



Champaign County Mental Health Board

In fulfillment of our responsibilities under the Community Mental Health Act, the Champaign County Mental Health Board (CCMHB) presents the following documents for public review:

The CCMHB's Annual Report provides an accounting to the citizens of Champaign County of the CCMHB's activities and expenditures during the period of January 1, 2017 through December 31, 2017.

The CCMHB's Three-Year Plan for the period January 1, 2016 through December 31, 2018 presents the CCMHB's goals for development of Champaign County's system of community mental health, intellectual and developmental disabilities, and substance use disorder services and facilities, with One-Year Objectives for January 1, 2018 through December 31, 2018.

Any questions or comments regarding the CCMHB's activities or the county's behavioral health and developmental disability services can be directed to the Champaign County Mental Health Board; 1776 E. Washington; Urbana, IL 61802; phone (217) 367-5703, fax (217) 367-5741.

Champaign County Mental Health Board

Fiscal Year 2017 Annual Report & Three-Year Plan 2016-2018

Table of Contents

Board and Staff Listing	1
President's Report	2
Section I: Financial Reports and Service Data	3
Financial Report	4
Program Allocations	5
Service Totals	7
Service Demographics Charts	10
Funding Distribution Charts	11
Section II: Three-Year Plan 2016-2018	13
Three-Year Plan with FY18 Objectives	

LISTING OF 2017 BOARD MEMBERS AND STAFF

BOARD MEMBERS

Dr. Susan Fowler
(President)

Ms. Elaine Palencia
(Vice President)

Dr. Thom Moore

Ms. Judi O'Connor

Dr. Julian Rappaport

Dr. Anne Robin

Ms. Margaret White

Mr. Kyle Patterson

Mr. Joseph Omo-Osagie

STAFF

Lynn Canfield
Executive Director

Kim Bowdry
Associate Director for Intellectual and Developmental Disabilities

Mark J. Driscoll
Associate Director for Mental Health & Substance Use Disorder Services

Stephanie Howard-Gallo
Operations & Compliance Coordinator

Shandra Summerville
Cultural & Linguistic Competence Coordinator

Chris Wilson
Financial Manager

CCMHB President's Report

This past year has been a year of both stability and change for the Champaign County Mental Health Board and the Developmental Disabilities Board. Lynn Canfield continued as Executive Director and added to the staff to fill existing vacancies: Kim Bowdry, Associate Director for Intellectual and Developmental Disabilities and Chris Wilson, Financial Manager. The staff continue to be comprised of six talented and dedicated individuals who work on the county's behalf to ensure that services for mental health and developmental disabilities are available and increasing in innovation. They completed a new staff driven mission statement as part of an organizational assessment undertaken by the Board of Directors and concluded a thorough analysis and upgrading of all operations with the assistance of Dennis Smith and EMK Consulting. The members of the Board remain the same as in the prior year. Drs. Thom Moore and Susan Fowler were reappointed for a second four-year term (1/1/2018-12/31/21). Potential vacancies for 2019 will include two positions.

In contrast to 2017, we are entering the new year with a state budget and with a healthy county fund. The Board in FY2017 received \$4,415,651 as part of the county property tax levy and awarded \$3,822,645 to social service agencies for the period 7/1/2017-6/30/2018 and out of the professional fees line provided \$222,604 in other support to programs and community events. The award process this past year fully engaged board members, who each agreed to serve as a primary or secondary reviewer of 9-10 original applications, and to discuss those reports in study sessions and board meetings. This provided Board members and staff the opportunity to identify questions for agency response prior to voting on the allocations. Staff provided guidance to the board in terms of fiscal recommendations, and the Board provided input to staff on the merits of each application. The process proceeded smoothly and will be conducted again this year for the FY 19 allocations. While many ongoing programs continued to be funded, several new initiatives were provided with a first year or second year of funding. These included: Champaign County Regional Planning Commission's Justice System Diversion Services; Champaign Urbana Area Project's TRUCE and CU Neighborhood Champions; Don Moyer Boys and Girls Club's CU Change; DREAAM House; First Follower's Peer Mentoring for Reentry; Grow in Illinois's Peer Support; Prairie Center Health Systems' Fresh Start; and, United Cerebral Palsy-Land of Lincoln's Vocational Training and Support. Several of these agencies also provided midyear presentations to the board regarding the progress of their funded work.

I agreed to serve a second term as president of the CCMHB and Elaine Palencia agreed to continue as vice-president. We are pleased to present the Champaign County Mental Health Board 2018 Annual Report. The Annual Report includes information on the Boards finances, funding allocated to a wide range of programs, service data reported by funded programs for the term of the contract, and various charts presenting data on individuals served and funding allocations. The second section of the report includes the Three-Year Plan objectives for 2018.

