

## Champaign County Developmental Disabilities Board (CCDDB) Meeting Agenda Wednesday, October 18, 2023, 9:00 AM

This meeting will be held in person at the Shields-Carter Room of the Brookens Administrative Building, 1776 East Washington Street, Urbana, IL 61802 Members of the public may attend in person or watch the meeting live through this link: <a href="https://uso2web.zoom.us/j/81559124557">https://uso2web.zoom.us/j/81559124557</a> Meeting ID: 815 5912 4557

- Call to order
- II. Roll call
- III. Approval of Agenda\*
- IV. CCDDB and CCMHB Schedules, CCDDB Timeline (pages 3-7) No action is needed.
- v. CCDDB Acronyms and Glossary (pages 8-15) No action is needed.
- VI. Citizen Input/Public Participation All are welcome to attend the Board's meeting to observe and to offer thoughts during this time. The board may question them, but no further action or discussion is allowed. The Chair may limit public participation to 5 minutes per person and/or 20 minutes total.
- VII. Chairperson's Comments Ms. Vicki Niswander
- VIII. Executive Director's Comments Lynn Canfield
  - IX. Approval of CCDDB Board Meeting Minutes (pages 16-19)\*

    Minutes from the CCDDB's regular meeting on 9/20/23 are included for approval. Action is requested.
  - **X. Vendor Invoice Lists** (pages 20-25)\*

    Action is requested, to ratify the "Vendor Invoice Lists" and place them on file.

    For information only are Additional Details for these expenditures.
  - XI. Staff Reports (pages 26-45)
    Included for information only are reports from Kim Bowdry, Leon Bryson, Lynn
    Canfield, Stephanie Howard-Gallo, and Chris Wilson.
- XII. New Business
  - **CCDDB Three Year Plan with DRAFT Objectives for 2024** (pages 46-59) For information only is the Three-Year Plan for 2022-2024 with DRAFT objectives for 2024. No action is requested.
  - a) **PY2023 Agency CLC and Related Trainings** (pages 60-63)

For information is a list of trainings held or attended by funded agencies during PY23, in fulfillment of their Cultural and Linguistic Competence Plans. Ms. Summerville, CLC Coordinator, will provide an overview.

b) **PY2023 Utilization Summaries and Demographic Data** (pages 64-79) For information are a briefing memo as overview, a report on utilization of all funded DD programs, and pie charts on demographic and residency data of all people with I/DD who participated.

## **XIII. Old Business**

- a) Evaluation Capacity Building Project
  - An oral update will be provided by a UIUC Family Resiliency Center representative.
- b) **Expo Update** (pages 80-88) For information only are updated materials from the Expo Coordinators.

## **XIV.** Successes and Other Agency Information

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

- xv. Board to Board Reports (pages 89-90)
- **XVI. County Board Input**
- **XVII. Champaign County Mental Health Board Input**
- **XVIII. Board Announcements and Input** 
  - **XIX.** Other Business Review of Closed Session Minutes\*

Board staff and attorneys request that the Board continue to maintain as closed the minutes of closed sessions held 2/19/2020 and 2/23/2022, which have been distributed for review. If discussion is needed, the Board may "move to executive session, exception 5 ILCS 120/2(c)(11) of the Open Meetings Act, to review status of minutes of prior closed session meetings, and that the following individuals remain present: members of the Champaign County Mental Health Board, Executive Director Canfield, and Operations and Compliance Coordinator Howard-Gallo." When the closed session discussion finishes, a motion to return to Open Session and roll call is needed. The recommended action to take in open session: "motion to accept the closed session minutes as presented (or as revised) and to continue maintaining them as closed."

## xx. Adjournment

\* Board action is requested.

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



## CCDDB 2023-2024 Meeting Schedule

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

October 18, 2023 – Shields-Carter Room

October 25, 2023 5:45PM - Shields-Carter Room - joint meeting with

the CCMHB - CANCELLED

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

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

**January 17, 2024** – Shields-Carter Room

February 21, 2024 – Shields-Carter Room

March 20, 2024 - Shields-Carter Room

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

April 17, 2024 – Shields-Carter Room

May 22, 2024 - Shields-Carter Room

June 19, 2024 – Shields-Carter Room

July 17, 2024 – Shields-Carter Room

August 21, 2024 - Shields-Carter Room - tentative

September 18, 2024 – Shields-Carter Room

**September 25, 2024 5:45PM** – Shields-Carter Room – *joint study* 

session with the CCMHB

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

<a href="http://www.co.champaign.il.us/mhbddb/DDBMeetingDocs.php">http://www.co.champaign.il.us/mhbddb/DDBMeetingDocs.php</a>

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



## **CCMHB 2023-2024 Meeting Schedule**

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

October 18, 2023 – Shields-Carter Room

October 25, 2023 Joint Meeting with CCDDB— CANCELLED

November 15, 2023 – Shields-Carter Room

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

**January 17, 2024** – Shields-Carter Room

**January 24, 2024** – *Study Session* - Shields-Carter Room

February 21, 2024 – Shields-Carter Room

February 28, 2024 – Study Session - Shields-Carter Room

March 20, 2024 - Shields-Carter Room

March 27, 2024 – Joint Study Session w CCDDB - Shields-Carter

**April 17, 2024** – Shields-Carter Room

April 24, 2024 – Study Session - Shields-Carter Room

May 15, 2024 – Study Session - Shields-Carter Room

May 22, 2024 – Shields-Carter Room

June 19, 2024 – Shields-Carter Room

July 17, 2024 – Shields-Carter Room

**August 21, 2024** – Shields-Carter Room - tentative

September 18, 2024 – Shields-Carter Room

September 25, 2024 – Joint Study Session w CCDDB - Shields-Carter

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 <a href="http://www.co.champaign.il.us/mhbddb/MHBMeetingDocs.php">http://www.co.champaign.il.us/mhbddb/MHBMeetingDocs.php</a>

Public Input: All meetings and study sessions include time for members of the public to address the Board.

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

## IMPORTANT DATES

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

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

10/18/23	Regular Board Meeting Draft Three Year Plan 2022-24 with 2024 Objectives
10/25/23	Joint Meeting w/ CCMHB CANCELLED
10/27/23	Agency PY2024 1 <sup>st</sup> Quarter Reports due
11/15/23	Regular Board Meeting (off cycle) Approve Three Year Plan, PY25 Allocation Criteria
12/1/23	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
12/22/23	Online System opens for Applications for PY2025 Funding
12/31/23	Agency Independent Audits, Reviews, or Compilations due
1/17/24	Regular Board Meeting
1/26/24	Agency PY24 2 <sup>nd</sup> Quarter and CLC progress reports due
2/12/24	Deadline for submission of applications for PY25 funding (Online system will not accept any forms after 4:30PM)
2/21/24	Regular Board Meeting Discuss list of PY25 Applications, Review Process

3/20/24	Regular Board Meeting Discussion of PY25 Funding Requests
3/27/24	Joint Study Session with CCMHB (5:45PM) Discussion of PY25 I/DD Special Initiatives
4/10/24	Program summaries released to Board, posted online with CCDDB April 17 meeting agenda and packet
4/17/24	Regular Board Meeting Board Review, Staff Summaries of Funding Requests
4/26/24	Agency PY2024 3 <sup>rd</sup> Quarter Reports due
5/10/24	Allocation recommendations released to Board, posted online with CCDDB May 22 board meeting packet
5/22/24	Regular Board Meeting Allocation Decisions; Authorize Contracts for PY25
6/1/24	For contracts with a PY24-PY25 term, all updated PY25 forms should be completed and submitted by this date.
6/18/24	Deadline for agency application/contract revisions  Deadline for agency letters of engagement w/ CPA firms
6/19/24	Regular Board Meeting Draft FY2025 Budget
6/21/24	PY2025 agency contracts completed.
6/30/24	Agency Independent Audits, Reviews, or Compilations due (only applies to those with calendar FY, check contract)
7/17/24	Regular Board Meeting
8/21/24	Regular Board Meeting - tentative
8/30/24	Agency PY2024 4 <sup>th</sup> Quarter reports, CLC progress reports, and Annual Performance Measure Reports due

9/18/24	Regular Board Meeting Community Needs Assessment Report Draft Three Year Plan 2025-27 with 2025 Objectives Approve Draft FY2025 Budgets
9/25/24	Joint Study Session with CCMHB (5:45PM)
10/16/24	<b>Joint Meeting with CCMHB</b> (5:45PM) I/DD Special Initiatives
10/23/24	Regular Board Meeting DRAFT Program Year 2026 Allocation Criteria
10/25/24	Agency PY2025 First Quarter Reports due
11/20/24	Regular Board Meeting Approve Three Year Plan with One Year Objectives Approve PY26 Allocation Criteria
11/29/24	Public Notice of Funding Availability to be published by date, giving at least 21-day notice of application period.
12/18/24	Regular Board Meeting- tentative
12/20/24	Online system opens for applications for PY26 funding.
12/31/24	Agency Independent Audits, Reviews, Compilations due.

## Agency and Program acronyms commonly used by the CCDDB

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; Selfcare; Getting along; Life activities; and Participation. Replaces the Global Assessment of Functioning in the DSM-V.

WIOA – Workforce Innovation and Opportunity Act

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

Minutes September 20, 2023

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

### 9:00 a.m.

MEMBERS PRESENT: Susan Fowler, Anne Robin, Vicki Niswander, Georgiana Schuster

**MEMBERS EXCUSED:** Kim Fisher

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

Stephanie Howard-Gallo, Chris Wilson

**OTHERS PRESENT:** Sarah Perry, Kelli Martin, Danielle Matthews, Jami Olsen, Annette

Becherer, Laura Bennett, Patty Walters, DSC; Mel Liong, PACE; Becca Obuchowski, Hannah Sheets, Community Choices; Annie Bruno, Arc of Illinois; Jessica McCann, RPC; Leah Taylor, Champaign County Board; Ryan LaCosse, Best Buddies in Central IL; Stephanie Sloane, Dana Eldreth, Family Resiliency Center;

Keysa Haley, GROW; Jason Brooks, U of I Nursing

## **CALL TO ORDER:**

CCDDB President Vicki Niswander called the meeting to order at 9:09 a.m.

## **ROLL CALL:**

Roll call was taken and a quorum was present.

## APPROVAL OF AGENDA:

An agenda was available for review and approved by a unanimous vote.

## **CCDDB and CCMHB SCHEDULES/TIMELINES:**

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

## **ACRONYMS and GLOSSARY:**

A list of commonly used acronyms was included for information.

## CITIZEN INPUT/PUBLIC PARTICIPATION:

None.

## PRESIDENT'S COMMENTS:

Ms. Niswander expressed her thanks to the advocates who attended and participated in last month's meeting.

## **EXECUTIVE DIRECTOR'S COMMENTS:**

Director Canfield welcomed Dr. Susan Fowler to the CCDDB. Dr. Fowler shared her background with the CCMHB as a former board member and her experiences with developmental disability services.

### **APPROVAL OF MINUTES:**

Minutes from the 7/19/2023 board meeting and 8/16/2023 joint study session with the CCMHB were included in the packet.

MOTION: Dr. Robin moved to approve the minutes from the 7/19/23 CCDDB meeting and the 8/16/2023 study session. Ms. Schuster seconded the motion. A roll call vote was taken. The motion passed.

## **VENDOR INVOICE LIST:**

The Vendor Invoice List was included in the Board packet.

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

### **STAFF REPORTS:**

Staff reports were included in the packet from Kim Bowdry, Stephanie Howard-Gallo, Shandra Summerville, and Chris Wilson.

### **NEW BUSINESS:**

## **CCDDB** Allocation Priorities and Decision Support Criteria:

A briefing memorandum was included in the packet. Draft funding allocation priorities and decision support criteria were presented for review and comment. Board members spent time discussing the document.

## I/DD Special Initiatives Fund Allocation Priorities:

A briefing memorandum was included in the packet. Draft funding allocation priorities and decision support criteria were presented for review and comment.

### **PY24 Allocation Charts:**

Charts describing total PY24 allocations were included in the board packet for information only.

## **OLD BUSINESS:**

## **Revised 2024 Budgets:**

A Decision Memorandum offered revisions to 2024 budgets. The CCDDB budget, background details, and budget documents were enclosed in the Board packet.

MOTION: Dr. Robin moved to approve the draft 2024 CCDDB Budget with anticipated revenues of \$5,245,817 and expenditures of \$5,245,817. Ms. Schuster seconded the motion. A roll call vote was taken and the motion passed unanimously.

## **Evaluation Capacity Building Project:**

Dana Eldreth and Stephanie Sloan from the University of Illinois Family Resiliency Center provided an update on the project.

## **Expo Update:**

Information was included in the packet. The Expo will be held October 28,2023 at Market Place Mall from 11 am to 4 pm.

### **Program Service Reports:**

Fourth Quarter PY23 Program Service Reports were included in the Board packet for information.

## **Program Claims:**

PY23 Service Claims Data Charts were included in the Board packet for information.

## 211 Quarterly Update:

An update from PATH on 211 call activity was included in the packet for information.

## **Successes and Agency Information:**

Updates were provided by Patty Walters from DSC, Becca Obuchowski from Community Choices and Mel Liong from PACE.

## **County Board Input:**

Ms. Leah Taylor from the Champaign County Board had nothing to report this month.

## **CCMHB Input:**

The CCMHB will meet this evening.

## **BOARD ANNOUNCEMENTS:**

None.

### **ADJOURNMENT:**

The meeting adjourned at 10:04 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo

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

# Champaign County, IL

# **VENDOR INVOICE LIST**

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# Champaign County, IL

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# Champaign County, IL

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# Champaign County, IL

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# Champaign County, IL

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# Champaign County, IL

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

<u>CCDDB/CCMHB/IDDSI</u>: I cloned programs in the online claims system. The PY2024 1<sup>st</sup> Quarter programs and claims were cloned to give agencies the ability to begin reporting PY2024 2<sup>nd</sup> Quarter claims.

I completed compiling the PY2023 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 (<a href="https://ccmhddbrds.org">https://ccmhddbrds.org</a>). I am currently reviewing all I/DD Performance Outcome Reports.

PY2024 1<sup>st</sup> Quarter Reports are due on October 27, 2023. Any agency in need of an extension should complete the 'Request for Extension of CCDDB-CCMHB Report Deadline' form prior to the deadline.

Using PY2023 4<sup>th</sup> Quarter reports, I created the 'PY23 I/DD Program Utilization' document. This document can be found in the October 2023 CCDDB Packet. HS-EHS completed their PY2023 4<sup>th</sup> Quarter reports in early October. These reports were reviewed and added to Performance Data Charts, which were used to create the Utilization document.

I assisted with the 'CCDDB Three Year Plan with DRAFT Objectives for 2024.' I completed the 'CCDDB Three Year Plan - review of 2023 objectives, draft of 2024 chart' that was used to modify the Three-Year Plan Draft. I also emailed the Three-Year Plan Draft to stakeholders for review and comments. The 'CCDDB Three Year Plan with DRAFT Objectives for 2024' can be found in the October 2023 CCDDB packet.

I have downloaded all PY2023 claims from the Online Reporting System. I am currently sorting clients and claims. Through review of this data, I can see any duplication of services and client specific program involvement. An overview of how services are utilized will be provided prior to the next application review.

I participated in monthly meetings with CCDDB/CCMHB staff and Dr. Dariotis from the Family Resiliency Center, related to the Evaluation Capacity project.

I helped one agency user with claims deletion in the Online System. I helped another agency user with questions about their quarterly reports. I consulted with one agency program manager on client services.

<u>Learning Opportunities</u>: The "Employing Autism" presentation scheduled for October 5, 2023, was postponed due to the passing of one of the presenters.

Alex Campbell, EMK Consulting is scheduled to present an overview of the Online Application and Reporting System on November 30, 2023. This presentation may be beneficial to new or first-time users of the System. A registration link will be sent out in the coming weeks.

