



This meeting will be held in person, with remote access. Members of the public may attend in person or watch the meeting live through this link. The recording will be posted later among archives at <https://www.co.champaign.il.us/mhddb/MeetingInfo.php>

Champaign County Developmental Disabilities Board (CCDDDB) Meeting Agenda

*<https://us02web.zoom.us/j/81559124557> Meeting ID: 815 5912 4557 1-312-626-6799
and In-Person at the Shields-Carter Room of Brookens Administrative Building*

- I. Call to order**
- II. Roll call**
- III. Approval of Agenda***
- IV. CCDDDB and CCMHB Schedules, CCDDDB Timeline (pages 3-8) *No action is needed.***
- V. CCDDDB Acronyms and Glossary (pages 9-16) *No action is needed.***
- VI. Citizen Input/Public Participation *All are welcome to attend the Board's meeting to observe and to offer thoughts during this time. The board may question them, but no further action or discussion is allowed. The Chair may limit public participation to 5 minutes per person and/or 20 minutes total.***
- VII. Chairperson's Comments – Dr. Anne Robin**
- VIII. Executive Director's Comments – Lynn Canfield**
- IX. Approval of CCDDDB Board Meeting Minutes (pages 17-20)*
*Minutes from the CCDDDB's regular board meeting on 6/21/23 are included for review and approval. Action is requested.***
- X. Vendor Invoice List (page 21-24)*
*Action is requested, to ratify the "Vendor Invoice List" and place it on file. Also included, for information only, are Additional Details for these expenditures.***
- XI. Staff Reports (pages 25-44)
*Included for information only are reports from Kim Bowdry, Stephanie Howard-Gallo, Shandra Summerville, and Chris Wilson.***
- XII. New Business**
 - a) UIUC Life Home Tour and Resources (page 45)
*Dr. Samuel A. Olatunji and Colleagues from the Human Factors and Aging Laboratory/McKechnie Family LIFE Home will provide a virtual tour and information about the Life Home project.***
 - b) Evaluation Capacity Building Project (pages 46-52)**



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For information only, an oral update will be provided on the project undertaken by the UIUC Family Resiliency Center to date. Relevant pages from the Proposal are included in the packet for background.

c) **I/DD Special Initiatives Fund** (pages 53-66)

A briefing memorandum provides an update on PY24 IDDSI contracts and draft PY25 priorities. No action is needed.

d) **CCDDB Election of Officers** (pages 67-70)*

As required by the Community Care for Persons with a Developmental Disability Act, the CCDDB meets each July and holds election of officers, at minimum a President and Secretary. CCDDB By-Laws are included in the packet to support discussion and election. Action is requested.

XIII. Old Business

a) **Quarterly Update on Community Health Plan** (pages 71-73)

For information only is an overview of current priorities and activities of the Regional Community Health Plan group.

XIV. Successes and Other Agency Information

Providers and self-advocates are invited to report on successes. Agency representatives may share other agency information. The Chair may limit input to 5 minutes per individual or agency and/or total time to 20 minutes.

XV. County Board Input

XVI. Champaign County Mental Health Board Input

XVII. Board Announcements and Input

XVIII. Adjournment

** Board action is requested.*

For accessible documents or assistance with any portion of this packet, please [contact us](mailto:kim@ccmhb.org) (kim@ccmhb.org).



CCDDB 2023-2024 Meeting Schedule

9:00AM Wednesday after the third Monday of each month
Brookens Administrative Building, 1776 East Washington Street, Urbana, IL
<https://us02web.zoom.us/j/81559124557>

June 21, 2023 – Shields-Carter Room

July 19, 2023 – Shields-Carter Room

August 16, 2023 – Shields-Carter Room - *tentative*

September 20, 2023 – Shields-Carter Room

September 27, 2023 5:45PM – Shields-Carter Room – *joint study session with the CCMHB*

October 18, 2023 – Shields-Carter Room

October 25, 2023 5:45PM – Shields-Carter Room – *joint meeting with the CCMHB*

November 15, 2023 – Shields-Carter Room (*off cycle*)

December 20, 2023 – Shields-Carter Room (*off cycle*) - *tentative*

January 17, 2024 – Shields-Carter Room

February 21, 2024 – Shields-Carter Room

March 20, 2024 – Shields-Carter Room

March 27, 2024 5:45PM – Shields-Carter Room – *joint study session with the CCMHB*

April 17, 2024 – Shields-Carter Room

May 22, 2024 – Shields-Carter Room

This schedule is subject to change due to unforeseen circumstances.

Please email stephanie@ccmhb.org to confirm meetings or to request alternative format documents, language access, or other accommodation needed to participate.
All meetings and study sessions include time for members of the public to address the Board.

Meetings are posted in advance and recorded and archived at
<http://www.co.champaign.il.us/mhbddb/DDBMeetingDocs.php>

Public Input: All are welcome to attend the Board's meetings, whether virtually or in person, to observe and to offer thoughts during the "Public Participation" period of the meeting. For support to participate in a meeting, let us know how we might help by emailing stephanie@ccmhb.org. If the time of the meeting is not convenient, you may still communicate with the Board by emailing stephanie@ccmhb.org any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated but be aware that the time for each person's comments may be limited to five minutes.



CCMHB 2023 Meeting Schedule

5:45PM Wednesday after the third Monday of each month
Brookens Administrative Building, 1776 East Washington Street, Urbana, IL
<https://us02web.zoom.us/j/81393675682> (if it is an option)

- June 21, 2023** – Shields-Carter Room
- July 19, 2023** – Shields-Carter Room
- August 16, 2023** – Shields-Carter Room - *tentative*
- September 20, 2023** – Shields-Carter Room
- September 27, 2023** – *Joint Study Session w CCDDDB* - Shields-Carter
- October 18, 2023** – Shields-Carter Room
- October 25, 2023** – *Joint Meeting with CCDDDB* - Shields-Carter Room
- November 15, 2023** – Shields-Carter Room
- December 20, 2023** – Shields-Carter Room (*off cycle*) - *tentative*
- January 17, 2024** – Shields-Carter Room
- January 24, 2024** – *Study Session* - Shields-Carter Room
- February 21, 2024** – Shields-Carter Room
- February 28, 2024** – *Study Session* - Shields-Carter Room
- March 20, 2024** – Shields-Carter Room
- March 27, 2024** – *Joint Study Session w CCDDDB* - Shields-Carter
- April 17, 2024** – Shields-Carter Room
- April 24, 2024** – *Study Session* - Shields-Carter Room
- May 15, 2024** – *Study Session* - Shields-Carter Room
- May 22, 2024** – Shields-Carter Room
- June 19, 2024** – Shields-Carter Room
- July 17, 2024** – Shields-Carter Room

This schedule is subject to change due to unforeseen circumstances.

Please email stephanie@ccmhb.org to confirm meetings or to request alternative format documents, language access, or other accommodation needed to participate.
Meetings are archived at <http://www.co.champaign.il.us/mhbddb/MHBMeetingDocs.php>

Public Input: All meetings and study sessions include time for members of the public to address the Board. All are welcome to attend meetings, whether using the Zoom options or in person, to observe and to offer thoughts during "Public Participation". For support to participate, let us know how we might help by emailing stephanie@ccmhb.org. If the time of the meeting is not convenient, you may still communicate with the Board by emailing stephanie@ccmhb.org any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated but be aware that the time for each person's comments may be limited to five minutes.

IMPORTANT DATES

2023-24 Meeting Schedule with Subjects, Agency and Staff Deadlines, and PY25 Allocation Timeline

This schedule offers dates and subject matter of meetings of the Champaign County Developmental Disabilities Board. Included are tentative dates for steps in the funding process for PY25 and deadlines related to PY23 and PY24 agency contracts. Subjects are not exclusive to any given meeting, as other matters requiring Board attention may be addressed. Study sessions may be scheduled on topics raised at meetings or by staff, or in conjunction with the CCMHB. **Regular meetings are held at 9AM; joint study sessions and meetings at 5:45PM; dates and times are subject to change and may be confirmed with Board staff.**

- 6/1/23* For contracts with a PY23-PY24 term, all updated
PY24 forms should be completed and submitted by this date.
- 6/17/23* Deadline for agency application/contract revisions
Deadline for agency letters of engagement with CPA firms
PY2024 contracts completed
- 6/21/23** **Regular Board Meeting:** Draft FY2024 Budgets
- 6/30/23* Agency Independent Audits, Reviews, or Compilations due
(only for those with calendar fiscal year, per Special Provision)
- 7/19/23** **Regular Board Meeting:** Election of Officers
- 8/16/23** **Regular Board Meeting - tentative**
- 8/25/23* Agency PY2023 4th Quarter Reports, CLC Progress
Reports, and Annual Performance Measure Reports due
- 9/20/23** **Regular Board Meeting**
FY2024 Budgets
Draft Three Year Plan 2022-24 with 2024 Objectives
Draft Program Year 2025 Allocation Criteria
- 9/27/23** **Joint Study Session with CCMHB (5:45PM)**
Discussion of Draft I/DD Special Initiatives
PY25 Allocation Priorities and RFP options

- 4/26/24 *Agency PY2024 3rd Quarter Reports due*
- 5/10/24 *Allocation recommendations released to Board, posted online with CCDDDB May 22 board meeting packet*
- 5/22/24** **Regular Board Meeting**
Allocation Decisions; Authorize Contracts for PY25
- 6/1/24 *For contracts with a PY24-PY25 term, all updated PY25 forms should be completed and submitted by this date.*
- 6/18/24 *Deadline for agency application/ contract revisions*
Deadline for agency letters of engagement w/ CPA firms
- 6/19/24** **Regular Board Meeting**
Draft FY2025 Budget
- 6/21/24 *PY2025 agency contracts completed.*
- 6/30/24 *Agency Independent Audits, Reviews, or Compilations due (only applies to those with calendar FY, check contract)*
- 7/17/24** **Regular Board Meeting**
- 8/21/24** **Regular Board Meeting - tentative**
- 8/30/24 *Agency PY2024 4th Quarter reports, CLC progress reports, and Annual Performance Measure Reports due*
- 9/18/24** **Regular Board Meeting**
Community Needs Assessment Report
Draft Three Year Plan 2025-27 with 2025 Objectives
Approve Draft FY2025 Budgets
- 9/25/24** **Joint Study Session Joint with CCMHB (5:45PM)**
- 10/16/24** **Joint Meeting with CCMHB (5:45PM)**
I/DD Special Initiatives
- 10/23/24** **Regular Board Meeting**
DRAFT Program Year 2026 Allocation Criteria

- 10/25/24 *Agency PY2025 First Quarter Reports due*
- 11/20/24** **Regular Board Meeting**
Approve Three Year Plan with One Year Objectives
Approve PY26 Allocation Criteria
- 11/29/24 *Public Notice of Funding Availability to be published by date, giving at least 21-day notice of application period.*
- 12/18/24** **Regular Board Meeting**– *tentative*
- 12/20/24 *Online system opens for applications for PY26 funding.*
- 12/31/24 *Agency Independent Audits, Reviews, Compilations due.*

Agency and Program acronyms commonly used by the CCDDDB

CC – Community Choices

CCDDDB – Champaign County Developmental Disabilities Board

CCHS – Champaign County Head Start, a program of the Regional Planning Commission

CCMHB – Champaign County Mental Health Board

CCRPC – Champaign County Regional Planning Commission

CUAN – Champaign-Urbana Autism Network

DSC - Developmental Services Center

DSN – Down Syndrome Network

IAG – Individual Advocacy Group

ISC – Independent Service Coordination Unit

FDC – Family Development Center

PACE – Persons Assuming Control of their Environment, Inc.

PCMHC – Piatt County Mental Health Center

RCI – Rosecrance Central Illinois

RPC – Champaign County Regional Planning Commission

Glossary of Other Terms and Acronyms

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

AAC – Augmentative and Alternative Communication

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

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

ACA – Affordable Care Act

ACMHAI – Association of Community Mental Health Authorities of Illinois

ADA – Americans with Disabilities Act

ADD – Attention Deficit Disorder

ADHD – Attention Deficit/Hyperactivity Disorder

ADL – Activities of Daily Living

ASD – Autism Spectrum Disorder

ASL – American Sign Language

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

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

BD – Behavior Disorder

BSP – Behavior Support Plan

CANS – Child and Adolescent Needs and Strengths. The CANS is a multi-purpose tool developed to support decision making, including level of care, service planning, and monitoring of outcomes of services.

CARF- Council on Accreditation of Rehabilitation Facilities

CC – Champaign County

CDS – Community Day Services, formerly “Developmental Training”

CFC – Child and Family Connections Agency

CFCM – Conflict Free Case Management

C-GAF – Children’s Global Assessment of Functioning

CILA – Community Integrated Living Arrangement

CLC – Cultural and Linguistic Competence

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

CNA – Certified Nursing Assistant

COTA – Certified Occupational Therapy Assistant

CP – Cerebral Palsy

CQL – Council on Quality and Leadership

CSEs - Community Service Events. A category of service measurement on the Part II Utilization form. Activity to be performed should also be described in the Part I Program Plan form-Utilization section. It relates to the number of public events (including mass media and articles), consultations with community groups and/or caregivers, classroom presentations, and small group workshops to promote a program or educate the community. Activity (meetings) directly related to planning such events may also be counted here. Actual direct service to clientele is counted elsewhere.

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

CY – Contract Year, runs from July to following June. For example, CY18 is July 1, 2017 to June 30, 2018. May also be referred to as Program Year – PY. Most contracted agency Fiscal Years are also from July 1 to June 30 and may be interpreted as such when referenced in a Program Summary e.g. FY18.

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

DD – Developmental Disability

DDD – Division of Developmental Disabilities

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

DHS – (Illinois) Department of Human Services

DOJ – (US) Department of Justice

DRS – (Illinois) Division of Rehabilitation Services

DSM – Diagnostic Statistical Manual.

DSP – Direct Support Professional

DT – Developmental Training, now “Community Day Services”

DT – Developmental Therapy, Developmental Therapist

Dx – Diagnosis

ED – Emotional Disorder

EI – Early Intervention

EPDS – Edinburgh Postnatal Depression Scale – Screening tool used to identify mothers with newborn children who may be at risk for prenatal depression.

EPSDT – Early Periodic Screening Diagnosis and Treatment. Intended to provide comprehensive and preventative health care services for children under age 21 who are enrolled in Medicaid.

ED – Emergency Department

ER – Emergency Room

FAPE – Free and Appropriate Public Education

FFS – Fee For Service. Type of contract that uses performance-based billings as the method of payment.

FOIA – Freedom of Information Act.

FQHC – Federally Qualified Health Center

FTE – Full Time Equivalent is the aggregated number of employees supported by the program. Can include employees providing direct services (Direct FTE) to clients and indirect employees such as supervisors or management (Indirect FTE).

FY – Fiscal Year, which for the County is January 1 through December 31.

GAF – Global Assessment of Functioning. A subjective rating scale used by clinicians to rate a client's level of social, occupational and psychological functioning. The scale included in the DSM-IV has been replaced in the DSM-V by another instrument.

