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, May 20, 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 3-6*)

 Draft minutes from the 4/20/15 are attached for information only.
- 6. Approval of CCMHB Minutes
 - A. 4/20/15 Board meeting* (*Pages 7-10*)

 Minutes are included in the packet. Action is requested.
- 7. President's Comments
- 8. Executive Director's Comments
- 9. Board to Board Reports
- 10. Agency Information (pages 11-12)

BROOKENS ADMINISTRATIVE CENTER

1776 E. WASHINGTON STREET

URBANA, ILLINOIS 61802

A news article regarding Prairie Center Health Systems is included in the packet.

11. Financial Information* (Pages 13-21)

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

12. New Business

A. FY 2016 Allocation Decisions*

A Decision Memorandum (Pages 22-33) and Tier Sheet (Page 34) is included in the packet. Action is requested. Agency responses to Program Summaries (Page 35) are included as Addenda. A copy of the CCDDB Tier Sheet (Page 36) is included for information only.

13. Old Business

- A. Systematic Evaluations for Funded Programs

 An update will be provided at the Board meeting.
- B. Mr. Leon Evans Consultation Debriefing (Pages 37-43)

 Recap of the consultation and next steps. Copies of News-Gazette articles are included in the packet.
- C. Disability Resource Expo (Page 44)

 A report from Ms. Barbara Bressner is included in the packet.
- 15. Board Announcements
- 16. Adjournment

*Board action



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

Minutes -April 22, 2015

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



6:30 p.m.

MEMBERS PRESENT:

Joyce Dill, Phil Krein, Deb Ruesch, Sue Suter

MEMBERS EXCUSED:

Mike Smith

STAFF PRESENT:

Peter Tracy, Lynn Canfield, Nancy Crawford, Mark Driscoll,

Stephanie Howard-Gallo

OTHERS PRESENT:

Jennifer Knapp, Linda Tortorelli, Community Choices; Dale Morrissey, Danielle Matthews, Vicki Tolf, Patty Walters, Felicia Gooler, Laura Bennett, Jennifer Carlson, Annette Becherer, Developmental Services Center (DSC); Gary Maxwell, Pattsi Petrie, Sam Shore, Champaign County Board; Jermaine Raymer, PACE; Kathy Kessler, Sue Wittman, Community Elements (CE); Judi O'Connor, Aillinn Dannave, Susan Fowler, Julian Rappaport, Champaign County Mental Health Board; Darlene Kloeppel, Regional Planning Commission (RPC); Teresa O'Connor, C-U Autism Network; Amanda Bohn, United Cerebral Palsy (UCP); Mark Scott, Down Syndrome Network (DSN); Sally Mustered, C-U Autism Network (CUAT); Dennis Carpenter, CTF Illinois (CTF)

CALL TO ORDER:

Ms. Sue Suter called the meeting to order at 6:30 p.m.



ROLL CALL:
Roll call was taken and a quorum was present.
ADDITIONS TO AGENDA:
None.
CITIZEN INPUT:
None.
CCMHB INPUT:
A copy of the 3/18/15 Board minutes was included in the Board packet for information only.
APPROVAL OF CCDDB MINUTES:
Minutes from the March 18, 2015 CCDDB meeting were included in the Board packet.
MOTION: Dr. Krein moved to approve the minutes from the March 18, 2015 CCDDB meeting. Ms. Dill seconded the motion. A voice vote was taken and the motion passed unanimously.
PRESIDENT'S COMMENTS:
Ms. Suter introduced Mr. Sam Shore as a new County Board liaison to the CCDDB.
EXECUTIVE DIRECTOR'S REPORT:
None.
STAFF REPORT:
Deferred.
AGENCY INFORMATION:
Deferred.

FINANCIAL REPORT:

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

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

NEW BUSINESS:

2016 Application Program Summaries:

A Briefing Memorandum, list of applicants, and draft program summaries were included in the Board packet for review. Supplemental information regarding performance measures was distributed at the meeting.

C-U Autism Network—Teresa O'Connor represented the agency. Submitted budgets will be revised. Collaboration with Down Syndrome Network.

CTF Illinois--Dennis Carpenter represented the agency. The application for residential services is no longer needed because funding from the Department of Human Services (DHS) was received for the person being served under this contract. Collaboration with Developmental Services Center (DSC).

Down Syndrome Network—Mark Scott represented the agency. Mark discussed DSN yearly events.

Head Start—Darlene Kloeppel represented the agency. Head Start grants require that 10 percent of the children must have disabilities.

Regional Planning Commission, Community Services—Darlene Kloeppel represented the agency. This is a new proposal. The program would serve people with both a developmental disability and a mental health disability.

Community Choices—Jennifer Knapp represented the agency. 3 applications. Requested increases would be to hire a part-time staff person. Collaboration with Developmental Services Center (DSC).

Community Elements—Kathy Kessler and Sue Wittman represented the agency. Number of persons served will need to be reported at a later date. Psychiatry services continue to be a challenge in Champaign County.

Developmental Services Center—9 applications. Representing the agency were Dale Morrissey, Jennifer Carlson, Ron Bribrisco, Felicia Gooler, Laura Bennett, Patty Walters, Vicki Tolf, Annette Becherer. Collaboration with Community Elements, Community Choices, and Regional Planning Commission.

Persons Assuming Control of their Environment—Jermaine Rayma represented the agency. The agency is asking for a funding increase to cover a cost of living adjustment.



United Cerebral Palsy-Jenny Eberke represented the agency. The application addresses job coaching and case management.

Ms. Dill stated that Medicaid supplementation continues to be a huge concern for her. She asked Board members and staff to consider a Board retreat to discuss the situation. Mr. Tracy indicated he would prepare a Briefing Memorandum for the next meeting regarding options in funding.

Ms. Summerville, Cultural and Linguistic Competency Coordinator reviewed the applicant's Cultural Competence Plan and their ratings. She distributed the ratings to Board members.

Integration Transition Successes:

Deferred.