In advance of each workshop, I reserve a room at the library (if in-person), organize the registration page, order refreshments from the Champaign Public Library café (if in-person), and make copies of any handouts. After the workshop, I tally training evaluation forms, create and email Certificates of Attendance, and share the PowerPoint and any other handouts with participants.

<u>Disability Resource Expo</u>: I participated in the Expo Steering Committee meeting on October 6, 2023. I also ordered the fidget toys for the Children's Activity bags that will be given out at the Expo. I began stuffing the Children's Activity bags as well. If you'd like to volunteer at the Expo, please register <a href="here">here</a>. I will meet other Expo Steering Committee members at the storage facility to organize items needed for the event.

MHDDAC: The September MHDDAC meeting was held on September 26, 2023. Dianne Husby-Gordon, Senator Faraci's office presented during the September meeting. Ms. Husby-Gordon is the Disability Liaison for the Senator's office. The position was created to continue the work that Senator Bennett had started related to disability advocacy in the local community. Ms. Husby-Gordon shared advocacy items that the Senator's office is currently focusing on. Champaign County Christian Health Center also presented in September. Crystal Hogue, Executive Director, CCCHC presented on the services provided by CCCHC.

<u>Human Services Council</u>: During the October meeting, Tiara L. Richardson, QIDP/Dual Diagnosis Case Manager with CCRPC provided information about CCRPC's Dual Diagnosis Case Management program. Skye Satz, CDP/Memory Care Program Manager with Cris Healthy Aging also provided information regarding services from Cris Healthy Aging. Time was also scheduled for agency announcements.

<u>Race Relations Subcommittee</u>: I participated in biweekly Community Coalition Race Relations Subcommittee meetings.

**Other**: I participated in several webinars.

## Leon Bryson, Associate Director for Mental Health & Substance Use Disorders Staff Report- October 2023

## **Summary of Activity**

The PY24 1<sup>st</sup> quarter Program Service Activity reports are due on October 27, 2023. Ms. Stephanie Howard-Gallo sent out a reminder to agencies about the deadline and extension requests.

I sent an email with an attached draft to agencies and stakeholders for feedback on CCMHB Three Year Plan 2022 – 2024 with Draft PY2024 Objectives. Comments must be sent to the Champaign County Mental Health Board staff by October 31, 2023.

I have almost completed compiling agency Performance Outcome Reports into one document. Some of the agency's pdf reports do not show all the questions' answers in full. Therefore, I have requested them to convert their pdf reports into a Word document. There are handful of outstanding reports before I can complete and upload the report to the online system.

Ms. Amy Brown of Don Moyer Boys and Girls Club and Mr. Tracy Parsons City of Champaign will be presenting on the Community Coalition Summer Initiatives program at the November board meeting.

<u>Evaluation Capacity Committee Team</u>: Ms. Canfield, Ms. Bowdry, and I will be meeting with the U of I Family Resiliency Center for updates on the evaluation and capacity project this month.

<u>IPlan Behavioral Health Workgroup:</u> August and September meetings were cancelled. The next meeting is scheduled for October 19<sup>th</sup>.

<u>CCMHDDAC Meeting:</u> I participated in the monthly meeting of CCMHDDAC. The group heard presentations from Senator's Faraci's Office and Champaign County Christian Health Center. The next meeting is scheduled for October 24<sup>th</sup>. CCCHC is hosting a fund-raising dinner on October 28<sup>th</sup> at 5:30pm at the I Hotel.

Reentry Executive Committee & Council Meetings: The Reentry Council heard presentations from Cunningham Township's Bridge to Home Program, Ms. Jennifer Straub and WIN Recovery, Executive Director Ms. Bethany Little. Ms. Straub reviewed Cunningham Township's services: Street Outreach, Emergency, Transitional and Rapid Rehousing. Ms. Little discussed their Recovery Community Based Programming, wrap-around referral services, and compliance with Probation, Parole, and DCFS. The next meeting is scheduled for November 1<sup>st</sup>.

<u>Continuum of Service Providers to the Homeless (CSPH):</u> I attended the CSPH Homeless Services Summit meeting in-person at the United Way office on October 3<sup>rd</sup>. The discussion focused on shelter to stability, preventing homelessness, and summarizing CPSH strategic plan.

Rantoul Service Provider's Meeting: The next meeting is scheduled for October 16<sup>th</sup>.

**SOFTT/LAN:** I attended the LAN meeting on September 20<sup>th</sup>. The committee discussed barriers and strategies for collaborating with schoolteachers and counselors. The idea of a social work summit was brought into the conversation to reach a large segment of school professionals. The Youth Assessment Center reported that their referrals have decreased over the past few months. The next meeting is scheduled for October 18<sup>th</sup>.

<u>Disability Resource Expo Meeting:</u> I participated in the Steering Committee on October 6<sup>th</sup>. The committee discussed the next few weeks of planning for the October 28<sup>th</sup> Expo at Market Place Mall from 11am-4pm. There are four ASL interpreters confirmed for the event. Sixty-five exhibitors are registered at the time of this report. Some volunteers will have tablets this year to conduct surveys for attendees. Volunteers are still needed from 10:30am-1pm.

## **Other Activities:**

• I attended the Black Mental Health Conference on September 30<sup>th</sup> at Parkland College. Workshops I attended were: Understanding Mental Health and Mental Illness and Reducing Stigma for Treatment. The Journey of Grief. Mental Health and the Black Church. Pursuing Wellness.

## **Learning Opportunities (Trainings and Webinars):**

- Completed 8-hours of Mental Health First Aid with Ms. Shandra Summerville. The certificate is valid for 3 years.
- PsychU: Suicide Awareness & Prevention: PsychU Resource Review & Discussion

## Executive Director's Report – Lynn Canfield, October 2023

## **Background - Strategic Plan Goals:**

## Champaign County Mental Health Board Current Three-Year Plan Goals

- 1. Support a **continuum of services** to improve the quality of life experienced by individuals with mental or emotional disorders, substance use disorders, or intellectual and/or developmental disabilities and their families residing in Champaign County.
- 2. Sustain commitment to addressing health disparities experienced by **historically underinvested populations.**
- 3. Improve access to supports, services, and resources currently available and beneficial.
- 4. Continue the collaborative working relationship with the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDB).
- 5. Building on progress achieved through the six-year Cooperative Agreement between the Federal Substance Abuse and Mental Health Services Administration (SAMHSA), the Illinois Department of Human Services (IDHS), and the CCMHB, sustain the SAMHSA/IDHS system of care model.
- 6. Divert persons with behavioral health needs or I/DD from the criminal justice system, as appropriate.
- 7. In conjunction with the Champaign County Sheriff's Office, other law enforcement, and community stakeholders, pursue a continuum of services as an **alternative to incarceration and/or overutilization of local Emergency Departments** for persons with behavioral health needs or I/DD.
- 8. Support **interventions for youth** who have juvenile justice system involvement.
- 9. Address the need for **acceptance**, **inclusion**, **and respect** associated with a person's or family member's mental illness, substance use disorder, intellectual and/or developmental disability through broad based community education efforts to increase community acceptance and positive self-image.
- 10. Engage with other local, state, and national stakeholders on emerging issues.

## Champaign County Developmental Disabilities Board Current Three-Year Plan Goals

- 1. Support a **continuum of services** to meet the needs of people with intellectual and/or developmental disabilities (I/DD), along with their families, residing in Champaign County.
- 2. Sustain the commitment to improving outcomes for members of **underrepresented and underserved populations.**
- 3. Improve **access to and engagement in services** through increased coordination among providers, community stakeholders, people with I/DD, their families, and other key supporters.
- 4. Encourage high-quality **person-centered planning** and follow-through for people served by funding from the CCDDB and, through the Intergovernmental Agreement, from the CCMHB.
- 5. Continue the collaborative working relationship with the Champaign County Mental Health Board.
- 6. Identify children at-risk of developmental delay or disability and support **early intervention services and family supports**.
- 7. Support **access to services and programs** for youth and adults with I/DD, with a preference for evidence-based practices to increase positive outcomes.
- 8. Promote inclusion and respect of people with I/DD, through broad based community education efforts.
- 9. Stay abreast of **emerging issues** affecting service and support systems and be proactive through concerted **advocacy efforts**.

## **Activities of Staff and Board Members:**

To support CCMHB Three Year Plan goals 1-8 and CCDDB Three Year Plan goals 1-7, the allocation of funding for services through agency contracts and the subsequent development and monitoring of those contracts are a primary focus. With PY24 contracts in place and with PY23 year end reports submitted, we are working in the future, present, and past for a while.

For PY2025:

- The team is working on revisions to both boards' Funding Guidelines and Requirements, partly due to a change in State of Illinois requirements, partly to use what we've learned in the last few years. Some changes (e.g., reporting deadlines and details) will not appear in the Funding Guidelines but rather in contracts.
- Board members and interested parties are sharing observations about the first draft of priorities for each of the DDB, MHB, and IDDSI funds. These will influence final drafts, to be presented in November.
- This board packet contains the Three-Year Plan with DRAFT objectives for 2024. This was also a team effort, through review of activities and progress toward current objectives.
- Though settled for now, my many iterations of budgets for 2024 predict what the Boards will allocate to PY2025 contracts. Those decisions are typically made in May for obligations which begin July 1, which is when we have clarity about how much revenue we'll receive in 2024. It's a bit scary when contrasted with the enormous pressures on the community based mental health, substance use, and DD systems to meet unprecedented demand.

## For PY2024, we have presented:

- Pie charts to show how each board's total allocations are distributed by priority or sector, target population, and service type.
- Tier sheets organizing contracts by priority, showing individual award amounts and totals.
- A single document showing all funded programs, with priority and award amounts and brief summaries of the scope of services.
- The online system (<a href="http://ccmhddbrds.org">http://ccmhddbrds.org</a>) version of the above, which has full scope of service information and links to agency websites.
- Pie charts showing each program's sources of revenue, with some total agency information.

### For PY2023:

- Agencies provide a great deal of data which can now be summarized and compared with prior year. The September board packet contained funded programs' fourth quarter reports, some full year data, and pie charts. This board packet contains a year-end utilization summary report with brief descriptions of each program, with the award amount (caution: actual amounts will be lower as underspent contracts are reconciled), targets for utilization, and actual utilization results.
- All program outcome reports are aggregated in a single year-end report and posted publicly at <a href="http://ccmhddbrds.org">http://ccmhddbrds.org</a> as well as on the County website, as PY23 Performance Outcome Reports. Every year, we wish for more time so that we could pull highlights from that document. This year we were able to do so with the I/DD program reports, but not the full set of all funded programs.

### Back to the future:

- To improve the reporting experience for agency users and DDB/MHB staff, and hopefully to make it easier to do more with agency year end data, the UIUC Family Resiliency Center research team is looking over the current report format, as well as prior and current outcomes, and suggesting changes. With their input, we will develop a template form, possibly one in the online reporting system to eliminate the external form.
- We are revising application instructions and online forms for PY2025 funding proposals.
- Also under review are the Funding Requirements and Guidelines, along with contract requirements, of each board. We hope to present these for approval as early as possible in the application cycle so that applicants can view updated requirements.

Board staff, consultants, County IT staff, and I continue working on accessibility of public webpages, documents, and recordings of meetings. The company managing our Expo and AIR websites will be

making the improvements recommended in the last accessibility review and is open to developing a new site, if the I/DD self-advocates believe one would be useful (and then direct its design.)

We offer technical support to agency users regarding online system forms and reports. A Report Deadline Extension Request form is posted on the site, to be completed prior to a deadline by those who anticipate a delay in any report OTHER THAN the annual audit, review, or compilation. The Friday midnight reporting deadline has presented us with new challenges, so we would like to consider moving these to the Wednesday before. While this gives agencies two days less time, it would eliminate the need for us to respond to concerns over the weekend and then to rush through review of all submissions on the following Monday morning.

Contracts with service providers appear as Contributions & Grants, the largest expenditure line in each Board's budget. A small share of total costs are non-agency activities which also support individuals, families, agencies, and community. These appear in Personnel, Professional Services, Public Relations, Advertising, Books, Printing, Rental, and Non-Employee Training costs and are accomplished through staff, independent contractors, associations, or partnerships. Many activities and collaborations are referenced in other staff reports.

## Anti-Stigma and Community Awareness:

(MHB goals 1, 3, 4, and 9 and DDB goals 1, 3, 5, and 8)

**Resource information:** 211 offers call-based and online resource information. United Way, CCMHB, and CCDDB co-fund this service. PATH serves as a call center for this and 988 (previously the National Suicide Prevention Lifeline). The United Way director confirms the State will pay for around half of the cost of 211 services.

Alliance for Inclusion and Respect (AIR) social media and website continue anti-stigma messaging and promotion of member organizations and local artists and entrepreneurs who have behavioral health conditions or disabilities. AIR artists will be included in the upcoming Expo, and AIR will sponsor an 'anti-stigma' film and events during the next Roger Ebert's Film Festival, April 17-20, 2024. The CCMHB will pay for sponsorship of the film; this and other AIR costs are budgeted as Public Relations and offset by Donations.

**disABILITY Resource Expo** will be held October 28, 2023 at Market Place Mall. An update is offered in this Board packet.

## CCMHB/CCDDB I/DD Special Initiatives Fund:

(MHB goals 1 and 4 and DDB goals 1 and 5)

Continuing the focus on individuals with I/DD and complex support needs, their families, and the direct support staff providing their care, the hope for 2023 was to fund contracts which would mitigate the staffing crisis and support people in spite of it. No proposals were submitted directly to the fund, but two CCDDB applications were identified as well aligned to the priorities and purposes. An CCMHB application explicitly addressed direct support staff training, but the organization declined to develop a proposal focused only on people with I/DD. In addition to considering the draft PY25 priorities for this fund, the Boards may consider creating Requests for Proposals appropriate to this fund's focus.

## Support for Agency Programs:

(MHB goals 1, 3, 5, 6, 7, and 8 and DDB goals 1, 2, 3, 4, 6, and 7)

### **Activities described in staff reports:**

- Cultural and Linguistic Competence training and technical assistance and Mental Health First Aid training and coordination (Shandra Summerville).
- Collaborations: Champaign County Transition Planning Committee, Continuum of Service Providers to the Homeless, Champaign County Community Coalition, Champaign County Reentry Council, Coalition Race Relations Subcommittee and Goal Teams Meetings, Human Services Council, I-Plan Behavioral Health Committee, Local Funders Group, UIUC Campus-Community Compact, Youth Assessment Center Advisory Committee, and more (Kim Bowdry, Leon Bryson, Shandra Summerville, or myself).
- Monthly Provider Learning Opportunities (Kim Bowdry), free of charge and offering CEUs to a primary audience of case managers, joined by family advocates and social workers.

### **Independent Contractors:**

- Alex Campbell of EMK offers technical support for users of the online application and reporting system. Board members interested in learning to view forms and reports may reach him at <a href="mailto:afcampbell9@msn.com">afcampbell9@msn.com</a>. EMK is improving the accessibility of the site's design, per recommendations from Tim Offenstein (of Falling Leaf), who has twice tested our public pages and documents and led two Provider Learning Opportunities on these topics.
- John Brusveen, CPA, reviews all agency audits, compilations, and financial reviews, summarizing findings. While not a direct support to agencies, his recommendations help our staff team understand what to discuss with them and how to improve processes.

**UIUC Evaluation Capacity Project:** Ms. Bowdry, Mr. Bryson, and I meet with the director of UIUC Family Resiliency Center monthly. An update will be offered during this Board meeting.

**UIUC Student Projects:** This semester, we are limited to an intern working with the Expo consultants and then one guest lecture at a Social Work policy class. We try to avoid taking on Spring semester projects due to our focus on agency applications, funding recommendations, and subsequent contracts, but we welcome student support for translation or short videos of Expo.