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

HCBS – Home and Community Based Services

HI – Hearing Impairment or Health Impairment

Hx – History

ICAP – Inventory for Client and Agency Planning

ICDD – Illinois Council for Developmental Disabilities

ICFDD – Intermediate Care Facility for the Developmentally Disabled

ID – Intellectual Disability

IDEA – Individuals with Disabilities Education Act

IDHS – Illinois Department of Human Services

IDOC – Illinois Department of Corrections

IDPH – Illinois Department of Public Health

IDT – Interdisciplinary Team

IEP – Individualized Education Plan

IFSP – Individualized Family Service Plan

IPLAN - Illinois Project for Local Assessment of Needs. The Illinois Project for Local Assessment of Needs (IPLAN) is a community health assessment and planning process that is conducted every five years by local health jurisdictions in Illinois. Based on the *Assessment Protocol for Excellence in Public Health* (APEX-PH) model, IPLAN is grounded in the core functions of public health and addresses public health practice standards. The completion of IPLAN fulfills most of the requirements for Local Health Department certification under Illinois Administrative Code Section 600.400: Certified Local Health Department Code Public Health Practice Standards. The essential elements of IPLAN are:

1. an organizational capacity assessment;
2. a community health needs assessment; and
3. a community health plan, focusing on a minimum of three priority health problems.

I&R – Information and Referral

ISBE – Illinois State Board of Education

ISC – Independent Service Coordination

ISP – Individual Service Plan, Individual Success Plan

ISSA – Independent Service & Support Advocacy

LCPC – Licensed Clinical Professional Counselor

LCSW – Licensed Clinical Social Worker

LD – Learning Disability

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

LPC – Licensed Professional Counselor

LPN – Licensed Practical Nurse

MCO – Managed Care Organization

MDC – Multidisciplinary Conference

MDT – Multidisciplinary Team

MH – Mental Health

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

MI – Mental Illness

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

MSW – Master of Social Work

NACBHDD – National Association of County Behavioral Health and Developmental Disability Directors

NACO – National Association of Counties

NCI – National Core Indicators

NOS – Not Otherwise Specified

NTPC -- NON - Treatment Plan Clients. Persons engaged in a given quarter with case records but no treatment plan. May include: recipients of material assistance, non-responsive outreach cases, cases closed before a plan was written because the client did not want further service beyond first few contacts, or cases assessed for another agency. It is a category of service measurement, providing an actual number of those served in the prior program year and a projection for the coming program year on the Part II utilization form. The actual activity to be performed should also be described in the Part I Program Form, Utilization section. Similar to TPCs, they may be divided into two groups: New TPCS – first contact within any quarter of the plan year; Continuing NTPCs - those served before the first day of July and actively receiving services within the first quarter of the new program year. The first quarter of the program year is the only quarter in which Continuing NTPCs are reported.

OMA – Open Meetings Act.

OT – Occupational Therapy, Occupational Therapist

OTR – Registered Occupational Therapist

PAS – Pre-Admission Screening

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

PCI – Parent Child Interaction groups.

PCP – Person Centered Planning, Primary Care Physician

PDD – Pervasive Developmental Disorders

PLAY – Play and Language for Autistic Youngsters. PLAY is an early intervention approach that teaches parents ways to interact with their child who has autism that promotes developmental progress.

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

PSH – Permanent Supportive Housing

PT – Physical Therapy, Physical Therapist

PTSD – Post-Traumatic Stress Disorder

PUNS – Prioritization of Urgency of Need for Services. PUNS is a database implemented by the Illinois Department of Human Services to assist with planning and prioritization of services for individuals with disabilities based on level of need. An individual's classification of need may be emergency, critical, or planning.

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

QIDP – Qualified Intellectual Disabilities Professional

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

RCCSEC – Rural Champaign County Special Education Cooperative

RD – Registered Dietician

RN – Registered Nurse

RT – Recreational Therapy, Recreational Therapist

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

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

SCs - Service Contacts/Screening Contacts. The number of phone and face-to-face contacts with eligible persons who may or may not have open cases in the program. Can include information and referral contacts or initial screenings/assessments or crisis services. May sometimes be referred to as a service encounter (SE). It is a category of service measurement providing a picture of the volume of activity in the prior program year and a projection for the coming program year on the Part II form, and the activity to be performed should be described in the Part I Program Plan form-Utilization section.

SEDS – Social Emotional Development Specialist

SEL – Social Emotional Learning

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

SH – Supportive Housing

SIB – Self-Injurious Behavior

SIB-R – Scales of Independent Behavior-Revised

SLI – Speech/Language Impairment

SLP – Speech Language Pathologist

SPD – Sensory Processing Disorder

SSA – Social Security Administration

SSDI – Social Security Disability Insurance

SSI – Supplemental Security Income

SST – Support Services Team

SUD – Substance Use Disorder

SW – Social Worker

TIC – Trauma Informed Care

TPC – Transition Planning Committee

TPCs - Treatment Plan Clients - service recipients with case records and treatment plans. It is a category of service measurement providing an actual number of those served in the prior program year and a projection for the coming program year on the Part II Utilization form, and the actual activity to be performed should also be described in the Part I Program Plan form -Utilization section. Treatment Plan Clients may be divided into two groups: Continuing TPCs are those with treatment plans written prior to the first day of July and actively receiving services within the first quarter of the new program year (the first quarter of the program year is the only quarter in which this data is reported); New NTPCs are those newly served, with treatment plans, in any quarter of the program year.

VI – Visual Impairment

VR – Vocational Rehabilitation

WHODAS – World Health Organization Disability Assessment Schedule. It is a generic assessment instrument for health and disability and can be used across all diseases, including mental and addictive disorders. The instrument covers 6 domains: Cognition, Mobility; Self-care; Getting along; Life activities; and Participation. Replaces the Global Assessment of Functioning in the DSM-V.

WIOA – Workforce Innovation and Opportunity Act

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

Minutes June 21, 2023

*This meeting was held at the Brookens Administrative Center
1776 E. Washington St., Urbana, IL 61802
and with remote access via Zoom.*

9:00 a.m.

MEMBERS PRESENT: Anne Robin, Deb Ruesch, Vicki Niswander, Georgiana Schuster

MEMBERS EXCUSED: Kim Fisher

STAFF PRESENT: Kim Bowdry, Leon Bryson, Lynn Canfield, Shandra Summerville,
Chris Wilson

OTHERS PRESENT: Jami Olsen, Annette Becherer, Laura Bennett, Patty Walters, Nicole
Smith, DSC; Mel Liong, PACE; Becca Obuchowski, Hannah
Sheets, Community Choices; Annie Bruno, The Autism Project;
Angela Yost, RPC; Nancy Uchtmann, Citizen

CALL TO ORDER:

Dr. Robin called the meeting to order at 9:03 a.m.

ROLL CALL:

Roll call was taken and a quorum was present.

APPROVAL OF AGENDA:

A revised agenda (posted online with addendum) was available for review and approved by a unanimous vote. Dr. Robin and Director Canfield explained the revision, addition of an agency request.

CITIZEN INPUT/PUBLIC PARTICIPATION:

None.

PRESIDENT’S COMMENTS:

Dr. Robin thanked the staff for diligence during the allocation considerations and beyond, hoped they will be able to take some vacation time. She thanked Deb Ruesch for her service to the CCDDDB, as this is the last meeting of Ms. Ruesch’s final term.

EXECUTIVE DIRECTOR’S COMMENTS:

Director Canfield commented on the allocation and contract process activities and current focus on preparation of budgets for 2024 and collaborations.

APPROVAL OF MINUTES:

Minutes from the 5/17/2023 board meeting were included in the packet.

MOTION: Ms. Niswander moved to approve the minutes from the 5/17/23 CCDDDB meeting. Ms. Schuster seconded the motion. A roll call vote was taken. The motion passed.

VENDOR INVOICE LIST:

The Vendor Invoice List was included in the Board packet.

MOTION: Ms. Ruesch moved to accept the Vendor Invoice List as presented in the packet. Ms. Niswander seconded the motion. A roll call vote was taken and the motion passed unanimously.

NEW BUSINESS:

disability Resource Expo Update:

A written report from the Expo Coordinators was included in the packet. Ms. Allison Boot provided additional and updated information to the written report.

Financial Management Support Student Project:

The final presentation of a three-month student project on financial management support was included in the Board packet. Mr. Leon Bryson reviewed the student project with Board members. Mr. Chris Wilson provided Board members with information regarding CCDDDB financial requirements from the agencies.

Draft Fiscal Year 2024 Budgets:

A Decision Memorandum was included in the Board packet. Drafts of budgets for the CCDDDB and I/DD Special Initiatives funds, with draft CCMHB budgets and other background information was included in the packet as well.

MOTION: Ms. Ruesch moved Motion to approve the attached DRAFT 2024 CCDDDB Budget, with anticipated revenues and expenditures of \$5,244,011. Ms. Niswander seconded the motion. A roll call vote was taken and the motion passed unanimously.

MOTION: Ms. Niswander moved to approve the attached DRAFT 2024 I/DD Special Initiatives Fund Budget, with anticipated revenues and expenditures of \$406,000. Use of this fund is consistent with the terms of the Intergovernmental Agreement between the CCDDDB and CCMHB, and full approval is contingent on CCMHB action. Ms. Ruesch seconded the motion. A roll call vote was taken and the motion passed unanimously.

Illinois I/DD Services:

The packet contained a fact sheet developed by The Institute Online, to support discussion of access to core services, which may frame future advocacy efforts and planning.

OLD BUSINESS:

PY24 Funding Decisions:

Charts showing PY2024 funding decisions made by the CCDDDB and the CCMHB was included in the packet.

Agency Request:

A formal request was included in the packet from Community Choices. They requested a two year contract for the Staff Recruitment and Retention grant.

MOTION: Dr. Robin moved to approve the request from Community Choices for a two year contract for the Staff Recruitment and Retention grant for the annual amount of \$34,000. Ms. Ruesch seconded the motion. A roll call vote was taken and the motion passed unanimously.

CCDDDB and CCMHB Schedules and CCDDDB Timelines:

Updated copies of CCDDDB and CCMHB meeting schedules and CCDDDB allocation timelines were included in the packet.

Acronyms and Glossary:

A list of commonly used acronyms was included for information.

CCMHB Input:

The CCMHB will meet this evening.

Staff Reports:

Staff reports were included in the Board packet. Upcoming training opportunities were reviewed.

Successes and Agency Information:

Updates were provided by Patty Walters, Annette Becherer, and Laura Bennett from DSC; Becca Obuchowski from Community Choices; and Mel Liong from PACE.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 10:07 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo

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

Champaign County, IL

VENDOR INVOICE LIST



INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	DESCR
10146 COMMUNITY CHOICES, INC										
Jun '23	DD23-075	06/01/2023	060923A	20388	14,250.00	14,250.00	06/30/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
Jun '23	DD23-090	06/01/2023	060923A	20388	17,172.00	17,172.00	06/30/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
Jun '23	DD23-095	06/01/2023	060923A	20388	18,125.00	18,125.00	06/30/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
May '23	DD23-075	05/01/2023	060923A	20388	14,250.00	14,250.00	05/31/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
May '23	DD23-090	05/01/2023	060923A	20388	17,170.00	17,170.00	05/31/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
May '23	DD23-095	05/01/2023	060923A	20388	18,125.00	18,125.00	05/31/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
10170 DEVELOPMENTAL SERVICES CENTER OF										
99,092.00										
Apr '23	DD23-082	05/01/2023	060923A	20398	70,638.00	70,638.00	05/31/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
Jun '23	DD23-080	06/01/2023	060923A	20398	32,500.00	32,500.00	06/30/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
Jun '23	DD23-081	06/01/2023	060923A	20398	44,674.00	44,674.00	06/30/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
Jun '23	DD23-083	06/01/2023	060923A	20398	39,000.00	39,000.00	06/30/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
Jun '23	DD23-084	06/01/2023	060923A	20398	15,337.00	15,337.00	06/30/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
Jun '23	DD23-085	06/01/2023	060923A	20398	7,087.00	7,087.00	06/30/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
Jun '23	DD23-086	06/01/2023	060923A	20398	18,962.00	18,962.00	06/30/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
Jun '23	DD23-091	06/01/2023	060923A	20398	36,250.00	36,250.00	06/30/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
Jun '23	DD23-092	06/01/2023	060923A	20398	7,924.00	7,924.00	06/30/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										
May '23	DD23-080	05/01/2023	060923A	20398	32,500.00	32,500.00	05/31/2023	INV	PD	DD23-0
CHECK DATE: 06/09/2023										

Champaign County, IL



VENDOR INVOICE LIST

INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	DESCR
May '23 DD23-081	06/09/2023	05/01/2023	060923A	20398	44,666.00	44,666.00	05/31/2023	INV	PD	DD23-0
May '23 DD23-083	06/09/2023	05/01/2023	060923A	20398	39,000.00	39,000.00	05/31/2023	INV	PD	DD23-0
May '23 DD23-084	06/09/2023	05/01/2023	060923A	20398	15,333.00	15,333.00	05/31/2023	INV	PD	DD23-0
May '23 DD23-085	06/09/2023	05/01/2023	060923A	20398	7,083.00	7,083.00	05/31/2023	INV	PD	DD23-0
May '23 DD23-086	06/09/2023	05/01/2023	060923A	20398	18,958.00	18,958.00	05/31/2023	INV	PD	DD23-0
May '23 DD23-091	06/09/2023	05/01/2023	060923A	20398	36,250.00	36,250.00	05/31/2023	INV	PD	DD23-0
May '23 DD23-092	06/09/2023	05/01/2023	060923A	20398	7,916.00	7,916.00	05/31/2023	INV	PD	DD23-0
10424 PERSONS ASSUMING CONTROL OF THEIR ENVIRONMENT INC.					474,078.00					
May '23 DD23-079	06/30/2023	06/15/2023	063023A	21240	2,280.00	2,280.00	06/30/2023	INV	PD	DD23-0
24 INVOICES					575,450.00					