OLD BUSINESS:

Alliance for the Promotion of Acceptance, Inclusion and Respect:

Deferred.

disAbility Resource Expo:

A written report from Ms. Barb Bressner was included in the Board packet. An Expo fundraiser will be held on June 11 at Art Mart. Tickets will be sold for a wine tasting and basket raffle. Tickets are available at the CCMHB/CCDDB office.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 7:45 p.m. Respectfully Submitted by: Stephanie Howard-Gallo

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



(6.A.)

CHAMPAIGN COUNTY MENTAL HEALTH BOARD BOARD MEETING

Minutes—April 22, 2015

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

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4:30 p.m.

MEMBERS PRESENT: Astrid Berkson, Aillinn Dannave, Susan Fowler, Deloris Henry,

Thom Moore, Judi O'Connor, Julian Rappaport, Anne Robin,

Deborah Townsend

STAFF PRESENT: Peter Tracy, Executive Director; Lynn Canfield, Nancy Crawford,

Mark Driscoll, Stephanie Howard-Gallo, Tracy Parsons

OTHERS PRESENT: Jennifer Knapp, Linda Tortorelli, Community Choices; Sue

Wittman, Juli Kartel, Lisa Benson, 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; Darlene Kloeppel, Regional Planning Commission (RPC); Beth Chato, League of Women Voters (LWV); Deb Ruesch, Sue Suter, Joyce Dill, Champaign County Developmental Disabilities Board (CCDDB); Andy Kulczycki, Community Service Center of Northern Champaign County (CSCNCC); Bruce Suardini, Gail Raney, Sherri Rudici, Jolie Calsten, Prairie Center Health Systems (PCHS); Nancy Greenwalt, Promise Healthcare: Deborah Hlavna, East Central Illinois Refugee Mutual Assistance Center (ECIRMAC); Sam Banks, Don Moyer Boys and Girls Club (DMBGC); Jenny Niebrugge, United Cerebral Palsy (UCP); Teresa O'Connor, C-U Autism Network (CUAN); Sheryl Bautch, Family Service (FS); Erin Sturm, RACES: Adelaide Aime, Children's Advocacy Center (CAC); Jason Greenly, Courage Connection; Leon Evans, Consultant; Dan Walsh, Allen Jones,

Champaign County Sheriff's Office

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: None. **CCDDB INFORMATION:** Draft minutes from the 3/18/15 CCDDB meeting were included in the packet for information only. APPROVAL OF MINUTES: Minutes from the 3/18/15 Board meeting were included in the Board packet for approval. MOTION: Dr. Moore moved to approve the minutes from 3/18/15 as presented in the packet. Ms. Dannave seconded the motion. A voice vote was taken and the motion passed. PRESIDENT'S COMMENTS: None.

EXECUTIVE DIRECTOR'S COMMENTS:

None.

STAFF REPORTS:

Staff reports were deferred.

BOARD TO BOARD:

Reports were deferred.

AGENCY INFORMATION:

Deferred.

FINANCIAL INFORMATION:

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

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

NEW BUSINESS:

Mr. Leon Evans Consultation:

Mr. Leon Evans, President, CEO for The Center for Health Care Services. Mr. Evans is nationally recognized for the jail diversion model used in Bexar County, Texas. He has developed an innovative and highly integrated system of care for people in the San Antonio community who struggle with mental health disorders. Utilizing strong community partnerships and diverse funding sources, his programs have created an effective public safety net that keep people with mental health illness out of emergency rooms, jails and prisons and link them to treatment programs that help them lead independent, productive lives.

Mr. Evans will be giving a presentation to the community on Thursday, April 23 and to the service providers on Friday, April 24.

Following his presentation, Board members and audience members were given an opportunity to ask questions.

FY 2016 Program Summaries:

A Briefing Memorandum, copies of the draft program summaries, and a glossary of terms was included in the Board packet for review. The summaries glean information and provide opinions concerning alignment with our stated priorities and defined decision support criteria. All applicants received an email with instructions on where to access a copies of their program summary and were asked to notify the staff in writing if there are factual errors prior to completion of the FY16 award process. A Decision Memorandum regarding recommended allocation decisions will be presented to the CCMHB at the May Board meeting for action.

Ms. Shandra Summerville, Cultural and Linguistic Competency Coordinator, distributed each applicant's rating for their Cultural Competency Plan.

Board members Fowler and Rappaport discussed the summaries and performance measures. It was suggested by Rappaport and agreed among the Board that study sessions or a Board retreat in the next 6 months would be beneficial in order to discuss future evaluation standards and funding priorities.





CCMHB FY 2014 Annual Report:

The final draft of the FY14 CCMHB Annual Report was included in the Board packet for final review.

MOTION: Ms. Berkson moved to accept the final draft of the FY14 CCMHB Annual Report as presented. Dr. Henry seconded the motion. A voice vote was taken and the motion passed unanimously.

OLD BUSINESS:

Alliance for the Promotion of Acceptance, Inclusion and Respect:

Deferred.

disAbility Resource Expo:

A written report from Ms. Barb Bressner was included in the Board packet.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 6:15 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo

CCMHB/CCDDB Staff

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

Prairie Center to merge with two other agencies

Thu, 05/07/2015 - 2:30pr | Debra Pressey (/author/debra-pressey)

URBANA — Prairie Center, the local non-profit substance abuse treatment agency, is pursuing a merger that would make it part of Centerstone, a non-profit behavioral health provider serving people in three states.

Urbana-based Prairie Center, along with Centerstone and Alton-based WellSpring Resources have all signed a letter of intent to merge, the organizations announced Thursday afternoon.

Pending legal and regulatory review, finalization of the three-way merger is expected to be completed in two-tothree months.

Under the arrangement, Prairie Center and WellSpring Resources would become a part of Centerstone.

John Markley, CEO of Centerstone of Illinois, would continue to serve in that position. Bruce Suardini, CEO of Prairie Center, would become vice president of the east region and Jennifer Craig, interim CEO of WellSpring Resources, would become the chief operating officer.

Centerstone has provider organizations in Illinois, Indiana and Tennessee, and they provide treatment, support and educational programs and services to more than 117,000 people with mental health and addiction disorders and developmental disabilities, according to a written statement provided by the three organizations.



