



## CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

*PLEASE REMEMBER this meeting is being audio recorded. Speak clearly into the microphone during the meeting.*

#### Champaign County Developmental Disabilities Board (CCDDB)

#### Strategic Planning Retreat AGENDA

**Wednesday, October 28, 2015, 8:30AM to 1:00PM**

Brookens Administrative Building, Lyle Shields Room

1776 E. Washington St., Urbana, IL 61802

*(Members of the Champaign County Mental Health Board are invited to sit in as special guests)*

- 8:30 AM     **Introduction and Opening Remarks** – Dr. Phil Krein, President
- 8:45AM     **Local Employment First Update** – Jennifer Knapp, Community Choices, and Patty Walters, Developmental Services Center
- 9:15AM     Public Participation, Board Discussion
- 9:45AM     **State and Federal Impact and Trends in Intellectual and Developmental Disabilities Services and Supports** – Melissa Picciola, Equip for Equality
- 10:30AM    Public Participation, Board Discussion
- 11:00AM    Break
- 11:15AM    **“Hard Cases” and Other Emerging Challenges in Champaign County**  
– Rebecca Woodard and Kim Bowdry, Champaign County Regional Planning Commission
- 11:45AM    Public Participation, Board Discussion

Adjournment

September 27, 2015

In the recent interaction with agencies in the Champaign County area, consistent reports have been made to indicate difficulty obtaining qualified, quality staff. This has been more apparent when addressing the needs of individuals with developmental disabilities accompanied by behavioral issues. This has resulted in delays in receiving services, provider agencies indicating an inability to support individuals and increased risk for the individual. This has resulted in families being placed in the difficult position of choosing appropriate supports in communities some distance away or sacrificing their jobs and financial stability by having their family member move home.

One particular case involves client A. He has a developmental delay, medical needs requiring monitoring of diet and behavioral needs directly related to his diagnosis. The agency severed their relationship with A based on behavioral issues which are as a result of a traumatic brain injury as a child. These behavioral issues are complicated by medical issues as well. An alternative provider was identified who was willing to open a new home in the area. However, the process became more difficult as the provider had difficulty obtaining qualified staff to support the individual.

This individual was discharged from a provider agency and returned to live with family. The family has implemented the services which the provider agency had previously supported. This has resulted in physical as well as emotional hardships for the family. Currently, with family support, A is employed in the community. He enjoys his job where he has been well supported. The business accommodates his needs. Example flashing lights on a display were turned off on the days he was scheduled to work in order to not cause him any difficulties. At this time, no local provider agency is equipped to support him. Therefore his only options for community living are approximately 2+ hours from his family and his job.

Concerns which have been identified include but are not limited to the following:

- Provider agencies who are capable and have historically successfully supported individuals with complex needs have experienced difficulty in finding sufficient staff who are qualified to work with the higher needs of these individuals.
- State budget funding has delayed or derailed placements for individuals.
- Community based employment or customized employment is limited. Majority of the individuals who have been placed are utilizing day training programs to meet their vocational goals.

Recommendations for supporting individuals with complex or significant needs

1. Collaboration with university/ college or technical training programs to develop additional opportunities for students to receive class/internship credit for time working with individuals in their homes or day training programs, particularly with supporting individuals with more complex needs.
2. Collaboration with university/college or technical training programs for recruitment of staff. Students majoring in the helping professions such as special education, nursing, physical therapy, psychology etc., would receive beneficial job experience as well as offering a pool of caring staff for supporting individuals in the community.

3. Development of a training program which offers additional training beyond the state required training. This could be developed in conjunction with several agencies. The training would need to be advanced from the basics and focus on staff developing additional skills in areas such as behavior, communication, sensory or medical needs. The length of the training program would need to be further evaluated. A one day training would be difficult to achieve the goals.
4. Individuals who complete this training would qualify for a bonus based upon successful completion.
5. Recruitment of provider agencies for services above residential supports. This might include Behavior Analysts, Speech Pathologists, Occupational Therapists, Physical Therapists, and Counselors all with experience or training working with individuals with Developmental Disabilities.
6. Advocacy for the individuals residing in the community to receive the services and supports needed to remain active in the community.
7. Community training and education regarding the abilities and advantages to working with individuals who have diagnosed disabilities.

