



Champaign County Developmental Disabilities Board (CCDDDB) Meeting Agenda

Wednesday, March 17, 2021, 9:00AM

Staff Office, #201 Brookens Administrative Building

1776 East Washington Street, Urbana, IL

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

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

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 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 - <https://us02web.zoom.us/j/81559124557> (page 3)
4. Approval of Agenda*
5. Citizen Input/Public Participation
The chairperson may limit public participation to five minutes per person.
6. Chairperson's Comments
7. Executive Director's Comments – Lynn Canfield
8. Approval of CCDDDB Board Meeting Minutes* (pages 4-7)
Minutes from 02/17/21 are included. Action is requested.
9. Expenditure List* (pages 8-9)
An "Expenditure Approval List" is included. Action is requested, to accept the list and place it on file.
10. New Business
 - A. Process for Board Review of Applications (page 10)
Included for information only is a spreadsheet listing agency requests for PY22 funding and reviewers for each. Staff program summaries will support discussion of applications in April.
 - B. Successes and Other Agency Information
Funded program providers and self-advocates are invited to give oral reports on individuals' successes. At the chairperson's discretion, other agency information may be limited to five minutes per agency.
11. Old Business

A. Unmet Residential Support Needs (**pages 11-14**)

A Briefing Memorandum offering updates related to the CCDDDB/CCMHB CILA project is included in this packet for information only.

B. CCDDDB and CCMHB Schedules and CCDDDB Timeline (**pages 15-18**)

C. Acronyms and Glossary (**pages 19-26**)

A list of commonly used acronyms is included for information.

12. CCMHB Input

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 Announcements

15. Adjournment

**Board action requested*

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Instructions for participating in Zoom Conference Bridge for CCDDB Meeting March 17, 2021 at 9:00 a.m.

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/81559124557>

Meeting ID: 815 5912 4557

One tap mobile

+13126266799,,81559124557# US (Chicago)

+16465588656,,81559124557# US (New York)

Dial by your location

+1 312 626 6799 US (Chicago)

+1 646 558 8656 US (New York)

+1 301 715 8592 US (Germantown)

+1 669 900 9128 US (San Jose)

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

Meeting ID: 815 5912 4557

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

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 CCDDB 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 BOARD FOR CARE AND TREATMENT
OF PERSONS WITH A DEVELOPMENTAL DISABILITY
(CCDDB)
BOARD MEETING**

Minutes –February 17, 2021

*This meeting was held remotely and with
representation at the Brookens Administrative Center.*

9:00 a.m.

MEMBERS PRESENT: Gail Kennedy, Anne Robin, Deb Ruesch, Georgiana Schuster

MEMBERS EXCUSED: Sue Suter

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

OTHERS PRESENT: Heather Levingston, Scott Burner, Sarah Perry, Nicole Sikora, Danielle Matthews, Laura Bennett, Annette Becherer, DSC; Katie Harmon, Lisa Benson, Regional Planning Commission (RPC); Becca Obuchowski, Community Choices; Mel Liong, Sherry Longcor, PACE; Amy Slagall, CU Able; Rachel Hatch, Citizen; Julie Palermo, CU Autism Network; Elise Belknap, Head Start; Leah Taylor, Champaign County Board

CALL TO ORDER:

Dr. Robin called the meeting to order at 9:01 a.m.

ROLL CALL:

Roll call was taken and a quorum was present. Executive Director Canfield was present at the Brookens Administrative Center per the Open Meetings Act.

APPROVAL OF AGENDA:

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

CITIZEN INPUT:

None.

PRESIDENT'S COMMENTS:

Dr. Robin provided a brief update on the Associate Director search.

EXECUTIVE DIRECTOR'S COMMENTS:

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

APPROVAL OF CCDDDB MINUTES:

Minutes from January 20, 2021 were included in the Board packet.

MOTION: Dr. Kennedy moved to approve the minutes from January 20, 2021. Ms. Schuster seconded the motion. A roll call vote was taken and the motion passed unanimously.

EXPENDITURE LIST:

The "Expenditure Approval List" was included in the packet.

MOTION: Ms. Ruesch moved to accept the Expenditure Approval List as presented in the packet. Dr. Kennedy seconded the motion. A roll call vote was taken and the motion passed unanimously.

NEW BUSINESS:

Mid-Year Progress Report:

Ms. Julie Palermo from CU Autism Network provided an update on the first six months of their Community Outreach Program. A copy of her presentation was included in the Board packet.