After the merger, Centerstone of Illinois would have 700 employees in 11 counties and would provide services to 18,000 people a year. "Budget cuts, reimbursement uncertainties and the need to invest in new technology and infrastructure are leading many to scale back their services, and, in extreme cases, shut their doors," Suardini said in the written statement. "I'm proud that Centerstone, WellSpring Resources and Prairie Center are coming together to strengthen our operations for the future. I hope that our state Legislature is prepared to meet organizations like ours half-way, reducing the proposed budget cuts that are threatening our abilities to meet the needs of our communities."

Prairie Center has a staff of 85. It serves more than 5,000 clients, and it's primary service area is Champaign, Ford and Vermilion counties.

Login (/user/login?destination=comment/reply/1356599#comment-form) or register (/user/register? destination=comment/reply/1356599#comment-form) to post comments



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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:

May 20, 2015

TO:

Members, Champaign County Mental Health Board

FROM:

Peter Tracy

SUBJECT:

STAFF RECOMMENDATIONS FOR FY16 FUNDING

Purpose:

The intent of this memorandum is to offer staff recommendations for FY16 (July 1, 2015 through June 30, 2016) funding allocations for the consideration of the Champaign County Mental Health Board (CCMHB). Final funding decision authority rests with the CCMHB and their sole discretion and judgment concerning the most appropriate and efficacious use of available dollars based on assessment of community needs, best value, alignment with decision support criteria, pricing and affordability and reasonable distribution of funds across disability areas.

Background Considerations:

In November, 2014, the CCMHB identified priorities for the FY16 funding cycle which included the following: (1) collaboration with the Champaign County Developmental Disabilities Board; (2) ACCESS Initiative Sustainability; (3) behavioral health programs for youth with serious emotional disturbance; (4) behavioral health services and supports for adults with a behavioral health and criminal justice interface; (5) wellness for people with disabilities; and (6) local funder collaboration on special initiatives. (The full text of the allocation criteria with identified priorities are included here, starting on page 5)

Subsequent to identifying the FY16 priorities listed above, there have been significant changes in the focus and direction of adult jail diversion and ACCESS Initiative planning collaborations which will impact on CCMHB policies and the FY16 allocation process.

<u>Champaign County Community Coalition</u> - formerly known as the "Champaign Community Coalition" this collaboration will serve as the macro system-of-care for children and youth with multi-system involvement (e.g., child welfare, behavioral health, juvenile justice, and school challenges). This collaboration includes representation of all child serving systems as well as other community stakeholders. The Coalition will also focus on youth violence problems in our community. Other ACCESS Initiative sustainability components include cultural and linguistic competence coordination within the CCMHB, and support of parent and youth organizations in our community.

<u>Jail Diversion</u> – significant efforts have been made to create a foundation for addressing the inappropriate use of the county jail as the default mental health response for people with substance use disorders and/or mental illnesses. The population-of-interest are people with histories characterized by serious and persistent mental illnesses and/or substance use disorders

BROOKENS ADMINISTRATIVE CENTER

• 1776 E. WASHINGTON STREET •

URBANA, ILLINOIS 61802

combined with frequent intersects with the criminal justice system. Many are identified as homeless and unemployed with a subset who are banned from emergency rooms (for sleeping) and homeless shelters. The following are some of the activities which have taken place to gain traction on this complex and difficult problem.

- Champaign County and Sheriff Dan Walsh along with other community stakeholders have completed applications to the MacArthur Foundation and the Department of Justice for planning grants. The CCMHB will need to approve the use of funds allocated to the jail diversion population to be used as required match pending notification of award.
- Groups of stakeholders have traveled to Peoria Illinois to study their jail diversion crisis stabilization and detoxification facility. There is consensus that we need a similar facility in Champaign County.
- Sheriff Walsh and the CCMHB co-sponsored a consultation with Leon Evans from Bexar County Texas on April 22-24, 2015. In addition to several targeted presentations about the Bexar County jail diversion experience, a special meeting was limited to service providers and discussion about steps we can take to address these needs in Champaign County.

Medicaid Managed Care and Parity – Medicaid expansion under the Affordable Care Act (ACA) has resulted in healthcare coverage for the jail diversion cohort. The Centers for Medicare and Medicaid Services (CMS) has very recently issued guidelines concerning behavioral health parity which could have a very positive effect on jail diversion and youth services in our community. These changes could result in additional resources to fund a wide array of services and supports. Local dollars could then be directed to funding supports such as housing and employment services which are not included as part of Medicaid coverage.

Policy Implications:

Leon Evans told a story about the Coast Guard coming upon a shipwreck and finding three people in the water. Two of these people were treading water and the third was going down for the last time. The question he posed was to whom should the life preserver be thrown? Clearly, this story is an allegory for the people with serious and persistent mental illnesses and addictions who intersect with the criminal justice system and end up in jail by default. Many of these people are homeless, unemployed, addicted, and in poor health. Evans went on to point out that this group has a life expectancy of 25-years less than the general population and that we have a moral and ethical responsibility to intervene.

In order to have an impact on these problems, the CCMHB needs to explore what we can do to realign our resources and reconfigure programs we fund to more effectively intervene and provide service options rather than incarceration. The following are steps we should take to produce better outcomes for this population and to create a "culture of health and healing."

• Support and endorse Champaign County efforts to secure planning and implementation grants from the MacArthur Foundation and Department of Justice. This would include providing required match and fully participating as a partner in all planning and implementation efforts.



- Explore financing options through PNC Bank's Community Development Branch to finance Reception/Resource Center which would be used to provide a full range of services similar to Bexar County and Peoria County.
- Take the lead in the development of a community collaboration to plan for engage in the planning necessary to create an effective jail diversion program. This process started as part of the Leon Evans' consultation.
- Work with Medicaid Managed Care Organizations in Champaign County to develop specialized Medicaid funded treatment responses designed for this population. To the extent possible, push the "parity envelope" as outlined by CMS Parity guidelines recently published.

Statutory Authority:

The Champaign County Mental Health Board (CCMHB) policies on funding 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 of the State of Illinois. The recommendations included in this memorandum, opinions and comments are based on our assessment of how closely applications align with statutory mandates, CCMHB funding policies, approved decision support criteria and priorities. Best and Final Offers may be sought as part of the negotiation process for authorized FY16 contracts. The CCMHB reserves the right to refrain from making an award when it is deemed to be in the best interest of the county.