** END OF REPORT - Generated by Chris M. Wilson **

ACCOUNT DETAIL HISTORY FOR 2023 06 TO 2023 06

ORG	ACCOUNT	JNL	EFF DATE	SRC	REF1	REF2	REF3	CHECK #	OB	AMOUNT	NET LEDGER BALANCE
21000100	2108-00-0256b-03-050-000-000-0000-502001									PROFESSIONAL SERVICES	
23/06	53 06/05/23	GEN								33,926.00	33,926.00
	Jun DDB		Jun'23	DDB	Admin Fee						
	LEDGER BALANCES	---					33,926.00			NET:	33,926.00
21000100	2108-00-0256b-03-050-000-000-0000-502025									CONTRIBUTIONS & GRANTS	
23/06	92 06/02/23	API	010146	DD23-095	39635				20388	18,125.00	18,125.00
	W 060923A				Customized Employment				COMMUNITY CHOICES, I		
23/06	92 06/02/23	API	010146	DD23-090	39636				20388	17,172.00	35,297.00
	W 060923A				Inclusive Community S				COMMUNITY CHOICES, I		
23/06	92 06/02/23	API	010146	DD23-075	39637				20388	14,250.00	49,547.00
	W 060923A				Self-Determination su				COMMUNITY CHOICES, I		
23/06	92 06/02/23	API	010170	DD23-084	39640				20398	15,337.00	64,884.00
	W 060923A				Clinical Services				DEVELOPMENTAL SERVIC		
23/06	92 06/02/23	API	010170	DD23-091	39641				20398	36,250.00	101,134.00
	W 060923A				Community Employment				DEVELOPMENTAL SERVIC		
23/06	92 06/02/23	API	010170	DD23-081	39646				20398	44,674.00	145,808.00
	W 060923A				Community Living				DEVELOPMENTAL SERVIC		
23/06	92 06/02/23	API	010170	DD23-092	39647				20398	7,924.00	153,732.00
	W 060923A				Connections				DEVELOPMENTAL SERVIC		
23/06	92 06/02/23	API	010170	DD23-085	39649				20398	7,087.00	160,819.00
	W 060923A				Employment First				DEVELOPMENTAL SERVIC		
23/06	92 06/02/23	API	010170	DD23-080	39650				20398	32,500.00	193,319.00
	W 060923A				Individual and Family				DEVELOPMENTAL SERVIC		
23/06	92 06/02/23	API	010170	DD23-083	39651				20398	39,000.00	232,319.00
	W 060923A				Service Coordination				DEVELOPMENTAL SERVIC		
23/06	92 06/02/23	API	010170	DD23-086	39652				20398	18,962.00	251,281.00
	W 060923A				workforce Development				DEVELOPMENTAL SERVIC		
23/06	480 06/20/23	API	010424	DD23-079	40748				21240	2,280.00	253,561.00
	W 063023A				Consumer Control in P				PERSONS ASSUMING CON		
	LEDGER BALANCES	---					253,561.00			NET:	253,561.00
	GRAND TOTAL	---					287,487.00			NET:	287,487.00

ACCOUNT DETAIL HISTORY FOR 2023 06 TO 2023 06

ORG	ACCOUNT	JNL	EFF	DATE	SRC	REF1	REF2	REF3	CHECK #	OB	AMOUNT	NET LEDGER BALANCE
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13 Records printed

** END OF REPORT - Generated by Chris M. Wilson **

Kim Bowdry,
Associate Director for Intellectual & Developmental Disabilities
Staff Report – July 2023

CCDDB/CCMHB/IDDSI: All PY2024 CCDDB and IDDSI contracts were issued by June 30, 2023. All contracts were sent using Adobe Sign. Only the two CU Autism Network contracts are incomplete at the time of this writing. CU Autism Network is working with their CPA to complete the agency PY2022 Financial Review before their PY2024 contracts can be finalized. I also worked on the PY2024 Funded Programs with Summaries Chart.

I participated in a meeting with Dr. Dariotis from the Family Resiliency Center, related to the Evaluation Capacity project.

CCDDB Contract Amendments: A contract amendment was sent to Community Choices since their request for a two-year contract term for their Staff Recruitment and Retention grant was approved by the CCDDB during the June Board Meeting.

Learning Opportunities: Karen C. Simms presented “Resiliency Refresher” on June 29, 2023, at 9:30 AM at the Champaign Public Library. The event was well attended, with approximately 20 participants. In advance of the workshop, I reserved the room at the library, organized the registration page, ordered refreshments from the Champaign Public Library café, and made copies of the handouts. After the workshop, I tallied the training evaluation forms, created and emailed Certificates of Attendance, and shared the PowerPoint with participants.

Disability Resource Expo: I was unable to attend the Expo Steering Committee meeting on June 29, 2023, due to a previous engagement. The next meeting is being planned for the end of July or early August. I will participate in any Expo Marketing Committee meetings or Children’s Activities Committee meetings as they are scheduled.

MHDDAC: The June MHDDAC meeting was held on June 27, 2023. I was on vacation and was unable to attend. I will attend the August meeting.

ACMHAI: I attended the July ACMHAI I/DD committee meeting. The discussion included national updates, state updates, and local updates from each member.

Human Services Council: HSC is taking a summer break. Meetings will resume in August.

Other: I also participated in several webinars.

Stephanie Howard-Gallo

Operations and Compliance Coordinator Staff Report – July 2023 Board Meeting

SUMMARY OF ACTIVITY:

Fourth Quarter Reporting:

Fourth quarter financial and program reporting will be due at the end of August. (Agencies are given one extra month to submit 4th qtr. reports.) Performance Outcome Measures and a Cultural and Linguistic Competence Plan Progress Report are due at the 4th Quarter of each funding year, as well.

Other Compliance:

I made contact with three funded agencies regarding missing minutes from their Board meetings for files and the online Compliance Dashboard, as required in their contracts.

Community Awareness/Anti-Stigma Efforts/Alliance for Inclusion and Respect (AIR):

AIR artists will be selling their items at the disABILITY Expo on October 28, 2023 at Market Place Mall. A Facebook page promotes AIR's mission, members, artists, events, and news articles of interest. I am one of the administrators of the page.

<https://www.facebook.com/allianceforAIR>

Contracts:

Agencies submitted their contract checklist, certificates of liability insurance, and letters of engagement from an auditing firm. I uploaded the documents to the Compliance Dashboard for each agency. Late submissions will usually result in delayed payments to agencies.

Records and Data Retention:

Master files are being set up for the new contract year beginning July 1. Paper files are kept on contracts, funding applications, audits, board minutes, site visit reports, program/financial reports, and any

correspondence being sent or received. Generally, we keep 10 years of paper files in the master file room.

Other:

- Prepared meeting materials for CCMHB/CCDDB regular meetings, special meetings, and study sessions/presentations.
- Composed minutes from the CCDDB/CCMHB meetings.
- Participated in meetings and study sessions for the CCDDB/CCMHB.

July 2023 Staff Report- Shandra Summerville Cultural and Linguistic Competence Coordinator

Agency Cultural and Linguistic Competence (CLC) Technical Assistance, Monitoring, Support and Training for CCMHB/DDB Funded Agencies

Agency Support and Technical Assistance:

Uniting Pride Center- June 14 Board and Staff Training

Reminder about HRA(Human Relations Advocacy Groups) Training Guidelines

- 5 trainings in FY23 for DDB/CCMHB Funded Organizations.
- Preferred day of the week is on Thursdays at 10am or 3pm
- You must Schedule your training at least one week before the training dates.

Please contact Hannah Sheets at hannah@communitychoicesinc.org to schedule your presentation.

PY 23- 4th Quarter Reports – CLC 4th Quarter Reports are due on August 25, 2023

CLC Coordinator Direct Service Activities

Mental Health First Aid-

June 15, 2023- I attended the Instructor Mental Health First Aid Collaborative. This is the 3 year anniversary of MHFA Being Offered Virtually.

July 18, 2023- Youth Mental Health First Aid Course Blende/Virtual Course For Registration
Please Email shandra@ccmhb.org

July 18, 2023- Youth Mental Health First Aid Virtual

<https://docs.google.com/forms/d/e/1FAIpQLSd3fh4F2R6h-5CfGlvU5n5hBZY0fJ-aniZ2mdnACJD7LEEcg/viewform>

[July 25, Youth Mental Health First Aid](#) In Person

https://docs.google.com/forms/d/e/1FAIpQLSeLVmbq8Z6vAdetWM_a4ga6dS31c0LoU90SqK-FyIRyYXE33Q/viewform?usp=sharing

Anti-Stigma Activities/Community Collaborations and Partnerships

Disability Resource Expo Committee- I will continue to serve on the Volunteer Coordination Committee. The next committee meeting will be held in July 31, 2023.

Campus Community Compact

July 2023 Staff Report- Shandra Summerville

Cultural and Linguistic Competence Coordinator

I attended the meeting for Campus Community Compact on June 21, 2023. The description below talks about the focus areas to implement the future work in our community.

“Accessible Technology

Establish and fund sufficient community resources to ensure that all residents (regardless of race, ethnicity, neighborhood location, economic status, or other identities) have effective access to and use of internet technologies. Will provide access to computing devices, digital literacy training, and dependable, affordable internet connectivity.

Community Relations

Envision a future in which the university and community strive to be mutually interactive – where the university is a welcoming place that shares expertise and resources, and in which the community and university forge a vibrant partnership to combat racism and systemic inequities.

Economic Development

Commit to more equitable economic growth in our community through the deliberate identification of historical barriers to economic growth in underserved communities, providing cultural and equitable access to all resources, empowering those directly impacted to create real economic change, and the commitment to creating a pathway to ongoing inclusion.

Health, Wellness & Resilience

Assure physical, mental, and emotional health and wellness for all communities and all community members who face immense threats from structural inequities that disadvantage communities of color and other communities disproportionately affected by exposure to violence, trauma, adverse life experiences, and adverse community environments.

Inclusive Education

Create a community in Champaign County that welcomes increasingly diverse cohorts of students who represent a wide array of cultures and ethnicities; a community that invests in and offers an accessible and engaging array of learning and individual growth opportunities.

Workforce Development

Champaign area residents understand what it takes to thrive in the workforce and have a clear understanding of the career pathways available to them at various stages of their careers and the resources they can take advantage of as they navigate these pathways.”

**July 2023 Staff Report- Shandra Summerville
Cultural and Linguistic Competence Coordinator**

Short Reading List to continue the conversation about Racism and Trauma as a decision maker.

July Is Bebe Moore Campbell National Minority Mental Health Awareness Month, Also Known as BIPOC Mental Health Month

The theme of Mental Health America's 2023 BIPOC Mental Health campaign is Culture, Community, & Connection.

Mental Health America's 2023 BIPOC Mental Health Toolkit provides free, practical resources, including information about how an individual's environment impacts their mental health, suggestions for making changes to improve and maintain mental well-being, and how to seek help for mental health challenges.

<https://mhanational.org/bipoc/mental-health-month>

FUND DEPT 2108-050 : DEVLPMNTL DISABILITY FUND - DEVLMTNL DISABILITY BOARD

REPORTING FOR YEAR: 2023 FROM PERIOD: 06 THROUGH PERIOD: 06



	ACTUAL 2022 JUN - JUN	ACTUAL 2023 JUN - JUN	2023 ANNUAL BUDGET
REVENUES			
4001 PROPERTY TAX			
01 PROPERTY TAXES - CURRENT	1,248,263.80	1,088,881.42	4,857,487.00
03 PROPERTY TAXES - BACK TAX	0.00	0.00	2,000.00
04 PAYMENT IN LIEU OF TAXES	1,209.97	2,396.21	4,000.00
4001 PROPERTY TAX TOTAL	1,249,473.77	1,091,277.63	4,863,487.00
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	511.65	0.00	2,000.00
4008 INVESTMENT EARNINGS TOTAL	511.65	0.00	2,000.00
4009 MISCELLANEOUS REVENUES			
02 OTHER MISCELLANEOUS REVENUE	0.00	0.00	5,000.00
4009 MISCELLANEOUS REVENUES TOTAL	0.00	0.00	5,000.00
TOTAL REVENUES	1,249,985.42	1,091,277.63	4,870,487.00
EXPENDITURES			
5020 SERVICES			
01 PROFESSIONAL SERVICES	32,952.00	33,926.00	407,118.00
25 CONTRIBUTIONS & GRANTS	77,844.00	253,561.00	4,417,369.00
5020 SERVICES TOTAL	110,796.00	287,487.00	4,824,487.00
TOTAL EXPENDITURES	110,796.00	287,487.00	4,824,487.00
OTHER FINANCING SOURCES (USES)			
6001 OTHER FINANCING SOURCES			
01 TRANSFERS IN	0.00	0.00	4,000.00
6001 OTHER FINANCING SOURCES TOTAL	0.00	0.00	4,000.00
7001 OTHER FINANCING USES			
01 TRANSFERS OUT	0.00	0.00	-50,000.00
7001 OTHER FINANCING USES TOTAL	0.00	0.00	-50,000.00

FUND DEPT 2108-050 : DEVLPMNTL DISABILITY FUND - DEVLMNTL DISABILITY BOARD

REPORTING FOR YEAR: 2023 FROM PERIOD: 06 THROUGH PERIOD: 06



	ACTUAL 2022 JUN - JUN	ACTUAL 2023 JUN - JUN	2023 ANNUAL BUDGET
TOTAL OTHER FINANCING SOURCES (USES)	0.00	0.00	-46,000.00
NET CHANGE IN FUND BALANCE	-1,139,189.42	-803,790.63	0.00



FUND DEPT 2101-054 : I/DD SPECIAL INITIATIVES - CILA PROJECT
REPORTING FOR YEAR: 2023 FROM PERIOD: 06 THROUGH PERIOD: 06

	<u>ACTUAL</u> 2022 JUN - JUN	<u>ACTUAL</u> 2023 JUN - JUN	<u>2023</u> ANNUAL BUDGET
REVENUES			
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	459.52	0.00	1,000.00
4008 INVESTMENT EARNINGS TOTAL	459.52	0.00	1,000.00
4009 MISCELLANEOUS REVENUES			
02 OTHER MISCELLANEOUS REVENUE	0.00	0.00	0.00
4009 MISCELLANEOUS REVENUES TOTAL	0.00	0.00	0.00
TOTAL REVENUES	459.52	0.00	1,000.00
EXPENDITURES			
5010 COMMODITIES			
17 EQUIPMENT LESS THAN \$5000	0.00	0.00	5,063.00
5010 COMMODITIES TOTAL	0.00	0.00	5,063.00
5020 SERVICES			
01 PROFESSIONAL SERVICES	0.00	0.00	4,000.00
07 INSURANCE (NON-PAYROLL)	0.00	0.00	0.00
12 REPAIRS AND MAINTENANCE	0.00	0.00	0.00
19 ADVERTISING, LEGAL NOTICES	0.00	0.00	200.00
25 CONTRIBUTIONS & GRANTS	0.00	0.00	341,737.00
5020 SERVICES TOTAL	0.00	0.00	345,937.00
TOTAL EXPENDITURES	0.00	0.00	351,000.00
OTHER FINANCING SOURCES (USES)			
6001 OTHER FINANCING SOURCES			
01 TRANSFERS IN	0.00	0.00	50,000.00
6001 OTHER FINANCING SOURCES TOTAL	0.00	0.00	50,000.00
TOTAL OTHER FINANCING SOURCES (USES)	0.00	0.00	50,000.00



FUND DEPT 2101-054 : I/DD SPECIAL INITIATIVES - CILA PROJECT
REPORTING FOR YEAR: 2023 FROM PERIOD: 06 THROUGH PERIOD: 06

	ACTUAL 2022 JUN - JUN	ACTUAL 2023 JUN - JUN	2023 ANNUAL BUDGET
NET CHANGE IN FUND BALANCE	-459.52	0.00	300,000.00

FUND DEPT 2090-053 : MENTAL HEALTH - MENTAL HEALTH BOARD

REPORTING FOR YEAR: 2023 FROM PERIOD: 06 THROUGH PERIOD: 06



	ACTUAL 2022 JUN - JUN	ACTUAL 2023 JUN - JUN	2023 ANNUAL BUDGET
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REVENUES