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Joe'L Farrar, M.Ed., CCC-SLP  
Consultant



## CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

#### DRAFT BRIEFING MEMORANDUM

**DATE:** October 21, 2015  
**TO:** Members, Champaign County Developmental Disabilities Board  
**FROM:** Peter Tracy, Executive Director  
**SUBJECT:** FY17 Allocation Priorities and Decision Support Criteria

The purpose of this memorandum is to provide recommendations pertaining to the FY17 (July 1, 2016 through June 30, 2017) Champaign County Developmental Disabilities Board (CCDDB) allocation decision support criteria and funding priorities. Stakeholders were invited to review, comment, and identify additional priorities for the Board's consideration.

#### Statutory Authority

Funding policies of the Champaign County Developmental Disabilities Board (CCDDB) are predicated on the requirements of the County Care for Persons with Developmental Disabilities Act (55 ILCS 105/ Section 0.01 et. seq.). All funds shall be allocated within the intent of the controlling act as codified in the laws of the State of Illinois. CCDDB Funding Guidelines require annual review and update of decision support criteria and priorities in advance of the funding cycle application process.

Upon approval by the Board, this memorandum shall become an addendum to the CCDDB funding guidelines incorporated in standard operating procedures.

#### Medicaid Supplementation

The Medicaid rate paid for a service or support is, by law, all-inclusive and must be taken as payment in full by the provider. The provider is prohibited from charging any amount over and above what Medicaid pays for a covered service to an eligible client. The provider is not allowed to accept additional payment for service by billing any third party, whether or not the third party is willing to help (i.e., supplement). In addition, the Waiver Program Provider Agreement for Participation in the Illinois Medical Assistance Program specifically states in Item #6 **"Payments to the Provider under this agreement shall constitute payment in full. Any payments received by the Provider from other sources shall be shown as a credit and deducted from the Provider's charges."**

The CCDDB will work with Providers to identify services and supports which are not included as components of Medicaid rates and awards to people with disabilities. These items should be identified based on the individual's Person Centered Plan and deemed necessary to enhance the possibilities for full community inclusion and integration.

#### Expectations for Minimal Responsiveness

Applications that do not meet these thresholds are “non-responsive” and will be returned to the applicant. All agencies must be registered using the on-line system. The application(s) must be completed using the on-line system.

1. Eligible applicant – based on the Organization Eligibility Questionnaire.
2. Compliance with the application deadline. Late applications will not be accepted.
3. Application must relate directly to intellectual disabilities and developmental disabilities programs, services, and supports.
4. Application must be appropriate to this funding source and shall provide evidence that other funding sources are not available to support this program/service.

### **Overarching Priorities**

#### Inclusion and Integration

All applications for CCDDDB shall be assessed to determine the extent to which there is evidence of movement toward community integration and away from segregated services and settings.. The emphasis on inclusion and integration is recognition of serious changes in law, rule, and regulations which prohibit segregated programs and services. Community integration of people with intellectual and developmental disabilities is a civil rights issue driven by law and court decisions.

The CCDDDB strongly believes in and will support programs, services and supports which manifest the following:

- Support and focus on the person’s control of his/her day and how they live.
- Support the person’s skills and abilities to build connections to the broader community.
- Support the person’s presence and participation in community settings.
- Support the person’s development and personal support networks which include friends, family, and people from the broader community.
- Systematically identify and mobilize the person’s capabilities and create access to community associations, workplaces, and learning spaces.
- Provide a detailed explanation of the Person Centered Planning process with measurable desired outcomes that strike a balance between what is “important to” and what is “important for” the person.
- Explains how the person has the opportunity to make informed choices based on access to complete information about services and financial supports available in integrated settings, as well as concerns they may have about integrated settings.
- Incorporation of Employment First principles.
- Acknowledge support and encouragement of self-advocacy.
- Address cultural competence and reach out to underserved populations.

All applications will be expected to explain how services/programs will systematically transition to fully integrated models consistent with statute and CMS rule changes. In addition, the applications will be required to include measurable objectives, goals, and timelines.

#### Underserved Populations

Programs and services that promote access for underserved populations identified in the Surgeon General’s Report on Mental Health: Culture, Race, and Ethnicity and the consultation with Carl

Bell, M.D. In addition, actions should align with the Culturally and Linguistic Appropriate Services (CLAS) standards outlined in “A Blueprint for Advancing and Sustaining CLAS Policy and Practice.”