## **Executive Director Activities:**

In addition to collaborations above and below, we worked on revised objectives for 2024 to each Board's Three Year Plan. I reviewed the audits which have arrived in recent months and asked for more information about any apparent surpluses. We are waiting for only two delayed audits at this time. I anticipate some PY23 audits and reviews will be completed before the December 31 deadline. I plan to read them as they arrive, seeking input from our consultant and other staff members as well.

The County's IT department continue to support our efforts to run hybrid meetings and post more accessible recordings. We incorporate more accessibility into documents as we learn.

The County's American Rescue Plan Act (ARPC) Coordinator and County Board members were gracious with the delayed wrap up of financial reporting on the set of contracts funded in PY22 with their fiscal relief funds. Financial reporting was delayed due to late audits. One remains outstanding, but enough were completed that we could determine all excess revenue amounts and transfer those back to the County's ARPA fund for re-allocation, as federal rules require these to be obligated by the end of 2024.

Revised drafts of 2024 budgets have been presented for each Board's review and approval. Per statute, the CCDDB has full authority over its budget, and recent changes to the Community Mental

Health Act clarify that the CCMHB also has this authority over its budget, affirming our complicated process of starting earlier than other County units and bringing revised budgets to the Boards whenever subsequent projections are available. Early planning allows us to estimate affordable allocations to agency contracts, costs of which are split over two of our fiscal years.

## Intergovernmental/Interagency Collaborations:

(MHB goals 1, 2, 4, 9, and 10 and DDB goals 1,2, 3, 5, 8, and 9)

**Champaign County Department Heads:** with the County Executive, Administrative staff, and other Departments' representatives, topics have been: status of the new phone system; migration to the County's dotgov domain name; integration of Duo and Microsoft 365; Scott M. Bennett Administrative Center update; search and interview of new budget director; and open discussion.

Mental Health and Developmental Disabilities Agency Council: monthly meeting of agency representatives, not all of which are funded by the Boards, for discussion of agency activities, federal and state updates, special topics, and announcements. We announce deadlines, report on recent board meetings, and explain any changes to process or expectations. Between meetings, I forward funding opportunities which may be of interest to some agencies, or to a collaboration. The council has many new members and a new chairperson, Angela Yost of CCRPC, replacing Becca Obuchowski of Community Choices, who served for the last few years.

**Metropolitan Intergovernmental Council:** three times a year, representatives from local government meet on topics of shared interest as well as roundtable discussion. Our October meeting featured a presentation on coordination and consistent messaging of services during severe weather events.

**Regional Champaign-Vermilion Executive Committee:** bimonthly meeting of public and private entities responsible for community health needs assessment and strategic plans. The most recent health plan/I-Plan identified behavioral health and community violence as priorities. The IPlan Coordinator leads all workgroups. Mr. Bryson and I alternate participation in the monthly Behavioral Health workgroup meetings.

## Partnerships related to Underrepresented Populations and/or Justice System: (MHB goals 1, 2, 5, 6, 7, 8, and 10 and DDB goals 1, 2, 3, and 7)

**Champaign County Community Coalition:** I attend meetings of the Executive Committee, which sets Coalition priorities and goals. Our new meeting format includes lead-in presentations by one member followed by discussion of the topic and any updates. Our next presentation is to be on Education (Champaign and Urbana School Districts), as this session had to be postponed.

**Crisis Intervention Team (CIT) Steering Committee:** bimonthly meetings of representatives of law enforcement, EMS, hospital, behavioral health, providers of service to people with housing insecurity, support network leaders, and other interested parties, to promote CIT training, review data analyzed by City of Urbana, and share updates. The meeting is once again in person.

**Drug Court Steering Committee:** After emails and meetings with various members (Judge Dyer, Coordinator Schiebert, directors of Rosecrance), I suggested we reinstate regular Steering Committee meetings with regular agenda items. Other governmental units have a great deal of interest in Mental Health Court and possible models; if we review suggestions offered by the

Behavioral Health Administrator for State Courts and other experts, the local stakeholders will know best.

Illinois Criminal Justice Information Authority (ICJIA) was awarded \$9,527,496 in federal Byrne State Crisis Intervention Program (SCIP) funding, through the Bipartisan Safer Communities Act of 2022. The focus is development of extreme risk protection order programs, state crisis intervention court proceedings, and related gun violence reduction initiatives, while assuring due process protections. I serve on their multi-disciplinary Advisory Board to establish priorities and approve a funding plan. We met in person on June 20 to review an initial plan, with information on firearm restraining orders, gun violence data, and program models. We met in late September to review final draft plan, NOFO, and timeline and again in October to approve them.

## State and National Associations and Advocacy:

(MHB goal 10 and DDB goal 9)

Association of Community Mental Health Authorities of Illinois (ACMHAI): I attend meetings of the Executive, Legislative, I/DD Committees. These feature updates on committee-specific issues, planning webinars of interest and sharing information about contracting and monitoring, state funding and policies, goal setting, community awareness, etc. Government Strategy Associates updates the membership on state legislative activity and relies on our input for advocacy. I serve as President of the association this year, leading Executive Committee meetings and meetings of the membership.

Our August virtual membership meeting started with a business meeting regarding finances, committee work, community updates, etc. This was followed by best practice sessions on Diversity, Equity, Inclusion, and Belonging with presenters from: Youth Outlook, serving LGBTQ2SA+ youth in DuPage, Kane, Whiteside, LaSalle, DeKalb, Will and suburban Cook Counties; Family Recovery Centers, which offers intensive outpatient treatment for youth with eating disorders, SUD, suicidal ideation, self-injurious behaviors, and care for their families; and MB Strategic Solutions, sharing skills and knowledge of strategic planning, board development, coaching, leadership, execution, belonging strategies, culture, and efficiency-building.

These and some committee meetings continue to include discussion of proposed changes to the Community Mental Health Act, as some newly formed boards did not use the required PTELL language in their referenda and now seek a legislative solution. In case revisions are again introduced during the 2024 legislative session, we would prepare a 'wish list' of proposed clarifications and revisions that would better serve all 708 boards and their constituents. No suggestions have been offered at this point. We might consider this for 377 boards, to introduce updates and revisions to the Community Care for Persons with a Developmental Disability Act. For the December membership meeting, at which decisions about 2024 contracts will be made, I set up an evaluation committee to review consultants' performance and contract provisions.

International Transformational Resilience Coalition: Last fall, I participated in the ITRC's Community of Practice focused on a public health approach to building capacity for mental wellness and resilience in the face of ecosystem-biodiversity catastrophes (which include COVID). This June and again this fall, they offered presentations on how this work can support the recent bipartisan federal legislation, the Community Mental Wellness and Resilience Act of 2023. The Act directs the CDC to create planning and program grants for strategies, set aside funds for rural communities, establish technical assistance, and appropriate \$30 million, to shift systems toward strengthening population health and beyond individual treatment and crisis focus.

**National Association of County Behavioral Health and Developmental Disability Directors** (**NACBHDD**): As Secretary, I work with the Executive Committee and CEO to review policies, positions, financials, and the CEO's performance. We are developing revisions to the by-laws and officer responsibilities, to be reviewed during the virtual membership meeting in November.

Committee members have reviewed 'one-pagers' on their work. I participate in bimonthly I/DD committee calls for presentations by national experts and discussion of state and federal issues. We contributed a statement on Champaign County's I/DD system.

I chair monthly meetings of the Behavioral Health and Justice Committee, with presentations and roundtable discussions, most recently of California's 1115 waiver for people in reentry, which Illinois is also developing. Policy priorities relate to Medicaid Reentry, 988 and crisis response, and diversion from the criminal justice system. NACBHDD is partnering with National Association of Counties on a mental health advisory council. I did not participate in July NACBHDD or NACo conferences due to time constraints.

**National Association of Counties (NACO):** I continue to attend bi-monthly Health Steering Committee (HSC) calls on legislative updates, county and state programs, and policy priorities; bi-monthly leadership calls to plan these; and quarterly Healthy Counties Advisory Board and Stepping Up Innovator County calls.

HSC is a policy board, so through them and with NACBHDD input, we will again support NACo policy resolutions related to DSP classification, Medicaid and IMD changes, crisis response system, and the workforce crisis.

I have been reappointed to the Healthy Counties Advisory Board. For 2023-2024, with focus on advancing community health and safety, addressing: the physical and built environment; community and interpersonal violence; mental health and substance use; safe and affordable housing; transportation and infrastructure. We will also discuss creating health-supportive environments, making sure everyone is included in the full benefits of society, and improving access to healthcare and other resources. The new Chairwoman points out threats in the escalating gun violence discovery of significant amounts of lead in parks. Our first action is to develop priorities based on member input.

Champaign County joined the Stepping Up Initiative in 2016 and has been an Innovator County for many years, due to the brief screening of all who are booked into the Jail, with referral for assessment by community mental health providers funded by the CCMHB. Stepping Up has merged with a NACo community of practice called Familiar Faces; the data they seek from participants are not always available to me, since Illinois' behavioral health system is not county run, but it is helpful to learn about other communities' solutions and successful pilot programs.

Illinois Legislative Issues for 2024: I met with Senator Paul Faraci, his staff, and their UIUC intern for extensive discussion of the session that just ended and of what we might work on together in the next cycle, since this is the time for planning discussions. Agreeing that some issues are not best tackled through state legislation, we will focus on workforce development strategies (including my hope to address housing costs) and connecting to relevant federal opportunities. Ms. Husby-Gordon and I will explore priorities of their office and of the CCDDB and CCMHB. Finally, in compliance with the Community Mental Health Act, Stephanie Howard-Gallo and I mailed the CCMHB 2022 Annual Report to those representing Champaign County in the Illinois General Assembly, as well as to the County Executive, County Board Members, and Illinois Department of Human Services Secretary.

#### Stephanie Howard-Gallo

#### Operations and Compliance Coordinator Staff Report -

#### October 2023 Board Meeting

#### **SUMMARY OF ACTIVITY:**

#### First Quarter Reporting:

First quarter financial and program reporting will be due at the end of October. I sent a reminder of the upcoming deadline October 3rd and will send another one later in the month.

#### Other Compliance:

Head Start (CCDDB funded) requested an extension for 4<sup>th</sup> quarter reporting, which was approved. That extension date was not met. A letter of suspension of funding has been sent to them and the October payment was paused.

Urbana Neighborhood Connections Center (CCMHB funded in FY23) submitted their 4<sup>th</sup> quarter reports on October 5<sup>th</sup>.

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

AIR artists will be selling their items at the disABILITY Expo on October 28, 2023 at Market Place Mall from 11 am to 4 pm. So far, ten artists/groups have agreed to participate. There is no cost for participation. We provide tables, chairs, tablecloths, hand sanitizer, masks, and water.

#### Training:

On September 14th, I attended a half day training "2023 Annual Employment Law Update" at the request of Lynn Canfield. In the coming months, you may be asked to approve an updated personnel policy for the CCMHB/CCDDB staff that will contain some necessary additions/revisions.

#### 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.
- I am participating in revising the <u>Funding Guidelines</u> for both boards. The document will be brought to the Board for approval in the coming months.
- I met with Alex Campbell (our consultant for the online system) to discuss data maintenance of the online reporting system.
- I will be on vacation for much of October.

#### **FUND 2108 : DEVLPMNTL DISABILITY FUND**



**EBRUARY 20, 1855	ACTUAL	ACTUAL 2022 2023  JAN - SEP JAN - SEP	2023 ANNUAL BUDGET
	JAN - SEP		
REVENUES			
4001 PROPERTY TAX			
01 PROPERTY TAXES - CURRENT	3,508,279.04	2,770,605.56	4,857,487.00
03 PROPERTY TAXES - BACK TAX	0.00	0.00	2,000.00
04 PAYMENT IN LIEU OF TAXES	1,209.97	2,396.21	4,000.00
4001 PROPERTY TAX TOTAL	3,509,489.01	2,773,001.77	4,863,487.00
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	12,321.91	31,892.28	2,000.00
4008 INVESTMENT EARNINGS TOTAL	12,321.91	31,892.28	2,000.00
4009 MISCELLANEOUS REVENUES			
02 OTHER MISCELLANEOUS REVENUE	0.00	1,537.00	5,000.00
4009 MISCELLANEOUS REVENUES TOTAL	0.00	1,537.00	5,000.00
TOTAL REVENUES	3,521,810.92	2,806,431.05	4,870,487.00
EXPENDITURES			
5020 SERVICES			
01 PROFESSIONAL SERVICES	263,616.00	339,260.00	407,118.00
25 CONTRIBUTIONS & GRANTS	2,829,655.00	3,169,994.00	4,417,369.00
5020 SERVICES TOTAL	3,093,271.00	3,509,254.00	4,824,487.00
TOTAL EXPENDITURES	3,093,271.00	3,509,254.00	4,824,487.00
OTHER FINANCING SOURCES (USES)			
6001 OTHER FINANCING SOURCES			
01 TRANSFERS IN	0.00	0.00	4,000.00
6001 OTHER FINANCING SOURCES TOTAL	0.00	0.00	4,000.00
7001 OTHER FINANCING USES			
01 TRANSFERS OUT	-50,000.00	-50,000.00	-50,000.00
7001 OTHER FINANCING USES TOTAL	-50,000.00	-50,000.00	-50,000.00

#### **FUND 2108 : DEVLPMNTL DISABILITY FUND**



*ERRUARY 20, 1853	ACTUAL 2022 JAN - SEP	ACTUAL 2023 JAN - SEP	2023 ANNUAL BUDGET
TOTAL OTHER FINANCING SOURCES (USES)	-50,000.00	-50,000.00	-46,000.00
NET CHANGE IN FUND BALANCE	-378,539.92	752,822.95	0.00

#### **FUND 2101 : I/DD SPECIAL INITIATIVES**



			NOD. UI IHKUUUH	
Nos	ACTUAL	ACTUAL 2023		
FEBRUARY 20, 1955	2022	2023	ANNUAL	
	JAN - SEP	JAN - SEP	BUDGET	
REVENUES				
4008 INVESTMENT EARNINGS				
01 INVESTMENT INTEREST	4,552.28	12,224.51	1,000.00	
4008 INVESTMENT EARNINGS TOTAL	4,552.28	12,224.51	1,000.00	
4009 MISCELLANEOUS REVENUES				
02 OTHER MISCELLANEOUS REVENUE	262,044.31	0.00	0.00	
4009 MISCELLANEOUS REVENUES TOTAL	262,044.31	0.00	0.00	
TOTAL REVENUES	266,596.59	12,224.51	1,000.00	
EXPENDITURES				
5010 COMMODITIES				
17 EQUIPMENT LESS THAN \$5000	0.00	0.00	5,063.00	
5010 COMMODITIES TOTAL	0.00	0.00	5,063.00	
5020 SERVICES				
01 PROFESSIONAL SERVICES	1,302.12	0.00	4,000.00	
07 INSURANCE (NON-PAYROLL)	316.33	0.00	0.00	
11 UTILITIES	1,604.39	0.00	0.00	
12 REPAIRS AND MAINTENANCE	14,059.79	0.00	0.00	
14 FINANCE CHARGES AND BANK FEES	161.00	0.00	0.00	
19 ADVERTISING, LEGAL NOTICES	0.00	0.00	200.00	
25 CONTRIBUTIONS & GRANTS	0.00	71,499.00	341,737.00	
5020 SERVICES TOTAL	17,443.63	71,499.00	345,937.00	
TOTAL EXPENDITURES	17,443.63	71,499.00	351,000.00	
OTHER FINANCING SOURCES (USES)				
6001 OTHER FINANCING SOURCES				
01 TRANSFERS IN	50,000.00	50,000.00	50,000.00	
6001 OTHER FINANCING SOURCES TOTAL	50,000.00	50,000.00	50,000.00	