4001 PROPERTY TAX

01 PROPERTY TAXES - CURRENT	1,519,745.45	1,324,967.19	5,913,892.00
03 PROPERTY TAXES - BACK TAX	0.00	0.00	1,000.00
04 PAYMENT IN LIEU OF TAXES	1,473.55	2,915.74	2,000.00

4001 PROPERTY TAX TOTAL	1,521,219.00	1,327,882.93	5,916,892.00
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4004 INTERGOVERNMENTAL REVENUE

76 OTHER INTERGOVERNMENTAL	0.00	33,926.00	407,118.00
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4004 INTERGOVERNMENTAL REVENUE TOTAL	0.00	33,926.00	407,118.00
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4008 INVESTMENT EARNINGS

01 INVESTMENT INTEREST	935.60	0.00	3,000.00
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4008 INVESTMENT EARNINGS TOTAL	935.60	0.00	3,000.00
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4009 MISCELLANEOUS REVENUES

01 GIFTS AND DONATIONS	0.00	0.00	3,000.00
02 OTHER MISCELLANEOUS REVENUE	65,904.00	0.00	39,000.00

4009 MISCELLANEOUS REVENUES TOTAL	65,904.00	0.00	42,000.00
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TOTAL REVENUES	1,588,058.60	1,361,808.93	6,369,010.00
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EXPENDITURES

5001 SALARIES AND WAGES

02 APPOINTED OFFICIAL SALARY	8,210.20	12,346.17	107,000.00
03 REGULAR FULL-TIME EMPLOYEES	26,215.60	42,485.10	368,198.00
05 TEMPORARY STAFF	0.00	0.00	2,500.00
08 OVERTIME	0.00	0.00	2,612.00

5001 SALARIES AND WAGES TOTAL	34,425.80	54,831.27	480,310.00
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5003 FRINGE BENEFITS

01 SOCIAL SECURITY-EMPLOYER	2,496.80	2,665.72	36,353.00
02 IMRF - EMPLOYER COST	1,716.76	919.94	12,546.00
04 WORKERS' COMPENSATION INSURANC	172.14	160.84	2,376.00
05 UNEMPLOYMENT INSURANCE	0.00	0.00	1,656.00

FUND DEPT 2090-053 : MENTAL HEALTH - MENTAL HEALTH BOARD

REPORTING FOR YEAR: 2023 FROM PERIOD: 06 THROUGH PERIOD: 06



	ACTUAL 2022 JUN - JUN	ACTUAL 2023 JUN - JUN	2023 ANNUAL BUDGET
06 EE HLTH/LIF (HLTH ONLY FY23)	31.14	4,658.90	73,440.00
5003 FRINGE BENEFITS TOTAL	4,416.84	8,405.40	126,371.00
5010 COMMODITIES			
01 STATIONERY AND PRINTING	0.00	0.00	1,000.00
02 OFFICE SUPPLIES	605.94	67.16	4,200.00
03 BOOKS, PERIODICALS, AND MANUAL	0.00	0.00	300.00
04 POSTAGE, UPS, FEDEX	0.00	0.00	2,000.00
05 FOOD NON-TRAVEL	0.00	73.45	1,150.00
13 DIETARY NON-FOOD SUPPLIES	0.00	0.00	200.00
17 EQUIPMENT LESS THAN \$5000	0.00	0.00	7,000.00
21 EMPLOYEE DEVELOP/RECOGNITION	0.00	0.00	285.00
5010 COMMODITIES TOTAL	605.94	140.61	16,135.00
5020 SERVICES			
01 PROFESSIONAL SERVICES	3,421.50	37,612.25	155,133.00
02 OUTSIDE SERVICES	4,672.61	519.75	24,611.28
03 TRAVEL COSTS	19.77	378.78	11,500.00
04 CONFERENCES AND TRAINING	60.00	150.00	10,000.00
05 TRAINING PROGRAMS	0.00	0.00	20,729.86
07 INSURANCE (non-payroll)	-30.00	0.00	18,000.00
11 UTILITIES	54.42	0.00	0.00
12 REPAIRS AND MAINTENANCE	0.00	0.00	600.00
13 RENT	2,023.38	2,124.55	31,564.74
14 FINANCE CHARGES AND BANK FEES	0.00	0.00	30.00
19 ADVERTISING, LEGAL NOTICES	0.00	0.00	500.00
21 DUES, LICENSE & MEMBERSHIP	69.99	1,170.00	20,000.00
22 OPERATIONAL SERVICES	3,291.80	299.80	77,230.00
24 PUBLIC RELATIONS	0.00	25.00	20,000.00
25 CONTRIBUTIONS & GRANTS	481,554.00	420,101.00	5,318,936.40
45 ATTORNEY/LEGAL SERVICES	0.00	475.00	2,000.00
46 EQUIP LEASE/EQUIP RENT	0.00	199.06	2,388.72
47 SOFTWARE LICENSE & SAAS	0.00	0.00	13,500.00
48 PHONE/INTERNET	0.00	201.74	2,470.00
5020 SERVICES TOTAL	495,137.47	463,256.93	5,729,194.00
TOTAL EXPENDITURES	534,586.05	526,634.21	6,352,010.00



FUND DEPT 2090-053 : MENTAL HEALTH - MENTAL HEALTH BOARD

REPORTING FOR YEAR: 2023 FROM PERIOD: 06 THROUGH PERIOD: 06

	<u>ACTUAL</u> 2022 JUN - JUN	<u>ACTUAL</u> 2023 JUN - JUN	<u>2023</u> ANNUAL BUDGET
OTHER FINANCING SOURCES (USES)			
6001 OTHER FINANCING SOURCES			
01 TRANSFERS IN	0.00	0.00	0.00
6001 OTHER FINANCING SOURCES TOTAL	0.00	0.00	0.00
7001 OTHER FINANCING USES			
01 TRANSFERS OUT	0.00	0.00	-17,000.00
7001 OTHER FINANCING USES TOTAL	0.00	0.00	-17,000.00
TOTAL OTHER FINANCING SOURCES (USES)	0.00	0.00	-17,000.00
NET CHANGE IN FUND BALANCE	-1,053,472.55	-835,174.72	0.00



FUND DEPT 2108-050 : DEVLPMNTL DISABILITY FUND - DEVLMTNL DISABILITY BOARD

COMBINED REPORTING FOR YEAR: 2023 FROM PERIOD: 01 THROUGH PERIOD: 06

	ACTUAL 2022 JAN - JUN	ACTUAL 2023 JAN - JUN	2023 ANNUAL BUDGET
REVENUES			
4001 PROPERTY TAX			
01 PROPERTY TAXES - CURRENT	1,248,263.80	1,088,881.42	4,857,487.00
03 PROPERTY TAXES - BACK TAX	0.00	0.00	2,000.00
04 PAYMENT IN LIEU OF TAXES	1,209.97	2,396.21	4,000.00
4001 PROPERTY TAX TOTAL	1,249,473.77	1,091,277.63	4,863,487.00
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	1,790.62	21,727.72	2,000.00
4008 INVESTMENT EARNINGS TOTAL	1,790.62	21,727.72	2,000.00
4009 MISCELLANEOUS REVENUES			
02 OTHER MISCELLANEOUS REVENUE	0.00	0.00	5,000.00
4009 MISCELLANEOUS REVENUES TOTAL	0.00	0.00	5,000.00
TOTAL REVENUES	1,251,264.39	1,113,005.35	4,870,487.00
EXPENDITURES			
5020 SERVICES			
01 PROFESSIONAL SERVICES	230,664.00	203,556.00	407,118.00
25 CONTRIBUTIONS & GRANTS	1,817,143.00	1,930,908.00	4,417,369.00
5020 SERVICES TOTAL	2,047,807.00	2,134,464.00	4,824,487.00
TOTAL EXPENDITURES	2,047,807.00	2,134,464.00	4,824,487.00
OTHER FINANCING SOURCES (USES)			
6001 OTHER FINANCING SOURCES			
01 TRANSFERS IN	0.00	0.00	4,000.00
6001 OTHER FINANCING SOURCES TOTAL	0.00	0.00	4,000.00
7001 OTHER FINANCING USES			
01 TRANSFERS OUT	-50,000.00	-50,000.00	-50,000.00
7001 OTHER FINANCING USES TOTAL	-50,000.00	-50,000.00	-50,000.00



FUND DEPT 2108-050 : DEVLPMNTL DISABILITY FUND - DEVL MNTL DISABILITY BOARD
COMBINED REPORTING FOR YEAR: 2023 FROM PERIOD: 01 THROUGH PERIOD: 06

	<u>ACTUAL</u> 2022 JAN - JUN	<u>ACTUAL</u> 2023 JAN - JUN	<u>2023</u> ANNUAL BUDGET
TOTAL OTHER FINANCING SOURCES (USES)	-50,000.00	-50,000.00	-46,000.00
NET CHANGE IN FUND BALANCE	846,542.61	1,071,458.65	0.00

FUND DEPT 2101-054 : I/DD SPECIAL INITIATIVES - CILA PROJECT

COMBINED REPORTING FOR YEAR: 2023 FROM PERIOD: 01 THROUGH PERIOD: 06



	ACTUAL 2022 JAN - JUN	ACTUAL 2023 JAN - JUN	2023 ANNUAL BUDGET
REVENUES			
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	1,098.43	8,460.24	1,000.00
4008 INVESTMENT EARNINGS TOTAL	1,098.43	8,460.24	1,000.00
4009 MISCELLANEOUS REVENUES			
02 OTHER MISCELLANEOUS REVENUE	260,368.90	0.00	0.00
4009 MISCELLANEOUS REVENUES TOTAL	260,368.90	0.00	0.00
TOTAL REVENUES	261,467.33	8,460.24	1,000.00
EXPENDITURES			
5010 COMMODITIES			
17 EQUIPMENT LESS THAN \$5000	0.00	0.00	5,063.00
5010 COMMODITIES TOTAL	0.00	0.00	5,063.00
5020 SERVICES			
01 PROFESSIONAL SERVICES	600.00	0.00	4,000.00
07 INSURANCE (NON-PAYROLL)	316.33	0.00	0.00
12 REPAIRS AND MAINTENANCE	12,562.00	0.00	0.00
19 ADVERTISING, LEGAL NOTICES	0.00	0.00	200.00
25 CONTRIBUTIONS & GRANTS	0.00	0.00	341,737.00
5020 SERVICES TOTAL	13,478.33	0.00	345,937.00
TOTAL EXPENDITURES	13,478.33	0.00	351,000.00
OTHER FINANCING SOURCES (USES)			
6001 OTHER FINANCING SOURCES			
01 TRANSFERS IN	50,000.00	50,000.00	50,000.00
6001 OTHER FINANCING SOURCES TOTAL	50,000.00	50,000.00	50,000.00
TOTAL OTHER FINANCING SOURCES (USES)	50,000.00	50,000.00	50,000.00

FUND DEPT 2101-054 : I/DD SPECIAL INITIATIVES - CILA PROJECT

COMBINED REPORTING FOR YEAR: 2023 FROM PERIOD: 01 THROUGH PERIOD: 06



	<u>ACTUAL</u> 2022 JAN - JUN	<u>ACTUAL</u> 2023 JAN - JUN	<u>2023</u> ANNUAL BUDGET
NET CHANGE IN FUND BALANCE	-297,989.00	-58,460.24	300,000.00

FUND DEPT 2090-053 : MENTAL HEALTH - MENTAL HEALTH BOARD

COMBINED REPORTING FOR YEAR: 2023 FROM PERIOD: 01 THROUGH PERIOD: 06



	ACTUAL 2022 JAN - JUN	ACTUAL 2023 JAN - JUN	2023 ANNUAL BUDGET
REVENUES			
4001 PROPERTY TAX			
01 PROPERTY TAXES - CURRENT	1,519,745.45	1,324,967.19	5,913,892.00
03 PROPERTY TAXES - BACK TAX	0.00	0.00	1,000.00
04 PAYMENT IN LIEU OF TAXES	1,473.55	2,915.74	2,000.00
4001 PROPERTY TAX TOTAL	1,521,219.00	1,327,882.93	5,916,892.00
4004 INTERGOVERNMENTAL REVENUE			
76 OTHER INTERGOVERNMENTAL	98,856.00	203,556.00	407,118.00
4004 INTERGOVERNMENTAL REVENUE TOTAL	98,856.00	203,556.00	407,118.00
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	3,285.83	27,337.75	3,000.00
4008 INVESTMENT EARNINGS TOTAL	3,285.83	27,337.75	3,000.00
4009 MISCELLANEOUS REVENUES			
01 GIFTS AND DONATIONS	0.00	450.00	3,000.00
02 OTHER MISCELLANEOUS REVENUE	104,675.00	9,856.00	39,000.00
4009 MISCELLANEOUS REVENUES TOTAL	104,675.00	10,306.00	42,000.00
TOTAL REVENUES	1,728,035.83	1,569,082.68	6,369,010.00
EXPENDITURES			
5001 SALARIES AND WAGES			
02 APPOINTED OFFICIAL SALARY	49,201.45	51,447.50	107,000.00
03 REGULAR FULL-TIME EMPLOYEES	150,739.70	177,021.27	368,198.00
05 TEMPORARY STAFF	0.00	0.00	2,500.00
08 OVERTIME	0.00	0.00	2,612.00
5001 SALARIES AND WAGES TOTAL	199,941.15	228,468.77	480,310.00
5003 FRINGE BENEFITS			
01 SOCIAL SECURITY-EMPLOYER	14,477.61	15,457.28	36,353.00
02 IMRF - EMPLOYER COST	9,954.55	5,334.29	12,546.00
04 WORKERS' COMPENSATION INSURANC	859.41	764.73	2,376.00
05 UNEMPLOYMENT INSURANCE	1,494.89	1,655.53	1,656.00