#### Countywide Access

Programs and services that promote county-wide access for all people in Champaign County. Zip code data is mandated.

#### Person Centered Planning (PCP)

Applications shall provide detailed information about the PCP process used by the applicant to develop a cogent service and support plan predicated on and specific to CCDDDB funding and which identifies and mobilizes community partnerships and resources that exist beyond the service system. To the extent possible, CCDDDB dollars will follow individuals rather than programs and will focus on PCP-driven services and supports associated with the individual. In addition, the PCP process shall promote self-directed and culturally appropriate individualized service plans which include measurable desired outcomes that strike a balance between what is “important to” and what is “important for” the individual.

PCP processes should be outcome-based, directed by and continually focused on the individual (rather than on available services and supports), and building on their gifts and strengths. In addition, the planning process should address an individual's health and welfare needs and their need for information and guidance, and should rely on the participation of allies chosen by the individual. PCP documentation should be meaningful to the individual and useful to those involved with its implementation.

PCP processes must include the presence and participation of the person with a disability, including whatever supports the person needs to express his or her intentions and wishes. These supports may include participation and representation by one or more family members, friends, or community partners in whom the person with a disability has indicated trust, especially in cases where the individual may have significant difficulty expressing their intentions and wishes.

Individuals should have the opportunity to make informed choices, based on access to complete information about services and financial supports available in integrated settings, exposure to integrated settings and individuals who work and live in them, and exploration of any concerns they may have about integrated settings.

#### **FY17 CCDDDB Priorities**

##### Priority: Planning for People with Challenging and Complex Service Needs

The CCDDDB shall set aside dollars to assure adequate planning and development of a Person Centered Plan (PCP) for people who cannot be appropriately served by community based service providers.

##### Priority: Advocacy for People with Intellectual and Developmental Disabilities (I/DD)

To the extent possible, the CCDDDB shall support advocacy efforts to assure appropriate state funding for people with I/DD.

#### Priority: Cultural and Linguistic Competence

All applications should focus on improved, earlier identification of intellectual and developmental disabilities in underrepresented populations and on reduction of racial and other service disparities in I/DD service/support participation. Cultural and Linguistic Competence plans shall be required of all service providers.

#### Priority: Employment Services and Supports

Applications which focus on vocational services and supports including long term job coaching and employment support. In addition, the CCDDDB shall support services and programs which incorporate Employment First principles, with an emphasis on full or part time work in integrated, community settings, consistent with industry standards, based on a person's interests and abilities.

The CCDDDB also seeks to support the development and identification of employers who understand the benefits of employing people with disabilities and are willing to partner with service providers to maximize the possibility of mutually beneficial outcomes.

#### Priority: Expansion of Community Integrated Living Arrangements (CILA)

Applications which offer creative approaches to increasing the availability of smaller CILA (4-person, 3-person, 2-person or 1 person) homes in Champaign County shall be prioritized.

#### Priority: Workforce Development and Stability

Applications which propose creative solutions concerning recruitment and retention of front-line, direct service staff shall be prioritized. This workforce problem is especially critical for direct care staff in CILAs, which experience high levels of turnover and difficulty in recruitment due to the low salary levels as well as challenging work (e.g., use of bonuses paid to direct care staff as a way of supplementing low salaries). The following is a partial listing of systemic problems associated with this issue:

- High turnover rates of direct care staff in CILAs and developmental training settings
- An increasing need for more direct care staff to address the CILA capacity problems – likely to be more than double the current workforce based on Ligas and PUNS data.
- Significant vacancy rates in existing funded direct care positions.
- Increased costs associated with turnover including recruitment costs, overtime pay, and required training necessary for new staff.
- Significant negative effects on the quality of services and supports manifested by gaps in coverage, discontinuity of care, and interference with the development of positive relationships between workers and those they support.
- There is an increase in competition for direct care staff as the need for people increases in other areas (e.g., long term support for people with age related issues).