Process Considerations:

The approved criteria and policy considerations delineated 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 which are included in the decision process are:

- 1. Opinions about the applicant's ability to implement the program and services proposed.
- 2. Opinions about the soundness of the proposed methodology.
- 3. The administrative and fiscal capacity of the agency.
- 4. Alignment with the CCMHB Three Year Plan, operating principles and public policy positions taken by the Board.
- 5. Pricing and affordability of applications.
- 6. Best value for the community based on cost and non-cost factors.

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 solely 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 decision-support match up. The CCMHB allocation of funding is a complex task predicated on multiple variables. It is important to remember that our 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 applying for funding to



address a wide variety of mental health, developmental disability and substance abuse treatment needs in our community. In many respects our job is significantly more difficult than simply conducting a RFP. Based on past experience we can anticipate the nature and scope of applications will vary significantly and will include treatment, early intervention and prevention 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 CCMHB.

Application Caveats:

- 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 and CCDDB 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.
- Final Decision Authority The CCMHB will make the final decision concerning all applications for funding, taking into consideration staff recommendations, defined decision support criteria, best value, availability of funds, and equitable distribution of funds between disability areas.
- The Board shall be the Payor of Last Resort. Coordination of Payers by Provider: All Board contracted Providers shall coordinate their services, seek and utilize payment from other revenue sources prior to Board funding, thus making the Board payer of last resort.

FY16 Decision Support and 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 FY16 allocation for developmental disabilities programs and services, as well as the expectation for integrated planning by the Boards.

There have been significant changes in law, rules, and regulations that have altered the nature of ID/DD services and supports, and these changes also define, to a great extent, the parameters for allocation of funds. The changes have been extended by court orders and recent legislation. These include (a) Olmstead, (b) Ligas Consent Decree (c) Williams Consent Decree, (d) the Illinois Employment First Act, (e) the final CMS Home and Community Based Rule, (f) the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) class action lawsuit in Illinois, (g) executive orders in three states which phase out the use of segregated centers and/or sheltered workshops, (h) the Oregon lawsuit to eliminate segregated centers and sheltered workshops, (i) the Affordable Care Act, (j) the proposed Illinois 1115 Waiver, and (k) the implementation of ID/DD managed care in Illinois.

If asked to identify a common denominator for all of the changes listed above, it is pretty clear that it would be inclusion and integration of people with intellectual and developmental disabilities (I/DD). 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 that 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 CCDDB 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 associated with the priorities shall be evaluated using the "lens of inclusion and integration."

Priority #2 – ACCESS Initiative Sustainability

The CCMHB has committed to sustaining our system-of-care after the term of the cooperative agreement with IDHS expires on September 30, 2015. A concept briefing memorandum outlines the proposed components of the ACCESS Initiative sustainability plan and is a separate agenda item presented for CCMHB consideration. The proposed plan includes the following components: (1) Facilitation of the Community Coalition to serve as the planning/policy integration mechanism for the post-cooperative agreement System-of-Care; (2) an enhanced inhouse Cultural and Linguistic Competence coordinator to build on the accomplishments of the ACCESS Initiative; (3) an Integrated Service and Support Network including coordination with CHOICES; (4) A youth organization; (5) a family organization; (6) and, leadership and coordination with State of Illinois System of Care Expansion.

Priority #3 – Behavioral Health Programs for Youth with Serious Emotional Disturbance.

Alignment between Quarter Cent for Public Safety funding, CCMHB funding, and other federal, state and/or local funding streams to efficaciously address the needs of multi-system involved youth with SED by supporting the following services and supports:

(a) Parenting with Love and Limits (PLL) – Maintenance of Parenting with Love and Limits (PLL) as a means of assuring clinical efficacy and attainment of desired outcomes for ACCESS Initiative youth and families, as well as other youth involved in the juvenile justice system.

<u>Priority #4 – Behavioral Health Services and Supports for Adults with a Behavioral Health and Criminal Justice Interface.</u>

Continuation during FY16 of the reconfigured behavioral health system which was designed to assure appropriate linkage to behavioral health services following incarceration, deflection of people with serious behavioral health problems prior to incarceration, and improved coordination between community based service providers and the Champaign County Jail's behavioral health service provider for people during their incarceration. Included under this priority is our continued support of the specialty courts, related services and supports. Full compliance with memoranda of understandings pertaining to specialty courts will be continued during FY16. Stakeholder input has identified a need for and recommended development of a diversion alternative such as a recovery center, in Champaign County. Proposals to develop a plan for establishing a recovery center will be accepted under this priority.

<u>Priority #5 – Wellness for People with Disabilities</u>

The CCMHB believes that disparities in life expectancy for people with disabilities is unacceptable, and to the extent possible we should prioritize funding for programs, services and supports consistent with SAMHSA's Eight Dimensions of Wellness. In this context wellness means overall well-being and incorporates the mental, emotional, physical, occupational, intellectual, and spiritual aspects of a person's life.

The significant mortality gap for people with disabilities is predicated on the combination of (1) a higher occurrence of risk factors for chronic diseases and some types of cancer; (2) the iatrogenic effects of some psychiatric medications; (3) higher rates of suicide, accidental and violent death; and (4) poorer access to physical healthcare than for the general population. The following are salient factors which are of specific concern:

- People with serious and persistent mental illness have a life expectancy a full 25 years shorter than people without significant behavioural health needs. Three out of five die from preventable chronic diseases such as asthma, diabetes, cancer, heart disease and cardiopulmonary conditions.
- People with intellectual or developmental disabilities (IDD) experience disparities in oral health outcomes, a key factor in the quality of life and life expectancy of people with disabilities.
- Women with significant disabilities were 57 percent less likely to report receiving Pap tests and 56 percent less likely to report receiving mammograms compared with women who did not have disabilities, regardless of age.
- People with disabilities of all ages have more than twice the incidence of diabetes than those without disabilities.
- People with disabilities older than 18 have a 10% higher incidence of hypertension than adults without disabilities (29.3% versus 39.3%).