To prepare for a new three-year plan (2019-21), the staff conducted an online and paper survey to assess the opinions of community members regarding the services provided by both the CCMHB and the CCDDB. It targeted recipients of services, family members of recipients, agency personnel and other community stakeholders. The survey ended on January 31, 2018 and the results will guide planning for the future. The board will engage in planning activities in the summer and early fall.

Respectfully,



Susan Fowler, PhD
CCMHB President, 2018

SECTION I: Financial Reports and Service Data

CHAMPAIGN COUNTY MENTAL HEALTH BOARD

ANNUAL FINANCIAL REPORT

1/1/17 - 12/31/17

	2016	2017
Beginning of the Year Fund Balance	\$2,335,528	\$ 2,527,902
REVENUE		
General Property Taxes	\$ 4,246,055	\$ 4,415,651
Back Taxes, Mobile Home Tax & Payment in Lieu of Taxes	9,360	9,698
Local Government Revenue		
Champ County Developmental Disabilities Board	377,695	287,697
Interest Earnings	3,493	18,473
Gifts and Donations	18,822	5,225
Miscellaneous	21,340	117,195
TOTAL REVENUE	<u>\$ 4,676,764</u>	<u>\$ 4,853,939</u>
EXPENDITURES		
Administration & Operating Expenses:		
Personnel	\$ 577,548	\$ 449,220
Commodities	7,998	6,263
Services	410,156	432,828
Interfund Transfers*	60,673	57,288
Capital Outlay	-	-
Sub-Total	<u>\$ 1,056,375</u>	<u>\$ 945,599</u>
Grants and Contributions:		
Program	3,428,015	3,593,538
Capital	-	-
Sub-Total	<u>\$ 3,428,015</u>	<u>\$ 3,593,538</u>
TOTAL EXPENDITURES	<u>\$ 4,484,390</u>	<u>\$ 4,539,137</u>
Fund Balance at the End of the Fiscal Year	<u>\$ 2,527,902</u>	<u>\$ 2,842,704</u>

*to CILA fund and to CCDDDB fund for share of revenue from Expo donations and miscellaneous

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
PROGRAM ALLOCATIONS -- FY2017
01/01/2017 - 12/31/17**

AGENCY/PROGRAM	TOTAL PAID
CHAMPAIGN COUNTY CHILDREN'S ADVOCACY CENTER	37,080.00
CHAMPAIGN COUNTY REGIONAL PLANNING COMMISSION	
Youth Assessment Center	51,170.00
Headstart - Social/Emotional Disabilities*	55,645.00
Justice Diversion (6 months)	31,374.00
Agency Total	138,189.00
CHAMPAIGN URBANA AREA PROJECT	
CU Neighborhood Champions	19,597.00
TRUCE	75,000.00
Agency Total	94,597.00
COMMUNITY CHOICES	
Self Determination*	83,002.00
Community Living (6 months)*	31,500.00
Customized Employment (6 months)*	35,002.00
Agency Total	149,504.00
COMMUNITY FOUNDATION	
DREAAM HOUSE (6 months)	28,998.00
COMMUNITY SERVICE CENTER OF NORTHERN CHAMPAIGN COUNTY	
Resource Connection	65,944.00
COURAGE CONNECTION	
Courage Connection	66,948.00
CRISIS NURSERY	
Beyond Blue - Rural	70,000.00
DEVELOPMENTAL SERVICES CENTER	
Individual & Family Support*	390,038.00
DON MOYER BOYS & GIRLS CLUB	
Community Coalition Summer Youth Programs	107,000.00
CU Change	100,000.00
Youth and Family Organization (6 months)	160,000.00
Agency Total	367,000.00
EAST CENTRAL ILLINOIS REFUGEE ASSISTANCE CENTER	
Family Support and Strengthening	22,000.00
FAMILY SERVICE	
Self Help Center	28,676.00
Family Counseling (6 months)	9,998.00
Counseling (6 months)	12,498.00
Senior Counseling and Advocacy	142,337.00
Agency Total	193,509.00
FIRST FOLLOWERS	
Peer Mentoring for Re-entry	44,596.00

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
PROGRAM ALLOCATIONS -- FY2017
01/01/2017 - 12/31/17**

