



Champaign County Developmental Disabilities Board (CCDDB) Meeting Agenda
Wednesday, October 19, 2022, 9:00AM

*This meeting will be held **remotely**, with a required representative at The Brookens Administrative Building, 1776 East Washington Street, Urbana, IL <https://us02web.zoom.us/j/81559124557> 312-626-6799*

Meeting ID: 815 5912 4557

*Pursuant to the Governor's Executive Order establishing a pandemic disaster in the State of Illinois that covers the County of Champaign, and the CCDDB President's determination that holding this meeting in person is not prudent at this time due to health concerns with COVID-19 cases and hospitalizations reported in the county, this meeting will be held **remotely** via zoom. Public comment also will be taken remotely. The public may watch the meeting live through this link or view it later in archived recordings at <https://www.co.champaign.il.us/mhbddb/MeetingInfo.php>*

Public Input: *All are welcome to attend the Board's meetings to observe and offer thoughts during "Citizen Input/Public Participation. For support, let us know how we might help by emailing stephanie@ccmhb.org. You may also communicate with the Board by emailing stephanie@ccmhb.org any written comments you would like read into the record. The time for each person's comments may be limited to 5 minutes.*

1. Call to Order
2. Roll Call
3. Zoom Instructions - <https://us02web.zoom.us/j/81559124557> (page 3)
4. Approval of Agenda*
5. Citizen Input/Public Participation
The chairperson may limit public participation to five minutes per person and limit total time to 20 minutes.
6. Chairperson's Comments – Dr. Anne Robin
7. Executive Director's Comments – Lynn Canfield
8. Approval of CCDDB Board Meeting Minutes (pages 4-12)*
Minutes from the 9/21/22 board meeting and 9/28/22 special joint meeting are included. Action is requested.
9. Vendor Invoice List (pages 13)*
A "Vendor Invoice List" of expenditures is included. Action is requested, to accept the list and place it on file.
10. New Business
 - A. DRAFT PY24 Allocation Priorities and Selection Criteria (pages 14-26)

For information only, the packet contains a DRAFT of proposed funding priorities and selection criteria for the Program Year 2024.

B. Successes and Other Agency Information

Funded program providers and self-advocates are invited to give oral reports on individuals' successes. At the chairperson's discretion, other agency information may be limited to five minutes per agency and total time to 20 minutes.

11. Old Business

A. PY22 Utilization Summaries for Funded I/DD Programs (pages 27-30)

For information only, the packet includes a report with summaries of actual utilization for I/DD programs funded by the CCDDDB and CCMHB.

12. CCDDDB and CCMHB Schedules and CCDDDB Timelines (pages 31-37)

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

13. Acronyms and Glossary (pages 38-45)

A list of commonly used acronyms is included for information.

14. CCMHB Input

15. Staff Reports (pages 46-68)

For information are reports from Kim Bowdry, Leon Bryson, Stephanie Howard-Gallo, Shandra Summerville, and Chris Wilson.

16. Board Announcements

17. Adjournment

**Board action requested*

*After this meeting, or at 10AM if the meeting ends prior to 10AM, and using the same zoom link, the Executive Director will host an **Evaluation Capacity Building Project RFP Pre-Proposal Conference** with interested parties.*

While this is not a board meeting, it is described in the approved Request for Proposals at https://www.co.champaign.il.us/bid_documents/2022/RFP2022-010_Evaluation_Capacity_Building_Project/Evaluation%20Capacity%20Building%20Project.pdf and will be recorded and posted (with the regular CCDDDB meeting before it), and any resulting addenda to the RFP will be posted with the original RFP by November 21, 2022.

Instructions for participating in Zoom Conference Bridge for CCDDB Meeting October 19, 2022 at 9:00 a.m.

You will need a computer with a microphone and speakers to join the Zoom Conference Bridge; if you want your face broadcast you will need a webcam.

Go to Join Zoom Meeting
<https://us02web.zoom.us/j/81559124557>
Meeting ID: 815 5912 4557

One tap mobile

+13126266799,,81559124557# US (Chicago)
+16465588656,,81559124557# US (New York)

Dial by your location

+1 312 626 6799 US (Chicago)
+1 646 558 8656 US (New York)
+1 301 715 8592 US (Germantown)
+1 669 900 9128 US (San Jose)
+1 253 215 8782 US (Tacoma)
+1 346 248 7799 US (Houston)

Meeting ID: 815 5912 4557

Find your local number: <https://us02web.zoom.us/u/kCrkmcupe>

When the meeting opens, choose to join with or without video. (Joining without video doesn't impact your participation in the meeting, it just turns off YOUR video camera so your face is not seen. Joining without video will also use less bandwidth and will make the meeting experience smoother).

Join with computer audio.

Once you are in the meeting, click on "participants" at the bottom of the screen.

Once you've clicked on participants you should see a list of participants with an option to "Raise Hand" at the bottom of the participants screen. **If you wish to speak, click "raise hand" and the Chair will call on you to speak.**

If you are not a member of the CCDDB or a staff person, **please sign in by writing your name and any agency affiliation in the Chat area.** This, like the recording of the meeting itself, is a public document. There are agenda items for Public Participation and for Agency Input, and we will monitor the 'raised hands' during those times.

If you have called in, please speak up during these portions of the meeting if you would like to make a contribution. If you have called in and therefore do not have access to the chat, there will be an opportunity for you to share your 'sign-in' information. If your name is not displayed in the participant list, we might ask that you change it, especially if many people join the call.

Members of the public should not write questions or comments in the Chat area, unless otherwise prompted by the Board, who may choose to record questions and answers there.

#8

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

Minutes September 21, 2022

*This meeting was held with representation at the Brookens Administrative Center
and with remote access via Zoom.*

9:00 a.m.

MEMBERS PRESENT: Anne Robin, Georgiana Schuster, Kim Wolowiec-Fisher, Vicki Niswander

MEMBERS EXCUSED: Deb Ruesch

STAFF PRESENT: Kim Bowdry, Leon Bryson, Lynn Canfield, Stephanie Howard-Gallo, Chris Wilson

OTHERS PRESENT: Sarah Perry, Annette Becherer, Vickie Tolf, Patty Walters, Nicole Smith, Heather Levingston, Danielle Matthews, Laura Bennett, DSC, Mel Liong, PACE; Angela Yost, Regional Planning Commission; Katie Difanis, Carle Health; Brenda Eakins, GROW; Becca Obuchowski, Hannah Sheets, Community Choices; Darcy Sager, CCRPC; Hope Holland, UIUC; JR Lill, IPLAN Champaign

CALL TO ORDER:

Dr. Robin called the meeting to order at 9:00 a.m. Executive Director Canfield was present at the Brookens Administrative Center as per the Open Meetings Act.

ROLL CALL:

Roll call was taken and a quorum was present.

ZOOM INSTRUCTIONS:

Instructions were included in the packet.

APPROVAL OF AGENDA:

The agenda was in the packet for review and approved by a unanimous vote.

CITIZEN INPUT/PUBLIC PARTICIPATION:

None.

PRESIDENT’S COMMENTS:

Dr. Robin expressed her thanks to the agencies for continuing services with the challenges that the pandemic has presented.

EXECUTIVE DIRECTOR’S COMMENTS:

Director Canfield made some brief comments regarding the agenda items. She also reviewed the plans for the coming year.

APPROVAL OF MINUTES:

Minutes from the 7/20/2022 board meeting were included in the packet.

MOTION: Dr. Fisher moved to approve the minutes from the July 20, 2022 meeting. Ms. Niswander seconded the motion. A roll call vote was taken. The motion passed.

VENDOR INVOICE LIST:

The Vendor Invoice List was included in the Board packet. Ms. Schuster requested some line items be clarified. Ms. Canfield and CCDDDB Financial Manager Chris Wilson provided information.

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

NEW BUSINESS:

Presentation: UIUC Evaluation Capacity Building Project:

A final report on “Building Evaluation Capacity for Programs funded by the Champaign County Mental Health and Developmental Disabilities Boards” from the UIUC research team was

included in the packet. Appendices and the presentation materials were posted as addendum to the meeting. Mark Aber, Ph.D presented. Board members were given an opportunity to ask questions following the presentation.

Agency Matching Funds Request:

A Decision Memorandum was included in the packet. The memorandum requested approval for DSC to use PY23 Community Employment funds as match for state funding. Ms. Canfield provided background information. Ms. Matthews, Ms. Walters, and Ms. Becherer from DSC were present to answer questions and provide clarifications.

MOTION: Ms. Schuster moved to approve the use of CCDDDB PY2023 DSC Community Employment grant funds as match for funding through DFI Title XX. Dr. Fisher seconded the motion. A roll call vote was taken and the motion passed unanimously.

Self-Advocate Needs Assessment Report:

A Briefing Memorandum with results of surveys completed by participants of self-advocacy groups was included in the Board packet. Associate Director Kim Bowdry provided additional information regarding the project.

Three-Year Plan with Draft 2023 Objectives:

The packet included the draft CCDDDB Three-Year Plan with proposed objectives for FY2023. Comments from stakeholders and other interested parties will be pursued. A final draft will be presented for approval at the November CCDDDB meeting.

Successes and Other Agency Information:

Updates were provided by Annette Becherer and Patty Walters from DSC; Becca Obuchowski from Community Choices, and Mel Liong from PACE. JR Lill, the IPlan Coordinator for Vermillion and Champaign County introduced himself.

OLD BUSINESS:

2023 Budgets:

Revised budgets were included in the Board packet. Ms. Canfield provided background information on the documents.

MOTION: Ms. Schuster moved to approve the 2023 CCDDDB Budget as presented in the Board packet, with anticipated revenues and expenditures of \$4,874,487. Ms. Niswander seconded the motion. A roll call vote was taken and the motion passed unanimously.

MOTION: Ms. Niswander moved to approve the attached 2023 CILA Facilities (to be “I/DD Special Initiatives”) Fund Budget, with anticipated revenues of \$51,000, use of \$300,000 from fund balance, and expenditures of \$351,000. Payment to this fund is consistent with

the terms of the Intergovernmental Agreement between the CCDDDB and CCMHB, and full approval is contingent on CCMHB action. Dr. Fisher seconded the motion. A roll call vote was taken and the motion passed.

Agency Service Reports:

Fourth quarter and year-end data on programs funded for PY2022 was included in the Board packet for information only.

211 Second Quarter Update:

Reports from PATH provided an overview of services regarding Champaign County call activity from April 1 to June 30 were included in the CCDDDB packet for information only.

Expo Update:

A Briefing Memorandum provided an update on the Expo. A flyer was also included in the Board packet. Kim Bowdry provided an update on Expo activities. Volunteers are needed for the October 22, 2022 event.

CCDDDB and CCMHB Schedules and CCDDDB Timelines:

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

Acronyms and Glossary:

A list of commonly used acronyms was included for information.

CCMHB Input:

The CCMHB will meet this evening. There will be a joint meeting with the CCDDDB and the CCMHB on September 28, 2022.

Staff Reports:

Staff Reports from Kim Bowdry, Leon Bryson, Stephanie Howard-Gallo, and Shandra Summerville were included in the Board packet.

BOARD ANNOUNCEMENTS:

None.

REVIEW OF CLOSED SESSION MINUTES:

Dr. Robin excused herself from the meeting and the vote at 10:32 a.m.

MOTION: Dr. Fisher moved to accept the closed session minutes as presented and to continue maintaining them as closed. Ms. Schuster seconded the motion. A roll call vote was taken and the motion passed.

ADJOURNMENT:

The meeting adjourned at 10:37 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo”

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

A handwritten mark, possibly a signature or initials, located at the bottom right of the page.

**JOINT MEETING OF CHAMPAIGN COUNTY
MENTAL HEALTH BOARD
And CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES
BOARD**

Minutes—Sept 28, 2022

This meeting was held remotely and at the Brookens Administrative Center, Urbana, IL

5:45 p.m.

MEMBERS PRESENT: Matt Hausman, Daphne Maurer, Alexa McCoy, Molly McLay, Joseph Omo-Osagie, Elaine Palencia, Kyle Patterson, Jane Sprandel, Jon Paul Youakim, Deb Ruesch, Georgiana Schuster, Kim Fisher, Vicki Niswander, Anne Robin

MEMBERS EXCUSED: Kyle Patterson

STAFF PRESENT: Kim Bowdry, Leon Bryson, Lynn Canfield, Stephanie Howard-Gallo

OTHERS PRESENT: Kerrie Hacker, Keysa Haley, GROW in Illinois; Nelson Novak, Terrapin Station Sober Living; Paige Garrison, Cunningham Children's Home; Angela Yost, CCRPC; Cindy Crawford, CSCNCC; Ben Mueller, Immigrant Services of C-U

CALL TO ORDER:

Dr. Youakim called the meeting to order at 5:49 p.m. Executive Director Canfield was present at the Brookens Administrative Center as per the Open Meetings Act.

ROLL CALL:

Roll call was taken and a quorum was present.

CITIZEN INPUT / PUBLIC PARTICIPATION:

None.

APPROVAL OF AGENDA:

The agenda was in the packet for review.

PRESIDENT’S COMMENTS:

Dr. Youakim and Dr. Robin both thanked Board members and staff for attending the meeting.

EXECUTIVE DIRECTOR’S COMMENTS:

Director Lynn Canfield reviewed the agenda.

NEW BUSINESS:

RFP for Evaluation Capacity Building Project:

A Decision Memorandum was included in the Board packet. The purpose of the memorandum was to present the DRAFT of RFP 2022-010 for Evaluation Capacity Building, along with a Bid Notice for publication. These could be posted and the RFP process implemented as described in the memo. The project would continue and/or expand on the work done for several years by a research team from the University of Illinois at Urbana-Champaign Department of Psychology, the final report of which was presented to each Board at their September 21 meetings. A subsequent project would have the primary goal of supporting funded agencies in the identification of program outcomes and the collection and reporting of relevant data.

Mr. Hausman submitted edits to Ms. Canfield regarding the Request for Proposals.

