CHAMPAIGN COUNTY MENTAL HEALTH BOARD



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

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

Champaign County Mental Health Board (CCMHB)

WEDNESDAY, November 18, 2015

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

4:30 p.m.

- 1. Call to Order Dr. Townsend, President
- 2. Roll Call
- 3. Citizen Input/Public Participation
- 4. Additions to the Agenda
- 5. CCDDB Information (*Pages 4-7*)

 Draft minutes from the 10/21/15 meeting is attached for information only.
- 6. Approval of CCMHB Minutes
 - A. 10/1/15 Board meeting* (*Pages 8-14*)

 Minutes are included in the packet. Action is requested.
- 7. President's Comments
- 8. Executive Director's Comments
- 9. Staff Reports
 Reports from Mr. Driscoll (Pages 15-16), Ms. Canfield
 (Pages 17-20) are included in the packet.

BROOKENS ADMINISTRATIVE CENTER

1776 E. WASHINGTON STREET

URBANA, ILLINOIS 61802

- 10. Consultant Report (Pages 21-38)

 A report from Ms. Bressner is included in the packet.
- 11. Board to Board Reports
- 12. Agency Information
- 13. Financial Information* (Pages 39-58)

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

14. New Business

A. FY17 Allocation Priorities Decision Support Criteria* (Pages 59-65)

Decision Memorandum detailing allocation priorities and decision support criteria for the 2017 allocation cycle is included in the Board packet. Action is requested.

- B. CCDDB Allocation Criteria (Pages 66-73)
 Included in the Board packet for information only is a copy of the CCDDB allocation criteria Decision Memorandum.
- C. Promise Healthcare Psychiatry Funding Request* (Pages 74-78)

 Decision Memorandum details Promise Healthcare request for financial support to transition the psychiatric services program from Community Elements. Action is requested.
- D. County Board Motion on READY School* (Pages 79-83)

Decision Memorandum on communicating to the County Board past investment in school-based services provided at READY School and need to address other emergent priorities. Action is requested.

15. Old Business

A. Community Elements Request to Reallocate Funds* (Pages 84-87

Decision Memorandum details Community Elements request to redirect unspent funds from four FY15 contracts to support psychiatric services is included in the Board packet. Action was deferred at the October meeting and is being brought back for reconsideration. Action is requested.

B. Three-Year Plan with One Year Objectives* (Pages 88-96)

Decision Memorandum with Three-Year Plan is included in the Board packet. Action is requested.

C. Communication Process

Communication between Board members and between the Board and staff within the terms of Open Meetings Act will be addressed. Discussion originally planned for the retreat was deferred to the November Board meeting.

16. Board Announcements

17. Adjournment

*Board action



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

Minutes –October 21, 2015

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



6:00 p.m.

MEMBERS PRESENT:

Joyce Dill, Phil Krein, Deb Ruesch, Mike Smith, Sue Suter (by

telephone)

STAFF PRESENT:

Lynn Canfield, Nancy Crawford, Stephanie Howard-Gallo

STAFF EXCUSED:

Mark Driscoll, Peter Tracy

OTHERS PRESENT:

Dale Morrissey, Felicia Gooler, Ron Bribrisco, Developmental Services Center (DSC); Gary Maxwell, Pattsi Petrie, Sam Shore, Champaign County Board; Judi O'Connor, Champaign County Mental Health Board (CCMHB); Barb Bressner, Consultant; Jennifer Knapp, Community Choices; Dylan Boot, Persons Assuming Control of their Environment (PACE); Kathy Kessler, Community Elements (CE); Lisa Benson, Regional Planning Commission (RPC); Anita Stein, parent; Shandra Summerville,

ACCESS Initiative (AI)

CALL TO ORDER:

Dr. Phil Krein called the meeting to order at 6:01 p.m.

MOTION: Mr. Smith moved to allow Ms. Suter to attend the Board meeting by telephone due to her recent surgery as is allowed in the CCDDB By-Laws. Ms. Ruesch seconded the motion. Krein, Ruesch, Dill and Smith all voted aye. The motion passed and Ms. Suter was allowed to attend the meeting via telephone.



ROLL CALL:

Roll call was taken and a quorum was present.

ADDITIONS TO AGENDA:

None.

CITIZEN INPUT:

None.

CCMHB INPUT:

The CCMHB Retreat is scheduled for October 27th in the Lyle Shields Room at 8:30 a.m.

APPROVAL OF CCDDB MINUTES:

Minutes from the September 25, 2015 CCDDB meeting were included in the Board packet.

MOTION: Ms. Ruesch moved to approve the minutes from the September 25, 2015 CCDDB meeting. Ms. Dill seconded the motion. A voice vote was taken and the motion passed unanimously.

PRESIDENT'S COMMENTS:

Dr. Krein reviewed details regarding the Board retreat and the disAbility Expo that was held on October 17th.

EXECUTIVE DIRECTOR'S REPORT:

None.

STAFF REPORT:

Ms. Canfield's written report was included in the Board packet.

AGENCY INFORMATION:

Jennifer Knapp from Community Choices announced that "champions" had been selected for Employment First and the businesses selected are Planet Fitness and Rockwell Automation. The "champions" are businesses that have been supporters of employing clients of Employment First. Community Choices staff members have been attending several trainings.





Dylan Boot from Persons Assuming Control of their Environment (PACE) provided an update on PACE activities. Two support groups have been formed. One focuses on basic independent living skills and the other is a job readiness group.

Dale Morrissey from Developmental Services Center (DSC) stated the state's BALC reviewed the Developmental Training program and awarded the program a score of 100%. BQM is currently reviewing several other programs of the agency.

Jennifer Carlson, program director of residential services at DSC was awarded one of the "40 under 40" awards.

Mr. Morrissey also provided an update on staff shortages. Due to the shortage, CILA homes are not yet fully staffed. He urged political activism and working with other state associations to advocate for rate increases equivalent to those of home healthcare workers.

FINANCIAL REPORT:

A copy of the claims report was included in the Board packet.

MOTION: Mr. Smith moved to accept the claims report as presented. Ms. Dill seconded the motion. A voice vote was taken and the motion passed unanimously.

NEW BUSINESS:

Cultural and Linguistic Competence Progress Report:

Ms. Shandra Summerville, Cultural and Linguistic Competence Coordinator presented a progress report regarding how our funded agencies are doing with their Cultural Competence Plans. Several handouts were distributed.

FY17 Allocation Criteria:

A Draft Briefing Memorandum regarding FY17 Allocation Priorities and Decision Support Criteria was included in the Board packet. This document will be discussed in depth at the October 28, 2015 Board retreat. Mr. Smith requested the document be reformatted to depict proposed changes to the document with highlights and strike-outs. Dr. Krein offered to work on the document.

Draft Three-Year Plan 2016-2018 with FY16 Objectives:

A Briefing Memorandum providing an environmental scan and a draft Three-Year Plan with Objectives for FY16 was included in the packet for information only. A final draft of the plan will be presented for approval at the November 18, 2015 meeting.

Planning for October 28, 2015 Retreat:

A draft agenda for the retreat was included in the Board packet. The retreat will be from 8:30 a.m. until 1 p.m. in the Lyle Shields Room at the Brookens Administrative Center.



Integration Transition Successes:

Mr. Dale Morrissey with Developmental Services Center (DSC) reported the Dunbar Home in Mahomet is ready to open for clients; however, they have thus far been unable to find staff for the house.

Ms. Jennifer Knapp from Community Choices reported a client had recently moved into her own apartment. Another client has moved out of his family home and is learning how to navigate the bus system.

FY15 Program Performance Outcome Reports and Data Summaries:

Copies of the Annual Performance Outcome Reports submitted per ID/DD program (including CCMHB funded ID/DD contracts) were included in the packet for information only, along with summaries of Demographic and Zip Code data reported throughout the year for each program.

OLD BUSINESS:

disAbility Resource Expo:

Ms. Barb Bressner reported there were 98 exhibitors at this year's 9th Annual Expo that was held on October 17, 2015. There were 28 tables of artwork from the Expo artists. Surveys have been compiled and will be presented at the November Board meeting.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 7:10 p.m. Respectfully Submitted by: Stephanie Howard-Gallo

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





CHAMPAIGN COUNTY MENTAL HEALTH BOARD BOARD MEETING

Minutes—October 1, 2015

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



4:30 p.m.

MEMBERS PRESENT:

Aillinn Dannave, Susan Fowler, Deloris Henry, Thom Moore, Judi

O'Connor, Julian Rappaport, Deborah Townsend

MEMBERS EXCUSED:

Astrid Berkson, Anne Robin

STAFF PRESENT:

Peter Tracy, Executive Director; Lynn Canfield, Nancy Crawford,

Mark Driscoll, Stephanie Howard-Gallo, Tracy Parsons

OTHERS PRESENT:

Sheila Ferguson, Juli Kartel. Community Elements (CE); Dale Morrissey, Patty Walters, Danielle Matthews, Jennifer Carlson, Annette Becherer, Laura Bennett, Developmental Services Center (DSC); Gary Maxwell, Pattsi Petrie, Champaign County Board;

Bruce Suardini, Prairie Center Health Systems (PCHS);

CALL TO ORDER:

Dr. Townsend, President, called the meeting to order at 4:30 p.m.

ROLL CALL:

Roll call was taken and a quorum was present.

CITIZEN INPUT / PUBLIC PARTICIPATION:

None.



ADDITIONS TO AGENDA:

Dr. Henry requested the agenda item "ACCESS Initiative Sustainability Plan" be added to the agenda. Dr. Moore requested the agenda item be discussed immediately since Mr. Tracy Parsons was in attendance, but had to leave for another meeting soon.

Although, the ACCESS Sustainability Plan was passed by the CCMHB, the budget transfer that would have allowed the CCMHB to sustain 2 positions did not pass through the County Board.

Mr. Parsons thanked the Board for their support, leadership and progressive thought. He stated the ACCESS Initiative was a complex and challenging project. He and his team are proud of the work they have done, although the scrutiny surrounding the program over the past year has been disheartening. Dr. Moore and Dr. Rappaport praised the work of the ACCESS Initiative. Dr. Rappaport stated this was most well-evaluated and observed program that is funded by the Board.

Dr. Fowler stated she has questions regarding the communication process and would like to discuss the issue later in the meeting or the Board retreat.

CCDDB INFORMATION:

Draft minutes from the 7/10/15 and 7/22/15 CCDDB meetings were included in the packet for information only.

APPROVAL OF MINUTES:

Minutes from the 6/23/15 Board meeting was included in the Board packet for approval.

MOTION: Dr. Henry moved to approve the minutes from 6/23/15 as presented in the packet. Dr. Moore seconded the motion. A voice vote was taken and the motion passed.

PRESIDENT'S COMMENTS:

Dr. Townsend thanked the ACCESS Initiative for their work and vowed to see that the work of the project will continue.

EXECUTIVE DIRECTOR'S COMMENTS:

None.

STAFF REPORTS:

Written staff reports from Mr. Driscoll and Ms. Canfield were included in the Board packet.





BOARD TO BOARD:

Dr. Henry attended the Association of Community Mental Health Authorities of Illinois (ACMHAI) conference in September.

Dr. Fowler has been reviewing the minutes for Crisis Nursery (CN) and Community Elements (CE) and both agencies are struggling due to the state budget cuts.

Ms. O'Connor attended the Board meeting and open house of Community Choices.

Dr. Rappaport attends the Crisis Intervention Training meetings and acknowledged the work of Mr. Driscoll and Ms. Canfield.

AGENCY INFORMATION:

Ms. Sheila Ferguson from Community Elements (CE) discussed administrative layoffs and budget cuts. She announced that along with Champaign County and the Sherriff's Office, Community Elements received the Justice and Mental Health Collaboration program federal grant. TIMES Center will have a benefit on October 9th at Fat City in Champaign, IL

Jennifer Knapp from Community Choices spoke about the need for natural supports in the community in times of crisis.

Patty Walters from Developmental Services Center (DSC) acknowledged recent site visits from Ms. Canfield and Ms. Howard-Gallo. She also reported on gaps in services and an occasion where funds from the CCMHB were available to fill a gap. An Employment First unveiling of the project's logos recognition awards will take place at the disAbility Resource Expo on October 17, 2015.

FINANCIAL INFORMATION:

A copy of the claims report was included in the Board packet.

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

NEW BUSINESS:

Planning for October 27th Retreat:

Planning is underway for the October 27th CCMHB Retreat. Subjects to be discussed are: Evaluation; Funding Priorities; and, Communication Process. Dr. Townsend requested retreat materials be sent out in advance of the meeting.



Community Elements (CE) Request to Reallocate Funds:

A Decision Memorandum detailing Community Element's (CE) request to redirect unspent funds from four FY15 contracts to support psychiatric services was included in the Board packet.

In mid-August, Community Elements informed staff the State had not yet renewed three standing contracts for FY16. One of those contracts supports psychiatric services. The ramifications of the state budget stalemate and the State's delay in issuing this specific contract has the potential to further reduce access to psychiatric care. Community Elements has requested permission to use unspent funds from FY15 and redirect funds from an FY16 contract to continue psychiatric services in the new fiscal year that would be covered by the state contract. The Board's approval is required to reallocate the FY15 funds to the FY16 CCMHB Psychiatric/Primary Care Services contract.

Community Elements request seeks reallocation of payments received but not expensed under three grant contracts in FY15 and authorization to access funds obligated but not paid out under one FY15 fee for service contract. The grant funds are in Community Elements possession. The balance of the fee for service (FFS) contract that was not billed out in FY15 would require a payment be issued by the Board.

The request also included redirection of \$8,649 from the FY16 Parenting with Love and Limits (PLL) contract to the FY16 Psychiatric/Primary Care Services contract. Due to a change in staffing under the PLL contract, plans were already in place to reduce the maximum payable under the PLL contract by amendment. Staff, under existing authority, has issued a companion amendment increasing the maximum payable of the Psychiatric/Primary Care Services contract thereby redirecting the funds.

Consideration of such a request by the Board is out of the ordinary as it invokes the out of cycle funding request policy. There are mitigating factors that does allow for such consideration.

- The request is driven by the state budget crisis and lack of state contract for psychiatric services.
- Psychiatry is a core element of mental health treatment but due to a shortage of psychiatrists in Champaign County is difficult to access and consistently has a waitlist for services.
- Community Elements is committing reserves to offset losses incurred to continue to services without a state contract and pursuing other options for patient care as the agency seeks support from other funders and payers.
- The agency has already been paid the funds and would not require the Board to expend additional funds except for the \$4,292 associated with the FY15 TIMES Center contract.
- The reallocated funds would only be used to pay for costs that are an eligible expense under the state contract.
- Community Elements also commits to working with the CCMHB staff regarding redirection and/or return of any resulting excess if funding is restored by the state, be it at 100 percent or a portion thereof, with language to that effect included in the amendment if approved.



Due to the mitigating factors cited, it is the recommendation of staff to approve Community Elements request to reallocate FY15 funds to the FY16 Psychiatry/Primary Care Services. An amendment would be issued to increase the maximum obligation of the FY16 Psychiatry/Primary Care Services with terms of use and potential return or redirection stipulated.

In order to manage and track the revenue and expense associated with reallocation of funds as part of the annual financial audits for FY15 and FY16, Community Elements would be required to return FY15 excess grant revenue in the amount of \$24,900 and then be issued a payment of \$29,192 that includes unbilled balance of the FY15 TIMES Center contract.

MOTION: Dr. Deloris Henry moved to follow the CCMHB policy of not considering out of cycle requests for funding. There was no second to the motion.

MOTION: Dr. Rappaport moved to approve the increase in the FY16 Psychiatry/Primary Care Services contract maximum in the amount of \$29,192. The \$29,192 shall be paid in a lump sum utilizing funds returned by Community Elements as FY15 excess grant revenue of \$24,900 and plus payment of the \$4,292 balance of the under billed FY15 TIMES Center contract. Ms. Dannave seconded the motion.

Board members generally discussed out of cycle funding and this request in particular extensively.

Mr. Tracy stated information had very recently been received that the County Board had a provision added to the CCMHB budget that needs to be assessed. They are asking a program at the READY school in the amount of \$53,000 be considered for funding. In order to consider this request, the CCMHB budget would need to be reviewed again. Mr. Tracy suggested the Board may want to defer this request until that can be done. Dr. Rappaport would like extensive details of this request from the County Board.

Dr. Rappaport withdrew his motion and Ms. Dannave agreed.

MOTION: Dr. Moore moved to defer the request from Community Elements until the next meeting so that more information can be received regarding the CCMHB budget. Dr. Henry seconded the motion. A voice vote was taken and the motion passed to defer.