AGENCY/PROGRAM	TOTAL PAID
GROW IN ILLINOIS	
Peer Support (6 months)	10,002.00
MAHOMET AREA YOUTH CLUB	
Members Matter	12,000.00
BLAST	15,000.00
Agency Total	27,000.00
PRAIRIE CENTER HEALTH SYSTEMS now ROSECRANCE	
Fresh Start	76,002.00
Parenting with Love and Limits - Extended Care	300,660.00
<i>Return Excess Revenue - PLL Extended Care</i>	<i>(8,898.00)</i>
Prevention	58,247.00
Specialty Courts	201,024.00
CJ Substance Abuse Treatment	10,450.00
Youth Services	37,500.00
Agency Total	674,985.00
PROMISE HEALTHCARE	
Mental Health Services	222,000.00
Wellness/Justice	58,000.00
Agency Total	280,000.00
RAPE ADVOCACY COUNSELING EDUCATION SERVICES	
Counseling	17,050.00
<i>Return Excess Revenue - Counseling</i>	<i>(92.25)</i>
Agency Total	16,957.75
ROSECRANCE	
Criminal Justice	283,122.00
Crisis, Access, Benefits & Engagement	241,718.00
Early Childhood (4 months)	25,000.00
Parenting with Love and Limits - Front End Services	263,652.00
TIMES Center (6 months)	35,002.00
Transitional Housing (6 months)	7,002.00
Agency Total	855,496.00
UNITED CEREBRAL PALSY LAND OF LINCOLN	
Vocational Training (6 months)	25,944.00
UP CENTER OF CHAMPAIGN COUNTY	
Children/Family/Youth Program	19,000.00
URBANA NEIGHBORHOOD CONNECTION	
Community Study Center	15,750.00
GRAND TOTAL	3,593,537.75

* Programs for people with ID/DD, per Intergovernmental Agreement with the Champaign County Developmental Disabilities Board

Service Totals – Brief Narrative of What the Service Categories Represent

The Champaign County Mental Health Board funds a wide range of services through local human service providers of varying size and sophistication. The CCMHB invests in services that range from helping mothers and families with newborn babies into early childhood to supporting youth through adolescence and young adulthood to assisting adults and families dealing with life's challenges to helping the elderly with activities of daily living. The not for profit and government agencies that provide services with CCMHB funds range from small agencies with only a few employees and volunteers to large multi-million dollar agencies with over a hundred employees. Descriptions of the service activities supported in current and previous years are available at <http://www.co.champaign.il.us/MHBDDDB/PublicDocuments.php> and <http://ccmhddbrds.org>.

Regardless of their size, agencies are required to report on services delivered using four categories. Those categories must be broad enough to provide a certain amount of flexibility to account for how and to whom the programs delivered services. The four categories are Community Service Event (CSE), Service Contact (SC), Non-Treatment Plan Client (NTPC), and Treatment Plan Client (TPC). Each agency is allowed to define within each category what will be reported. Definitions of CSEs and SCs relate to types of activities. Definitions of TPCs and NTPCs relate to who has been served and require a certain level of documentation associated with the service. Some programs may only report under one of the categories, others may report on all four. Which and how many categories an agency reports activity under depends on the services provided by the program.

Community Service Events (CSEs) can be public events, work associated with a news interview or newspaper article, consultations with community groups and caregivers, classroom presentations, and small group workshops and training to promote a program or educate the community. Meetings directly related to planning such events may also be counted here. Examples are the Family Service Self-Help Center planning and hosting of a self-help conference or newsletters published by the East Central Illinois Refugee Mutual Assistance Center.

A Service Contact (SC), also referred to as a screening contact or service encounter, represents the number of times a program has contact with consumers. Sometimes this can be someone who is being served by the program. Or it can be sharing of information, fielding a call about services, or doing an initial screenings or assessment. An example of a service contact would be the volume of calls answered by the Crisis Line at Rosecrance.

A Non-Treatment Plan Client (NTPC) is someone to whom services are provided and there is a record of the service but does not extend to a clinical level where a treatment plan is necessary or where one would be done but does not get completed. An example is a person who comes into the domestic violence shelter at Courage Connection but leaves within a few days before fully engaging in services.

A Treatment Plan Client (TPC) has traditionally meant people engaged in services where an assessment and treatment plan have been completed and case records are maintained. This applies to agencies such as Prairie Center, Promise Healthcare, and Rosecrance among others. It can also represent an individual receiving a higher level of care within the spectrum of services provided within a program.

Most contracts are funded as grants while a few are paid on a fee for service basis. Those operating on a fee for service basis have additional detail included in the table. Fee for service detail includes number and type of units of service the program delivered to clients.

