



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

Champaign County Developmental Disabilities Board (CCDDB) AGENDA

Wednesday, April 20, 2011

Brookens Administrative Building, Meeting Room 1
1776 E. Washington St., Urbana, IL 61802

8:00 AM

1. Call to Order – Ms. Holly Jordan, President
2. Roll Call – Stephanie Howard-Gallo
3. Additions to Agenda
4. Citizen Input
5. CCMHB Input
6. Approval of CCDDB Minutes
 - A. 2/23/11 Board Meeting*
Minutes are included in the packet. Board action is requested.
7. President's Comments – Ms. Holly Jordan
8. Executive Director's Comments – Peter Tracy
9. Staff Report – *Please refer to Program Summaries.*
10. Agency Information
11. Financial Report
 - A. Approval of Claims*
Included in the Board packet. Action is requested.
12. New Business
 - A. FY12 Program Summaries
Discussion of agencies' requests for funding. A Briefing Memo, list of CCDDB applications received, and copies of the program summaries are included in the Board packet.
 - B. Cultural and Linguistic Competence Plans Review
Included in the Board packet for information only.
13. Old Business
 - A. Disability Resource Expo
A report from Barb Bressner is included in the Board packet.
 - B. Anti-Stigma Alliance Event Update
A report from Barb Bressner is included in the Board packet.
14. Board Announcements
15. Adjournment

**Board action requested*

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

Minutes –February 23, 2011

*Brookens Administrative Center
1776 E. Washington St.
Urbana, IL
Meeting Room 1 (Lyle Shields Room)*

8:00 a.m.

MEMBERS PRESENT: Holly Jordan, President; Mike Smith

MEMBERS EXCUSED: Joyce Dill

STAFF PRESENT: Peter Tracy, Executive Director; Lynn Canfield, Nancy Crawford, Mark Driscoll, Stephanie Howard-Gallo

OTHERS PRESENT: Dennis Carpenter, Charleston Transitional Facility (CTF); Patty Walters, Danielle Matthews, Developmental Services Center (DSC); Pam Klassert, Hadley Ravencroft, Persons Assuming Control of their Environment(PACE); Sally Mustered, C-U Autism Network; Lynn Watson, Head Start; Jennifer Knapp, Community Choices; Barb Bressner, Consultant; Al Kurtz, Steve O’Conner, Champaign County Board

CALL TO ORDER:

Ms. Holly Jordan, Board President, called the meeting to order at 8:00 a.m.

ROLL CALL:

Roll call was taken and a quorum was present.

ADDITIONS TO AGENDA:

None.

CITIZEN INPUT:

None.

CHAMPAIGN COUNTY MENTAL HEALTH BOARD (CCMHB) INPUT:

The CCMHB will meet later today.

APPROVAL OF MINUTES:

Minutes from the January 18, 2011 Board meeting were included in the packet.

MOTION: Mr. Smith moved to approve the minutes from the January 18, 2011 Board meeting. Ms. Jordan seconded and the motion passed unanimously.

PRESIDENT'S COMMENTS:

No Comments.

EXECUTIVE DIRECTOR'S REPORT:

Mr. Tracy stated the Association of Community Mental Health Authorities of Illinois (ACMHAI) will provide a written response to the Governor's proposed budget.

STAFF REPORT:

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

AGENCY INFORMATION:

Agency representatives were given an opportunity to report to the Board the negative impact the proposed State of Illinois budget cuts will have on their agency.

FINANCIAL INFORMATION:

Approval of Claims:

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

MOTION: Mr. Smith moved to accept the claims report as presented. Ms. Jordan seconded and the motion passed unanimously.

NEW BUSINESS:

PY12 Funding Applications:

A list of applicants and amounts requested was included in the Board packet for information only.

Illinois Council on Developmental Disabilities Draft Five Year State Plan:

The Illinois Council on Developmental Disabilities Draft Five Year State Plan was included in the Board packet. Comments are welcome until March 1, 2011.

Anti-Stigma Alliance:

A report from Ms. Lynn Canfield was included in the packet for information only. Ebertfest will be held April 27 – May 1, 2011. The Anti-Stigma Alliance will be showing their free family movie on May 1, 2011 at the close of the festival. A film has been chosen, but has not been announced yet.

OLD BUSINESS:

Disabilities Resource Expo:

Ms. Barb Bressner provided a verbal report on plans for the Expo.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 8:37 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo

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

CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

3/04/11

PAGE 3

VENDOR NO	VENDOR NAME	TRN DTE	B N	TR CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 108 DEVLPMNTL DISABILITY FUND												
*** DEPT NO. 050 DEVL MNTL DISABILITY BOARD												
90	CHAMPAIGN COUNTY TREASURER								MENT HLTH BD FND 090			
		2/09/11	70	VR 108-	25		448455	2/10/11	108-050-533.07-00	PROFESSIONAL SERVICES	NOV ADMIN FEE	3,000.00
		2/09/11	70	VR 108-	25		448455	2/10/11	108-050-533.07-00	PROFESSIONAL SERVICES	FEB ADMIN FEE	27,849.00
											VENDOR TOTAL	30,849.00 *
										DEVL MNTL DISABILITY BOARD	DEPARTMENT TOTAL	30,849.00 *
										DEVLPMNTL DISABILITY FUND	FUND TOTAL	30,849.00 *

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CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

4/07/11

PAGE 8

VENDOR NO	VENDOR NAME	TRN DTE	B N	TR CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 108 DEVLPMNTL DISABILITY FUND												
*** DEPT NO. 050 DEVLMNNTL DISABILITY BOARD												
90	CHAMPAIGN COUNTY TREASURER								MENT HLTH BD FND 090			
		3/09/11	02	VR 108-	34		449575	3/10/11	108-050-533.07-00	PROFESSIONAL SERVICES	MAR ADMIN FEES	27,849.00
		4/04/11	05	VR 108-	43		450991	4/07/11	108-050-533.07-00	PROFESSIONAL SERVICES	APR ADMIN FEE	27,849.00
											VENDOR TOTAL	55,698.00 *
104	CHAMPAIGN COUNTY TREASURER								HEAD START FUND 104			
		3/09/11	02	VR 108-	32		449577	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR EARLY HEADSTART	3,036.00
		4/04/11	05	VR 108-	42		450993	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR EARLY HEADSTART	3,036.00
											VENDOR TOTAL	6,072.00 *
5352	AUTISM SOCIETY OF ILLINOIS								GRANTS			
		3/09/11	02	VR 108-	27		449593	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR AUTISM SOCIETY	1,084.00
		4/04/11	05	VR 108-	37		451012	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR AUTISM SOCIETY	1,084.00
											VENDOR TOTAL	2,168.00 *
16011	CHARLESTON TRANSITIONAL FACILITY											
		3/09/11	02	VR 108-	26		449615	3/10/11	108-050-533.07-00	PROFESSIONAL SERVICES	MAR NURSING SERVICE	1,092.00
		3/15/11	05	VR 108-	35		450013	3/18/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	JAN RESIDENTIAL	3,721.22
		3/30/11	05	VR 108-	44		450691	3/31/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	FEB RESIDENTIAL SRV	3,298.68
		4/04/11	05	VR 108-	36		451031	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR NURSING SERVICE	1,092.00
											VENDOR TOTAL	9,203.90 *
18203	COMMUNITY CHOICE											
		3/09/11	02	VR 108-	28		449622	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR CUSTOM EMPLOYMN	2,500.00
		4/04/11	05	VR 108-	38		451036	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR CUSTOM EMPLOYMN	2,500.00
											VENDOR TOTAL	5,000.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF								CHAMPAIGN COUNTY INC			
		3/09/11	02	VR 108-	29		449633	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR APARTMENT SVCS	20,779.00
		3/09/11	02	VR 108-	29		449633	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR CLIENT/FAM SPRT	32,056.00

CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

4/07/11

PAGE 9

VENDOR NO	VENDOR NAME	TRN DTE	B N	TR CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 108 DEVLPMNTL DISABILITY FUND												
		3/09/11	02	VR	108-	29	449633	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR CLINICAL SUPPOR	14,399.00
		3/09/11	02	VR	108-	29	449633	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR DVLDP TRAIN/EMPL	118,084.00
		3/09/11	02	VR	108-	29	449633	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR FAM DEVELOP CTR	22,527.00
		3/09/11	02	VR	108-	29	449633	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR INDIV/FAM SPprt	27,373.00
		3/09/11	02	VR	108-	29	449633	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR CILA-RESIDENTIA	12,833.00
		4/04/11	05	VR	108-	39	451042	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR APARTMENT SRVCS	20,779.00
		4/04/11	05	VR	108-	39	451042	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR CLNT FAM SUPPOR	32,056.00
		4/04/11	05	VR	108-	39	451042	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR CLINICL SUPPRt	14,399.00
		4/04/11	05	VR	108-	39	451042	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR DT EMPLOYMENT	118,084.00
		4/04/11	05	VR	108-	39	451042	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR FAM DEV CENTER	22,527.00
		4/04/11	05	VR	108-	39	451042	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR INDIV&FAM SUPPR	27,373.00
		4/04/11	05	VR	108-	39	451042	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR CILA RESIDENTL	12,833.00
											VENDOR TOTAL	496,102.00 *
22816	DOWN SYNDROME NETWORK									C/O WENDY BARKER		
		3/09/11	02	VR	108-	30	449637	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR DOWN SYNDROME	1,250.00
		4/04/11	05	VR	108-	40	451046	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR DOWN SYNDROME	1,250.00
											VENDOR TOTAL	2,500.00 *
54930	PERSONS ASSUMING CONTROL OF THEIR									ENVIROMENT, INC		
		3/09/11	02	VR	108-	31	449710	3/10/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR OPP FOR INDPNDN	4,962.00
		4/04/11	05	VR	108-	41	451103	4/07/11	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR OPPORT FOR INDE	4,962.00
											VENDOR TOTAL	9,924.00 *
										DEVLmntL DISABILITY BOARD	DEPARTMENT TOTAL	586,667.90 *
										DEVLPMNTL DISABILITY FUND	FUND TOTAL	586,667.90 *



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

BRIEFING MEMORANDUM

DATE: April 20, 2011
MEMO TO: Members, Champaign County Developmental Disabilities Board
FROM: Peter Tracy
SUBJECT: Program Summaries – FY12 Allocation Cycle

Traditionally, our April meeting is used to fully vet all applications for funding with final decisions made at our May meeting. To facilitate this process staff have completed Program Summaries on all applications for funding. These summaries glean salient information and provide opinions concerning alignment with our stated priorities and defined decision support criteria. In addition, all applicant agencies are invited to attend the April meeting for the twofold purposes of (1) providing additional information directly to the Champaign County Developmental Disabilities Board (CCDDB) during the “Agency Information” portion of the agenda, and (2) answering direct questions from CCDDB members concerning their application. CCDDB members have full and direct access to all applications through our online application system and may at their discretion raise questions not addressed in the summaries.

All applicants for CCDDB funding have received a copy of their program summary and have been invited to notify us in writing if there are factual errors which should be corrected prior to completion of the FY12 award process. Written comments from providers will be shared with CCDDB members and errors will be corrected. Differences of opinion concerning alignment with decision support criteria will not result in changes unless directly related to a corrected factual error. Final funding decision authority rests with the CCDDB.

CCDDB Agency Program Allocation Request Amounts PY12		
July 1, 2011 thru June 30, 2012		
Agency	Program Name	PY12 Request
Autism Society of Illinois	CU Autism Network	12,000
Champaign County Down Syndrome Network	Parent Support Group	15,000
Champaign County Head Start/Early Head Start	Social Emotional Disabilities Svcs	41,675
Charleston Transitional Facility	Nursing Services	20,204
	Residential Services	38,000
Charleston Transitional Facility Total		58,204
Community Choices	Customized Employment	30,000
Community Elements, Inc.	Coordination of Services - DD/MI	51,775
Developmental Services Center	Family Development Center	381,435
	Apartment Services	411,328
	CILA	158,620
	Client/Family Support Services	396,212
	Clinical Services	177,966
	Developmental Training/Employment	1,202,014
	Individual & Fam Suppt	338,324
	Individual & Family Support - Expansion	60,000
DSC Total		3,125,899
PACE	Opportunities for People with DD	59,546
	TOTAL	3,394,099
<i>CCDDB PY12 Agency Requests nkc 4/12/11</i>		

Draft CCDDDB PROGRAM SUMMARY 2011

AGENCY: Autism Society of Illinois

Program Name: C-U Autism Network (CUAN)

Type of Contract: Grant format requested

Financial Information:

PY12 CCDDDB Funding Request: \$12,000

PY12 Total Program Budget: \$30,050

Current Year Funding – (PY11): \$12,000

Proposed Increase (Decrease) – PY11 vs. PY12: \$0

Program Staff – CCDDDB Funds: 0 FTE

Total Program Staff: 0.5 FTE

Budget Narrative: Sufficient detail is included. CUAN relies heavily on volunteers; part-time coordinator and other Autism Society of Illinois professional staff are not charged to CCDDDB. CCDDDB funds support program activities; additional revenue is expected from fundraising events (\$17,000), workshop fees (\$850), and sale of goods/services (\$200.) All program revenue is expended for the program. Expenses include: professional fees of \$2492 (child care, swim staff, sibling group, a part of cost of bookkeeping, and \$240 not accounted for - a possible error), consumables (food and supplies for events) and office supplies, general operating, conferences and part of the cost of family events and workshops (together comprising 41% of total request), meeting and childcare site rental, and membership in Latino Partnership. Transportation and Miscellaneous expenses are described in the Budget Narrative but not charged to CCDDDB. No cost associated with the Walk event is charged to CCDDDB.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: N/A

Administrative Costs: Deferred

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived

Audit in Compliance

Audit out of Compliance

Auditor Finding

Comments: Total agency revenue is again projected below the State's threshold for audit requirement, and total CCDDDB funding request is below the CCDDDB threshold.