Youth and Family Support Peer Support Alliance Space Request:

A Decision Memorandum detailing the Youth and Family Peer Support Alliance space request was included in the Board packet.

The Youth and Family Peer Support Alliance organization has been a key component of the ACCESS Initiative and is also a critical element of the Sustainability Plan approved by the CCMHB in November 2015. This is the organization responsible for assuring that the ACCESS



Initiative was "family-driven and youth-guided" as required by the Cooperative Agreement. In the future, we will also look to this organization to assure the CCMHB is family-driven and youth-guided. During the course of the ACCESS Initiative operations, the Youth and Family Peer Support Alliance was given administrative office space at the existing ACCESS Initiative Office in the Brookens Administrative Center. This arrangement has worked well for all parties. Mr. Tracy Parsons received a request from Ms. Regina Crider, Executive Director of the Youth and Family Peer Support Alliance, for the CCMHB to continue this arrangement and allow them to use this office space through June 30, 2016. If approved, it will be necessary to calculate the square footage and calculate the proportionate amount for of the rent, and back this number out of the CCDDB administration calculation.

Discussion ensued. Ms. Crawford stated the cost of the office space is \$1,261 per month. For a 9 month period, the cost would be \$11,349. Mr. Tracy stated the cost would be less than that because the organization would only use part of the space. Mr. Tracy stated this is office space he intends to keep for the CCMHB to use regardless.

MOTION: Dr. Fowler moved to approve extension of the arrangement to provide office space in the Brookens Administrative Center for the Youth and Family Peer Support Organization as an in-kind contribution From October 1, 2015 through June 30, 2016. Ms. Dannave seconded the motion. A roll call vote was taken. The following members voted aye: Dannave, Henry, Moore, Rappaport, Townsend. The following members voted nay: O'Connor. The following member abstained: Fowler. The motion passed.

Behavioral Health Jail Diversion Initiative:

A lengthy Briefing Memorandum reviewed past and current activity related to the need for an alternative to jail for individuals with behavioral health conditions having contact with law enforcement was included in the Board packet for information only. A public hearing regarding the subject was held September 30, 2015 and sponsored by the CCMHB and the Champaign County Sheriff's Office.

Draft Three-Year Plan with FY16 Objectives:

A Briefing Memorandum and draft three-Year Plan with Objectives for FY 2106 was included in the Board packet.

Draft Meeting Schedule:

A draft schedule of CCMHB meeting dates and topics including timeline for the 2017 allocation process was included in the Board packet.

OLD BUSINESS:

Systemic Evaluations for Funded Programs:

Systemic evaluation will be discussed at the Board retreat.





disAbility Resource Expo:

A written report from Ms. Barb Bressner was included in the Board packet. Ms. Crawford stated we have received \$15,000 in Expo donations and there will be 102 exhibitors. The Expo will be held October 17, 2015 at the Fluid Event Center.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 6:40 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo

CCMHB/CCDDB Staff

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







Mark Driscoll Associate Director for Mental Health & Substance Abuse Services

Staff Report - November 18, 2015 Board Meeting

Summary of Activity

<u>CCMHB Three-Year Plan with Objectives for FY 2016</u>: Included under Old Business is the Three-Year Plan (2016 - 2018) with Objectives for FY 2016 for final consideration and approval by the Board.

<u>CCMHB Retreat</u>: Executed plans for the retreat. This included facilitating a meeting with the program evaluation team and coordinating set-up of the room with administrative services. While most of the materials in the packet were readily accessible the spreadsheet on CCMHB funding as a percentage of total program and total agency funding had to be created using revenue projections from the FY16 applications. As part of that exercise, I prepared supplemental spreadsheets by program and agency that grouped all other funding sources into various categories and calculated the percentages for each category. The five categories are state grants, federal grants, Medicaid/fee for service, other local funds, and donations/other. Another spreadsheet breaking out contracts by area of emphasis, e.g. criminal justice-mental health, was also updated and a copy distributed after the retreat.

Continuum of Care Monitoring Committee: The Champaign County Continuum of Care is now required by the Department of Housing and Urban Development (HUD) to self-monitor awards made on behalf of the continuum by HUD. I have agreed to serve on the monitoring committee. Several planning meetings have been held as the committee reviewed HUD requirements and decided on a monitoring tool to use on the site visits. The six members of the committee have divided into three teams and are in the process of completing site visits. I have participated in the two visits assigned and in preparing the reports.

In related news, the Emergency Shelter for Families is expected to open after the first of the year. The shelter will have eight units. Length of stay is limited to 30 days. Case management will be provided to shelter residents under a grant awarded to the Regional Planning Commission by United Way.

<u>Criminal Justice – Mental Health</u>: Following the public dialogue community event on September 30th, I wrote up my notes while incorporating written comments received after the event. Stephanie Howard-Gallo then used that initial draft to prepare a formal record of the event. The draft document has been shared with the systems work group that organized the public dialogue.

Related criminal justice-mental health activity has included participation in meetings of the Reentry Council, the Crisis Intervention Team-Steering Committee (CIT-SC) and Community Elements Forensics Team. The Reentry Council meeting included a presentation on The Salvation Army's Employment and Training Program targeted to convicted felons. The CIT-SC was informed the fall CIT training has been cancelled due to the state budget crisis. The class may be rescheduled for May 2016. The East Central



Illinois Police Training Project - Mobile Unit #12 housed at the Champaign County Regional Planning Commission is responsible for coordinating a wide range of police training programs including CIT training. Two sessions of Mental Health First Aid for Public Safety Officers are scheduled for November. Lt. Joel Sanders, Urbana Police Department is the certified trainer.

The planning body for the DoJ Justice and Mental Health Collaboration grant is being organized. With Peter Tracy's consent, I will be serving on the Crisis Response Planning Committee. Also regarding the DoJ grant award, the CCMHB as part of the FY16 allocation process approved matching funds that would be allocated to Community Elements. While the prospect of an amendment/contract has been discussed with Community Elements the amendment is on hold while the grant award between the county and DoJ is executed.

Quarterly Report Activity: First quarter reports were due by the last Friday of October. All programs for which I am responsible have submitted reports. I have also taken on responsibility for the system of care contracts previously under the purview of the Access Initiative Project Director. Each of the quarterly reports has been reviewed and where necessary clarification or corrections requested and addressed. As part of the review process, the excel spreadsheets used to track utilization have been updated and first quarter report data posted. Spreadsheets have also been created for the system of care programs. Hard files for each program have also been created. The files include the approved program applications and as the year progresses program specific related notes and records will be added to the files.

Participated in the FY16 first quarter reviews of the PLL-FE and PLL-EC programs completed by Savannah Family Institute. Engagement rates (percent of families completing intake that attend groups) for both teams in the first quarter were over 80%. However, the teams are having difficulty making initial contact with referred families to complete the motivational interview and schedule an intake. The PLL-EC program is currently operating with two therapists as one member of the team recently resigned.

To close out FY15 I have read through all submitted program performance outcome reports. The reports will be discussed with agencies during upcoming monitoring visits. Copies of these reports have also been provided to the program evaluation team.

Audits for the preceding contract year were also due the end of October. Several agencies requested an extension to the deadline and were formally notified their extension had been approved.

<u>School Based Services/READY School</u>: Researched past contract awards to support school based services with particular attention to services delivered onsite at READY School. The report detailing my findings has been included in background section of the Decision Memo pertaining to Champaign County Board budget motion.



Lynn Canfield, Associate Director for Intellectual and Developmental Disabilities Staff Report – November 18, 2015

Board Documents and Activities: The board packet contains final drafts of an FY2017 Funding Priorities memo and Three Year Plan for Fiscal Years 2016-2018 with One Year Objectives for Fiscal Year 2016; input from stakeholders and board members has been incorporated. Each of the CCDDB and the Champaign County Mental Health Board (CCMHB) held a strategic planning retreat in late October, and these conversations provided staff with direction for the final versions of documents and for future activities, one being an early spring study session with Melissa Picciola of Equip for Equality. Demographic and residency data for all of Champaign County has been compiled from 2010 census data and organized into data sets similar to those used in funded agencies' required quarterly reports, for clearer comparison with FY15 agency results.

FY2015 Contracts: Ms. Howard-Gallo and I have scheduled the remaining monitoring visits of all CCDDB and CCMHB I/DD funded programs. In follow up to Community Choices' visits, Jennifer Knapp proposed a work group of ID/DD agency intake staff to recommend a streamlined protocol for demonstrating a qualifying diagnosis, given that CCDDB and CCMHB policy aligns with that of Illinois Department of Human Services Division of DD and its complicated determination process. I spoke with staff of two other funded programs about taking this approach to a shared problem, and initial response was positive.

Alliance for the Promotion of Acceptance, Inclusion, and Respect; disABILITY Resource Expo; and More Anti-Stigma: After numerous recent reminders of the challenges related to stigma, I emailed the Ebertfest/Alliance steering committee for input on issues and to schedule a full group meeting. The Festival will be held April 13-17, 2016. Because this is a hard group to assemble, one topic iswhether to proceed as in the previous cycle, relying on email discussion and small workgroup meetings. With new partners on the UIUC Ebertfest team, there will likely be more activity than less, and we are considering applying for student support through the Community Learning Lab. Support for Alliance artists continues: Carol D's knit hats are featured at Crossroads Corner Consignment (see attached ad), and other artists' paintings are planned for at Café Kopi and two potential new venues. I will speak at the November 21st Substance Abuse and Mental Health Rally at Fluid Events, coordinated by a Social Work student who spoke at the jail diversion public meeting September 30th. See this board packet for Ms. Bressner's wrap up report of the 9th Annual disABILITY Resource Expo and results of surveys completed by exhibitors and participants; except for a few hard-to-retrieve yard signs, the event may have been our smoothest.



Association Committee Calls and Miscellaneous Webinars:

I participated in an Association of Community Mental Health Authorities of Illinois (ACMHAI) Legislative committee conference call with an update on General Assembly activities, three meetings of the Executive Committee, and one of the officers only, reviewing bylaws and discussing the transition from no paid staff and two temporary consultant contracts to one Association Coordinator. Peter Tracy, Nancy Crawford, and I met with the new Coordinator when she made a tour of central Illinois member offices. The bimonthly meeting of the ID/DD committee was cancelled due to holiday schedules; we will 'meet' again in January. The next quarterly meeting of the membership will be on December 3 and 4 in Chicago, with the training topic being updates in I/DD. Contact me if you have an interest in attending.

The National Association of County Behavioral and Developmental Disabilities Directors (NACBHDD) I/DD committee call on October 27 was a long-awaited roundtable, some of which I mentioned during the CCDDB retreat. No state represented on the call (Ohio, Iowa, Illinois, Virginia, and Oregon) has full confidence in its ability to implement the integration mandates in a meaningful, permanent way, with or without a response from CMS to its transition plan. In addition, Iowa is focused on a problematic transition to Managed Care by January 1, which should capture our attention as they are a neighbor and fellow "Medicaid expansion state.' Our next call will continue this discussion and also respond to a draft position paper being prepared for NACBHDD's late February Legislative and Policy Conference.

The October 14th Office of Disability Employment Policy (ODEP) webinar addressed provider transformation (from workshop to integrated community supports for work and non-work day activities.) Speakers were from Iowa, Maine, Massachussetts, and Vermont and all described positive results that required several years of careful – and funded – planning and implementation. Some keys to success were: using more than one approach; building capacity; connecting providers to each other; supporting with technical assistance, creativity, and flexibility; engaging all agency employees in the transformation process; engaging external partners (beyond service providers); setting consistent staff qualifications across systems (certification for job training/coaching, e.g.); refocusing the waivers and acknowledging that rates wouldn't support desired outcomes; committing to families a safe and meaningful day for their loved ones; and state agencies' (DD and Vocational Rehab) cofunding programs.

The National **LEAD Center** is funded by ODEP/US Department of Labor. On October 22, they hosted a **webinar titled "Disability, Employment, & Lane v. Brown."** Presenters from the US Department of Justice provided background for the three significant cases applying the ADA's theme of access and integration to all life activities: US versus Rhode Island and the City of Providence; US versus Rhode Island; and US versus Oregon (aka Lane v. Brown). They referenced the July 2015 Harris Poll findings suggesting the critical role of culture change, promoting inclusion



and reducing stigma. Some provisions of the Oregon settlement: incentives for providers who connect people to jobs of greater than half-time; half of youth to have an individual plan for employment; goals for all in supported employment; Dept of Education to improve employment-focused transition services; and more, guidance at http://ada.gov/olmstead. Other speakers were from UCP Oregon and Southwest Washington, Oregon's Department of Human Services — Employment First, and the National Disability Institute. Effective strategies: a transition network around Education; counseling on benefits and planful earnings; targeted case management, brokerage, and supportive services; creating a buzz and utilizing feedback from subject matter experts in order to make it work at a local level.

Other Activity: I requested further information from the "crisis cases" consultant, who remains concerned for families, as she has not been able to facilitate a placement, citing provider capacity as a primary barrier. I attended a meeting of the CIT Steering Committee. CIT training for this fall has been cancelled, a casualty of Illinois' budget impasse, so the next session will occur in May. Other challenges are related to funding, logistics (i.e., preparing five law enforcement agencies to track through the ARMS database consistently), current difficult cases, coordinating across systems, and stigma. Mark Driscoll was also present and shared detail on recent board activity. On November 6, I attended the Office of Diversity, Equity, and Access' 30th Annual Celebration of Diversity. I also met with the mother of a young man who has a severe mental illness and is in prison; we connected with Representative Ammons' office and learned of the Education Justice Project, run by Rebecca Ginsberg, with a support group approach for family members, working on awareness and education.



ALLIANCE for Promotion of Acceptance, Inclusion, and Respect

HOLIDAY SALE AT CROSSROADS CORNER CONSIGNMENT

FEATURED ARTIST

Carol Decker is 71 years young and loves to be busy!

She latch-hooks rugs, pillows, and wall hangings, embroiders pillow cases and towels, and fashions beaded earrings, bracelets, and watch bands. Her latest hobby is to create knitted hats using a loom. She hopes to graduate to making scarves soon and is now learning how to crochet potholders and washcloths. Carol worked at Arby's for a number of years. She has also always loved to work and keep her hands busy with something. She loves to go to Gordyville and flea markets and likes to share her hobbies with her friends.



Carol has been involved in Expo and Ebertfest art shows, has sold her fashionable bracelets at hair salons, and takes special orders... If you have a new craft to suggest, Carol would love to try it.

This holiday season, look for her warm and sunny (and reasonably priced) knit caps at the Crossroads Corner Consignment Store!



CHAMPAIGN COUNTY

FOR THE PROMOTION OF

Acceptance, Inclusion, & Respect

Your purchase of an Alliance artist's product and your patronage of a valued Community Business Partner's shop helps build an inclusive, integrated community, one sale at a time.

All suggestions and questions are welcome. http://facebook.com/allianceforAIR Phone: 217-367-5703 E-mail: lynn@cemhb.org





disABILITY Resource Expo: Reaching Out For Answers Board Report November, 2015

The 9th annual disABILITY Resource Expo was held on Saturday, October 17, 2015 at the Fluid Event Center in Champaign. Once again, we had a great attendance, showing us that individuals and families throughout east central Illinois are hungry for resources to enhance the lives of individuals with disabilities.

Exhibitors - A total of 98 exhibitors shared information, resources and technology with our visitors. There were a total of 17 new exhibitors this year. Of those 98 exhibitors, 24 were for-profit. General categories represented by exhibitors were Advocacy, Legal and Service Organizations, Education and Recreation, Health Care and Equipment, Self-Help and Support Groups, Vocational and Residential, and Transportation Resources (Please see attached Exhibitor Evaluation Summary).

Children and adults enjoyed playing and learning from the "Amazing Service Dogs" game this year. A dozen pictures of service dogs doing various tasks were hidden throughout the general exhibitor area. Once a picture was located, the child or adult could read about how that particular service dog impacted the life of their owner. When the hunt was completed, they could happily claim a prize.

New this year was an interactive mural that depicted persons with a disability engaging in various types of sports and other activities. Children had an opportunity to color and add their own art to these boards.

Marketing/Sponsorship – Our Marketing Plan this year included the following:

- 15,000 school flyers went home in student's backpacks throughout Champaign County
- 8,000 English and 800 Spanish brochures were distributed throughout East Central
- 800 Posters were placed in various businesses and organizations
- E-mail and Facebook blitzes
- Signs on 15 MTD buses traveling throughout Champaign-Urbana
- Window clings on 8 vehicles, including all of Quality Med Transport vehicles
- 225 yard signs posted throughout Champaign, Urbana and Rantoul
- Radio spots and interviews on several local radio stations
- Ads in News-Gazette and rural newspapers

.