SERVICE TOTALS FOR CONTRACT YEAR 2017 (7/1/16 - 6/30/17)

BY TYPE OF SERVICE UNIT

CSE = Community Service Event. Non-client specific service, e.g. public presentation, consultation advocacy for a target population, media event, workshop or community development activity.
SC = Service Contact/Screening Contact. Encounter to provide information, referral, assessment, crisis intervention or general service.
TPC = Treatment Plan Client. Client has a written assessment and service plan.
NTPC = Non-Treatment Plan Client. Brief service is provided without a written service plan.
FFS = Fee for Service. Pre-determined fee paid for defined unit of service.

CONTRACTED AGENCIES & PROGRAMS

	<u>CSEs</u>	<u>SCs</u>	<u>TPCs</u>	<u>NTPCs</u>	<u>FFS Unit</u>	<u>Type</u>
<u>Champaign County Children's Advocacy Ctr.</u>	15	187	291	28	----	----
<u>Champaign County Head Start/Early Head Start</u>						
Social Emotional Disabilities Services	26	824	73	72		
<u>Champaign County Regional Planning Commission Social Services</u>						
Youth Assessment Center	46	42	124	7		
<u>Community Choices</u>						
Customized Employment	4	1085	31			
Self-Determination Support	4	1900	----	183		
<u>Community Service Center of Northern CC</u>						
Resource Connection	----	6325	----	1464	----	----
<u>Courage Connection</u>						
Courage Connection	201	619	412	121	----	----
<u>Crisis Nursery</u>						
Beyond Blue	327	1275	33	100	----	----
<u>CU Area Project</u>						
CU Neighborhood Champions	26	162	6	4	----	----
TRUCE	54	44	----	13	----	----
<u>Developmental Services Center</u>						
Individual and Family Support	4	9	16	27	----	----
<u>Don Moyer Boys and Girls Club</u>						
CU Change	155	1408	62	68	----	----
Youth and Family Engagement Services	30	71	----	14	----	----
<u>East Central Illinois Refugee Assistance Center (ECIRMAC)</u>						
Family Support and Strengthening	97	----	----	----	----	----
<u>Family Service of Champaign County</u>						
Counseling	----	----	49	----	----	----
Self-Help Center	331	----	----	----	----	----
Senior Counseling and Advocacy	----	12908	389	1287	----	----
	<u>CSEs</u>	<u>SCs</u>	<u>TPCs</u>	<u>NTPCs</u>	<u>FFS Unit</u>	<u>Type</u>
<u>First Followers</u>						
Peer Mentoring for Reentry	7	18	25	65		
<u>Mahomet Area Youth Club</u>						
BLAST	634	643	1	414		

MAYC Members Matter!	144	231	3	92		
<u>Prairie Center Health Systems</u>						
Criminal Justice Substance Use Treatment	----	8	9	101		
Fresh Start	175	11	13	6		
Parenting with Love & Limits - Extended Ca	----	----	46	----	----	----
Prevention Program	1545	----	----	----	----	----
Specialty Courts	6	6498.3	96	----		
Youth Services	39	99	88	55	2088	1/4 hrs
<u>Promise Healthcare</u>						
***Mental Health Services at Frances Nelso	----	2245	8151	46	----	----
Wellness and Justice	52	597	72	495		
<u>RACES</u>						
*Counseling & Crisls Services	17	----	11	----		
<u>Rosecrance C-U</u>						
Criminal Justice - Problem Solving Courts			348	234		
Crisis, Access, Benefits & Engagement	22	3977	272	719	----	----
**Early Childhood Mental Health and Dev.	68	71	77	----	----	program closed
Parenting with Love & Limits - Front End	----	----	42	----	----	----
TIMES Center (Screening MI/SA)	----	6282	45	72		
<u>UP Center</u>						
Children, Youth, & Families Program	20	36	33	48		
<u>Urbana Neighborhood Connections Center</u>						
Community Study Center	----	----	----	227		
		<u>CSEs</u>	<u>SCs</u>	<u>TPCs</u>	<u>NTPCs</u>	
TOTAL GENERIC SERVICE UNITS		4,049	47,575	10,818	5,962	
		<u>Days</u>	<u>Hours</u>			
TOTAL FEE BASED UNITS			3,203			

Notes on Service Data

Data are for the period of Contract Year 2017: July 1, 2016 to June 30, 2017.