Target Population: Residents of Champaign County who have an interest in Autism Spectrum (or related) Disorders, particularly families new to a diagnosis or new to the area.

Service Location/Demographics: C/U meetings and events. Information is distributed county-wide. Difficulty collecting data at events is noted, but underserved and rural populations appear not well-represented. For Q1 and Q2 of FY11, 96% of members are from C/U. Estimated in Q2, 94% of participants were white, 99% non-Hispanic, and 75% female. Of children participating in youth activities or childcare during meetings, 21 were under age 6, 60 were 7-12, and 12 were 13-18; 533 adults attended events.

Service Description/Type: Family Support: parent/professional support group. Meetings of network family members are held at least eight times a year, typically with a presentation followed by smaller networking groups. Concurrently, three free childcare options are available: babysitting for birth to 6, swimming for 6 and up who have a diagnosis of Autism Spectrum Disorder, and a sibling group (ages 6 and up) facilitated by a UI professor and a Speech/Language Pathologist. CUAN annually hosts three family events and two or more workshops on ASDs & related topics. The annual Autism Walk has enjoyed strong turnout of rural participants. Website, listserv, email list of over 550 (family members and professionals), phone referrals to ASI for Information & Referral and consultations with an IEP specialist. Some CUAN members provide training and information to other groups.

Access to Services for Rural Residents: Print information is distributed county-wide; listserv and website may also be accessed. Planned 'red flags' pamphlet will be given to new parents leaving CU hospitals and may later be available through county hospitals and daycare sites. Second annual Autism Walk had strong rural representation, expected to continue.

Program Performance Measures:

ACCESS: Regular meetings and most events are free, held in accessible public facilities, publicized in the media/listserv/website, and open to anyone with an interest in ASDs. Registration is requested, sometimes required for events; a new tracking service has been purchased to collect zip code and demographic info, to better measure the effectiveness of outreach to rural and underserved populations. CUAN is a member of the Latino partnership and collaborates with other advocacy/networking groups. New Parent Information packets (with extensive local contact info) provided to physicians and social workers for distribution to those new to a diagnosis or new in the area. Revised Cultural Competence Plan submitted by the agency, includes specific goals and actions: maintain a committee and collaborative workgroup to build contacts within underserved populations; planned outreach to churches and East Central Illinois Refugee Mutual Assistance Center is noted; website has information in Spanish.

CONSUMER OUTCOMES: Meeting evaluation forms ask feedback on both presentation and networking segments, and data is maintained but does not appear to be included in application. CUAN survey seeks input on meeting locations and presentation topics. Program has measurable goals which include 8 meetings (30-40 attendees), 3 childcare options per meeting, 2 workshops, network of 1000 plus 100 professionals, 200 new parent packets, 3 family events, and Autism Walk. Headcount at events is CSE count, the primary measure of effectiveness.

UTILIZATION: Attendance at workshops, monthly meetings, and registered participants at special events, along with requests for information & referral. Local CUAN volunteers submit counts of events and attendance at same, and there is some duplication. CSE is used as a proxy volume measure: PY11 target of 2000 will be met; PY10 target of 900 was exceeded (2300 actual); PY12 adjusted to 2100. Not more than 550 members on email list.

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: No.

Consumer advocacy and family support organizations: Yes.

Access to DD Information, New Families & Rural: Yes but weak Rural.

Gaps in Core Services related to state cuts: No.

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes – updated plan.

Consumer directed Services: NA

CCMHB/CCDDB MOU Compliance: Yes

Budget-Program Connectedness: possible small error in expense form or budget narrative

Medicaid Participation/PUNS enrollment: No/PUNS contact info provided.

Technical Criteria: Application Minimal Compliance/Responsiveness: Yes.

Approach/Methods: No. Innovation: No. Staff Credentials: N/A. Application Quality: High compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

Draft CCDDDB PROGRAM SUMMARY 2011

AGENCY: Champaign County Down Syndrome Network

Program Name: Champaign County Down Syndrome Network

Type of Contract: Grant format requested

Financial Information:

PY12 CCDDDB Funding Request: \$15,000

PY12 Total Program Budget: \$42,500

Current Year Funding – (PY11): \$15,000

Proposed Increase (Decrease) – PY11 vs. PY11: \$0

Program Staff – CCDDDB Funds: 0 FTEs

Total Program Staff: 0 FTEs

Budget Narrative: Revenue form not complete, but sources are few and clarified in the Budget Narrative. CCDDDB funding is 35% of anticipated revenue, other sources being Buddy Walk (64%) and contributions from families. As a volunteer-run organization, personnel form is not applicable. Each expense item is appropriately tied to program activities, the largest being general operating costs (at 37% of total expenditures) and conferences (30%), which include workshops and conference registrations for member families; other items are professional fees (6.7%), consumables (13.3%), specific assistance (8%), transportation (2%), and equipment purchases (3.3%). No expense related to fundraising activities is charged to the CCDDDB.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative costs and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: N/A

Administrative costs N/A

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived XX

Audit in Compliance

Audit out of Compliance

Auditor Finding

Target Population: Families of individuals with Down Syndrome, professionals, general public, and a focus on parents of children newly diagnosed.

Service Location/Demographics: C/U. Core family membership was at 77 in FY10 (another 28 from out of county): 30% from Champaign, 14% Urbana, 3% Rantoul, 26% other Champaign County, and 27% not CC. FY11 Q2 data show: 34% from C, 16% U, 2% R, 20% other CC, and 29% not CC. Other FY10 and FY11 demographic data were not reported. Cultural Competence Plan refers to outreach, acknowledges low participation of African American families.

Service Description/Type: Family Support. Volunteer-run organization prepares and distributes current information on Down Syndrome; offers support to new/foster/adoptive parents through home visits and to other members through attending individual service planning meetings; organizes community events (monthly meetings, annual conferences, annual fund/awareness raiser, workshops, social events, presentations). Brochures and some books are available in Spanish and Braille. Some events are collaborations with CU Autism Network.

Access to Services for Rural Residents: County-wide access to monthly newsletter, emails, website, membership directory (to locate others nearby for support and carpool). Budget includes transportation assistance (\$300) for members with limited means.

Program Performance Measures:

ACCESS: Information distributed through hospitals, schools, workplaces, agencies, businesses, and website with contact info to DSN and other DS organizations (local info also included in national group websites). Monthly newsletter for parents and professionals. Book club activity for teens and young adults. New parent packet (to include info in Spanish) at local hospitals. Book Club activity targets older teens and young adults. DSN maintains, with DSC, a lending library. DSN members visit new parents to provide information and support, and the organization networks with other DS groups for current issues, workshops, etc. Cultural competence plan submitted. Zip code data will be collected.

CONSUMER OUTCOMES: Monthly newsletter to approx 125 families. Average of 15 families per month at meetings/presentations. Five local advocacy events annually. DSN president presented at UI Special Ed classes totaling 175 students, 30 of whom completed special projects for DSN or provided childcare or advocacy. Other activities are described but do not appear to have specific measures: informational brochures (English and Spanish) distributed through CU hospitals and clinics; clinics referring new families to DSN; DSN referring families to providers; families supporting each other at school and

agency planning meetings and guardianship process; opportunities for community and individuals with Down Syndrome to participate in fundraising.

UTILIZATION: The Community Service Event (CSE) unit of service is a proxy for the number of meetings held and a headcount of attendance at meetings and events. Given some duplication, this measure continues to exceed targets: in PY09, 1632 actual against target of 750; PY10 actual was 2502, target 1000. PY11 estimate is 2200, while target was 1050. PY12 target adjusted to 1060. (Utilization report not complete, numbers derived from Q reports.) DSN plans to continue: annual Buddy Walk; collaboration with other local groups in the national "Spread the Word to End the Word" event, obtaining over 400 local signatures in FY10; annual conference with speakers.

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: No.

Consumer advocacy and family support organizations: Yes

Access to DD Information, New Families & Rural: Yes

Gaps in Core Services related to state cuts: No

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Consult with ACCESS-Initiative Cultural and Linguistic Competency Coordinator for technical assistance during PY12 to address underserved populations.

Consumer directed Services: NA

CCMHB/CCDDB MOU Compliance: Yes

Budget-Program Connectedness: Revenue form incomplete

Medicaid Participation/PUNS: No/Recommend info in new parent publications.

Technical Criteria:

Application Minimal Compliance /Responsiveness: Yes. Approach/Methods: No.

Innovation: No. Staff Credentials: N/A. Application Quality: Moderate compliance.

Applicant Review and Input

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Champaign County Regional Planning Commission

Program Name: Champaign County Head Start/Early Head Start

Type of Contract: Grant format requested

Financial Information:

PY12 CCDDDB Funding Request: \$41,675

PY12 Total Program Budget: \$77,216

Current Year Funding – (PY11): \$36,435

Proposed Increase – PY11 vs. PY12: \$5,240

Program Staff – CCDDDB Funds: 0.6 FTE

Total Program Staff: 1.6 FTE

Budget Narrative: Simple and clear. Revenue sources are described for total Head Start/Early Head Start program and for CCDDDB contract, this request being the only revenue source identified for the latter. 98% of request is for Salaries/Wages and Payroll Taxes/Benefits; other expenses are consumables directly related to this contract and Conferences/staff development for ongoing training for licensure requirements of CCDDDB program staff. Personnel form identifies staff servicing the contract (60% of Social Emotional Development Specialist only) as well as total program; remainder of this position and costs of indirect program staff are supported by a portion (\$35,541 or 0.86%) of US Dept HHS Head Start total grant. Cost proportions not level across expense form. Total Head Start budget has \$1,666,028 surplus, CCDDDB program budget none.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: CCDDDB Portion of Contract = 30%
Total CCDDDB Contract = 19%
Total Head Start Budget = 34.4%

Administrative Costs: % not calculated

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived

Audit in Compliance XX

Audit not in Compliance

Auditor Finding

Comments: Program included in Champaign County annual audit.

Target Population: Champaign County residents, birth to five, with limited financial resources to meet the cost of care, who are enrolled in Champaign County Head Start/Early Head Start (or CCHS child care partners) and referred for behavioral or social-emotional concerns or suspected of or identified with a delay or disability.

Service Location/Demographics: All of Champaign County. Of those enrolled in Head Start/Early Head Start total program in PY10, 240 were from Champaign, 156 Urbana, 127 Rantoul, and 120 rural CC. CCDDDB-funded Program PY11 Q1 and Q2 reports show: 29 in Urbana, 51 in Champaign, 34 in Rantoul, and 5 other CC; 112 were under age 6 and 7 were 19-59; 30 were white, 48 black, and 28 other; 13 of Hispanic/Latino origin; 63 male.

Service Description/Type: Comprehensive Services for young children:

Screening/Evaluation/Information & Referral. All newly enrolled children and those moving from Early Head Start to Head Start are screened with Ages & Stages Questionnaire and A&S Social Emotional Questionnaire to identify those who may need additional support.

Classroom environments are assessed. Referrals also come from parents and teachers. Social Emotional Development Specialist assists in the development of social-emotional goals and behavior management plans with parents and teachers, provides behavioral therapy and counseling for children and families, collaborates on mass screening events in summer with CUPHD, and conducts staff trainings. **Staff Comment:** care should be taken to avoid using CCDDDB funds for those eligible to participate in any such program conducted under Article 14 of the School Code.

Access to Services for Rural Residents: County-wide. Families in medically underserved townships receive priority points for selection. Home based service option (90 min/wk visit w/ teacher) is offered to children living off the CCHS bus route. Rural families who work or attend school 30 hrs/wk may enroll in full-day center-based option.

Program Performance Measures:

ACCESS: For first 45 days of school year, the Development Services Manager reports weekly on progress of screenings and health requirements for those children in program at first day of school; after 45 days, monthly for those enrolling during the year. As required by Federal Head Start standards, demographic and other data are collected for Community Assessment reports and annual Program Information Report, which are used to develop goals in operational plans. Zip code data will be collected. Agency has submitted a Cultural Competency plan.

CONSUMER OUTCOMES: In PY10, of 502 screened, 48 Head Start and 20 Early Head Start students were identified with a delay/disability. Of these, 40 (compared with 38 in PY09) Head Start enrollees had center-based services, and 8 (8 in PY09) received therapy (pd by HS); 20 (14 in PY09) Early Head Start enrollees received therapy from EI providers. 34 (55 in PY09) were referred to program for observation: of these, 28 (previous year 50) then had behavior plans; into PY11, 12 of these (previous year 10) carried over with continuing plan, 4 no longer needed them, and 8 remained open with an active behavior plan. In PY10, 73 (previous year 59) had social emotional goals, 29 no longer needed them, and 37 continued in PY11. 15 children had play therapy, and 11 parents counseling in PY10. Total program anticipates 90% of those enrolled and entering kindergarten, including those w/ disabilities, will leave the program ready for K.

UTILIZATION: Except for CSEs, PY11 targets will be met or exceeded. For PY12, TPC target will be adjusted upward (from 77 to 105 for counseling, play therapy, SE goals, behavior plans), as will NTPC (from 40 to 55 behavioral planning mtgs, parent mtgs, parent trainings), SC and CSE targets will continue (730 screenings and 20 events), and Other increased (from 12 to 18 mass screening days, staff training, parent newsletters). Total program served 643 (unduplicated) in PY10, 980 estimated for PY11, and expects 865 next year.

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes

Consumer advocacy and family support organizations: No.

Access to DD Information, New Families & Rural: Yes

Gaps in Core Services related to state cuts: No

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes

Consumer directed Services: Yes (family)

CCMHB/CCDDB MOU Compliance: Yes

Budget-Program Connectedness: Yes.

Medicaid Participation/PUNS: No/No.