MOTION: Ms. Ruesch moved to approve the REQUEST FOR PROPOSALS, “EVALUATION CAPACITY BUILDING” PROJECT FOR THE COUNTY OF CHAMPAIGN, RFP Number 2022-010 with the edits discussed at the meeting Dr. Robin seconded the motion. A roll call vote was taken and the motion passed unanimously.

OLD BUSINESS:

I/DD Special Initiatives Fund Allocation Priorities for 2023:

A Decision Memorandum was included in the packet. The purpose of the memorandum was to recommend 2023 (Program Year 2024) allocation decision support criteria and funding priorities for the CILA Project Fund, authority for which is shared by the Champaign County Developmental Disabilities Board (CCDDDB) and Champaign County Mental Health Board (CCMHB). Funding priorities and decision support criteria are a framework for how contracts with service providers further the mission and goals of the Boards. Staff recommendations are based on Board and stakeholder input and our understanding of best practices and state/federal service and payment systems. On July 20, CCDDDB and CCMHB members reviewed an initial draft, which was then be distributed to providers, family members, advocates, and stakeholders, for comments. This final draft incorporates feedback from Board and staff members and the public.

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

Criteria described in this memorandum are to be used as guidance by the Boards in assessing applications for funding. They are not the sole considerations in final funding decisions. Other considerations include the judgment of the Boards and staff, evidence of the provider's ability to implement the services proposed, the soundness of the proposed methodology, and the administrative and fiscal capacity of the agency. Further, to be eligible to receive CCDDDB/CCMHB CILA Project funds, applications must reflect the Boards' stated goals, objectives, operating principles, and public policy positions; downloadable versions of these Board documents are available on the public page of the online application and reporting system, at <https://ccmhddbrds.org>.

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

MOTION: Dr. Robin moved to approve the I/DD Special Initiatives (formerly CILA Facilities) Fund 2023 Allocation Priorities and Decision Support Criteria as described in the memorandum. Ms. Sprandel seconded the motion. A roll call vote was taken and the motion passed unanimously.

OTHER BUSINESS:

Employment of Executive Director:

MOTION: Dr. Youakim moved to approve a 2023-2024 contract with Executive Director Lynn Canfield. Ms. Niswander seconded the motion. A roll call vote was taken and the motion passed unanimously.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 6:39 p.m.

Respectfully

**Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDB Staff**

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



Champaign County, IL



VENDOR INVOICE LIST

INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	DUE DATE	TYPE	STS	INVOICE DESCRIPTION	
1 CHAMPAIGN COUNTY TREASURER										
Sep DD23-078		09/01/2022	090222A	9024	32,355.00	09/02/2022	INV	PD	DD23-078 Decision Support	
Sep DDB Admin Fee		09/01/2022	090222A	9029	32,952.00	09/02/2022	INV	PD	Sep DDB Admin Fee	
					65,307.00					
10146 COMMUNITY CHOICES, INC										
Sep DD23-075		09/01/2022	090222A	9043	14,250.00	09/02/2022	INV	PD	DD23-075 Self-Determinati	
Sep DD23-090		09/01/2022	090222A	9043	13,114.00	09/02/2022	INV	PD	DD23-090 Inclusive Commun	
Sep DD23-095		09/01/2022	090222A	9043	18,125.00	09/02/2022	INV	PD	DD23-095 Customized Emplo	
					45,489.00					
10170 DEVELOPMENTAL SERVICES CENTER OF										
May/Jun DD22-082		09/01/2022	090222A	9051	141,279.00	09/02/2022	INV	PD	DD22-082 Community First	
Sep DD23-080		09/01/2022	090222A	9051	32,500.00	09/02/2022	INV	PD	DD23-080 Individual and F	
Sep DD23-081		09/01/2022	090222A	9051	44,666.00	09/02/2022	INV	PD	DD23-081 Community Living	
Sep DD23-082		09/01/2022	090222A	9051	70,638.00	09/02/2022	INV	PD	DD23-082 Community First	
Sep DD23-083		09/01/2022	090222A	9051	39,000.00	09/02/2022	INV	PD	DD23-083 Service Coordina	
Sep DD23-084		09/01/2022	090222A	9051	15,333.00	09/02/2022	INV	PD	DD23-084 Clinical Service	
Sep DD23-085		09/01/2022	090222A	9051	7,083.00	09/02/2022	INV	PD	DD23-085 Employment First	
Sep DD23-086		09/01/2022	090222A	9051	18,958.00	09/02/2022	INV	PD	DD23-086 workforce Develo	
Sep DD23-091		09/01/2022	090222A	9051	36,250.00	09/02/2022	INV	PD	DD23-091 Community Employ	
Sep DD23-092		09/01/2022	090222A	9051	7,916.00	09/02/2022	INV	PD	DD23-092 Connections	
					413,623.00					
10424 PERSONS ASSUMING CONTROL OF THEIR ENVIRONMENT INC.										
Sep DD23-079		09/01/2022	090222A	9113	2,280.00	09/02/2022	INV	PD	DD23-079 Consumer Control	
					2,280.00					
16 INVOICES					526,699.00					

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

#10.A.



BRIEFING MEMORANDUM

DATE: October 19, 2022
TO: Members, Champaign County Developmental Disabilities Board (CCDDB)
FROM: Lynn Canfield, Executive Director
SUBJECT: DRAFT PY2024 Allocation Priorities and Decision Support Criteria

Overview:

The purpose of this memorandum is to recommend allocation decision support criteria and funding priorities for the Champaign County Developmental Disabilities Board (CCDDB) Program Year 2024, July 1, 2023 to June 30, 2024. Funding priorities and decision support criteria are a framework for how contracts with service providers further the mission and goals of the Board. Initial draft staff recommendations are based on Board input and our understanding of best practices and state/federal service and payment systems. This draft memorandum is presented for Board consideration and will be distributed to providers, family members, advocates, and stakeholders, with a request for comments. A final draft incorporating feedback will then be presented for Board review and approval.

Statutory Authority:

The Community Care for Persons with Developmental Disabilities Act (50 ILCS 835/ Sections 0.05 to14) is the basis for CCDDB policies. All funds shall be allocated within the intent of the controlling act, per the laws of the State of Illinois. CCDDB Funding Requirements and Guidelines require annual review of the decision support criteria and priorities to be used in the allocation process which results in contracts for services from July 1 to June 30. Upon approval, this memorandum becomes an addendum to the Funding Guidelines, incorporated in standard operating procedures.

Assessed Needs of Champaign County Residents:

In 2021, CCDDB and Champaign County Mental Health Board (CCMHB) staff completed a community needs assessment report which sought input from people who would be eligible for services funded by one or both boards:
https://www.co.champaign.il.us/mhbddb/PDFS/Full_2021_Community_Needs_Report_ENGLISH.pdf

The process incorporated surveys and focus groups and offered helpful qualitative data, while the target populations are small and not always interested in surveys. To continue learning from people who have intellectual and developmental disabilities (I/DD), staff implemented a new survey during 2022. Other detail on local needs and preferences comes

from data collected by the Champaign County Regional Planning Commission Independent Service Coordination (ISC) unit and provided to the CCDDB and to the State of Illinois' "Prioritization of Urgency or Needs for Services" (PUNS) database.

Highlights of the Summer 2022 CCDDB self-advocates' satisfaction survey:

- 62.5% of respondents felt good about current supports and services, 25% very good.
- Additional support for cleaning, exercise, MTD, and employment were desired.
- Attitudes toward staff were positive.
- Also of interest were opportunities for travel, sports events, concerts, zoos, museums, antique stores, and to join a bowling league.
- Asking for new supports was hard for 19% of respondents and very hard for 6%, and 25% did not always feel heard when asking for something new.

Interest in travel, sports, and other activities available in Champaign County is a finding reflected in the ISC results from PY2022 (below) and earlier years. Self-advocates' attitudes toward current supports and advocating for themselves will be explored further.

According to the Illinois Department of Human Services – Division of Developmental Disabilities PUNS "Summary by County and Selection Detail" for August 10, 2022:

- Of 331 Supports Needed, the most frequently identified are Personal Support, Behavioral Supports, Speech Therapy, Other Individual Supports, Occupational Therapy, Assistive Technology, Physical Therapy, 24-hour Respite, Adaptations to Home or Vehicle, Intermittent Nursing Services in the Home (in rank order).
- 313 people identified the need for **Transportation** Support.
- 246 people identified the need for **Vocational** or Other Structured Activities, preferring (in order) Support to work in the community, Support to engage in work/activities in a disability setting, Support to work at home, and Attendance at activity center for seniors.
- 70 people are waiting for Out-of-home **residential services** with less than 24-hour supports, and 44 are seeking 24-hour residential.

These results are similar to previous years' and constrained by PUNS' established categories. Transportation relates to most preferences indicated in other surveys. In July, twenty-two adults and one youth from Champaign County received PUNS selection letters. With the continued low availability of CILA and low interest in congregate care, many will select Home Based Supports even if they had indicated a need for 24-hour residential options. For those requiring this level of support, especially if there are behavioral needs, some may choose Intermediate Care Facilities (ICFsDD), as Champaign County residents have done recently when CILA homes closed.

An annual report prepared by ISC staff aggregates the results of additional questions asked of those who enroll in or update PUNS during the contract year. In PY2022, the survey was redesigned in consultation with the Evaluation Capacity Building Team.

- 51% were completed by the individual, 49% by a parent or guardian.
- 32% had been on the PUNS list longer than 5 years, 27% 3-5 years, 28% 1-3 years, and 12.5% less than 1 year.
- 76% were in the PUNS category "Seeking Services (Need services within one year) and 24% "Planning for Services (Do not need services for at least one year).

- 71% of respondents lived at home with family, 24% in their own home with occasional support, and 5% in their own home with no support.
- 60% prefer to live with family, 42% alone, 12% with roommates, less than 2% preferred CILAs of various type, and 0% selected congregate care options.
- Those interested in roommates typically answered they'd prefer 1 or 2.
- Preferred home locations were Champaign, Urbana, out of state, Mahomet, Rantoul, Champaign County, St. Joseph, out of county, and (tied, with 1 selection each) Savoy, Ogden, Homer, or Foosland.
- 72% were interested in volunteering, 67% in competitive employment.
- Of 39 who answered the question, 41% were currently working or volunteering.
- 56 people indicated their desired work/volunteer opportunity, with the most frequent being Other, followed by Retail, Working with Animals, and Outdoors.
- 62% were not active in a community group or organization.
- Respondents would like to participate in (from most to least frequently selected) groups/clubs, health and wellness, CU Special Recreation, church, YMCA, Special Olympics, gardening, Best Buddies, gardening, continuing education, and other.
- From the most to the least frequently selected options, respondents enjoy eating out, parks, recreation/sports, zoo/aquariums, shopping, going to the movies, festivals, sporting events, swimming, concerts, theatre/arts/museums, or other.
- 7 respondents would like to participate in leisure activities not available to them: writing/art, bowling, archery, skating, concerts, and more time with friends.
- Supports desired (greatest to fewest selected): transportation, independent/daily living, financial, employment, medical, day services, socialization, behavioral therapy, physical or occupational therapy, respite, assistive technology, and other.
- 48% were 'somewhat comfortable' (scale of 5 of 10) navigating the system and advocating for themselves, and 13% were 'not comfortable' (1 of 10).

Because most respondents need services within one year, are somewhat or not comfortable advocating for themselves, live with family and prefer it, are interested in working or volunteering or joining a group in the community but have not, and are interested in and enjoy activities which appear to be available, and because some have been on the PUNS waiting list for over five years, CCDDDB funding may be very useful toward filling these gaps.

Operating Environment:

With these indications of Champaign County residents' preferences and needs and given limitations of the use of CCDDDB funds, the allocation priorities and decision support criteria are set within the current and likely future operating environment. Because services and supports available to individuals through other pay sources cannot be funded by this local public trust fund, we are mindful of changes in the state and federal systems and of whether eligible individuals have access to these pay sources. If a service or support addressing identified preferences and needs cannot be funded directly, whether due to constraints of the Community Care for Persons with Developmental Disabilities Act, other relevant statutes, state and federal service delivery and payment systems, or workforce or other resource shortage, it may be an important area for legislative and policy advocacy, whether undertaken by the Board and staff or by self-advocates and family members.

Impacts of the COVID-19 pandemic continue, including that it deepened existing flaws in our social service and healthcare systems and caused the greatest harm to those who were already not well-served. As a result, too much of the Operating Environment section of the Program Year 2023 Allocation Priorities memorandum is still relevant, including:

- Pre-pandemic barriers such as limited flexibility of state funded services and rules, low Medicaid-waiver reimbursement rates, long waiting lists, change fatigue, and difficult-to-navigate 'helping' systems.
- Provider capacity falling from 'insufficient' to 'endangered' across the country.
- Increased pressure on family caregivers and the need for trauma-informed services.
- New threats to the well-being of people with I/DD, such as the abrupt loss of services, high risk of infection in congregate care, and low access to virtual innovations, with the last two also threats to many who provide direct support.

The PY2023 memorandum is within the December 2021 board packet (pages 23-36): https://www.co.champaign.il.us/mhbddb/agendas/ddb/2021/211215_Meeting/211215_Agenda.pdf

Illinois has been out of compliance with terms of the Ligas Consent Decree, an Americans with Disabilities Act-Olmstead case. The federal court monitor and judge cite inadequate Medicaid-waiver reimbursement rates as the major cause not only for the state's failure to meet the terms of the settlement but also for its loss of community-based service capacity. Advocates speak in unison on this issue. Locally we raise the issues of the rate structure's inadequacy for the transportation needs of downstate residents and whether the more generous rate adjustments being made for Chicago and Springfield area providers should not also apply to Champaign County.

In 2021, a federal infrastructure proposal included funding to increase states' federal match for Medicaid Home and Community Based Services over a ten-year period, which could improve DSP wages, attracting the needed workforce and expanding community-based services, but that portion of the bill was dramatically reduced and eventually dropped. No similar proposal is under consideration, though much attention is called to **workforce shortages** across the social services and healthcare systems. CCDDDB/CCMHB staff have advocated through national trade associations for the Bureau of Labor Statistics to establish a distinct classification for DSPs so that the necessary competencies may be described accurately, and data collected which might persuade decision makers toward adequate appropriations in the future.