* a five month contract period

** a nine month contract period

*** TPCs include counseling and psychiatric patients.

Comprehensive information on funded programs (current and previous) is available at ccmhddt

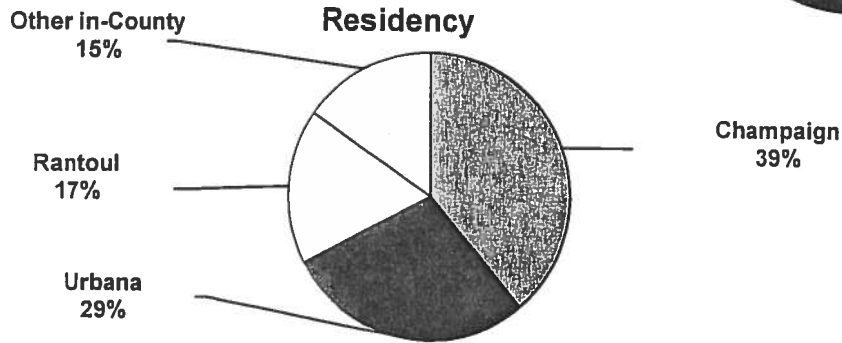
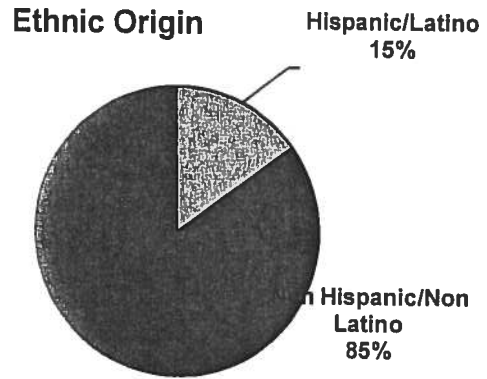
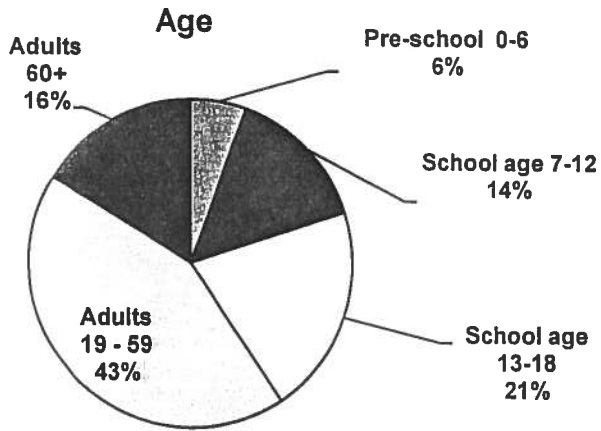
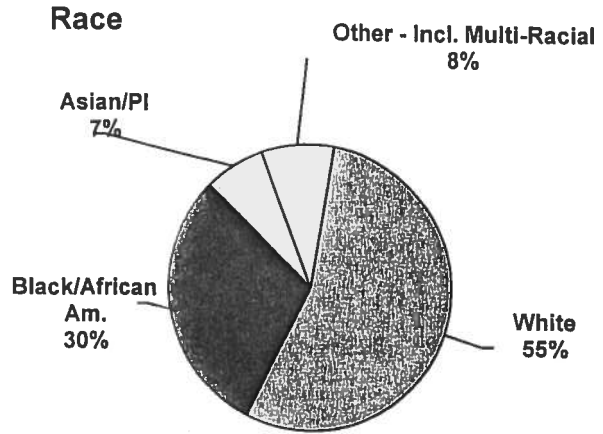
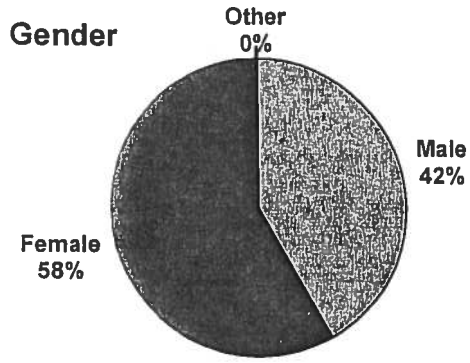
Questions may also be directed to CCMHB staff at:

1776 E. Washington St.

Urbana, IL 61802

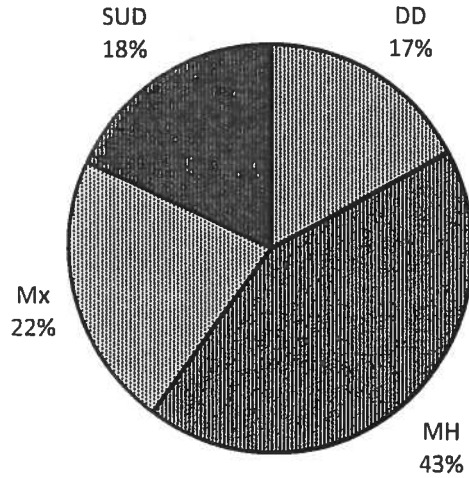
(217) 367-5703

DEMOGRAPHIC AND RESIDENCY DATA FOR PERSONS SERVED IN PY2017

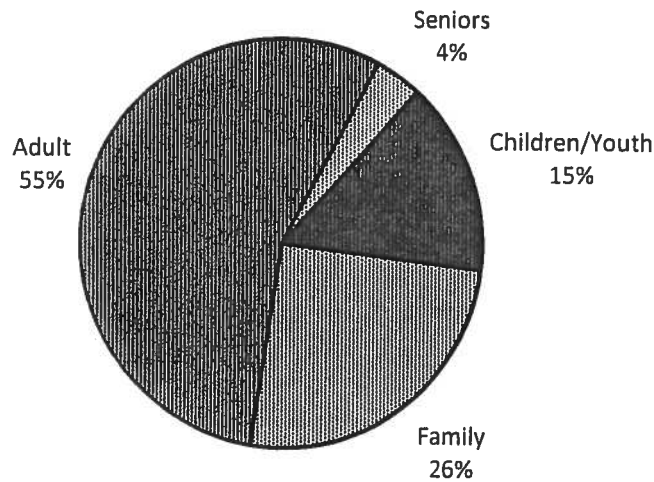


Funding by Sector, Population, and Service in Contract Year 2017 (CY17)

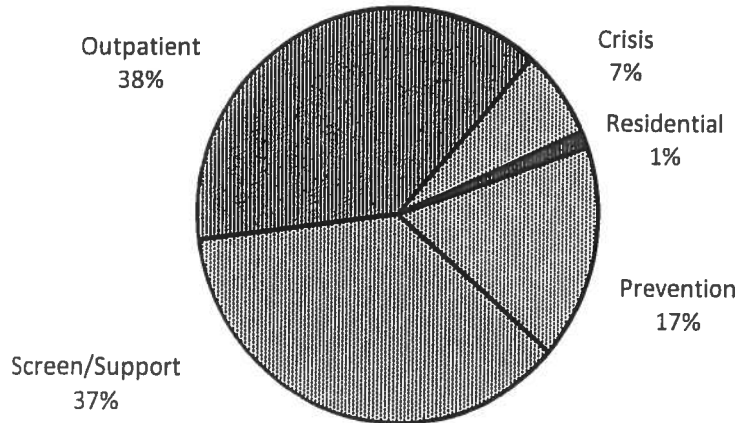
CCMHB CY17 Appropriation by Community Mental Health Sector



CCMHB CY17 Appropriation by Target Population



CCMHB CY2017 Appropriation by Type of Service



**SECTION II: Three-Year Plan 2016-2018
with FY 2018 One-Year Objectives**

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
THREE-YEAR PLAN**

FOR

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

**WITH
ONE YEAR OBJECTIVES
FOR**

**FISCAL YEAR 2018
(1/1/18 – 12/31/18)**

CHAMPAIGN COUNTY MENTAL HEALTH BOARD

WHEREAS, the Champaign County Mental Health Board has been established under Illinois Revised Statutes (405 ILCS – 20/Section 0.1 et. seq.) in order to "construct, repair, operate, maintain and regulate community mental health facilities to provide mental health services as defined by the local community mental health board, including services for the developmentally disabled and for the substance abuser, for residents (of Champaign County) and/or to contract therefore..."

WHEREAS, the Champaign County Mental Health Board is required by the Community Mental Health Act to prepare a one- and three-year plan for a program of community mental health services and facilities;

THEREFORE, the Champaign County Mental Health Board does hereby adopt the following Mission Statement and Statement of Purposes to guide the development of the mental health plan for Champaign County:

MISSION STATEMENT

The mission of the CCMHB is the promotion of a local system of services for the prevention and treatment of mental or emotional, intellectual or developmental, and substance abuse disorders, in accordance with the assessed priorities of the citizens of Champaign County.

STATEMENT OF PURPOSES

1. To plan, coordinate, evaluate and allocate funds for the comprehensive local system of mental health, intellectual disabilities and developmental disabilities, and substance abuse services for Champaign County.
2. To promote family-friendly community support networks for the at-risk, underserved and general populations of Champaign County.
3. To increase support for the local system of services from public and private sources.
4. To further develop the systematic exchange of information about local services and needs between the public/private service systems and the CCMHB.