#### Priority: Comprehensive Services and Supports for Young Children

Applications with a focus on services and supports for young children with developmental delays not covered by the State's Early Intervention program(s) or under the School Code shall be prioritized. Examples of services and supports include:

- an array of Early Intervention services addressing all areas of development;

- coordinated, home-based, and taking into consideration the needs of the entire family;
- early identification of developmental delays through consultation with child care providers, pre-school educators, and medical professionals;
- supports (including education, coaching, and facilitation) that focus on developing and strengthening personal and family support networks that include friends, family members, and community partners;
- supports that systematically identify and mobilize individual gifts and capacities and create access to community associations, workplaces, and learning spaces in which network members have influence and standing.

#### Priority: Flexible Family Support

Applications which focus on flexible, PCP-driven, family support for people with I/DD and their families, which are designed to enhance stability and their ability to live together, shall be prioritized. Examples of flexible family support include:

- family respite, recreational activities, mutual support options, transportation assistance;
- assistive technology, home modification/accessibility supports, information, and education;
- other diverse supports which allow individuals and their families to determine care and treatment;
- assistance to the family to develop and maintain active, engaged personal support networks for themselves and their son or daughter.

#### Priority: Adult Day Programming that Emphasizes Social and Community Integration

Applications for PCP-driven adult day programming for people with I/DD who may also have behavioral support needs and/or significant physical limitations shall be prioritized, provided they seek effective methods leading to community integration. Examples of services include:

- speech therapy, occupational therapy, fitness training, personal care support;
- support for the development of independent living skills, social skills, communication skills, and functional academics skills;
- community integration and vocational training, per consumer preferences
- facilitation of social, friendship, and volunteering opportunities;
- access to community education programs, fitness and health promotion activities, mentoring opportunities, and by other creative means.

#### Priority: Self Advocacy and Family Support Organizations

Applications highlighting an improved understanding of I/DD through support of sustainable self-advocacy and family support organizations, especially those comprising persons who have I/DD, their parents, and others in their networks of support, shall be prioritized.

#### Priority: Inclusion and Anti-Stigma Programs and Supports

Applications that support efforts to reduce stigma associated with I/DD by focusing on activities which promote acceptance, inclusion and respect for people with disabilities. The CCDDDB is looking for creative approaches toward the goals of increasing community awareness, promoting inclusion, and challenging negative attitudes and discriminatory practices.



### **Secondary Decision Support and Priority Criteria**

The process items included in this section will be used as important discriminating factors which influence final allocation decision recommendations.

1. Approach/Methods/Innovation: Applications proposing evidence-based or research-based approaches and addressing fidelity to the model cited. Applications demonstrating creative and/or innovative approaches to meet defined community need.
2. Evidence of Collaboration: Applications identifying collaborative efforts with other organizations serving or directed by individuals with I/DD and members of their support networks, toward a more efficient, effective, inclusive system of care.
3. Staff Credentials: Applications highlighting staff credentials and specialized training.
4. Records Systems Reflecting CCDDDB Values and Priorities: Applications proposing to develop and utilize records systems for individual supports, programs, and projects that clearly reflect CCDDDB values and priorities. Such records systems can be used to provide rapid feedback to CCDDDB on the impact and efficacy of innovative projects and provide project managers and direct support staff with direction and feedback that can be utilized in day-to-day management, supervision, and mentoring / coaching.
5. Resource Leveraging: Applications that involve additional grant funding, community support, “natural supports” in employment and community settings, volunteer initiatives, and other creative approaches that amplify resources.

### **Process Considerations**

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

The CCDDDB allocation of funding is a complex task predicated on multiple variables. It is important to remember that this allocation process is not a request for proposals (RFP). Applicants for funding are not responding to a common set of specifications but rather are seeking funding to address a wide variety of developmental disability service and support needs in our community. In many respects our job is substantially more difficult than simply conducting an RFP. Based on past experience, we can anticipate that the nature and scope of applications will vary widely and will include treatment and early intervention models. For these reasons, a numerical rating/selection methodology is not applicable or relevant to our particular circumstances. Our focus is on what constitutes a best value to our community, based on a

combination of cost and non-cost factors, and will reflect an integrated assessment of the relative merits of applications using criteria and priorities approved by the CCDDDB.