Technical Criteria:

Application Minimal Compliance/Responsiveness: Yes. Approach/Methods: Best practices as required by federal funding. Innovation: No. Staff Credentials: Not described. Application Quality: Moderate compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Charleston Transitional Facility

Program Name: Nursing

Type of Contract: Grant format requested

Financial Information

PY12 CCDDDB Funding Request: \$20,204

PY12 Total Program Budget: \$20,204

Current Year Funding - PY11: \$13,100

Change (as applicable) - Proposed from PY11 to PY12: \$7,104

Program Staff - CCDDDB Funds: 0.45 FTE

Total Program Staff: 0.45 FTE

Budget narrative: Simple with clear explanations. Total agency revenue is primarily from state DHS FFS programs, at risk due to state budget. This program previously showed minimal revenue from DHS for nursing services provided to state funded residents, described in plan narrative as less than \$1K total for the year, but no estimated amount appears on Revenue form, where \$20,204 is the total program budget. Salaries/benefits comprise 100% of expenses charged to CCDDDB. Personnel Form includes 5% of Vice President of Community Services and 40% of a full-time RN; Budget Narrative explains this funding request is for 66% of admin and RN costs associated with the Devonshire CILA home (6 state funded residents, 1 CCDDDB funded). In PY10, CCDDDB funded 25% of nursing costs for this home, and in PY11, 55%. Rationale for the requested increase is unfunded compliance mandates by DHS. As in previous years, CCDDDB staff question is not of treatment efficacy but rather of cost efficiencies in fully supporting nursing costs to meet compliance mandates for a small client population.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 28.5%

Administrative costs: % not calculated

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived

Audit in Compliance XX

Audit out of Compliance

Auditor Finding

Target Population: Residents of CTF's 24 hour Devonshire CILA, located in Champaign: individuals aged 18 and up, with developmental disabilities and the need for supportive services in order to maximize independence in a group home setting, six of whom receive DHS CILA funding and one CCDDDB. Nursing services are mandated for all, defined in DHS rules 115 and 116. Several residents have medical issues related to aging.

Service Location/Demographics: Champaign. In PY10, total program served 7: 3 originated from Champaign, 1 Urbana, 2 greater CC, 1 non CC; 6 were female; 6 were white and 1 African American; none of Hispanic origin; 5 were between 19 and 59 years of age, and 2 over 60. All had very low income. One resident moved out early in FY10; new resident, early in FY11, is from Urbana, male, white, under 59, non Hispanic.

Service Description/Type: Residential. A subset of CILA services, nursing duties include: medical care coordination, medication training for staff, quality assurance of medical concerns, input into medical forms and policies, formal monthly RN site visits, monthly medication checks and Physician Order Sheet review, annual Physical Status Review nursing packets, quarterly medication assessments and semi-annual tardive dyskinesia screenings for those on psychotropic meds, annual physical assessments, Quality Assurance on med errors, annual recertification of staff authorization to administer meds, on call 24-7 for emergencies, and input into development of Individual Service Plans for each resident (all have a medication goal/objective). DHS does not reimburse at a level sufficient for the agency to meet the above DHS requirements and recommendations.

Access to Service for Rural Residents: Rural residents may apply. CTF has sites outside of Champaign County and works with local Pre-Admission Screening agents to match eligible applicants with vacancies as they occur. This program serves residents of Devonshire group home, located in Champaign, exclusively.

Program Performance Measures:

ACCESS: Nursing services available to all CILA residents 24 hrs a day, with RN present 20 hrs/wk (though 16 hrs/wk identified elsewhere in application). With low turnover, CILA program open to all who are over 18, have a DD, and are not a danger to self or others (DHS eligibility is determined through PAS agencies.) Demographic and zip code data collected on all applicants. Staff support residents communicating and advocating for medical/health needs. Application does not appear to identify a specific access measure. Cultural Competency Plan submitted is CTF Admission Policy.

CONSUMER OUTCOMES: Good detail on consumer involvement in planning and nursing/other health services. Quarterly visits by PAS agent for DHS compliance; annual DHS compliance surveys. House meetings are opportunity for residents to discuss quality of services; familiarity with regular staff nurse may increase trust. Annual self-medication assessments completed for all; monthly QSP notes track progress on Individual Service Plan goal/objective. Physical health assessments for each resident reviewed annually and if a change, which can lead to request for additional DHS funding. Annual satisfaction survey of residents and guardians, with follow up. A specific, quantifiable outcome measure does not appear to be included.

UTILIZATION: Aging resident population increases the demand for nursing contact hours. Efforts to reduce nursing costs include med training of non-nursing staff and greater reliance on them to enter data, manage files and forms, coordinate with medical providers, etc. Data are collected and reviewed regarding the volume of on-call nursing hours, which are required but not reimbursed by DHS; narrative notes a positive impact (lower volume on-call) of increased non-nursing staff competencies. Volume of service is the measure, reported as Service Contacts (780 hours estimated for the current year, will be the target for PY12). 20 CSEs for PY11 are anticipated; target of 10 for PY12.

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes

Consumer advocacy and family support organizations: No.

Access to DD Information, New Families & Rural: Yes, with respect to potential residents

Gaps in Core Services related to state cuts: Yes

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes

Consumer directed Services: Yes

CCMHB/CCDDB MOU Compliance: Yes

Budget-Program Connectedness: Revenue form may be incomplete

Medicaid Participation/PUNS enrollment: minimally supported by DHS CILA rate/No

Technical Criteria:

Application Minimal Compliance /Responsiveness: Yes. Approach/Methods: Best practices.

Innovation: Best practices. Staff Credentials: Yes. Application Quality: Moderate Compliance.

Staff Comment: Agency provides services statewide; five person board does not currently include a resident of Champaign County, though efforts to recruit one are underway.

Applicant Review and Input

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Charleston Transitional Facility

Program Name: Residential Services

Type of Contract: Fee for Service format requested

Financial Information

PY12 CCDDDB Funding Request: \$ 38,000

PY12 Total Program Budget: \$38,000

Current Year Funding – PY11: \$43,000

Change (as applicable) - Proposed from PY11 to PY12: -\$5,000

Program Staff – CCDDDB Funds: 2.1 FTE

Total Program Staff: 7.75 FTE

Budget Narrative: Simple with clear explanations. Request of \$38,000 is comparable to lower DHS CILA rates and comprises 100% of budgeted revenue for program; resident contribution (collected per DHS standard CILA calculation, as with all other residents) is noted in plan narrative but not in revenue form, not likely to exceed \$7,500. Expenses are described in detail: salaries/benefits are 68% of total request, based on 14% total staff costs for this home; projected from FY11 actual amounts are small amounts for Professional Fees, Consumables (7% of total request), General Operating/Management & General (7%), Occupancy (6.4%), Staff Training (3.8%), House Transportation (3.4%), Interest Expense (2.8%), and Depreciation (1.7%). Personnel form is complete with indirect and direct program staff allocated appropriately (14%, for 1 of 7 residents). Total agency budget of \$13,651,727 has \$573,795 excess revenue (4%), though this program operates at a small deficit (\$453). Staff Comment: If DHS reimburses for staff training, another small item could be included as program revenue, offsetting a portion of the staff development/training expense.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 28.5%

Administrative costs: % not calculated

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived

Audit in Compliance XX

Audit not in Compliance

Auditor Finding

Target Population: One bed in CTF's 24 hour Devonshire CILA, located in Champaign: individuals aged 18 and up, with developmental disabilities and the need for supportive services in order to maximize independence in a group home setting. Six others receive DHS funding for this service.

Service Location/Demographics: Champaign. In PY10, total program served 7 residents: 3 originated from Champaign, 1 Urbana, 2 greater Champaign County, and 1 not from CC; 6 were female; 6 were white and 1 African American; none were Hispanic; 4 were between 19 and 59 years of age, and 3 over 60. All had very low income. CCDDDB-funded resident moved out early in PY10; new resident, early in PY11, is from Urbana, male, white, under 59, non Hispanic.

ServiceDescription/Type: Residential. CCDDDB provides support for one consumer with 24 hour supervision, case management, person-centered individual service planning, nursing (including on-call) and dietician services, transportation, community activities, and assessments. Current CCDDDB funded resident had financial need, met state eligibility requirements, but could not secure DHS CILA funding due to state budget.

Access to Service for Rural Residents: Potential candidates county-wide may apply. CTF has sites outside of Champaign County and works with local Pre-Admission Screening agents to match eligible applicants with vacancies as they occur.

Program Performance Measures:

ACCESS: Open to all, with low turnover. Good detail on intake process and wait list; speed of access related to funding source. PAS agency involved. Demographic and zip code data collected on all applicants. Staff support residents communicating and advocating for their needs; interpreters available when appropriate. Application does not appear to identify a specific access measure, although agency has benchmarks. Stakeholder and guardian input is sought through agency newsletter; grievance procedure reviewed annually with residents; Office of Inspector General contact info posted at all program sites. Cultural Competency Plan submitted is CTF Admission Policy.

CONSUMER OUTCOMES: Measured by monthly QSP (Qualified Support Professional) review notes, annual review of Individual Service Plan, and annual satisfaction survey (with documented correction of reported deficiencies). Services are mandated by DHS rules 115 and 116, reviewed in DHS compliance surveys and through regular home visits by local PAS agency. CTF management evaluate outcomes related to efficiency, effectiveness, satisfaction, and demographics to determine agency goals; Human Rights Committee reviews details of individual programming to ensure quality services. Detail provided on discharge process (can include case history review and exit interview). Application does not appear to identify specific measures for oversight or consumer goals.

UTILIZATION: Low turnover, examination of variances and outreach N/A. Resident bed funded by CCDDDB was filled in July 2011. Service compares to DHS CILA, governed by Rules 115 and 116; progress notes available at CCDDDB request.

Service Fees: Standard DHS-CILA calculation mentioned. CCDDDB to pay a fee (\$104.11) per day of service, compares to lower of recent DHS awards. Bed-hold policy is the same as Illinois DHS. Policy is on file at CCDDDB office.

Staff Comment: DHS formula for Rent Contribution (RC) is Resident's Total Unearned Income (UI) minus \$50.00, plus the difference of their Earned Income (EI) minus \$30.00.

CCDDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes.

Consumer advocacy and family support organizations: No.

Access to DD Information, New Families & Rural: Yes, for potential candidates.

Gaps in Core Services related to state cuts: Yes.

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes

Consumer directed Services: Yes, wrt consumer ISP

CCMHB/CCDDDB MOU Compliance: Yes

Budget-Program Connectedness: Revenue form may be incomplete

Medicaid Participation/PUNS enrollment: DHS CILA is a Medicaid waiver program/No

Technical Criteria:

Application Minimal Compliance /Responsiveness: Yes. Approach/Methods: Best practices only.

Innovation: Best practices only. Staff Credentials: Yes - DHS training for all, licensed RN, QSP certifications. Application Quality: Moderate compliance.

Staff Comment: Agency provides services statewide; five person board does not currently include a resident of Champaign County though efforts to recruit one are underway.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Community Choices, Inc.

Program Name: Customized Employment

Type of Contract: Grant format requested

Financial Information:

PY12 CCDDDB Funding Request: \$30,000

PY12 Total Program Budget: \$32,500

Current Year Funding – (PY11): \$30,000

Proposed Increase (Decrease) – PY11 vs. PY12: \$-0-

Program Staff – CCDDDB Funds: 0.88 FTE

Total Program Staff: 0.88 FTE

Budget Narrative: Request for \$30,000 is 92% of program's total operating revenue, with other source being \$2,500 of anticipated total agency contributions (donations to be solicited). Agency budget includes \$8,640 from state (and therefore at risk), but none in this program's budget. Personnel form shows 2 part-time employment specialists and 1 half-time director, agrees with Expense form, salaries and benefits comprising 89% of the total request. Although percentages on Personnel Form appear not to match calculations, costs are assigned appropriately: 100% of direct personnel and 28% of director's salary are charged to this contract. Individuals with state funding for this service may contract separately with support workers of their choice. Other expenses are Consumables (2.5%), General Operating (3.6%), Occupancy (3.3%), and Local Transportation (1.4%). An expense of \$500 of professional fees/consultants line is for the benefit of individuals served by this program but is not charged to CCDDDB.

Reasonable Cost Standards:

"Reasonable costs" are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a "reasonable cost" limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 8%

Administrative Costs: % not calculated

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived XX

Audit in Compliance

Audit out of Compliance

Auditor Finding

Comments: \$2500 of the cost of audit for PY12 may be charged to the board. This total expense is included in the CCMHB funding request for CC's Self-Determination Support.

Target Population: Adults with disabilities seeking community customized employment or supported self-employment. Includes estimate that 90% of individuals with DDs are unemployed or underemployed.

Staff Comment: CCDDDB funding is to be used exclusively for the benefit of individuals with developmental disabilities.

Service Location/Demographics: Community employment opportunities in rural areas may be limited by fewer local businesses. Plan for services county-wide includes transportation reimbursement for employment support staff. Of six served in the first two quarters of FY11: 50% were from Urbana, and 1 from each of Champaign, St. Joseph, and Mahomet; 50% are female; all are between 19-59 and white; 1 is Hispanic.

Service Description/Type: Vocational Training. Staff have received training and technical assistance in Customized Employment by Griffin and Hammis, one of the developers of the process. Discovery – employment specialist supports identification of strengths, gifts, needs, desires of employment seeker; Job Skills Training - targets specific skills needed for employment desired; Matching Job Seekers and Employers – identification of potential employers, of employers' needs, and negotiation of employment contracts; Employment Support - initial supports/strategies, with changes as necessary to enhance performance, mediation, single contact at CC. Limited job coaching also available, moving toward natural supports. Self-Employment support - for those interested in creating a home business.

Access to Services for Rural Residents: Access is county-wide, driven by employment opportunities of interest to individuals.