In order to accomplish these purposes, the Champaign County Mental Health Board must collaborate with the public and private sectors in providing the resources necessary for the effective functioning of the community mental health system.

SYSTEMS OF CARE

Goal #1: Support a continuum of services to meet the needs of individuals with mental and/or emotional disorders, addictions, and/or intellectual or developmental disabilities and their families residing in Champaign County.

Objective #1: Conduct a needs assessment to inform development of the next three year plan.

Objective #2: Under established policies and procedures, solicit proposals from community based providers in response to Board defined priorities and associated criteria using a competitive application process.

Objective #3: Expand use of evidenced informed, evidenced based, best practice, recommended, and promising practice models appropriate to the presenting need in an effort to improve outcomes for individuals across the lifespan and for their families and supporters.

Objective #4: Promote wellness for people with mental illnesses, substance use disorders, intellectual disabilities, or developmental disabilities to prevent and reduce early mortality, through support services including access to services addressing basic needs, enrollment in benefit plans and coordinated access to primary care.

Objective #5: As practicable in light of potential congressional or presidential actions on the Affordable Care Act and Medicaid expansion, support development or expansion of residential and/or employment supports for persons with behavioral health diagnosis not supported through expansion of Medicaid or the Affordable Care Act.

Objective #6: In light of potential congressional or presidential actions on the Affordable Care Act and Medicaid expansion, if enrollment in health insurance and Medicaid managed care plans continues to reduce the uninsured population, realign CCMHB dollars to fund services and supports outside the realm of insurance and expanded Medicaid, e.g. Peer Supports.

Objective #7: Build evaluation capacity of contracted providers utilizing expertise of evaluators from the Department of Psychology at the University of Illinois.

Goal #2: Sustain commitment to addressing the need for underrepresented and diverse populations access to and engagement in services.

Objective #1: Support culturally responsive and family driven support networks for underrepresented populations, underserved populations, and general populations of Champaign County.

Objective #2: Provide technical assistance in support of continuous improvement of cultural and linguistic competence plans to meet the needs of the population served.

Objective #3: Encourage providers and other community based organizations to allocate resources to provide training, seek technical assistance, and pursue

other professional development activities for staff and governing and/or advisory boards to advance cultural and linguistic competence.

Objective #4: Use the Culturally and Linguistically Appropriate Services Standards (CLAS) as a blueprint to strengthen funded agencies' Cultural and Linguistic Competence.

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

Objective #1: Encourage development of collaborative agreements between providers to increase or maintain access and coordination of services for consumers throughout Champaign County.

Objective #2: Participate in various coordinating councils whose mission aligns with the needs of the various populations of interest to the Board with the intent of strengthening coordination between providers in the delivery of services.

Objective #3: Explore at the Board level potential for collaboration on issues of mutual interest with the C-U Public Health District and the Champaign County Board of Health.

Objective #4: In conjunction with the United Way of Champaign County, monitor implementation of the 211 information and referral system.

Objective #5: Investigate options for development of a web based compilation of local resources and or directories targeted to specific populations.

Goal #4: Continue the collaborative working relationship with the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDDB).

Objective #1: Coordinate integration, alignment, and allocation of resources with the CCDDDB to ensure the efficacious use of resources within the intellectual disability and developmental disability (ID/DD) service and support continuum.

Objective #2: Assess alternative service strategies that empower people with ID/DD and increase access to integrated settings as exemplified by the collaborative approach to the Employment First Act.

Objective #3: Concurrent with the CCDDDB, continue financial commitment to maintain and, if demonstrated, expand the availability of Community Integrated Living Arrangement (CILA) housing opportunities for people with ID/DD from Champaign County.

Objective #4: Collaborate with the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability on issues of mutual interest as exemplified by the expansion of CILA housing and joint sponsorship of events promoting acceptance, inclusion, and respect for people with ID/DD.

MULTI-AGENCY INVOLVED YOUTH AND FAMILIES

Goal #5: Building on progress achieved through the six year Cooperative Agreement between the Federal Substance Abuse and Mental Health Services Administration (SAMHSA), the Illinois Department of Human Services (IDHS), and the Champaign County Mental Health Board (CCMHB) implement a plan to sustain the SAMHSA/IDHS system of care model.

Objective #1: Support the efforts of the Champaign Community Coalition and other system of care initiatives.

Objective #2: Ongoing support of Champaign County family-run organizations that incorporate family-driven and youth-guided principles. In recognition of the importance of multi-system involved families and youth, maintain direct involvement and input about decisions that are made. Encourage organizations' focus on peer support specialists, peer-to-peer support, advocacy at the local level, and statewide expansion of family-run organizations.