With federal American Rescue Plan Act (ARPA) funds, Kansas is distributing \$51 million in bonuses to direct care workers at Medicaid home and community-based settings. 19,067 individual providers will receive a retention payment, and 9,507 a recruitment bonus. These are part time and full-time workers who provide support to people with I/DD or to seniors in non-institutional settings. Virginia's general assembly considered similar proposals from the house (\$25.5 million from ARPA) and senate (\$37.8 million from other funds), but both failed. In Illinois, the initial plan for ARPA funds included payments to other care providers but not community based I/DD. CCDDDB and CCMHB staff are advocating through the state trade association for Illinois to use remaining ARPA money for DSP bonuses.

COVID-19 was the third leading cause of death in 2020 in the US, after heart disease and cancer. (Notably, this was true across Illinois but not in Champaign County, where it was fifth.) Unfortunately, it was the **leading cause of death** for people with I/DD. Contributing conditions of hyperlipidemia and obesity were associated with I/DD, dementia and obesity with Down syndrome, and sepsis with cerebral palsy. Unlike their peers without I/DD, younger people with I/DD experienced this higher COVID-19 mortality burden. The study did not examine contributing factors beyond medical conditions but noted that many who passed away were in congregate care, a risk that “cannot be overstated.”

- “COVID-19 mortality burden and comorbidity patterns among decedents with and without intellectual and developmental disability in the US,” *Disability and Health Journal*, September 7, 2022, Scott D. Landes, PhD, Julia M. Finan, BA, and Margaret A. Turk, MD, <https://doi.org/10.1016/j.dhjo.2022.101376>

National and state-specific data on the pandemic’s impact on caregivers and the people they serve come from the largest-ever **national survey of Direct Support Professionals (DSPs) and frontline supervisors**, conducted by the Institute on Community Integration at the University of Minnesota and the National Alliance for Direct Support Professionals. Regarding those who provided service to people with I/DD during these times:

- In 2021, 59% felt pressure to work additional hours, 40% reported depression (36% in 2020), 56% anxiety (42% in 2020), and 43% difficulty sleeping (30% in 2020).
 - 59% reported using technology more than prior to the pandemic, with 36% noting a somewhat positive impact on their work and 14% a very positive impact.
 - The Illinois profile includes DSP observations on how isolation impacted the people they served, increasing anxiety in 56%, mood swings/depression in 59%, and behavioral concerns in 61%.
- “Direct Support Workforce and COVID-19 Survey: Providing Support During the COVID-19 Pandemic”, is available at https://ici.umn.edu/covid19-survey?j=11186050&sfmc_sub=504563685&l=72445_HTML&u=229185002&mid=6379454&jb=0

Social isolation is not a new concern to those with I/DD and their supporters, but it has caught the attention of the healthcare system, appearing to have a role in the progression of ‘diseases of despair’ (e.g., depression and substance use disorder), other health conditions, and resulting deaths. Isolation and loneliness undermine empathy, memory, and mental and physical health. In “Capturing the Truth Behind Causes of Death,” Dr. Perissinotto of University of California, San Francisco calls for cross-sector investigation and mitigation of social isolation and loneliness.

-<https://www.endsocialisolation.org/cesil-blog/capturing-the-truth-behind-causes-of-death>

A National Core Indicators - Intellectual and Developmental Disabilities Data Highlight relates to preferences indicated by Champaign County residents. National data collected in 2018 and 2019 showed that 46% of respondents with I/DD took a vacation, compared to 70% of people without I/DD. In 2020-2021 these numbers dropped to 25% and 44%. “The benefits of vacation are abundant and well-documented, especially for those with IDD, whose social networks and opportunities are often more limited as a result of the enforced uniformity of their daily lives. Vacations add to our quality of life and expand our horizons.”

- <https://idd.nationalcoreindicators.org/wp-content/uploads/2022/08/NCI-IDD-Data-Highlight-on-Vacations.pdf>

The I/DD service systems were not at all prepared to accommodate new and increased needs, whether directly or indirectly related to the pandemic or changing economic and population conditions. The people most deeply impacted may require new kinds of support to recover from losses and eventually thrive. Services should be pandemic-proof and should foster individual, family, and community recovery from isolation and stress. Recovery should center trauma-informed care, including for providers and family caregivers.

Program Year 2024 CCDDDB Priorities:

Priority: Self-Advocacy (Also PY24 I/DD Special Initiatives Fund Priority)

Most care is provided by family, friends, and community and not through the service system. Parents and self-advocates propel improvements of that system and raise awareness of disabilities and of how the system works or fails. Self-advocacy and peer support groups, especially those governed by people who have I/DD and their families:

- improve others' understanding of I/DD and the rights of people with I/DD,
- offer peer mentoring and networking opportunities,
- share information on resources, and
- advocate at the local, state, and federal levels.

Priority: Linkage and Coordination

People who are eligible for but not receiving state DD (Medicaid) waiver funding should have access to benefits and resources, including those available to people who do not have I/DD. A qualified provider would offer:

- Conflict-free Case Management (CFCM) and Person-Centered Planning (PCP) aligned with federal standards for all Home and Community Based Services, without risk of conflict of interest and
- intensive case management or coordination, guided by a Person-Centered Plan, for people with complex support needs, e.g., related to aging, physical or behavioral health issue, loss of family member or caregiver, or other traumatic experience.

Priority: Home Life (relates to a PY24 I/DD Special Initiatives Fund Priority)

People who have I/DD should have housing and home life matched to their needs and preferences. Individualized supports may include:

- assistance for finding, securing, and maintaining a home,
- preparing to live more independently or with different people, and
- given the limitations of community residential options through state waivers, creative approaches for those who qualify for but do not receive these services.

Priority: Personal Life (relates to a PY24 I/DD Special Initiatives Fund Priority)

Supports for personal success and resilience should be offered in the least segregated environment and selected by the person. A proposal might offer:

- assistive and/or adaptive technology or other accessibility supports;
- training in how to use technology, including electronic devices, apps, virtual meeting platforms, social media, Internet access, and online privacy/security;
- speech or occupational therapy;

- respite or personal support in the individual's home;
- personal care in other settings;
- training toward increased self-sufficiency in personal care;
- transportation assistance; and
- strategies to improve physical and mental health.

Priority: Work Life

Community employment and volunteer opportunities are a priority for Champaign County residents who have I/DD. Through experience and exposure, people may discover or create opportunities even more closely matched to their preferences. Community engagement also increases a person's safety and well-being and invites their contribution to the community. Support should focus on people's aspirations and abilities, in the most integrated community settings possible, to help them achieve their desired outcomes, possibly through:

- job development, job matching, and job coaching,
- technology which enhances a person's work performance and reduces on-site coaching/training,
- job skills training conducted in the actual community work settings,
- community employment internships, initially paid by the program rather than the employer, especially for people who have relied on traditional sheltered day program,
- support for a path to self-employment or business ownership,
- education of employers about the benefits of working with people who have I/DD which then results in work for people with I/DD, and
- other innovative employment supports.

Priority: Community Life (relates to a PY24 I/DD Special Initiatives Fund Priority)

As suggested by survey results above, people with I/DD seek a fuller social and community life. Support which is person-centered, family-driven, and culturally appropriate, might offer:

- facilitation of social or mentoring opportunities,
- support for building social and communication skills, including through technology,
- connection to opportunities available to community members who do not necessarily have I/DD, both in-person and in digital spaces, and
- access to recreation, hobby, leisure, or worship activities, including in digital spaces.

Priority: Strengthening the I/DD Workforce (Also PY24 I/DD Special Initiatives Fund Priority)

Agencies may propose strategies to strengthen and stabilize the workforce, especially direct support professionals. Such strategies would strive to maintain the current service capacity, improve staff knowledge of technology 'access and use' for the benefit of the people they serve, and expand this workforce to meet the needs of all eligible residents of Champaign County. Agencies may collaborate on a joint application proposing system-wide solutions.

Priority: Young Children and their Families (collaboration with the CCMHB)

Services and supports not covered by Early Intervention or under the School Code, for young children with developmental and social-emotional concerns, include:

- coordinated, home-based services addressing all areas of development and taking into consideration the qualities and preferences of the family,
- early identification of delays through consultation with childcare providers, pre-school educators, medical professionals, and other service providers,
- coaching and facilitation to strengthen personal and family support networks, and

- identification and mobilization of individual and family gifts and capacities, to access community associations and learning spaces.

Through the Boards' intergovernmental agreement, the Champaign County Mental Health Board (CCMHB) has funded programs which complement those addressing the behavioral health of very young children and their families, and for which service providers collaborate as a System of Care for children and families. For PY2024, the CCMHB may continue this priority area in their continued commitment to people with I/DD.

Another important collaboration of the Boards is through the new "I/DD Special Initiatives" Fund, which focuses on shorter-term special projects intended to bolster the local system of services. Priority areas identified for that fund are:

- Strengthening the DSP Workforce
- Individual Supports to Underserved People
- Community Education and Advocacy
- Housing Supports

Due to overlap between these and the proposed CCDDDB PY2024 priority categories, an applicant should consider that: long term supports may be more appropriately funded by the CCDDDB or CCMHB; short term projects piloting an approach or purchasing non-service supports may be more appropriately funded by I/DD Special Initiatives; agencies seeking a specific exception to requirements typical of CCDDDB/CCMHB funding but offering unique solutions may be more appropriately funded by I/DD Special Initiatives.

Overarching Considerations:

Eliminating Disparities in Access and Care

Applications (proposals for funding) should describe how the program will promote access for historically underinvested populations as identified in the 2001 Surgeon General's Report on Mental Health: Culture, Race, and Ethnicity and the federal Substance Abuse and Mental Health Services Administration (SAMHSA). Because members of racial and ethnic minority groups encounter disparities in the service systems, proposals should address reduction of disparities in access to and utilization of program supports and services, e.g., earlier, accurate identification of I/DD in minority children. Members of these groups, people living in rural areas, and those with limited English language proficiency should have access to quality services; engagement strategies should be identified which overcome barriers related to stigma and infrastructure and reach even those who are seeking support for the first time. A Cultural and Linguistic Competence Plan (CLCP) is required of each applicant for funding. The online system includes a CLCP form which is consistent with requirements of Illinois Department of Human Services and which applies the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS Standards.) Technical assistance is also available through CCMHB staff.

Promoting Inclusion and Reducing Stigma

Applications should promote the fullest possible community integration, including in digital spaces. Community involvement helps decrease stigma, and people are safer when they have routine contacts with other people, whether co-workers, neighbors, members of a faith community, acquaintances at fitness or recreation centers, or social clubs/networks. Stigma limits people's participation and economic self-sufficiency and may even be a driver of

inadequate State and Federal support for community-based services. Stigma harms communities and individuals, especially those further excluded due to sexuality, gender, race, ethnicity, immigrant/refugee/asylee status, preferred or first language, or disability. The CCDDDB has an interest in building resilience, community awareness, and inclusion, as well as directly challenging negative attitudes and discriminatory practices. Fullst inclusion aligns with standards established in Home and Community Based Services rules, the Workforce Innovation and Opportunity Act, and Americans with Disabilities Act/Olmstead findings.

Outcomes

Applications should identify measures of access for people seeking to participate in the program and the outcomes expected to result from this participation. Because defining and measuring outcomes of value can be challenging, the Board has offered support through a research project, with training and technical assistance, online resource bank, workshops, and a template for year-end reports. Continuation or expansion of that support is being sought for PY24. Applicant organizations already reporting on outcomes to other funders may include those outcomes, if relevant, in the application for CCDDDB funding. For example, the Council on Quality and Leadership and the National Core Indicators share:

- *Personal Outcomes* – improve people’s positive **relationships**, increase personal **satisfaction**, allow them to exercise **choice** in decisions made about/for/with them, support **self-determination**, support real **work**, and increase people’s **inclusion** in their community.
- *Family Outcomes* - support **involvement** of family members of people who have I/DD, offer them opportunities for **connection**, reliable resources for **information**, **planning**, **access**, and **support**, give them **choice and control**, and maximize **satisfaction**.

Coordinated System

Toward a more inclusive, efficient, and effective local system, applications should include evidence of collaboration and should acknowledge other resources and how they are linked. The CCDDDB values partnership and collaboration, not only to avoid overserving and overspending but also to reach our least connected residents. Of interest are: combined efforts of providers and schools, support groups, hospitals, advocates, etc.; a commitment to updating information in resource directories and databases; participation in trainings, workshops, or council meetings with providers of similar services; and partnerships which go further to make sure that all who have a need are reached and that those needs are met. While the CCDDDB cannot pay for services which are covered under the School Code or are the responsibility of other service systems (e.g., medical, law enforcement, justice system), activities may include collaborative planning, linkage, training, and similar as appropriate to the proposed service and people to be served. Written working agreements should include details of coordinated services, referral relationships, and other partnerships. Applications for funding should acknowledge these relationships.

A joint application may be submitted by two or more agencies with similar missions. An application might propose to share infrastructure (physical, data systems, professional services, etc.) to support organizations’ common goals and improve administrative functions such as bookkeeping and reporting. Strategies to strengthen and stabilize the direct support workforce would be appropriate for collaboration across agencies. Another collaboration of

interest would be the coordination of internet ‘access and use’ efforts with other local broadband projects, to increase efficiency and impact and to ensure these innovations also benefit people with I/DD.