The CCMHB is committed to addressing these issues in Champaign County and is seeking applications which provide solutions to these problems by focusing on prevention/health promotion, screening, and access to quality, integrated, individualized care and treatment. Supportive activities could include counselling, advocacy, prevention, and education.



Priority #6 - Local Funder Collaboration on Special Initiatives

It is recommended we continue to monitor local funder collaborations intended to expand the availability of psychiatric services in Champaign County, development of alcohol and substance use detoxification services, and/or development of an emergency shelter for families facing homelessness. Expansion of psychiatric services could include supporting a partnership between community based behavioral health providers and the Federally Qualified Health Center (FQHC) in Champaign County. The only caveat to this item pertains to how the ACA and Medicaid expansion addresses this deficiency. The implementation of Medicaid managed care could conceivably address this issue. An emergency shelter for families was piloted in the community last winter and spring. The prospect exists for those involved with the pilot to lead an effort to establish a permanent facility. As part of any collaboration with other local funders on an emergency shelter for families, consideration would be given to providing support services at the shelter.

Overarching Decision Support Considerations

The FY16 CCMHB allocation process will require all applications to address the overarching criteria listed below. Assessment of all FY16 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. **Countywide Access -** Programs and services that promote county-wide access for all people in Champaign County. Zip code data is mandated.
- 3. **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.
- 4. Realignment of Existing FY15 Contracts to Address Priorities The CCMHB reserves the right to reduce or eliminate incumbent programs and services in order to support the six FY16 priorities listed in this memorandum.
- 5. **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.

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.



<u>Approach/Methods/Innovation</u>: 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.

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

Contract Negotiation Considerations

A significant number of the allocation recommendations included in the decision section of this memorandum are provisional with funding contingent on the completion of successful contract negotiation, revision, and/or inclusion of special provisions. This can include significant modification of the budget, program plan, and personnel matrix in order to align the contract more closely with CCMHB planning, budget and policy specifications. 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 shall result in cancellation of the award of a contract.

Special Notification Concerning FY16 Awards

The recommendations in this decision memorandum are based on revenue estimates which will not be finalized until the CCMHB budget is approved by the Champaign County Board in November 2014. For this reason all FY16 CCMHB contracts shall be subject to possible reductions in contract maximums necessary to compensate for any CCMHB revenue shortfall. These reductions shall be documented by contract amendment at the discretion of the CCMHB executive director with every effort made to maintain the viability and integrity of prioritized contracts. The FY16 contract boilerplate shall also include the following provision:

Obligations of the Board will cease immediately without penalty or further payment being required if in any fiscal year the tax that is levied, collected and paid into the "Community Mental Health Fund"

Decision Section

As we have done in past years, the recommendations from staff are organized into five "Tiers" as a means of prioritizing available dollars. Specifically, the tiers are used to organize applications in order of priority based on decision support criteria match up and a variety of other factors outlined in this memorandum. Tiers I-III represents alignment with elements of the high priority allocation criteria. Tier IV represents moderate alignment with allocation criteria. For additional information, please refer to the Application Summaries presented at the April 2015 CCMHB Meeting.

Following the CCMHB recommendations is the funding recommendation for the allocation of Quarter Cent for Public Safety funding. The Quarter Cent recommendation reflects the consensus of the Quarter Cent Administration Team. The CCMHB's authority to issue the Quarter Cent contract is contingent upon the continuation of the Memorandum of Understanding

(30)

between the CCMHB and the Champaign County Board, revisions to which are currently under consideration. As a result the motion on the award of Quarter Cent funds by the CCMHB is a recommendation to the Champaign County Board who controls the Quarter Center for Public Safety budget, rather than the CCMHB authorizing the award.

Tier One – High Priority and Criteria Alignment Community Elements – Criminal Justice Community Elements – Crisis, Access, Benefits, & Engagement Community Elements – Parenting with Love and Limits (PLL) Community Elements – Psychiatric/Primary Care Services Community Elements – TIMES Center (Screening MI/SA) Prairie Center Health Systems – Criminal Justice Substance Use Treatment Prairie Center Health Systems – Drug Court Vivitrol Pilot Project Prairie Center Health Systems – Parenting with Love and Limits (PLL) Prairie Center Health Systems – Specialty Court Promise Healthcare – FNHC Wellness and Justice	\$306,816 \$200,000 \$283,079 \$100,000 \$48,000 \$10,192 \$291,903 \$187,425 \$40,000
Tier Two – ACCESS Initiative Sustainability Plan CCRPC – Youth Assessment Center (MHB companion proposal) Don Moyer Boys & Girls Club – Community Engagement & Social Marketing Don Moyer Boys & Girls Club – Youth Engagement Services Mahomet Area Youth Club – Bulldogs Learn & Succeed Together (BLAST) Mahomet Area Youth Club – Universal Screening-MAYC Members Matter! The UP Center – Children, Youth and Families Program U of I/Psychological Services Center – Girls Advocacy Program Urbana Neighborhood Connections Center- Universal Screening	\$26,000 \$78,000 \$170,000 \$15,000 \$10,000 \$12,000 \$25,683 \$12,000
Tier Three – CCDDB Intergovernmental Agreement: CCMHB/CCDDB – CILA Expansion/MHB Allocation Community Choices - Community Living Community Choices – Customized Employment Community Choices – Self Determination Support Developmental Services Center – Individual and Family Support	\$50,000 \$60,000 \$55,000 \$55,000 \$376,144
Tier Four – Moderate Priority and Criteria Alignment Champaign County Children's Advocacy Center (CAC) Community Elements – Early Childhood MH and Development Community Service Center Northern Champaign County – Resource Connection Courage Connection – Courage Connection Crisis Nursery – Beyond Blue Champaign County East Central Illinois Refugee Mutual Assistance Center – Family Support Family Service of Champaign County – Counseling Family Service of Champaign County – Self Help Center Family Service of Champaign County – Senior Counseling & Advocacy Prairie Center Health Systems – Prevention Prairie Center Health Systems – Youth Services	\$37,080 \$90,000 n \$65,290 \$66,948 \$70,000 \$13,000 \$40,000 \$28,428 \$142,337 \$56,550 \$105,000