CCDDDB Application Review Process:

A Briefing Memo detailing the CCDDDB Application Review process, including the Allocation Timeline, was included in the packet. A review checklist was in the packet for information only. A list of applicants was added as addendum to the Board packet. Board members discussed being more involved in the review process.

Local Impacts of COVID-19:

A Briefing Memo regarding impacts of COVID-19 on several CCMHB and CCDDDB funded programs was in the packet for information only.

CCDDDB Eligibility Requirements:

A Briefing Memorandum regarding the current CCDDDB Eligibility Requirements and considerations for possible expansion was included in the Board packet for information only.

Unmet Residential Support Needs:

A Briefing Memorandum offering updates to the CCDDDB/CCMHB CILA project was included for information only. A one-page summary of Rate Study Recommendations, provided by the Illinois Council on Developmental Disabilities, The Arc of Illinois, Going Home Coalition and the Self Advocacy Alliance was included in the packet as well. Board members requested ongoing updates, perhaps as a regular Board agenda item.

Successes and Other Agency Information:

Annette Becherer from DSC , Becca Obuchowski from Community Choices, and Mel Liong from PACE provided updates on successes.

OLD BUSINESS:

Agency PY2021 2nd Quarter Program Reports:

Reports were included in the packet for review.

PY2021 2nd Quarter Service Data Charts:

2nd Quarter service hours and activities reports are included for information.

211 Quarterly Reports:

October through December 2020 reports for 211 calls for Champaign County are attached for information only.

Meeting Schedules:

CCDDDB and CCMHB meeting schedules were included in the packet for information only.

Acronyms:

A list of commonly used acronyms was included in the packet.

CCMHB Input:

The CCMHB will meet later in the day. They will review similar agenda items.

STAFF REPORTS:

Reports from Kim Bowdry, Stephanie Howard-Gallo, and Shandra Summerville were included in the Board packet.



BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 10:20 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo

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



CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

3/05/21

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VENDOR NO	VENDOR NAME	TRN B TR DTE N CD	TRANS NO	PO NO	CHECK NO	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
***	FUND NO. 108	DEVLPMNTL DISABILITY FUND								
***	DEPT NO. 050	DEVLPMNTL DISABILITY BOARD								
90	CHAMPAIGN COUNTY TREASURER									
	3/03/21 03 VR 108-	26	617165	3/05/21	108-050-533.07-00	PROFESSIONAL SERVICES		MAR ADMIN FEES		32,731.00
								VENDOR TOTAL		32,731.00 *
104	CHAMPAIGN COUNTY TREASURER									
	3/03/21 03 VR 108-	20	617167	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS		MAR SOC/EMOT DEV SV		1,788.00
								VENDOR TOTAL		1,788.00 *
161	CHAMPAIGN COUNTY TREASURER									
	3/03/21 03 VR 108-	19	617169	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS		MAR DECISION SUPPOR		25,957.00
								VENDOR TOTAL		25,957.00 *
11585	C-U AUTISM NETWORK									
	3/03/21 03 VR 108-	22	617194	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS		MAR COMM OUTREACH		1,250.00
								VENDOR TOTAL		1,250.00 *
11587	CU ABLE									
	3/03/21 03 VR 108-	21	617195	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS		MAR COMM OUTREACH		1,433.00
								VENDOR TOTAL		1,433.00 *
18203	COMMUNITY CHOICES, INC									
	3/03/21 03 VR 108-	23	617214	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS		MAR COMMUNITY LIVIN		7,416.00
	3/03/21 03 VR 108-	23	617214	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS		MAR CUSTOM EMPLOY		15,166.00
	3/03/21 03 VR 108-	23	617214	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS		MAR SELF DETERMINAT		12,166.00
								VENDOR TOTAL		34,748.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF CHAMPAIGN COUNTY INC									
	3/03/21 03 VR 108-	24	617227	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS		MAR CLINICAL SVCS		14,500.00
	3/03/21 03 VR 108-	24	617227	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS		MAR COMMUNITY EMPLO		30,114.00
	3/03/21 03 VR 108-	24	617227	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS		MAR COMMUNITY LIVIN		38,003.00

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CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