A special thanks goes out to our friends at Quality Med Transport for their huge support this year. They placed all of our yard signs, helped with set-up and tear-down, window clinged their vehicles, provided transportation to the Expo to two individuals, as well as providing a large financial sponsorship.

Thank you, also, to Einstein Bagels, County Market and Meijer, who enabled us to have a wonderful hospitality area for our exhibitors, volunteers, artists and children. This was new for our exhibitors this year, and was a great way to make them feel welcome and appreciated.

The 2015 Resource Book was distributed to our Expo visitors, and will be distributed throughout the year through various organizations. A big thanks to Cathie Godwin, who did a great job developing this fabulous resource guide.

As a means for additional support for the Expo, raffles were held for a pair of Ebertfest tickets, and a 50/50 drawing. Because of our many wonderful business sponsors, we were again able to give out prizes throughout the day to our visitors who completed a participant evaluation for us (Please see the attached Participant Evaluation Summary).

Now that the 2015 Expo is over, we have begun to plan for support of the 2016 Expo. We will be engaging in several fundraisers throughout the year, including Schwan's Cares and Bergner's Community Days.

Accessibility/Entertainment – We were pleased to have some amazingly talented individuals, groups and dogs in our entertainment line-up this year. The main stage included members of the Urbana High School Orchestra, a concert pianist, a sled hockey demonstration, and two service dog demonstrations. Our friends with the Greater Champaign County AMBUCS presented two children with Amtrykes this year. The first ever Employment First Awards were presented to two local businesses. Folks in the Artistic Expressions area had the pleasure of hearing acoustic guitar music played by Kevin Elliott.

Children's Activities - The Children's Activity Room was a busy place, as usual. We were fortunate this year to have some wonderful volunteers from Parkland College's Occupational Therapy Program helping out in the Children's Room. Children enjoyed playing a bunch of fun new games donated by our friends at Flaghouse. Flaghouse is a global supplier of resources for physical activity, recreation, education and special needs, and has been donating more than \$1,000 worth of games each of the past four years to use and give away at the Expo.

Artistic Expressions – More than 20 talented artists and entrepreneurs showcased and sold their handmade works, including paintings, photography, jewelry, book covers, children's books, crocheted/knitted items, crafts, etc.

Volunteers – A huge thanks goes out to Jen Knapp again this year for recruitment and coordination of the wonderful group of volunteers, who helped in various areas of the Expo. We could not do this without our great volunteer corp.

Public Safety – Public Safety had a booth again this year to register folks with the Premise Alert Program. The folks staffing the booth were extremely helpful, as we called upon them a couple of times during the day for special assistance.

Exhibitor Evaluation Summary is attached.

Participant Evaluation Summary is attached.

Respectfully submitted Barb Bressner, Consultant



Disability Resource Expo EXHIBITOR EVALUATION SUMMARY 2015

Expo evaluation forms were given to 98 exhibitors. 73 completed forms (74%) were returned.

Attendance Notes: 102 Exhibitors had confirmed as of mid-Sept. One cancelled one week prior (K-2 Med Alerts), one cancelled three days prior (Social Security) and one cancelled two days prior (Northwestern.) Only one exhibitor was a no-show, no-call (CTF.)

The following scale was used for rating: 5-Excellent; 4-Good; 3-Ok; 2-Fair; 1-Poor

Items rated

1. Rate pre-event communication:

0 - Poor

1 - Fair

2 - Ok

8 - Good

60 - Excellent

- Good communication keeping us informed
- Great use of e-mail
- Was little communication regarding parking & what doors to enter in (Clarification: emails sent to exhibitors on Oct 8 and Oct 14 w/ parking & entry info.)
- I appreciated the e-mails and reminders
- Barb was a good asset
- Thanks Barb & Jim
- Missed email with the table #s (Clarification: info was given via attached map on Oct 8 & Oct 14)
- Very effective
- Loved all the details this year and the frequent email reminders.



2. Rate event-day check-in process:

0 - Poor

1 – Fair

2 - Ok

8 - Good

58 - Excellent

Comments:

- Very easy and timely
- Parking was just okay
- Go Hannah!
- Check in on Friday afternoon was fantastic!
- It was good, but I got here too early. Getting name badges would be nice.
- Thank you for volunteers! Very helpful!
- Easy! Parking attendants very helpful
- Excellent at the door. Parking situation bad vendors line back up onto Country Fair early.
- Very smooth parking attendants were great. Loved being able to set up the day beforehand.
- Quick & Easy
- Perfect
- Forgot entry location
- Super easy and fast
- Easy to find and simple, so we could start up fast

3. Rate Amazing Service Dogs Game:

0 - Poor

1 – Fair

4 - Ok

16 - Good

33 – Excellent

- A lot of interest was shown by people coming through.
- Loved the game, probably because we had a stamp. People who had low vision commented about wishing for some other indicator than a picture.
- Popular. Suggest audio cue for people with visual disabilities.
- Attendees seemed excited about the activity.
- Attendees seemed to really enjoy gathering the stamps.
- Everyone seemed to enjoy this.
- A lot of people started a conversation w/ us because of the game (note: from non-game booth)
- I think it was a great idea & very informative.



- Saw lots of people doing it.
- Very great!
- So cute
- Did not see it.
- N/A (10)
- Didn't play game unknown
- It was kind of distracting.
- Don't know
- Unfamiliar with this
- Don't know didn't play the game. Some people said they couldn't find JJ.

4. Rate variety of exhibitors/activities:

0-Poor

0 - Fair

2 - Ok

9 - Good

66 - Excellent

- Good variety. Had a little bit of everything.
- Love meeting other vendors & learning about other groups.
- I love talking to all the exhibitors. I learn something new!
- Excellent Seemed to be a lot of different exhibitors.
- Wide variety
- Nice variety
- Good variety
- Fantastic! Loved it.
- Wide range like that they were divided into sections.
- Wonderful variety loved the categories too.
- Very good lots of different booths
- I didn't like that the only other law firm here was right next to us. They don't, to my knowledge, have any special training in special needs law & we do, so this is unusual.



5. Rate the entertainment you had an opportunity to view/hear:

0 - Poor

0 - Fair

7 - Ok

12 - Good

48 - Excellent

Comments:

- Very nice
- Piano lady was great.
- Excellent we are right next to it.
- Loved it! Please do this again!
- Was afraid sitting next to the stage was going to be loud, but it wasn't. Perfect volume.
- Was not near entertainment (Concourse room)
- I liked the music and the service dogs.
- Music was great, demonstrations were too loud (booth #66 near stage)
- Loved the orchestra (2)
- The orchestra was very good we could hear them very well and still talk to event attendees.
- N/A couldn't hear (2)
- Great piano
- Awesome!!!
- Enjoyed the music
- Really enjoyed the service dogs and sled hockey player
- Good performances!
- Awesome, service dogs ©

6. Rate the physical setting for the event:

2 - Poor

3 – Fair

9 - Ok

20 - Good

39 - Excellent

- At times noisy & congested in aisles. Parking for exhibitors was a bit challenging.
- A little cold during set-up. Love the space, layout, the banners directing people. Parking was organized well too.
- Good layout for flow of traffic.
- Very accessible



- Nice accessibility to bathrooms, etc.
- All booths easily accessed, plenty of space.
- Very large open space
- Sometimes it was hard to hear with the music, but I was also really close to the speakers.
- Really cold especially in bathroom
- (Too) cold (6)
- Was a little on the cold side.
- A little chilly
- A bit chilly, but the perfect size.
- Cold weather
- Space is great; so cold!
- It works but it's so dusty!
- Don't like pulling cart and maneuvering on the gravel.
- Freezing cold, no heat, no outlets, asphalt floor. Find a new location! Maybe Parkland or U of I.
- Family restrooms were advertised, but not available.

7. Rate the Expo overall:

0-Poor

0 - Fair

2 - Ok

12 - Good

56 – Excellent

- Great work!
- Great show
- Perfect
- The event was well advertised, yet seemed sparsely attended overall.
- We enjoyed being here!
- First time here we will be back awesome!
- Excellent Pretty good!
- It is obvious that a good deal of thought and effort went into the planning and execution. What a wonderful Expo!
- One of my favorite shows of the year.
- I love all the resources, smiles and communication given in this event.
- It was awesome how people offered to give you breaks.
- Exceeded my expectations
- Wonderful! Great resources.



Narrative Questions

8. What did you like best about the Expo?

- Variety; place to share our resources with the community.
- Lots of exhibitors in one place
- A lot of info.
- All the different vendors
- Quality of vendors
- The variety of exhibitors (9)
- The variety of vendors, it is very organized, easy access. An all-around great event.
- Variety of exhibitors and how they all contribute to disability.
- The variety of events/services that are offered throughout the community.
- I liked the variety of services represented.
- Big venue; lots of different booths
- Variety
- Covered a wide variety of disabilities; something for everyone.
- The variety of visitors looking for variety of resources & sharing their stories.
- Artist area
- The performances and art work
- The performances
- The stage being in the middle, and the number of visitors on hand.
- Resources and knowledge gained
- Able to meet with families that need our services
- Meet folks about equipment
- Talking with people and other vendors
- Different people I met
- There were services and organizations that I didn't know about.
- The connections we make with other resources
- Some at the booths had interesting materials to show.
- Comprehensive number of resources all in one event; important networking.
- The accommodations for guests were comprehensive.
- It was very family friendly in general.
- The exhibitor snack bar
- The entertainment; I could tell families were having so much fun
- Great advertising
- All the various community resources; loved the service dogs.
- Various resources and opportunities to get to know.
- Variety of educational programs
- Variety of displays; very well-organized.
- Variety of agencies; tons of friendly volunteers



- Great volunteers, very friendly
- There were numerous new exhibitors
- The entertainment was top notch
- The food and snacks were a pleasant surprise complementary bar area well-appreciated
- We loved the free coffee ©
- The entertainment
- Service dog presentations & other entertainment
- Service dogs
- Music
- Communication, advertising, location, volunteers, wide range of exhibitors
- Communication was great beginning to end; signage was bright and well-placed.
- Great space, awesome staff, vendor snack area, great variety of vendors
- Organizational set-up; good signage
- Everything was excellent this year well done!
- The amount of info.
- Good participation from the public
- The crowd great turn-out as usual. Loved the service dog-in-training demo!
- There was a lot of people from the community that attended the event.
- The number and variety of people it attracts; how organized it is too thank you!
- Attendance was amazing!
- The easy check-in and out
- Wide range of services
- Visiting with attendees; answering questions.
- Fascinated by sled hockey story
- I liked the games for people that came
- The variety of the entertainment, vendors, provision of snacks, and layout of the expo.
- Thanks for the snacks!
- It's local and it serves the community
- Amount of exhibitors
- Location
- The entire venue is great
- Like the venue, entertainment, speakers
- All the resources, smiles and communication.

9. What would you change to improve the Expo in the future?

- Sound buffering
- Noise level of speakers! Could not interact with attendees well.
- Carpet would be nice
- Heating in the building.
- Heat!



- Just a little too cold.
- Space between tables could be bigger for accessibility
- N/A (7)
- Nothing (7)
- Cannot think of anything (3)
- Excellent, nothing more
- Everything was fine
- Leave it as it is.
- I feel it is fine the way it is
- Location
- Location better at Lincoln Square
- Location due to weather
- Move location
- Location more central, warmer?
- Perhaps a nicer venue, tho I don't know if that's even an option given the size of the event
- I don't know how to improve parking, but it was a common subject among visitors.
- Location it was freezing cold and no heat, dirty asphalt floor.
- Parking was horrible; wouldn't be surprised if people have nails in their tires.
- I thought traffic of people was less, so maybe the location, plus it was cold in the bldg.
- Improved parking (clean up nails in parking lot.)
- The only bad part is parking and loading & unloading for the vendors.
- Parking could be improved.
- Better direction at entrance for men at traffic points.
- Have parking tags or signs for vendors so that they can move thru the security check quicker.
- More service dogs...because they're cute.
- More advertisement
- Have EMS in building in event of medical emergency
- Hot water for hot tea
- Maybe group resources by disability, for example, autism resources grouped together.
- Perhaps only run until 1:00
- Go from 9-1 (2 felt too long)
- Possibly shorter event (10-1?)
- Make it shorter!! (10-1)
- A little early for people coming from out-of-town
- End it at 1:00, very slow after 1:00pm
- Longer hours til 4:00 at least
- Make it longer.
- Communication beforehand was sent to a member of our group, but not the person who usually comes. But it was sent to the person who filled out the application more of an internal issue



there. The times we were supposed to speak got messed up because of how many channels it went though.

- Do not sell alcohol at venue in future events (editor's note: alcohol was not being sold)
- I suggest to improve the booths, have more booths related to educational purposes.
- Food vendors to give more options.

10. What other exhibitors might you suggest we invite to future Expos?

- Horizon Hobby
- 3E
- Architects that build disability accessible areas.
- I think you have them all (haha).
- The event has a great variety.
- N/A (11)
- N/A great job
- It looks great
- Maybe something to do with financial literacy
- IL School for the Deaf
- IL School for the Visually Impaired
- IL Assistive Technology Project
- Family Matters
- Wounded Warriors
- I didn't get a chance to see all of the vendors
- Rest program
- Energy saving program
- More clubs from campus
- More campus groups?
- More public education(K-12) resources?
- Respite care resources
- More toy vendors for children accessible toys
- Doctors/therapy groups/hospitals?
- People had a bunch of Medicare/Medicaid questions, so a rep from that agency would be useful.
- Social Security; Public Aid
- ABLE Bloomington; testing & neuropsych counseling
- More local/state government offices
- Transportation resources for people who have physical limitations



- 11. What other entertainment options would you like to see us bring to the Expo, keeping in mind that we strive to have all entertainment performed by or geared toward persons with disabilities.
- Music throughout the event
- More of the music acts
- Music playing at times between entertainment
- More music
- Singing or constant music playing DJ, etc.
- Acoustic guitar player oldies songs
- Keep the piano lady
- Keep the idea that entertainment is "geared toward persons with disabilities."
- It would be awesome to have someone with a disability talk about their experiences with the various services here at the Expo.
- I loved the string quartet & piano. Keep it nice and peaceful.
- Maybe Special Olympics?
- Tatiana McFadden from UIUC
- Dance group of kids with disabilities
- Maybe local choirs
- Local band
- More upbeat
- More musical variety maybe choirs from local schools.
- Deaf artists/performers
- More visual/exhibits
- N/A (8)
- Maybe someone from U of I Paralympics
- Sports for disabled
- Sports!
- Everything was great (3)
- You do great already (2)
- A video related to medical advances when it comes to people with physical disabilities.
- I loved the dogs.
- Savoy's "Lights up, sound down" should give away tickets.
- Dana Robertson has an incredible voice and she has autism. Call me for contact info. Terry Goode, Family Service (352-0099)



disABILITY Resource Expo: Reaching Out For Answers PARTICIPANT EVALUATION SUMMARY 2015 EXPO

Expo evaluation forms were returned by 203 participants of the 2015 disABILITY Resource Expo.

The individual completing this evaluation was:

- 81 Family member
- 94 Person with a disability
- 28 Other (Noted: Stage 4 Colon Cancer, breathing problems, back problems)

The individual completing this evaluation either themselves or a family member had:

- 49 Developmental disability
- 50 Physical disability
- 37 Mental illness
- 9 Other (Noted: Blind father, deaf, blindness, brain injury, neurological)

The following scale was used for rating: 5-Excellent; 4-Good; 3-Ok; 2-Fair; 1-Poor

Items rated

Rate Exhibitor Information: 2 – Poor

3 – Fair 5 – Ok 62 – Good 124 – Excellent

Comments:

- Awesome!
- A lot of information
- Nice variety
- Seizure/Epilepsy

Rate Accessibility: 2 – Poor

3 – Fair 14 – Ok 51 – Good

126 – Excellent



Comments:

- Need more chairs
- Visual issue w/game. Lack chairs
- Crowded
- Thankfully not too crowded
- Some areas are congested.
- Congested walk ways
- A little crowded!

Rate Activities/Entertainment: 2 – Poor

4 – Fair

15 – Ok

62-Good

109 - Excellent

Comments:

- My favorite was with the service dogs.
- Loud of stage before dogs (barking). Move booths stage
- More variety please besides classical
- I love the music. I hope they are great.
- Nice music

Rate Event Organization: 3 – Poor

2 – Fair

6 - Ok

56 - Good

126 - Excellent

Comments:

- Confusing
- Might need 2 days next year! Busy!