CRIMINAL JUSTICE AND MENTAL HEALTH SYSTEM COLLABORATION

Goal #6: Support infrastructure development and investment in services along the five criminal justice intercept points to divert from the criminal justice system, as appropriate, persons with behavioral health needs or developmental disabilities.

Objective #1: Continue involvement in the Crisis Intervention Team Steering Committee in support of increased collaboration between law enforcement and crisis team response in the community.

Objective #2: Sustain efforts to engage persons with behavioral health diagnoses re-entering the community from jail or prison or with recent involvement with the criminal justice system, in treatment and other support services.

Objective #3: Maintain commitment to the Problem Solving Courts operating in Champaign County including continued participation on the Specialty Court Steering Committee.

Objective #4: Support integrated planning and service coordination for adults involved in the criminal justice system through participation in the Champaign County Re-Entry Council.

Objective #5: Through the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD), in its partnership with the National Association of Counties (NACo,) pursue opportunities for technical assistance and support through the "Decarceration Initiative," "Stepping Up: A National Initiative to Reduce the Number of People with Mental Illnesses in Jails," and the "Data Driven Justice Initiative." Encourage and participate in other similar collaborative opportunities aimed at improving outcomes for those with behavioral health needs involved with the criminal justice system.

Goal #7: In conjunction with the Champaign County Sheriff's Office and other community stakeholders pursue a continuum of services as an alternative to incarceration and/or overutilization of local Emergency Departments for persons with behavioral health needs or developmental disabilities.

Objective #1: Serve on the Crisis Response Planning Committee, or its' successor body, to continue to advance work initiated under the Justice and Mental Health Collaboration planning grant.

Objective #2: Identify options for developing jail diversion services to provide behavioral health assessments, crisis stabilization and detoxification from alcohol and/or other substances as may be necessary to serve Champaign County.

Objective #3: Secure commitment to support and sustain the development of a coordinated system of diversion services, from vested stakeholders in the public and private sectors.

Objective #4: Use public input gathered through these collaborations to guide advocacy for planning and policy changes at the state and federal levels, local system redesign and enhancement, and in the consideration of future funding priorities for the CCMHB.

Goal #8: Support interventions for youth who have juvenile justice system involvement to reduce contact with law enforcement or prevent deeper penetration into the system.

Objective #1: Investigate evidence based or recommended juvenile justice models as an alternative to the Parenting with Love and Limits (PLL) program.

Objective #2: Support continued implementation of the Parenting with Love and Limits (PLL) program based on positive evaluation and feedback from community partners and stakeholders.

Objective #3: Monitor local utilization of PLL and pursue options as necessary to address potential excess capacity.

Objective #4: Through participation on the Youth Assessment Center Advisory Board advocate for community and education based interventions contributing to positive youth development and decision-making.

Objective #5: Through participation and engagement in the Champaign Community Coalition and other community focused initiatives, promote and encourage multi-system collaborative approaches for prevention and reduction of youth violence.

Objective #6: Promote and support those targeted interventions that specifically address historical trauma experienced by African American and other minority youth disproportionately impacted in multiple systems.

Objective #7: Utilize the principles from "Models for Change" to reduce the disproportionate minority contact with law-enforcement and involvement with the juvenile justice system.

COMMUNITY ENGAGEMENT & ADVOCACY

Goal #9: Address the need for acceptance, inclusion and respect associated with a person's or family members' mental illness, substance use disorder, intellectual disability, and/or developmental disability through broad based community education efforts to increase community acceptance and positive self-image.

Objective #1: Continue support for and involvement in efforts to challenge stigma and discrimination and other community education events including disABILITY Resource Expo: Reaching Out for Answers, and the National Children's Mental Health Awareness Day.

Objective #2: Promote substance use disorder prevention initiatives as a community education tool targeting youth and young adults.

Objective #3: Participate in behavioral health community education initiatives, such as national depression screening day, to encourage individuals to be screened and seek further assistance where indicated.

Objective #4: Encourage and support efforts to more fully integrate people with behavioral health disorders and/or intellectual or developmental disabilities into community life in Champaign County.

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

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

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

Objective #3: Through the National Association of County Behavioral Health and Developmental Disability Directors, monitor the federal rulemaking process applying parity to Medicaid Managed Care and associated benefit plans and on the Institutions for Mental Disease (IMD) Medicaid Exclusion. Use opportunities for public comment on proposed rules and legislative action to advocate for the needs of our community.