#### **FUND 2101 : I/DD SPECIAL INITIATIVES**



	ACTUAL	ACTUAL	2023
PERRUARY 20, 1852	2022	2023	ANNUAL
WART 2017	JAN - SEP	JAN - SEP	BUDGET
TOTAL OTHER FINANCING SOURCES (USES)	50,000.00	50,000.00	50,000.00
NET CHANGE IN FUND BALANCE	-299,152.96	9,274.49	300,000.00





ACTUAL 2022  JAN - SEP	ACTUAL	ACTUAL	2023 ANNUAL
	2022	2023	
	JAN - SEP	JAN - SEP	BUDGET
REVENUES			
4001 PROPERTY TAX			
01 PROPERTY TAXES - CURRENT	4,271,286.29	3,371,314.64	5,913,892.00
03 PROPERTY TAXES - BACK TAX	0.00	0.00	1,000.00
04 PAYMENT IN LIEU OF TAXES	1,473.55	2,915.74	2,000.00
4001 PROPERTY TAX TOTAL	4,272,759.84	3,374,230.38	5,916,892.00
4004 INTERGOVERNMENTAL REVENUE			
76 OTHER INTERGOVERNMENTAL	263,616.00	339,260.00	407,118.00
4004 INTERGOVERNMENTAL REVENUE TOTAL	263,616.00	339,260.00	407,118.00
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	17,586.43	38,598.69	3,000.00
4008 INVESTMENT EARNINGS TOTAL	17,586.43	38,598.69	3,000.00
4009 MISCELLANEOUS REVENUES			
01 GIFTS AND DONATIONS	0.00	450.00	3,000.00
02 OTHER MISCELLANEOUS REVENUE	78,213.00	14,956.00	39,000.00
4009 MISCELLANEOUS REVENUES TOTAL	78,213.00	15,406.00	42,000.00
TOTAL REVENUES	4,632,175.27	3,767,495.07	6,369,010.00
EXPENDITURES			
5001 SALARIES AND WAGES			
02 APPOINTED OFFICIAL SALARY	77,937.15	78,192.41	107,000.00
03 REGULAR FULL-TIME EMPLOYEES	244,619.50	261,991.47	368,198.00
05 TEMPORARY STAFF	0.00	0.00	2,500.00
08 OVERTIME	0.00	0.00	2,612.00
5001 SALARIES AND WAGES TOTAL	322,556.65	340,183.88	480,310.00
5003 FRINGE BENEFITS			
01 SOCIAL SECURITY-EMPLOYER	22,169.97	24,852.62	36,353.00
02 IMRF - EMPLOYER COST	15,243.70	8,576.63	12,546.00
04 WORKERS' COMPENSATION INSURANC	1,468.70	1,327.67	2,376.00
05 UNEMPLOYMENT INSURANCE	1,494.89	1,655.53	1,656.00





	ACTUAL	ACTUAL	2023
	2022	2023	ANNUAL
WUARY 20, S	JAN - SEP	JAN - SEP	BUDGET
06 EE HLTH/LIF (HLTH ONLY FY23)	35,082.64	37,271.20	73,440.00
5003 FRINGE BENEFITS TOTAL	75,459.90	73,683.65	126,371.00
5010 COMMODITIES			
01 STATIONERY AND PRINTING	0.00	331.03	1,000.00
02 OFFICE SUPPLIES	2,422.95	3,264.65	4,200.00
03 BOOKS, PERIODICALS, AND MANUAL	0.00	71.85	300.00
04 POSTAGE, UPS, FEDEX	843.87	931.31	2,000.00
05 FOOD NON-TRAVEL	149.89	666.41	1,150.00
13 DIETARY NON-FOOD SUPPLIES	0.00	137.46	200.00
17 EQUIPMENT LESS THAN \$5000	6,802.00	3,502.62	7,000.00
19 OPERATIONAL SUPPLIES	0.00	142.99	5,000.00
21 EMPLOYEE DEVELOP/RECOGNITION	0.00	0.00	285.00
5010 COMMODITIES TOTAL	10,218.71	9,048.32	21,135.00
5020 SERVICES			
01 PROFESSIONAL SERVICES	81,613.06	130,357.38	155,133.00
02 OUTSIDE SERVICES	27,722.18	5,420.25	24,611.28
03 TRAVEL COSTS	493.42	6,820.16	11,500.00
04 CONFERENCES AND TRAINING	1,330.88	1,848.18	10,000.00
05 TRAINING PROGRAMS	0.00	3,804.00	20,729.86
07 INSURANCE (non-payroll)	7,813.67	9,618.00	18,000.00
11 UTILITIES	492.70	0.00	0.00
12 REPAIRS AND MAINTENANCE	0.00	0.00	600.00
13 RENT	17,921.37	20,857.44	31,564.74
14 FINANCE CHARGES AND BANK FEES	0.00	0.00	30.00
19 ADVERTISING, LEGAL NOTICES	0.00	1,558.00	7,000.00
21 DUES, LICENSE & MEMBERSHIP	17,719.99	17,239.99	20,000.00
22 OPERATIONAL SERVICES	17,573.88	2,448.19	77,230.00
24 PUBLIC RELATIONS	24,370.00	16,631.20	20,000.00
25 CONTRIBUTIONS & GRANTS	3,993,900.00	3,924,491.00	5,179,901.40
45 ATTORNEY/LEGAL SERVICES	0.00	1,675.00	2,000.00
46 EQUIP LEASE/EQUIP RENT	0.00	1,592.48	2,388.72
47 SOFTWARE LICENSE & SAAS	0.00	9,243.67	13,500.00
48 PHONE/INTERNET	0.00	1,817.62	2,470.00
5020 SERVICES TOTAL	4,190,951.15	4,155,422.56	5,596,659.00

#### **FUND 2090 : MENTAL HEALTH**



	ACTUAL	ACTUAL	2023
100000000000000000000000000000000000000	2022	2023	ANNUAL
EBRUARY 20, 1855	JAN - SEP	JAN - SEP	BUDGET
TOTAL EXPENDITURES	4,599,186.41	4,578,338.41	6,224,475.00
OTHER FINANCING SOURCES (USES)			
7001 OTHER FINANCING USES			
01 TRANSFERS OUT	0.00	-127,535.00	-144,535.00
7001 OTHER FINANCING USES TOTAL	0.00	-127,535.00	-144,535.00
TOTAL OTHER FINANCING SOURCES (USES)	0.00	-127,535.00	-144,535.00
NET CHANGE IN FUND BALANCE	-32,988.86	938,378.34	0.00

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

## THREE-YEAR PLAN

#### **FOR**

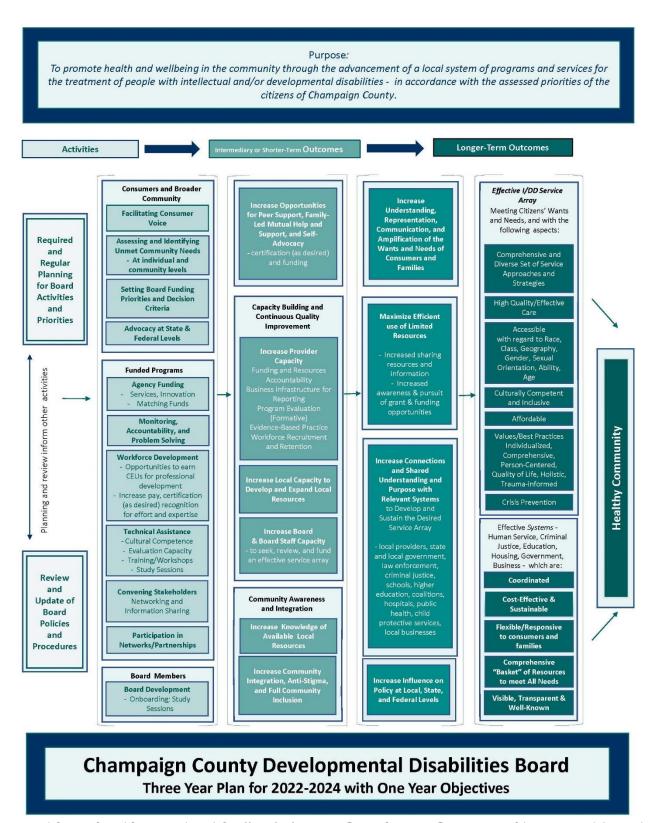
FISCAL YEARS 2022-2024 (1/1/22 - 12/31/24)

WITH

**ONE YEAR OBJECTIVES** 

**FOR** 

FISCAL YEAR <del>2023</del> 2024 <del>(1/1/23-12/31/23)</del> (1/1/24-12/31/24)</del>



Logic Model Developed by Board and Staff with the UIUC Evaluation Capacity Building Project Team during

Spring 2021

# CHAMPAIGN COUNTY BOARD FOR CARE AND TREATMENT OF PERSONS WITH A DEVELOPMENTAL DISABILITY (CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD)

WHEREAS, the Champaign County Developmental Disabilities Board was established under the Illinois County Care for Persons with Developmental Disabilities Act, now revised as the Community Care for Persons with Developmental Disabilities Act (IL Compiled Statutes, Chapter 50, Sections 835/0.05 to 835/14 inclusive) in order to "provide facilities or services for the benefit of its residents who are persons with intellectual or developmental disabilities and who are not eligible to participate in any such program conducted under Article 14 of the School Code, or may contract therefore with any privately or publicly operated entity which provides facilities or services either in or out of such county."

**WHEREAS,** while the Champaign County Developmental Disabilities Board is not required by state statute or other authority to prepare a one- and three-year plan for a program of supports and services for people with intellectual and developmental disabilities, open strategic planning with input from stakeholders and constituents is highly valued.

**THEREFORE,** the Champaign County Developmental Disabilities Board does hereby adopt the following Mission Statement and Statement of Purposes to guide the development of the intellectual and developmental disabilities supports and services plan for Champaign County:

#### **MISSION STATEMENT**

The mission of the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDB) is the advancement of a local system of programs and services for the treatment of people with intellectual and/or developmental disabilities, in accordance with the assessed priorities of the citizens of Champaign County.

#### **STATEMENT OF PURPOSES**

- 1. Planning for the intellectual and developmental disability service and support system to assure accomplishment of the CCDDB goals.
- 2. Allocation of local funds to assure the provision of a comprehensive system of community based intellectual and developmental disability services and supports anchored in high-quality person-centered planning.
- 3. Coordination of affiliated providers of intellectual and developmental disability services and supports to assure an interrelated, accessible system of care.
- 4. Evaluation of the system of care to assure that services and supports are provided as planned and that services are aligned with the needs and values of the community.

To accomplish these purposes, the Champaign County Developmental Disabilities Board must collaborate with the public and private sectors in providing the resources necessary for the effective functioning of the intellectual and developmental disability service and support system. The CCDDB shall perform those duties and responsibilities as specified in Sections 835/0.05 to 835/14 inclusive of the Community Care for Persons with Developmental Disabilities Act.

# A COORDINATED AND ACCESSIBLE CONTINUUM OF SERVICES AND SUPPORTS

Comprehensive and
Diverse Set of Service
Approaches and
Strategies

High Quality/Effective
Care

#### Goal #1:

Support a continuum of services to meet the needs of people with intellectual and/or developmental disabilities (I/DD), along with their families, residing in Champaign County.

**Objective #1:** Under established policies and procedures, solicit proposals from community based providers in response to Board defined priorities and associated criteria using a competitive application process.

**Objective #2:** With clear connection between the model and best outcomes for people served, *based on input from the people who are served*, encourage use of appropriate evidence-based, evidence-informed, recommended, innovative, or promising practice models.

**Objective #3:** Promote wellness for people with I/DD to prevent and reduce early mortality, through supports and services which are based on their input and may include enrollment in benefit plans, linkage and advocacy, and coordinated access

to primary care. Support access to physical and behavioral health treatments for persons regardless of ability/disability.

**Objective #4:** Identify outcomes of value to those who use services and supports. Partner with people with I/DD and key stakeholders toward improved outcomes for people.

**Objective #5:** Pursue, as feasible, development or expansion of residential and/or employment supports for persons with I/DD not supported with state/federal funding.

**Objective #6:** In response to changes in Medicaid and Medicaid-waiver services, realign CCDDB investments to fund services and supports outside the realm of Medicaid, including pilot projects and creative solutions to persistent problems, such as workforce recruitment and retention, including, but not limited to, Direct Support Professional (DSP) retention efforts and payments. *Use input from people with I/DD to shape these solutions.* 

**Objective #7:** Support initiatives providing housing and employment supports for persons with intellectual and developmental disabilities through the Champaign

County Continuum of Service Providers to the Homeless, Transition Planning Committee, or other local collaboration.

**Objective #8:** Enable providers to implement flexible service options, such as telehealth or other virtual means, to maintain access and engagement with clients and community. *Flexible options should be matched to the preferences of people with I/DD*.



#### Goal #2:

Sustain the commitment to improving outcomes for members of underrepresented and underserved populations.

**Objective #1:** Support an inclusive network of culturally and linguistically responsive and family driven and self-advocate support groups.

**Objective #2:** Provide technical assistance for continuous improvement of funded agency providers' cultural and linguistic competence plans, to meet the needs of all people served.

**Objective #3:** Encourage providers and other community-based organizations to allocate resources for training, technical assistance, and professional development activities for direct support staff and governing and/or advisory boards, to advance cultural and linguistic competence.

**Objective #4:** Promote trauma-informed practices in program delivery, board and agency staff development, policies, and procedures.

**Objective #5:** With assistance from the Regional Health Plan Collaboration, assess the impact of public health threats on Champaign County residents with

I/DD, particularly those who are also members of racial or ethnic minority groups. Encourage providers to support best health outcomes for all.



#### Goal #3:

Improve access to and engagement in services through increased coordination among providers, community stakeholders, people with I/DD, their families, and other key supporters.

**Objective #1:** Sponsor or co-sponsor educational and networking opportunities for service providers and others supporting people with I/DD, offering in-person events as public health guidance allows.

**Objective #2:** Engage other local funders and stakeholders and participate in coordinating bodies and intergovernmental councils as appropriate, to develop new initiatives, strengthen services, and maximize opportunities for people who have I/DD.

**Objective #3:** In collaboration with the CCMHB and other community partners, ensure that the needs of justice-involved persons with I/DD are considered in the development of an effective diversion/deflection system, *including with input from people who have I/DD*.

**Objective #4:** Use *With* public, family, self-advocate, provider, and stakeholder input, *increase advocacy* to advocate for planning and policy changes at the state and federal levels and to-shape future funding priorities for the CCDDB.

**Objective #5:** Track Illinois Department of Human Services Division of Developmental Disabilities' Prioritization for Urgency of Need for Services (PUNS) database for state and local trends and to ensure full representation of the

service preferences of Champaign County residents. Maintain and increase communication Communicate with the Independent Service Coordination team, representatives of the IDHS Division of Developmental Disabilities, and stakeholders, regarding PUNS and system changes. Through interviews and focus groups, learn about the service and support needs and preferences of Champaign County residents receiving services.

Values/Best Practices Individualized, Comprehensive, Person-Centered, Quality of Life, Holistic, Trauma-informed

#### Goal #4:

Encourage high-quality person-centered planning and follow-through for people served by funding from the CCDDB and, through the Intergovernmental Agreement, from the CCMHB.

**Objective #1:** Continue emphasis on self-determination and Person Centered Planning (PCP) training and implementation for all treatment plan clients. Support conflict free case management for all treatment plan clients.

**Objective #2:** Encourage focus on people's identified personal outcomes in their person-centered plans and *among their* services and supports and people's identified personal outcomes.

**Objective #3:** Collaborate with *self-advocates, family advocates, and* agency providers on the identification of performance measures consistent with valued outcomes such as connection to friends, community, meaningful work and non-work activities, *clearer resource and event information*, etc.