Program Performance Measures:

ACCESS: Individuals involved with Self-Determination Support program, unemployed or underemployed, who express a desire to work in the community. Additional referrals from The Autism Program, RPC (Pre-Admission Screening/Independent Service Coordination), PACE, CU Autism Network, and Down Syndrome Network. Information about the program will also be available at presentations and events. A quantifiable measure for access is not described. Agency has submitted a Cultural Competency Plan. Zip code data will be collected.

CONSUMER OUTCOMES: Good detail. Measures are included for each phase of the program: 12 individuals to complete Discovery (10 in PY11); 8 will complete individualized Job Skills training (component new for PY12); Job Matching will result in 6 in paid and 4 in volunteer positions (PY11 measures of 5 and 3); Employment Support of problem solving for 10, onsite training for 6, and ongoing check-ins for 11 (PY11 - 10 problem solving, 5 onsite, no ongoing); and Self-employment support for 2 individuals to complete business plan and find potential funding (5 in PY11).

UTILIZATION: PY12 targets for 12 TPCs and 526 total service contacts; good detail on anticipated numbers of TPCs participating in each service activity and corresponding SC volumes. Fully staffed in September, program is on track to meet PY11 targets of 15 new TPCs (6 at midyear), 350 Service Contacts (97), and 4 CSEs (2).

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes

Consumer advocacy/family support organizations: Not directly, but parent group input is central, self-advocacy group a referral source, and family training is in budget.

Access to DD Information, New Families & Rural: Yes.

Gaps in Core Services related to state cuts: No.

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes, with respect to Cultural Competence Plan (benchmarks desirable).

Consumer directed Services: Yes. There is evidence in the application of efforts which align with the Blueprint for System Redesign in Illinois.

CCMHB/CCDDB MOU Compliance: Yes.

Budget-Program Connectedness: Yes.

Medicaid Participation/PUNS enrollment: No/No, but linkage with RPC's Pre-Admission Screening/Independent Service Coordination unit (responsible for PUNS updates)

Technical Criteria:

Application Minimal Compliance /Responsiveness: Yes. Approach/Methods: Yes.

Innovation: Yes. Staff Credentials: Yes - specialized training. Application Quality: High Compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Community Elements, Inc.

Program Name: Coordination of Services: DD/MI

Type of Contract: Grant format requested, a NEW initiative

Financial Information:

PY12 CCDDDB Funding Request: \$51,775

PY12 Total Program Budget: \$61,350

Current Year Funding – (PY11): N/A

Proposed Increase (Decrease) – PY11 vs. PY12: N/A

Program Staff – CCDDDB Funds: 0.91 FTE

Total Program Staff: 1.13 FTE

Budget Narrative: CCDDDB funds requested primarily for FT staff w experience in MH and DD. Other revenue to support this position is anticipated from Medicaid reimbursement. Personnel form associates to this budget 80% of Coordinated Services Clinician, 5% of Manager of Community Support, and small portions of admin (these are 14.7% of personnel costs charged to CCDDDB). Salaries plus Benefits comprise 83.7% of the total request. All other expense categories have an admin cost and some have allocated indirect costs: Consumables (w computer supplies & software), General operating (w cellphone), and Local Transportation are the next largest expenses, at 5.3%, 2.6%, and 2.5% of total request (for total agency budget, these are 2.6%, 2.1%, and 1.6%). Other expenses are Occupancy, Conferences/Staff Development (with training and Expo costs), Interest Expense, and Depreciation. Allocation method is described in Additional comments. Total agency budget has \$65,307 surplus, this program budget none.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 22%

Administrative Costs: % not calculated

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable XX

Audit Requirement Waived

Audit in Compliance

Audit out of Compliance

Auditor Finding

Target Population: Approx thirty-six adult residents of Residential Developers' Champaign County group homes have a mental health diagnosis and a developmental disability, and seven of these individuals were admitted directly from state operated facilities. Effective coordination across service providers is emphasized as it may reduce future admissions to state hospitals. Referrals will be accepted from mental health or developmental disabilities providers; emphasis on serving those with history of hospitalization, current participating DD residential setting (Residential Developers), or other living arrangement plus risk of hospitalization or homelessness if no adequate services/supports.

Service Location/Demographics: County-wide. Residential Developers facilities are situated throughout the region, including CU, Rantoul, St. Joseph, and Tolono, serving up to 64 consumers.

Service Description/Type: Coordinated Services Clinician (experience w both MI and DD services but unspecified credentials) will provide case identification, screening, direct services to consumer and family, coordination of inter-disciplinary staffing, technical assistance to professionals, treatment planning, and advocacy for those in need of coordinated services. Clinician will ensure that individual service needs receive priority in both systems of care. Community support, case management, and counseling by Clinician or other Community Elements providers. Medicaid and other insurance will be billed instead if services are eligible and consumers enrolled. (Staff comment: estimate of 20% billable to Medicaid may be conservative.) Clinician to serve as information source, coordinating staffing, promoting strength-based strategies, and providing training.

Access to Services for Rural Residents: Program service promotion through local advocacy organizations (NAMI, CU Autism Network, Parents of Adults with Disabilities, et al) in order to reach all eligible consumers and families. Linkage and services to 64 group home residents throughout Champaign County, some outside CU, as noted above. Staff Comment: RPC Pre-Admission Screening/Independent Service Coordination is responsible for linkage and referral for the region and would be a valuable partner.

Program Performance Measures

ACCESS: Community Elements utilizes an intake database to track referrals and service requests, date of first service, and speed of access. As part of the development process for Coordinated Services program, access data will be monitored as a measure of demand, efficient use of service capacity, and prioritizing consumers by need for service. A specific measure does not appear to be included. Zip code data collected will be collected. Demographics tracked on all who receive a service and on referrals when possible. Agency has submitted an updated cultural competence plan.

CONSUMER OUTCOMES: Program effectiveness will be monitored by: annual survey of family members' and residential/day program staff's impressions of client's functioning and effectiveness of these services; consumer satisfaction survey; satisfaction questionnaires to primary staff/organizations collaborating to serve this population. Specific measures do not appear to have been identified.

UTILIZATION: Medicaid-compliant records of all direct mental health services related to this program. Records of all referrals (regardless of disposition), technical assistance, interdisciplinary staffing, and community education contacts; data on numbers of TPCs with active service/treatment plans by DD and/or MH providers. Targets for 36 TPCs, 4 CSEs, and 50 SCs (not defined).

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes

Consumer advocacy and family support organizations: No.

Access to DD Information, New Families & Rural: Yes

Gaps in Core Services related to state cuts: No

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes, clear action plan.

Consumer directed Services: Strength based strategies will be promoted.

CCMHB/CCDDB MOU Compliance: Yes

Budget-Program Connectedness: Yes.

Medicaid Participation/PUNS enrollment: Yes/No

Technical Criteria:

Application Minimal Compliance /Responsiveness: Yes. Approach/Methods: No. Innovation: Yes.

Staff Credentials: Not defined. Application Quality: Moderate Compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Developmental Services Center (DSC)

Program Name: Family Development Center (FDC)

Type of Contract: Requested Grant Format

Financial Information:

PY12 CCDDDB Funding Request: \$381,435

PY12 Total Program Budget: \$767,560 projected surplus \$19,535

Current Year Funding (PY11): \$370,325 (see BN analysis for PY11 shifts)

Proposed Change in Funding – PY11 vs. PY12: \$11,110

Program Staff – CCDDDB Funds: 5.37 FTE (4.2 Direct plus 1.17 Indirect)

Total Program Staff: 10.49 FTE (8.23 Direct plus 2.26 Indirect)

Budget Narrative: *Initial PY11 allocation of \$470,325 was reduced by \$100,000, redirected to DT-ES contract, per 10/26/10 contract amendments; plans were revised to reflect shifts, including FTEs associated with each program.* CCDDDB funding request will support 49% of total program budget and CCMHB, 28% (as in PY11). Other **revenue** sources are estimates, some allocated: United Way, DHS training reimbursements, Early Intervention (EI) reimbursements (16%), Interest Income; Third Party Payments and Misc (last two may require explanation). **Personnel** form shows those portions of indirect staff (from 1% to 11% of 22 positions) and 11 direct staff servicing this contract: 51% of 4 Child Development Specialists, a Screening Coordinator, Office Manager, and Program Director, 38% of a Speech/Language Pathologist, 5% of 2 RNs, and 15% of Vice President. **Expenses** include: Payroll taxes/benefits and Salaries (72% of total request), Professional Fees (6.2%), Consumables, General Operating, Occupancy (5.7%), Staff Development, Transportation (3.7%), Specific Assistance, Equipment Purchases, Lease/Rental (5.3%), Membership Dues, Interest Expense, Misc, and Depreciation. Budget Narrative describes each and relates changes from PY11 levels to 3% wage increase, 10% benefits cost increase, increase in interest expense due to borrowing on line of credit. Allocation method included. Total agency has \$493,856 deficit (4%), total program a projected surplus of \$19,535. Program plan does not specify how many of total individuals served are supported by CCDDDB funds alone, though some have EI funding (16% of total program revenue).

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 24%

Administrative costs: % not calculated

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived

Audit in Compliance XX

Audit Not in Compliance

Target Population: Children birth to five, with or at risk of developmental disabilities/delays, and their families. Statewide and regionally, 3-4% of children 0-3 are enrolled in Early Intervention (those with a 30% delay in one or more areas or an identified disability or prematurity); estimates of underserved or unidentified children much higher. Emphasis on early identification, family-directed intervention, preserving range of services and coordination across providers. Service enhancements of family support/education, child care consultation, and filling gaps for underserved populations.

Service Location/Demographics: All of Champaign County: center is in Champaign; home based services, including rural communities. Of 850 total served in PY10, 41.6% were from Champaign, 22.7% Urbana, 11.9% Rantoul, 23% other Champaign County, and 0.7% not CC. (In PY09, total program served 28% rural CC.) Of CC residents, 45% were white, 26% African American, 5.3% Asian/PI, 7.9% Hispanic/Latino, and 15.4% Other. 59% were male.

Service Description/Type: Comprehensive Services for young children. Coordinated, home-based, family centered array of services, evidence-based/best practices. For children and families to experience uninterrupted, comprehensive services, the FDC maximizes state funds for comprehensive assessment services, developmental, occupational, and physical therapies, and parent-child developmental play groups. CCDDDB/CCMHB funding supports all of screening, child care consultation, PLAY (Play and Language for Autistic Youngsters) Project home consultation, and Family Resource Center (books, toys, and sensory materials lending libraries). Family-driven intervention plans build on strengths and resources of child, family, and community. Detail on education, specialized training, certification, and/or licensure of staff. **Staff Comment:** care should be taken to avoid using CCDDDB funds for those eligible to participate in any such program conducted under Article 14 of the School Code.

Access to Services for Rural Residents: County-wide. Comprehensive screening and travel reimbursement for therapists (geographic areas assigned) permit service to over 20 rural communities. School and community screening events held with rural school coops, child care centers, and churches.

Program Performance Measures

ACCESS: Initial assessments completed within 15 days of evaluation - actual outcomes of 83% in PY10 and 98% mid-year PY11 against targets of 90%. Referrals come from a variety of sources, are responded to immediately, assessment within two weeks. Natural supports (extended family, medical and faith-based community resources, and peer groups), culturally appropriate toys and materials, translation services, and family input in service planning contribute to culturally appropriate services. All are informed of PUNS. Zip code data will be collected. An updated agency cultural competence plan submitted.

CONSUMER OUTCOMES: Consumer satisfaction target 90% was exceeded in PY10, no data for current year; satisfaction surveys mailed to current families at random and to exiting families; feedback sought on child-centered, family-focused intervention, culturally responsive interactions. Developmental

outcomes target 90% exceeded in PY10 and PY11; child progress is evaluated using standardized tests, repeated at specific intervals, not more than six months. Each individual service plan includes goals and strategies for services plus outcome measures.

UTILIZATION: Continued increase in numbers of children/families receiving services, particularly in child care center consultations and PLAY Project. Collaborations with other agencies for screening and assessment increased as well. In PY10, there were 850 total TPCs (879 in PY09, 927 in PY08), exceeding the target of 700; PY11 target of 700 against projected actual of 681; PY12 target will again be 700. Zeroes are reported for NTPCs each year, although they are described in plan narrative as children served in child care settings which receive consultations. SC target of 80 (developmental evaluations) was exceeded in PY10 (241 actual) and increased to 150 for PY11 (projected actual of 138); PY11 target will also be 150. CSE (child care consultation) target of 120 was exceeded in PY10 (actual 589) and again PY11 (projected actual 475) and will be adjusted to 300 for PY12.

CCDDB Priorities:

Primary Decision Support Criteria:

Priority Populations: Yes

Consumer advocacy and family support organizations: No.

Access to DD Information, New Families & Rural: Yes.

Gaps in Core Services related to state cuts: No

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes

Consumer directed Services: Yes. There is evidence of efforts which align with the Blueprint for System Redesign in Illinois.