Rate Expo overall: 2 – Poor

3 – Fair

4 - Ok

47 - Good

135 - Excellent



Comments:

- Please thank the people who volunteered for the event.
- Enjoyed Sat. for MTD riders
- Loved it!
- Thank you
- Awesome having this much info. in one place
- Informative
- Very informative
- Good
- This venue is better than Lincoln Square
- Excellent job!
- Facility Poor Go back to Lincoln Square
- Lots of info & nice people to explain

Narrative Questions

How did you learn about the Disability Resource Expo?

35 - Brochure 26 – Poster 41 – Yard Sign	27 – School 17 – Radio 11 – TV	12 – Newspaper 9 – Window Cling/MTD 41 – Word of mouth
		11 – E-mail
		27 - Other

(Other noted: Facebook, wife, class, NAMI, been here before, Community Elements, family member, friend, attended in the past-long time resident, website)

Comment:

Suggestions for Future Exhibitors:

- People from Disability Office come here to expo (Clarification: DHS Div. of Rehabilitation, UIUC DRES, and Parkland Office of Disability Services were present)
- Deaf perform
- Dogs hard to find, need to have booths "bark"
- More large print would be helpful
- Just more advertisement
- Keep continue letting us know about future information regard disability
- Ama zong Singing group



- More clear on the entrance for all bags. I didn't receive any when I arrived at 11 am. That's okay. It would be great if had sign say "welcome". Information booth be labeled. (Clarification: Visitor bags were distributed, and large welcome sign was posted at main entrance.)
- More info. or exhibitors on educational need of Intellectual Developmental Service for college students. (Clarification: UIUC DRES and Parkland Office of Disability Services were present.)
- Speakers/sessions
- More activitities
- Keep up the good work
- Have music
- Music
- Outside music, puzzles, games, twister
- Bigger Room
- Refreshments!
- Friend Benita Gav
- Better traffic flow
- Spaced out better
- Directed parking for visitors as well as for workers would be appreciated.
- Good jobs More activities
- Awesome job!
- Very good overall
- Event was awesome
- Nice event
- Great location and nice place
- Everything was great!
- Good job
- Help people Deaf Respect
- This went off well
- Little wider aisles
- **Enjoy for Deaf entertainment**
- No comment
- Deaf performer
- More disabled parking places in lot & perhaps give visitors a map of exhibitors & hall with times for special events (Clarification: A map was included in visitor bags and signage with schedule of events was posted in 3 separate locations throughout the Expo)

Additional comments:

- Excellent, lots of services that I didn't know existed. Thank you!
- Excellent!



- Very helpful
- Good location
- I have learn more about different outlets for people like me with disability since I been on it, which was 2003. Thank you!!!
- Visual 22 pt. Font for all at vendor
- Thanks!
- Everything was great. Thank you for the entertainment, for the kids, and all the great information.
- Love the animals & kids room!
- When is the next Expo?
- Very informative
- The children's playroom was great!
- Everything was excellent! ©
- None
- Love the disability fair
- Nothing. It is perfect.
- Continue to do. It is great
- Let exhibitors know there is no heat. Fluid Event needs to know about broken glass in parking lot at beginning of event
- Excellent/Informative
- How about lower priced refreshments. As a disabled person, I couldn't afford refreshment.
- Good
- Better parking
- Exhibitors were very friendly and informative. Enjoyed the whole event.
- Great for finding volunteer opportunities and resources
- Very informative! Found booths for which I am truly grateful!
- Very good
- Excellent
- Love buying products in the room
- Keep up the Good Work
- I want play nba and love kids too
- Great Info. & Resources!
- Great space
- Great handouts & info excellent mission statement



Comments in addition to those provided on the evaluation form:

- Information/Accessibility Booth A person requested a braille program book, or at least something in braille. A form was given to this person to make her request, but she did turn in this request form. She did go through the exhibitor area with a volunteer assisting her.
- Information/Accessibilty Booth A visually impaired persons wanted the letters bigger so she could read the book and the map.
- Information/Accessibility Booth Heard comments that parking was very slow
- Informaiton/Accessibility Booth Comment that family restrooms did not have a lock, and if we're going to have a family restroom, they should truly be a family restroom.
- Information/Accessibility Booth They could use some extra schedules of the day at this booth, and for the sign language interpreters.
- Facebook Comment Congrats to you and the crew on another successful disABILITY Expo!

Page 6



VENDOR VENDOR TRN B TR NO NAME DTE N CD	TRANS PO	PO NO CHECK NUMBER	CHECK	10/08/15 ACCOUNT NUMBER	ACCOUNT DESCRIPTION	PAGE 1 ITEM DESCRIPTION	EXPENDITURE AMOUNT
MENTAL HEALTH							
BALANCE		SHEET					
53- 291		530319	9/10/15	090-000-172.00-00	REVENUES	REV REFUND CR 20458 VENDOR TOTAL	30.00
					E	BALANCE SHEET TOTAL	* 00.08
MENTAL HEALTH BOARD	RD						
CHAMPAIGN COUNTY TREASURER 0/01/15 01 VR 53- 321	~	531381 1	RENT-	RENT-GENERAL CORP 8/15 090-053-533.50-00	FACILITY/OFFICE RENTALS	OCT OFFICE RENT VENDOR TOTAL	2,952.68
CHAMPAIGN COUNTY TREASURER 9/29/15 05 VR 620- 130		531027	HEALT: 9/30/15	HEALTH INSUR FND 620 0/15 090-053-513.06-00	EMPLOYEE HEALTH/LIFE INS	SEP HI, LI, & HRA VENDOR TOTAL	3,294.09
COUNTY TREASURER VR 88- 47 VR 88- 50 VR 88- 54		531030 531384 1 531385 1	I.M.R.F. 9/30/15 090 10/08/15 090 10/08/15 090	F. FUND 088 090-053-513.02-00 090-053-513.02-00 090-053-513.02-00	IMRF - EMPLOYER COST IMRF - EMPLOYER COST IMRF - EMPLOYER COST	IMRF 9/4 P/R IMRF 9/18 P/R IMRF 10/2 P/R VENDOR TOTAL	1,292.93 1,292.80 1,292.80 3,878.53 *
CHAMPAIGN COUNTY TREASURER 0/01/15 01 VR 53- 307		531389 1	REG PLAN 10/08/15 090-	LAN COMM FND075	CONTRIBUTIONS & GRANTS	OCT YOUTH ASSMNT CT VENDOR TOTAL	2,167.00
CHAMPAIGN COUNTY TREASURER 10/01/15 03 VR 119- 62		531390 1	SELF-]	SELF-FUND INS FND476 8/15 090-053-513.04-00	WORKERS'	COMPENSATION INSWORK COMP 9/4,18 P/ VENDOR TOTAL	165.46

	EXPENDITURE
PAGE 2	ITEM DESCRIPTION
	ACCOUNT DESCRIPTION
10/08/15	ACCOUNT NUMBER
	CHECK DATE
	PO NO CHECK NUMBER
	TRANS
	R TRN B TR DTE N CD
	ENDOR VENDOR NO NAME
	VENDO! NO

N EXPENDITURE AMOUNT		3,090.00	1,102.67 1,102.55 1,102.55 3,307.77 *	50.00	1,025.00 FEE 750.00	9/ 84.90	IN 5,000.00 4,583.00 AT 4,583.00 14,166.00 *	IC 25,568.00 16,667.00
ITEM DESCRIPTION		OCT CAC VENDOR TOTAL	SR FICA 9/4 P/R SR FICA 9/18 P/R SR FICA 10/2 P/R VENDOR TOTAL	REG GALLO 11/2-4 VENDOR TOTAL	\$5000INV 4921 7/7 S 4TH QTR CONSULT F VENDOR TOTAL	SERVICES8771403010088314 VENDOR TOTAL	OCT COMMUNITY LIVIN OCT CUSTOM EMPLOY OCT SELF DETERMINAT VENDOR TOTAL	OCT CRIMINAL JUSTIC OCT CRISIS/ACCESS
ACCOUNT DESCRIPTION		0 CONTRIBUTIONS & GRANTS	0 SOCIAL SECURITY-EMPLOYER 0 SOCIAL SECURITY-EMPLOYER 0 SOCIAL SECURITY-EMPLOYER	0 CONFERENCES & TRAINING	EQUIPMENT LESS THAN PROFESSIONAL SERVICE	COMPUTER/INF TCH	CONTRIBUTIONS & GRANTS CONTRIBUTIONS & GRANTS CONTRIBUTIONS & GRANTS	CONTRIBUTIONS & GRANTS CONTRIBUTIONS & GRANTS
CHECK ACCOUNT NUMBER DATE		CHLD ADVC CTR FND679 10/08/15 090-053-533.92-00	SOCIAL SECUR FUND188 9/30/15 090-053-513.01-00 10/08/15 090-053-513.01-00 10/08/15 090-053-513.01-00	SUITE 209 9/18/15 090-053-533.95-00	9/18/15 090-053-522.44-00 10/08/15 090-053-533.07-00	AC#8771403010088314 9/18/15 090-053-533.29-00	SUITE 206 10/08/15 090-053-533.92-00 10/08/15 090-053-533.92-00 10/08/15 090-053-533.92-00	10/08/15 090-053-533.92-00
PO NO CHECK NUMBER		531392	531035 531393 531394	530531	530536	ALTH ACCT 530564	531433 531433 531433	531434
VENDOR VENDOR TRN B TR TRANS NO NAME DTE N CD NO	D NO. 090 MENTAL HEALTH	CHAMPAIGN COUNTY TREASURER 10/01/15 01 VR 53- 306	CHAMPAIGN COUNTY TREASURER 9/29/15 02 VR 188- 80 10/01/15 03 VR 188- 84 10/07/15 02 VR 188- 88	ARC OF ILLINOIS 9/17/15 02 VR 53- 324	BP COMPUTER SERVICES 9/17/15 02 VR 53- 297 10/01/15 01 VR 53- 315	COMCAST CABLE - MENTAL HEALTH ACCT 9/14/15 02 VR 53- 293 5305	COMMUNITY CHOICE, INC 10/01/15 01 VR 53- 298 10/01/15 01 VR 53- 298 10/01/15 01 VR 53- 298	COMMUNITY ELEMENTS 10/01/15 01 VR 53- 299 10/01/15 01 VR 53- 299
VENDOR NO	*** FUND NO.	179	188	4554	5780	18052	18203	18209

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10/08/15 ACCOUNT NUMBER ACCOUNT DESCRIPTION 5 090-053-533.92-00 CONTRIBUTIONS & GRANTS 6 090-053-533.92-00 CONTRIBUTIONS & GRANTS 7 090-053-533.92-00 CONTRIBUTIONS & GRANTS	10/08/15 CHECK ACCOUNT NUMBER ACCOUNT DESCRIPT BR DATE 4 10/08/15 090-053-533.92-00 CONTRIBUTIONS & 4 10/08/15 090-053-533.92-00 CONTRIBUTIONS & 4 10/08/15 090-053-533.92-00 CONTRIBUTIONS & 6 10/08/15	TRANS PO NO CHECK ACCOUNT NUMBER ACCOUNT DESCRIPTION NUMBER DATE NO NUMBER DATE 53 - 299 531434 10/08/15 090-053-533.92-00 CONTRIBUTIONS & 531436 10/08/15 090-053-533.92-00 CONTRIBUTIONS & 64140 10/08/15 090-053-533.92-00 CON	10/08/15 TRANS PO NO CHECK CHECK ACCOUNT NUMBER ACCOUNT DESCRIPTION NUMBER DATE ACCOUNT NUMBER ACCOUNT DESCRIPTION NUMBER DATE ACCOUNT NUMBER ACCOUNT DESCRIPTION 299 531434 10/08/15 090-053-533.92-00 CONTRIBUTIONS & 531434 10/08/15 090-053-533.92-00 CONTRIBUTIONS & 531434 10/08/15 090-053-533.92-00 CONTRIBUTIONS & CENTER OF NORTHERN 300 531436 10/08/15 090-053-533.92-00 CONTRIBUTIONS & CENTER CLUB STATE OF CHAMPAIGN COUNTY INC 308 531440 10/08/15 090-053-533.92-00 CONTRIBUTIONS & CENTER CLUB STATE OF CHAMPAIGN COUNTY INC 309 531446 10/08/15 090-053-533.92-00 CONTRIBUTIONS & CENTER CLUB STATE CLUB STATE OF CHAMPAIGN COUNTY INC 310 531450 10/08/15 090-053-533.92-00 CONTRIBUTIONS & CENTER CLUB STATE CTR	PAGE 3	ITEM DESCRIPTION EXPENDITURE AMOUNT	INOON	OCT PSYCH/PRIM CARE 9,294.00 OCT TIMES CENTER 4,000.00 OCT EARLY C'HOOD 7,500.00 OCT PLL FRONT END 22,629.00 VENDOR TOTAL 85,658.00 *	OCT RESOURCE CONNEC 5,441.00 VENDOR TOTAL 5,441.00 *	OCT AWP 5,579.00 VENDOR TOTAL 5,579.00 *	OCT BEYOND BLUE 5,833.00 vendor Total 5,833.00 *	OCT INDIV/FAM SUP 31,345.00 VENDOR TOTAL 31,345.00 *	OCT ENGAGE/SOC MRKT 6,500.00 OCT YOUTH ENGAGE 14,167.00 VENDOR TOTAL 20,667.00 *	
053- 053- 053- 053- 053- 053- 053- 053-	TCHECK ACCOUNT TR DATE 14 10/08/15 090-053- 14 10/08/15 090-053- 14 10/08/15 090-053- 15 10/08/15 090-053- 16 10/08/15 090-053- 17 10/08/15 090-053- 18 10/08/15 090-053- 18 10/08/15 090-053- 19 10/08/15 090-053- 10 10/08/15 090-053- 10 10/08/15 090-053- 10 10/08/15 090-053- 10 10/08/15 090-053- 10 10/08/15 090-053- 10 10/08/15 090-053- 10 10/08/15 090-053- 10 10/08/15 090-053- 10 10 10 10 10 10 10 10 10 10 10 10 10 1	TRANS PO NO CHECK CHECK ACCOUNT NO NUMBER DATE 53 - 299	10/08/1 DTE N CD NO CHECK CHECK ACCOUNT DTE N CD NO CHECK CHECK ACCOUNT 11/15 01 VR 53- 299 11/15 01 VR 53- 300 11/15 01 VR 53- 300 11/15 01 VR 53- 300 11/15 01 VR 53- 309 11/15 01 VR 53- 310		ACCOUNT DESCRIPTION		CONTRIBUTIONS & CONTRIBUTIONS & CONTRIBUTIONS & CONTRIBUTIONS &	CONTRIBUTIONS &	CONTRIBUTIONS &	CONTRIBUTIONS &	હ	ਲ ਲ	
	2K CF 2R DZ 34 10/C 34 10/C 34 10/O 310/O 510/O CTR	TRANS PO NO CHECK CF NO NUMBER DZ NO NUMBER DZ NO NUMBER DZ NO NUMBER DZ NO NO NUMBER DZ NO NO NUMBER DZ NO NO NUMBER 10/0 S3 - 299 S31434 10/0 S3 - 299 S31434 10/0 S3 - 300 S31440 10/0 S3 - 308 S31441 10/0 S3 - 309 S31446 10/0 S3 - 309 S31450 10/0 S3 - 310 S31450 10/0 S3 - 310 S31450 10/0 S53 - 310 S31450 TR	DTE NO CHECK CF DTE N CD NO CHECK CF DTE N CD NO CHECK CF 090 MENTAL HEALTH 11/15 01 VR 53- 299 531434 10/0 11/15 01 VR 53- 399 531434 10/0 11/15 01 VR 53- 300 531440 10/0 11/15 01 VR 53- 309 531441 10/0 SIS NURSERY 11/15 01 VR 53- 309 531446 10/0 11/15 01 VR 53- 310 531450 10/0	10/08/15			090-053- 090-053- 090-053-	MPAIGN COUNTY 5 090-053-533.92-00	090-053-533		COUNTY 053-533	090-053-533	•