**Objective #4:** Track the utilization of funded services, driven by self-directed service plans, through an integrated online data collection and tracking system.

# Board Development Onboarding; Study Sessions Increase Board & Board Staff Capacity - to seek, review, and fund an effective service array

#### Goal #5:

Continue the collaborative working relationship with the Champaign County Mental Health Board (CCMHB).

**Objective #1:** Coordinate integration, alignment, and allocation of resources with the CCMHB to ensure the efficacious use of resources for people with I/DD.

Objective #2: Encourage Increase the reach and variety of strategies that empower people who have I/DD and increase improve their access to integrated settings as exemplified by the local collaborative approach to the Employment First Act.

**Objective #3:** Collaborate with the CCMHB on promoting inclusion and respect for people with I/DD.

**Objective #4:** Collaborate with the CCMHB for use of the funds from the sale of the CILA homes to meet the needs of Champaign County residents with I/DD with significant support needs.

#### CHILDREN AND FAMILY-FOCUSED PROGRAMS



#### **Goal #6:**

Identify children at-risk of developmental delay or disability, and support early intervention services and family supports.

**Objective #1:** Support the use of evidence-based/informed models by programs serving families with young children not eligible for Early Intervention or under the School Code, and require collaboration and coordination by providers to avoid duplication of effort and to reach all children who have a service/support need.

**Objective #2:** Emphasize cultural and linguistic competence in services and supports for young children and early identification of disabilities, including among members of racial, ethnic, or gender minority groups and rural residents. Reduce disparities in the age of identification and intervention to remediate delays. Promote culturally responsive and family driven support networks for all residents.

Increase
Understanding,
Representation,
Communication, and
Amplification of the
Wants and Needs of
Consumers and
Families

#### Goal #7:

Support access to services and programs for youth and adults with I/DD, with a preference for evidence-based practices to increase positive outcomes.

**Objective #1:** To improve the transition from school to adult services, foster collaborations among schools, adult service providers, young people with I/DD, and other stakeholders.

**Objective #2:** Emphasize Fund and advocate for other funding for flexible support for people with I/DD and their families to enhance their ability to live together, to transition to greater independence when and if they choose, and to be as connected to their communities as possible.

#### **COMMUNITY ENGAGEMENT & ADVOCACY**



#### Goal #8:

Promote inclusion and respect of people with I/DD, through broad based community education efforts.

**Objective #1:** Continue efforts to challenge stigma and discrimination, such as the Alliance for Inclusion and Respect and disABILITY Resource Expo. Continue to engage with student groups and interns on related research projects and discussions, such as through UIUC School of Social Work Learning Lab.

**Objective #2:** Participate in and promote other community education initiatives, such as walks, forums, and presentations to raise awareness, improve cultural competence, and cultivate acceptance, inclusion, and respect.

Objective #3: Support the continued Improve awareness and understanding of developmental disabilities through sustainable self-advocacy and family support organizations, especially those comprised of parents and persons with the most prevalent intellectual/developmental disabilities led by people with I/DD and their family members and other supporters. Promote groups' community education their efforts to reduce stigma/promote inclusion and encourage collaboration to work with Cultural and Linguistic Competence Coordinator on outreach and engagement strategies.

**Objective #4:** Encourage and support efforts to To integrate people with I/DD more fully into community life in Champaign County, seek out and share their direct input with other collaborations and leadership. Emphasize inclusion as a benefit to all members of the community, regardless of ability.

**Objective #5:** Encourage efforts to support people with I/DD in meaningful work and non-work experiences in their community, driven by their own interests. Investigate and develop strategies for engaging employers and other community partners.

**Objective #6:** With input from people who have I/DD, support development of webbased resources to make information on community services and resources more accessible and user-friendly.

**Objective #7:** Increase community awareness of available local resources to broaden support and advocacy for local provider agencies by the community at large.

Increase Influence on Policy at Local, State, and Federal Levels

#### Goal #9:

Stay abreast of emerging issues affecting service and support systems and access to services and be proactive through concerted advocacy efforts.

**Objective #1:** Advocate for workforce development and stability, in coordination with people with I/DD and their families and supporters.

Objective #2: Track implementation of relevant class action suit settlements relevant class action cases, such as the Ligas Consent Decree. Advocate for the allocation of state resources sufficient to meet needs of people returning to home communities from state DD facilities. Encourage development of least restrictive residential options for people with I/DD transitioning from large facilities or selected from PUNS. For people who have not yet been selected for Medicaid-waiver funding, and for those who were selected but chose an option not meeting their needs and preferences have chosen Home-Based Support or a restrictive setting rather than CHLA, advocate for the state to create flexible options.

**Objective #3:** Follow state and federal Olmstead cases, implementation of rules such as the Workforce Innovation and Opportunity Act, and state response to Home and Community Based Services guidance, with attention to local impact.

**Objective #4:** Monitor changes in the Medicaid waivers and Medicaid/Managed Care, and advocate *with other organizations whenever appropriate* for increased service capacity sufficient to meet demand in Champaign County.

Objective #5: With other organizations whenever appropriate, advocate for increased state funding and improvements in service delivery, adequate reimbursement rates, including for transportation, and timely payments for local community-based intellectual and developmental disability services and supports and to the broader

human services network under contract with the State of Illinois. As opportunities arise, participate in planning and policy development with state agencies such as IDHS, and use these opportunities to advocate for the needs and choices of Champaign County residents, *based on direct and indirect input from people with I/DD*.

**Objective #6:** In addition to the monitoring and evaluation of funded programs, encourage strategies which result in the highest quality personal outcomes for people with I/DD, their families, and those most closely involved in their lives.

Approved November 16, 2022

#### C-U at Home, Inc.

- > September 7th: Completed Disability Inclusion Training with DSC trainer, Maggie Brown.
- Creating a workplace where Diversity, Equity and Inclusion are part of your everyday" Presenter: Shandra Summerville.

#### CCRPC- Community Services DDB/CCMHB

- Staff completed training on Americans with Disabilities Act, as well as Anti-Harassment Training. Managers and Directors completed two-part training courses, related.
- > The Youth Assessment Center team attended a specialized training around race and nutrition.
- Head Start held in-service training in August where culturally relevant training occurred.
- ➤ Housing Stabilization program employees received training around resources available through the Department of Human Services, for improvement in connecting client households.

#### Champaign County Children's Advocacy Center

Diversity, Equity & Inclusion training presented by Dr. Isaiah Pickens on August 23, 2022 & August 25, 2002.

#### Champaign County Christian Health Center

CLC Training Held at the April Board Meeting

#### Champaign County Head Start/Early Head Start MHB

See CCRPC

#### Champaign County Health Care Consumers

No Scheduled CLC Trainings were conducted this year.

#### Community Choices, Inc. DDB

- ➤ Web Accessibility 101
- Olmstead's Promise: Ending police violence on black disability communities.
- Approaches to increasing independence within transportation for people with I/DD
- Supporting people with I/DD and Mental Health Diagnosis
- Disability, Law Enforcement, and Incarceration: New Papers and Opportunities
- > The Non-violent Communication Course
- Racial Healing for Health
- The board participated in a CLC training with Shandra Summerville.

#### Community Service Center of Northern Champaign County

CLC Annual Training Conducted by CLC Coordinator for Board and Staff Members in the 4<sup>th</sup> Quarter.

#### Courage Connection

➤ We regularly facilitate conversations regarding implicit bias. We have partnered with Amplifier to develop a messaging platform that provides a road map for all our internal and external stakeholders to talk about our clients and our work in a highly inclusive manner. Laura Lindsey, our Grants Manager, recently attended a training called Racial Healing for Health. Dr. Nia Aitaoto went into depth about the impact of settler colonialism on indigenous populations and shared how to respond with community engagement.

#### Crisis Nursery

- Culturally Appropriate Positive Guidance for Young Children in Our Care
- Talking with Toddlers: The Power of Positive Language
- Staying in Relationships when Conversations are Challenging.
- Cultural Humility Part 2: Supporting Dual Language Learners
- Understanding Hope as an Intervention Strategy
- Leaning in: From Racism to Racial Equity
- > Trauma Informed Care for Childcare Providers
- Helping your Children Manage Distress in the Aftermath of a shooting.
- Healthy Communication and Modeling Boundaries with Kids
- Undocumented Youth In America

#### Cunningham Children's Home

Relias, a learning management system, will ultimately provide support/facilitate annual cultural competence and DEI training.

#### Developmental Services Center DDB/CCMHB

- > Skilled Dialogue, Part II Critical Aspects of Culturally Competent Communication.
- Cultural Competence Training for Board Members

#### Don Moyer Boys & Girls Club

- Annual Cultural Competency, Trauma-Informed Care and DEI Training was conducted in the 1st Quarter.
- One training was conducted by the CLC Coordinator before the transition of the new Executive Director

#### East Central Illinois Refugee Mutual Assistance Center

- > Staff receive continuous cultural competence training through resources like CORE (Cultural Orientation Resource Exchange), and Switchboard (resources for refugee current providers)
- ➤ Webinars and trainings from the US Conference of Catholic Bishops and the Illinois Coalition for Immigrant and Refugee Rights.
- A part time Cultural Orientation Coordinator was hired that has focused mostly on Afghan clients since their arrival.
- ➤ Board training on Cultural Competency was conducted during Q4 of FY22 and will be presented annually during Q3 or Q4 of FY23.
- > The board member that was an ESL teacher gave a virtual presentation on cultural and linguistic competency remaining Board members.

#### Family Service of Champaign County

- Cultural Humility: People, Principles and Practices
- > Intergenerational Trauma & Unprocessed Grief
- Reframing Aging,
- De-escalation Skills & Strategies for Helping Professionals

#### FirstFollowers

Completed FICPFM leadership training course.

#### **GROW** in Illinois

- ➤ LGBTQ 101
- How to speak with a person that has no insight
- Vaping and Marijuana drug trends in teens

#### Mahomet Area Youth Club

None Documented PY23

#### PACE, Inc. DDB/CCMHB

- Successful Aging with I/DD
- Open Wounds Documentary,
- ➤ ADA healthcare access I/DD and Racial Healing for Health

#### Promise Healthcare

November- December of 2022 staff completed training. A new training platform (Zywave) was rolled out.

#### Rape Advocacy, Counseling, & Education Services

> Shirley Paceley, a well-regarded educator, and author provided training for RACES' office-based staff that focused on centering survivors with disabilities.

#### Rosecrance Central Illinois

- > All staff complete annual cultural competence training.
- 21 staff participated in a training pertaining to military culture and best practices for serving active-duty military and veterans.

#### Terrapin Station Sober Living NFP

Workshops offered via zoom recommended by CCMHB were not documented.

#### The UP Center of Champaign County

Annual Training Conducted by CLC Coordinator to review results from the Board and Staff CLC Assessment.

#### The Well Experience

CLC Training Conducted by CLC Coordinator

#### Urbana Neighborhood Connections Center, Inc

List of Trainings were not documented in the quarterly reports. CLC Reports were completed.

#### **WIN Recovery**

The staff completed 6 hours of virtual training and 2 hours of self-taught training via the State of Illinois website.



#### **BRIEFING MEMORANDUM**

DATE: October 18, 2023

TO: Members, Champaign County Developmental Disabilities Board FROM: Lynn Canfield, Executive Director, Kim Bowdry, Associate Director

SUBJECT: Observations about DD Programs Funded in PY23

#### **Purpose**

This memorandum offers observations on data reported by agencies for the programs funded by the CCDDB or Champaign County Mental Health Board (CCMHB) with a focus on people who have intellectual/developmental disabilities (I/DD).

The CCDDB is not required by statute to provide an annual report or develop a strategic plan or community needs assessment, but the latter two are completed every three years and will be done again during 2024. As to annual reporting, CCDDB staff have developed a utilization summary report describing programs and showing actual performance compared with targets. The PY2023 utilization report is attached and is the basis for observations in this memo. Last year, we added pie charts showing demographic and residency data on people served. Other information used in this memorandum comes from the agencies' year end performance outcome reports, which were submitted with enough time for us to review and point to highlights. Finally, a detailed analysis of service claims will be completed prior to the next review of applications for fundings, offering a close-up of how services are used by individuals who have very different needs and preferences.

#### **Utilization of Programs**

About one month after each quarter, agencies report on how their programs were utilized during that quarter. Depending on service type and particulars of a contract, they report numbers of people served, with and without a service plan, number of community events, number of service contacts, and/or number of service hours per program. This clarifies per person and per hour costs and allows for comparison of results across years. Because people are served through as many programs as they choose, there would be duplication if all participants were totaled. Through a claims reporting system, this duplication is eliminated, so that we can identify the actual total number of people served across all programs in a given year. This will be presented at a later meeting, in the report referenced above. The following observations and responses are listed per priority, for comparison across documents.

#### Priority: Self-Advocacy

#### **OBSERVATION:**

For the first time in the CCDDB's history, no self-advocacy or family support groups applied for funding directly, so there were no PY23 contracts with such organizations. There were, however, supports for self-advocates and family members through agency contracts aligned with other priority categories, and their activities were robust.

#### RESPONSE:

One cause of withdrawal of family support groups may be the financial accountability requirements and cost. As a result, flexibility to waive these requirements was offered through the I/DD Special Initiatives fund, and the CCDDB also maintained the authority to waive any requirement if doing so would be in the best interest of Champaign County residents. One family support network, CU Autism Network, applied for DDB funding for two programs, not requesting special waivers. Both programs are funded for PY24.

#### Priority: Linkage and Coordination

#### **OBSERVATIONS:**

- Two PY22 programs continued in PY23, one adding services which had been contracted by a third program, discontinued early in PY22, for MI/DD case management.
- The combined cost for programs in this priority rose by 5%.
- 33 more TPCs were served (some duplication).
- Direct service hours (unduplicated) rose by 7.5% (or 689.25 hours).

#### RESPONSE:

• PY24 changes in the state's Independent Service Coordination system should not change the capacity of continued contracts but may allow more intensive case management.

#### Priority: Home Life

#### **OBSERVATIONS:**

- Two PY22 programs offering similar services continued in PY23, one adding a new program component.
- The combined cost of programs in this priority category rose by 18%.
- Both programs served more people, with a total of 26 more TPCs (no duplication).
- Direct service hours (unduplicated) rose by 39% (or 4,024.5 hours).

#### **RESPONSES:**

- Given the potential benefits (including benefit to the broader community) of integrated, independent living, these increases could be seen as very good news.
- Increased allocations allowed the agencies to provide services, document, report, and bill for activities and supports not billable to the IDHS-DDD Home Based Support waiver.

#### Priority: Personal Life and Resilience

#### **OBSERVATIONS:**

- Three PY22 programs continued in PY23, offering fairly different types of service.
- All three were underutilized in PY22 (staffing shortages the main issue), which resulted in returned revenue in each. For PY23, this appears to be the case again.
- The combined cost of programs in this priority category decreased by 6%.
- In PY23, the programs had 1 fewer TPC and 2 more NTPCs (no duplication).
- Direct service hours (unduplicated) decreased by 0.7% (or 74.5 hours).

#### **RESPONSES:**

- For PY24, one of the three programs has been decreased and refocused, partly due to staffing shortages but also due to increased access to state Medicaid-waiver funded Home Based Support.
- Because many Champaign County residents continue to wait for state funding for these services, this is an area where local funding could be increased to meet their needs, if staff capacity increased.

#### Priority: Work Life

#### **OBSERVATIONS:**

- Three PY22 programs continued in PY23, two offering similar services and one a collaboration (community education) by the two agencies.
- The combined cost of programs in this priority category increased by 26%.
- In PY23, all programs served more people, with a total of 33 more TPCs (no duplication).
- Direct service hours (unduplicated) increased by 60% (or 4,023.75 hours).