Budget and Program Connectedness

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

Person Centered Planning (PCP)

Applications should describe the relationship between specific services and what people indicate that they want and need. Every person who participates should have the opportunity to direct their services and supports. The Person-Centered process seeks a balance between what is important to a person and what is important for a person. This may include their strengths, preferences, clinical and support needs, and desired outcomes. CCDDDB funding should be associated with people rather than programs. Services and supports should clearly relate to a plan which was developed at the direction of the person. Illinois Department of Human Services – Division of Developmental Disabilities has established guidelines for PCP, which can be found here: <https://www.dhs.state.il.us/page.aspx?item=96986>. In a self-determined system:

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

For PY2024, many programs will report on individuals’ service activities in simple categories, as full hours, to capture whether the service happens with the individual or on their behalf (in their absence) and whether the service is delivered in the community (including the person’s home) or at an agency office. Benchmarks may be developed to promote fullest inclusion. Previous aggregate reports have demonstrated the complicated service mix and widely varying utilization patterns and costs.

People with intellectual and developmental disabilities are part of their communities, contribute to their communities and are the experts in their own lives. They should have the right to make decisions about their own lives. - Sarah Demissie, “From Our Readers: Disabled need greater support,” *News-Gazette Opinions Page*, July 21, 2021

Added Value and Uniqueness

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

- Approach/Methods/Innovation: Cite the recommended, promising, evidence-based, or evidence-informed practice and address fidelity to the model under which services are to be delivered. In the absence of such an approach, describe the innovative approach, including method of evaluation, to be considered.
- Staff Credentials: Highlight staff credentials and specialized training.
- Resource Leveraging: Describe all approaches which amplify CCDDDB resources: state, federal, and local funding; volunteer or student support; collaborations. If CCDDDB funds are to be used to meet a match requirement, reference the funder requiring match and identify the match amount in the application Budget Narrative.

Expectations for Minimal Responsiveness:

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

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

Process Considerations:

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

application forms. *There are changes in the PY2024 application forms, so that any applicant seeking to submit a 'continuing' program should carefully review forms for accuracy if copied from PY2023.*

Criteria described in this memorandum are intended as guidance for the Board in assessing requests for funding. They are not the sole considerations in final funding decisions. Other considerations include the judgment of the Board and staff, evidence of the provider's ability to implement the services proposed, the soundness of the proposed methodology, and the administrative and fiscal capacity of the agency. Further, to be eligible to receive CCDDDB funds, applications must reflect the Board's stated goals, objectives, operating principles, and public policy positions; downloadable versions of these Board documents are available on the public page of the online application and reporting system, at <http://ccmhddbrds.org>. Final decisions rest with the CCDDDB and their judgment concerning the most appropriate and effective use of the fund, based on assessment of community needs, equitable distribution across disability support areas, and alignment with decision support criteria.

The Intergovernmental Agreement between the CCDDDB and the Champaign County Mental Health Board (CCMHB) establishes that a portion of CCMHB funding be reserved for allocation to I/DD services and supports. Allocation decisions are aligned with CCDDDB priority areas as defined in this document. Recommendations will be made by the staff and reviewed by the CCDDDB and considered and acted upon by the CCMHB, resulting in contracts between the CCMHB and I/DD service providers.

The CCDDDB allocation of funding is a complex task and not a request for proposals (RFP). Applicants are not responding to a common set of specifications but rather are seeking funding to address a wide variety of support needs of people who have I/DD. The nature and scope of applications may vary widely and may include treatment and early intervention models. A numerical rating/selection methodology is not relevant or feasible. Our focus is on what constitutes a best value to the community, in the service of those who have I/DD, and is therefore based on a combination of cost and non-cost factors, reflecting an integrated assessment of the relative merits of applications using criteria and priorities approved by the CCDDDB. If applications are not sufficiently responsive to the criteria and priorities described in this memorandum, the CCDDDB may choose to set aside funding to support RFPs with prescriptive specifications to address the priorities. The CCDDDB may also choose to identify requests, including for capital and infrastructure projects, which are appropriate for an award of funding to be issued during the Program Year 2024 but later than July 1, 2023, in the event of greater than expected Board revenue.

Caveats and Application Process Requirements:

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

- Letters of support are not considered in the allocation and selection process. Written working agreements with other agencies providing similar services should be referenced in the application and available for review upon request.
- The CCDDDB retains the right to accept or reject any application, or to refrain from making an award, when such action is deemed to be in the best interest of the CCDDDB and residents of Champaign County.
- The CCDDDB reserves the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCDDDB deems such variances to be in the best interest of the CCDDDB and residents of Champaign County.
- Submitted applications become the property of the CCDDDB and, as such, are public documents that may be copied and made available upon request after allocation decisions have been made and contracts executed. Submitted materials will not be returned.
- The CCDDDB reserves the right, but is under no obligation, to negotiate an extension of any contract funded under this allocation process for up to a period not to exceed two years, with or without an increased procurement.
- If selected for contract negotiation, an applicant may be required to prepare and submit additional information prior to final contract execution, to reach terms for the provision of services agreeable to both parties. Failure to submit required information may result in disallowance or cancellation of contract award.
- The execution of final contracts resultant of this application process is dependent upon the availability of adequate funds and the needs of the CCDDDB.
- The CCDDDB reserves the right to further define and add application components as needed. Applicants selected as responsive to the intent of this online application process will have equal opportunity to update proposals for the newly identified components.
- To be considered, proposals must be complete, received on time, and responsive to the application instructions. Late or incomplete applications will be rejected.
- If selected for funding, the contents of a successful application will be developed into a formal contract. Failure of the applicant to accept these obligations can result in cancellation of the award for contract. The CCDDDB reserves the right to withdraw or reduce the amount of an award if the application has misrepresented the applicant's ability to perform.
- The CCDDDB reserves the right to negotiate the final terms of any or all contracts with the selected applicant, and any such terms negotiated through this process may be renegotiated and/or amended to meet the needs of Champaign County. The CCDDDB reserves the right to require the submission of any revision to the application which results from negotiations conducted.
- The CCDDDB reserves the right to contact any individual, agency, or employee listed in the application or to contact others who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.

#1. A.

Utilization Summaries for PY2022 CCDDDB and CCMHB I/DD Programs

Detail on each program's performance toward defined consumer outcomes during the funding year of July 1, 2021 to June 30, 2022 is available at <http://ccmhddbrds.org>, among downloadable public files toward the bottom of the page. The document is titled "CCDDDB PY22 Performance Outcome Reports."

TPC = Treatment Plan Client

NTPC = Non-Treatment Plan Client

CSE = Community Service Event

SC = Service Contact or Screening Contact

Other, as defined in individual program contract

Priority: Self-Advocacy

CU Autism Network Community Outreach Programs \$38,000

Services: Community resource information, education, and support through meetings emails, listserv, Facebook, and other networking outlets. Free, sensory friendly, family activities/pop-up play dates for people on the spectrum (skating, swimming, bowling etc.); Regular Lights Up Sounds Down Sensory Friendly Movies; Autism Aware Program; Community Outreach; Education Program; Beautification Community Program; Annual Walk and Resource Fair; Sensory Friendly Holiday events; Tailgate; and Parades. **Utilization targets:** 25 CSE. **Utilization actual:** 36 CSE.

Priority: Linkage and Coordination

Champaign County Regional Planning Commission Community Services

Decision Support Person Centered Planning \$311,489

Services: ISC staff assess persons who are eligible for and may or may not be receiving IDHS-DDD waiver funding and who have not yet been assessed for service preferences. Transition Consultants assist people/families in conflict free transition planning. Extensive outreach, preference assessment, and person-centered planning services for Champaign County residents with I/DD who do not yet have Medicaid-waiver funding. Consultation and transition planning for people with I/DD nearing graduation from secondary education. Conflict free person-centered planning and case management services, using DHS' Discovery and Personal Plan tools currently utilized by ISC agencies throughout Illinois for those who do have Medicaid waiver funding. **Utilization targets:** 220 TPC, 220 NTPC, 300 SC, 40 CSE. **Utilization actual:** 292 TPC, 169 NTPC, 724 SC, 46 CSE.

DSC Service Coordination \$435,858

Services: Serves children and adults with I/DD who request support to enhance or maintain their highest level of independence in the community, at work, and in their home. Focusing on the hopes, dreams, and aspirations serves as the basis of planning and outcomes for that person. With each person as the center of their team, Case Coordinators work closely with all members of each person's team assuring the most person-centered and effective coordination. **Utilization targets:** 280 TPC, 36 NTPC, 75 SC, 2 CSE. **Utilization actual:** 242 TPC, 34 NTPC, 20 SC, 3 CSE.

Rosecrance Central Illinois Coordination of Services – DD/MI \$35,150

Services: Emphasis on serving people who are presently in residential settings for persons with I/DD, are living in other settings (families, friends, or self) but are struggling in caring for self in these environments, or are at-risk of hospitalization or homelessness due to inadequate supports for their co-occurring conditions. Focus is to ensure that services are coordinated effectively, that consistent messages and language are used by service providers; and that service needs receive appropriate priority in both systems of care. **Utilization targets:** 28 TPC, 12 SC, 12 CSE. **Utilization actual:** 1 TPC, 1 SC, 0 CSE. ***Contract terminated effective September 30, 2021 due to agency request.**

Priority: Home Life

Community Choices Community Living \$164,069

Services: Transitional Community Support – 4-phase model for supporting adults with I/DD to move into the community. Sustained Community Support - Team approach, supporting people with more complex support needs and/or fewer natural supports to move into the community. Personal Development Classes - building skills and confidence, topics include finances, community safety, technology, sexuality and relationships, communication, and cooking. Resources are generalized into real-world settings on an ongoing basis. **Utilization targets:** 30 TPC, 15 NTPCs, 4 CSE, 3529 SC, 1602 Other (direct support hours). **Utilization actual:** 26 TPC, 19 NTPC, 10 CSE, 1284 SC, 819.2 Other (direct support hours).

DSC Community Living \$456,040

Services: Supports people with I/DD who reside in their own home in the community. The program has three primary goals: promote independence by learning/maintaining skills within a safe environment; provide long-term/on-going support in areas that cannot be mastered; provide increased support as needed due to aging, deteriorating health or other chronic conditions that jeopardize their ability to maintain their independence. Emergency Response is available for those needing assistance after hours and on the weekends. **Utilization targets:** 56 TPC, 8 SC. **Utilization actual:** 49 TPC, 7 SC.

Priority: Personal Life and Resilience

DSC Clinical Services \$174,000

Services: Provides clinical supports and services to children and adults with I/DD. Consultants under contract include one Licensed Clinical Psychologist, two Licensed Clinical Social Workers, three Licensed Clinical Professional Counselors, one Licensed Professional Counselor and one Psychiatrist. Consultants meet with people at their private practice, at the person’s home, or DSC locations. People schedule their appointments or receive support from family and/or DSC staff members for scheduling and transportation. **Utilization targets:** 61 TPC, 4 NTPC, 10 SC, 2 CSE. **Utilization actual:** 59 TPC, 4 NTPC, 11 SC, 1 CSE.

DSC Individual & Family Support \$429,058

Services: Program serves children and adults with I/DD with priority consideration given to individuals with severe behavioral, medical, or support needs. Program is a flexible and effective type of choice-driven service to people and families. People may choose to purchase services from an agency or an independent contractor/vendor. Program continues to provide creative planning, intervention, and home/community support, collaborating with families, teachers, and other members of the person’s

support circle. **Utilization targets:** 17 TPC, 32 NTPC, 8 SC, 2 CSE. **Utilization actual:** 11 TPC, 30 NTPC, 6 SC, 4 CSE.

PACE, Inc. Consumer Control in Personal Support \$24,267

Services: Personal Support Worker (PSW) recruitment and orientation, focused on Independent Living Philosophy, Consumer Control, and the tasks of being a PSW. Personal Assistant/Personal Support Worker Registry can be sorted by; location, time of day, services needed, and other information which allows consumers to get the PSW that best matches their needs. Service is designed to ensure maximum potential in matching person with I/DD and PSW to work long-term towards achieving their respective goals. **Utilization targets:** 65 NTPC, 200 SC, 15 CSE, and 3 Other (Successful PSW matches). **Utilization actual:** 76 NTPC, 359 SC, 23 CSE, and 7 Other (Successful PSW matches).

Priority: Work Life

Community Choices Customized Employment \$201,000

Services: focus on individualizing relationships between employees and employers resulting in mutually beneficial relationships. Discovery identifies strengths, needs and desires of people seeking employment. Job Matching identifies employers and learns about needs and meeting those needs through customized employment. Short-term Support develops accommodations, support, and provides limited job coaching. Long-term Support provides support to maintain and expand employment. **Utilization targets:** 40 TPC, 1840 SC, 4 CSE, 2772 Other (direct support hours). **Utilization actual:** 41 TPC, 1795 SC, 5 CSE, 2346 Other (direct support hours).

DSC Community Employment \$361,370

Services: Assists people to obtain and keep jobs. Including a person-centered job discovery; business exploration, online research, and speaking/listening to others' regarding job experiences; resume/portfolio development; interview prep and meetings with potential employers; identifying niches in local businesses that emphasize the job seeker's strengths; advocating for accommodations; self-advocacy support; provision of benefits information; discussion/experiential opportunities for soft skills; develop and maintain long-term business relationships. **Utilization targets:** 70 TPC, 2 CSE, 15 SC. **Utilization actual:** 69 TPC, 4 CSE, 11 SC.

DSC Employment First (with Community Choices) \$80,000

Services: Emphasis and priorities include: individual and family education events; ongoing staff development to facilitate DSC's shift in culture to more community and employment focused outcomes; continued business/employer outreach to provide education and certification for disability awareness for employers; establishing and maintaining relationships with all newly certified businesses; engaging in communication and advocacy with various state agencies/representatives around Employment First implementation. **Utilization targets:** 25 CSE. **Utilization actual:** 29 CSE.

Priority: Community Life and Relationships

Community Choices Self Determination Support \$160,251

Services: Leadership & Self-Advocacy: A Leadership Class, an Advocacy Board, and opportunities for members to mentor youth with disabilities within the CU 1:1 Mentoring program. Family Support &

Education: educating families on the service system, helping them support each other, and advocating for improved services through public quarterly meetings and individual family consultation. Building Community: options for adults with I/DD to become engaged with others. Scaffolded Supports: Opportunities for adults with I/DD to participate in opportunities available in their community, with ongoing intermittent support from CC staff, including half-day small group social opportunities, support to attend a park district class, or community cooking class. **Utilization targets:** 170 NTPC, 2380 SC, 4 CSE, 1788 Other (direct support hours). **Utilization actual:** 202 NTPC, 3245 SC, 10 CSE, 1788 Other (direct support hours).