Promise Healthcare – Mental Health Services at FNHC Rape Advocacy, Counseling & Education Services – Counseling & Crisis Serv.	\$165,000 \$18,600
<u>Tier Five – Exceeds Allocation Parameters</u> These applications were judged to be of value to the community, however, are not to the limitations of anticipated CCMHB revenue parameters and not recommend	ot affordable due led for funding.
Community Elements – Addictions Counseling Urbana Schools Community Elements – Crisis Assessment Center Development	\$53,453 \$85,125
<u>Quarter Cent for Public Safety Fund</u> : Recommended for funding – Highly pr Quarter Cent Administrative Team.	ioritized by the
CCRPC – Youth Assessment Center (Quarter Cent)	\$234,105
Motion to approve CCMHB funding as recommended for Tier One subject to presented in this memorandum:	the caveats as
Motion to approve CCMHB funding as recommended for Tier Two subject to presented in this memorandum: ApprovedDeniedModifiedAdditional Information needed	the caveats as
Motion to approve CCMHB funding as recommended for Tier Three subject to presented in this memorandum: ApprovedDeniedModifiedAdditional Information needed	the caveats as
Motion to approve CCMHB funding as recommended for Tier Four subject to presented in this memorandum: ApprovedDeniedModifiedAdditional Information needed	the caveats as
Motion to deny CCMHB funding for all items delineated in Tier Five as prememorandum:	esented in this

Approved Decided
Denied
Modified
Additional Information needed
Motion to approve set-aside of \$20,000 in FY2015 funds awarded to Community Elements and de-obligated by contract amendment, for use as matching funds to the Justice and Mental Health Collaboration Program grant application by Champaign County to Department of Justice-Bureau of Justice Assistance. Release of matching funds is contingent upon notification of the grant award with match to be provided to Community Elements by contract amendment or under separate contract: ApprovedApprovedAdditional Information needed
Motion to outhorize the second in the
Motion to authorize the executive director to conduct contract negotiation as specified in this memorandum:
Approved
Denied
Modified
Additional Information needed
Motion to authorize the executive director to implement contract maximum reductions as described in the "Special Notification Concerning FY16 Awards" section of this memorandum (see below): ApprovedDeniedModifiedAdditional Information needed
QUARTER CENT FOR PUBLIC SAFETY FUND DECISION SECTION
Motion to recommend to the Champaign County Board the award of \$234,105 in Quarter Cent for Public Safety Funding Supporting Juvenile Justice Post-Detention Programs to the Champaign County Regional Planning Commission Youth Assessment Center: Approved
Denied
Modified
Additional Information needed



July 1, 2015 - June 30, 2016							DRAFT
Agency	Program	Tier I	Tier II	Tier III	Tier IV	Tier V	2016
CCMHB FUNDING							Proposed
CILA Expansion	CILA Expansion			50,000			50,000
Community Elements	NEW Addictions Counseling Urbana Schools		:			53,453	
	Criminal Justice (Includes CCHCC subcontract)	306,816					306,816
	NEW Crisis Assessment Center Development	200,000				85.125	200,000
	Psychiatric/Primary Care	100,000					100.000
	ening	48,000					48,000
Community Choices	Community Living			000'09			000'09
Committee Cost Costs of Northwest Casts	Customized Employment		3	25,000	1		55,000
Courses Consodion	Kesource Connection		,		65,290		65,290
Courage Commercial	KWP Colf-Holn Contor				66,948		66,948
, o	Conjor Counseling & Advocacy				147 227		140 227
Prairie Center Health Systems	Cl Substance Abuse Treatment	000 01			144,337		142,537
	NEW Dring Court Vivitral Dilat	20,01					00,00
	Prevention	771601			56 550		56 550
	Specialty Court	187 425			0000		187 425
Promise Healthcare	FNHC Wellness Campaign	40.00					000 04
Rape Advocacy, Counseling & Education Services	Counseling & Crisis Services				18.600		18,600
		902,433		165,000	378,153	138,578	1,395,586
	CCMHB Tier I - IV Totals	1,445,586					
	CCMHB Tier I - IV Divided by 12	120,466					
CCMHB Allocations - (Al Federal Match effective thru 9/30/15)	tive thru 9/30/15)	a santa a					2016
July 1, 2015 - June 30, 2016	Program	Tier I	Tier II	Tier III	Tier IV	Tier V	Proposed
Champaign County Children's Advocacy Center	Children's Advocacy				37,080		37,080
mpaign County Regional Planning Commission	Youth Assessment Center	٠	26,000				26,000
Community Choices	Self Determination Support			25,000			55,000
initiality Electricity	Dil Eront End	020 000			90,000		90,000
Crisis Nursery	Beyond Blue-Champaign County	203,079			20 000		70,079
Developmental Services Center	Service Coordination			376.144	2000		376 144
Don Moyer Boys & Girls Club	A Community Engagement & Social Marketing		78,000				78.000
	Youth Engagement Servi		170,000				170,000
East Central IL Refugee Mutual Assistance Center	Family Support & Strengthening			•	13,000		13,000
Family Service of Champaign County					40,000	·	40,000
Mahomet Area Youth Club			15,000				15,000
Desirio Contor Houlth Cottons	A Buildogs Learn & Succeed Together (BLAST)		10,000				10,000
ne Center regula systems	Al PLL Extended Care	291,903			000		291,903
Promise Healthcare	Montal Hoalth Comicos				105,000		105,000
University of II - Daych Comitoe	-11		20, 70		000,001		000,291
Urbana Neighborhood Connections	Community Gride Contra		25,683				25,683
UP Center of Champalen County	NEW Children Youth & Families Drogram		2000				12,000
	ACCESS Match Totals	574.982	348.683	431.144	520.080		1.874.889
	GRAND TOTAL ACCESS MATCH CONTRACTS	1,874,889					,
		1,477,415	348,683	596,144	898,233	138,578	
	Original Programs Designated as Match GRAND TOTAL CCMHB CONTRACTS	3,320,475		DD Alloc			
CCMHB - Quarter Cent Tier Sheet FY16							2016
July 1, 2015 - June 30, 2016	Program	Tier I	Tier II	Tier III		Tier V	Proposed
Regional Planning Commission					234,105		234,105
1118 Her I-V Recommendations 2016 - nKc 3/13/15	Ouarter Cent Total	•		•	234 105		100

Lynn Canfield

From:

Walters, Patty < PWalters@dsc-illinois.org >

Sent:

Monday, May 11, 2015 12:52 PM

To:

Lynn Canfield (lynn@ccmhb.org)

Subject:

DSC - DDB/MHB FY 16 summaries - clarification

Lynn – below are a few comments for clarification per the FY16 Program Summaries for DDB and MHB. Let me know of any questions. Thank you. pw

Employment First:

Respond to staff assessment comments on second page under utilization:

This was discussed in CCDDB meeting when application was reviewed but wanted to clarify. Forty-eight businesses will be invited to participate in the launch with a target of 12 businesses earning recognition as a 'Disability Aware' business.