Caveats and Application Process Requirements:

- Submission of an application does not commit the CCDDDB to award a contract or to pay any costs incurred in the preparation of an application or to pay for any other costs incurred prior to the execution of a formal contract.
- Technical assistance available to applicants will be limited to process questions concerning the use of the online registration and application system, application forms, budget forms, application instructions, and CCDDDB Funding Guidelines.
- Applications which include excessive information beyond the scope of the application format will not be reviewed and, at the discretion of staff, may be disqualified from consideration. Letters of support for applications are discouraged and, if submitted, will not be considered as part of the allocation and selection process.
- The CCDDDB retains the right to accept or reject any or all applications and reserves the right to refrain from making an award when that is deemed to be in the best interest of the county.
- The CCDDDB reserves the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCDDDB deems such variances to be in the best interest of Champaign County.
- Applications and submissions become the property of the CCDDDB and, as such, are public documents that may be copied and made available upon request after allocation decisions have been made. Materials submitted will not be returned or deleted from the online system.
- The CCDDDB reserves the right, but is under no obligation, to negotiate an extension of any contract funded under this allocation process for up to a period not to exceed two years with or without additional procurement.
- If selected for contract negotiations, the applicant may be required to prepare and submit additional information prior to final contract execution, in order to reach terms for the provision of services that are agreeable to both parties. Failure to submit required information may result in disallowance or cancellation of the award of a contract.
- The execution of financial contracts resultant of this application process is dependent upon the availability of adequate funds and the needs of Champaign County.
- The CCDDDB reserves the right to further define and add application components as needed. Applicants selected as responsive to the intent of this online application process will be given equal opportunity to update proposals for the newly identified components.
- All proposals considered must be received on time and must be responsive to the application instructions. The CCDDDB is not responsible for lateness or non-delivery of mail or messenger. Late applications shall be rejected.
- The contents of a successful application will be developed into a formal contract, if selected for funding. Failure of the applicant to accept these obligations can result in cancellation of the award for contract. The CCDDDB reserves the right to withdraw or reduce the amount of an award if there is misrepresentation of the applicant's ability to perform as stated in the application.

- The CCDDDB reserves the right to negotiate the final terms (i.e., best and final offer) of any or all contracts with the applicant selected, and any such terms negotiated as a result of this application process may be renegotiated and/or amended in order to meet the needs of Champaign County. The CCDDDB also reserves the right to require the submission of any revision to the application which results from negotiations conducted.
- The CCDDDB reserves the right to contact any individual, agency, or employee listed in the application or to contact others who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.

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

***DRAFT***  
**THREE-YEAR PLAN**

**FOR**

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

**WITH**

**ONE YEAR OBJECTIVES**

**FOR**

**FISCAL YEAR 2016**  
**(1/1/16 – 12/31/16)**

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

WHEREAS, the Champaign County Developmental Disabilities Board has been established under the Illinois County Care for Persons with Developmental Disabilities Act (IL Compiled Statutes, Chapter 55, Sections 105/0.01 to 105/13 inclusive) in order to “provide facilities or services for the benefit of its residents who are mentally retarded or under a developmental disability and who are not eligible to participate in any such program conducted under Article 14 of the School Code, or may contract therefore with any privately or publicly operated entity which provides facilities or services either in or out of such county.”

WHEREAS, while the Champaign County Developmental Disabilities Board is not required by state statute or other authority to prepare a one- and three-year plan for a program of supports and services for individuals with intellectual and developmental disabilities, open strategic planning with input from stakeholders and constituents is highly valued.

THEREFORE, the Champaign County Developmental Disabilities Board does hereby adopt the following Mission Statement and Statement of Purposes to guide the development of the intellectual and developmental disabilities supports and services plan for Champaign County:

**MISSION STATEMENT**

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

**STATEMENT OF PURPOSES**

1. Planning for the intellectual disability and developmental disability service and support system to assure accomplishment of the CCDDB goals.
2. Allocation of local funds to assure the provision of a comprehensive system of community based intellectual disability and developmental disability services and supports anchored in high-quality person-centered planning.
3. Coordination of affiliated providers of intellectual disability and developmental disability services and supports to assure an interrelated accessible system of care.
4. Evaluation of the system of care to assure that services and supports are provided as planned and that services are effective in meeting the needs and values of the community.

In order to accomplish these purposes, the Champaign County Developmental Disabilities Board must collaborate with the public and private sectors in providing the resources necessary for the effective functioning of the intellectual disability and developmental disability service and support system. The CCDDB shall perform those duties and responsibilities as specified in Sections 105/01 to 105/13 inclusive of The County Care for Persons with Developmental Disabilities Act.