#### RESPONSES:

- These impressive increases appear be related to late-pandemic era workforce shortages creating community employment opportunities.
- Increased allocations allowed the agencies to provide services, document, report, and bill for activities and supports not billable to the IDHS-DDD Home Based Support waiver.

#### Priority: Community Life and Relationships

#### **OBSERVATIONS:**

- It is within this category that larger programs support self-advocate and family support group activities.
- Three PY22 programs continued in PY23, with very different services.
- The combined cost of programs in this priority category increased by 19%.
- In PY23, the programs served 15 fewer TPCs and 20 more TPCs (some duplication).
- Direct service hours (unduplicated) increased by 17% (or 4,526. 5 hours).
- The Performance Outcome Reports submitted for these funded programs include discussion of changes since the height of the public health emergency (see below.)

#### RESPONSE:

• Programs continue this important work for PY24. Input to the CCDDB and CCMHB directly from people with I/DD and their supporters shapes priorities for the next cycle.

#### Priority: Young Children and their Families

#### **OBSERVATIONS:**

- Two PY22 programs with similar services continued in PY23.
- The combined cost of programs in this priority category increased by 4%.
- In PY23, the programs served 466 more children combined (not likely to be duplicated).
- Direct service hours (unduplicated) decreased by 11% (or 1253 hours). One program's hours increased and the other's decreased.

#### RESPONSE:

• The programs offer services and supports of greatly varied intensity and duration, which is a partial explanation for decreased hours despite increases in children served in both programs, and presumably across several categories of support. Staff shortages noted.

#### The People Served

Demographic characteristics and residency of the people who participated in funded I/DD programs are comparable from PY22 to PY23, in that data were collected in the same categories and across programs which were similar from one year to the next. Charts aggregating these for PY23 are attached to this memo, and those for PY22 can be found on pages 12-16 of the March 2023 CCDDB Meeting Packet.

#### **OBSERVATIONS:**

- For DDB funded programs, which tend not to serve young children, there were shifts in residency: fewer people lived in Urbana or 'Other Champaign County' (mainly rural areas) and more lived in Champaign, with smaller increases in Rantoul and Mahomet.
- Residency of young children (MHB programs) shifted similarly: a decrease in rural residency and increases in Champaign, Urbana, Mahomet, and Rantoul.
- Distribution of ages was consistent from PY22 to PY23, with a shift toward ages 19-59.
- Race data were also consistent. In DDB funded programs, increases in people who were White or Black are explained by a decrease in data not available. In MHB programs, there were small decreases in White and Other (Native American and Multi-Racial) and small increases in Asian/Pacific Islander and Black/African American.
- There was an overall decrease in participants of Hispanic or Latino/a ethnicity, partially explained by more data available in PY23.
- Slightly more males were served in PY23 than PY22.

#### RESPONSE:

• Changes from PY22 to PY23 are small. It is certainly good news that fewer people were identified with 'data not available.' We have not sought an explanation from agencies as to why more data categories were available, or why slight changes occurred.

#### Consumer Access, Outcomes, and Participation

Also of value to CCDDB and CCMHB members and staff are the Consumer outcomes which result from participating in these funded programs. Agencies report annually on participant outcomes achieved, and the aggregate reports are posted among downloadable documents on the public sites, <a href="http://ccmhddbrds.org">http://ccmhddbrds.org</a> and <a href="https://www.co.champaign.il.us/MHBDDB/PublicDocuments.php">https://www.co.champaign.il.us/MHBDDB/PublicDocuments.php</a>.

#### **OBSERVATIONS:**

- For many programs, consumer access occurred as anticipated. Efforts to reach underserved groups are noted. One agency includes detail on percentages of participants with diagnoses of I/DD, Autism, and Mental Illness. Others describe additional demographic information collected.
- For some programs, consumer access was negatively impacted by staffing shortages and turnover within the program and by delays associated with availability of other services, such as psychological assessments.
- Average length of time from assessment to engagement in services was impacted by people being added to wait lists while still in high school, which is a positive.
- Another positive finding was that wait time for some services had decreased substantially since the height of COVID-19.

- In one program, eligibility determination was changed during PY23, to use a more preferred screening tool.
- Some programs noted that participants required less intensive support or more short-term intensive support than anticipated.
- 63 consumer outcomes were met, and 21 were not met.
- Staffing shortages and turnover also impacted some consumer outcomes.
- One outcome was not run due to limited ability to administer tools (staffing shortfall) and low attendance at in-person events during which surveys were distributed.
- One longstanding program was impacted not just by staff shortages (bad news) but also by the State awarding more people Home and Community Based Services (good news).
- Another program notes that the staffing deficits contribute to staff burnout.
- Community employment opportunities for people with I/DD increased in the wake of the public health emergency.
- All 16 programs reported good participation in outcome reporting by consumers. One barrier to fullest participation was early closure from programs (e.g., due to relocation). Low return rate of surveys negatively impacted measurement of some outcomes.
- An interesting discussion (page 45-47) regards people's intention to increase their social and community connections, compared to what they act on, especially without support.
- People who were building community and social connection through a different program often had interests that were based on other participants in their groups and were more involved in group planning as they developed these friendships (p. 63).
- Authors included many helpful narratives about program processes, results, and changes. One such change is described on page 68.
- An example of thoughtful analysis of each outcome is on pages 26-27.
- Optional case studies are offered on pages 10, 18, 37-38, 48-50, 55-56, 60, 63, and 71.
- These reports have traditionally presented technical problems to agency users and our staff, making it difficult to distill highlights from the rich data.

#### **RESPONSES:**

- Outcome measures varied not just due to relevance to the type of service but also with regard to detail, making the aggregate comparison less valuable. For example, some outcomes were not more specific than yes/no, and some included numeric targets. This means that in one case, if a training was to be held and was held, the outcome is met, while in another case, if 15 people were to indicate satisfaction with a training, and only 14 did, or only 14 returned the survey, the outcome is not counted as met. The latter, even though not met, is a more encouraging result. The Evaluation Capacity Building project continues to support the development of outcomes that convey value and are measurable but are also practical for agency staff to collect and report.
- Where problems are described with regard to process or outcomes, these reports include solutions already in progress or planned for PY24.
- For PY23, the form was modified to improve accessibility and reduce redundancy with other reports. It will be revised with advice from UIUC Family Resiliency Center Evaluation Capacity Building team.

#### Utilization Summaries for PY2023 CCDDB and CCMHB I/DD Programs

Detail on each program's performance toward defined consumer outcomes during the funding year of July 1, 2022 to June 30, 2023 is available at <a href="http://ccmhddbrds.org">http://ccmhddbrds.org</a>, among downloadable public files toward the bottom of the page. The document is titled "CCDDB PY23 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**

There were no applications under the Self-Advocacy priority in PY2023.

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#### **Priority: Linkage and Coordination**

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#### Champaign County Regional Planning Commission Community Services

#### **Decision Support Person Centered Planning** \$323,550

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. Case management provided to PUNS enrolled people who are dually diagnosed. Utilization targets: 320 TPC, 200 NTPC, 300 SC, 50 CSE. Utilization actual: 320 TPC, 429 NTPC, 698 SC, 27 CSE, 3,280 hours of service.

#### DSC Service Coordination \$468,000

**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, 70 SC, 2 CSE. **Utilization actual:** 248 TPC, 31 NTPC, 24 SC, 4 CSE, 5,866 hours of service.

#### Priority: Home Life

#### Community Choices Inclusive Community Support (formerly Community Living) \$193,874

**Services:** Housing, skills, connections, resource coordination, benefits and budget management, health, daily life coordination, and comprehensive HBS administration. Services chosen after an in-depth planning process. Family-Driven Support: planning process for self-directed community living. Sustained Community Supports (ala carte): choice of specific services and support in any of the domains on a shortor long-term basis. Sustained Community Supports (full coordination): people looking for in-depth support for daily living can choose to participate in most, or all, of the service domains. Program Design: Support will be provided by a team and up to 5 times per week. Optional Personal Development Classes available to participants and other members. **Utilization targets:** 30 TPC, 15 NTPCs, 4 CSE, 3,539 SC, 4,100 Other (direct support hours + Personal Development class hours). **Utilization actual:** 32 TPC, 20 NTPC, 9 CSE, 1,930 SC, 2,103 direct support hours, 305 Personal Development class hours.

#### DSC Community Living \$536,000

**Services:** Program supports people to live their best life enjoying independence, community engagement, and self-sufficiency. Staff provide individualized training, support, and advocacy. Program supports people with their health and wellness, accessing their community, and provides varied financial supports. Emergency Response is available to support those needing assistance after hours and on the weekends. **Utilization targets:** 64 TPC, 6 SC. **Utilization actual:** 76 TPC, 15 SC, 12,023 hours of service.

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#### Priority: Personal Life and Resilience

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#### DSC Clinical Services \$184,000

**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, two Licensed Professional Counselors, 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:** 59 TPC, 6 NTPC, 10 SC, 2 CSE. **Utilization actual:** 58 TPC, 2 NTPC, 15 SC, 4 CSE, 1,140 hours of service.

#### DSC Individual & Family Support \$390,000

Services: Program services children and adults with I/DD with significant behavioral, medical, or support needs and reflects expressed needs of people/families. Program offers community activities such as social, recreational, educational, volunteering opportunities either 1:1 or with peers. The program offers primary caregivers scheduled and emergency support. Program provides more flexible/less restrictive, individualized support than state funded programs. Financial support has afforded families to benefit from extended breaks such as camps, after-school programs, and summer camps with specialized support. All provide temporary relief to primary caregivers while providing a dual benefit for their loved one outside the family home. Utilization targets: 19 TPC, 27 NTPC, 8 SC, 2 CSE. Utilization actual: 11 TPC, 29 NTPC, 15 SC, 4 CSE, 8,714 hours of service.

#### PACE, Inc. Consumer Control in Personal Support \$27,367

**Services:** Personal Support Worker (PSW) recruitment and orientation, focused on Independent Living Philosophy, Consumer Control, and the tasks of being a PSW. Personal Assistant (PA)/PSW 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 6 Other (Successful PSW matches). **Utilization actual:** 81 NTPC, 315 SC, 28 CSE, and 12 Other (Successful PSW matches), 862 hours of service.

#### **Priority: Work Life**

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#### Community Choices Customized Employment \$217,500

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. Increased Support Model Development proposes to develop a program design to ensure more people with I/DD can work inclusively in our community. Supported Experiences for First Time Job Seekers provides classroom and intensive job-shadowing at two local businesses in structured 12-week program for first-time job seekers and others seeking additional experiences. Utilization targets: 40 TPC, 2,200 SC, 4 CSE, 3,220 Other (direct support hours). Utilization actual: 51 TPC, 2,707 SC, 8 CSE, 3,741 Other (direct support hours).

#### DSC Community Employment \$435,000

Services: Assists people to find and maintain jobs. Discovery process: employment plan development; interviews with the person and others; daily observation; exploration of job interests; encourage/support volunteer opportunities. Resume or portfolio development: interview preparation and support; contact with potential employers; soft skills education and practice. Application process/follow-up: traditional and non-traditional approaches to interviewing/hiring. Job orientation, skill acquisition including transportation, mastery of specific job responsibilities, potential accommodations, adaptive tools, development of natural supports, foster relationship with supervisor and coworkers. Job coaching: advocacy, development of self-advocacy skills, identification of potential new responsibilities or promotions, monitoring work environment for potential risks to job security; identifying and facilitating natural supports. Supported Employment: establish volunteer/work options for all people including those with significant support needs; support niches for a small group of people within local businesses.

Utilization targets: 70 TPC, 2 CSE, 15 SC. Utilization actual: 92 TPC, 5 CSE, 20 SC, 6,989 hours of service.

#### DSC with Community Choices Employment First \$85,000

**Services:** Training emphasizes person-centered, customized, community-based services and cutting-edge employment practices to include employment readiness and leading to experience in areas of volunteerism, supported employment, and customized employment. Continued outreach and incentive for businesses, promoting inclusion and prioritizing employment for people with I/DD. Advocacy and ongoing dialogue with representatives and policymakers of various state agencies to further employment opportunities for those with developmental disabilities. 'New Employer Directory' reflects/promotes businesses identified as inclusive and will be made available in a variety of formats. **Utilization targets:** 25 CSE. **Utilization actual:** 61 CSE.

### **Priority: Community Life and Relationships**

### Community Choices Self-Determination Support \$171,000

Services: 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. Leadership & Self-Advocacy: Leadership Classes and an Advocacy Board. Building Community: options for adults with I/DD to become engaged with others through clubs and community opportunities. 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: 180 NTPC, 2,759 SC, 4 CSE, 1,953 Other (direct support hours). Utilization actual: 183 NTPC, 2,861 SC, 12 CSE, 2,035.5 Other (direct support hours).

### DSC Community First \$847,658

**Services:** For people with IDD interested in community-focused activities, a variety of offerings ranging from partial to full day options may include classes/offerings for educational opportunities hosted onsite and in community, with expanded social connections and involvement. Community connection through participation in self-advocacy, recreational activities, social events, educational groups, volunteering, and other areas of interest to enhance personal fulfillment. Program supports people with a wide range of interests, abilities, and needs, with people choosing from a diverse menu of activities, over 27 options. Program is committed to personalized support based on person's individual interests and needs. **Utilization targets:** 50 TPC, 50 NTPC, 5 SC, 2 CSE. **Utilization actual:** 40 TPC, 93 NTPC, 24 SC, 5 CSE, 27,408 hours of service.

### DSC Connections \$95,000

**Services:** Community-based alternative encouraging personal exploration and participation in the arts/artistic expression, promoting life enrichment and alternative employment. Introduces and supports people to experience a creative outlet, promote self-expression, and profit from products they create/produce. Encourages people to be creative and offers a welcoming venue for a variety of events. Groups and classes vary and are based on the interests and requests of program participants. Program hosts on-site events to promote collaboration and a venue for like-minded community artists. **Utilization targets:** 25 TPC, 12 NTPC, 5 CSE. **Utilization actual:** 25 TPC, 25 NTPC, 7 CSE, 1,216 hours of service.

### Priority: Strengthening the I/DD Workforce

### DSC Workforce Development and Retention \$227,500

**Services:** Strengthens and stabilizes the workforce through training, support, and recognition/reward. Program utilizes trainings, resources, and tools for staff through NADSP membership. New employees will be provided hiring bonus after completing required agency training. Retention/incentive bonuses are paid to keep key employees during the workforce crisis and pandemic. Retention bonuses occur 3 times per year in recognition of staff enduring the challenges of a compromised workforce and for the long-term effects of high turnover and frequent vacancies. **Utilization targets:** 160 Other (DSPs receiving training and retention bonuses). **Utilization actual:** 373 Other (DSPs receiving training and retention bonuses).

### **Priority: Young Children and their Families**

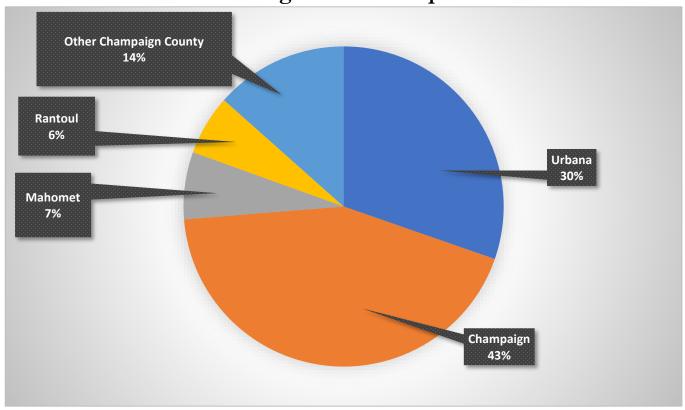
### Champaign County Regional Planning Commission Head Start/Early Head Start Early Childhood Mental Health Services \$149,666 (CCMHB)

Services: Collaborates with parents and teachers through the Social-Emotional Committee to identify S-E strengths and areas of need in the children in their care, using assessments, observations, and reflective conversation. Reviews and monitors developmental screenings for all students. Consults with staff and supports the referral process to School Districts or Developmental Pediatricians. Supports staff and parents in writing individualized social-emotional goals and action plans and in reflection around inter/intra-personal skills used with children to improve co-regulation, attunement, empathy, and compassionate limit setting. Collaborates with staff and parents in identifying individualized inter/intra-personal goals and action plans. Collaborates with stakeholders to develop Support Plans for children who engage in challenging behaviors to communicate their needs. Facilitates workshops, support groups, and coaching for staff and parents on social-emotional development, compassionate caregiving, stress-management, functional behavior assessments, trauma-informed practices/leadership, and cultural competency. Supports staff in monitoring children's progress and outcomes. Utilization targets: 90 TPC, 380 NTPC, 5 CSE, 3,000 SC, 12 Other (workshops, trainings, professional development efforts with staff and parents). Utilization actual: 129 TPC, 362 NTPC, 5 CSE, 3,235 SC, 11 Other (workshops, trainings, professional development efforts with staff and parents), 974 hours of service.