EXPENDITURE APPROVAL LIST

10/08/15

					10/08/15		PAGE 4	
VENDOR NO	VENDOR VENDOR TRN B TR NO NAME DTE N CD	TRANS	PO NO CHECK NUMBER	CHECK	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO.	D NO. 090 MENTAL HEALTH	ALTH						
26000	FAMILY SERVICE OF 10/01/15 01 VR 53-10/01/15 01 VR 53-10/01/15 01 VR 53-	CHAMPAIGN - 302 - 302 - 302	IGN COUNTY 531461 531461 531461	GRANTS 10/08/15 0 10/08/15 0 10/08/15 0	'S 090-053-533.92-00 090-053-533.92-00 090-053-533.92-00	CONTRIBUTIONS & GRANTS CONTRIBUTIONS & GRANTS CONTRIBUTIONS & GRANTS	OCT SELF HELP OCT SENIOR COUNSEL OCT FAMILY COUNSEL VENDOR TOTAL	2,369.00 11,861.00 3,333.00 17,563.00 *
44570	MAHOMET AREA YOUTH 10/01/15 01 VR 53- 10/01/15 01 VR 53-	H CLUB - 312 - 312	531507	601 E. 10/08/15 10/08/15	EAST FRANKLIN 090-053-533.92-00 090-053-533.92-00	CONTRIBUTIONS & GRANTS CONTRIBUTIONS & GRANTS	OCT UNIV SCREENING OCT BLAST VENDOR TOTAL	833.00 1,250.00 2,083.00 *
4245	MARTIN ONE SOURCE 9/17/15 02 VR 53- 9/17/15 02 VR 53- 10/01/15 08 VR 53-	328 3328 331	530637 530939 531510 531510 531510 531510	9/18/15 (9/18/15 (9/24/15 (10/08/15 (10/08/15 (10/08/15 (10/08/15 (10/08/15 (090-053-533.89-00 090-053-533.89-00 090-053-533.89-00 090-053-533.89-00 090-053-533.89-00 090-053-533.89-00	PUBLIC RELATIONS	INV 113093 8/31 INV 113354 9/10 INV 113430 9/14 INV 113507 9/17 INV 113512 9/17 INV 113701 9/23 INV 11377 9/24 INV 113840 9/28 VENDOR TOTAL	39.00 100.00 820.00 76.00 487.50 537.00 268.00 218.00
47690	MINUTEMAN PRESS 9/17/15 02 VR 53-	296	530641	SUITE 9/18/15 0	8 B 090-053-533.89-00 B	PUBLIC RELATIONS	INV 37568 8/15 VENDOR TOTAL	45.00
54650	PEPSI COLA CHAMPAL 9/17/15 02 VR 53- 9/17/15 02 VR 53-	CHAMPAIGN-URBANA VR 53- 294 VR 53- 294	NA BOTTLING 530650 530650	9/18/15 0	090-053-522.02-00 C	OFFICE SUPPLIES EQUIPMENT RENTALS	INV 450914 8/17 AC 5734 SEP RENT VENDOR TOTAL	5.73 6.95 12.68 *
56750	PRAIRIE CENTER HEA: 10/01/15 01 VR 53-	LTH 30	SYSTEMS 531533 1	GRANTS 10/08/15 0	90-053-533.92-00	CONTRIBUTIONS & GRANTS	OCT CJ SUB TREATMEN	833.00

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	EXPENDITURE AMOUNT		849.00 4,712.00 15,619.00 24,325.00 8,750.00 55,088.00 *	503	3,333.00 13,750.00 17,083.00 *	1,550.00	165.52 26.78 19.41 60.60 35.71-	37,500.00
PAGE 5	ITEM DESCRIPTION		OCT VIVITROL PILOT OCT PREVENTION OCT SPECIALTY COURT OCT PLL EXTEND CARE OCT YOUTH SVCS VENDOR TOTAL	INV 9056 9/16 VENDOR TOTAL	OCT WELLNESS/JUSTIC OCT MH SVCS VENDOR TOTAL	OCT RAPE/ADVC/COUNS VENDOR TOTAL	INV 13771390 8/31 INV 13771391 9/1 INV 13774210 9/3 INV 13771392 9/9 CR C13771390 9/10 VENDOR TOTAL	2ND QTR CONSULT FEE VENDOR TOTAL
10/08/15	PO NO CHECK CHECK ACCOUNT NUMBER ACCOUNT DESCRIPTION NUMBER DATE		531533 10/08/15 090-053-533.92-00 CONTRIBUTIONS & GRANTS	531537 10/08/15 090-053-533.89-00 PUBLIC RELATIONS	531538 10/08/15 090-053-533.92-00 CONTRIBUTIONS & GRANTS 531538 10/08/15 090-053-533.92-00 CONTRIBUTIONS & GRANTS	G & EDUC SRVCS 531540 10/08/15 090-053-533.92-00 CONTRIBUTIONS & GRANTS	530665 9/18/15 090-053-522.02-00 OFFICE SUPPLIES 530665 9/18/15 090-053-522.02-00 OFFICE SUPPLIES 530665 9/18/15 090-053-522.02-00 OFFICE SUPPLIES 530665 9/18/15 090-053-522.02-00 OFFICE SUPPLIES 530665 9/18/15 090-053-522.02-00 OFFICE SUPPLIES	, INC. 531552 10/08/15 090-053-533.92-00 CONTRIBUTIONS & GRANTS
	VENDOR TRN B TR TRANS NAME DTE N CD NO	NO. 090 MENTAL HEALTH	10/01/15 01 VR 53- 303 10/01/15 01 VR 53- 303 10/01/15 01 VR 53- 303 10/01/15 01 VR 53- 303 10/01/15 01 VR 53- 303	PROJECT TE 10/01/15 08 VR 53- 327	PROMISE HEALTHCARE 10/01/15 01 VR 53- 304 10/01/15 01 VR 53- 304	RAPE, ADVOCACY, COUNSELING 10/01/15 01 VR 53- 305	80GARDS 9/17/15 02 VR 53- 292 9/17/15 02 VR 53- 292 9/17/15 02 VR 53- 292 9/17/15 02 VR 53- 292 9/17/15 02 VR 53- 292	SAVANNAH FAMILY INSTITUTE, 10/01/15 01 VR 53- 318
	VENDOR VENDOR NO NAME	*** FUND NO.		57190	1 43	59434	61500	62674 S

9	ON EXPENDITURE AMOUNT		32.52	SV 4,100.00 4	CONSL 4,454.00	1,000.00	NG 1,000.00	8/20 147.48 9/20 147.48 9/20 14.99 309.95 *	292.69 *	FE 1,968.75 1,968.75 *
PAGE	ITEM DESCRIPTION		INV 1114874 9/14 VENDOR TOTAL	2ND QTR 211 PATH VENDOR TOTAL	OCT MHB16-039 CO	OCT UP CENTER VENDOR TOTAL	OCT UNIV SCREENING VENDOR TOTAL	38635688700001 8, 38635688700001 9, \$500038635688700001 9,	INV 138101882 9/5 VENDOR TOTAL	OCT PROFESSIONAL VENDOR TOTAL
	ACCOUNT DESCRIPTION		00 TELEPHONE SERVICE	O PROFESSIONAL SERVICES	0 PROFESSIONAL SERVICES	0 CONTRIBUTIONS & GRANTS	0 CONTRIBUTIONS & GRANTS	TELEPHONE SERVICE TELEPHONE SERVICE EQUIPMENT LESS THAN	O PHOTOCOPY SERVICES	O PROFESSIONAL SERVICES
10/08/15	CHECK ACCOUNT NUMBER DATE		D/B/A CHAMPAIGN TEL 9/24/15 090-053-533.33-00	08/15 090-053-533.07-00	08/15 090-053-533.07-00	STE 516 08/15 090-053-533.92-00	08/15 090-053-533.92-00	AC 386356887-00001 9/10/15 090-053-533.33-00 10/08/15 090-053-533.33-00 10/08/15 090-053-522.44-00	24/15 090-053-533.85-00	08/15 090-053-533.07-00
	PO NO CHECK (NUMBER I		230960 9/	COUNTY 531578 10/08	G & RESEARCH ADM 531579 10/08	S31581 10/08	CONNECTION CENTER 313 531584 10/08	WIRELESS-MENTAL HEALTH BOARD AVO4 VR 53- 290 530438 9/10 03 VR 53- 332 531590 10/08 03 VR 53- 332 531590 10/08	530983 9/24/	531615 10/08/
	TRANS	MENTAL HEALTH	28- 165	CHAMPAIGN COUNTY 53- 319	SPONSORED PROG VR 53- 320	HAMPAIGN C' 53- 314		SS-MENTAL 153-290 53-332 53-332	ION 53- 325	ARA J. 53- 316
	VENDOR VENDOR TRN B TR NO NAME DTE N CD	FUND NO. 090 MENTAL	SPOC LLC 9/22/15 01 VR	UNITED WAY OF 10/01/15 01 VR	UNIV OF IL SPO 10/01/15 01 VR	UP CENTER OF CHAMPAIGN COUNTY 10/01/15 01 VR 53- 314	URBANA NEIGHBORHOOD 10/01/15 01 VR 53-	VERIZON WIRELES 9/04/15 04 VR 10/06/15 03 VR 10/06/15 03 VR	XEROX CORPORATION 9/23/15 01 VR 53	BRESSNER, BARBARA 10/01/15 01 VR 53
	VENDOR NO	*** FUNI	67867	76609	76867	17280	78120	78550	81610	602880

EXPENDITURE APPROVAL LIST

	EXPENDITURE AMOUNT		133.98 44.95 .75 179.68 *	63.25 128.80 192.05 *	79.93	2,625.00	342,065.28 *	342,095.28 *
PAGE 7	ITEM DESCRIPTION		233 MILE 8/4-9/30 MEAL 8/4-9/30 PARKING 8/19 VENDOR TOTAL	110 MILE 9/17-18 LODGING 9/17 VENDOR TOTAL	139 MILE 7/2-8/31 VENDOR TOTAL	OCT PROFESSIONAL FE VENDOR TOTAL	DEPARTMENT TOTAL	FUND TOTAL
	ACCOUNT DESCRIPTION		0 JOB-REQUIRED TRAVEL EXP 0 BUSINESS MEALS/EXPENSES 0 JOB-REQUIRED TRAVEL EXP	O CONFERENCES & TRAINING O CONFERENCES & TRAINING	NTAL HEALTH BD 15 090-053-533.12-00 JOB-REQUIRED TRAVEL EXP	090-053-533.07-00 PROFESSIONAL SERVICES	MENTAL HEALTH BOARD	MENTAL HEALTH
10/08/15	CHECK ACCOUNT NUMBER DATE		MENTAL HEALTH BOARD 10/08/15 090-053-533.12-00 10/08/15 090-053-533.84-00 10/08/15 090-053-533.12-00	8/15 090-053-533.95-00 8/15 090-053-533.95-00	MENTAL HEALTH BD 0/15 090-053-533.12-00	15	MENTAI *	MENTAI
	PO NO CHECK CHE NUMBER DATI		MI 531622 10/08, 531622 10/08, 531622 10/08,	531637 10/08/ 531637 10/08/	ME 530476 9/10/	531658 10/08/		
	TRANS	НЕАГТН	. K 53- 330 53- 330 53- 330	53 - 329 53 - 329	:TEPHANIE 53- 289	53- 317		
	VENDOR VENDOR TRN B TR NO NAME DTE N CD	*** FUND NO. 090 MENTAL HEALTH	CRAWFORD, NANCY K 10/06/15 03 VR 53 10/06/15 03 VR 53 10/06/15 03 VR 53	HENRY, DELORIS 10/01/15 08 VR 5 10/01/15 08 VR 5	HOWARD-GALLO, STEPHANIE 9/04/15 04 VR 53- 289	MAYER, JIM 10/01/15 01 VR 5		
	VENDOR NO	*** FUNE	003200	618915	619548	630350		

	EXPENDITURE AMOUNT				58,526.25 58,526.25 *	58,526.25 *	58,526.25 *	
PAGE 8	ITEM DESCRIPTION				JUL-SEP YOUTH ASMT VENDOR TOTAL	DEPARTMENT TOTAL	FUND TOTAL	
	ACCOUNT DESCRIPTION				9/24/15 106-237-533.92-00 CONTRIBUTIONS & GRANTS	DELINQ PREVENTION GRANTS	PUBL SAFETY SALES TAX FND	
10/08/15	ACCOUNT NUMBER			REG PLAN COMM FND075	; 106-237-533.92-00	DELINÇ	PUBL S	
	CHECK			REG	9/24/15			
	PO NO CHECK NUMBER	TAX FND	GRANTS		530889			
	TRANS F	FETY SALES	PREVENTION	Y TREASURER	06 25			
	VENDOR VENDOR TRN B TR NO NAME DTE N CD	*** FUND NO. 106 PUBL SAFETY SALES TAX FND	*** DEPT NO. 237 DELINQ PREVENTION GRANTS	161 CHAMPAIGN COUNTY TREASURER	9/23/15 02 VR 106-			



EXPENDITURE APPROVAL LIST

10/08/15

11	N EXPENDITURE AMOUNT			4 619.00 619.00 *	364.43 361.82 361.82 1,088.07 *	P/ 45.51 45.51 *	310.81 308.58 308.58 927.97 *	6.50- 26.90 13.45 9.00 9.00 2.40- 32.50- 16.95 *
PAGE	ITEM DESCRIPTION			INS SEP HI, LI, & HRA VENDOR TOTAL	IMRF 9/4 P/R IMRF 9/18 P/R IMRF 10/2 P/R VENDOR TOTAL	INSWORK COMP 9/4,18 VENDOR TOTAL	ER FICA 9/4 P/R ER FICA 9/18 P/R ER FICA 10/2 P/R VENDOR TOTAL	INV 83655677 6/16 INV 83683969 7/9 INV 83715813 8/5 INV 55271472 7/31 INV 55364969 9/30 INV 83774196 9/22 VENDOR TOTAL
	ACCOUNT DESCRIPTION			EMPLOYEE HEALTH/LIFE) IMRF - EMPLOYER COST) IMRF - EMPLOYER COST) IMRF - EMPLOYER COST	WORKERS' COMPENSATION	SOCIAL SECURITY-EMPLOYER SOCIAL SECURITY-EMPLOYER SOCIAL SECURITY-EMPLOYER	OFFICE SUPPLIES OFFICE SUPPLIES OFFICE SUPPLIES EQUIPMENT RENTALS EQUIPMENT RENTALS EQUIPMENT RENTALS OFFICE SUPPLIES
10/08/15	CHECK ACCOUNT NUMBER DATE			HEALTH INSUR FND 620 9/30/15 641-053-513.06-00	I.M.R.F. FUND 088 9/30/15 641-053-513.02-00 0/08/15 641-053-513.02-00 0/08/15 641-053-513.02-00	SELF-FUND INS FND476 8/15 641-053-513.04-00	SOCIAL SECUR FUND188 9/30/15 641-053-513.01-00 0/08/15 641-053-513.01-00 0/08/15 641-053-513.01-00	8/15 641-053-522.02-00 8/15 641-053-522.02-00 8/15 641-053-522.02-00 8/15 641-053-533.51-00 8/15 641-053-533.51-00 8/15 641-053-533.51-00 8/15 641-053-522.02-00
	PO NO CHECK CI NUMBER DA	RANT		531027 9/3	I.N 531030 9/30/1 531384 10/08/1 531385 10/08/1	SEL 531390 10/08/1	SOC 531035 9/30/1 531393 10/08/1 531394 10/08/1	531396 10/08/15 531396 10/08/15 531396 10/08/15 531396 10/08/15 531396 10/08/15 531396 10/08/15
	TRANS PO NO	ACCESS INITIATIVE GRANT	MENTAL HEALTH BOARD	ry treasurer 520- 130	Y TREASURER 88- 47 88- 50 88- 54	Y TREASURER 19- 62	NTY TREASURER 188- 84 188- 84	641- 70 641- 70 641- 70 641- 70 641- 70 641- 70
	VENDOR VENDOR TRN B TR NO NAME DTE N CD	FUND NO. 641 ACCESS	DEPT NO. 053 MENTAL	CHAMPAIGN COUNTY TREASURER 9/29/15 05 VR 620- 130	CHAMPAIGN COUNTY TREASURER 9/29/15 02 VR 88- 47 10/01/15 03 VR 88- 50 10/07/15 02 VR 88- 54	CHAMPAIGN COUNTY TREASURER 10/01/15 03 VR 119- 62	CHAMPAIGN COUNTY TREASURER 9/29/15 02 VR 188- 80 10/01/15 03 VR 188- 84 10/07/15 02 VR 188- 88	ABSOPURE WATER 10/01/15 08 VR 64
	VENDOR NO	*** FUND	*** DEPT	4. L	88	176	188	572