FUND DEPT 2090-053 : MENTAL HEALTH - MENTAL HEALTH BOARD

COMBINED REPORTING FOR YEAR: 2023 FROM PERIOD: 01 THROUGH PERIOD: 06



	ACTUAL 2022 JAN - JUN	ACTUAL 2023 JAN - JUN	2023 ANNUAL BUDGET
06 EE HLTH/LIF (HLTH ONLY FY23)	21,956.89	27,953.40	73,440.00
5003 FRINGE BENEFITS TOTAL	48,743.35	51,165.23	126,371.00
5010 COMMODITIES			
01 STATIONERY AND PRINTING	0.00	176.46	1,000.00
02 OFFICE SUPPLIES	1,108.85	1,927.16	4,200.00
03 BOOKS, PERIODICALS, AND MANUAL	0.00	0.00	300.00
04 POSTAGE, UPS, FEDEX	366.77	473.85	2,000.00
05 FOOD NON-TRAVEL	0.00	478.00	1,150.00
13 DIETARY NON-FOOD SUPPLIES	0.00	91.86	200.00
17 EQUIPMENT LESS THAN \$5000	6,802.00	608.54	7,000.00
21 EMPLOYEE DEVELOP/RECOGNITION	0.00	0.00	285.00
5010 COMMODITIES TOTAL	8,277.62	3,755.87	16,135.00
5020 SERVICES			
01 PROFESSIONAL SERVICES	70,654.11	71,758.00	155,133.00
02 OUTSIDE SERVICES	22,093.70	3,321.00	24,611.28
03 TRAVEL COSTS	340.16	5,544.85	11,500.00
04 CONFERENCES AND TRAINING	60.00	810.00	10,000.00
05 TRAINING PROGRAMS	0.00	1,950.00	20,729.86
07 INSURANCE (non-payroll)	7,813.67	9,618.00	18,000.00
11 UTILITIES	327.22	0.00	0.00
12 REPAIRS AND MAINTENANCE	0.00	0.00	600.00
13 RENT	13,874.61	14,483.79	31,564.74
14 FINANCE CHARGES AND BANK FEES	0.00	0.00	30.00
19 ADVERTISING, LEGAL NOTICES	0.00	44.00	500.00
21 DUES, LICENSE & MEMBERSHIP	9,719.99	9,239.99	20,000.00
22 OPERATIONAL SERVICES	11,408.28	2,448.19	77,230.00
24 PUBLIC RELATIONS	16,370.00	16,525.00	20,000.00
25 CONTRIBUTIONS & GRANTS	3,051,288.00	2,503,480.00	5,318,936.40
45 ATTORNEY/LEGAL SERVICES	0.00	1,450.00	2,000.00
46 EQUIP LEASE/EQUIP RENT	0.00	995.30	2,388.72
47 SOFTWARE LICENSE & SAAS	0.00	9,243.67	13,500.00
48 PHONE/INTERNET	0.00	1,211.73	2,470.00
5020 SERVICES TOTAL	3,203,949.74	2,652,123.52	5,729,194.00
TOTAL EXPENDITURES	3,460,911.86	2,935,513.39	6,352,010.00

FUND DEPT 2090-053 : MENTAL HEALTH - MENTAL HEALTH BOARD

COMBINED REPORTING FOR YEAR: 2023 FROM PERIOD: 01 THROUGH PERIOD: 06



	ACTUAL 2022 JAN - JUN	ACTUAL 2023 JAN - JUN	2023 ANNUAL BUDGET
OTHER FINANCING SOURCES (USES)			
6001 OTHER FINANCING SOURCES			
01 TRANSFERS IN	32,952.00	0.00	0.00
6001 OTHER FINANCING SOURCES TOTAL	32,952.00	0.00	0.00
7001 OTHER FINANCING USES			
01 TRANSFERS OUT	0.00	0.00	-17,000.00
7001 OTHER FINANCING USES TOTAL	0.00	0.00	-17,000.00
TOTAL OTHER FINANCING SOURCES (USES)	32,952.00	0.00	-17,000.00
NET CHANGE IN FUND BALANCE	1,699,924.03	1,366,430.71	0.00



The McKechnie Family LIFE Home

Living in Interactive Future Environments

The McKechnie Family LIFE Home is a cutting-edge research center focused on innovations in home environments. This facility mimics existing home dwellings (i.e., a typical home of today) as well as provides space for the development of next-generation smart homes (i.e., house of tomorrow) that would allow people of all ages and abilities to live fuller, healthier, and autonomous lives. Spaces include a two-bedroom home; an attached garage; multi-purpose research and collaboration rooms; outdoor areas; and capacity for community engagement. Research and development efforts focus on a range of topics related to in-home activities to improve quality of life and independence for people of all ages and abilities.

Vision

We envision a world where we are Living in Interactive Future Environments (LIFE) and technology supports our quality of life at home.

Mission

The mission of the McKechnie Family LIFE Home is to provide the infrastructure to support interdisciplinary research, industry collaborations, community partnerships, and educational opportunities that will advance the science, engineering, and translation of innovations to support independent living, healthcare needs, social interaction, and everyday activities in the home.

2. Executive Summary

The Family Resiliency Center at the University of Illinois Urbana-Champaign (UIUC) has extensive experience in empowerment and participatory evaluation, the principles of which undergird the proposed capacity building strategies and activities. The focus of this proposal is to build the evaluation capacity of agencies providing mental health or substance use disorders or intellectual/developmental disabilities services to Champaign County residents (hereafter referred to as *Agencies*) and funded by either the Champaign County Mental Health Board or the Champaign County Developmental Disabilities Board (hereafter referred to as *Boards*).

A. Evaluation Approaches

In this context, *participatory evaluation* means that although this proposal outlines a comprehensive approach to agency capacity building and technical assistance, FRC will draw from and integrate the Boards' and Agencies' experiences and knowledge into the proposed activities to optimize relevance and utility. FRC will work in partnership with the Boards and Agencies to co-refine the evaluation plan to meet existing and emerging needs of the overall project while remaining within the project scope.

With respect to *empowerment evaluation*, the purpose and goal of the proposed activities is to empower Boards and Agencies to build capacity to implement and utilize *sustainable* evaluation practices and for them to become continuous learning organization(s). FRC will employ an empowerment evaluation approach to ensure an evaluation plan is developed – with useful and manageable measurement instruments for ongoing data collection and analysis – that will allow agencies to continue to evaluate their performance in supporting integrated, comprehensive mental health, substance use, and developmental services aimed at improving the “health and well-being of residents who live with behavioral health issues or developmental disabilities” (RFP, p. 17). This includes selection of assessments at process, short-term outcome, and long-term impact levels to demonstrate immediate, intermediate, and long-term progress toward goals and objectives. This proposal expands and builds on the success of the prior work done by the University of Illinois Urbana-Champaign (UIUC) Department of Psychology research team.

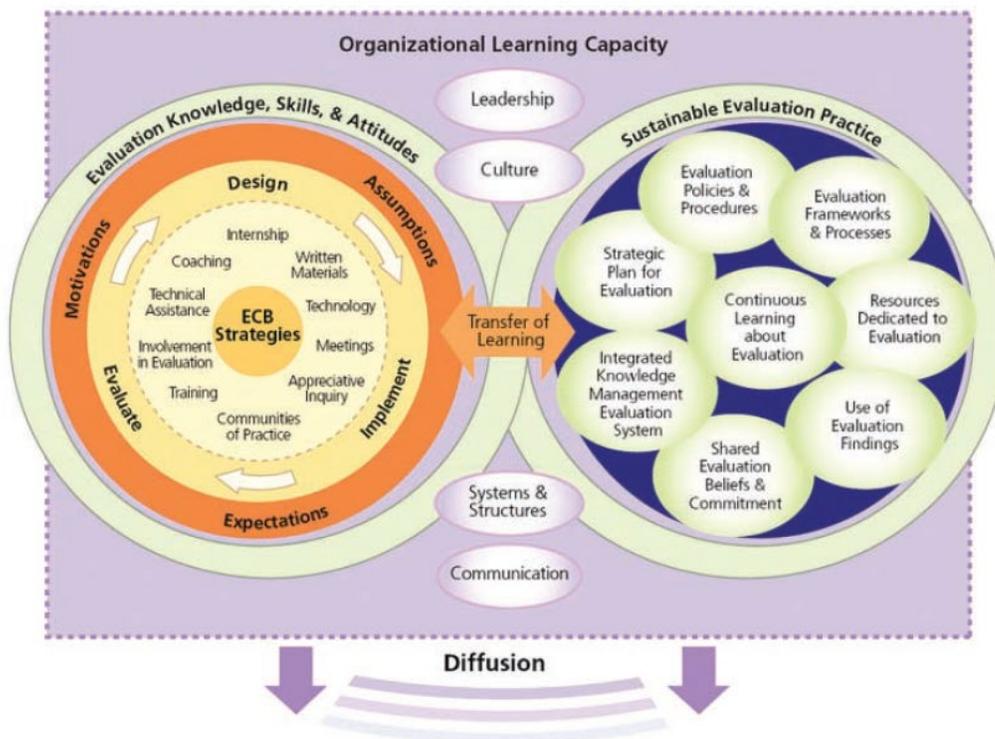
The proposed activities are grounded in the Theory of Change and informed by Preskill Boyles' (2008) model of evaluation capacity building (see **Figure 1**). The model addresses factors that influence evaluation capacity such as individual and collective knowledge, skills, and attitudes towards evaluation. In additionally, other factors influencing evaluation capacity - including organization systems and structures, communication, leadership, and organizational culture (Grack Nelson et al., 2019)¹ – are captured by this model. It is also important to consider how the COVID-19 pandemic altered agencies' operations and evaluation capacity both in the short- and long-term. One critical factor was the impact on staffing in both vacancy rates and turnover. The proposed activities and resources prioritize sustainability to maximize the likelihood that practices, resources, and systems will be maintained despite turnover and other

¹ Grack Nelson, A., Goeke, M., Auster, R., Peterman, K., & Lussenhop, A. (2019). Shared measures for evaluating common outcomes of informal STEM education experiences. *New Directions for Evaluation*, 2019(161), 59-86.

sources of instability (e.g., funding changes; resource reallocation).

The result of the strategies and activities outlined below will ensure that Agencies and Boards will be able to make data-informed improvements in their programs; understand, implement, and evaluate the most effective service approaches to meet client needs; and inform future funding priorities and policies that drive them. The ultimate goal of the proposed work is that through *sustainable and scalable evaluation capacity building* provided by the Family Resiliency Center at UIUC, the Boards' and Agencies' efforts and outcomes align with the benefits that their clients seek, in turn improving health and well-being of Champaign County residents experiencing behavioral health concerns or developmental disabilities.

Figure 1
A Multidisciplinary Model of Evaluation Capacity Building (ECB)



Note: Figure adopted from Preskill, H., & Boyle, S. (2008). A multidisciplinary model of evaluation capacity building. *American journal of evaluation*, 29(4), 443-459.

B. Basic Aims

Our **basic aims** are:

1. Use empowerment evaluation principles (10 outlined in Figure 2 and described below) to promote Board and Agency identified changes and actions in the areas of leadership, culture, systems and structure, and communication.
2. Determine current evaluation capacity resources and needs of Boards and Agencies via readiness and needs assessments.

3. Increase the overall organizational evaluation capacity of Boards and Agencies via trainings and technical assistance.
4. Develop train-the-trainer cross-agency mentoring program to facilitate knowledge and skills transfer and sustainability.
5. Increase capacity for Boards and Agencies to understand, utilize, communicate, and disseminate evaluation results and program impacts to multiple relevant audiences including funders, clients, and the public.

Empowerment evaluation's 10 principles guide evaluators and community members to frame decisions in terms of capacity building and self-determination.² The principles include improvement, community ownership, inclusion, democratic participation, social justice, community knowledge, evidence-based strategies, capacity building, organizational learning, and accountability. Unlike traditional external evaluation models, empowerment evaluators emphasize building community members' internal capacity to integrate evaluation into all their processes.

Empowerment evaluators provide individuals and organizations with the knowledge, skills, and resources to evaluate their own strategies and outcomes (see Figure 2). The Getting to Outcomes (GTO)³ process for applying empowerment evaluation to substance abuse prevention consists of the following 10 steps framed as questions:

1. What are the needs and resources? (Needs assessment; resource assessment)
2. What are the goals, target population and desired outcomes? (Goal setting)
3. How does the intervention incorporate knowledge of science and best practices in this area? (Evidence-based practices)
4. How does the intervention fit with existing programs? (Collaboration; cultural competence)
5. What capacities are needed to implement a quality program? (Capacity building)
6. How will this intervention be carried out? (Planning)
7. How will the quality of implementation be assessed? (Process evaluation)
8. How well will the intervention work? (Planning for outcome and impact evaluation)
9. How will quality improvement strategies be incorporated? (Continuous quality improvement)
10. If the intervention is (or components are) successful, how will the intervention be sustained? (Sustainability and institutionalization)

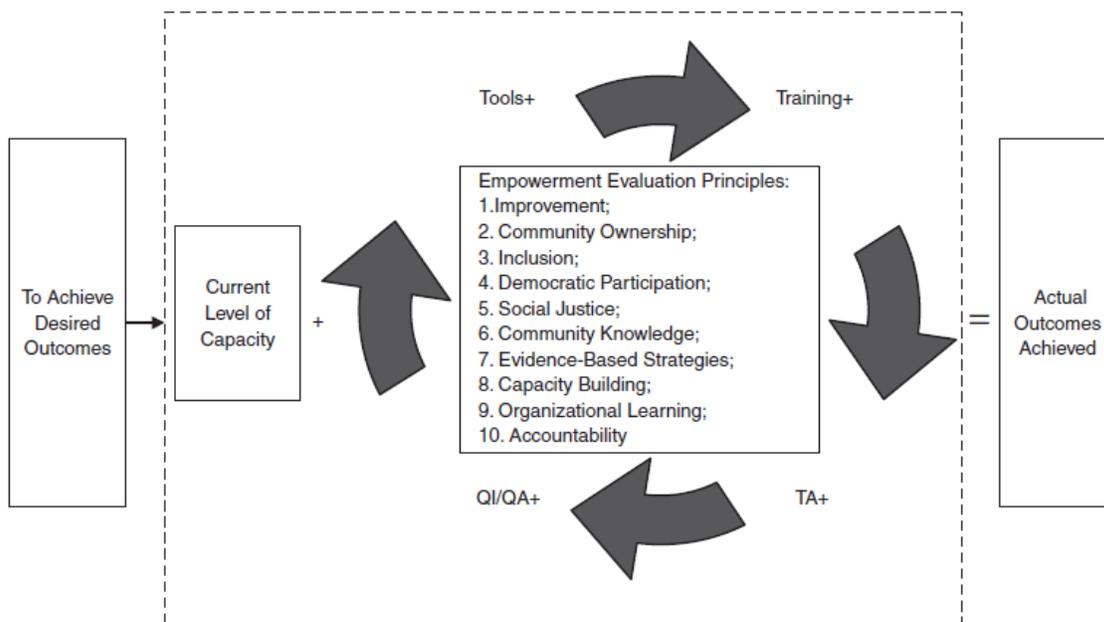
Tools, training, technical assistance (TA), and continuous quality improvement or assessment (QI/QA) are key strategies for Getting to Outcomes, consistent with the goals and objectives outlined in the RFP and aligned with the proposed activities. We propose to assess needs, resources (including administrative rules and policies), and readiness; establish goals and recommend processes for achieving those goals; and plan for engagement of agencies in ongoing evaluation of implementation, outcomes, continuous improvement, and sustainability. Through active technical assistance and constructive feedback, the evaluation team will help establish a

² Fetterman, D.M. & Wandersman, A., eds. (2005). *Empowerment Evaluation Principles in Practice*. New York: Guilford.

³ Wandersman, A., Imm, P., Chinman, M. & Kaftarian, S. (1999). *Getting to Outcomes: Methods and tools for planning, evaluation and accountability*. Rockville, MD: Center for Substance Abuse Prevention.

community of reflective practitioners operating within a culture of evidence and cycles of reflection and action⁴ and will help ensure agency evaluations are organized, rigorous and honest.