CCMHB/CCDDB MOU Compliance: Yes

Budget-Program Connectedness: Yes

Medicaid Participation/PUNS enrollment: No/Yes

Technical Criteria:

Application Minimal Compliance/Responsiveness: Yes. Approach/Methods: Best practices. Innovation: Yes. Staff Credentials: Yes - various. Application Quality: High Compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Developmental Services Center

Program Name: Apartment Services

Type of Contract: Requesting Grant format

Financial Information:

PY12 CCDDDB Funding Request: \$411,328

PY12 Total Program Budget: \$523,004 surplus of \$2,245

Current Year Funding – (PY11): \$399,348 (see budget analysis for PY11 shifts)

Proposed Increase (Decrease) – PY11 vs. PY12: \$11,980

Program Staff – CCDDDB Funds: 8.95 FTE (7.96 direct + .99 indirect)

Total Program Staff: 11.21 FTE (10.04 direct + 1.17 indirect)

Budget Narrative: *Initial PY11 contract for \$549,348 was reduced by \$150,000, redirected to DT-ES, per 10/26/10 contract amendment; plan forms were revised to reflect shifts, including FTEs assigned to program.* Request is for CCDDDB funds to support 78.6% of total program (78% in PY11). Other **revenue** sources include United Way (3.7% total program), DHS FFS reimbursement for services (14%), and training, allocated amounts of Interest Income, Other Third Party Payments, and Misc (may need explanation of the latter two). **Personnel** form shows portions of indirect staff (1% to 6% of 22 positions) and direct staff assigned to program: 6% of 2 RNs, 36% RN Coordinator, 79% of 8 Apartment Services Case Managers, 64% of AS/Respite Coordinator, 52% of Program Director. Budget Narrative relates position responsibilities to this program. **Expenses:** Payroll taxes/benefits and Salaries comprise 84.4% of request. Transportation is the next largest line, at 6%; travel to consumer homes and appointments is central to program. Line items are explained, based on PY11 levels and some allocated, with changes related to 3% wage increase, 10% benefits cost increase, and interest expense increase due to borrowing on line of credit. Total agency has \$493,856 deficit (4%), total program a surplus of \$2,245. Program plan indicates that some served by this program have DHS FFS (reimbursements estimated at 14% total program budget, at risk due to state budget), does not specify how many of unduplicated individuals in program are served by CCDDDB funds alone.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative

costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 30%
Administrative Costs: % not calculated

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable
Audit Requirement Waived
Audit in Compliance XX
Audit Not in Compliance
Auditor Finding

Target Population: Individuals with developmental disabilities who are open with the agency and desire support to maintain their independence in the community (and without it would be unable) and benefit from less supervision than in a group home. Two types of setting: HUD subsidized secured apartment building with 24 units; sites throughout the community.

Service Location/Demographics: Supported HUD facility in Urbana (24 tenants) or apartment/home of consumers' choice in the community. Of 65 served so far in PY11, 57% reside in Urbana, 35% in Champaign, 1.5% Rantoul, and 6% other CC; 57 are aged 19 to 59, and 8 are 60+; 53 are white, 9 African American, 2 Asian/PI, 1 Other; 37 are male.

Service Description/Type: Residential. Specific activities are guided by consumer choice, detailed in individual service plans with formal goals reviewed monthly. Services are one-on-one, in consumer's home or in community, and may include: money management, grocery shopping, cooking, cleaning, self-administration of med and other medical/dental care, accessing community activities, riding MTD, and service linkage. HUD building has overnight staff, and qualified emergency response staff are available when agency is closed. Person-Centered-Planning focuses on hopes, dreams, and desires rather than 'needs or deficits' of individuals. Program seeks to assist individuals in acquiring skills for independence in safe environments, provide ongoing support where needed, and increase support when skills may be compromised by a health condition. Staff training: 120 hours mandated by DHS plus Crisis Prevention and Intervention.

Access to Services for Rural Residents: Access to the program is based on needs of individuals open with agency; wait lists maintained; no detail on selection process.

Program Performance Measures:

ACCESS: Agency intake process and measures included, targets met each year although admissions process is changing in response to limited capacities. Includes descriptions of: referral for PUNS enrollment, collaboration on community events, networking to improve service to culturally diverse populations. A specific access measure related to

this program is not identified. Agency has submitted a revised cultural competency plan. Zip code data will be collected.

CONSUMER OUTCOMES: Demand for such community-based services is reflected in PUNS data, but state is not investing. Measure for those participating in AS program to maintain or make progress in independent living skills objectives: targets for PY09, PY10, and PY11 were 80% with actual outcomes 79%, 89%, and 72% (midyear). Staff monitor progress monthly and revise Individual Service Plans as needed and as consumers' preferences change; Person-Centered Planning model used.

UTILIZATION: In PY10, there were 65 continuing TPCs and no new. PY11 targets of 67 continuing and 3 new against projected actual 65 and 0. PY12 targets adjusted to 65 and 3. Commitment to maintain levels of service for those in the program is supported by report of service hours in addition to TPCs.

Service Fees: Individuals residing in C-U Independence (HUD) Apartments pay rent based on income, per HUD requirements. Rates are adjusted semi-annually according to fluctuation in income.

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes

Consumer advocacy and family support organizations: No.

Access to DD Information, New Families & Rural: unclear

Gaps in Core Services related to state cuts: Yes (loss of DHS grant)

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Weak rural

Consumer directed Services: Yes. There is evidence in the application of efforts which align with the Blueprint for System Redesign in Illinois

CCMHB/CCDDB MOU Compliance: Yes

Budget-Program Connectedness: Yes

Medicaid Participation/PUNS enrollment: No/Yes

Technical Criteria:

Application Minimal Compliance /Responsiveness: Yes. Approach/Methods: No.

Innovation: No. Staff Credentials: Yes wrt staff training. Application Quality: Moderate Compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Developmental Services Center

Program Name: CILA

Type of Contract: Grant format requested

Financial Information:

PY12 CCDDDB Funding Request: \$158,620

PY12 Total Program Budget: \$2,217,296 deficit of \$293,324

Current Year Funding – (PY11): \$154,000

Proposed Increase (Decrease) – PY11 vs. PY12: \$4,620

Program Staff – CCDDDB Funds: 3.24 FTE (2.95 Direct plus 0.29 Indirect)

Total Program Staff: 53.23 FTE (49.13 Direct plus 4.1 Indirect)

Budget Narrative: Revenue enhancement. CCDDDB request is to support 7.2% of total program (last year 6.4%). Other **revenue** items include DHS FFS reimbursement for client services (74%) and staff training, Client payments, and allocated amounts of Interest Income, Third Party Payments, and Misc (may need explanation of the latter two). **Personnel** form shows those portions of indirect staff (1% of 15 positions and 2% of 7) and direct staff assigned to contract: 2% of Program Director, 1% of Vice President, 2% of 2 RNs, and 6% of 7 House Managers (1 vacancy), a Developmental Instructor, 36 Residential Instructors, 2 Consumer Appointment Facilitators, and 3 Residential Program Administrators. Budget Narrative relates position responsibilities (all but the DI) to this program. 75.7% of the requested funding supports salaries and benefits. Other **expenses** include: Professional Fees/Consultants (3.6% of the request), consumables (4.8%), general operating, occupancy (3.3%), staff development, transportation (1.6%), rental/lease (6.2%), membership fees, interest expense, miscellaneous, and depreciation; expense items are based on PY11 actual, many allocation, and increases are related to 3% salary increases, 10% increase in cost of benefits, and interest expense due to borrowing on line of credit. Total agency budget has a 4% deficit, total program 13% (\$293,324). 75% of program's total operating revenue is state funding and therefore at risk for further reductions and delayed payment.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 37.2%

Administrative costs: % not calculated

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived

Audit in Compliance XX

Audit Not in Compliance

Target Population: Adults who have developmental disabilities and who require 24-hour support for daily living. At capacity, DSC CILAs serve 47 residents, all of whom now receive FFS state funding.

Service Location/Demographics: Four CILA homes in Champaign, two in Urbana, and one in Rantoul. Of 49 served in PY10, 27 resided in Champaign, 13 Urbana, 9 in Rantoul. 26 were male. 47 were white, 1 African American, 1 Hispanic/Latino. 46 were aged 19 to 59, and 3 were over 60.

Service Description/Type: Residential. Ongoing support, supervision, training in daily living, community integration, economic self-sufficiency, and social/interpersonal relationships. Includes coordination of medical, dental, and eye exams, medication reviews, self-medication assessment. Residents identify goals consistent with their preferences and interests. Direct support staff complete 120 hours of required training plus Crisis Prevention and Intervention training, instruction specific to medication and physician ordered diets. Residential Program Administrators and Director have Bachelor's degrees; medical personnel are RNs.

Access to Services for Rural Residents: Referrals are accepted from individuals with developmental disabilities residing throughout Champaign County. Staff comment: perhaps due to very low turnover, no detail on outreach/networking.

Program Performance Measures:

ACCESS: Agency intake process and measures included, targets met each year although admissions process is changing in response to limited capacities. PUNS referrals are made. A specific access measure related to this program does not appear to be included. Discussion of agency efforts to increase access to underserved populations; a revised agency cultural competency plan has been submitted. Zip code data will be collected.

CONSUMER OUTCOMES: Measure for CILA residents to maintain/make progress in independent living skills objectives has target of 70%; outcome 87% in PY10 and 70% mid-year PY11. Person-Centered Planning model is described as focusing on consumers' hopes, dreams, and desires rather than on needs or deficits. Agency promotes self-advocacy and self-direction in service choices.

UTILIZATION: PY11 target for 0 New TPC was exceeded (1 actual) as in PY10, when there were 2 new (against target 1). PY12 target is 0, as there is no expansion of capacity, and movement in this program is traditionally very minimal. Continuing TPCs at 47 for each year.

Service Fees: Plan narrative says no, but residents contribute toward their housing based on an income means test/sliding scale formulation for DHS CILA. Resident contribution present in Revenue form.

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes

Consumer advocacy and family support organizations: No.

Access to DD Information, New Families & Rural: through another program

Gaps in Core Services related to state cuts: Yes

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes

Consumer directed Services: Yes. There is evidence in the application of efforts which align with the Blueprint for System Redesign in Illinois.

CCMHB/CCDDB MOU Compliance: Yes

Budget-Program Connectedness: Yes. As in PY11, quarterly personnel updates may be used to track shifts as vacancies are filled.

Medicaid Participation/PUNS: (DHS CILA is a Medicaid-waiver program)/Yes – referrals made.

Technical Criteria:

Application Minimal Compliance /Responsiveness: Yes. Approach/Methods: Best practices. Innovation:

Best practices. Staff Credentials: Yes – staff training, RNs. Application Quality: Moderate Compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Developmental Services Center

Program Name: Client/Family Support Services (AKA “Case Management”)

Type of Contract: Grant format requested

Financial Information:

PY12 CCDDDB Funding Request: \$396,212

PY12 Total Program Budget: \$518,910 program deficit \$99,930

Current Year Funding – (PY11): \$384,672

Proposed Increase (Decrease) – PY11 vs. PY12: \$11,540

Program Staff – CCDDDB Funds:	7.74 (6.87 Direct plus .87 Indirect)
Total Program Staff:	12.10 (10.73 Direct plus 1.37 Indirect)

Budget Narrative: Request is for CCDDDB funds to support 76.4% total program. Other **revenue** sources include DHS reimbursement for client services (22%) and staff training, allocated amounts of Interest Income, Other Third Party Payments, Misc (may need explanation of the latter two). Program serves small number of residents of Ford County, but no FCMHB revenue is allocated to this program. **Personnel** form shows portions of indirect staff (1% to 6% of 22 positions) and direct staff assigned to program: 6% of 2 RNs, 35% RN Coordinator, 32% of Clinical Coordinator, 64% of 9 Case Coordinators, 32% of Program Director. Budget Narrative relates position responsibilities to the program. **Expenses:** Payroll taxes/benefits and Salaries comprise 86% of request, Transportation 27%, Occupancy 23%, Lease/Rental 19.7%. These and smaller expense items are explained, some allocated, with changes related to 3% wage increase, 10% benefits cost increase, and interest expense increase (due to borrowing on line of credit). Total agency budget has a deficit (4%), while total program deficit is \$99,930 (19%). Although the presence of DHS FFS reimbursements (22% of revenue, at risk due to state budget) is for service to consumers in waiver programs, program plan does not indicate how many consumers are served by CCDDDB funds exclusively.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 26%
Administrative Costs % not calculated

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable
Audit Requirement Waived
Audit in Compliance XX
Audit Not in Compliance
Auditor Finding

Target Population: Individuals with a developmental disability who, due to this DD, require services to enhance or maintain independence.

Service Location/Demographics: Agency office in Champaign, appointments county-wide. Of 460 served by the program in the first half of PY11, 41% were from Champaign, 25% Urbana, 6.9% Rantoul, 20% Greater CC, and 6.7% outside CC. Of the 429 CC residents, 2.1% were aged 6 or younger, 15% were between 7 and 18, 75% between 19 and 59, and 7.7% were 60+; 82% are white, 14% Black/AA, 2.3% Asian/PI, and 1.6% Other; 1.4% Hisp/Latino; 58.5% were male.

Service Description/Type: Case Management. Intake screening, advocacy, assessment, Information & Referral, linkage and advocacy, 24 hr crisis intervention, intermittent direct services. Case Coordinators monitor treatment, planning, and implementation through individualized service plan development, assist with medical, legal, financial matters, serve as Rep Payees (for Social Security benefits), work with interdisciplinary team. Consumer strengths, preferences, and needs define level of support; some components of ISP process are mandated by DHS. Person-Centered-Planning focuses on hopes, dreams, and desires rather than 'needs or deficits' of individuals; self-advocacy emphasized. After completing 120 hours of mandated direct support training, Case Coordinators complete 40 QSP instruction hours and are approved by DHS.

Access to Services for Rural Residents: Through IEPs and MDCs county-wide and collaboration with provider groups. Information is also relayed by professionals/parents.
Staff Comment: of particular interest to the CCDDDB is the provision of services described above, such that IEP support may be best coordinated with PAS/ISC, which has a formal role.

Program Performance Measures:

ACCESS: Although referring to total agency, the measure and description of process are program-specific, as CFSS is the entry point and facilitates intake/admissions. Within 30 days of follow-up contact/interview and receipt of eligibility documentation, an individual's case is presented to Admissions Committee for review: target of 90% was exceeded in PY10 and PY11. Discussion of state funding impact, referrals for PUNS

enrollment, outreach and networking efforts. An updated agency Cultural Competency Plan has been submitted. Zip code data will be collected.

CONSUMER OUTCOMES: Description of growing demand for community services in spite of shrinking state support. CFSS participants' satisfaction with program: PY10 actual outcome 97% against target 90%; survey method not included. ISPs filed within 14 days of annual review: PY10 actual outcome 86% against 80% (mid-year PY11 same). Person-centered planning assessments on file at least 30 days prior to annual review: PY10 outcome 85% against target 80%; mid-year PY11 actual is 90%.