DSC Community First \$847,659

Services: Serves those receiving community and site-based services, transitioning from a center-based model to community connection and involvement. Efforts to support people in strengthening connections with friends, family, and community through volunteering, civic duty, citizenship, and self-advocacy opportunities; enhancing quality of life through recreational activities, social events, educational, and other areas of interest; access to new acquaintances; and job exploration in interest area and detection of support for employment goals. **Utilization targets:** 55 TPC, 50 NTPC, 5 SC, 3 CSE. **Utilization actual:** 44 TPC, 63 NTPC, 8 SC, 4 CSE.

DSC Connections \$85,000

Services: Focused on building connection, companionship, and contribution in the broader community and pursues creative employment possibilities. People have expressed a desire to expand on interest in art nurturing their creative self, fostering community engagement and pursuing a desire for employment opportunities. Individual and small group activities will occur during the day. Services are driven by each person. **Utilization targets:** 25 TPC, 12 NTPC, 0 SC, 3 CSE. **Utilization actual:** 26 TPC, 16 NTPC, 2 SC, 5 CSE.

Priority: Young Children and their Families

Champaign County Regional Planning Commission Head Start/Early Head Start

Early Childhood Mental Health Services \$121,999 (CCDDB & CCMHB)

Services: Support from Social Skills & Prevention Coaches including: assisting teaching staff and parents in writing individualized social-emotional goals to include in lesson plans for children identified through screening; developing with parents and teaching staff an Individual Success Plan for children who exhibit challenging behaviors; offering teachers social and emotional learning strategies; monitoring children's progress and outcomes; and providing information to families and staff. Facilitation of meetings with a child's parent(s) and teaching staff throughout the process of the child receiving services as well as supporting parents and teaching staff with resources, training, coaching, and modeling. **Utilization targets:** 90 TPC, 400 NTPC, 5 CSE, 3,000 SC, 12 Other (workshops, trainings, professional development efforts with staff and parents). **Utilization actual:** 163 TPC, 421 NTPC, 4 CSE, 2954 SC, 15 Other (workshops, trainings, professional development efforts with staff and parents).

DSC Family Development \$596,522 (CCMHB)

Services: Serves children birth to five years of age, with or at risk of developmental disabilities, and their families. FDC responds to needs with culturally responsive, innovative, evidence-based services. Early detection and prompt, appropriate intervention can improve developmental outcomes for children with delays and disabilities and children living in at-risk environments. Family-centered intervention maximizes the gifts and capacities of families to provide responsive intervention within familiar routines and environments. **Utilization targets:** 655 TPC, 200 SC, 15 CSE. **Utilization actual:** 815 TPC, 173 SC, 13 CSE.



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CCDDB 2022-2023 Meeting Schedule

9:00AM Wednesday after the third Monday of each month

Brookens Administrative Building, 1776 East Washington Street, Urbana, IL

<https://us02web.zoom.us/j/81559124557> 312-626-6799, Meeting ID: 815 5912 4557

September 21, 2022 – Shields-Carter Room

September 28, 2022 5:45PM – Shields-Carter Room – *special joint meeting with CCMHB*

October 19, 2022 – Shields-Carter Room

October 26, 2022 5:45PM – Shields-Carter Room – *study session with CCMHB*

November 16, 2022 - Shields-Carter Room

December 21, 2022 – Shields-Carter Room

January 18, 2023 – Shields-Carter Room

February 15, 2023 5:45PM – Shields-Carter Room – *special joint meeting with CCMHB*

February 22, 2023 – Shields-Carter Room

March 22, 2023 – Shields-Carter Room (*Ramadan begins*)

April 19, 2023 – Shields-Carter Room

May 17, 2023 – Shields-Carter Room

June 21, 2023 – Shields-Carter Room

This schedule is subject to change due to unforeseen circumstances.

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

Meetings are posted in advance and recorded and archived at

<http://www.co.champaign.il.us/mhbddb/DDDBMeetingDocs.php>

Public Input: All are welcome to attend the Board's meetings, using the Zoom options or in person, in order to observe and to offer thoughts during the "Public Participation" period of the meeting. For support to participate in a meeting, let us know how we might help by emailing stephanie@ccmhb.org.

If the time of the meeting is not convenient, you may still communicate with the Board by emailing stephanie@ccmhb.org any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated but be aware that the time for each person's comments may be limited to five minutes.



CCMHB 2022-2023 Meeting Schedule

5:45PM Wednesday after the third Monday of each month

Brookens Administrative Building, 1776 East Washington Street, Urbana, IL
<https://us02web.zoom.us/j/81393675682> 312-626-6799 Meeting ID: 813 9367 5682

September 21, 2022 – Shields-Carter Room

September 28, 2022 – *Special Joint Mtg with CCDDDB* - Shields-Carter Room

October 19, 2022 – Shields-Carter Room

October 26, 5:45PM – *study session with CCDDDB* - Shields-Carter

November 16, 2022 – Shields-Carter Room (*off cycle*)

December 21, 2022 – Shields-Carter Room (*off cycle*) – *tentative*

January 18, 2023 – Shields-Carter Room

January 25, 2023 – *study session* - Shields-Carter Room

February 15, 2023 – *Special Joint Mtg with CCDDDB* - Shields-Carter Room

February 22, 2023 – Shields-Carter Room

March 22, 2023 – Shields-Carter Room (*Ramadan begins*)

March 29, 2023 – *study session* - Shields-Carter Room

April 19, 2023 – Shields-Carter Room

April 26, 2023 – *study session* - Shields-Carter Room

May 17, 2023 – *study session* - Shields-Carter Room

May 24, 2023 – Shields-Carter Room

June 21, 2023 – Shields-Carter Room

This schedule is subject to change due to unforeseen circumstances.

Please email stephanie@ccmhb.org to confirm meetings or to request alternative format documents, language access, or other accommodation needed to participate.

Meetings are archived at <http://www.co.champaign.il.us/mhbddb/MHBMeetingDocs.php>

Public Input: All meetings and study sessions include time for members of the public to address the Board. All are welcome to attend meetings, using the Zoom options or in person, in order to observe and to offer thoughts during "Public Participation". For support to participate, let us know how we might help by emailing stephanie@ccmhb.org.

If the time of the meeting is not convenient, you may still communicate with the Board by emailing stephanie@ccmhb.org any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated but be aware that the time for each person's comments may be limited to five minutes.

IMPORTANT DATES - 2022 Meeting Schedule with Subjects, Agency and Staff Deadlines, and Allocation Timeline for PY23

This schedule offers dates and subject matter of meetings of the CCDDDB. Subjects are not exclusive to any given meeting, as other matters requiring Board review or action may be addressed. Study sessions may be added on topics raised at meetings or by staff or with the CCMHB. Meetings are held at 9AM; study sessions at 5:45PM. Included are dates for steps in the PY23 funding process and deadlines related to PY21 and PY22 agency contracts.

1/3/22	<i>Online System opens for Applications for PY23 Funding</i>
1/19/22	Regular Board Meeting
1/28/22	<i>Agency PY22 2nd Quarter and CLC Progress Reports due</i>
1/31/22	<i>Deadline for submission of updated eligibility questionnaires</i>
2/11/22	<i>Deadline for submission of applications for PY2023 funding (Online system will not accept any forms after 4:30PM)</i>
2/23/22	Regular Board Meeting List of Funding Requests
3/23/22	Regular Board Meeting
4/13/22	<i>Program summaries released to Board, posted online with the CCDDDB April 20 meeting agenda and packet</i>
4/20/22	Regular Board Meeting Board Review, Staff Summaries of Funding Requests
4/29/22	<i>Agency PY2022 Third Quarter Reports due</i>
5/11/22	<i>Allocation recommendations released to the Board and posted Online with CCDDDB May 18 meeting agenda and packet</i>
5/18/22	Regular Board Meeting Allocation Decisions; Authorize PY2023 Contracts
6/22/22	Regular Board Meeting: Draft FY2023 Budget

- 6/24/22 *Deadline for agency contract revisions & letters of engagement with CPA firms. PY2023 contracts completed.*
- 6/30/22 *Agency Independent Audits, Reviews, or Compilations due (only for those with calendar fiscal year, per Special Provision)*
- 7/20/22 **Regular Board Meeting:** Election of Officers
- 8/26/22 *Agency PY2022 4th Q Reports, CLC Progress Reports, and Annual Performance Measure Reports due*
- 9/21/22 **Regular Board Meeting**
Draft Three Year Plan 2022-24 with 2023 Objectives
Evaluation Capacity Building Project Report
- 9/28/22, 5:45PM **Special Joint Meeting with the CCMHB**
Authorize Release of RFP
Finalize I/DD Special Initiative Priorities for PY24
- 9/30/22 *RFP posted and advertised*
- 10/19/22 **Regular Board Meeting**
Release Draft Program Year 2024 Allocation Criteria
This meeting will be directly followed by an RFP Pre-Proposal Conference, at the same location/ link
- 10/26/22 **Joint Study Session with CCMHB** at 5:45PM
- 10/28/22 *Agency PY2023 First Quarter Reports due*
- 11/16/22 **Regular Board Meeting** (off cycle)
Approve Three Year Plan, PY24 Allocation Criteria
- 11/21/22 *Final Date to Issue RFP Addenda, if any*
- 12/11/22 *Public Notice of Funding Availability to be published by this date, giving at least 21-day notice of application period.*
- 12/21/22 *RFP Proposals due at Noon*
- 12/21/22 **Regular Board Meeting** (off cycle)

12/21/22

Opening of RFP Proposals, 5:30PM
directly before the regular meeting of the CCMHB,
at the same location/link.

12/31/22

Agency Independent Audits, Reviews, or Compilations due

1/2/23

Online System opens for Applications for PY2024 Funding

IMPORTANT DATES - 2023 Meeting Schedule with Subjects, Agency and Staff Deadlines, and Allocation Timeline for PY24

This schedule offers dates and subject matter of meetings of the Champaign County Developmental Disabilities Board. Subjects are not exclusive to any given meeting, as other matters requiring Board review or action may be addressed. Study sessions may be added on topics raised at meetings or by staff, or with the CCMHB. Regular meetings are held at 9AM; joint study sessions at 5:45PM. Included are tentative dates for steps in the funding process for PY24 and deadlines related to PY22 and PY23 agency contracts.

- | | |
|----------------|--|
| <i>1/2/23</i> | <i>Online System opens for Applications for PY24 Funding</i> |
| 1/18/23 | Regular Board Meeting |
| <i>1/27/23</i> | <i>Agency PY23 2nd Quarter and CLC Progress Reports due</i> |
| <i>2/10/23</i> | <i>Deadline for submission of applications for PY2024 funding
(Online system will not accept any forms after 4:30PM CST)</i> |
| 2/15/23 | Special Joint Meeting with CCMHB at 5:45PM
RFP Review Committee Recommendations |
| 2/22/23 | Regular Board Meeting – List of PY24 Requests |
| <i>3/1/23</i> | <i>If approved, new Evaluation Capacity Project contract issued</i> |
| 3/22/23 | Regular Board Meeting |
| <i>4/12/23</i> | <i>Program summaries released to Board, posted online with the
CCDDB April 19 meeting agenda and packet</i> |
| 4/19/23 | Regular Board Meeting
Board Review, Staff Summaries of Funding Requests |
| <i>4/28/23</i> | <i>Agency PY2023 3rd Quarter Reports due</i> |
| <i>5/10/23</i> | <i>Allocation recommendations released to the Board and posted
Online with CCDDB May 17 meeting agenda and packet</i> |
| 5/17/23 | Regular Board Meeting
Allocation Decisions; Authorize PY2024 Contracts |

- 6/1/23 *For contracts with a PY23-PY24 term, all updates to cloned PY24 forms should be completed and submitted by this date.*
- 6/17/23 *Deadline for agency application/ contract revisions
Deadline for agency letters of engagement with CPA firms
PY2024 contracts completed*
- 6/21/23 Regular Board Meeting: Draft FY2024 Budget**
- 6/30/23 *Agency Independent Audits, Reviews, or Compilations due
(only for those with calendar fiscal year, per Special Provision)*
- 7/19/23 Regular Board Meeting: Election of Officers**
- 8/16/23 Regular Board Meeting - tentative**
- 8/25/23 *Agency PY2023 4th Quarter Reports, CLC Progress Reports, and Annual Performance Measure Reports due*
- 9/20/23 Regular Board Meeting**
Draft Three Year Plan 2022-24 with 2024 Objectives
- 10/18/23 Regular Board Meeting**
Release Draft Program Year 2025 Allocation Criteria
- 10/25/23 **Joint Study Session with CCMHB at 5:45PM**
- 10/27/23 *Agency PY2024 1st Quarter Reports due*
- 11/15/23 Regular Board Meeting (off cycle)**
Approve Three Year Plan, PY25 Allocation Criteria
- 12/10/23 *Public Notice of Funding Availability to be published by this date, giving at least 21-day notice of application period.*
- 12/20/23 Regular Board Meeting (off cycle) - tentative**
- 12/31/23 *Agency Independent Audits, Reviews, or Compilations due*
- 1/2/24 *Online System opens for Applications for PY2025 Funding*

Agency and Program acronyms

- CC – Community Choices
- CCDDB – Champaign County Developmental Disabilities Board
- CCHS – Champaign County Head Start, a program of the Regional Planning Commission
- CCMHB – Champaign County Mental Health Board
- CCRPC – Champaign County Regional Planning Commission
- CUAN – Champaign-Urbana Autism Network
- DSC - Developmental Services Center
- DSN – Down Syndrome Network
- IAG – Individual Advocacy Group
- ISC – Independent Service Coordination Unit
- FDC – Family Development Center
- PACE – Persons Assuming Control of their Environment, Inc.
- PCMHC – Piatt County Mental Health Center
- RCI – Rosecrance Central Illinois
- RPC – Champaign County Regional Planning Commission

Glossary of Other Terms and Acronyms

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

AAC – Augmentative and Alternative Communication

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

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

ACA – Affordable Care Act

ACMHAI – Association of Community Mental Health Authorities of Illinois

ADA – Americans with Disabilities Act

ADD – Attention Deficit Disorder

ADHD – Attention Deficit/Hyperactivity Disorder

ADL – Activities of Daily Living

ASD – Autism Spectrum Disorder

ASL – American Sign Language

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

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

BD – Behavior Disorder

BSP – Behavior Support Plan

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

CARF- Council on Accreditation of Rehabilitation Facilities

CC – Champaign County

CDS – Community Day Services, formerly “Developmental Training”

CFC – Child and Family Connections Agency

CFCM – Conflict Free Case Management

C-GAF – Children’s Global Assessment of Functioning

CILA – Community Integrated Living Arrangement

CLC – Cultural and Linguistic Competence

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

CNA – Certified Nursing Assistant

COTA – Certified Occupational Therapy Assistant

CP – Cerebral Palsy

CQL – Council on Quality and Leadership

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

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

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

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

DD – Developmental Disability

DDD – Division of Developmental Disabilities

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

DHS – (Illinois) Department of Human Services

DOJ – (US) Department of Justice

DRS – (Illinois) Division of Rehabilitation Services

DSM – Diagnostic Statistical Manual.