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10/08/15

	EXPENDITURE AMOUNT		102.85	33.75 33.75 *	124.35	31.20 76.30 107.50 *	522.24 522.24 *	3,588.19 *
PAGE 12	ITEM DESCRIPTION		ES8771403010217756 SE VENDOR TOTAL	INV 1114874 9/14 VENDOR TOTAL	28636916600001 9/2 VENDOR TOTAL	4342 SEVEN SNTS 8/1 4342 SIMP COMP 9/8 VENDOR TOTAL	INV 081070711 9/1 VENDOR TOTAL	DEPARTMENT TOTAL
	ACCOUNT DESCRIPTION		0 COMPUTER/INF TCH SERVICES8771403010217756 VENDOR TOTAL	0 TELEPHONE SERVICE	O TELEPHONE SERVICE) BUSINESS MEALS/EXPENSES) PHOTOCOPY SERVICES	MENTAL HEALTH BOARD
10/08/15	CHECK ACCOUNT NUMBER DATE		AC#8771403010217756 9/10/15 641-053-533.29-00	D/B/A CHAMPAIGN TEL 9/24/15 641-053-533.33-00	.NT AC 286369166-00001 9/18/15 641-053-533.33-00	VISA CARDMEMBER SERVICES-ACCESS INITITIV AC#4798510049574342 0/01/15 08 VR 641- 69 531599 10/08/15 641-053-533.84-00 0/01/15 08 VR 641- 69 531599 10/08/15 641-053-522.02-00	9/10/15 641-053-533.85-00	MENTAL
	PO NO CHECK NUMBER	TE GRANT	NITIATIVE ACCT AC 530333 9/10/	530960	TH BD/ACCESS II	-ACCESS INITIT 531599 10 531599 10	530454	
	TRANS	INITIATIV	ACCESS I	28- 165	S-MNTL HL 41- 68	SERVICES 41- 69 41- 69	ON 41- 67	
	VENDOR VENDOR TRN B TR NO NAME DTE N CD	*** FUND NO. 641 ACCESS INITIATIVE GRANT	COMCAST CABLE - ACCESS INITIATIVE ACCT 9/04/15 04 VR 641- 66 530333 9	SPOC LLC 9/22/15 01 VR	VERIZON WIRELESS-MNTL HLTH BD/ACCESS INT AC 9/17/15 02 VR 641- 68 530695 9/18/	VISA CARDMEMBER SE 10/01/15 08 VR 641- 10/01/15 08 VR 641-	XEROX CORPORATION 9/04/15 04 VR 641-	
	VENDOR '	*** FUND	18053	67867	18552	78892	81610	

3,588.19 *

FUND TOTAL

ACCESS INITIATIVE GRANT

EXPENDITURE APPROVAL LIST

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VENDOR	VENDOR VENDOR TRN B TR NO NAME DTE N CD	TRANS PO NO	PO NO CHECK NUMBER	CHECK	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO.	D NO. 090 MENTAL HEALTH	3ALTH						
*** DEP	DEPT NO. 053 MENTAL HI	MENTAL HEALTH BOARD						
25	CHAMPAIGN COUNT 11/02/15 02 VR	Y TREASURER 53- 369	532883 1	RENT-C	RENT-GENERAL CORP 6/15 090-053-533.50-00	00 FACILITY/OFFICE RENTALS	NOV OFFICE RENT VENDOR TOTAL	2,952.68
41	CHAMPAIGN COUNTY TREASURER 10/16/15 02 VR 620- 146 10/27/15 05 VR 620- 142	TREASURER)- 146)- 142	532228 1	HEALTH 10/23/15 C 10/30/15 C	HEALTH INSUR FND 620 3/15 090-053-513.06-00 0/15 090-053-513.06-00	00 EMPLOYEE HEALTH/LIFE INS	JUL-OCT FSA&HRA ADM CCT HI,LI,& HRA VENDOR TOTAL	98.00 3,294.09 3,392.09 *
°(49)	CHAMPAIGN COUNTY TREASURER 10/27/15 05 VR 88- 56 11/03/15 05 VR 88- 59	TREASURER 3- 56 1- 59	532507 10	I.M.R.F 10/30/15 09(11/06/15 09(.F. FUND 088 090-053-513.02-00 090-053-513.02-00	00 IMRF - EMPLOYER COST 00 IMRF - EMPLOYER COST	IMRF 10/16 P/R IMRF 10/30 P/R VENDOR TOTAL	1,289.42 1,349.20 2,638.62 *
161	CHAMPAIGN COUNTY TREASURER 11/02/15 02 VR 53- 362	TREASURER - 362	532891 11	REG PL 11/06/15 0	PLAN COMM FND075 090-053-533.92-00	00 CONTRIBUTIONS & GRANTS	NOV YOUTH ASSMNT CT VENDOR TOTAL	2,167.00
179	CHAMPAIGN COUNTY TREASURER 11/02/15 02 VR 53- 361	TREASURER - 361	532893 11	CHLD A	ADVC CTR FND679 090-053-533.92-00	0 CONTRIBUTIONS & GRANTS	NOV CAC VENDOR TOTAL	3,090.00 *
188	CHAMPAIGN COUNTY TREASURER 10/27/15 05 VR 188- 93 11/03/15 05 VR 188- 98	TREASURER - 93 - 98	532513 10	SOCIAL 10/30/15 0 11/06/15 0	L SECUR FUND188 090-053-513.01-00 090-053-513.01-00	0 SOCIAL SECURITY-EMPLOYER 0 SOCIAL SECURITY-EMPLOYER	FICA 10/16 P/R FICA 10/30 P/R VENDOR TOTAL	1,099.67 1,150.67 2,250.34 *
15230	CHAMPAIGN COUNTY TENT & AWNING CO., 10/29/15 02 VR 53- 346 53254	TENT & AWNIN - 346	luni) BC	X 638 090-053-533.89-00	0 PUBLIC RELATIONS	INV 22836 10/22 VENDOR TOTAL	754.16 754.16 *

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22300	DEVELOPMENTAL 11/02/15 02 VR	SERVICES CENTER 53- 364	OF 532943	CHAMP? 11/06/15 C	CHAMPAIGN COUNTY INC 6/15 090-053-533.92-00	CONTRIBUTIONS & GRANTS	NOV INDIV/FAM SUP VENDOR TOTAL	31,345.00 31,345.00 *
22730	DON MOYER BOYS 10/13/15 02 VR 11/02/15 02 VR 11/02/15 02 VR	& GIRLS CLUB 53- 334 53- 370 53- 370	531809 532946 532946	10/15/15 0 11/06/15 0 11/06/15 0	090-053-533.92-00 090-053-533.92-00 090-053-533.92-00	CONTRIBUTIONS & GRANTS CONTRIBUTIONS & GRANTS CONTRIBUTIONS & GRANTS	ENGAGE/SOC DIR AMEN NOV ENGAGE/SOC MRKT NOV YOUTH ENGAGE VENDOR TOTAL	7,893.00 6,500.00 14,167.00 28,560.00 *
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26000	FAMILY SERVICE C 11/02/15 02 VR 5 11/02/15 02 VR 5 11/02/15 02 VR 5	OF CHAMPAIG 53- 357 53- 357 53- 357	CHAMPAIGN COUNTY 357 532956 1 357 532956 1 357 532956 1	GRANTS 11/06/15 0 11/06/15 0 11/06/15 0	90-053-533.92-00 90-053-533.92-00 90-053-533.92-00	CONTRIBUTIONS & GRANTS CONTRIBUTIONS & GRANTS CONTRIBUTIONS & GRANTS	NOV SELF HELP NOV SENIOR COUNSEL NOV FAMILY COUNSEL VENDOR TOTAL	2,369.00 11,861.00 3,333.00 17,563.00 *
27200	FLUID EVENTS LLC 11/02/15 02 VR 5	.c 53- 372	11 1:	11/06/15 0	090-053-533.89-00	PUBLIC RELATIONS	INV 1055 10/23 VENDOR TOTAL	455.00 455.00 *
44570	MAHOMET AREA YOUTH 11/02/15 02 VR 53- 11/02/15 02 VR 53-	OUTH CLUB 53- 366 53- 366	532986 1.	601 EAS 11/06/15 09 11/06/15 09	EAST FRANKLIN 090-053-533.92-00 090-053-533.92-00	CONTRIBUTIONS & GRANTS CONTRIBUTIONS & GRANTS	NOV UNIV SCREENING NOV BLAST VENDOR TOTAL	833.00 1,250.00 2,083.00 *
45445	MARTIN ONE SOURCE 10/29/15 02 VR 53	E 3- 347	532612 10	10/30/15 09	090-053-533.89-00 1	PUBLIC RELATIONS	INV 114398 10/16 VENDOR TOTAL	476.00

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PAGE 7	ITEM DESCRIPTION		INTERP SVC 10/17 VENDOR TOTAL	NOV PROFESSIONAL FE VENDOR TOTAL	279 MILE 10/1-26 MEAL 10/26 CHAMPAIG EXPO SUPPLY 10/16 VENDOR TOTAL	263 MILE 9/1-10/29 PARKING 9/1-10/29 VENDOR TOTAL	NOV/DEC CONSULT FEE VENDOR TOTAL	PRSNL AST EXPO 10/1 VENDOR TOTAL	INTERP SVC 10/17 VENDOR TOTAL	INV 145 10/17 VENDOR TOTAL
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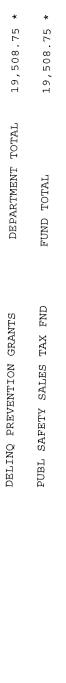
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CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

DECISION MEMORANDUM

DATE:

November 18, 2015

TO:

Members, Champaign County Mental Health Board (CCMHB)

FROM:

Peter Tracy, Executive Director

SUBJECT: FY17 Allocation Priorities and Decision Support Criteria

Overview

The purpose of this memorandum is to provide recommendations pertaining to the FY17 (July 1, 2016 through June 30, 2017) Champaign County Mental Health Board (CCMHB) allocation decision support criteria and funding priorities. On October 27, 2015 the CCMHB held a retreat which used a portion of the agenda to focus on funding priorities for FY17. This was an open public meeting and was attended by stakeholders and other interested parties.

Since FY08, we have seen State of Illinois funding support for mental health, developmental disabilities, and substance abuse programs, services and supports plummet. General revenue funds have been reduced as Medicaid has expanded to be the primary fund source. Most recently the emergence of Medicaid Managed Care has resulted in increased efforts to manage the budget with little regard for the impact of these changes on the community mental health system in Illinois.

The community mental health system is changing rapidly and the landscape will be very different in Champaign County next year. My colleague in Macon County said it best: "the community mental health system we have known during our careers is dead." I fully agree with this assessment. Our primary providers are struggling to survive and many other smaller agencies are on the verge of going under. It is generally accepted that in order to survive it is necessary agencies be larger. For this reason many agencies are seeking merger opportunities and it is very likely we will see some of our local providers merging with larger statewide organizations.

In addition, state support of programs and services for which they have been traditionally responsible has changed (e.g., Psychiatric Leadership Grant). With the rug pulled out from under traditional core services, the CCMHB is placed in a difficult spot. To what extent do we shift money from lower priority programs to shore up core services such as psychiatric? To what extent do we risk destabilizing smaller providers in an effort to address our core responsibilities?

The October 27 retreat was helpful in that we were able to come to consensus concerning three primary areas of priority for the FY17 allocation cycle. Although this provides us with clarity, it will not make our work any easier. Prepare yourselves for perhaps the most challenging funding cycle in the history of the CCMHB.

Statutory Authority

Funding policies of the Champaign County Mental Health Board (CCMHB) are predicated on the requirements of the Illinois Community Mental Health Act (405 ILCS 20 / Section 0.1 et.seq.). All funds shall be allocated within the intent of the controlling act as codified in the laws

BROOKENS ADMINISTRATIVE CENTER

1776 E. WASHINGTON STREET

of the State of Illinois. CCMHB Funding Guidelines require annual review and update of decision support criteria and priorities in advance of the funding cycle application process.

Medicaid Supplementation

This is an overarching funding and allocation consideration. 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."

Additionally, CCMHB/CCDDB contracts require our funding to be the last funds used if other funding is available. This means Medicaid eligible clients receiving services from providers via contracts with State Agencies are excluded from access to local (CCMHB/CCDDB) funding for services that are covered by Medicaid or other State of Illinois contracts. It is our position that CCMHB/CCDDB funding shall not be used for services/supports that could be billed to the State of Illinois (i.e., Medicaid), and local funding shall not be used to supplant other funding sources, particularly Medicaid which is an entitlement with a defined set of benefits for enrolled and eligible individuals.

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.

NOTICE: All applications shall be received on time. There will be no consideration for late applications.

- 3. Application must relate directly to mental health, substance abuse or developmental disabilities programs and services.
- 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.

FY17 Decision Priorities and Decision Support Criteria

Based on discussions at the retreat, the CCMHB has concentrated its focus on three primary areas. It is understood that it may well be necessary to make significant cuts or eliminate funded programs and services which are not included in these priorities.

Priority #1: Collaboration with the Champaign County Developmental Disabilities Board
Full compliance with the terms and conditions of the Intergovernmental Agreement between the
CCMHB and the Champaign County Developmental Disabilities Board (CCDDB). This



agreement defines the FY17 allocation for developmental disabilities programs and services, as well as the expectation for integrated planning by the Boards.

All allocation decisions for services and supports for people with intellectual and developmental disabilities (I/DD) shall be predicated on their relationship to inclusion and community integration. All of the major areas of services and supports require movement away from segregated centers and services which limit the person's access to the community. In fact, the new CMS rule actually emphasizes that States are expected to ensure that people with I/DD have the same level of access to the community as people who do not have a disability. Using the Person Centered Planning process as a guide, the emerging changes are focused on integration, quality of life, self-determination, human and civil rights, advocacy, and protection. That said, the CCMHB strongly believes and will support programs, services and supports which manifest the following:

- Individuals with disabilities have the opportunity to live like those without disabilities, and have control over their day and over where and how they live.
- Supports for individuals with disabilities that focus on building connection, companionship, and contribution in the broader community, and on supporting presence and participation in community settings where their individual contributions will be recognized and valued.
- Supports for individuals with disabilities that focus on developing and strengthening personal support networks that include friends, family members, and community partners.
- Supports for individuals with disabilities 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.

As a local funding organization responsive to changes in law, rule, and regulation, all applications shall be evaluated using the "lens of inclusion and integration."

Priority #2 – System of Care for Youth and Families

The CCMHB has focused on youth with serious emotional disturbance (SED) and multiagency and system involvement since 2001. For FY17 we will continue to sustain components of the System of Care by prioritizing the following initiatives:

- The Champaign County Community Coalition (aka, System of Care) the Coalition has all of the key systems (local government, education, child welfare, parks and recreation, juvenile justice, mental health, substance use disorder treatment, and other stakeholders) at the table and is the manifestation of our system of care. All CCMHB efforts should be coordinated with the Coalition.
- Cultural and Linguistic Competence under the leadership of Shandra Summerville will work with providers to address the issues facing underserved youth and families who are over represented in juvenile justice, education sanctions (suspensions and expulsions), child welfare, and exposure to trauma.
- Parenting with Love and Limits Maintenance of Parenting with Love and Limits (PLL) as a means of assuring clinical efficacy and attainment of desired outcomes for multiagency involved youth with SED.



- Coordination and integration with CHOICES to assure all youth requiring Wraparound services and supports are connected.
- Support of family and youth organizations to assure all services are "family-driven" and "youth guided."
- Coordination and support of Division of Mental Health efforts to take system of care to scale in Illinois.

Priority #3 - Behavioral Health Services and Supports for Adults with a Behavioral Health and Criminal Justice Interface.

The CCMHB is fully committed to addressing the needs of adults with serious mental illnesses and/or substance use disorders who also intersect with the criminal justice system and more specifically the Champaign County Jail. In the last year much work has been done by local government, law enforcement, community based agencies, and other stakeholders to address deficiencies in the service system which result in the unnecessary incarceration of people with serious behavioral health needs. Currently, our community (Champaign County) was awarded and will be participating in a Department of Justice planning grant. For FY17 the CCMHB will support this process and use our resources to support programs, supports and services to appropriately serve this population by developing and/or supporting:

- enhanced crisis response with stronger case management (WRAP)
- expanded access to psychiatric services
- peer mentoring and support options
- detoxification and psychiatric stabilization options
- wellness programming
- specialty courts and related services, and support services provided at the jail
- Crisis Intervention Training for law enforcement

Overarching Decision Support Considerations

The FY17 CCMHB allocation process will require all applications to address the overarching criteria listed below. Assessment of all FY17 applications will focus on alignment with these overarching criteria.

- 1. 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 Linguistically Appropriate Services (CLAS) standards outlined in "A Blueprint for Advancing and Sustaining CLAS Policy and Practice."
- 2. Anti-Stigma Efforts Activities that support efforts to reduce stigma associated with mental health, substance use disorders, and intellectual disabilities/developmental disabilities by increasing community awareness and challenging negative attitudes and discriminatory practices.
- 3. Countywide Access Programs and services that promote county-wide access for all people in Champaign County. Zip code data is mandated.
- 4. Budget and Program Connectedness Applications that clearly explain the relationship between budgeted costs and program components receive additional consideration. "What is the Board buying?" is the salient question that must be answered in the proposal, and clarity is required.