UTILIZATION: TPCs are those formally open in DSC programs. In PY10, there were 470 continuing and 3 new; in PY11 target of 455 continuing TPCs is on track (does not appear to match zip code and demographic reports), actual new TPCs will fall short of target 10. PY12 targets will be adjusted to 440 continuing and 10 new TPCs. There will be PY12 targets of 100 Service Contacts (intake referrals) and 3 CSEs. Continued report of service hours demonstrates program impact, no formal target.

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes

Consumer advocacy and family support organizations: No.

Access to DD Information, New Families & Rural: Yes.

Gaps in Core Services related to state cuts: Yes

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes

Consumer directed Services: Yes. There is evidence in the application of efforts which align with the Blueprint for System Redesign in Illinois.

CCMHB/CCDDB MOU Compliance: Yes

Budget-Program Connectedness: Yes.

Medicaid Participation/PUNS enrollment: No/Yes

Technical Criteria:

Application Minimal Compliance /Responsiveness: Yes. Approach/Methods: Yes.

Innovation: No. Staff Credentials: Yes – staff training and certification detailed.

Application Quality: High Compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Developmental Services Center

Program Name: Clinical Support Services

Type of Contract: Grant format requested

Financial Information:

PY12 CCDDDB Funding Request: \$177,966

PY12 Total Program Budget: \$179,185 deficit of \$10,707

Current Year Funding – (PY11): \$172,783

Proposed Increase (Decrease) – PY11 vs. PY12: \$5,183

Program Staff – CCDDDB Funds: 1.32 FTE (1.10 Direct + .22 Indirect)

Total Program Staff: 1.40 FTE (1.18 Direct + .22 Indirect)

Budget Narrative: CCDDDB funds support 99% of program; other **revenue** sources include DHS training reimbursements, Other Third Party Payments, Interest Income, and Misc, allocated but not entirely explained in Budget Narrative. **Personnel** form shows those portions of indirect staff (1% of 22 positions) and direct staff servicing contract: 46% of Clinical Coordinator, 41% of a Program Director, 9% of 2 Certified Occupational Therapy Assistants, and 5% of Vice President. Budget Narrative relates staff responsibilities to this program. **Expenses:** Payroll taxes/benefits and Salaries comprise 42.7% of request. Professional fees are 52.5% of request, for purchasing services for clients as described in the plan narrative. Expense items are clearly explained, some allocated, and changes from PY11 are related to 3% wage increase, 10% benefits cost increase, increase in interest expense (due to borrowing on line of credit). Total agency budget has a deficit of \$493,856 (4%) and total program \$10,707 (6%).

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 20.1%

Administrative costs cannot be determined.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived
Audit in Compliance XX
Audit Not in Compliance

Target Population: Individuals aged four and older who have developmental disabilities.

Service Location/Demographics: In-center in Champaign or at consultants' offices in the community. Of those who continued into PY11, 47.5% reside in Champaign, 27% in Urbana, 11.7% Rantoul, 10% other, and 4% out of county. Of the 179 reported in PY10 demographics, 172 were between 19 and 59, and 7 over 60; 151 were white, 22 African/American, 0 Asian/PI, 1 Hispanic/Latino, and 5 Other; 100 were male.

Service Description/Type: Purchase of psychological and psychiatric assessments, medication review, crisis intervention, interdisciplinary team consultation with Licensed Clinical Psychologist, Behavioral Consultation, Counseling, Occupational Therapy, Speech Language Pathology, and Physical Therapy. Licensed clinicians are consultants and work with consumers' support teams. Interventions include Cognitive Behavioral Therapy, Exposure/Response Prevention, Art Therapy, Social Skills training. **Staff Comment:** care should be taken to avoid using CCDDDB funds for those eligible to participate in any such program conducted under Article 14 of the School Code.

Access to Services for Rural Residents: Primary outreach is through Client/Family Support and other staff attendance at IEPs and MDCs county-wide, secondarily through information sharing between parents and professionals and community events. **Staff Comment:** of particular interest to the CCDDDB is the provision of services as described above, so that IEP support may be best coordinated with PAS/ISC, which has a formal role.

Program Performance Measures:

ACCESS: Good detail on how the program responds to referrals, which can come from consumers, family members, or teams. For PY12, program-specific goal for monitoring participation through billings and clinical notes, is described but does not appear to include a quantifiable target or clear relation to access to the program, may be more valuable as a measure of utilization. Continued emphasis on documentation of disability, medical history, and preferences of individuals referred to agency, and how these support effective service initiation and planning. Agency has submitted an updated cultural competency plan. Zip code data will be collected.

CONSUMER OUTCOMES: In PY10, consumer satisfaction target of 90% vs. outcome 97%; PY11 data not yet available. Satisfaction survey mailed randomly to consumers; their input is also requested at individualized annual planning meetings. This measure does not appear to be specific to the program but rather agency-wide. Positive impact of individual/family preference on outcomes is noted, but application does not appear to include a related measure, which would be of interest.

UTILIZATION: New and Continuing TPCs for PY10 totalled 197 (largely for assessments) exceeding the target of 130 (80 continuing and 50 new). PY11 target of 130 (again 80 and 50) anticipated an increased need for long-term support, as was the trend in PY09, and actual outcomes are a higher continuing total (101) and lower new (33). PY12 targets for 90 continuing TPCs and 30 new TPCs (120 total). There was no PY10 NTPC target, but a total actual of 8; in PY11, 4 continued (target of 1) and no

new are anticipated (target 3); PY12 NTPC targets remain 1 continuing and 3 new. There was no **Service Contact** target in PY10 but 159 actual; PY11 actual will fall short of target of 100; PY12 target adjusted to 50. **CSE** target of 3 was met in PY10, not in PY11 (2 actual), and will continue in PY12.

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes
Consumer advocacy and family support organizations: No.
Access to DD Information, New Families & Rural: Yes
Gaps in Core Services related to state cuts: No

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes
Consumer directed Services: Yes. There is evidence in the application of efforts which align with the Blueprint for System Redesign in Illinois
CCMHB/CCDDB MOU Compliance: Yes
Budget-Program Connectedness: Yes.
Medicaid Participation/PUNS enrollment: No/No

Technical Criteria:

Application Minimal Compliance/Responsiveness: Yes. Approach/Methods: Yes. Innovation: Yes. Staff Credentials: Yes. Application Quality: Moderate Compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Developmental Services Center (DSC)

Program Name: Developmental Training/Employment Services

Type of Contract: Grant format requested

Financial Information:

PY12 CCDDDB Funding Request: \$1,202,014

PY12 Total Program Budget: \$7,042,763 program deficit \$275,552

Current Year Funding – PY11: (see Budget Narr analysis for PY11 shifts) **\$1,167,004**

Proposed Change from PY11 to. PY12: \$35,010

Program Staff – CCDDDB Funds:	15.56 FTE (13.53 Direct plus 2.03 Indirect)
Total Program Staff:	96.01 FTE (83.86 Direct plus 12.15 Indirect)

Budget Narrative: Revenue Enhancement. *Initial PY11 allocation \$917,004 was increased by \$100,000 redirected from FDC and \$150,000 from Apartment Services, per 10/26/10 contract amendments; plans were revised to reflect shifts in FTEs associated with each program.* CCDDDB funding request will support 17% of total DT-ES program (16.7% in PY11, and in PY10 25% of DT and 12% of ES) and CCMHB 4.2% (4.1% in PY11, and in PY10 1.17% of DT and 7% of ES); other **revenue** comes from United Way, contributions, Ford County MHB, DHS FFS (23% of total program and 30% of total agency budget, vulnerable due to state budget crisis), HFS Purchase of Care (smaller share but also vulnerable), Title XX-DFI, DRS Program Service Fees, Sales of Goods & Services (\$2m or 33% total program), Interest Income, Rental Income, Other Third Party Payments and Misc. Estimated revenue amounts are explained in Budget Narrative. **Personnel** form shows those portions of indirect staff (from 3% to 12% of 24 positions) and 87 direct staff positions servicing this contract: 3% of 1 Vice President, 7% of 2 RNs, 8% of Account Mgr, 17% of Operations Mgr, 17% of Transportation Coordinator and 2 drivers, 16% of 5 drivers, 17% of a Program Director, 16% of another PD, and 8% of another, 17% of Supported Employment Supervisor, 16% of Vocational Evaluator and Vocational Supervisor, 16% of 4 Community Employment Specialists (1 vacant) and of 2 Employment Specialists (1 vacant), 17% of three and 16% of nine Production Crew Leaders, 16% of 2 Production Workers, 16% of 35 Developmental Instructors (3 vacant), 16% of 4 DT Mgrs, 16% of 6 Employment Counselors (1 vacant), 17% of 1 Employment Program Mgr, and 15% of 2 COTAs. Budget Narrative relates position responsibilities to this program and describes allocation method. **Expenses** include: Payroll taxes/benefits and Salaries (52% of total request), Professional Fees, Client Wages (8.3%), Consumables, General Operating, Occupancy (4.8%), Staff Development, Transportation (5.1%), Specific Assistance, Equipment Purchases, Lease/Rental (4.1%), Membership Dues, Interest Expense, Cost of Production (18.5%), Miscellaneous, and Depreciation. Budget Narrative describes each, many similar to PY11 level, and relates changes from PY11 levels to 3% wage increase, 10% benefits cost increase, increase in interest expense due to borrowing on line of credit. Total agency has \$493,856 deficit (4%), total program \$275,552 (4%). Program plan does not specify how many of total individuals served are supported by CCDDDB funding alone.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 31.6% (as for total agency)
Administrative costs % not calculated

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived

Audit in Compliance XX

Audit Not in Compliance

Target Population: Adults with developmental disabilities, with wide ranging abilities and support needs. Increase in health crises and issues related to aging among this population, along with greater prevalence of diagnosis of Autism Spectrum Disorder (ASD), has influenced the types of support offered, including staffing patterns and relationship between DT and vocational settings. Impact on families also noted.

Service Location/Demographics: At main and production facilities in Champaign and Rantoul; volunteer, supported, and competitive employment placements in C/U and Rantoul. Of 327 served in PY10, 42% were from Champaign, 23% Urbana, 10% from Rantoul, 20% Other CC, and 5% not CC. Of the 301 Champaign County residents: 90.3% were aged 19 to 59, and 9.6%; 81.7% were white, 13.6% Black/AA, 2.6% Asian/PI, 1% Hispanic/Latino, and 1% Other; 54.5% were male.

Service Description/Type: Adult Day Programming; Vocational. Low to High Intensity. Consumer preference determines location, type, schedule. Range of activities includes individualized exercise, computer lab, art room, Prompting Theater and Parkland Pops, community volunteering, and vocational training to self-advocacy groups, job skills development, autism/social skills support, sign language classes, vocational evaluation, and personalized job development and coaching. Staff training includes 120 hours mandated by DHS plus Crisis Prevention and Intervention, safe lifting, and inservices (e.g., Person-Centered-Planning, Total Communication, Occupational Therapy, Supported Employment, Community Employment, and Community Integration.) Certified Occupational Therapy Assistants attend workshops and inservices. Job development staff certified in community-based employment strategies through Rehabilitation Continuing Education Programs.

Access to Services for Rural Residents: Staff attend IEPs county-wide, participate in transition workshops in these outlying areas, and provide tours of Champaign and Rantoul sites to members of the Rural CC Special Ed Coop and rural residents. Transportation services to Tolono, Philo, St.

Joseph, Mahomet, Ludlow, and areas between. 20% of program participants are residents of rural CC. Staff Comment: of particular interest to the CCDDDB is the provision of services as described above, so that IEP support may be best coordinated with PAS/ISC, which has a formal role.

Program Performance Measures

ACCESS: Agency intake process and measures included, targets met each year; admissions process affected by limited capacities. A specific access measure related to this program does not appear to be identified. Agency has submitted a revised cultural competency plan. Zip code data will be collected. Referrals are made for PUNS enrollment.

CONSUMER OUTCOMES: Consumer satisfaction: PY10 target of 90% vs. DT outcome 100% and ES 96%. Target for PY11 is also 90%; satisfaction survey mailed randomly to consumers; input is also requested at individualized annual planning meetings. DT consumer participation in independent community-based vocational or volunteer work setting: PY10 and PY11 target of 45% was exceeded, at 51% PY10 and 54% mid-yr PY11. Community Employment consumers to increased wages, benefits, or responsibilities: PY10 target 20% exceeded at 32%; FY11 target also 20%. DT consumer participation in monthly community-based activity: PY10 target of 90% met, and PY11 of 90% exceeded with mid-year outcome 95%. Emphasis on person-centered planning and consumers' strong interest in community based recreation and employment. In PY10, DT consumers volunteered with 12 organizations and worked in 4 (C-U and Rantoul) community settings, and some marketed their art/crafts.

UTILIZATION: Plan to serve **320** unduplicated TPCs. TPC includes those open with DT, Vocational Evaluation, Vocational Development, Regular Work, or Supported Employment. PY10 target for Continuing TPCs was 326, with actual 314; PY11 target 320, actual ~306; PY12 target lowered to **310**. New TPC target of 14 for PY10 was not met (actual= 8), and of 10 for PY11 will also not be met (actual 4) but will remain at **10** for PY12. NTPC are students with school support in DSC site ("Vocational Experience") or individuals in 3-day voc screening or those referred through DRS for temporary support. PY10 target of 2 was exceeded (4) and PY11 target of 4 is also on track (8); NTPC target for PY12 is increased to 5. Service Contact target of 10 and Community Service Events target of 5 were exceeded in PY10 (17 and 14) and continued for PY11, anticipated to achieve 7 and 9 respectively. Both targets are adjusted to 8 for PY12. Staff Comment: Because program is described as responsive to varying intensity of service and increased support needs of some, an additional utilization measure for total hours of service, as collected for DHS reporting, is desirable.