DSP – Direct Support Professional

DT – Developmental Training, now “Community Day Services”

DT – Developmental Therapy, Developmental Therapist

Dx – Diagnosis

ED – Emotional Disorder

EI – Early Intervention

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

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

ED – Emergency Department

ER – Emergency Room

FAPE – Free and Appropriate Public Education

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

FOIA – Freedom of Information Act.

FQHC – Federally Qualified Health Center

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

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

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

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

HCBS – Home and Community Based Services

HI – Hearing Impairment or Health Impairment

Hx – History

ICAP – Inventory for Client and Agency Planning

ICDD – Illinois Council for Developmental Disabilities

ICFDD – Intermediate Care Facility for the Developmentally Disabled

ID – Intellectual Disability

IDEA – Individuals with Disabilities Education Act

IDHS – Illinois Department of Human Services

IDOC – Illinois Department of Corrections

IDPH – Illinois Department of Public Health

IDT – Interdisciplinary Team

IEP – Individualized Education Plan

IFSP – Individualized Family Service Plan

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

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

I&R – Information and Referral

ISBE – Illinois State Board of Education

ISC – Independent Service Coordination

ISP – Individual Service Plan, Individual Success Plan

ISSA – Independent Service & Support Advocacy

LCPC – Licensed Clinical Professional Counselor

LCSW – Licensed Clinical Social Worker

LD – Learning Disability

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

LPC – Licensed Professional Counselor

LPN – Licensed Practical Nurse

MCO – Managed Care Organization

MDC – Multidisciplinary Conference

MDT – Multidisciplinary Team

MH – Mental Health

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

MI – Mental Illness

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

MSW – Master of Social Work

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

NACO – National Association of Counties

NCI – National Core Indicators

NOS – Not Otherwise Specified

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

OMA – Open Meetings Act.

OT – Occupational Therapy, Occupational Therapist

OTR – Registered Occupational Therapist

PAS – Pre-Admission Screening

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

PCI – Parent Child Interaction groups.

PCP – Person Centered Planning, Primary Care Physician

PDD – Pervasive Developmental Disorders

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

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

PSH – Permanent Supportive Housing

PT – Physical Therapy, Physical Therapist

PTSD – Post-Traumatic Stress Disorder

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

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

QIDP – Qualified Intellectual Disabilities Professional

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

RCCSEC – Rural Champaign County Special Education Cooperative

RD – Registered Dietician

RN – Registered Nurse

RT – Recreational Therapy, Recreational Therapist

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

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

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

SEDS – Social Emotional Development Specialist

SEL – Social Emotional Learning

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

SH – Supportive Housing

SIB – Self-Injurious Behavior

SIB-R – Scales of Independent Behavior-Revised

SLI – Speech/Language Impairment

SLP – Speech Language Pathologist

SPD – Sensory Processing Disorder

SSA – Social Security Administration

SSDI – Social Security Disability Insurance

SSI – Supplemental Security Income

SST – Support Services Team

SUD – Substance Use Disorder

SW – Social Worker

TIC – Trauma Informed Care

TPC – Transition Planning Committee

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

VI – Visual Impairment

VR – Vocational Rehabilitation

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

WIOA – Workforce Innovation and Opportunity Act

#15

Kim Bowdry, Associate Director for Intellectual & Developmental Disabilities Staff Report – October 2022

CCDDB/CCMHB: I cloned programs in the online claims system. The PY23 1st Quarter programs and claims were cloned to give agencies the ability to begin reporting PY23 2nd Quarter claims. I also completed compiling the agency Performance Outcome Reports into one document. This document can be found in the Downloadable Files section of the Champaign County (Illinois) Mental Health Board (CCMHB) and Developmental Disabilities Board (CCDDB) Registration, Application, and Reporting System site (<https://ccmhddbrds.org>). PY23 1st Quarter Service Activity Reports are due on October 30, 2022.

Using data from the PY22 4th Quarter reports, I have compiled the 'Utilization Summaries for PY2022 CCDDB and CCMHB I/DD Programs' document, which can be found in this packet.

The Financial Review for CU Autism Network or the Financial Compilation for CU Able have not been received. CU Autism was granted an extension until 12/31/2022. Champaign County Down Syndrome Network has not submitted the PY20 audit.

Program Site Visits for DSC's Family Development and Workforce Development and Retention programs are scheduled for October 19, 2022. The DSC Individual and Family Support and Service Coordination site visits are scheduled to be completed by November 1, 2022.

Executive Director Canfield and I met with representatives from CCRPC related to staffing challenges in the Decision Support PCP program. CCRPC staff shared that they are close to being fully staffed again.

Executive Director Canfield and I also met with representatives from the Stephen's Family YMCA/Larkin's Place to discuss the CCDDB funding process and requirements. I shared the CCDDB Funding Guidelines, CCDDB PY23 Priorities, and the Draft I/DD Special Initiatives Fund Priorities with Alyssa Anderson, Larkin's Place Director before this meeting.

I assisted Mr. Bryson with the Program Site Visit for Community Services Center of Northern Champaign County. A new Executive Director took over in July 2022. CSCNCC has increased their outreach efforts in the community to reach people who may not have previously been aware of the services provided at CSCNCC. The CCRPC Head Start/Early Head Start Early Childhood Mental Health Services site visit was rescheduled for October 20, 2022.

I participated in meetings with the Online System developer to discuss content for the Online Reporting System workshop. I also emailed both System Developers regularly regarding necessary fixes in the system.

CCDDB Contract Amendments: DSC Community Employment and DSC Community Living contracts were amended to increase the number of Transition Plan Clients (TPCs) due to indirect services being unallowable billings through the HBS waiver.

Learning Opportunities: On September 29, 2022, Alex Campbell, EMK Consulting presented a user training for the Online Reporting System. The presentation was held virtually, recorded, and the recording will be posted on the (<https://ccmhddbrds.org>) website.

Elise Belknap, Ph.D., NCC is scheduled to present on November 10, 2022. This will be a de-escalation training at the request of a previous workshop attendees.

NACBHDD: I was unable to attend the September meeting of the I/DD committee. I participated in a meeting with NACBHDD Executive Director Jonah Cunningham and Executive Director Canfield to discuss the state of Illinois I/DD supports and services.

Disability Resource Expo: Miranda Delanty and I stuffed 343 pencil bags with various fidgets for the Children's Activity Bags for the 2022 Expo in place of the Children's Activity Room. I also spent a few hours with Barb Bressner and Ashley Withers at the Expo Storage Facility. This time was spent determining which items would be needed for the upcoming event and organizing those items for ease of loading them out for the Expo. I completed several other DISABILITY Resource Expo related tasks, including ordering gloves, hand sanitizer (small logo bottles and large bottles for the event), and masks. I also loaded the Expo Resource book and event map onto flash drives.

The Expo is still in need of volunteers. You can sign-up here:
<https://www.signupgenius.com/go/60B0845ADA82CA0F58-disability>

UIUC School of Social Work Community Learning Lab: I continue working with four University of Illinois BSW seniors on a weekly basis. The students are working to create more DISABILITY Resource Expo exhibitor videos. The students chose to create their first video with the new director of Larkin's Place and will also be working with the Champaign County Clerk and Recorder of Deeds for a second video.

Other activities: I participated in the October Human Services Council meeting. There was a Fair Housing presentation from Foluke Akanni, Housing Policy Organizer, Housing Action Illinois and Michael Chavarria, Executive Director, HOPE Fair Housing Center. Katina Wilcher, LCSW, M.Ed Director, LIFT Champaign also presented on the LIFT program. The LIFT (LEADING INDIVIDUALS AND FAMILIES TO TRANSFORMATION) program is a partnership between Unit 4 and the City of Champaign. The program focuses on African American youth in grades K-12 (and their families) who are experiencing significant challenges academically and personally. The program provides trauma-informed care through intensive wraparound services and school and community resources.

I participated in the September meeting of the MHDDAC. I also participated in several additional webinars, workshops, and virtual trainings.

Leon Bryson, Associate Director for Mental Health & Substance Use Disorders

Staff Report- October 2022

Summary of Activity

CCMHB Three Year Plan 2022-2024 with Draft PY23 Objectives document was emailed to agencies and stakeholders for feedback on the revised objectives. The deadline for comments is due by October 22, 2022. The Plan with the final draft of PY2023 objectives will be presented to the Board for approval in November.

During October, I worked on PY22 Utilization Summaries for CCMHB and CCDDDB I/DD Programs. The summaries show each program's consumer outcomes for the year. This report will be included in the November Board packet.

PY23 First Quarter Financial and Program Reports are due Friday, October 28, 2022, by 11:59 PM CST. Agencies are encouraged to submit a *Request for Deadline Extension* form before the due date for late reports.

CCMHB staff and the United Way of Champaign County are collaborating for the CCMHB/DDDB Joint Study Session on October 26, 2022. We are bringing together agencies and stakeholders who work with the homeless population for a virtual roundtable discussion on the issues surrounding homelessness in Champaign County. I am working closely with United Way's Chief Impact Officer Ms. Beverly Baker on this joint discussion.

Community Service Center of Northern Champaign County in-person site visit was completed in early October. No significant issues were found during the visit. Ms. Bowdry assisted in the site visit. Other site visits scheduled for October are CCRPC Head-Start/Early Head Start, Terrapin Station Sober Living, Crisis Nursey, and Grow.

Criminal Justice-Mental Health: Attended the I-Plan Behavioral Health Workgroup via zoom. The new I-Plan Coordinator Mr. JR Lil facilitated the meeting and addressed the goals for the group and next action steps. The next meeting is scheduled for Thursday October 20th.

Reentry Council: The Council met and reviewed a data survey, suggested stakeholders list, and discussed tabled agenda items: Housing and Transportation Barriers and Criminal Justice Reform Recommendations/Ideas Discussion.

Continuum of Service Providers to the Homeless (CSPH): During the CSPH Full Board Meeting, members listened to presentations from Fair Hope Housing Center and Housing Action Illinois on the recent state law change, creating fair housing protections based on income and resources for people to use if they think they have been discriminated against.

Rantoul Service Provider's Meeting: The next meeting will take place on Monday, October 17th.

ACMHAI Committee Meeting: Attended the ACMHAI I/DD Committee. Committee members heard presentations from Jim Haptonstahl Vice President of Institutional Giving United Cerebral

Palsy Seguin of Greater Chicago (UCP Seguin) and Lori Opiela Chief Policy, Research, & Advocacy Officer, United Cerebral Palsy Seguin of Greater Chicago (UCP Seguin).

Other Activities:

- Ms. Canfield and I met with Promise Healthcare staff discuss to the online system workshop, subcontracts, CCMHB funding processes, and addressing communication needs and concerns.
- I participated in a DSC site visit led by Ms. Bowdry and Ms. Howard-Gallo.
- Weekly meetings with U of I Human Development and Family Studies (HDFS) graduate students on our participatory research project. The students and I are deciding which theoretical framework and methodologies will be used for the project.
- Participated in the Online system workshop for CCMHB/DDB agencies with Ms. Bowdry and System developer Alex Campbell.
- Participated in several Expo Steering Committee meetings. Members are discussing all the components for the October 22nd event including the budget, marketing and advertising plans, defining volunteer duties, and so forth.

Learning Opportunities (Trainings and Webinars) :

- National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD) Webinar: Equity in Suicide Prevention.
- Quality Matters: An Update From NCQA On Behavioral Health Measurement Trends. The National Committee for Quality Assurance (NCQA) collects information on the performance of health care service delivery from health plans covering more than 191 million people using its proprietary Healthcare Effectiveness Data and Information Set, or HEDIS.

Stephanie Howard-Gallo

Operations and Compliance Coordinator Staff Report – October 2022 Board Meeting

SUMMARY OF ACTIVITY:

Audits/Financial Reviews:

Promise Healthcare, DREAAM, CU Able, and CU Autism Network (CUAN) still owe audits, financial reviews, or compilations.

Fourth Quarter Reporting (last year's contracts):

4th Quarter financial and program reports for all funded programs were due August 26th. As reported in my September staff report, Mahomet Area Youth Club (MAYC) did not request an extension prior to the deadline and did not submit reports. A letter of suspension was issued on August 31. They have since submitted all required reports and payments to them have resumed.

First Quarter Reporting:

First Quarter reports will be due at the end of October. I sent out a reminder to all the agencies of the upcoming due date.

Other Compliance:

DREAAM has not completed a corrective action plan sent to them on July 14, 2022. A contract for 2023 has not been issued because of this.