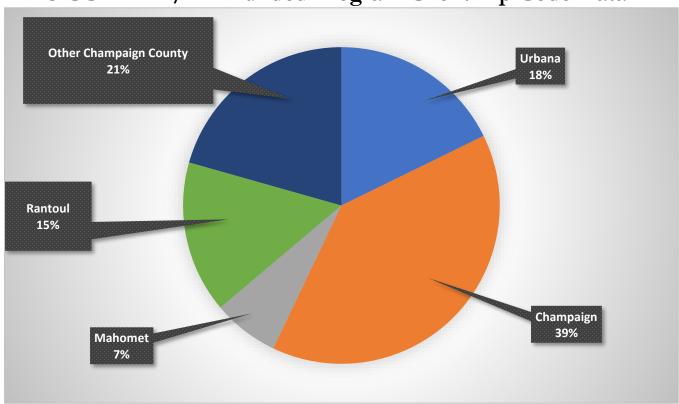
### DSC Family Development \$596,522 (CCMHB)

**Services:** Serves children birth to five years, with or at risk of developmental disabilities and their families. FD 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:** 872 TPC, 272 SC, 25 CSE, 8,805 hours of service.

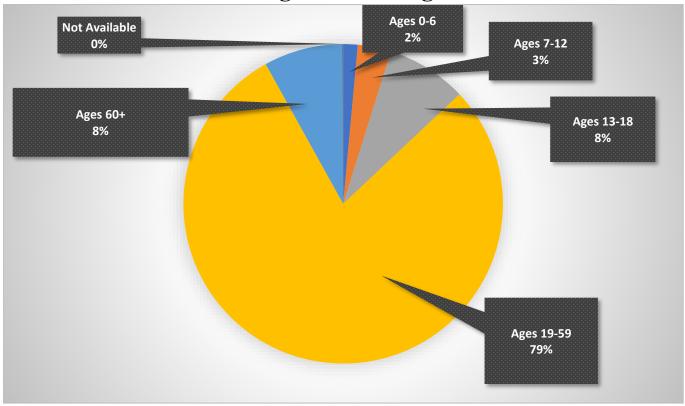
PY23 CCDDB Funded Program Client Zip Code Data



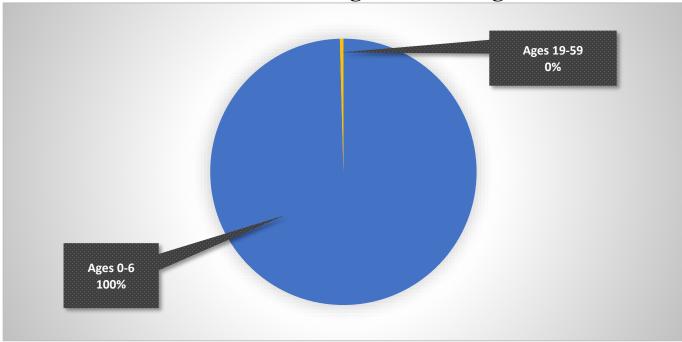
PY23 CCMHB I/DD Funded Program Client Zip Code Data



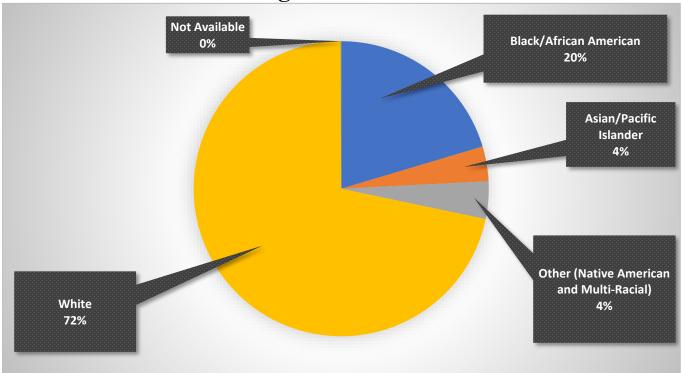
PY23 CCDDB Funded Program Client Age Data



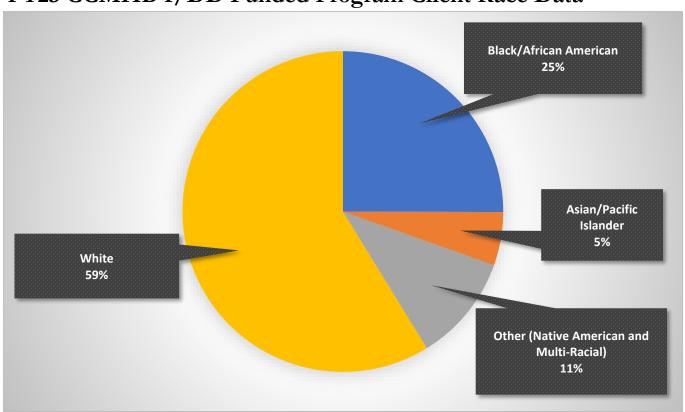
PY23 CCMHB I/DD Funded Program Client Age Data



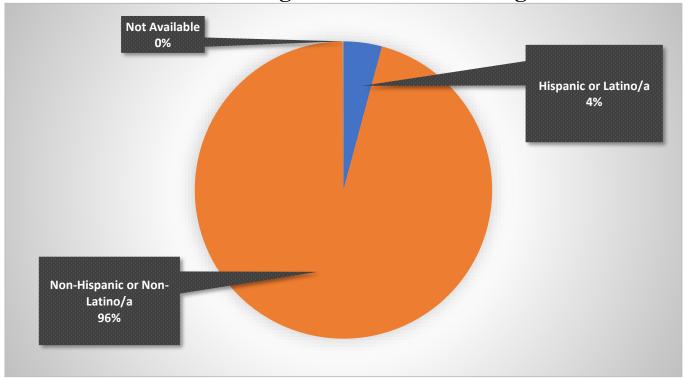
PY23 CCDDB Funded Program Client Race Data



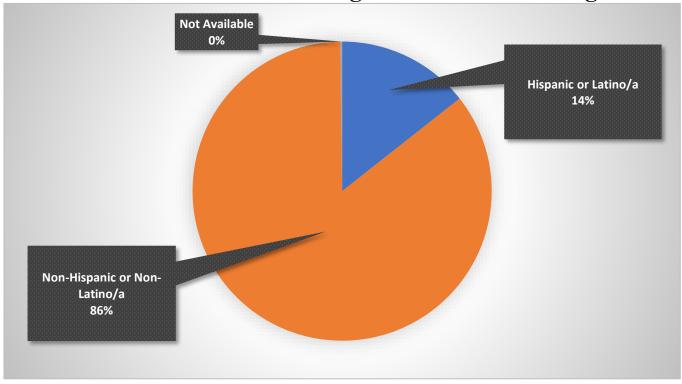
PY23 CCMHB I/DD Funded Program Client Race Data



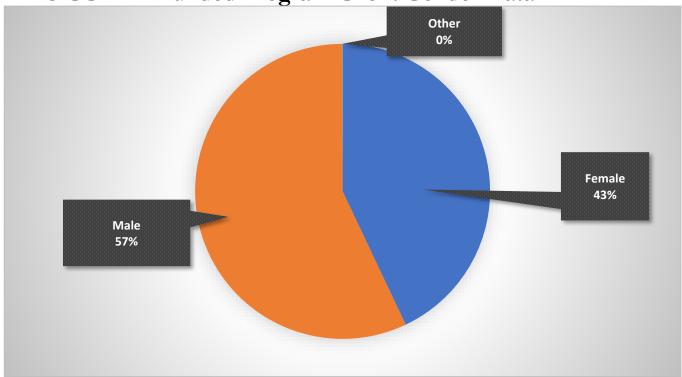
PY23 CCDDB Funded Program Client Ethnic Origin Data



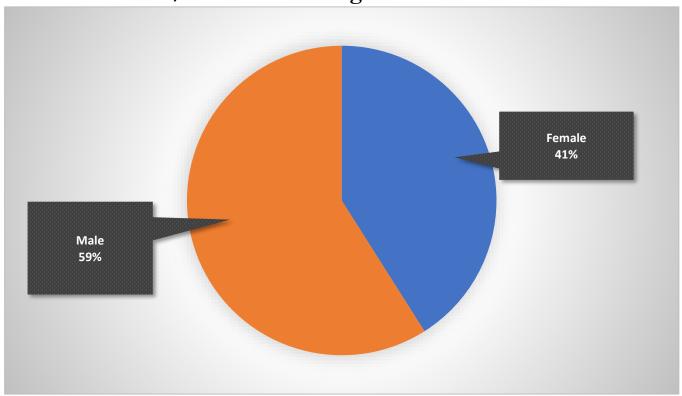
### PY23 CCMHB I/DD Funded Program Client Ethnic Origin Data



PY23 CCDDB Funded Program Client Gender Data



PY23 CCMHB I/DD Funded Program Client Gender Data



Sign language interpreters, personal assistants & Spanish translators will be available. Print materials will be provided in alternative formats (large print or electronic) upon request.



The DISABILITY Resource Expo is a special project of the Champaign County Mental Health Board and Champaign County Developmental Disabilities Board, as well as community partners.

### Want to know more?

For more information, please contact Dylan Boot at (217) 722-5281 or wheelzothunder@gmail.com www.facebook.com/resourceexpo www.disabilityresourceexpo.org



Saturday, October 28, 2023 11 am – 4 pm Market Place Mall 2000 N Neil St, Champaign, IL 61820 Free entry and parking!



A DIS**ABILITY** Resource Expo for Champaign County & East Central Illinois

### What is the DISABILITY Expo?

### THANK YOU to Our Sponsors!

The DisABILITY Resource Expo: Reaching Out for Answers has been recognized as a valuable community resource for families and individuals with disabilities. Exhibitors will be on hand to address questions about where community members go for supports and services they, or a loved one, may need to live the most independent life possible in Champaign County and East Central Illinois. The Expo is family-friendly and open to all. The Expo seeks to provide comprehensive information by bringing together a wide range of businesses and organizations that serve individuals with all types of disabilities, including:

- · Physical disabilities
- Intellectual and developmental disabilities
- Mental illness
- · Hearing impairments
- · Visual impairments
- · Senior resources
- · Substance abuse
- Epilepsy support
- · Transportation options
- · Adaptive equipment options
- Recreational
- · Case management
- · Legal services
- · Financial planning
- Residential options
- Employment support
- · Support groups
- · Community-based services
- Health care options
- ...and much more!

### Diamond Donors (\$1000+)

- Carle
- Champaign County Developmental Disabilities Board
- Champaign County Mental Health Board
- City of Champaign Equity and Engagement
- Martin One Source
- · Mass Transit District of Champaign-Urbana
- National Seating and Mobility
- Quality Med Transport
- · Smile Politely
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- Adams Outdoor Advertising
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- Champaign County Down Syndrome Network
- Champaign-Urbana Special Recreation
- Developmental Services Center
- Eden Supportive Living
- Elliott Counseling Group
- Greater Champaign County AMBUCS
- Immigrant Services of Champaign Urbana
- MedServ Equipment Corp.
- The News-Gazette

\*As of press time

Intérpretes de Lenguaje de Señas y de Español estarán disponibles. Asistentes personales estarán disponibles. Materiales de impreso serán provisto en formatos alternativos (Braille, letra grande y disco), de ser solicitadas.



La Exposición de Los Recursos
Discapacitados es un proyecto esprcial de
La Junta Por La Enfermedad Mental Del
Condado De Champaign, La Junta Por Las
Descapacides Desarollas Del Condado
De Champaign y nuestros socios en la
comunidad.s.

### Ouieres Saber Más?

Para más información, por favor conecta con Dylan Boot por teléfono á 217-722-5281 o en la red en estos lugares wheelzothunder@gmail.com www.facebook.com/resourceexpo www.disabilityresourceexpo.org



Sábado 28 de Octubre del 2023 11 am – 4 pm Market Place Mall

2000 N Neil St, Champaign, IL 61820

No Necesitas Pagar Por Entrar O Por El Estacionamiento



Una Exposición de Los Recursos Discapacitados Por El Condado Del Champaign Y El Partido Este-Céntrico De Illinois

### Que Es La Exposición Discapacidad?

### Muchas Gracias Á Nuestros Patronicadores

La Exposición de Los Recursos Discapacitados: Obtengan Las Respuestas Que Tu Necesitas gania mucho reconocimiento como un recurso en nuestro comunidad que tenia mucho valor las familias y la gente con las discapacidades. Expositores serán disponible por responder á preguntas de miembros de la comunidad sobre ellos pueden encontrar los recursos apoyos

que están necesario por viviendo independiente en el condado del Champaign y el partido este-céntrico de Illinois. Nuestra exposición esta abierta á toda la gente, incluyendo la familia entera. Con esta exposición,

nosotros queremos dar la gente una variedad de información integral por ensamblando un grupo extensor de compañías y organizaciones que trabajan con las discapacidades como:

- · las discapacidades del cuerpo
- las discapacidades intelectuales o desarrollas
- la enfermedad mental
- las descapacidades auditivas
- las descapacidades visuals
- recursos para las personas de la tercera edad
- una lucha con el abuso de las sustancias
- la epilepsia y los convulsions
- las que necesitan opciones diferentes por la transportación
- las que necesitan opciones diferentes por el equipo
- las que necesitan opciones por disfrutar• las que necesitan la administración de la información personal
- las que necesitan los servicios juridicos
- las que necesitan una esquema financiera
- las que necesitan opciones viviendas
- las que necesitan asistencia empleada
- las que necesitan los grupos apoyos
- las que necesitan algunos servicos de la comunidad
- las que necesitan las alluda medica y mucha más!