Figure 2
An Empowerment Evaluation Theoretical Model



Note: Figure adopted from Fetterman, D., & Wandersman, A. (2007). Empowerment evaluation: Yesterday, today, and tomorrow. *American Journal of Evaluation*, 28(2), 179-198.

C. Proposed Activities – Evaluation Plan

We will *accomplish the five basic aims through the following proposed activities:*

1. **Readiness and Needs Assessments.** Conduct a modified readiness⁵ and needs assessment⁶ among Boards and Agencies. This will consist of a combination of interviews and surveys. The anticipated timeline is six months.
 - a. *Target areas for assessment of prior evaluation capacity building*
 - i. Uniform Performance Outcomes: What uniform performance outcomes were developed? How were they implemented and used? To what extent have Boards/Agencies found them helpful? What gaps remain?

⁴ Fetterman, D.M., Deitz, J. & Gesundheit, N. (2010). "Empowerment evaluation: a collaborative approach to evaluating and transforming a medical school curriculum". *Academic Medicine* 85 (5):813-820.

⁵ Oetting, E. R., Plested, B., Edwards, R. W., Thurman, P. J., Kelly, K. J., Beauvais, F., & Stanley, L. (2014). *Community readiness for community change: Tri-Ethnic Center community readiness handbook*. Edited by Stanley L, 2nd edn: Colorado State University.

⁶ Altschuld, J. W., & Kumar, D. D. (2010). *Needs assessment: An overview* (Vol. 1). Sage.

- ii. Learning Transfer: To what extent have Agencies shared what they have learned? To what extent has there been cross-agency support and learning transfer? What are the areas for improvement?
- iii. Consultation/Tool Resources: What resources exist and to what extent do agencies know about these resources? How has the evaluation consultation bank used? How have Agencies used the existing resources? What additional resources are needed?
- iv. Resources available to agencies by the Boards and other entities: How have they been used (or not)? How helpful are they? What modifications may be needed to improve utility? To what extent have Agencies developed into a continuous learning organization?
- v. Agencies who received past one-on-one evaluation support:
 - 1. Assess past targeted evaluation support: availability, dosage, and other relevant implementation indicators.⁷
 - 2. Theory of Change, logic models, and evaluation plans: Familiarity and comfort in constructing each.
 - 3. Leadership, communication, & empowerment evaluation: How aware of agencies of best practices of all three? Have agencies used these to inform agency operations and practices? What would be most useful in future one-on-one and group evaluation capacity building efforts?

b. *Current knowledge and skills in evaluation*

- i. Patterns of existing knowledge and skills: Mapping varying levels of evaluation knowledge and skills levels within and across agencies. Where do pockets of expertise exist among agencies?
- ii. Patterns of knowledge and skills growth areas. Mapping what gaps currently exist and identified needs.

2. **On-demand Micro-trainings**. Create a resource bank of on-demand micro-trainings that all Board and Agency personnel can access. These will be recorded with the assistance of Center for Innovation in Teaching and Learning CITL at UIUC. Trainings will be offered initially in person with a virtual option. They will then be archived so that they can be accessed at any time. On-demand recordings will range in length from 15 minutes to 1 hour, depending on topic area. We anticipate 2-4 trainings recorded per year.

Example training topics are below (Note: final choices will be informed by the results of the readiness and needs assessments and made in consultation with Boards):

- a. *Evaluation Capacity Knowledge*:
 - i. Strengths and weaknesses of different evaluation approaches and data-collection methods
 - ii. Basics of formative and summative evaluation
 - iii. Developing and using program logic models

⁷ Durlak, J. A., & DuPre, E. P. (2008). Implementation matters: A review of research on the influence of implementation on program outcomes and the factors affecting implementation. *American journal of community psychology*, 41(3), 327-350.

- iv. Developing an evaluation plan
 - v. Tools for data collection and storage
 - vi. Ethical evaluation practices
 - b. *Evaluation Capacity Skills:*
 - i. Managing evaluation process
 - ii. Choosing appropriate data-collection methods and instruments (e.g., survey development)
 - iii. Basic data analysis (qualitative and quantitative data)
 - iv. How to interpret evaluation results
 - c. Leadership
 - i. Team science best practices
 - ii. Participatory research principles
 - iii. How to conduct efficient meetings
 - d. Culture
 - i. How to promote timely and bidirectional communication with teams
 - ii. Culturally appropriate and responsive evaluation approaches and methods
 - e. Systems and Structures
 - i. How to conduct a readiness assessment to identify current and future system and infrastructure needs to attain goals and meet deliverables.
 - ii. How to seek funding opportunities and develop proposals for future evaluation activities
 - iii. Creating realistic evaluation budgets
 - iv. Automating reporting (pre-programmed instruments or templates with automated reports)
 - f. Communication
 - i. How to communicate and report evaluation findings (e.g., data visualization)
 - ii. Best practices in dissemination
- 3. Automated Processes and Efficiencies.** Identify opportunities within existing systems to create efficiencies through automated processes. Help Boards design and develop user-friendly, automated systems (e.g., dashboards to monitor progress in real time, templates for inputting data and generate reports with figures and tables necessitating minimal reformatting; programming outcome indicator instruments into online platforms that agencies can access and that will calculate results and create reports).
- 4. Intensive Technical Assistance (TA).** After the readiness and needs assessment, Agencies will apply for intensive TA each year. Up to three agencies will be chosen, in consultation with the Boards, for one-on-one TA experiences. The first set of applications will be accepted near the end of the readiness and needs assessment so that these data can be utilized for target agency selection in the first year. Depending on patterns of agency needs, intensive workshops on commonly reported knowledge and skills development areas may be offered (1-2 per year) and depending on Board approval, will be made available to other agencies with needs identified in the readiness and needs assessments (with an appropriate capacity cap).

5. **Train-the-Trainer (TTT).** Develop a cross-agency mentoring approach to enhance the transfer of learning and leverage sustainable evaluation practices.

D. Deliverables

1. Annual reports to the board to include
 - a. Report of readiness and needs assessment findings
 - b. Recommendations for automated processes, efficiencies, dissemination tools
 - c. Implementation metrics of agency intensive technical assistance and cross-agency mentoring program
2. Micro-training repository (asynchronous learning)
3. In-person workshops/ trainings
4. Intensive technical assistance with up to three target agencies, annually
5. Measures bank (programmed into an online platform, if preferred and feasible)
6. Cross-agency mentoring program



BRIEFING MEMORANDUM

Date: July 19, 2023
To: Members, Champaign County Mental Health Board (CCMHB) & Champaign County Developmental Disabilities Board (CCDDB)
From: Lynn Canfield, Executive Director
Subject: I/DD Special Initiatives Fund PY24 Update and PY25 Planning

Statutory Authority:

The Community Care for Persons with Developmental Disabilities Act (50 ILCS 835/ Sections 0.05 to 14) is the basis for CCDDB funding policies. The Illinois Community Mental Health Act (405 ILCS 20/ Section 0.1 et. seq.) is the basis for CCMHB funding policies. All funds shall be allocated within the intent of the controlling acts, per the laws of the State of Illinois. CCDDB and CCMHB Funding Requirements and Guidelines require annual review of decision support criteria and allocation priorities. Upon approval, this memorandum becomes an addendum to Funding Guidelines.

Purpose:

The purpose of this memorandum is to provide an update on current allocations and set the stage for allocation decision support criteria and funding priorities for the Program Year 2025 for the I/DD Special Initiatives Fund, authority for which is shared by the Champaign County Developmental Disabilities Board (CCDDB) and Champaign County Mental Health Board (CCMHB). Funding priorities and decision support criteria are a framework for how contracts with service providers further the mission and goals of the Boards. Staff recommendations are based on Board and stakeholder input and our understanding of best practices and state/federal service and payment systems. This initial draft is presented to both Boards for feedback and will be distributed to providers, family members, advocates, and stakeholders for comments, which will then be incorporated into a final draft.

Now renamed I/DD Special Initiatives Fund, the CILA Facilities Project Fund was initiated in 2014 as a collaboration of the CCDDB and the CCMHB on behalf of

Champaign County residents who had I/DD and complex support needs and had been unable to secure residential services in or near their home community. By 2020, difficulties securing and maintaining a qualified workforce were insurmountable, and the Boards made the difficult decision to sell the homes and reinvest in meaningful supports for this population.

As a shared project of the Boards, uses of the fund require approval by both, and the Boards have final decision authority. Because the original purpose was to create capacity for 24-hour support to people whose needs were not met by providers within the County, and because these barriers persist, the fund will support approaches that focus on eligible people with unmet service needs and on solutions to the underlying causes of gaps and barriers to appropriate services. The Boards have the authority to waive specific agency requirements or standard provisions of the contracts typical of those developed through the traditional annual allocation cycle. In addition to selection of service contracts through this process, the Boards may design Requests for Proposals to address a specific need.

Overview and Timeline:

During 2023, the Boards made available \$341,737 of the shared “I/DD Special Initiatives” project for contracts for services to begin July 1. The actual amount awarded was \$286,000, half of which will be spent during 2023, with the other half paid out January 1 through June 30, 2024. This leaves \$198,737 of the planned 2023 amount unallocated and available for other special projects or simply returned to fund balance. For 2024, the Boards have approved use of \$400,000 from fund balance to support PY25 allocations.

Through the traditional annual allocation process, the CCMHB has funded forty-one contracts for the Program Year 2024, three of which serve very young children with developmental delays or risk. All of the CCDDB’s sixteen PY24 contracts serve people who have intellectual/developmental disabilities, primarily youth and adults of all ages. The two contracts currently supported by the I/DD Special Initiatives fund, under its PY24 priorities for Strengthening the Workforce and Individualized Supports, were previously funded by the CCDDB and serve people of all ages.

The following timeline would support a competitive allocation process for I/DD Special Initiatives funding and parallels the timelines projected for CCDDB and CCMHB funding:

- A final version of these priorities and support criteria approved by both Boards during open, public meeting(s) prior to December 2023.
- Proper public notice of funding availability published **on or before December 1, 2023** (if priorities have been approved).
- From **December 22, 2023, 8:00 AM CST, to February 12, 2024, 4:30 PM CST**, the online system will be open for agencies to submit applications addressing one or more of the priority areas. Agencies not currently registered will demonstrate eligibility per the initial questionnaire and CCDDDB and CCMHB Funding Requirements and Guidelines. If a specific requirement is not likely to be met, the Boards might consider waiving that requirement under certain conditions to fund a well-aligned proposal.
- Board staff review of applications with summaries of proposals ready in **April** and recommendations to the Boards in **May**.
- Boards' allocation decisions during **May** or **June 2024** meetings.
- Contracts developed, issued, and signed prior to **June 21, 2024**. Contracts will have a term of July 1, 2024 through June 30, 2025, with the option of a shorter or longer term (up to two years) as requested or negotiated.

If the Boards design Requests for Proposal (RFP) for this fund, each will have its own timeline with additional meetings and activities specific to the project.

Operating Environment:

The most recent funding priorities documents, [CCDDDB PY24 Funding Priorities](http://www.co.champaign.il.us/mhbddb/PDFS/CCDDDB%20Funding%20Priorities%20for%20PY2024.pdf) (<http://www.co.champaign.il.us/mhbddb/PDFS/CCDDDB%20Funding%20Priorities%20for%20PY2024.pdf>) and [CCMHB PY24 Funding Priorities](http://www.co.champaign.il.us/mhbddb/PDFS/CCMHB%20Funding%20Priorities%20ofor%20PY2024.pdf) (<http://www.co.champaign.il.us/mhbddb/PDFS/CCMHB%20Funding%20Priorities%20ofor%20PY2024.pdf>) also contain notes on the larger context in which Champaign County's systems of supports operate.

[The 2021 Community Needs Assessment Report](https://www.co.champaign.il.us/mhbddb/PDFS/Full_2021_Community_Needs_Report_ENGLISH.pdf) (https://www.co.champaign.il.us/mhbddb/PDFS/Full_2021_Community_Needs_Report_ENGLISH.pdf) includes input from local advocates.

In previous board documents, we have written much about the dangerous **decline in service capacity** across the country and state and in our community. This crisis is not difficult to understand or easy to solve.

The Institute on Community Integration's 2022 report [“Community Supports in Crisis: No Staff, No Services”](https://ici.umn.edu/products/PERjPdfZQgGW_TqyOH_Utg) (https://ici.umn.edu/products/PERjPdfZQgGW_TqyOH_Utg)

description says, “All the progress toward community living that has been made in services for people with IDD over decades is now in jeopardy — because of catastrophic labor shortages and pervasive high turnover rates in the workforce that supports them, direct support professionals (DSPs).” National data from the report:

- 70% of DSPs are women, and approximately 70% of them heads of household;
- DSPs’ average age increased to 46;
- DSPs’ mean hourly wage is \$13.28 (contrast with home health aides \$13.49, nursing assistants \$15.41, and residential advisors \$16.07);
- the percentage of individuals with behavioral support needs who receive community services has more than doubled since 2012; and
- during 2020, 53% of agencies employed fewer DSPs, 41% served fewer people, 33% closed sites, and 47% stopped offering a support or service.

Illinois’ overreliance on institutional care and low investment in community-based alternatives is well-known and has taken a toll on residents. However, during 2023, the Illinois General Assembly and Governor took hopeful steps, including approval of increased wages for Direct Support Professionals, which could bolster service capacity. With a relatively higher number of eligible Champaign County residents still awaiting selection for state Medicaid waiver awards, and with many other service system improvements yet to be undertaken, we have a long way to go.

Telehealth and other **remote options** were rapidly introduced out of necessity early in the COVID-19 pandemic, allowing some people with I/DD to connect with services and social opportunities more easily than before, especially if they had access to the internet but not to transportation or if they preferred being at home. For some who would choose virtual participation over in-person, barriers to potential benefits have been lack of devices and programs, difficulty learning how to use or maximize them, and often poor internet service in rural areas, apartment complexes, and housing developments. The Champaign County Board, the Housing Authority of Champaign County, and the University of Illinois at Urbana-Champaign have supported efforts to improve access and use for all. Virtual supports may be most effective when combined with in-person, where there is still room for innovation in service type.

The Ohio Department of Developmental Disabilities (DODD) promotes the use of assistive technology and remote options as a partial solution to the workforce and transportation shortages. Ohio’s Technology First Initiative ensures that technology is considered as part of all individual service plans, prior to authorization of on-site direct support staff and with the goal of training on technology which can improve quality of life. The Living Arrangements for the Developmentally Disabled (LADD) Smart Homes project incorporates many innovations, including low cost widely

available consumer products. People with I/DD are also enjoying greater independence and control of their days with the lighter presence of non-resident professionals in their homes. See [the Ohio DODD website \(https://dodd.ohio.gov/about-us/resources/LADD_story \)](https://dodd.ohio.gov/about-us/resources/LADD_story) for more.