Site Visits:

In September and October, I participated (along with Kim and Leon) in site visits for:

- DSC Community Living (program site visit)

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

I attended the final Expo Steering Committee meeting on October 5th. I am coordinating the art show for the Disability Expo scheduled for October 22, 2022 at Marketplace Mall from 11 a.m. to 4 p.m. So far, eight artists/groups have signed up. We are providing, tables, chairs,

tablecloths, face masks, hand sanitizer, water, and snacks for the artists.

Other:

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

October 2022 Staff Report- Shandra Summerville Cultural and Linguistic Competence Coordinator

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

Agency Support and Technical Assistance:

- **Reminder about CLC Required Training:**
Community Choices Human Rights and Advocacy Group- A training has been developed by the members of the Human Rights Advocacy Group. This training focuses on how to work with people living with a disability. If your organization will utilize this as a training as a funding requirement, please include me in your correspondence with Hannah Sheets.

HRA Training Guidelines

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

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

PY 23- update to 2nd Quarter Reports - I have reviewed the 4th Quarter Reports for the CCMHB/DDB Funded Organizations. Reminder that 2nd Quarter requirement will be the requirement of add the demographics of board that will show the reflection of the value of diversity, cultural competence, and qualities of the Board Composition.

Cultural Competence Training/Support

Community Choices- Completed a CLC Site Visit for Community Choices on September 13, 2022

Mahomet Area Youth Club - Support for PY22 4th Quarter CLC Report and desk review of 4th quarter CLC Plan reports.

Urbana Neighborhood Connections: Support for CLC Reporting and Updates to the CLC Plan for the incoming Executive Director.

CLC Coordinator Direct Service Activities

Mental Health First Aid-

Mental Health First Aid now has a statewide coordinated person. For information, please refer to the website: <http://mhfaillinois.org/>

CLC Site Visits: I have started to schedule CLC Site visits for organizations. There will be a comprehensive review of CLC Work within the agencies that will review the PY22 Activities.

October 2022 Staff Report- Shandra Summerville

Cultural and Linguistic Competence Coordinator

Anti-Stigma Activities/Community Collaborations and Partnerships

Disability Resource Expo Committee- I met with Becca Obuchowski on creating descriptions for the volunteers and updated needs for the Expo. I created the sign-up link and attended the final meeting to work out logistics with the committee for the Disability Expo. I will provide support for the Volunteer Coordinator and Other needs for set up and tear down.

C-HEARTS African American Storytelling Project:

The ASPIRE Program received funding from the University of Illinois Call to Action to Address Racism & Social Injustice Research Program. The ASPIRE program is a youth-centered intervention that is co-created between trusted adult facilitators and middle school youth that facilitates psychological health. This team meets bi-weekly as a research team. We have started to meet for the fall semester. The team presented at the Research Symposium on October 7, 2022 about the ASPIRE Program and the results of the research.

ACHMAHI

I attended the Children's Behavioral Health Committee Meeting on July 28, 2022. We discussed the ACHMAI strategic plan and reviewed the survey analysis of the Evidence Based Practice Programs in counties where 377/708 Boards are present Results are attached. I attended the ACMHAI Quarterly Meeting on August 11 & 12 in Bloomington, IL.

United Way Emerging Community Leader Program:

Emerging Community Leaders is a program in partnership with United Way of Champaign County. This program is to work with future leaders to introduce them to non-profit organizations and board service in Champaign County. I attended the Volunteer Community Service Team Presentations. There was a project that worked on increasing awareness within the community about 2-1-1.

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

Call to Action to Address Racism & Social Injustice at the University of Illinois (Highly Recommended)

<https://calltoaction.illinois.edu/>

The University of Illinois Call to Action to Address Racism & Social Injustice is a commitment by our university to put the need to address systemic racism and generationally embedded racial disparity into concrete action to find new solutions. Announced by Chancellor Robert J. Jones in July 2020, the Call to Action includes an \$2 million annual commitment designed to quickly and permanently transform the way our own university supports, prioritizes, and recognizes the research of scholars working on issues of systemic racism in the United States. Chancellor Jones has also charged a steering committee and four working groups to identify the work that we must commit to now, in order to create a campus that is free of structural and systemic racism and bias.

October 2022 Staff Report- Shandra Summerville Cultural and Linguistic Competence Coordinator

Visualizing the Impact of the Opioid Overdose Crisis

https://nihcm.org/publications/visualizing-the-impact-of-the-opioid-overdose-crisis?utm_source=NIHCM+Foundation&utm_campaign=7d3624c5c7-091522_SUD_archive&utm_medium=email&utm_term=0_6f88de9846-7d3624c5c7-167751988

Strategies to Reduce Drug Overdose Deaths: Promote Evidence-based Solutions from Prevention to Recovery



Improve Data Collection

- Promote the timely collection of local data, including demographics
- Make real-time, disaggregated data available for identifying at-risk groups
- Use information gathered to inform effective, community-tailored strategies



October 2022 Staff Report- Shandra Summerville

Cultural and Linguistic Competence Coordinator

Yearly CLC PY22 Reporting as of 10/1/2022

2022 CCMHB/DDB Agency Cultural and Linguistic Reporting Form

Agency	2nd Quarterly Reports Completed	4th Quarterly Reports Completed
Champaign County Head Start(RPC) (DDB/MHE	Yes	Yes -Submitted 8-25-22
County Regional Planning Commission Commi	Yes	Yes -Submitted 8-25-22
County Christian Health CenterPOB 5005 Champaign, IL	Yes	Yes -Submitted 8-25-22
Health Care Consumers44 E. Main St., Champaign 61820352-6533ED: Claudi		Yes-Submitted 8-26-22
nyon Rd., Champaign, IL 61820384-1266 or	Yes	Yes Submitted 8/22/22
Champaign, IL 61820621-1090Executive Director:	Yes	Yes Submitted 8/25/22
INCC)520 E. Wabash, Rantoul, IL 61866893-	Yes	Yes Submitted 8/22/22
52-7151 Fax: 352-1035ED: Elizabeth Cookecook@cour	Yes	Yes Submitted 8/26/22
2731 Fax: 337-2732Cell: 621-4664Executive Director:Yes	Yes	Yes Submitted 8/2/22
Stephanie Record		Yes- Submitted 8/24/22
Urbana, Illinois 61803(412) 953-8434 Con	Yes	Yes- Submitted 8/26/22
)1301 N.Cunningham Ave.Urbana, IL 6180	Yes	Yes- Submitted 8/26/22
Champaign, IL 61824548-4346 or560-2194 Tra	Yes	Yes- Submitted 8/26/22
, IL 61822356-9176 or 369-8475 Fax: 356-9	Yes	Yes Submitted 8/22/22
gn 61824-1396355-5437Executive Director: Sam BanksYes	Yes	Yes Submitted 8/31/22*
Charles Burton		Extension Requested
52-9521Executive Director: Sheryl Bautch (sbautch@fam	Yes	Yes Submitted 8/3/2022
ilyservicecc.org)		Yes Submitted 8/26/22
orPOB 8923 Champaign, IL 61826FirstFolllc	Yes	Yes Submitted 8/26/22
GROW Illinois	Yes	Yes Submitted 8/26/22
Mahomet Area Youth Club	Yes	Yes Submitted 9/23/22
PACE	Submitted 2/10/22	Yes Submitted 8/26/22
Promise Healthcare Systems	Yes	Yes Submitted 8/5/22
Rape Advocacy, Counsleing& Education	Yes	Yes Submitted 8/10/22
Refugee Assistance Center	Yes	Yes Submitted 8/25/22
Rosecrance C-U	Yes	Yes Submitted 8/20/22
UP(Uniting Pride) Center		Yes Submitted 8/24/22
Urbana Neighborhood Connections	Yes	Yes Submitted 8/27/22
The WELL	Yes	Yes Submitted 8/24/22
WIN Recovery	YES	Yes Submitted 8/31/22
Terripen Station	Yes	Yes Submitted 8/31/22

Champaign County, IL



YEAR-TO-DATE BUDGET REPORT

FOR 2022 09							
ACCOUNTS FOR:	ORIGINAL	ESTIM REV	REVISED	ACTUAL YTD	REMAINING	PCT	
2090 MENTAL HEALTH	ESTIM REV	ADJSTMTS	EST REV	REVENUE	REVENUE	USE/COL	
20000072 MENTAL HEALTH							
400101 PROPERTY TAXES - CURRENT							
20000072 400101 PROPERTY TAXES	-5,502,918	0	-5,502,918	-4,271,286.29	-1,231,631.71	77.6%*	
TOTAL PROPERTY TAXES - CURRENT	-5,502,918	0	-5,502,918	-4,271,286.29	-1,231,631.71	77.6%	
400103 PROPERTY TAXES - BACK TAX							
20000072 400103 PROPERTY TAXES	-1,000	0	-1,000	.00	-1,000.00	.0%*	
TOTAL PROPERTY TAXES - BACK TAX	-1,000	0	-1,000	.00	-1,000.00	.0%	
400104 PAYMENT IN LIEU OF TAXES							
20000072 400104 PAYMENT IN LIEU	-2,000	0	-2,000	-1,473.55	-526.45	73.7%*	
TOTAL PAYMENT IN LIEU OF TAXES	-2,000	0	-2,000	-1,473.55	-526.45	73.7%	
TOTAL MENTAL HEALTH	-5,505,918	0	-5,505,918	-4,272,759.84	-1,233,158.16	77.6%	
200000105 MENTAL HEALTH							
400476 OTHER INTERGOVERNMENTAL							
200000105 400476 OTHER INTERGOVE	-395,426	0	-395,426	-263,616.00	-131,810.00	66.7%*	
TOTAL OTHER INTERGOVERNMENTAL	-395,426	0	-395,426	-263,616.00	-131,810.00	66.7%	
TOTAL MENTAL HEALTH	-395,426	0	-395,426	-263,616.00	-131,810.00	66.7%	
200000132 MENTAL HEALTH							
400801 INVESTMENT INTEREST							

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 09

ACCOUNTS FOR: 2090	MENTAL HEALTH	ORIGINAL ESTIM REV	ESTIM REV ADJSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
20000132	400801	INVESTMENT INTE	-2,000	0	-2,000	-11,402.89	9,402.89 570.1%
		TOTAL INVESTMENT INTEREST	-2,000	0	-2,000	-11,402.89	9,402.89 570.1%
		TOTAL MENTAL HEALTH	-2,000	0	-2,000	-11,402.89	9,402.89 570.1%
20000137 MENTAL HEALTH							
400901 GIFTS AND DONATIONS							
20000137	400901	GIFTS AND DONAT	-3,000	0	-3,000	.00	-3,000.00 .0%*
		TOTAL GIFTS AND DONATIONS	-3,000	0	-3,000	.00	-3,000.00 .0%
400902 OTHER MISCELLANEOUS REVENUE							
20000137	400902	OTHER MISCELLAN	-45,000	0	-45,000	-78,213.00	33,213.00 173.8%
		TOTAL OTHER MISCELLANEOUS REVENUE	-45,000	0	-45,000	-78,213.00	33,213.00 173.8%
		TOTAL MENTAL HEALTH	-48,000	0	-48,000	-78,213.00	30,213.00 162.9%
20000154 MENTAL HEALTH							
501001 STATIONERY AND PRINTING							
20000154	501001	STATIONERY AND	1,500	0	1,500	.00	1,500.00 .0%
		TOTAL STATIONERY AND PRINTING	1,500	0	1,500	.00	1,500.00 .0%
501002 OFFICE SUPPLIES							
20000154	501002	OFFICE SUPPLIES	3,700	0	3,700	2,422.95	1,277.05 65.5%

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Champaign County, IL



YEAR-TO-DATE BUDGET REPORT

FOR 2022 09							
ACCOUNTS FOR:	ORIGINAL ESTIM REV	ESTIM REV ADJSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL	
2090 MENTAL HEALTH							
TOTAL OFFICE SUPPLIES	3,700	0	3,700	2,422.95	1,277.05	65.5%	
501003 BOOKS, PERIODICALS, AND MANUAL							
20000154 501003 BOOKS, PERIODIC	300	0	300	.00	300.00	.0%	
TOTAL BOOKS, PERIODICALS, AND MANUAL	300	0	300	.00	300.00	.0%	
501004 POSTAGE, UPS, FEDEX							
20000154 501004 POSTAGE, UPS, F	2,000	0	2,000	642.93	1,357.07	32.1%	
TOTAL POSTAGE, UPS, FEDEX	2,000	0	2,000	642.93	1,357.07	32.1%	
501005 FOOD NON-TRAVEL							
20000154 501005 FOOD NON-TRAVEL	150	0	150	149.89	.11	99.9%	
TOTAL FOOD NON-TRAVEL	150	0	150	149.89	.11	99.9%	
501017 EQUIPMENT LESS THAN \$5000							
20000154 501017 EQUIPMENT LESS	7,000	0	7,000	6,802.00	198.00	97.2%	
TOTAL EQUIPMENT LESS THAN \$5000	7,000	0	7,000	6,802.00	198.00	97.2%	
502001 PROFESSIONAL SERVICES							
20000154 502001 PROFESSIONAL SE	162,000	-30,000	132,000	81,613.06	50,386.94	61.8%	
TOTAL PROFESSIONAL SERVICES	162,000	-30,000	132,000	81,613.06	50,386.94	61.8%	
502002 OUTSIDE SERVICES							
20000154 502002 OUTSIDE SERVICE	11,000	25,000	36,000	27,722.18	8,277.82	77.0%	