## SYSTEMS OF CARE

Goal #1: Support a continuum of services to meet the needs of people with intellectual and/or developmental disabilities, along with 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. During the allocation decision-making process, consider a multi-year term for select contract awards.

Objective #2: Expand the use of evidence-informed and evidence-based/best practice models appropriate to the presenting need in an effort to improve outcomes for people with I/DD, along with their families, across the lifespan.

Objective #3: Promote wellness for people with I/DD to prevent and reduce early mortality, through support services including enrollment in benefit plans and coordinated access to primary care. Partner with key stakeholders toward improved outcomes for people.

Objective #4: Pursue, as feasible, development or expansion of residential and/or employment supports for persons with I/DD not supported with state/federal funding.

Objective #5: As enrollment in health insurance and Medicaid managed care plans reduces the numbers of uninsured, realign CCDDDB investments to fund services and supports outside the realm of Medicaid, including pilot projects and creative solutions to persistent problems such as workforce stabilization.

Goal #2: Sustain the 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, as part of the providers' stated capacity to deliver services, evidence of cultural and linguistic competence to meet the needs of the population served with submission of a cultural and linguistic competence plan and report on same on a bi-annual basis.

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.

Goal #3: Improve access to and engagement in services through increased coordination and collaboration between providers, community stakeholders, people with I/DD, and their families and other key supporters.

Objective #1: Encourage the development of collaborative agreements between providers to increase or maintain access and coordination of services for people with I/DD in Champaign County.

Objective #2: Participate in various collaborative bodies and intergovernmental councils, with missions aligned with that of the Board, toward strengthening

coordination between providers in the delivery of services and creating or maximizing opportunities for people who have I/DD.

Objective #3: Engage other local funders and stakeholders and participate in coordinating bodies as appropriate, to develop new initiatives.

Objective #4: In collaboration with the CCMHB and other community partners, ensure that the needs of justice-involved persons with I/DD are considered in the development of an effective diversion system.

Objective #5: Track Illinois Department of Human Services Division of Developmental Disabilities' Prioritization for Urgency of Need for Services (PUNS) database for state and local trends and to ensure full representation of the service preferences of Champaign County residents. Maintain and increase communication with local Pre-Admission Screening/Independent Service Coordination unit, representatives of the IDHS Division of Developmental Disabilities, and stakeholders regarding the use of PUNS, the service and support needs and preferences of Champaign County residents, and system changes.

Goal #4: Encourage high-quality person-centered planning and follow-through for individuals served by agencies receiving funding from the CCDDDB and, through the Intergovernmental Agreement, from the CCMHB.

Objective #1: Continue emphasis on self-determination and Person Centered Planning (PCP) training and implementation for all treatment plan clients. Develop guidelines for structuring and assessing the quality of person-centered planning processes and outcomes.

Objective #2: Require that reports of program performance include examples of outcomes and measures of person-centered planning.

Objective #3: Collaborate with agency providers on the identification of performance measures consistent with valued outcomes such as connection to friends, community, meaningful work and non-work activities, etc.

Goal #5: Continue the collaborative working relationship with the Champaign County Mental Health Board (CCMHB).

Objective #1: In consultation with the CCMHB, review and revise as necessary the current CCMHB-CCDDDB Intergovernmental Agreement.

Objective #2: Coordinate integration, alignment, and allocation of resources with the CCMHB to ensure the efficacious use of resources within the service and support continuum for people with I/DD. Identify opportunities for connection to resources used by residents of Champaign County who do not have a disability.

Objective #3: Assess alternative service strategies that empower people and increase access to integrated settings as exemplified by the local collaborative approach to the Employment First Act.

Objective #4: Concurrent with the CCMHB, continue financial commitment to expand the availability of Community Integrated Living Arrangement (CILA) and other community-based housing opportunities for people with ID/DD from Champaign County.

Objective #5: Foster communication between the CCDDDB and the CCMHB by holding regular meetings between the Executive Director and the Officers of the two Boards, sharing information between the Boards, and co-sponsoring public hearings, trainings, and anti-stigma/pro-inclusion events.

Objective #6: Collaborate with the CCMHB 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 I/DD.