3/05/21

PAGE 10

VENDOR NO	VENDOR NAME	TRN B TR DTE N CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 108 DEVLPMNTL DISABILITY FUND										
		3/03/21 03 VR 108-	24		617227	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR CONNECTIONS	7,083.00
		3/03/21 03 VR 108-	24		617227	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR EMPLOYMENT FIRS	6,667.00
		3/03/21 03 VR 108-	24		617227	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR INDIV/FAMILY SU	35,754.00
		3/03/21 03 VR 108-	24		617227	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR SERVICE COORD	36,321.00
		3/03/21 03 VR 108-	24		617227	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR COMMUNITY FIRST	70,170.02
									VENDOR TOTAL	238,612.02 *
54930	PERSONS ASSUMING CONTROL OF THEIR									
		2/24/21 04 VR 108-	18		617051	2/26/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	JAN CONSUMER CONTRO	2,022.00
									VENDOR TOTAL	2,022.00 *
61780	ROSECRANCE, INC.									
		3/03/21 03 VR 108-	25		617316	3/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR COORD SVC DD/MI	2,929.00
									VENDOR TOTAL	2,929.00 *
									DEVLPMNTL DISABILITY BOARD	341,470.02 *
									DEVLPMNTL DISABILITY FUND	341,470.02 *
									REPORT TOTAL ****	769,601.36 *

(10)

I/DD Program Funding Requests for PY2022			Board Review	Board Review
July 1, 2021 thru June 30, 2022			PRIMARY	SECONDARY
Agency	Program Name	DDB/MHB		
<i>Priority: Self-Advocacy</i>				
CU Able	CU Able Community Outreach	\$23,643.00	Anne	Gail
CU Autism Network	Community Outreach Programs	\$38,000.00	Gail	Deb
Piatt County Mental Health Center	VOC Programming Support - NEW	\$27,000.00	Deb	Georgiana
<i>Priority: Linkage and Coordination</i>				
CCRPC - Community Services	Decision Support PCP	\$311,489.00	Georgiana	Sue
Developmental Services Center	Service Coordination	\$435,858.00	Sue	Anne
Piatt County Mental Health Center	CDS Program Support - NEW	\$34,000.00	Anne	Deb
Rosecrance Central Illinois	Coordination of Services: DD/MI	\$35,150.00	Deb	Gail
<i>Priority: Home Life</i>				
Community Choices, Inc.	Community Living	\$201,000.00	Gail	Sue
Developmental Services Center	Community Living (formerly Apartment)	\$456,040.00	Sue	Georgiana
<i>Priority: Personal Life and Resilience</i>				
Developmental Services Center	Clinical Services	\$174,000.00	Georgiana	Anne
Developmental Services Center	Individual & Family Support	\$429,058.00	Anne	Deb
PACE	Consumer Control in Personal Support	\$24,267.00	Gail	Georgiana
<i>Priority: Work Life</i>				
Community Choices, Inc.	Customized Employment	\$201,000.00	Georgiana	Deb
Developmental Services Center	Community Employment	\$361,370.00	Deb	Sue
Developmental Services Center/Community Ch	Employment First	\$80,000.00	Sue	Anne
<i>Priority: Community Life and Relationships</i>				
Community Choices, Inc.	Self-Determination Support	\$162,000.00	Georgiana	Gail
Developmental Services Center	Community First	\$847,659.00	Deb	Sue
Developmental Services Center	Connections	\$85,000.00	Anne	Georgiana
<i>Priority: Young Children and their Families (CCMHB focus)</i>				
Developmental Services Center	Family Development	\$596,522.00	Gail	Anne

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11.A.



BRIEFING MEMORANDUM

DATE: March 17, 2021
TO: Members, Champaign County Developmental Disabilities 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 CCDDDB and the Champaign County Mental Health Board (CCMHB). 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:

CCDDDB/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 I/DD 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.

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;
- 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

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- 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.

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11.B.

CCDDB 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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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*

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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.

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

This schedule provides dates and subject matter of meetings of the Champaign County Developmental Disabilities 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; topics will be based on issues raised at meetings, brought by staff, or in conjunction with the Champaign County Mental Health Board. Regular meetings of the CCDDDB are usually at 9AM; study sessions at 5:45PM. 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.