CCDDDB Priorities

Primary Decision Support Criteria

Priority Populations: Yes

Consumer advocacy and family support organizations: No.

Access to DD Information, New Families & Rural: Yes

Gaps in Core Services related to state cuts: Yes

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes

Consumer directed Services: Yes. There is evidence in the application of efforts aligned with the Blueprint for System Redesign in Illinois.

CCMHB/CCDDDB MOU Compliance: Yes

Budget-Program Connectedness: Yes. As in PY11, quarterly personnel updates may be used to track shifts as vacancies are filled.

Medicaid Participation/PUNS enrollment: No/Yes

Technical Criteria:

Application Minimal Compliance /Responsiveness: Yes. Approach/Methods: Yes, per CARF review.

Innovation: Yes, per CARF review. Staff Credentials: Yes wrt training and COTAs. Application

Quality: High Compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Developmental Services Center

Program Name: Individual and Family Support

Type of Contract: Grant format requested

Financial Information:

PY12 CCDDDB Funding Request: \$338,324

PY12 Total Program Budget: \$388,089 (FY12 \$399,290) projected deficit of \$33,633

Current Year Funding – (PY11): \$328,470

Proposed Increase (Decrease) – PY11 vs. PY12: (\$9,854)

Program Staff – CCDDDB Funds: 5.55 FTE (4.98 direct plus .57 indirect)

Total Program Staff: 6.97 FTE (6.22 direct plus .75 indirect)

Budget Narrative: CCDDDB funding request to support 87% of total program **revenue**; other sources include DHS FFS reimbursements for client services (17%) and staff training, allocated amounts of Interest Income, Third Party Payments, and Misc (the last two may require clarification). **Personnel** form shows those portions of indirect staff (1% - 4% of 22 positions) and direct staff charged to program: 80% of 5 Family Home Maintenance Technicians and Program Manager, 4% of Program Director, 5% of 2 RNs, and 4% of Vice President. Budget Narrative relates position responsibilities to this program. **Expenses:** Payroll taxes/benefits and Salaries comprise 61% of request. Professional fees are 15%, Specific assistance 11.6%, Transportation 2.1%; other expense items are clear, many allocated, changes from PY11 relate to 3% wage increase, 10% benefits cost increase, interest expense increase due to borrowing on the line of credit. The number of individuals supported exclusively by CCDDDB funding is not indicated. Total agency budget has a 4% deficit, total IFS program 8.7%.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 35%

Administrative costs: % not calculated.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived

Audit in Compliance XX

Audit Not in Compliance

Target Population: Children and adults with developmental disabilities, priority to those with significant behavioral, medical, training, or support needs. Prevalence of individuals with Autism Spectrum Disorders or Sensory Processing Disorders continues to increase in this program. Individuals and families can apply for funds and need not have open cases with agency.

Service Location/Demographics: All of Champaign County. Of those who continued into PY11, 39% reside in Champaign, 34% in Urbana, 2.4% Rantoul, 22% other, and 2% out of county. Of the 44 reported in PY10 demographics, 5 were under age 6, 3 aged 7 to 12, 7 aged 13 to 18, 27 between 19 and 59, and 2 over 60; 33 were white, 6 African/American, 1 Asian/PI, 2 Hispanic/Latino, and 2 Other; 30 were male.

Service Description/Type: Family Support. Consumer and family driven, individualized activities in community, in-center, in-home, or school related. Assessment, planning, direct staff support (hired by family or through agency), social skills training, emergency respite, therapy/equipment, minor home modifications, enhanced independent living skills. Benefits of social skills training and social skills/play group are highlighted. Since 2005, the program has responded to increased consumer/family demand for ongoing direct support rather than short term finite direct grant awards to consumers for interventions and supports, though some of these are still made. **Staff Comment:** care should be taken to avoid using CCDDDB funds for those eligible to participate in any such program conducted under Article 14 of the School Code.

Access to Services for Rural Residents: Communication among professionals & parents. Agency staff attend IEPs & MDCs countywide, the primary outreach to rural areas. **Staff Comment:** of particular interest to the CCDDDB is the provision of services as described above, so that IEP support may be best coordinated with RPC's Pre-Admission Screening/Independent Service Coordination unit, which has a formal role.

Program Performance Measures:

ACCESS: Agency intake process and measures included, targets met each year although admissions process is changing in response to limited capacities. PUNS referrals are made. A specific access measure related to this program does not appear to be included. Discussion of agency efforts to increase access to underserved populations; a revised (annually) cultural competency plan has been submitted. Zip code data will be collected.

CONSUMER OUTCOMES: In PY10, consumer satisfaction target of 90% vs. outcome 97%. PY11 outcome not yet available. Satisfaction survey mailed randomly to consumers; their input is also requested at individualized annual planning and advocacy group meetings. This measure does not appear specific to the program, but rather agency-wide. Successful choice driven outcomes are noted, with good detail on the range of supports, consultants, and staff training as they relate to responding to consumer/family preferences; IFS supports are critical to independence for some, therefore cost-

effective over long term. Increased demand for assistance with post-secondary education support for eligible young adults; other than emergency/critical cases, state is not investing in individual awards for community-based supports.

UTILIZATION: Actual service contacts will have exceeded the target of 15 for three years; target of 15 continues for PY12. Community Service Events have also met or exceeded targets each year, with 2 in PY11; PY12 target will be 3. **TPC** = individual open with agency and IFS. There were 30 continuing TPCs in PY08 and PY09 and 31 in PY10; PY11 target of 31 not met, with actual 22; PY12 target lowered to 24. **NTPC** = individual who does not have an open case with the agency but receives IFS. There were 14 new TPCs in PY08, 16 in PY09, 14 in PY10, and anticipated 2 in PY11 (target 10); PY12 new TPC target will be 10. Total NTPCs in PY09 were 12; PY10 targets for 3 continuing and 6 new NTPCs were exceeded (7 and 14); there were 17 continuing NTPCs in PY11 (target of 2) and 1 new anticipated (target 4); PY12 NTPC targets continue at 2 and 4. Program to serve 40 total in PY12.

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes

Consumer advocacy and family support organizations: No.

Access to DD Information, New Families & Rural: Yes

Gaps in Core Services related to state cuts: No.

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes

Consumer directed Services: Yes. There is evidence of efforts which align with the Blueprint for System Redesign in Illinois.

CCMHB/CCDDB MOU Compliance: Yes

Budget-Program Connectedness: Yes

Medicaid Participation/PUNS enrollment: No/Yes

Technical Criteria:

Application Minimal Compliance /Responsiveness: Yes. Approach/Methods: Yes. Innovation: Yes - ASD Social Skills groups. Staff Credentials: Yes. Application Quality: Moderate Compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Developmental Services Center

Program Name: Individual and Family Support – Program Expansion

Type of Contract: Grant format requested

Financial Information:

PY12 CCDDDB Funding Request: \$60,000

PY12 Total Program Budget: \$60,000 (Base Program \$388,089)

Current Year Funding – (PY11): \$0 (\$328,470 for base program)

Proposed Increase (Decrease) – PY11 vs. PY12: \$60,000

Program Staff – CCDDDB Funds: 0 FTE (plus 0 indirect staff)

Total Program Staff: 0 FTE (plus 0 indirect staff)

Budget Narrative: (See program summary for Individual Family Support base program.) Request is sole revenue for program expansion. Expense form attributes 100% to Professional Fees/Consultants. Personnel form also associates no staff to this program. Budget Narrative is brief, listing the types of licensed clinicians whose services might be purchased but including no detail on fees. Certified Sexuality Educators and support through social skills group and IFS (staff for each are described in IFS base program application) are mentioned in the plan narrative but not in budget narrative.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: N/A

Administrative costs: % not calculated.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived

Audit in Compliance XX

Audit Not in Compliance

Target Population: Children and adults with developmental disabilities, priority to those with significant behavioral, medical, training, or support needs. Individual and family choice is central to planning supports and services. As with base program, individuals and families can apply for grants.

Service Location/Demographics: County-wide. Consumer and family choice promise flexibility in service location et alia. A new program component and therefore no data; base program data can be utilized for review.

Service Description/Type: Family Support. Expansion is for two purposes. 1) Assistance for assessment, personally-designed support for employment and community access, emergency respite, minor home modification, therapy equipment, relationship/sexuality training by DSC's Certified Sexuality Educators, camp vouchers, legal support. 2) Based on the success of the pilot Social Skills group for children with ASDs (funded through base program), a second group would form. Benefits of social skills training/play group are highlighted, extensive preparation and training of staff facilitating groups is mentioned (not identified.) **Staff Comment:** care should be taken to avoid using CCDDDB funds for those eligible to participate in any such program conducted under Article 14 of the School Code.

Access to Services for Rural Residents: Client/Family Support and other staff attend IEPs & MDCs countywide, the primary outreach to rural areas. Communication among professionals & parents (word of mouth led to demand for 2nd Social Skills group.) **Staff Comment:** of particular interest to the CCDDDB is the provision of services as described above, so that IEP support may be best coordinated with RPC's Pre-Admission Screening/Independent Service Coordination unit, which has a formal role.

Program Performance Measures:

ACCESS: Agency intake process and measures included, targets met each year; admissions process affected by limited capacities. Referrals are made to RPC PAS/ISSA for PUNS enrollment. A specific access measure related to this program does not appear to be identified. Agency has submitted a revised (annually) cultural competency plan. Zip code data will be collected.

CONSUMER OUTCOMES: Agency measures are described, using consumer satisfaction survey data and input from individual service planning meetings. Good detail about IFS staff training, with some specialized to meet individual consumer needs. Demand for this service increases (though resources do not), as families note positive outcomes. A specific measure for this program does not appear to be identified.

UTILIZATION: Plan to serve 15 new TPCs total; unclear how many are to be included in social skills group and how many in IFS specific assistance (has ranged from \$135 to \$12,500 per TPC).

CCDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes

Consumer advocacy and family support organizations: No

Access to DD Information, New Families & Rural: Yes

Gaps in Core Services related to state cuts: No

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes

Consumer directed Services: Yes. There is evidence of efforts which align with the Blueprint for System Redesign in Illinois.

CCMHB/CCDDB MOU Compliance: Yes

Budget-Program Connectedness: No

Medicaid Participation/PUNS enrollment: No/Yes

Technical Criteria:

Application Minimal Compliance /Responsiveness: Yes. Approach/Methods: Yes.

Innovation: Yes - ASD Social Skills group. Staff Credentials: Yes – specialized, consumer and family-driven training. Application Quality: Needs Improvement – more detail on measures, costs, relation of budget to program plan.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY 2011

AGENCY: Persons Assuming Control of their Environment, Inc. (PACE)

Program Name: Opportunities for Independence

Type of Contract: Grant format requested

Financial Information:

PY12 CCDDDB Funding Request: \$59,546

PY12 Total Program Budget: \$59,546

Current Year Funding – (PY11): \$59,546

Proposed Increase (Decrease) – PY11 vs. PY12: \$0

Program Staff – CCDDDB Funds: 1.5 FTE (1.45, by Budget Narrative)

Total Program Staff: 1.5 FTE (1.45, by Budget Narrative)

Budget Narrative: CCDDDB grant is sole revenue for this program. Total agency revenue primarily from State of Illinois and therefore at risk for reduction; additional comments address negative impact of state and federal cuts. Expenses include consumables and general operating costs directly related to program, occupancy and rental costs (allocated based on square footage and % program staff time), staff training and travel specific to program, salaries/benefits of one full-time and one part-time Independent Living Specialist (comprising 91% of total request). Personnel form is complete with respect to total agency budget but not to CCDDDB-funded program; Budget Narrative clarifies that only one part time Independent Living Specialist (at 50%) and 95% of the full-time ILS are charged to this budget. Difference in staff costs on expense form and personnel form is explained in Budget Narrative in that 5% of the full-time ILS is charged to a different grant; this could be reflected in the plan narrative, adjusting total program staff downward if there are duties outside this program, and, if not, then other source could be included on Revenue form.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

The CCMHB and CCDDDB are in the process of establishing reasonable cost standards which will be applied to certain categories of costs. Consideration will be given to developing standards based on median costs. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine administrative cost and fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 52% (for total agency, 42%)

Administrative Costs: % not calculated

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable

Audit Requirement Waived

Audit in Compliance XX

Audit out of Compliance

Auditor Finding

Target Population: Residents of Champaign County who have developmental disabilities. Assessment of service needs/preferences, derived from Department of Rehabilitation Services (DRS) Independent Living Needs Assessment, addresses: Civil Rights and the Law; Housing, Communication, Personal Assistance, Education and Training, Daily Living/Self Care Employment, Self Help/Personal Equipment/Assistive Technology, Social Recreation, Finance and Benefits, Transportation, Health Care Medical, Youth and Family (transition).

Service Location/Demographics: Urbana office for assessment; county-wide for services in home/community settings, by consumer preference. Staff travel costs in budget. In PY10, 60% of program participants were from Champaign, 24% Urbana, 8% Rantoul, and 8% other CC. 4% were between age 7 and 12, 48% between 13 and 19, 40% between 19 and 59, and 8% over 60. 80% were white, 16% Black/AA, 4% Asian/PI; 3 Asian/PI; 4% were of Hispanic/Latino origin; 64% were male.

Service Description/Type: Vocational training. Core services provided by Centers for Independent Living include Information & Referral, skills training, peer counseling, advocacy, and transition. CCDDDB-funded program provides single contact and linkage (to other PACE programs as well as other community resources), personal assistance, housing and job search, pre-employment skills, budgeting, transportation, self-advocacy, equipment loan, MTD disability certification. Consumer (and family) driven Independent Living Plan is reviewed quarterly. Full-time Independent Living Specialist has Bachelors, training in fair housing, equal opportunity, and ethics, is a certified NAMI trainer, a family advocate, member of NADD (“an association for persons with developmental disabilities and mental health needs”), has collaborated with ARC, and has presented on DD, MI, trauma, and homelessness. Part-time ILS has Masters in Elementary Education and training in Childhood DD, Autism, Transitioning Youth Services to Adult Services, Independent Living, ADA, parental advocacy, and IDEA.