Family Development:

Under Utilization – already mentioned typo of **129 SCs** rather than 12.

IFS:

Staff assessment under Utilization mentions a mismatch. – if you want to respond – I made an error on Part two for FY 16 apps. Continuing number for FY 15 should have been 14, not the 16 I reported. The first quarter report was correct with 14.

Service Coordination:

Apparent error mentioned under Consumer Outcomes/Staff Assessment was also made in IFS application and should have said "June 2015".

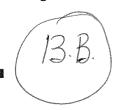
Connections:

Under Utilization/Mid-Year FY 15. Error - 2nd quarter service hours not included which equaled 147

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July 1, 2015 thru June 30, 2016 Agency Autism Society of Illinois				
ety of Illin			Proposed	Proposed
Autism Society of Illinois	Program Name	PY16 Request	CCDDB	ССМНВ
	. CU Autism Network	10,000	10,000	
CTF Illinois	Nursing Services	8,580	8,580	
	Residential & Day Training	36,500		
Champaign County Down Syndrome Network	CC Down Syndrome Network	15,000	15,000	
Champaign County Head Start/Early Head Start	Social Emotional Disabilities Sucs	54,823	54,823	
	N Decision Support Person for CCDDB	48,000	48,000	
Community Choices	Community Living	000.09		55,000
	Customized Employment	55.000		55,000
	Self-Determination Support	55,000		000'09
Community Elements, Inc.	Coordination of Services - DD/MI	31,945	31,945	
Developmental Services Center	Apartment Services	405,185	405,185	
	Clinical Services	173.773	173,773	
	Community Employment	222,800	222,800	
	Connections	85,000	85,000	
	N Employment First	80,000	80,000	
	Family Development Center	545,903	545,903	ŧ
	Individual & Fam Support	376,144		376,144
	Integrated/Site Based Services - Community 1st	905,441	905,441	
	Service Coordination	398,872	398,872	
PACE	Opportunities for Independence	37,223	•	
United Cerebral Palsy Land of Lincoln	L Vocational Svcs	86,475	86,475	
N = New Application L = Late Application 11-DD Allocations PY16 5/11/16 nkc		3,691,664	3,071,797	546,144



Texas expert: Leadership key to good jail-diversion programs

Fri, 04/24/2015 - 7:00arl | Torl Kacich (/author/torl-kacich)

URBANA — Champaign County is ripe for implementation of a model program that would keep the homeless and mentally ill out of jail and enable them to get needed health care and social services, a nationally recognized expert said Thursday.

All it needs is leadership to promote the idea, said Leon Evans, president and CEO of The Center for Health Care Services in Bexar County, Texas.

He led a two-hour-long public meeting Thursday where more than 100 people crammed into the county board meeting room. Among those present were Champaign Mayor-elect Deb Feinen, Urbana Mayor Laurel Prussing, Champaign City Manager Dorothy David, Champaign police Chief Anthony Cobb, Champaign-Urbana Public Health District Administrator Julie Pryde and several county board members.

"Our success has to do with our community collaboration," Evans said of his program with a \$100 million budget that provides mental-health and addiction services to about 30,000 people a year. "It's really about your community coming together today behind good leadership.

"I'm not trying to brag about our programs. I'm trying to brag about our community's collaboration."



Bexar County, with a population of 1.7 mil- lion, is about eight times larger than Champaign County. It includes San Antonio.

Champaign County Sheriff Dan Walsh has long advocated for what has been called a restoration center or a community resource center to serve people with mental health, addiction and physical health problems. He estimated that more than 30 percent of those brought to the county jail have mental health issues, and that more than 50 percent have drug or alcohol abuse issues.

Evans said that thanks to the Affordable Care Act, Champaign County now can begin to address some of those issues by getting people brought to the jail enrolled in health care.

"That's an advantage you folks have that we don't have in Texas," he said. "The stars are being aligned for you."

Evans' itinerary in Champaign County has him meeting with health care providers, local officials, mental health care representatives and some criminal justice officials.

At the same time that Champaign County officials are developing a sheriff's operations master plan, they are looking into ways to reduce the jail population and move more people into alternative programs.

The county has applied for a Justice Department grant for re-entry programming. If awarded, funding would be for a two-year period with an award of up to \$600,000.

A second application is to the MacArthur Foundation for a grant for criminal-justice system planning. Up to \$150,000 could be awarded to support a six-month planning process. Up to 20 grants will be awarded. In a second round of

MacArthur Foundation grants, up to 10 jurisdictions will be chosen to implement the plans developed in the first round. The second round grants will range from \$500,000 to \$2 million annually over two years, with an option to extend the program if substantial progress is made. County officials hope to hear about that grant application by late May.

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Tom Kacich: Some Texas-sized jail ideas

Sun. 04/26/2015 - 7:00arh | Torh Kacich (/author/torh-kacich)

Got a question for Tom? Ask it here (http://www.news-gazette.com/section/toms-mailbag.html)

With a little financial luck, a little leadership and a lot of collaboration, maybe Champaign County can pull off a trifecta of saving money, clearing part of the jail and court docket and getting mental health and substance abuse services to those who need them.

Sheriff Dan Walsh said last week that he hoped that the appearance by Leon Evans, a burly Texan with a gentle manner, would jump-start Champaign County's efforts to address that multifaceted issue. Based on the turnout at a public hearing Thursday afternoon — held at the same time that 72-year-old rock star Joe Biden was in town — there seems to be a willing army ready to follow a local leader to start the effort.