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|----------|---|
| 01/04/21 | <i>Online System opens for Agency Registration and Applications for PY2022</i> |
| 1/20/21 | Regular Board Meeting |
| 1/29/21 | <i>Agency PY2021 2nd Q Reports and CLC Progress Reports due</i> |
| 2/12/21 | <i>Agency deadline for submission of applications for PY2022 funding. Online system will not accept forms after 4:30PM.</i> |
| 2/16/21 | <i>List of Requests for PY2022 Funding assembled</i> |
| 2/17/21 | Regular Board Meeting |
| 3/17/21 | Regular Board Meeting |
| 3/24/21 | Study Session - tentative |
| 4/14/21 | <i>Program summaries released to Board; copies posted online with CCDDDB April 21, 2021 meeting agenda.</i> |
| 4/21/21 | Regular Board Meeting:
Program Summaries Review and Discussion |
| 4/30/21 | <i>Agency PY2021 3rd Quarter Reports due</i> |
| 5/12/21 | <i>Allocation recommendations released to CCDDDB; copies posted online with CCDDDB meeting agenda.</i> |
| 5/19/21 | Regular Board Meeting: Allocation Decisions |
| 6/23/21 | Regular Board Meeting: Approve FY2022 Draft Budget |
| 6/23/21 | <i>PY2022 Contracts Completed</i> |
| 7/21/21 | Regular Board Meeting: Election of Officers |

- 8/18/21 **Regular Board Meeting - tentative**
- 8/27/21 *Agency PY2021 4th Q Reports, CLC Progress Reports, and Annual Performance Measure Reports due*
- 9/15/21 **Joint Study Session with CCMHB (5:45PM)**
- 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
- 10/28/21 *Agency Independent Audits, Reviews, or Compilations Due*
- 10/29/21 *Agency PY2022 1st Quarter Reports Due*
- 11/17/21 **Regular Board Meeting**
Approve Three Year Plan with One Year 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**

11.C.

Agency and Program acronyms

- CC – Community Choices
- CCDDB – Champaign County Developmental Disabilities Board
- CCHS – Champaign County Head Start, a program of the Regional Planning Commission
- CCMHB – Champaign County Mental Health Board
- CCRPC – Champaign County Regional Planning Commission
- DSC - Developmental Services Center
- DSN – Down Syndrome Network
- FDC – Family Development Center
- PACE – Persons Assuming Control of their Environment, Inc.
- RCI – Rosecrance Central Illinois
- RPC – Champaign County Regional Planning Commission
- UCP – United Cerebral Palsy

Glossary of Other Terms and Acronyms

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

AAC – Augmentative and Alternative Communication

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

ABLE Act – Achieving a Better Life Experience Act. A tax advantage investment program which allows people with blindness or disabilities the option to save for disability related expenses without putting their federal means-tested benefits at risk.

ACA – Affordable Care Act

ACMHAI – Association of Community Mental Health Authorities of Illinois

ADA – Americans with Disabilities Act

ADD – Attention Deficit Disorder

ADHD – Attention Deficit/Hyperactivity Disorder

ADL – Activities of Daily Living

ASD – Autism Spectrum Disorder

ASL – American Sign Language

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

ASQ-SE – Ages and Stages Questionnaire – Social Emotional screen.

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BD – Behavior Disorder

BSP – Behavior Support Plan

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.

CARF- Council on Accreditation of Rehabilitation Facilities

CC – Champaign County

CDS – Community Day Services, formerly “Developmental Training”

CFC – Child and Family Connections Agency

CFCM – Conflict Free Case Management

C-GAF – Children’s Global Assessment of Functioning

CILA – Community Integrated Living Arrangement

CLC – Cultural and Linguistic Competence

CMS – Center for Medicare and Medicaid Services, the federal agency administering these programs.

CNA – Certified Nursing Assistant

COTA – Certified Occupational Therapy Assistant

CP – Cerebral Palsy

CQL – Council on Quality and Leadership

CSEs - Community Service Events. A category of service measurement on the Part II Utilization form. Activity to be performed should also be described in the Part I Program Plan form-Utilization section. 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.

CUSR – Champaign Urbana Special Recreation, offered by the park districts.

CY – Contract Year, runs from July to following June. For example, CY18 is July 1, 2017 to June 30, 2018. May also be referred to as Program Year – PY. Most contracted 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. FY18.

DCFS – (Illinois) Department of Children and Family Services.

DD – Developmental Disability

DDD – Division of Developmental Disabilities

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

DHS – (Illinois) Department of Human Services

DOJ – (US) Department of Justice

DRS – (Illinois) Division of Rehabilitation Services

DSM – Diagnostic Statistical Manual.