The American Network of Community Options and Resources (ANCOR) reports [“Addressing the Disability Services Workforce Crisis of the 21st Century](#) and [“Bringing Long-term Supports & Services into the 21st Century”](#) both emphasize the need for service providers to receive training on using technology to deliver services and support community integration, including self-advocates’ **supported decision making** in choosing and using technology to live more independent and overall quality lives.

Prior board documents also address the disproportionate negative impacts on people with disabilities, of COVID-19 itself and of **isolation**. All supports, whether in person or virtual, should uphold the principles of community and social inclusion and of consumer choice. The 2023 report [“Our Epidemic of Loneliness and Isolation: The U.S. Surgeon General’s Advisory on the Healing Effects of Social Connection and Community”](#) addresses the devastating impacts of increased isolation on all populations and identifies health outcomes as well as pillars to advance social connection and recommendations for stakeholders.

Underscoring the need for self-directed services, even during a time when professional service capacity is so low as to offer very little in the way of choice, The Council on Quality and Leadership released [“The Relationship Between Choice and Injuries of People With Intellectual and Developmental Disabilities” \(https://www.c-q-l.org/wp-content/uploads/2023/06/CQL-2023-Research-Choices-Injuries-Friedman.pdf\)](https://www.c-q-l.org/wp-content/uploads/2023/06/CQL-2023-Research-Choices-Injuries-Friedman.pdf). Decisions about safety have typically been made by paid and unpaid care providers rather than by people with I/DD, but it appears that injuries decrease with opportunities to make choices about their own care. “Our study found a decrease in injuries when people with IDD had more service-related choice outcomes present. Beyond the potential impact on injuries, ultimately, choice is about ensuring people with IDD are supported to live the lives of their choosing.”

I/DD Special Initiatives Fund Priorities:

The following priority categories are based on the PY2023 set, with light revisions for the Boards to consider for PY2024.

PRIORITY: Strengthening the Workforce.

An agency which employs DSPs and QIDPs could provide additional payments to them, for the purpose of retention over a specific period of time or as incentive for completing accredited training or certification programs beyond those required by the State for these employees.

Payments could be made through the employer to DSPs or QIDPs who work in Champaign County with people who have I/DD and complex support needs. With waiver of specific organizational eligibility requirements, this funding could be available to all organizations currently providing DSP or QIDP services to Champaign County residents. For example, an employer of DSPs or QIDPs serving residents might be eligible due to non-profit or governmental status and relevant licensure with IDHS but ineligible by having no business office in Champaign County or no board member who resides in Champaign County. An employer of DSPs or QIDPs might meet those requirements but be a for-profit company without a community advisory board. Waivers of each requirement would allow them each to offer incentive payments to DSPs, stabilizing the workforce which serves County residents who have qualifying I/DD.

Whether it employs DSPs or QIDPs or neither, an agency could offer relevant high-quality trainings to such professionals or could engage with existing accredited training or certification programs beyond those required by the State of Illinois.

The contract might cover costs associated with the development and staging of training opportunities or securing and staging these through an accredited source such as the College of Direct Support or the National Association of Direct Support Professionals. The audience for these trainings and certifications could be any staff who work with Champaign County residents who have I/DD and complex support needs. If a contract is reimbursement-based, with fees for each training-related activity identified, and if the organization proposing such a program is a small support network in good standing as a result of the previous year independent CPA report, the requirement for an audit or review or compilation could be waived.

PRIORITY: Individual Supports to Underserved People.

Fully eligible organizations could purchase specific assistance or specialized treatment for people who have I/DD and complex support needs, especially those unable to secure services locally.

An agency knowledgeable of IDHS-DDD rules could identify eligible persons who are not receiving services through state or county funding and could work with these individuals and their families on preferences and needs, identifying and purchasing **short-term supports and specific assistance** not available to them through other means. The structure of the 2019 CCDDDB mini-grant process offers a starting point, namely an individual application form, per person cost limits, and follow up survey. *These sample documents are on pages 49 to 56 of the board packet available here - https://www.co.champaign.il.us/mhbddb/agendas/ddb/2022/220720_Meeting/220720_Agneda.pdf - or upon request from CCDDDB/CCMHB staff.* Purchases could include devices and software needed for virtual access. A contract to fund such a project could be grant or reimbursement-based. In either case, the contracted organization would document eligibility and need and make purchases on behalf of individuals. Waiver of a current requirement would not be necessary.

Of interest are virtual access trainings for people with I/DD and the staff or natural supporters who assist them. An I/DD agency could offer high-quality trainings on how to use devices and programs for virtual access and use.

The contract might cover the costs associated with the development and staging of training opportunities or securing and staging these through a qualified trainer. The audience for these trainings would be Champaign County residents who have I/DD and any staff, family, or other natural supporters who assist these qualifying residents with virtual access and use. If the contract is reimbursement-based, with fees for each activity identified, a small support network in good standing as a result of the previous year independent CPA report could have the requirement for audit or review or compilation waived.

PRIORITY: Community Education and Advocacy.

An I/DD agency may host community awareness events and anti-stigma efforts to help ensure a more inclusive community, which can reduce people's reliance on formal services.

Small family support networks, whether currently registered or not, which are in good standing due to the previous year independent CPA report, are especially well-suited to carry out these valuable community-wide activities which indirectly benefit underserved eligible individuals and their families.

Contracts could be fee for service/purchase of service-based to reimburse these organizations for the costs of community awareness and educational events or similar, whenever the focus is on I/DD. An annual limit of \$15,000 per support network is suggested. If the applicant has a prior year report from an independent CPA firm showing good standing and capacity to engage in this way, the audit/review/compilation requirement could be waived.

PRIORITY: Housing Supports.

Fund creative options for Champaign County residents with I/DD and complex service needs, to secure or maintain appropriate living arrangements.

A fully-eligible I/DD organization might offer one-time assistance or short-term service to qualifying persons who do not have appropriate housing but could live independently as a result of ongoing supports matching their needs and preferences. A contract could be grant or reimbursement-based. No waiver of requirement is necessary.

Overarching Considerations:

Eliminating Disparities in Access and Care

Proposals for funding should describe how the program will promote access for historically underinvested populations as identified in the “2001 Surgeon General’s Report on Mental Health: Culture, Race, and Ethnicity.” Members of these groups, people living in rural areas, and those with limited English language proficiency should have access to supports and services; engagement strategies should be identified which overcome barriers related to stigma and infrastructure. An application includes the organization’s Cultural and Linguistic Competence Plan (CLCP). The online system includes a CLCP template consistent with requirements of Illinois Department of Human Services and using National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS Standards.) Technical assistance is also available through CCDDDB-CCMHB staff.

Promoting Inclusion and Reducing Stigma

Applications should promote the fullest possible community integration, including in digital spaces. A sense of belonging and purpose can improve well-being, and people are safer when they have routine contacts with other people, whether co-workers, neighbors, members of a faith community, acquaintances at fitness or recreation centers, or social clubs/networks. Positive community involvement helps build empathy, redefine our sense of group identity, reduce stress, and decrease stigma. Stigma limits participation, inhibits economic self-sufficiency, increases individual

vulnerability, and may even be a driver of declining State and Federal support for community-based services. Stigma harms communities and individuals, especially those who have been excluded due to sexuality, gender, race, ethnicity, disability, immigrant/refugee/asylee status, or preferred or first language. The CCDDDB and CCMHB have an interest in building resilience, community awareness, and inclusion, as well as directly challenging negative attitudes and discriminatory practices. Fullest inclusion aligns with standards established by Home and Community Based Services, Workforce Innovation and Opportunity, and the Americans with Disabilities Act.

Outcomes

Applications should identify measures of access for eligible people and of the outcomes expected to result from this participation, along with targets, timeframes, and measurement tools for each. Simple outcomes are appropriate. Programs may ask if people's lives are better as a result of the service. Outcomes reflect what people want and demonstrate a program's successes.

Coordinated System

Toward a more inclusive, efficient, and effective local system, applications should include evidence of collaboration and should acknowledge other resources and how they are linked. The CCDDDB and CCMHB value partnership and collaboration, not only to avoid overserving and overspending but also to reach our least connected residents. Of interest are: combined efforts of providers and schools, support groups, hospitals, advocates, etc.; a commitment to updating information in any resource directories and databases; participation in trainings, workshops, or council meetings with providers of similar services; and partnerships which go further to make sure that all who have a need are reached and that those needs are met. Written working agreements should include details of coordinated services, referral relationships, and other partnerships. Proposals for funding should acknowledge these relationships.

A joint application may be submitted by two or more agencies proposing supports consistent with their shared mission. This could include shared infrastructure, such as office space, data systems, professional services, to achieve organizations' common goals and improve administrative functions, such as bookkeeping and reporting. Another area appropriate for collaboration would be a joint application proposing strategies to stabilize the direct support workforce. An application might also propose to coordinate internet 'access and use' efforts with other local broadband access and use projects, to increase the efficiency and effectiveness of all.

Budget and Program Connectedness

Applications include a Budget Narrative which should explain the relationship between anticipated costs and program components, clarifying the relevance of all expenses, direct and indirect. Per Funding Guidelines, calculation and rationale should be explicit as to the relationship between each expense and the value of the program. Programs offering services billable to Medicaid or other insurance should identify non-billable activities for which the costs may be charged to the CCDDDB/CCMHB. While these funds should not pay for services or supports billable to another payor, the Board has an interest in programs taking advantage of multiple resources, to secure long-term sustainability and to ensure that CCDDDB and CCMHB funding does not supplant other public funding.

Person Centered Planning

Every person who participates in a program should have the opportunity to direct their service plan. **The Person-Centered Planning process** seeks a balance between what is important TO a person and what is important FOR a person. An individual's plan should be responsive to their preferences, clinical and support needs, cultural values, and desired outcomes, helping them recognize and leverage their own strengths and abilities. CCDDDB/CCMHB funding should be associated with people rather than programs. In a self-determined, integrated system:

- *people control their day*, what they do and where, and with whom they interact;
- *people build connections* to their community as they choose, for work, play, learning, and more, in the same places and times used by other community members;
- *people create and use networks of support* of friends, family, community members with similar interests, and allies/associates they choose; and
- *people advocate for themselves*, make informed choices, control their own service plans, and pursue their own aims.

Applications should describe how the proposed activities relate to what people have indicated that they want and need. Program activities are reported regularly, along with data on individuals served.

Added Value and Uniqueness

Applications should identify unique approaches, staff qualifications, and funding mix.

- Approach/Methods/Innovation: cite the recommended, promising, evidence-based, or evidence-informed practice and address fidelity to the model under which services are to be delivered. In the absence of such an approach to meet the community need, describe the innovative approach, including method of evaluation.

- Staff Credentials: highlight credentials and specialized training.
- Resource Leveraging: describe all approaches which amplify CCDDDB and CCMHB resources: state, federal, or local funding; volunteer or student support; community collaborations. If CCDDDB/CCMHB funds are to be used to meet a match requirement, reference the funder requiring match and identify the match amount in the application Budget Narrative.

Expectations for Minimal Responsiveness:

Applications that do not meet these expectations are “non-responsive” and will not be considered for funding. All agencies must be registered using the online system, at <http://ccmhddbrds.org>. All required application forms must be completed and submitted by the deadline. Accessible documents and technical assistance, limited to navigation of these online tools, are available upon request through the CCDDDB/CCMHB staff.

1. Applicant is an eligible organization, demonstrated by responses to the Organization Eligibility Questionnaire, completed during initial registration.
2. All required application forms must be submitted by the deadline. *Late or incomplete applications will not be accepted.*
3. Proposed services or supports relate to I/DD. **How will they improve the quality of life for persons with I/DD?**
4. Application must include evidence that other funding sources are not available to support this program or have been maximized. Other potential sources of support should be identified and explored. The Payer of Last Resort principle is described in Funding Requirements and Guidelines (each board.)
5. Application must demonstrate coordination with providers of similar or related services. Interagency agreements should be referenced. Evidence of interagency referral process is preferred, as this expands the service system’s reach, respects client choice, and reduces risk of overservice to a few.
6. Application must describe continuation of services during a public health emergency. Programs should build on successes with technology and virtual platforms, increasing training and access for direct staff and people served.
7. An applicant should be prepared to demonstrate their capacity for financial clarity, especially if they have answered ‘no’ to any question in the Organization Eligibility Questionnaire or do not have a recent independent audit (or financial report or compilation) report without findings of concern.

Process Considerations:

Priority areas and overarching considerations will be used as discriminating factors which influence final allocation decision recommendations. The CCDDDB and CCMHB use an online system for agencies applying for funding. An agency must complete the one-time registration process, including an organizational eligibility questionnaire, before receiving access to online application forms.

Criteria described in this memorandum are intended as guidance for the Boards in assessing applications for funding. They are not the sole considerations in final funding decisions. Other considerations include the judgment of the Boards and staff, evidence of the provider's ability to implement the services proposed, the soundness of the proposed methodology, and the administrative and fiscal capacity of the agency. An applicant may learn more about the Boards' goals, objectives, operating principles, and public policy positions from review of downloadable documents available on the public page of the online application and reporting system, at <https://ccmhddbrds.org>.

Final decisions rest with the CCDDDB and CCMHB and their judgment concerning the most appropriate and effective use of the fund, based on assessment of community needs and alignment with decision support criteria. The nature and scope of applications may vary widely and may include treatment and early intervention models. A numerical rating/selection methodology is not relevant or feasible. Our focus is on what constitutes a best value to the community, in the service of those who have I/DD, and is therefore based on a combination of cost and non-cost factors, reflecting an integrated assessment of the relative merits of applications using criteria and priorities approved by the CCDDDB and CCMHB. If applications are not sufficiently responsive to the criteria and priorities described in this memorandum, the CCDDDB and CCMHB may choose to set aside funding to support RFPs with prescriptive specifications to address these priorities.

Caveats and Application Process Requirements:

- Submission of an application does not commit the CCDDDB/CCMHB to award a contract or to pay any costs incurred in the application preparation or to pay for any other costs incurred prior to the execution of a formal contract.
- During the application period and pending staff availability, technical assistance will be limited to process questions concerning the use of the online registration and application system, application forms, budget forms, application instructions, and CCDDDB/CCMHB Funding Guidelines. Support is also available for CLC planning.
- Applications with excessive information beyond the scope of the application format will not be reviewed and may be disqualified from consideration.