Access to Services for Rural Residents: County-wide outreach through news mailings, newsletter presentations, participation in community-wide events, agency website (over 36K visits), and networking through associated organizations. Home visits as needed, I&R by phone, and a toll-free number given to rural residents.

Program Performance Measures:

ACCESS: First come, first served basis. Response to initial contact within 3 days. First contact includes I&R form (w demographic data), needs assessment, DD verification. Good detail, but a specific, quantifiable measure of does not appear to be included. When opened for services, each consumer receives the agency appeals process. Quarterly, monthly, and annual demographic data are compared w demographics of service area. Number and type of goals set and met are reviewed quarterly; compliance reviews conducted internally and by funders. Zip code data collected. Updated agency cultural competency plan features specific actions, addresses linguistic and cultural diversity.

CONSUMER OUTCOMES: Outcome data collected monthly, counted when consumer agrees: 69 FY10 outcomes included knowledge of medical issues/job accommodations, problem solving, decision making, improved ability to express needs, employment, memory cue options, knowledge of other disabilities, improved self esteem, and defense of rights. Agency participates in national development of comprehensive outcome system, uses tentative model with life areas as in ILP and needs assessment.

UTILIZATION: Part II form data for PY10 show 44 TPCs against target of 35 (although data from quarterly reports total 25); targets for 600 and 700 hrs of CSEs and SCs exceeded. Program anticipates meeting PY11 TPC target of 30 and NTPC target of 10 and exceeding SC and CSE targets (750 and 650 hrs). PY12 plan maintains these levels. Frequency of group and major CSEs identified. Staff comments: prefer # events (CSE) and face to face client contacts (SC) to # hrs. Hours as a meaningful measure of service to continuing TPCs can be reported as "Other."

"Unexpected Results" notes challenges faced by youth in need of transition support as access to adult services diminishes. Staff Comment: of particular interest to the CCDDDB is the provision of services as described above, so that IEP support may be best coordinated with RPC's Pre-Admission Screening/Independent Service Coordination unit, which has a formal role.

Service Fee: \$2 donation requested for MTD disability verification. No other fees.

CCDDDB Priorities:

Primary Decision Support Criteria

Priority Populations: Yes

Consumer advocacy and family support organizations: No.

Access to DD Information, New Families & Rural: Yes

Gaps in Core Services related to state cuts: No.

Overarching Decision Support Considerations:

Access, Underserved populations/Cultural Competence: Yes

Consumer directed Services: Yes. There is evidence of efforts which align with the Blueprint for System Redesign in Illinois.

CCMHB/CCDDDB MOU Compliance: Yes

Budget - Program Connectedness: incomplete form, adjustments needed

Medicaid Participation/PUNS: No/No.

Technical Criteria:

Application Minimal Compliance/Responsiveness: Yes. Approach/Methods: No.
Innovation: Yes. Staff Credentials: Yes. Application Quality: Moderate Compliance.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending



12.B.

BRIEFING MEMORANDUM

DATE: April 20, 2011

**TO: Champaign County Mental Health Board/ Champaign County Developmental Disabilities Board
Members and Funding Applicants**

FROM: Shandra Summerville, Cultural and Linguistic Competence Coordinator

SUBJECT: Cultural and Linguistic Competence Plan Review

Background:

In 2004, CCMHB/CCDDDB incorporated the value of Cultural Competence as part of the funding requirements. Each agency was required to complete a Cultural Competence Plan that would begin to address and eliminate disparities and develop authentic collaboration in order to improve consumer outcomes. The cultural competence plans would outline the organizations' activities, strategies, systems of accountability, and continuous quality improvement to promote Cultural and Linguistic Competence. This guidance was provided with consultation of Dr. Carl Bell, the "Surgeon General's Report on Mental Health: Culture, Race, and Ethnicity," and many multicultural consultants from the community.

In 2009-2010, the CUAP-Cultural Competence Program began to provide agencies with consultation on implementing their plan. It was recommended that the cultural competence plan should be a plan of action that is distributed and infused throughout all areas of the agency.

Present Actions:

The ACCESS Initiative is a cooperative agreement with SAMHSA(Substance Abuse Mental Health Administration) in conjunction with Illinois Department of Human Services and the Champaign County Mental Health Board to build a System of Care in Champaign County. The Cultural Competence Coordinator is a member of the ACCESS Initiative Administrative Team; the role of the Cultural and Linguistic Competence Coordinator(CLC) is to ensure the value of cultural and linguistic competence is infused throughout a System of Care. New this year, feedback is being provided to give agencies an idea of how they rate as a result of the consultation that was received from the CLC Coordinator. All plans have been reviewed, and rated with suggestions on ways to improve the cultural competence plan. Agencies are only required to complete the plan. This rating does not impact the funding that is awarded by the CCMHB/CCDDDB, this rating is determined on a scale of how complete and the content of what was submitted along with the application for funding.

Cultural Competence Rating Scale

- 1- No Completed Cultural Competence Plan
- 2- Completed with no action or goals
- 3- Completed with mention of action or goals
- 4- Completed with action measurable goals, and benchmarks
- 5- Completed Action Steps Measurable Goals, Benchmarks, and Accountability for the Actions



Next Steps:

Organizational Cultural Competence Training will be provided for all agencies that are funded with priority given to agencies funded with SAMHSA/ACCESS Priority funding. There will Continuous Quality Improvement Plan to ensure the CLC plan is an active policy of the organizations. In July of 2011, there will be a cultural competence standard format/template that will be utilized annually. The Cultural Competence coordinator is available to provide individual consultation and organizational training.

Any comments or questions please feel free to contact:

Shandra Summerville-Cultural and Linguistic Competence

ssummerville@access-initiative.org or 217-819-3538 or 217-372-6824

	A	B	C	D	E
1	CCMHB (DRAFT) Agency Cultural Competence Plan Ratings April 20, 2011				
2	Agency		Rating		Comments
3	Best Interest of Children		3		No clear actions benchmarks and accountability/should be reviewed and updated annually
4	Catholic Charities		4		Clear Actions and Benchmarks/ Needs to be updated annually for revisions.
5	Center for Women in Transition		5		Clear Actions and Benchmarks/ plan should be updated annually for revisions/ Linguistic plan and protocol are listed for staff/best practices mentioned/accountability is in place/
6	CU-Autism (DD)		3.5		Goals were clear about community outreach/Cultural Competence will be developed/Needs to list who will be responsible for actions/ clear outcomes/ Plan was updated from previous year since consultation.
7	Champaign County Regional Planning		4		Clear Actions/Outcomes and Goals Listed/ Benchmarks
8	Charleston Transitional Facility (DD)		1		This was an admissions policy/no cultural competence
9	Community Service Center		4.5		Goals were clear about community outreach/Cultural Competence will be developed/Needs to list who will be responsible for actions/ clear outcomes were mentioned and benchmarks/ Plan was updated from previous year since consultation.
10	Community Choices		3		Plan was completed/Actions apart of plan/Benchmarks are needed/The Plan was updated from previous year with consultation
11	CU Area Project		3		No clear actions benchmarks and Accountability/should be reviewed and updated annually/ CUAP provided plan in draft form and will seek additional consultation

	A	B	C	D	E
12	Community Elements		4		Clear Plan of Action/Policy is put in place/ Plan was updated from previous year with consultation/ Outcomes and Accountability are not clear- attempts were mentioned/
13	Crisis Nursery		3		Actions and values are mentioned/ not clear benchmarks/no clear outcomes or accountability
14	Developmental Services Center (DD)		3.5		Actions and outcomes are clear for targeted groups/there is not clear accountability/Cultural Competence is viewed as an on-going process/Clear benchmarks for some activities are not mentioned/ Plan was updated from previous year with consultation
15	Down Syndrome Network		2		Plan was submitted and not updated from previous year/ a plan of action for outreach of diverse families was not mentioned/clear benchmarks are not mentioned
16	Don Moyer's Boys and Girls Club		2		Plan was submitted and not updated from previous year/ clear actions of activities are not mentioned / clear benchmarks for plan are not mentioned/Additional training has been scheduled/
17	Family Service Center		4.5		Actions are defined clearly/benchmarks are clear from original plan from 2004/ ethnic demographic is compared to population served/Plan of action was updated as a result of consultation
18	Family Advocacy Center		4		Clear actions are mentioned/Accountability is present/Benchmarks are mentioned/Not clear outcomes to actions/ Consultation was utilized first year funding

	A	B	C	D	E
19	Francis Nelson		3.5		Benchmarks and activities are clear for governance board/ethnic demographic is compared to population served/Plan of action was updated as a result of consultation
20	PACE, Inc. DD		3.5		Objectives were clear/persons responsible for outreach is outlined clearly of the activities that will be conducted/no outcomes or benchmarks were included in the plan.
21	Prairie Center Health Systems		4		Actions are clear/Goals for each of the domains are clear with outcomes/ CLC has been infused by the development of a Cultural Advisory group/Accountability is being established/Plan was updated from previous year as a result of consultation
22	Rape Advocacy, Counseling& Education		3		The plan currently outlines outcomes/no benchmarks are mentioned/accountability is to the Executive Director only/ there are no clear actions to the outcomes/
23	Refugee Assistance Center		3.5		Actions are mentioned/Organization acknowledges cultural competence as an ongoing process/ no clear benchmarks and accountability are mentioned/ Plan was updated from previous year
24	SOAR		5		Goals and Actions are clearly defined/ Accountability is clearly defined/ benchmarks are clearly defined/ Organization received consultation about the domains
25	TALKS		5		Goals, Actions, Accountability and Benchmarks are clear/ Family and youth will be recruited to serve on the Board of Directors/Plan was updated from previous year with consultation

	A	B	C	D	E
26	U of I Psychological Services		4		Plan of Action was clearly defined/ Accountability was infused on the management and practitioners level/Benchmarks are clear that cultural competence is an ongoing process/
27	Urbana Connections		4		Goals Actions, and Benchmarks were clear for this plan/ There was specific person that was listed for accountability / Cultural Competence is viewed as an ongoing process will be incorporated at all levels/

13.A

**"Reaching Out For Answers:
Disability Resource Expo"
Progress Report
March, 2011**

The 5th annual Disability Resource Expo has been scheduled for Saturday, October 22, and will again be held at Lincoln Square Village in Urbana.

The Expo Steering Committee will meet for the first time this planning year on April 12. The Marketing/Promotional, Entertainment and Accessibility Committees have already begun their work for the 2011 Expo.

While the Marketing/Promotion Committee did not meet this month, fundraising activities have begun. Jon Dietrich and Barb B. met with First Federal Savings Bank, who has been a sponsor for the past several years, to see if they might be interested in taking a larger part in the 2011 Expo. Other committee members are busy pursuing other potential funding sources, in hopes of bringing in several large donors to sponsor specific parts of the Expo. Donation request letters will be mailed in early to mid July. Billboard space has already been reserved for the month of October through Adams Outdoor Advertising. We will be promoting the Expo at the Anti-Stigma Alliance film to be shown at the end of Ebertfest on May 1.

The Entertainment Committee continues to pursue some top entertainment for this years' event. Our goal, as in past years, is to highlight performers who have a disability, or entertainment groups where persons with disabilities are active participants. It is also important to bring new entertainment to the event each year in order to attract participants.

The Accessibility Committee has begun its work for the 5th annual Expo. Angela Anderson from Dept. of Resource & Educational Services (DRES) has agreed, again this year, to do all of our formatting, and our three veteran sign language interpreters have signed on to help us out again.

Although the Exhibitor Committee has not yet met, we are gathering a listing of potential new exhibitors for this years' Expo. We were fortunate to be able to bring on approximately a dozen new exhibitors last year, and hope to do so again in 2011.

We continue to distribute the 2010 Resource Book throughout the county. We printed 1,500 of these books, and have distributed most of them at this point. We are currently using what is left to assist us in developing new sponsorships for 2011.

Respectfully submitted,

Barb Bressner
Expo Coordinator

13.B.

**Anti-Stigma Alliance
Progress Report
April, 2011**

Planning continued this month for the Alliance sponsored film, "Louder Than A Bomb", which will be shown during Ebertfest, and presented as a free community film following the close of Ebertfest on May 1, 2011. This film will be the kick-off event for Children's Mental Health Awareness Week, which is May 1- 7.

Working in collaboration with the ACCESS Initiative has proven to be an effective and efficient way to promote both the film and Children's Mental Health Awareness Week activities along side each other. Posters and flyers advertising both are currently being printed for distribution throughout the county. PSA's are being sent to all media outlets, and three billboards have been posted promoting LTAB to the community.

We are excited to have three of the young people from Chicago who starred in LTAB staying for the community film. These young people, along with 3 local youth will perform their spoken word on the Virginia stage prior to the film's showing to the community.

Key messages have been identified relating to how stress caused by trauma affects youth and families, and how "Recovery and Resilience" abounds. We will be asking local youth to submit artwork and poetry on those subjects. ACCESS Initiative is identifying a group of youth who will be coached in writing and presenting spoken word on these topics. The three best spoken word presenters will be chosen to perform on stage with the LTAB stars. Other local youth will submit artwork and poetry related to the same topics. Youth artwork will be on display both before and after the film at Community Elements. Folks leaving the last Ebertfest film (which is also LTAB) will be encouraged to stop in for refreshments and to view and vote on the artwork. Community members viewing the free film will be encouraged to take part in a similar activity following that film.

Respectfully submitted,

Lynn Canfield
Barb Bressner