But who's the leader? No one yet.

Walsh, who has been pushing and prodding county officials to get moving on this for years, said he feels he doesn't have the expertise. And he's probably too close; it could be perceived that he's looking out for his self-interest, or that of his office.

Evans, the CEO of the San Antonio-based Center for Health Care Services, said that in his county — named Bexar but pronounced "bear" — it was a local judge who championed



the cause. But I was told that none of the local judges met with Evans while he was here for three days last week. Too bad.

"I've met with your mental health board and your county board. Those folks really get it," he said. "Your sheriff gets it. It sounds like your families and consumers who were here today got it. You've got people trying to solve the problem in lots of different venues. If you got someone to bring everyone together with centralized planning, you've got it.

"If you go to Harvard or West Point, they teach you that if everybody's in charge, nobody's in charge. You want to have a good plan that will work and is a coordinated plan."

How to pay for this? No one even knows how much it would cost. In Evans' county, the annual budget for his agency is \$100 million. But that's in a county about eight times bigger than Champaign County. And although Texas is fiscally conservative, it's not cutting everything in sight like Illinois.

"If as mayor I can do something with this, I'd really be excited about it," said Champaign Mayor-elect Deb Feinen, who attended the public meeting with Evans. "But one of the other things I heard is that you also need funding sources. It's not just, 'Can we all be on board and be ready to move forward,' it's also, 'How are we going to pay for it?' I think so many things are up in the air with the budget right now. If the cities' budget remains intact, that's a different discussion than if we lose \$4 million."

Champaign is facing a \$4 million a year budget hit under Gov. Bruce Rauner's proposal to cut the amount of income tax revenue shared with cities and villages.



That's where the financial luck is needed. Two big grant applications the county has in the works would pay for a planning process and — if a lot of luck was provided — the actual operation of a program. Even without the grants, though, there's the belief that something can happen.

The ingredients are in place in Champaign County, Evans insisted.

Federal laws including the Affordable Care Act will help, he said.

"The Parity Act (the Mental Health Parity and Addiction Equity Act) requires health insurance companies including Medicaid and Medicare to cover mental health and substance abuse like any other illness," Evans said. "You're going to have a resource that you never had before. And the feds also are starting to look at heath outcomes so that if you have people who get readmitted to hospitals and you have lots of readmissions you lose every year 1 percent of your federal funding. It doesn't take too many of those 1 percents where you lose your profit structure and you actually go belly-up."

Local health providers are going to have to work with the agencies that treat mental illnesses and substance abuse problems, he said.

"The people with mental illness and substance abuse disorders are the very people who die early and tend to have multiple admissions. So this is going to force them to start looking at, 'How do we partner and keep these people healthy and keep them from being readmitted over and over again?' They have a financial reason to collaborate with your community to solve this problem."



Hospitals and clinics, he said, "will start doing more disease management, early intervention and prevention and stuff like that because that's going to be the future. That will improve people's health and longevity and drive down the cost of health care. We're right on the cusp of all of this, and I think your community is starting to figure this out."

State's Attorney Julia Rietz thinks the county is onto something, too, but she thinks the cops, prosecutors, health care providers, mental health counselors and others have to figure out exactly what is needed in terms of services and programs.

"We just need to sit down together and figure out what we need," she said.

One thing that needs to be addressed is a jail population that in Walsh's estimation is 30 percent mentally ill and 50 percent substance abuse and keeps cycling into and out of the jail.

"What I would do," said Evans, "is get the key players in the community together and I would sit down and map out everything that you have now and do an inventory. You have a lot of great programs. They're just not very well connected."

Let's do it.

Tom Kacich is a News-Gazette editor and columnist. His column appears on Sundays and Wednesdays. He can be reached at 351-5221 or at kacich@news-gazette.com (mailto:kacich@news-gazette.com).

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

The 9^{th} annual Expo will be held on Saturday, October 17, 2015 at the Fluid Event Center, 601 N. Country Fair Dr., Champaign.

The Expo Steering Committee will hold it's next planning meeting on May 19 at 11:30 a.m. at Za's.

Exhibitors – The Exhibitor sub-committee held it's first meeting of 2015 on April 22. The committee reviewed our previous exhibitor listing and identified several new potential exhibitors. An improved process for exhibitor check-in, exhibitor parking, and easier booth identification were addressed. The committee discussed having a mural developed that will depict persons with various disabilities participating in athletics, dance and other activities. This mural will become a wonderfully creative activity for children that will also bring awareness of the many talents of persons with disabilities. An added benefit of the mural is that it can be added to each year of the Expo.

Marketing/Sponsorship — Plans for the wine tasting fundraiser to benefit the 2015 Expo are coming along nicely. With the support of Steering Committee members, fifty plus tickets have been sold for the event, which is scheduled for June 11 from 4-7 p.m. at Lincoln Square Village. We still need to sell another 50 tickets, with hopes of selling far more than this. Tickets for the wine tasting are \$20 each or \$30 for a pair. A huge thanks goes out to Nancy Crawford for putting together some fantastic baskets to be raffled as part of the wine tasting event. The basket raffle tickets are \$1 each or \$5 for 6, and are on sale now. Also, thank you to a couple of our CCDDB members for donations for the baskets. Krannert Center and Columbia Street Coffee have each donated a basket for the event, which brings us to a total of 7 baskets to be raffled off.

The first sponsorship mailing has gone out to WCIA Home Show businesses. Follow-up calls will be made to these potential sponsors within the next two weeks.

Accessibility/Entertainment –The Committee's task of confirming entertainment for the Expo is nearly complete. We will be including our line-up of entertainment in the next board report. Four interpreters and one personal assistant have been confirmed, and accessibility needs that were identified in 2014 have been addressed.

Children's Activities –We are currently seeking additional members for this sub-committee, and a co-chair to assist Sally Mustered with planning for Children's Activities this year.

PRIDE Room –As noted above, we will be modifying our entrance to the Expo this year to provide better visibility to our Pride Room vendors. The Steering Committee is also entertaining a name change for the Pride Room. More information to come!

Volunteers – No further updates this month. **Public Safety** – No activity for 2015 yet.

Respectfully submitted Barb Bressner, Consultant