5. Realignment of Existing FY16 Contracts to Address Priorities - The CCMHB reserves the right to reduce or eliminate incumbent programs and services in order to support the three FY17 priorities listed in this memorandum.

Secondary Decision Support and Priority Criteria

The process items included in this section will be used as discriminating factors which influence final allocation decision recommendations. The CCMHB uses an on-line system for agencies interested in applying for funding. An agency must complete the one-time registration process including the Organization Eligibility Questionnaire before receiving access to the on-line application forms.

Approach/Methods/Innovation: Applications proposing evidence based or research based approaches, and in addition address fidelity to the specific model cited. Applications demonstrating creative and/or innovative approaches to meet defined community need will receive additional consideration.

Staff Credentials: Applications that address and highlight staff credentials and specialized training will receive additional consideration.

Process Considerations

The criteria described in this memorandum are to be used as guidance by the Board in assessing applications for CCMHB funding, however, it is not the sole consideration taken into account in finalizing funding decisions. Other considerations would include the judgment of the Board and its staff, opinion 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 CCMHB funds, applications must reflect the goals and objectives stated in the Three Year Plan as well as the operating principles and public policy positions taken by the Board. The final funding decisions rest with the CCMHB and their judgment concerning the most appropriate and efficacious use of available dollars based on assessment of community needs, equitable distribution across disability areas, and decisionsupport match up.

For FY17, the CCMHB has sharpened its focus to concentrate on three specific areas. The CCMHB reserves the right to set aside funding if applications received are not responsive to the criteria and priorities highlighted in this memorandum. In this event, the CCMHB shall use the set aside dollars to support Requests for Proposals (RFP) with prescriptive specifications to address priorities.

Caveats and Application Process Requirements:

- Submission of an application does not commit the CCMHB 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 on-line registration and application system, application forms, budget forms, application instructions and CCMHB 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 CCMHB retains the right to accept or reject any or all applications, and reserves the right to refrain from making an award when it is deemed to be in the best interests of the county.
- The CCMHB reserves the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCMHB deems such variances to be in the best interest of Champaign County.
- Applications and submissions become the property of the CCMHB 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 on-line system.
- The CCMHB 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 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 CCMHB reserves the right to further define and add additional application components as needed. Applicants selected as responsive to the intent of this on-line 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 CCMHB 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 CCMHB 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 CCMHB 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 CCMHB also reserves the right to require the submission of any revision to the application, which results from negotiations conducted.
- The CCMHB reserves the right to contact any individual, agency or employer listed in the application or to contact others who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.
- For FY17, multi-year applications shall be considered as part of the award process.



Decision Section:				
Motion: Move to approve the FY17 Allocation Priorities	and Decision	Sunnort	Criterio	20
described in this memorandum.	and Decision	Support	Cincia	as
Approved				
Denied				
Modified				
Additional Information Needed				



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

14.B,

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

DECISION MEMORANDUM

DATE: November 18, 2015

TO: Champaign County Developmental Disabilities Board (CCDDB)

FROM: Peter Tracy, Executive Director

SUBJECT: FY17 Allocation Priorities and Decision Support Criteria

Overview

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. A draft document was reviewed during the CCDDB's regular meeting on October 21, 2015. It was also included in the packet for the October 28, 2015 retreat event, during which copies of the priorities memo approved in November 2014 were distributed for the sake of comparison. The draft FY17 funding priorities document was then shared with stakeholders and community-based providers for their input. A final version is presented for review and action.

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."

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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 CCDDB 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

The CCDDB 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 Center for Medicare and Medicaid Services (CMS) rule changes. In addition, the applications will be required to include measurable objectives, goals, and timelines.

<u>Underserved Populations</u>

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 CCDDB funding and which identifies and mobilizes community partnerships and resources that exist beyond the service system. To the extent possible, CCDDB 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 CCDDB Priorities

Priority: Planning for People with Challenging and Complex Service Needs

The CCDDB 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

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

To the extent possible, the CCDDB 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 CCDDB 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 CCDDB 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 (4person, 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 CCDDB 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. <u>Approach/Methods/Innovation</u>: 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. <u>Evidence of Collaboration</u>: 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 CCDDB Values and Priorities: Applications proposing to develop and utilize records systems for individual supports, programs, and projects that clearly reflect CCDDB values and priorities. Such records systems can be used to provide rapid feedback to CCDDB 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. <u>Resource Leveraging</u>: 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 CCDDB 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 CCDDB 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 CCDDB 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 CCDDB 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 <u>not</u> 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 CCDDB.

Caveats and Application Process Requirements:

- Submission of an application does not commit the CCDDB 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 CCDDB 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 CCDDB 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 CCDDB reserves the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCDDB deems such variances to be in the best interest of Champaign County.
- Applications and submissions become the property of the CCDDB 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 CCDDB 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 CCDDB 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 CCDDB 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 CCDDB 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 CCDDB 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 CCDDB also reserves the right to require the submission of any revision to the application which results from negotiations conducted.
- The CCDDB 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.

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Motion to approve the CCDDB FY	17 Allocation	Priorities	and	Decision	Support	Critorio	0.0
described in this memorandum.			aria	Decision	Support	Cinteria	as
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Deny							
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Request Additional Info	mation						





14.C.

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

DECISION MEMORANDUM

DATE:

November 18, 2015

TO:

Members, Champaign County Mental Health Board

FROM:

Peter Tracy, Executive Director

SUBJECT:

Emergency Allocation – Promise Healthcare (Frances Nelson)

Background and Purpose:

Due to policies of the State of Illinois, Department of Human Services, the Psychiatric Leadership grant funding has been discontinued. The combination of the loss of the Psychiatric Leadership grant and low reimbursement rate has forced Community Elements to negotiate transfer of their psychiatric service to Promise Healthcare effective January 1, 2016.

This transfer is viable for Promise Healthcare because as a Federally Qualified Health Center (FQHC) they receive an enhanced rate for psychiatric services. The details of this transfer are currently being worked out and if everything goes as planned psychiatric services from Promise Healthcare will be provided on site at various Community Element locations.

The transfer will result in some one-time costs and shortfalls related to the provision of services at Community Elements' Respite Center, the need for a registration clerk, electronic patient records, and the added costs of uninsured patients.

Analysis:

This is a real emergency. Psychiatric services for about 1,200 people will be lost if the transfer to Promise Healthcare doesn't take place.

The CCMHB has supported moving psychiatric services to the FQHC for about ten years and this is a model that has worked in other locations. These services are not viable with the changes made by DHS and transfer to Promise Healthcare is the obvious solution. The shortfall for the first year will be about \$125,000 and subsequent years should be approximately \$71,000. Most of this is to reimburse for uninsured people. We anticipate a request for the \$71,000 in annual operating costs to be included in applications for FY17 funding.

Promise Healthcare has submitted a request for \$36,000 to United Way of Champaign County to fund a portion of one-time costs. The Community Impact Committee has recommended to the United Way Board that the request be approved.

Recommendations

This is the right move at the right time and is in the best interests of Champaign County. I recommend we amend existing Promise Healthcare contracts to add this service and address the unreimbursed costs less the amount granted by United Way. Please refer to the attached program plan for additional information.

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<u>DECISION SECTION</u> : Motion to support the transfer of psychiatric services to Promise Healthcare by allocating funding of up to \$51,000 for the period between January 1, 2016 and June 30, 2016.
APPROVED by roll call
DENIED
MODIFIED
DEFERRED – more information needed





OPERATING FRANCES NELSON AND SMILEHEALTHY

Promise Healthcare Psychiatry at Community Elements Contract Amendment and Multi-year Funding Request November 2, 2015

<u>Project Summary</u>: Promise Healthcare is seeking support to move the operations of psychiatry services to Promise Healthcare from Community Elements. Cuts in state funding threaten the loss care for over 1,200 patients seeing a psychiatrist at Community Elements annually.

Project Narrative: Promise Healthcare is trying to move quickly to help maintain a critical community services — access to psychiatry at Community Elements. In the last year over 1,200 patients were served by nearly 4,200 visits with a psychiatrist. Community Elements operated this program for years with the support of a state psychiatric leadership grant that has been cut and is not likely returning. Since Community Elements was paid a small fee-for-service Medicaid rate of only \$28 for most visits, over \$700,000 a year was needed to make sure that care was available for some of the neediest in our community.

Promise Healthcare operates Frances Nelson and our satellites at Community Elements and Presence Covenant Medical Center's Community Resource Center as a Federally Qualified Health Center and is paid and enhanced reimbursement or encounter rate for care. For Promise, most visits will be paid at our \$108 encounter rate. Psychiatry at Community Elements under Promise Healthcare will have significant start up costs but should have a more manageable loss in the future. Our year two projection is that the program will need to raise about \$74,000 as compared to over \$700,000.

Promise Healthcare will hire or contract directly with both of the psychiatrists serving patients for Community Elements. We will support the doctors with a nurse, medical assistant, benefit enrollment staff and registration. They will work at Community Elements like they do now, but patients will become patients of Promise Healthcare, see Promise Healthcare psychiatrists, but continue to work with Community Elements programs and staff to provide the full scope of support for these patients.

The clearest objective of this request will be to successfully move this critical service and be operational with minimal disruption to the patients. Once operating, Promise will work to meet production, quality, and sustainability goals while maintaining a strong collaboration with Community Elements and their programs. In the longer term, Promise hopes to be able to improve and expand our primary medical care program we already have at Community Elements at 801 N. Walnut, Champaign.



<u>Budget of Request</u>: The difference in what patient revenue (billing Medicaid, Medicare, and insurance) can generate and the costs of this program in the first year will be \$125,000. This includes

- \$36,000 for the one-time transition costs of moving the operations of psychiatry services to Promise Healthcare from Community Elements. Promise Healthcare has submitted a Safety Net Funding Request to United Way of Champaign County for these expenses.
- \$15,000 of lost revenue to adding the Community Elements Respite Center as a site in scope of Promise Healthcare with HRSA, Medicaid and Medicare; and
- \$74,000 to cover care for the uninsured at about \$56,000 and a .5 FTE benefit enrollment person at \$18,000.

Community Elements reports that about 7% of their psychiatry patients are low-income and uninsured. The cost of delivering care to that 7% is projected to be \$56,000. Additionally to maximize the number of patients who are enrolled in medical coverage, to help patients select the best plan and PCP, and to help patients through their Medicaid re-determination, we will have one of our Outreach and Enrollment staff members working at Community Elements at least half of the time.

Promise Healthcare is seeking a one time grant of \$15,000 to support the revenue lost while adding the Respite Center as a site in scope of Promise Healthcare and a mulit-year award of \$74,000 to cover the cost of care to the uninsured and a benefit enrollment/registration person to serve the psychiatry patients.



Promise Healthcare Psychiatry at Community Elements 10212015

Promise Healtneare responding a Community Elements 10212013
Financial Projection
At \$118 reimbursement for Medicare, \$105 for Medicaid, and \$63 for Insurance encounters; 63% Medicaid; 20% Medicare, 17% Insurance, (7% Uninsured not included in revenue) Psychiatrists have 570 kept visits per month, 1267 unduplicated patients annually Replacing 1 nurse with MA, 1/2 Outreach and Enrollment staff

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Year Two budgeted expenses not covered by patient revenue

\$ (71,017)





14.D.

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

DECISION MEMORANDUM

DATE:

November 18, 2015

TO:

Members, Champaign County Mental Health Board

FROM:

Peter Tracy, Executive Director

SUBJECT:

CCMHB 2016 Budget - Additional Motion Pertaining to READY

The Champaign County Board has approved the following motion as a condition for final approval of the Champaign County Mental Health Board Budget for 2016.

I move the Champaign County Board requests the Champaign County Mental Health Board to find \$53,000 within its proposed FY2016 budget and re-appropriate that money to its contributions and grants program line with an emphasis to focus on re-establishing the effective program of employing a clinician to serve youth at the Juvenile Detention Center and the READY program or any similarly effective program and that the bottom line of the proposed FY2016 budget remains unchanged at Revenue to Expenditures equal to -\$55,881.

Background Considerations

The Champaign County Mental Health Board (CCMHB) has a long history of funding services for youth and families involved with the READY School program. During the current funding cycle youth involved with READY have access to services at Community Elements and Prairie Center's Parenting with Love and Limits (PLL) program. Schools are eligible to make direct PLL referrals. In addition, the Prairie Center's youth program includes a two-day commitment to services at READY. The following is a chronology of CCMHB investments (researched by Mr. Mark Driscoll, Associate Director) in services at READY School:

The chronology is based on application program summaries and related program information, submitted for consideration and awarded funds by the CCMHB. READY School appears to have received 20 hours of on-site services per week from the Mental Health Center of Champaign County (now known as Community Elements) through FY11. Once the agency moved to implement SPARCS as part of the ACCESS Initiative, level of service at READY School cannot be determined.

Prairie Center in FY12 requested and was awarded funds to implement a youth substance use disorder treatment program using schools as primary referral sources and locations for service. The Seven Challenges model, an evidence based program, was implemented in FY13. The program continued services in school settings, including two days per week at READY School. Since FY13 through the current FY16 contract, the Youth Service program continues to provide services on-site two days per week at READY School.

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Detailed Chronology - 2001 to 2016

During the 2001 contract year, funds appear to have been redirected within one of the Mental Health Center of Champaign County contracts to establish the Rapid Access Children and Adolescent Program. As part of the FY02 allocation process in the fall of 2001, the Mental Health Center of Champaign County requested and was awarded \$87,298 for the Rapid Access program. Elements of the program included school based services and the Open Clinic with a focus on serving youth attending alternative schools based in Champaign or presenting at Open Clinic. School based services had one full time clinician that serves the two alternative schools in Champaign. READY School at the Illinois Terminal Building while not directly referenced in the records was one of the alternative school sites. The Open Clinic also was also held at the Illinois Terminal Building.

For the FY03/04 allocation cycle (bridged two CCMHB fiscal years to move contracts terms to state fiscal year), the Mental Health Center proposed a reconfiguration of various programs to improve access to services for children and families including the Rapid Access program (School Based Services and Open Clinic). The expanded program, renamed Open Access for Children and Families (OACF), was to become the central access point for children and families with an emphasis placed on underserved populations. Walk-in services would be available at multiple sites including schools. The program continued to have one full time clinician that served two alternative schools based in Champaign. Total funding provided through CCMHB resulting from combining multiple programs/services was \$429,372.

During the term of the contract, school based services expanded from only serving alternative schools in Champaign to include Rantoul Township High School, Urbana Middle School, and Franklin Middle School. Three fulltime clinicians provided school based services. For FY05, the expansion of school based services was included as part of the OACF. The program as a whole continued to experience modifications in an effort to configure services to improve access to children and families. Funding awarded for FY05 was \$450,000. The Mental Health Center closed the Open Clinic during FY05 and The Nurtured Heart Approach was introduced in Champaign Unit #4 School District.

For FY06 the program was renamed Community Connections. Service components included school based services, community based services, and clinic based services. Some specialized programming was introduced at DMBGC and some elementary schools and the MHC presence at FNHC ended as part of changes to the overall program. For FY06, school based services include the addition of The Nurtured Heart Approach in two Unit 4 schools for 17 hours per week total. School based clinician hours were divided between Rantoul Township High School (14 hours per week), READY School (20 hours per week), and Urbana School Based Health Clinic/Urbana Middle School (24 hours per week). Home visits for outreach to families of READY and Urbana students was included in the scope of services. Total staffing for school based services was reduced in FY06 to 2.2 fulltime direct service staff. Total funding awarded was unchanged at \$450,000.

For FY07, the Mental Health Center revamped the Community Connections program continuing school based services, reconfiguring community based services into the Family Empowerment Project, and dropping clinic based services from the program altogether. Slight reduction in school based services in Rantoul was made with no changes for other school based services including those at READY School. Use of "Teen Screen" a suicide risk screen was introduced as part of school based

services. The Nurtured Heart Approach was expanded within Champaign Unit #4 with the district committing resources to the program. For FY07 funding requested totaled \$338,300 and an award of \$333,600 was approved. Expectations for evidence of Project ACCESS partner collaboration are noted in the summary as not being addressed. Later that year, Project ACCESS partner contracts were amended to add Project ACCESS to contract name and execution of partnership agreement.