DSP – Direct Support Professional

DT – Developmental Training, now “Community Day Services”

DT – Developmental Therapy, Developmental Therapist

Dx – Diagnosis

ED – Emotional Disorder

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.

ED – Emergency Department

ER – Emergency Room

FAPE – Free and Appropriate Public Education

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, which for the County is January 1 through December 31.

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.

HBS – Home Based Services, also referred to as HBSS or HBSP

HCBS – Home and Community Based Services

HI – Hearing Impairment or Health Impairment

Hx – History

ICAP – Inventory for Client and Agency Planning

ICDD – Illinois Council for Developmental Disabilities

ICFDD – Intermediate Care Facility for the Developmentally Disabled

ID – Intellectual Disability

IDEA – Individuals with Disabilities Education Act

IDOC – Illinois Department of Corrections

IDPH – Illinois Department of Public Health

IDT – Interdisciplinary Team

IEP – Individualized Education Plan

IFSP – Individualized Family Service Plan

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.

I&R – Information and Referral

ISBE – Illinois State Board of Education

ISC – Independent Service Coordination

ISP – Individual Service Plan, Individual Success Plan

ISSA – Independent Service & Support Advocacy

LCPC – Licensed Clinical Professional Counselor

LCSW – Licensed Clinical Social Worker

LD – Learning Disability

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

LPC – Licensed Professional Counselor

LPN – Licensed Practical Nurse

MCO – Managed Care Organization

MDC – Multidisciplinary Conference

MDT – Multidisciplinary Team

MH – Mental Health

MHP - Mental Health Professional, a bachelors level staff providing services under the supervision of a QMHP.

MI – Mental Illness

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

MSW – Master of Social Work

NCI – National Core Indicators

NOS – Not Otherwise Specified

NTPC -- NON - Treatment Plan Clients. Persons engaged in a given quarter with case records but no treatment plan. May include: 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. The actual activity to be performed should also be described in the Part I Program Form, Utilization section. Similar to TPCs, they may be divided into two groups: New TPCS – first contact within any quarter of the plan year; Continuing NTPCs - those 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 Continuing NTPCs are reported.

OMA – Open Meetings Act.

OT – Occupational Therapy, Occupational Therapist

OTR – Registered Occupational Therapist

PAS – Pre-Admission Screening

PASS – Plan for Achieving Self Support (Social Security Administration)

PCI – Parent Child Interaction groups.

PCP – Person Centered Planning, Primary Care Physician

PDD – Pervasive Developmental Disorders

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.

PRN – when necessary, as needed (i.e., medication)

PSH – Permanent Supportive Housing

PT – Physical Therapy, Physical Therapist

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 individual's classification of need may be emergency, critical, or planning.

PY – Program Year, runs from July to following June. For example, PY18 is July 1, 2017 to June 30, 2018. May also be referred to as Contract Year (CY) and is often the Agency Fiscal Year (FY).

QIDP – Qualified Intellectual Disabilities Professional

QMHP – Qualified Mental Health Professional, a Master’s level clinician with field experience who has been licensed.

RCCSEC – Rural Champaign County Special Education Cooperative

RD – Registered Dietician

RN – Registered Nurse

RT – Recreational Therapy, Recreational Therapist

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

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

SCs - Service Contacts/Screening Contacts. The number of phone and face-to-face contacts with eligible persons who may or may not have open cases in the program. 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 form, and the activity to be performed should be described in the Part I Program Plan form-Utilization section.

SEDS – Social Emotional Development Specialist

SEL – Social Emotional Learning

SF – Service Facilitation, now called “Self-Direction Assistance”

SH – Supportive Housing

SIB – Self-Injurious Behavior

SIB-R – Scales of Independent Behavior-Revised

SLI – Speech/Language Impairment

SLP – Speech Language Pathologist

SPD – Sensory Processing Disorder

SSA – Social Security Administration

SSDI – Social Security Disability Insurance

SSI – Supplemental Security Income

SST – Support Services Team

SUD – Substance Use Disorder

SW – Social Worker

TIC – Trauma Informed Care

TPC – Transition Planning Committee

TPCs - Treatment Plan Clients - 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, and the actual activity to be performed should also be described in the Part I Program Plan form -Utilization section. Treatment Plan Clients may be divided into two groups: Continuing TPCs are those 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); New NTPCs are those newly served, with treatment plans, in any quarter of the program year.

VI – Visual Impairment

VR – Vocational Rehabilitation

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.

WIOA – Workforce Innovation and Opportunity Act