## CHILDREN AND FAMILY FOCUSED PROGRAMS AND SERVICES

Goal #6: Identify children at-risk of developmental delay and intellectual disability or developmental disability and support early intervention services and family supports.

Objective #1: Support the use of evidence based/informed models for provider programs serving families with young children not eligible for Early Intervention or under the School Code, and require collaboration and coordination by providers to limit duplication of effort.

Objective #2: Participate in collaborative bodies such as Champaign Urbana Cradle 2 Career, whose mission includes a focus on serving young children and their families.

Objective #3: Emphasize cultural competence in services and supports for young children and early identification in minority/underserved youth with disabilities. Reduce disparities in the age of identification and intervention to remediate delays. Promote culturally responsive and family driven support networks for underrepresented populations, underserved, and general populations of Champaign County.

Goal #7: Support access to services and programs for youth and adults with I/DD, with a preference for evidence based practices to increase positive outcomes.

Objective #1: Support a continuum of evidence-based, quality services for persons with I/DD and encourage training of interested persons on the use of evidence-based/evidence-informed practice and associated outcome measurement.

Objective #2: Emphasize flexible support for people with I/DD and their families to enhance their ability to live together, to transition to greater independence when and if they choose, and to be as connected to their communities as possible.

## COMMUNITY ENGAGEMENT & ADVOCACY

Goal #8: Address the importance of acceptance, inclusion, and respect of people with I/DD, through broad based community education efforts to increase community acceptance and positive self-image, to challenge discrimination, and to promote dignity and inclusion.

Objective #1: Continue support for and involvement in 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.

Objective #2: Participate in and promote other community education initiatives, such as walks, forums, and presentations to raise awareness, improve cultural competence, and cultivate acceptance, inclusion, and respect.



Objective #3: Support the continued awareness and understanding of developmental disabilities through sustainable self-advocacy and family support organizations, especially those comprised of parents of and persons with the most prevalent developmental disabilities of intellectual disabilities. Encourage groups' community education efforts to reduce stigma/promote inclusion and collaboration with Cultural and Linguistic Competence Coordinator on outreach and engagement strategies.

Objective #4: Encourage and support efforts to more fully integrate people with I/DD into community life in Champaign County. Emphasize inclusion as a benefit to all members of the community, regardless of ability.

Objective #5: Encourage efforts to support people with I/DD in meaningful work and non-work experiences in their community, driven by their own interests. Investigate and develop strategies for engaging employers and other community partners.

Goal #9: Stay abreast of emerging issues affecting the local systems of care and access to services, and be proactive through concerted advocacy efforts.

Objective #1: Intensify advocacy efforts on behalf of people with developmental disabilities. Advocate for positive change in state funding, including increased Medicaid reimbursement rates, and policy decisions affecting the local system of care for persons with developmental disabilities. Through participation in the Association of Community Mental Health Authorities of Illinois (ACMHAI), the National Association of County Behavioral Health and Developmental Disabilities Directors (NACBHDDD), and other appropriate organizations, support efforts to strengthen local systems of care.

Objective #2: Track state implementation of class action suit settlements involving people with I/DD and the closure of state DD facilities. Advocate for the allocation of state resources sufficient to meet needs of people returning to home communities. Monitor and support the implementation of the Ligas Consent Decree in Champaign County. Encourage and support efforts to develop 4-person (or fewer) residential options for people who are transitioning from large facilities and those selected from PUNS. For individuals not yet selected, and for those who have chosen Home-Based Support Services rather than CILA, encourage the development of preferred, flexible options.

Objective #3: Follow developments at the state and federal levels of other Olmstead cases. Follow the implementation of the Workforce Innovation and Opportunity Act and new Home and Community Based Services regulations and their impact locally.

Objective #4: As the State of Illinois and provider networks move to a regional service/managed care delivery model, track the implementation of managed care for I/DD services and supports and evaluate local impact. Adjust funding priorities to address service gaps and unmet need. Monitor the implementation of health care reform and Medicaid expansion and advocate for increased service capacity sufficient to meet demand.

Objective #5: Continue broad based advocacy efforts at the state and local levels to respond to reductions in state funding, reimbursement rates below actual cost, and delayed payments for local community-based intellectual disability and developmental disability services and supports and to the broader human services network under contract with the State of Illinois.