School based services are submitted under a separate application for FY08, splitting off from Project ACCESS Community Connections. Staffing level for school based services was consistent at 2.1 fulltime staff. Services included school based clinicians and implementation of the Nurtured Heart Approach. Staffing pattern for school based services was for Urbana Middle School and READY School to receive two days of staff time per week with one day per week for supervision, team meetings, and additional family/school services in the homes/schools. Rantoul Township High School would receive 2 days per week. The Mental Health Center was awarded the full request of \$116,590. Contract term was extended for a second year, through FY09.

For FY10, the School Based and Nurtured Heart program is renamed Outreach Clinicians. Staffing pattern for Urbana Middle School and READY School remained the same - two days of staff time per week with one day per week for supervision, team meetings, and additional family/school services in the homes/schools and Rantoul Township High School would continue to receive 2 days per week. Proposed staffing level was increased to 2.85 fulltime staff of which 2.4 FTE are direct service staff. The increase in staff time is for a fulltime direct service position to conduct outreach and deliver services to rural schools/communities. The Nurtured Heart Approach was no longer included as a service as Champaign Unit #4 School District hired the clinician. Program requested \$144,167 and was awarded \$106,000.

Program is renamed ACCESS Initiative: School Outreach by the Mental Health Center for FY11. School based services were essentially unchanged from FY10 including staffing pattern serving READY School -2 days per week on-site. Program again requested \$144,167 and was awarded \$106,000.

For FY12, the ACCESS Initiative: School Outreach (SPARCS) program is funded with federal funds available under the SAMHSA Cooperative Agreement. Total award remains at \$106,000. Program moves to implement the SPARCS (Structured Psychotherapy for Adolescents Responding to Chronic Stress) model. Application refers to involvement with Urbana, Champaign and READY Schools as well as allowing time for staffing training and implementation of the model in schools and the community. Specific allocation of time at READY School is not indicated, presumably a similar staffing pattern as prior years would have occurred. Total direct service staff equaled 1.64 fulltime positions.

With training and implementation of the SPARCS model underway the program was said to be offered at READY School and Centennial High School in FY13 with possible expansion to Central High School and two Champaign Unit #4 middle schools. However, the year-end performance outcome report does not refer to READY School as a site where SPARCS groups were offered nor does it refer to delivering any other services at READY School during the term of the contract. Total direct service staff equaled 1.64 fulltime positions. Federal funds awarded was \$106,000.



In FY14, as federal funds began to be significantly reduced under terms of the SAMHSA Cooperative Agreement, the amount awarded to the ACCESS Initiative: School Based Services (SPARCS) contract was reduced to \$76,750. The reduction in funding reduced groups the program was able to offer in FY14. A year-end performance outcome report was not filed. Location of groups provided cannot be determined in the absence of the year-end report and are not noted in the quarterly reports.

In FY12 Prairie Center applied to the CCMHB for funding to establish a Youth Services substance use disorder treatment program and was awarded \$100,000. Staff supported includes two fulltime direct service positions. Services were targeted to youth in Champaign and Urbana. Schools were identified as service locations and referrals sources that would include READY School. The program initiated plans to implement the evidence based Seven Challenges model. The model addresses youth's drug problems as well as co-occurring life skill deficits, situational problems, and psychological problems.

The Seven Challenges model was implemented in the fall of 2012 under the FY13 contract. Service locations included READY School as a direct service site. Groups and individual sessions are provided at READY School. PCHS staff is present on-site approximately two days per week. Funding for the program was approved at \$105,000 for FY13. Staffing pattern includes 2.2 fulltime direct service staff supported primarily with CCMHB funds.

Since FY13 and continuing into FY16, Prairie Center's Youth Services program has continued to have a presence at READY School offering groups and individual counseling to students. Time staff is on-site is two days per week. Funding from CCMHB is unchanged at \$105,000 through the current FY16 contract. Staffing pattern has increased slightly while the percentage of staff allocated to CCMHB has reduced although remains the primary source of support.

Analysis:

Youth involved with the READY program have historically been a component of our efforts to address the needs of youth with serious emotional disturbance (SED) and multiagency and system involvement. The chronology above confirms this.

In addition, in the current funding cycle the READY program can refer youth and families to Parenting with Love and Limits (PLL), and access the onsite services provided by Prairie Center's Youth Services program two days per week.

The CCMHB has and will continue to fund programs and services which will directly benefit youth and families served at READY School.

Other Emergent Considerations:

The State of Illinois has discontinued funding for the Psychiatric Leadership contract at Community Elements. As a result the program is not fiscally viable and Community Elements is currently negotiating a transfer of direct psychiatric services to Promise Healthcare (Frances Nelson).

The transfer of the program to Promise Healthcare will make psychiatric services more viable because Federally Qualified Health Clinics (FQHC) receive enhanced funding for psychiatric

services (i.e., they receive a higher rate than was received by Community Elements). The CCMHB has encouraged moving psychiatric services from Community Elements to the FQHC dating back to when CHIC assumed responsibility for the FQHC in Champaign County. This is a good move and Psychiatric Services are a core mental health service which is a highly prioritized by the CCMHB.

In preparation for this transition to Promise Healthcare, a request has been made by Promise Healthcare to amend their current CCMHB contract to expand psychiatric services and increase revenue by \$125,000 to address one-time costs and other on-going operating expenses not covered by the enhanced Medicaid rate. It is the opinion of CCMHB leadership that support of the transition of psychiatric services at Promise Healthcare should be the focus of any expansion in funding.

Recommendation:

Inform the Champaign County Board of our intent to fund the transition of Psychiatric Services from Community Elements to Promise Healthcare and other on-going operating expenses not covered by the enhanced Medicaid rate. This investment will be in an amount greater than that requested in the Champaign County Board motion. And that existing CCMHB supported services for youth at the READY School is consistent with past levels of service.

Decision Section:

Motion: Move to approve correspondence to the Champaign County Board of the CCMHB intent to allocate funds in an amount greater than that requested by the Champaign County Board for the transition of Psychiatric Services from Community Elements to Promise Healthcare and other on-going operating expenses rather than for services at READY school and the rationale supporting that decision.

Approved
Denied
Modified
 Additional Information Needed





15.A.

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

Decision Memorandum

DATE:

October 1, 2015

TO:

Members, Champaign County Mental Health Board

FROM:

Peter Tracy, Executive Director

SUBJECT:

Community Elements Request to Redirect Unspent FY15 Funds

Overview

In mid-August, Community Elements informed staff the State had not yet renewed three standing contracts for FY16. One of those contracts supports psychiatric services. The ramifications of the state budget stalemate and the State's delay in issuing this specific contract has the potential to further reduce access to psychiatric care. Community Elements has requested permission to use unspent funds from FY15 and redirect funds from an FY16 contract to continue psychiatric services in the new fiscal year that would be covered by the state contract. The Board's approval is required to reallocate the FY15 funds to the FY16 CCMHB Psychiatric/Primary Care Services contract. A copy of the Community Elements request is attached for reference.

Funding Considerations

Community Elements request seeks reallocation of payments received but not expensed under three grant contracts in FY15 and authorization to access funds obligated but not paid out under one FY15 fee for service contract. The grant funds are in Community Elements possession. The balance of the fee for service (FFS) contract that was not billed out in FY15 would require a payment be issued by the Board.

FY15 Contracts	Excess Revenue
Criminal Justice/Problem Solving Courts	\$ 4,016
Early Childhood Mental Health and Development	\$11,097
Parenting with Love and Limits	\$ 9,787
TIMES Center (FFS)	\$ 4,292
Total	\$29,192

The request also included redirection of \$8,649 from the FY16 Parenting with Love and Limits (PLL) contract to the FY16 Psychiatric/Primary Care Services contract. Due to a change in staffing under the PLL contract, plans were already in place to reduce the maximum payable under the PLL contract by amendment. Staff, under existing authority, has issued a companion amendment increasing the maximum payable of the Psychiatric/Primary Care Services contract thereby redirecting the funds.

Consideration of such a request by the Board is out of the ordinary as it invokes the out of cycle funding request policy. There are mitigating factors that does after for such consideration.

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- The request is driven by the state budget crisis and lack of state contract for psychiatric services.
- Psychiatry is a core element of mental health treatment but due to a shortage of psychiatrists in Champaign County is difficult to access and consistently has a waitlist for services.
- Community Elements is committing reserves to offset losses incurred to continue to services without a state contract and pursuing other options for patient care as the agency seeks support from other funders and payers.
- The agency has already been paid the funds and would not require the Board to expend additional funds except for the \$4,292 associated with the FY15 TIMES Center contract.
- The reallocated funds would only be used to pay for costs that are an eligible expense under the state contract.
- Community Elements also commits to working with the CCMHB staff regarding redirection and/or return of any resulting excess if funding is restored by the state, be it at 100 percent or a portion thereof, with language to that effect included in the amendment if approved.

Recommendation

Due to the mitigating factors cited, it is the recommendation of staff to approve Community Elements request to reallocate FY15 funds to the FY16 Psychiatry/Primary Care Services. An amendment would be issued to increase the maximum obligation of the FY16 Psychiatry/Primary Care Services with terms of use and potential return or redirection stipulated.

In order to manage and track the revenue and expense associated with reallocation of funds as part of the annual financial audits for FY15 and FY16, Community Elements would be required to return FY15 excess grant revenue in the amount of \$24,900 and then be issued a payment of \$29,192 that includes unbilled balance of the FY15 TIMES Center contract.

Decision Section:

Motion to approve the increase in the FY16 Psychiatry/Primary Care Services contract maximum in the amount of \$29,192. The \$29,192 shall be paid in a lump sum utilizing funds returned by Community Elements as FY15 excess grant revenue of \$24,900 and plus payment of the \$4,292 balance of the under billed FY15 TIMES Center contract.

 _ Approved
 _ Denied
 _ Modified
Additional Information Needed





August 14, 2015

Peter Tracy, Executive Director Champaign County Mental Health Board 1776 East Washington Urbana, IL 61802

Dear Peter Tracy,

Community Mental Health Agencies and many other social services have had a rocky start to the new fiscal year. This in part is caused by the lack of a State of Illinois budget and in part because some contracts were issued and others were not. At this point in time, our Division of Mental Health contracts have been issued with the following three exceptions: Psychiatry, Non-Medicaid (to serve individuals without insurance or benefits to cover their care), and a specialized supportive housing program. We have taken action to help reduce the losses in these programs including advocating at the State level, ensuring that individuals in need have access to benefits/insurance, and freezing a vacant housing case management position. Our Board has also committed reserves until the State Budget is resolved or funding solutions are exhausted.

One of the most concerning issue is the lack of funding for our Psychiatrists and the nursing and administrative staff that support their patients. We have no way to significantly reduce the patient caseloads at this time without incredible hardship. However, we have made some small improvements, including: limiting our access to those in priority populations, expediting conversations with the Division of Mental Health, Healthcare and Family Services, and other psychiatric providers in our area, and asking managed care companies to plan alternative psychiatric options for their members in the near future.

At this point, there are some ideas on the table but no real solutions for the current situation which has our organization operating at a deficit in this vital or core service area. In order to help with the costs and ensure that our Psychiatrists continue to be able to provide the medication follow up and new evaluations for those in need, I am requesting your help.

Specifically, my request today is for an amendment and/or administrative approval to move the following funds that were lapsed in <u>FY15</u> and the Parenting



with Love and Limits <u>FY16</u> contract (this reduction occurred due to employee allocation changes) to our Psychiatric/Primary Care contract. If approved, we would move expenses for the doctors, nurses, and medical support staff, as appropriate, into the Psychiatric/Primary Care contract.

FY15 Excess Revenue:

TIMES Center	4,292
Criminal Justice/Problem Solving Courts	3,934
Parenting with Love and Limits	9,637
Early Childhood Mental Health and Development	11,093

FY16 Redirection:

Parenting with Love and Limits 8,649

TOTAL for FY15 and for FY16 <u>37,605</u>

If we are successful with our advocacy or any actions we take to remedy or avert this crisis in funding for psychiatric care, we will communicate with CCMHB staff immediately. If funding is restored, at 100 percent or any portion thereof, and we will work with CCMHB staff regarding redirection, and/or return of any resulting excess.

I know this is going to be a difficult year and I appreciate the willingness of CCMHB to consider this request which will allow us to help those in need in Champaign County receive their scheduled psychiatric care while we wait the outcome of the State of Illinois budget discussions or we reach a time when we will have no choice but to reduce our Psychiatric program accordingly.

Sheila Ferguson, CEO





15.B.

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

DECISION MEMORANDUM

DATE:

November 18, 2015

TO:

CCMHB Members

FROM:

Mark Driscoll

SUBJECT:

Approve Three-Year Plan (2016 - 2018) with FY 2016 Objectives

The Three Year Plan (2016 - 2016) with FY 2016 Objectives has been finalized and is attached for the Board's consideration and action. An initial draft was included in the Board packet distributed in advance of the October 1st meeting. Copies were then distributed to agencies and other interested parties for comment.

Comments were received from a CCMHB Board member and as part of the discussion at the CCMHB retreat. Some objectives have been revised in response to that input. The Plan is presented for final review and action.

Decision Section

iviolion: iviove to approve the	Three-Year Plan	(2016 – 2018) with	Fiscal	Year	2016
Objectives as presented.			,			

 Approved
 Denied
Modified
 Additional Information Needed



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)



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 that reside 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 and during the allocation decision-making process consider multi-year term for select contract awards.

Objective #2: Expand use of evidenced informed and evidenced based/best practice models appropriate to the presenting need in an effort to improve outcomes for families with infants, children, and adolescents, as well as for adults and the elderly.

Objective #3: Promote wellness for people with mental illnesses, substance use disorders, intellectual disabilities, and/or developmental disabilities to prevent and reduce early mortality, through support services including enrollment in benefit plans and coordinated access to primary care.

Objective #4: 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 #5: 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 #6: 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 submission of a cultural competence and linguistic competence plan, and bi-annual report on the same, 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.

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

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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 disability 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 and 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: In consultation with the CCDDB, review and revise as necessary the current CCMHB-CCDDB Intergovernmental Agreement.

Objective #2: 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 #3: Assess alternative service strategies that empower consumers and increase access to integrated settings as exemplified by the collaborative approach to the Employment First Act.

Objective #4: 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 #5: Foster communication between the CCMHB and the CCDDB by holding regular meetings between the Executive Director and the Officers of the two Boards, sharing of information between the Boards, and co-sponsoring public hearings, trainings and anti-stigma events.

Objective #6: 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 County Community Coalition and other system of care initiatives.

Objective #2: Establish a permanent full time position to coordinate and monitor all Cultural and Linguistic Competence (CLC) activities associated with the CCMHB/SAMHSA/IDHS system of care model.

Objective #3: Continue community based partnerships and coordination of evidence based services and supports for youth and families such as occurring through CHOICES.

Objective #4: Ongoing support of a Champaign County Youth Organization in recognition of the importance of the system of care being youth-guided, with the organizations main focus peer to peer support and advocacy in Champaign County and at the state level assisting with system of care expansion.

Objective #5: Ongoing support of a Champaign County Parent Organization in recognition of the importance of the system of care being parent-driven, to continue the development of a viable parent organization to enable parent input on effectively meeting the needs of multi-system involved youth and families at the local level and at the state level assisting with system of care expansion.

Objective #6: Support System of Care Expansion in Illinois through sharing of knowledge and experience with system of care principles and practices.

Objective #7: Upon completion of the SAMHSA/IDHS Cooperative Agreement System of Care Evaluation Study Final Report schedule a presentation by the Evaluation Team on the results of the study and plans for dissemination of the study to community stakeholders.

Objective #8: Complete the closeout of the SAMHSA Children's Mental Health Initiative Cooperative Agreement.

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 as appropriate persons with behavioral health needs from the criminal justice system.

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: Participate in "Stepping Up: A National Initiative to Reduce the Number of People with Mental Illnesses in Jails" co-sponsored by the National Association of Counties (NACo), the American Psychiatric Foundation and other stakeholders, and 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 through the development of the Behavioral Health Jail Diversion Initiative.

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: Form an advisory committee to develop a request for proposals associated with the Jail Diversion Behavioral Health Initiative, to evaluate proposals submitted, and make recommendations for action to stakeholders including the Champaign County Mental Health Board.

Goal #8: Support interventions for youth at risk of juvenile justice system involvement to reduce contact with law enforcement or 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 Parenting with Love and Limits 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 Community Coalition and other community focused initiatives, promote and encourage multi-collaborative approaches for prevention, reduction and elimination of increase in youth violence trends and activities.



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

Objective #6: Utilize the principals from "Models for Change" to reduce the disproportionate minority contact of 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 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 Week.

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

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

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

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

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.

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.

