**01/01/2016 - 12/31/16**

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

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

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

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



## **Service Totals – Brief Narrative of What the Service Categories Represent**

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

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

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

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

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

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

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

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

### BY TYPE OF SERVICE UNIT

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

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

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

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

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

### CONTRACTED AGENCIES & PROGRAMS

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

**Mahomet Area Youth Club**

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

**Prairie Center Health Systems**

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

**Promise Healthcare**

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

**RACES Counseling & Crisis Services**

178	23	28	8
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**UP Center Children, Youth, & Families Program**

34	108	16	59
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**Urbana Neighborhood Connections Center**

Community Study Center	---	---	---	432
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	<u>CSEs</u>	<u>SCs</u>	<u>TPCs</u>	<u>NTPCs</u>
<b>TOTAL GENERIC SERVICE UNITS</b>	3,113	37,170	2,348	6,963

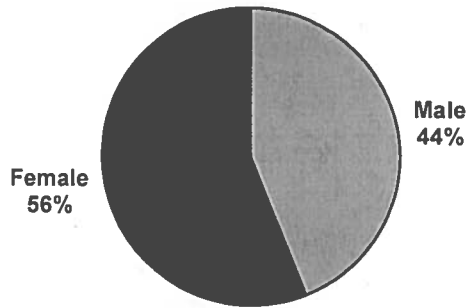
	<u>Days</u>	<u>Hours</u>
<b>TOTAL FEE BASED UNITS</b>		3,203

**Notes on Service Data**

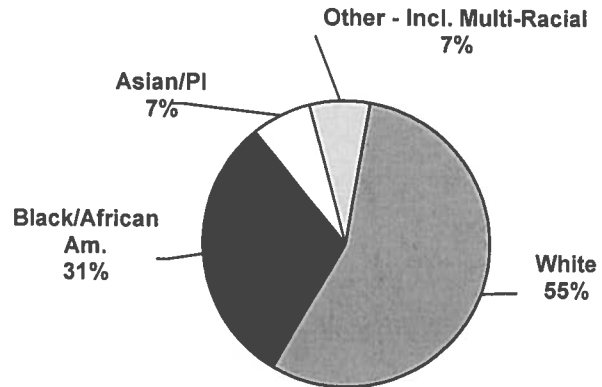
Data are for the period of Contract Year 2016: July 1, 2015 to June 30, 2016.