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 09							
ACCOUNTS FOR:	ORIGINAL	ESTIM REV	REVISED	ACTUAL YTD	REMAINING	PCT	
2090 MENTAL HEALTH	ESTIM REV	ADJSTMTS	EST REV	REVENUE	REVENUE	USE/COL	
TOTAL OUTSIDE SERVICES	11,000	25,000	36,000	27,722.18	8,277.82	77.0%	
502003 TRAVEL COSTS							
20000154 502003 TRAVEL COSTS	1,500	0	1,500	493.42	1,006.58	32.9%	
TOTAL TRAVEL COSTS	1,500	0	1,500	493.42	1,006.58	32.9%	
502004 CONFERENCES AND TRAINING							
20000154 502004 CONFERENCES AND	16,000	-10,000	6,000	1,330.88	4,669.12	22.2%	
TOTAL CONFERENCES AND TRAINING	16,000	-10,000	6,000	1,330.88	4,669.12	22.2%	
502007 INSURANCE (NON-PAYROLL)							
20000154 502007 INSURANCE (non-	18,000	0	18,000	7,813.67	10,186.33	43.4%	
TOTAL INSURANCE (NON-PAYROLL)	18,000	0	18,000	7,813.67	10,186.33	43.4%	
502011 UTILITIES							
20000154 502011 UTILITIES	1,000	0	1,000	492.70	507.30	49.3%	
TOTAL UTILITIES	1,000	0	1,000	492.70	507.30	49.3%	
502012 REPAIR AND MAINT							
20000154 502012 REPAIRS AND MAI	600	0	600	.00	600.00	.0%	
TOTAL REPAIR AND MAINT	600	0	600	.00	600.00	.0%	
502013 RENTAL							
20000154 502013 RENTAL	24,800	0	24,800	17,921.37	6,878.63	72.3%	

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 09							
ACCOUNTS FOR:		ORIGINAL ESTIM REV	ESTIM REV ADJSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
2090	MENTAL HEALTH						
	TOTAL RENTAL	24,800	0	24,800	17,921.37	6,878.63	72.3%
502014 FINANCE CHARGES AND BANK FEES							
20000154	502014 FINANCE CHARGES	30	0	30	.00	30.00	.0%
	TOTAL FINANCE CHARGES AND BANK FEES	30	0	30	.00	30.00	.0%
502019 ADVERTISING, LEGAL NOTICES							
20000154	502019 ADVERTISING, LE	500	0	500	.00	500.00	.0%
	TOTAL ADVERTISING, LEGAL NOTICES	500	0	500	.00	500.00	.0%
502021 DUES, LICENSE, & MEMBERSHP							
20000154	502021 DUES, LICENSE &	20,000	0	20,000	17,719.99	2,280.01	88.6%
	TOTAL DUES, LICENSE, & MEMBERSHP	20,000	0	20,000	17,719.99	2,280.01	88.6%
502022 OPERATIONAL SERVICES							
20000154	502022 OPERATIONAL SER	58,300	-5,000	53,300	17,573.88	35,726.12	33.0%
	TOTAL OPERATIONAL SERVICES	58,300	-5,000	53,300	17,573.88	35,726.12	33.0%
502024 PUBLIC RELATIONS							
20000154	502024 PUBLIC RELATION	13,000	30,000	43,000	24,370.00	18,630.00	56.7%
	TOTAL PUBLIC RELATIONS	13,000	30,000	43,000	24,370.00	18,630.00	56.7%
502025 CONTRIBUTIONS & GRANTS							
20000154	502025 CONTRIBUTIONS &	5,391,621	0	5,391,621	3,993,900.00	1,397,721.00	74.1%

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 09

ACCOUNTS FOR: 2090 MENTAL HEALTH	ORIGINAL ESTIM REV	ESTIM REV ADJSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
TOTAL CONTRIBUTIONS & GRANTS	5,391,621	0	5,391,621	3,993,900.00	1,397,721.00	74.1%
TOTAL MENTAL HEALTH	5,733,001	10,000	5,743,001	4,200,968.92	1,542,032.08	73.1%
20000198 MENTAL HEALTH						
700101 TRANSFERS OUT						
20000198 700101 TRANSFERS OUT	19,800	-10,000	9,800	.00	9,800.00	.0%
TOTAL TRANSFERS OUT	19,800	-10,000	9,800	.00	9,800.00	.0%
TOTAL MENTAL HEALTH	19,800	-10,000	9,800	.00	9,800.00	.0%
TOTAL MENTAL HEALTH	-198,543	0	-198,543	-425,022.81	226,479.81	214.1%
TOTAL REVENUES	-5,951,344	0	-5,951,344	-4,625,991.73	-1,325,352.27	
TOTAL EXPENSES	5,752,801	0	5,752,801	4,200,968.92	1,551,832.08	

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 09

ACCOUNTS FOR:	ORIGINAL ESTIM REV	ESTIM REV ADJSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
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21000070 MHB/DDB CILA FACILITIES

400801 INVESTMENT INTEREST

21000070 400801 INVESTMENT INTE	-200	0	-200	-3,118.60	2,918.60	1559.3%
TOTAL INVESTMENT INTEREST	-200	0	-200	-3,118.60	2,918.60	1559.3%
TOTAL MHB/DDB CILA FACILITIES	-200	0	-200	-3,118.60	2,918.60	1559.3%

21000082 MHB/DDB CILA FACILITIES

400902 OTHER MISCELLANEOUS REVENUE

21000082 400902 OTHER MISCELLAN	0	0	0	-260,368.90	260,368.90	100.0%
TOTAL OTHER MISCELLANEOUS REVENUE	0	0	0	-260,368.90	260,368.90	100.0%
TOTAL MHB/DDB CILA FACILITIES	0	0	0	-260,368.90	260,368.90	100.0%

21000096 MHB/DDB CILA FACILITIES

501017 EQUIPMENT LESS THAN \$5000

21000096 501017 EQUIPMENT LESS	6,176	0	6,176	.00	6,176.00	.0%
TOTAL EQUIPMENT LESS THAN \$5000	6,176	0	6,176	.00	6,176.00	.0%

502001 PROFESSIONAL SERVICES

21000096 502001 PROFESSIONAL SE	9,000	-8,000	1,000	600.00	400.00	60.0%
TOTAL PROFESSIONAL SERVICES	9,000	-8,000	1,000	600.00	400.00	60.0%

502002 OUTSIDE SERVICES

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 09							
ACCOUNTS FOR:		ORIGINAL ESTIM REV	ESTIM REV ADJSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
2101	I/DD SPECIAL INITIATIVES						
21000096	502002 OUTSIDE SERVICE	5,800	0	5,800	.00	5,800.00	.0%
	TOTAL OUTSIDE SERVICES	5,800	0	5,800	.00	5,800.00	.0%
502007 INSURANCE (NON-PAYROLL)							
21000096	502007 INSURANCE (NON-	4,200	0	4,200	316.33	3,883.67	7.5%
	TOTAL INSURANCE (NON-PAYROLL)	4,200	0	4,200	316.33	3,883.67	7.5%
502011 UTILITIES							
21000096	502011 UTILITIES	4,603	0	4,603	.00	4,603.00	.0%
	TOTAL UTILITIES	4,603	0	4,603	.00	4,603.00	.0%
502012 REPAIR AND MAINT							
21000096	502012 REPAIRS AND MAI-	10,000	8,000	18,000	12,562.00	5,438.00	69.8%
	TOTAL REPAIR AND MAINT	10,000	8,000	18,000	12,562.00	5,438.00	69.8%
502014 FINANCE CHARGES AND BANK FEES							
21000096	502014 FINANCE CHARGES	69	0	69	.00	69.00	.0%
	TOTAL FINANCE CHARGES AND BANK FEES	69	0	69	.00	69.00	.0%
502017 WASTE DISPOSAL AND RECYCLING							
21000096	502017 WASTE DISPOSAL	2	0	2	.00	2.00	.0%
	TOTAL WASTE DISPOSAL AND RECYCLING	2	0	2	.00	2.00	.0%
502021 DUES, LICENSE, & MEMBERSHP							

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 09							
ACCOUNTS FOR:	ORIGINAL ESTIM REV	ESTIM REV ADJSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL	
2101 I/DD SPECIAL INITIATIVES							
21000096 502021 DUES, LICENSE &	350	0	350	.00	350.00	.0%	
TOTAL DUES, LICENSE, & MEMBERSHP	350	0	350	.00	350.00	.0%	
TOTAL MHB/DDB CILA FACILITIES	40,200	0	40,200	13,478.33	26,721.67	33.5%	
21000115 MHB/DDB CILA FACILITIES							
600101 TRANSFERS IN							
21000115 600101 TRANSFERS IN	-50,000	0	-50,000	-50,000.00	.00	100.0%	
TOTAL TRANSFERS IN	-50,000	0	-50,000	-50,000.00	.00	100.0%	
TOTAL MHB/DDB CILA FACILITIES	-50,000	0	-50,000	-50,000.00	.00	100.0%	
21000123 MHB/DDB CILA FACILITIES							
800501 BUILDINGS							
21000123 800501 BUILDINGS	10,000	0	10,000	.00	10,000.00	.0%	
TOTAL BUILDINGS	10,000	0	10,000	.00	10,000.00	.0%	
TOTAL MHB/DDB CILA FACILITIES	10,000	0	10,000	.00	10,000.00	.0%	
TOTAL I/DD SPECIAL INITIATIVES	0	0	0	-300,009.17	300,009.17	100.0%	
TOTAL REVENUES	-50,200	0	-50,200	-313,487.50	263,287.50		
TOTAL EXPENSES	50,200	0	50,200	13,478.33	36,721.67		

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Champaign County, IL



YEAR-TO-DATE BUDGET REPORT

FOR 2022 09							
ACCOUNTS FOR:	ORIGINAL	ESTIM REV	REVISED	ACTUAL YTD	REMAINING	PCT	
2108 DEVLPMNTL DISABILITY FUND	ESTIM REV	ADJSTMTS	EST REV	REVENUE	REVENUE	USE/COL	
21000046 DEVLPMNTL DISABILITY FUND							
400101 PROPERTY TAXES - CURRENT							
21000046 400101 PROPERTY TAXES	-4,518,334	0	-4,518,334	-3,508,279.04	-1,010,054.96	77.6%*	
TOTAL PROPERTY TAXES - CURRENT	-4,518,334	0	-4,518,334	-3,508,279.04	-1,010,054.96	77.6%	
400103 PROPERTY TAXES - BACK TAX							
21000046 400103 PROPERTY TAXES	-1,000	0	-1,000	.00	-1,000.00	.0%*	
TOTAL PROPERTY TAXES - BACK TAX	-1,000	0	-1,000	.00	-1,000.00	.0%	
400104 PAYMENT IN LIEU OF TAXES							
21000046 400104 PAYMENT IN LIEU	-2,000	0	-2,000	-1,209.97	-790.03	60.5%*	
TOTAL PAYMENT IN LIEU OF TAXES	-2,000	0	-2,000	-1,209.97	-790.03	60.5%	
TOTAL DEVLPMNTL DISABILITY FUND	-4,521,334	0	-4,521,334	-3,509,489.01	-1,011,844.99	77.6%	
21000077 DEVLPMNTL DISABILITY FUND							
400801 INVESTMENT INTEREST							
21000077 400801 INVESTMENT INTE	-1,000	0	-1,000	-7,794.76	6,794.76	779.5%	
TOTAL INVESTMENT INTEREST	-1,000	0	-1,000	-7,794.76	6,794.76	779.5%	
TOTAL DEVLPMNTL DISABILITY FUND	-1,000	0	-1,000	-7,794.76	6,794.76	779.5%	
21000085 DEVLPMNTL DISABILITY FUND							
400902 OTHER MISCELLANEOUS REVENUE							

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 09

ACCOUNTS FOR: 2108	DEVLPMNTL DISABILITY FUND	ORIGINAL ESTIM REV	ESTIM REV ADJSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
21000085 400902	OTHER MISCELLAN	-8,000	0	-8,000	.00	-8,000.00	.0%*
	TOTAL OTHER MISCELLANEOUS REVENUE	-8,000	0	-8,000	.00	-8,000.00	.0%
	TOTAL DEVLPMNTL DISABILITY FUND	-8,000	0	-8,000	.00	-8,000.00	.0%
21000100 DEVLPMNTL DISABILITY FUND							
502001 PROFESSIONAL SERVICES							
21000100 502001	PROFESSIONAL SE	395,426	0	395,426	263,616.00	131,810.00	66.7%
	TOTAL PROFESSIONAL SERVICES	395,426	0	395,426	263,616.00	131,810.00	66.7%
502025 CONTRIBUTIONS & GRANTS							
21000100 502025	CONTRIBUTIONS &	4,091,708	0	4,091,708	2,829,655.00	1,262,053.00	69.2%
	TOTAL CONTRIBUTIONS & GRANTS	4,091,708	0	4,091,708	2,829,655.00	1,262,053.00	69.2%
	TOTAL DEVLPMNTL DISABILITY FUND	4,487,134	0	4,487,134	3,093,271.00	1,393,863.00	68.9%
21000117 DEVLPMNTL DISABILITY FUND							
600101 TRANSFERS IN							
21000117 600101	TRANSFERS IN	-6,800	0	-6,800	.00	-6,800.00	.0%*
	TOTAL TRANSFERS IN	-6,800	0	-6,800	.00	-6,800.00	.0%
700101 TRANSFERS OUT							
21000117 700101	TRANSFERS OUT	50,000	0	50,000	50,000.00	.00	100.0%
	TOTAL TRANSFERS OUT	50,000	0	50,000	50,000.00	.00	100.0%
	TOTAL DEVLPMNTL DISABILITY FUND	43,200	0	43,200	50,000.00	-6,800.00	115.7%

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 09							
ACCOUNTS FOR:	ORIGINAL	ESTIM REV	REVISED	ACTUAL YTD	REMAINING	PCT	
2108 DEVLPMNTL DISABILITY FUND	ESTIM REV	ADJSTMTS	EST REV	REVENUE	REVENUE	USE/COL	
TOTAL DEVLPMNTL DISABILITY FUND	0	0	0	-374,012.77	374,012.77	100.0%	
TOTAL REVENUES	-4,537,134	0	-4,537,134	-3,517,283.77	-1,019,850.23		
TOTAL EXPENSES	4,537,134	0	4,537,134	3,143,271.00	1,393,863.00		

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 09

	ORIGINAL ESTIM REV	ESTIM REV ADJSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
GRAND TOTAL	-198,543	0	-198,543	-1,099,044.75	900,501.75	553.6%

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

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