- Letters of support are not considered in the allocation and selection process. Written working agreements with other agencies providing similar services should be referenced in the application and available for review upon request.
- The CCDDDB and CCMHB retain the right to accept or reject any application, or to refrain from making an award, when such action is deemed to be in the best interest of the CCDDDB and CCMHB and residents of Champaign County.
- The CCDDDB and CCMHB reserve the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCDDDB and CCMHB deem such variances to be in the best interest of the CCDDDB and CCMHB and residents of Champaign County.
- Submitted applications become the property of the CCDDDB and CCMHB and, as such, are public documents that may be copied and made available upon request after allocation decisions have been made and contracts executed. Submitted materials will not be returned.
- The CCDDDB and CCMHB reserve the right, but are 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 an increased procurement.
- If selected for contract negotiation, an applicant may be required to prepare and submit additional information prior to final contract execution, to reach terms for the provision of services agreeable to both parties. Failure to submit required information may result in disallowance or cancellation of contract award.
- The execution of final contracts resultant of this application process is dependent upon the availability of adequate funds and the needs of the CCDDDB and CCMHB.
- The CCDDDB and CCMHB reserve 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.
- To be considered, proposals must be complete, received on time, and responsive to the application instructions. Late or incomplete applications will be rejected.
- If selected for funding, the contents of a successful application will be developed into a formal contract. Failure of the applicant to accept these obligations can result in cancellation of the award for contract. The CCDDDB and CCMHB reserve the right to withdraw or reduce the amount of an award if the application has misrepresented the applicant's ability to perform.
- The CCDDDB and CCMHB reserve the right to negotiate the final terms of any or all contracts with the selected applicant, and any such terms negotiated as a

result of this process may be renegotiated and/or amended in order to meet the needs of Champaign County. The CCDDDB and CCMHB reserve the right to require the submission of any revision to the application which results from negotiations conducted.

- The CCDDDB and CCMHB reserve the right to contact any individual, agency, or employee listed in the application or to contact others who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.

Champaign County
Board for Care and Treatment of Persons with a Developmental Disability

dba CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD

BY-LAWS

Adopted by the CCDDDB 1/4/05. Amended 12/5/06 and 7/23/14 and 6/23/2021.

I. PURPOSE AND FUNCTIONS:

- A. The Champaign County Developmental Disabilities Board (CCDDDB) is established under the Illinois Community Care for Persons With Developmental Disabilities Act (IL Compiled Statutes, Chapter 50, Sections 835/0.01 to 835/14 inclusive) in order to “provide facilities or services for the benefit of its residents who are intellectually disabled or under a developmental disability and who are not eligible to participate in any such program conducted under Article 14 of the School Code, or may contract therefore with any privately or publicly operated entity which provides facilities or services either in or out of such county.”
- B. In order to accomplish these purposes, the CCDDDB performs the following functions:
 - 1. Planning for the intellectual and developmental disabilities services system to assure accomplishment of the CCDDDB goals.
 - 2. Allocation of local funds to assure the provision of a comprehensive system of community based intellectual and developmental disabilities services.
 - 3. Coordination of affiliated providers of services for individuals with intellectual and/or developmental disabilities to assure an inter-related accessible system of care.
 - 4. Evaluation of the system of care to assure that services are provided as planned and that services are effective in meeting the needs and values of the community.
- C. The CCDDDB shall perform those duties and responsibilities as specified in Sections 835/0.01 to 835/14 inclusive of The Community Care for Persons with Developmental Disabilities Act.
- D. Nothing in these By-laws alters the authorities and obligations codified in state or federal law.

II. MEMBERSHIP:

- A. The membership of the CCDDDB shall include the maximum allowed by statute.

- B. The members of the CCDDDB shall be appointed by the Chairperson of the Champaign County Board, with the advice and consent of the Champaign County Board. The CCDDDB shall recommend nominees for membership to the Chairperson of the Champaign County Board. *(Note: this language is per statute. For Champaign County, the Chairperson, and therefore the appointing officer, is the Champaign County Executive.)*
- C. Members of the CCDDDB shall be residents of Champaign County and, as nearly as possible, be representative of interested groups of the community concerned with developmental disabilities as well as the general public. To the extent possible, members of the CCDDDB shall represent the geographic areas of the County. Members may be representative of local health departments, medical societies, local comprehensive health planning agencies, hospital boards and lay associations. No member of the CCDDDB may be a full-time or part-time employee of the Illinois Department of Human Services - Division of Developmental Disabilities (DHS/DDD) or a Board member or employee of any facility or service operating under contract to the CCDDDB. The term of office for each member shall be three (3) years. All terms shall be measured from the first day of July within the calendar year of appointment. Vacancies shall be filled for an expired term in the same manner as original appointments.
- D. Any member of the CCDDDB may be removed by the appointing officer for absenteeism, neglect of duty, misconduct or malfeasance in office, after being given a written statement of the charges and an opportunity to be heard thereon.

III. MEETINGS:

- A. The CCDDDB shall meet at a minimum, annually in July. The CCDDDB may meet each month as necessary at such time and location as the CCDDDB shall designate. Per the Open Meetings Act (5 ILCS 120/1 et seq.), a change in the regular meeting dates is to be properly posted for the public a minimum of 10 days prior to the meeting.
- B. The CCDDDB may meet in Study Session during the intervals between monthly meetings to receive reports, discuss issues, and develop recommendations on matters brought to it by the Executive Director and the President.
- C. Special meetings may be called by the President or upon the written request by any member to conduct such business that cannot be delayed until a regular meeting date. The purpose of the meeting may be to address matters brought by the Executive Director or any member of the CCDDDB.
- D. The Executive Director shall prepare an agenda for all meetings of the CCDDDB and shall cause the notice of the meeting and the agenda to be sent to all members at

least five (5) days in advance of the meeting - except in the case of special/emergency meetings wherein forty-eight (48) hours notice shall suffice.

- E. Public notices and the conduct of all meetings shall be in conformance with the Illinois Open Meetings Act. Notice/agenda for each meeting shall be posted on the Champaign County website and in the physical location of the meeting and shall be continuously available for public review during the 48-hour period preceding the meeting.
- F. The presence of a majority of members shall constitute a quorum for any meeting of the CCDDDB. For a member to attend a meeting by other means than physical presence (e.g. by video or audio conference), a majority of members must be physically present at the properly-noticed meeting, and a majority of physically present members must agree to allow the electronic attendance. Such attendance may only be due to: personal illness or disability; employment purposes or CCDDDB business; or a family or other emergency. A member wishing to attend a meeting by other means must notify the Board before the meeting unless advance notice is impractical. Provisions for a quorum of members to attend the meeting by other means, due to a declared disaster, are set forth in the Illinois Open Meetings Act. These By-laws affirm the Developmental Disabilities Board's intent to exercise flexibilities as the law allows.

IV. OFFICERS:

- A. The officers of the CCDDDB shall be a President and a Secretary.
- B. Election of the officers shall take place at the July meeting of the CCDDDB.
- C. Officers shall be elected for one year, with term beginning upon election and ending no later than August 1 of the following year. No member shall hold the same office for more than three (3) consecutive years, except that officers may remain in their then current positions until their successors can be chosen.
- D. Duties of Officers:
 - 1. President:

Subject to the control and direction of the CCDDDB, the President shall maintain a current general overview of the affairs and business of the CCDDDB. The President shall have the privilege of voting in all actions by the CCDDDB.
 - 2. Secretary:

The Secretary shall act in place of the President in the latter's absence. The Secretary shall attest to the accuracy of the minutes of the CCDDDB meetings.

3. The President, Secretary, or a member as designated by the President shall have the authority to sign all legal documents approved by the CCDDDB.
4. The President may make, with the advice and consent of the CCDDDB, temporary appointments of interested citizens to assist the Board in fulfilling designated responsibilities or to perform certain functions or tasks.

V. STAFF:

The CCDDDB shall engage the services of an Executive Director who, subject to the control and direction of the Board, shall have general charge, oversight, and directions of the affairs and business of the CCDDDB and shall be its responsible managing head. The Executive Director shall have the responsibility for the employment and discharge of staff pursuant to the provisions of applicable personnel policies. The Executive Director shall have the authority to sign on behalf of the CCDDDB all necessary papers pursuant to CCDDDB action and shall have the authority with the endorsement of the President to make contracts and expenditures within the approved program and budget. The Executive Director or delegate shall attend all meetings of CCDDDB. The Executive Director shall also be liaison between the CCDDDB, staff, and affiliated agencies and implement policies regarding communications between them.

VI. FISCAL AND GRANT YEARS:

- A. The fiscal year of the CCDDDB shall be the same as that of the County of Champaign, i.e., January 1 through December 31.
- B. CCDDDB contracts for Intellectual and Developmental Disability programs and facilities shall be for the same fiscal year as the State of Illinois, i.e., July 1 through June 30.

VII. RULES OF ORDER:

Roberts' Rules of Order shall be followed in deliberations of the Board unless otherwise precluded by these By-laws.

VIII. CHANGE OF BY-LAWS:

Any or all of these By-laws may be altered, amended or repealed by a majority vote of the Board at any regular or special meeting, provided that written notice of the proposed action is given in the call to the meeting and that a quorum is present.

Current Priority Areas Across Champaign and Vermilion Counties From July, 2023:

Active Living	Biking, Walking, Running, Active Living for People with Disabilities, Active Living for people with Chronic Illness, Accessibility
Healthy Eating	Nutrition Education, Access to Quality – Healthy Foods
Food Environment	Food Security, Food Eco System, Local Food Production, Food Storage, Food Transportation
Maternal and Child Health	Child Nutrition, Breast Feeding, Maintaining Delivery Departments,
Health and Aging	Congregate Meal Sites, Providing Nursing Homes to seniors, Memory Care,
Substance Use	Counseling, Overdoses Prevention and Response, Narcan Education, Harm Reduction, Recovery Oriented System(s) of Care (ROSC), Preventing Youth Substance use
Mental Health and Wellness	Suicide Prevention, Paraprofessionals, Worker Burnout, Building Support Networks, Concept Mapping, Difficulties Navigating Medicaid and insurance, Health Centers at Schools,
Violence Prevention / Trauma Resilience	Blueprint to end gun violence, Domestic Violence Prevention, Trauma-Informed Systems of Care, Build Community between Communities, Mentorship, Police – Community Relations, Inter Race Relations
Income / Poverty	Homelessness, Home Ownership, Family Shelter, Low – Cost Housing, Tiered support for housing stability.
Obesity	Separated out from Active Living and Healthy Eating. Obesity outcomes can be modified by all priority areas including: Active Living, Healthy Eating, Food Environment, Maternal and Child Health, Health and Aging, Substance Use, Mental Health and Wellness, Violence Prevention / Trauma Resilience, and Income / Poverty.

Four MAPP Assessments to be completed for Community Health Plan:

Community Health Status

Community Themes and Strengths

Local Public Health System

Forces of Change Assessment

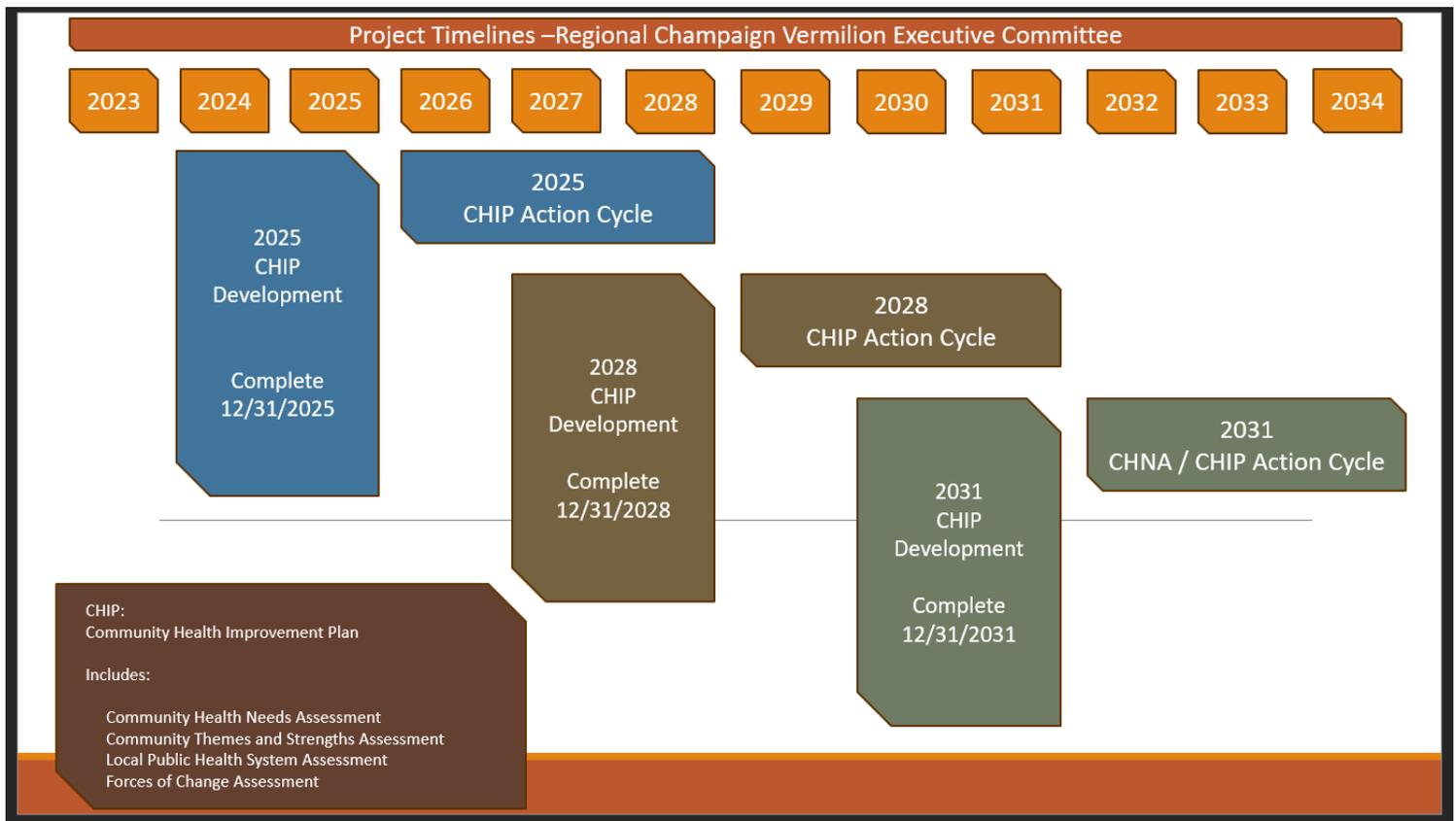
Partner Workgroups:

Vermilion County Mental Health Initiative	Champaign County Community Coalition
Violence Prevention Task Force Vermilion County	Healthy Champaign County
Vermilion County Income / Poverty Workgroup	Champaign County Behavioral Health Workgroup
Live Well Vermilion County	

2025 Community Health Plan Rough Timeline:

2024	January	Create Steering Committees for CC and VC
	February	Begin Community Health Status Assessment and Local Data Collection
	March	
	April	
	May	
	June	
	July	Community Health Status Assessment Complete
	August	
	September	Begin Local Public Health System Assessment
	October	
	November	
	December	Local Public health System Assessment Completed
2025	January	Begin Community Themes and Strengths Assessment
	February	
	March	Community Surveying
	April	Survey Results – 1 st Draft Complete - Community Review
	May	Contributor Reviews and Final Edits and Name Checks
	June	2025 Community Health Improvement Plan Finished
	July	Present Plan
	August	Begin 2025 Community Health Improvement Plan Action Cycle
	September	
	October	
	November	
	December	

Community health planning over the next decade:



Feedback and participation are encouraged!

Please contact JR Lill by phone (872 212-3413) or by Email jlill@c-uphd.org with any inquiries.