DEMOGRAPHIC AND RESIDENCY DATA FOR PERSONS SERVED IN CY2016

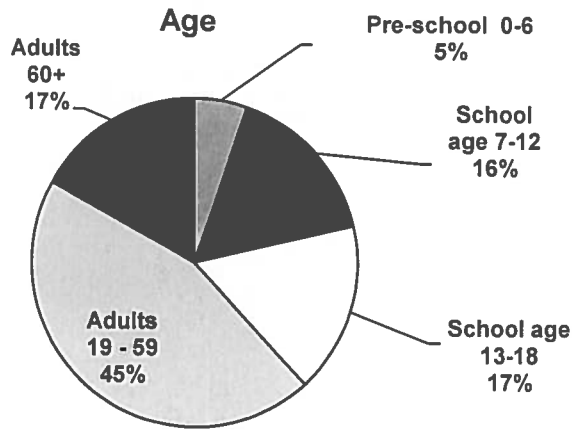
Gender



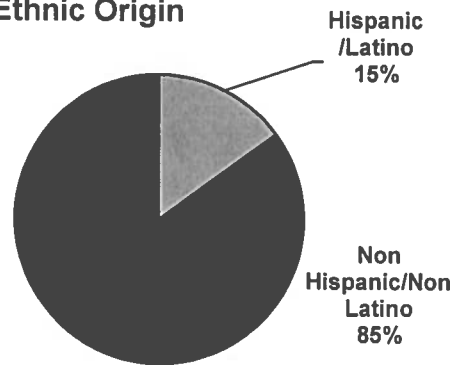
Race



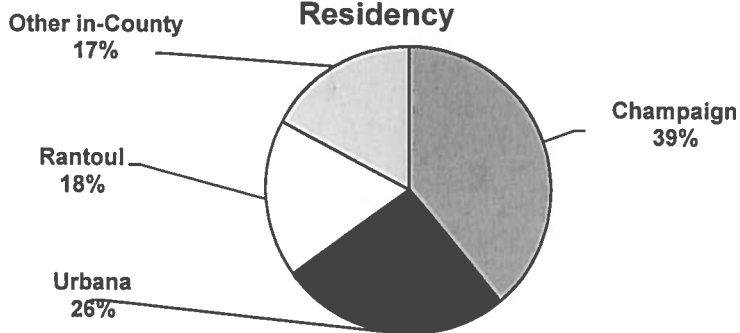
Age



Ethnic Origin

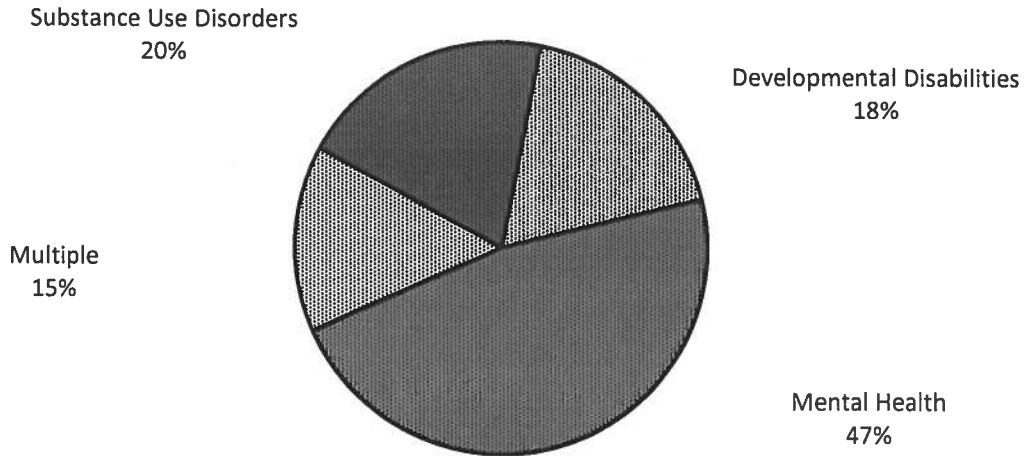


Residency

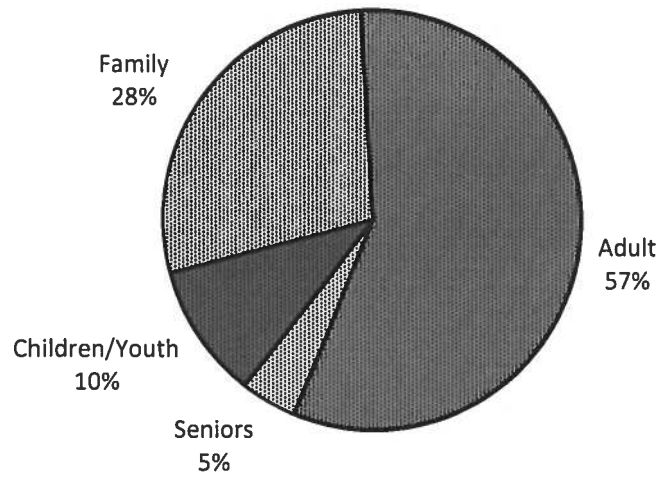


# Funding by Sector, Population, and Service in Contract Year 2016 (CY16)

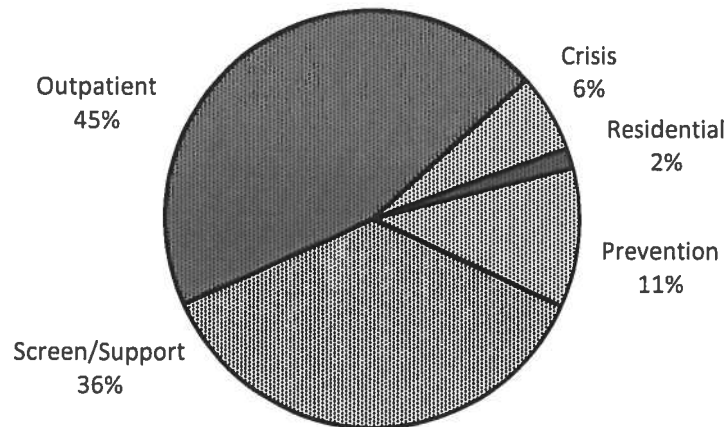
## CCMHB CY16 Allocation by Community Mental Health Sector



## CCMHB CY16 Allocation by Target Population



## CCMHB CY2016 Allocation by Type of Service



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

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD**

**THREE-YEAR PLAN**

**FOR**

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

**WITH**

**ONE YEAR OBJECTIVES**

**FOR**

**FISCAL YEAR 2017  
(1/1/17 – 12/31/17)**

## CHAMPAIGN COUNTY MENTAL HEALTH BOARD

WHEREAS, the Champaign County Mental Health Board has been established under Illinois Revised Statutes (405 ILCS – 20/Section 0.1 et. seq.) in order to "construct, repair, operate, maintain and regulate community mental health facilities to provide mental health services as defined by the local community mental health board, including services for the developmentally disabled and for the substance abuser, for residents (of Champaign County) and/or to contract therefore..."

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

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

### MISSION STATEMENT

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

### STATEMENT OF PURPOSES

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

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



## SYSTEMS OF CARE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

#### MULTI-AGENCY INVOLVED YOUTH AND FAMILIES

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

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

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

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

## CRIMINAL JUSTICE AND MENTAL HEALTH SYSTEM COLLABORATION

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

## COMMUNITY ENGAGEMENT & ADVOCACY

Goal #9: Address the need for acceptance, inclusion and respect associated with a person's or family members' mental illness, substance use disorder, intellectual disability, and/or developmental disability through broad based community education efforts to increase community acceptance and positive self-image.

Objective #1: Continue support for and involvement in efforts to challenge stigma and discrimination, such as the Champaign County Alliance for the Promotion of Acceptance, Inclusion and Respect signature event at Roger Ebert's Film Festival and other community education events including

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

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

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

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

Goal #10: Stay abreast of emerging issues affecting the local systems of care and consumer access to services and be proactive through concerted advocacy efforts.

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

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

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

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