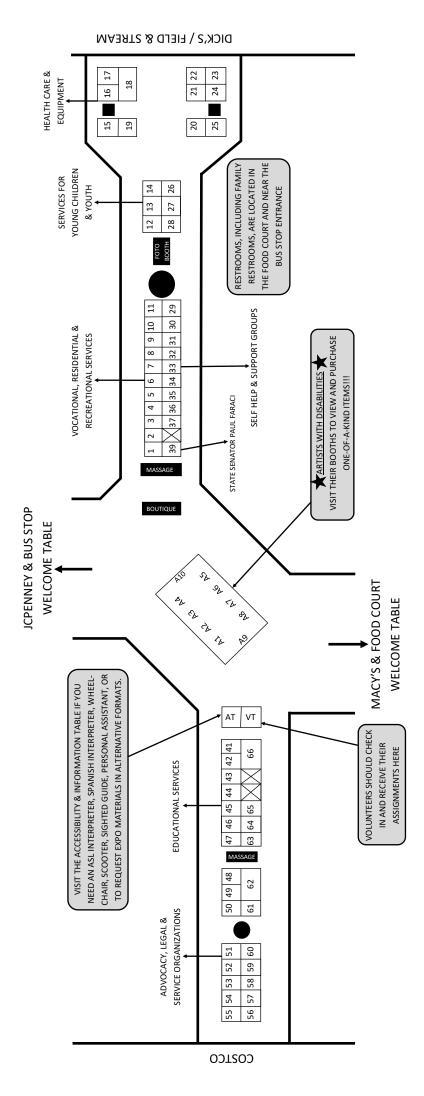
### Los Donantes Dimante [Mil O Más]

- Carle
- Champaign County Developmental Disabilities Board
- Champaign County Mental Health Board
- · City of Champaign Equity and Engagement
- Martin One Source
- Mass Transit District of Champaign-Urbana
- National Seating and Mobility
- Quality Med Transport
- Smile Politely
- · Stevie Jay Broadcasting
- Thrivent Financial

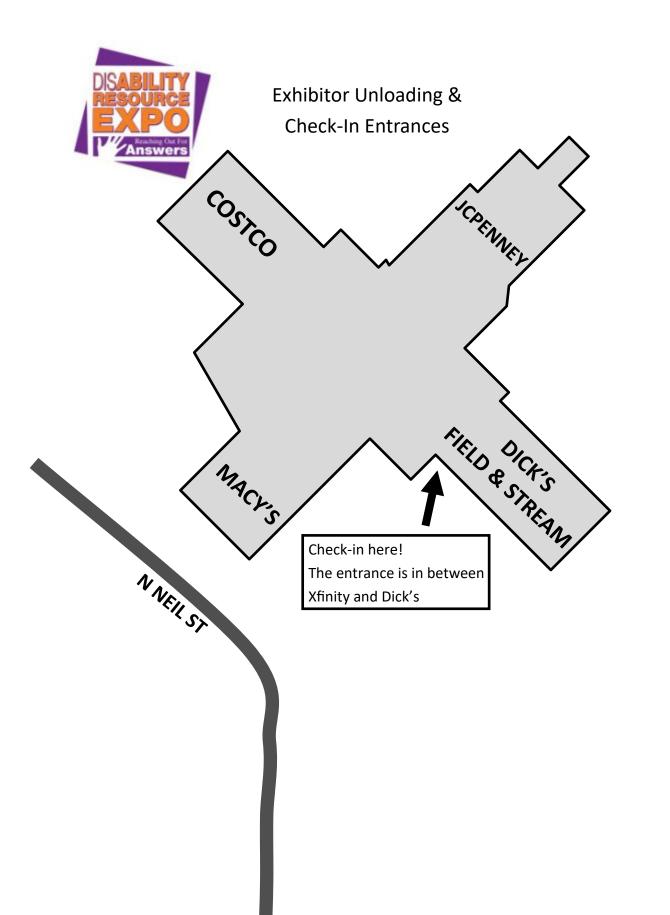
### Los Donantes Platinos [Quinientos Hasta Novecientos Noventa Y Nueve]

- Adams Outdoor Advertising
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- Champaign County Down Syndrome Network
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- Developmental Services Center
- Eden Supportive Living
- Elliott Counseling Group
- Greater Champaign County AMBUCS
- Immigrant Services of Champaign Urbana
- MedServ Equipment Corp.
- The News-Gazette

\*Al Tiempo De La Publicación



	1 Stephen's Family YMCA / Larkin's Place	18	MedServ Equipment Corporation	35	Ascend Consultation in Health Care	53	Thrivent Financial
	2 Land of Lincoln Goodwill Industries	19	Swann Special Care Center	36	Champaign-Urbana Multiple Sclerosis Support Group	54	Human Rights Authority (IGAC)
	3 Community Choices	20	UIUC - Audiology & Speech Language Pathology Clinic	37	Depression Bipolar Support Alliance Urbana-Champaign	22	Champaign County Clerk and Recorder's Office
	4 Champaign-Urbana Special Recreation	21	Amazing Sensory Designs	38		26	Equip for Equality
	5 LifeLinks	22	Carle Community Wellness and	39	State Senator Paul Faraci	57	Illinois Home Care Ombudsman Program
<u> </u>	6 Equability LLC	23	Champaign County Health Care Consumers	41	Illinois Radio Reader	28	Rape Advocacy, Counseling & Education Services
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	8 Division of Rehabilitation Services (DRS)	25	Pavilion Behavioral Health System, The	43	Social Champaign	09	Immigrant Services of Champaign-Urbana
	9 Eden Supportive Living	26	AMBUCS, Greater Champaign County	44	Urbana Early Childhood School & CU Early	61	Arc of Illinois, The
1	10 Envision Unlimited	27	Cunningham Children's Home	45	CCRPC - Early Childhood Education Program	62	PACE, Inc. & ITAC
1	11 Developmental Services Center (DSC)	28	Tom Jones Challenger League	46	Reading Group, The	64	Excel Prep Schools
1	12 Crisis Nursery	29	NAMI of Champaign County	47	The Autism Program at UIUC	9	Urbana Free Library, The
1	13 Place for Children with Autism, The	30	Illinois Respite Coalition	48	CCAMR - Advocacy and Mentoring Resources	99	STAR NET Regions I and III
1	14 Elliott Counseling Group	31	C-U Able	49	Uniting Pride of Champaign County	29	UIUC - Center on Health, Aging, and Disability (CHA
1	15 Promise Healthcare	32	GROW in Illinois	20	CCRPC - Developmental Disabilities Services		
1	16 Rosecrance	33	Epilepsy Advocacy Network	51	City of Champaign Equity and Engagement		
1	17 Quality Med Transport	34	Illinois Epilepsy Project (Blue Tower Solutions)	52	Mass Transit District - Paratransit & C-CARTS		



# 2023 Exhibitor Invite-Registration-Check In List

ВООТН#	NUMBER OF BOOTHS	BOOTH SECTION	POWER NEEDED	EXHIBITOR NAME	CONTACT NAME	EXHIBITOR NUMBER	BOOTH STAFF	DAY OF PHONE #	BOOTH FEE PAID
~	~	Vocational/ Residential/ Recreation Services	O <sub>N</sub>	Stephen's Family YMCA / Larkin's Place	Alyssa Anderson	217-239-2849	Rebecca Kempf, Celina Abdi	847-867-9048	YES
2	~	Vocational/ Residential/ Recreation Services	O <sub>N</sub>	Land of Lincoln Goodwill Industries	Amanda Sandner	217-798-0400	Amanda Sandner, Ursula Loercher	217-821-1591	YES
က		Vocational/ Residential/ Recreation Services	O <sub>N</sub>	Community Choices	Becca Obuchowski	217-621-1090	Becca Obuchowski, Kaitland Walworth	217-766-2220	YES
4	_	Vocational/ Residential/ Recreation Services	9	Champaign-Urbana Special Recreation	Christina Mott	217-819-3980	Cole Alvis, Tristan Elzy	217-220-3885	YES
5		Vocational/ Residential/ Recreation Services	9	LífeLinks	Christina Moutray	217-530-0232	Donovan Billerman, Christina Moutray	217-649-2697	YES
9		Vocational/ Residential/ Recreation Services	O <sub>N</sub>	Equability LLC	Hilary Pham	773-357-5022	Hilary Pham, Diana Pham	773-615-0387	O <sub>N</sub>
7	-	Vocational/ Residential/ Recreation Services	YES	Aspire	Milan Myers	847-731-5704	Milan Myers, Tina Lowry	847-731-5704	O <sub>N</sub>
80	_	Vocational/ Residential/ Recreation Services	O <sub>N</sub>	Division of Rehabilitation Services (DRS)	Miranda Delanty	217-278-3500	Michelle Butsch, Dorie Peyton, Renee Stranberg	217-414-9400	OZ
6	7-	Vocational/ Residential/ Recreation Services	9	Eden Supportive Living	Nikki Drew	217-903-5900	Candace Jones, Shataqua Hill	217-550-6601	YES
10		Vocational/ Residential/ Recreation Services	YES	Envision Unlimited	Susan Stumpf	773-899-6177	Sue Stumpf, David Pufundt	618-531-3352	YES
1	7	Vocational/ Residential/ Recreation Services	O <sub>N</sub>	Developmental Services Center (DSC)	Vickie Tolf	217-356-9176	Heather Levingston, Sarah Perry	217-417-1699	YES
12		Services for Young Children & Youth	9	Crisis Nursery	Alayia Forsyth	217-337-2730	Jen Hesch, Hannah Hensley	217-621-0164	YES
13	_	Services for Young Children & Youth	O N	Place for Children with Autism, The	Carly Lapin	224-218-5365		847-970-0748	YES
41		Health Care/ Equpment	O <sub>N</sub>	Elliott Counseling Group	Roger Dale Coad	217-398-9066	Roger Dale Coad, Lainey Emmons	217-418-7528	ON
15	_	Health Care/ Equpment	<u>0</u>	Promise Healthcare	Julie LaCour	217-403-5481	Julie LaCour, Makayla Unzicker	217-202-5595	YES
16	_	Health Care/ Equpment	9	Rosecrance	Michelle Hibbard	217-356-7576	Michelle Hibbard, Leigh Kelly	217-508-7775	YES
17	_	Health Care/ Equpment	9	Quality Med Transport	Joe Mata	217-607-2468			YES
18	2	Health Care/ Equpment	YES	MedServ Equipment Corporation	Denise Corbin	217-355-7971	Dave Beshoar, Denise Corbin	317-997-7520	ON
19	_	Health Care/ Equpment	<u>Q</u>	Swann Special Care Center	Beverlyn Ellazar	217-356-5164	Beverlyn Ellazar, Luis Tenefrancia	217-607-3897	YES
20	~	Health Care/ Equpment	O <sub>N</sub>	University of Illinois - Audiology & Speech Language Pathology Clinic	Rabel Lohana	217-333-2206	Jennifer Dahman, Sadie Braun	217-417-1510	ON
21	~	Health Care/ Equpment	YES	Amazing Sensory Designs	David Mays	773-501-6796	David Mays, Naima Mays	773-501-6796	ON
22		Health Care/ Equpment	YES	Carle Community Wellness and Faith Community Health Services	Danna Williamson	217-902-3121	Danna Williamson, Gregory Scott	217-621-6653	YES

# 2023 Exhibitor Invite-Registration-Check In List

BOOTH FEE																														
BOC		YES	9	YES	YES	9	YES	YES	YES	YES	YES	9	YES	9	YES	YES	YES	2	8	9	YES	YES	9	YES	YES	YES	YES	YES	YES	
	DAY OF PHONE #	903-718-1132	217-552-9179	217-552-4845 or 217-689-8740	217-898-8218	217-202-8844	217-621-4294	217-819-7270	815-901-4603	217-480-7989	217-352-6989	217-621-5842	708-297-0464	217-369-0566	217-649-7972	217-714-7905	217-355-5252	217-417-8832	217-819-1312	217-766-8807	217-778-9930	217-933-0480	217-722-6098 or k 217-621-0496	217-649-0539	309-532-6321	217-372-5720	217-649-4277	773-910-7223	217-474-7314	
	ВООТН STAFF	Adani Sanchez, Chris Garcia	Carol Timms	Scott Deweese, Charles LeGrand	Sally Denhart, Scott Price	Ally Phillips, Paige Garrison, Kelly Cuevas, Stewart Walker	Jennifer Crites, Tom Grey	Asako Kinase-Leggett, Teklii DeyKoontz	Tamara Foster, Celeste Nava	Meredith Bames, Dianne Husby-Gordon	Kerrie Hacker, Keysa Haley	Kristen Neaville, Brittany Mitchel	Noel King, Richard King	Leslie Hunt, Perez	Melissa Hulette, Sharon Stewart	Samantha McLain, Kyle McLain	Atha Winston, Dianne Husby-Gordon	Kathie Spegal, Lynn Sprout	Julie Duvall, Rich Bolser	Joan Gorsuch, Adam Gorsuch	Jennifer Heinhost, Kelly Russell	Irene Weathersby, Dana Smith	217-722-6098 or Adrienne Shockley, Jeanne Kramer, Becky Frederick 217-621-0496	Mark Niswander, Jolene Drew	Aiden Novinska, Joshua Gavel, Nicole Frydman	Sara Wilham, Angela Yost	April Faulkner, Janel Gomez	Klentoria Lee-Clements	Dean Hull, Lia Hege	
EXHIBITOR	NUMBER	217-352-6533	800-851-3379	217-373-1700	217-621-6991	217-367-3728	217-377-2998	217-419-5345	217-814-0487	630-492-0520	217-352-6989	217-621-5842	708-465-2368	217-531-4796 x809	800-344-4867	810-328-3272	217-355-5252	217-333-6503	217-819-1312	217-766-8807	217-384-3616	217-239-5951	217-244-1395	217-586-5256	217-898-5235	217-328-3313	217-403-8830	217-384-8188	217-819-4646	
	CONTACT NAME	Adani Sanchez	Carol Timms	Christine Bruns	Larry Windingland	Paige Garrison	Tom Grey	Asako Kinase-Leggett	Celeste Nava	Dianne Husby-Gordon	Keysa Haley	Kristen Neaville	Leanne Mull	Leslie Hunt	Melissa Hulette	Samantha McLain	Atha Winston	Kathie Spegal	Julie Duvall	Joan Gorsuch	Jennifer Heinhorst	Irene Weathersby	Anne Hall	Adelle Renzaglia	Aiden Novinska	Angela Yost	April Faulkner	Klentoria Lee-Clements	Dean Hull	
	EXHIBITOR NAME	Champaign County Health Care Consumers	Health Alliance	Pavilion Behavioral Health System, The	AMBUCS, Greater Champaign County	Cunningham Children's Home	-eague	ounty	Illinois Respite Coalition	C-U Able	GROW in Illinois	Epilepsy Advocacy Network	Illinois Epilepsy Project (Blue Tower Solutions)	Ascend Consultation in Health Care		Depression Bipolar Support Alliance Urbana-Champaign	State Senator Paul Faraci	Illinois Radio Reader	utism Network	Social Champaign	Urbana Early Childhood School & CU Early	CCRPC - Early Childhood Education Program		Champaign Community Advocacy and Mentoring Resources (CCAMR)	Uniting Pride of Champaign County A	CCRPC - Developmental Disabilities Services	City of Champaign Equity and Engagement	District - Paratransit &	Thrivent Financial	
OWER	NEEDED	Q Q	Q Q	9	9	9	9	9	Q	ON ON	YES	NO	O <sub>N</sub>	Q.	9	9	9	YES	O <sub>N</sub>	Q Q	O <sub>N</sub>	O <sub>N</sub>	9	YES	9	9	9	9	9	
	NOIL	Health Care/ Equpment	/e	Health Care/ Equpment	Services for Young Children & Youth	D.	ס	L				Self Help/Support	Self Help/Support	Self Help/Support			Advocacy/Legal/ Service	Educational Services Y		Educational Services N	Educational Services N	Educational Services N	Educational Services N	Advocacy/Legal/ Service Y	cy/Legal/	Advocacy/Legal/ Service	Advocacy/Legal/ Service	Advocacy/Legal/ Service	Advocacy/Legal/ Service	Advocacy/Legal/
NUMBER OF	H BOOTHS	23	24	25 1	26 1	1 1	28	_	30 1	-	_	33	34	35 1	36	37 1	39	1 1	-	43	44	45	1 1	1	49	50	1	52 1	53	
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# 2023 Exhibitor Invite-Registration-Check In List

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BOOTH FEE PAID	YES	O <sub>N</sub>	YES	YES	YES	YES	O <sub>N</sub>	9	YES	O <sub>N</sub>	YES
DAY OF PHONE # PAID	217-210-4001	217-685-6427	903-312-7445	773-524-1791	217-991-0034	708-218-1958	224-406-6354	734-353-8038	217-493-5557	815-222-0659	312-848-1337
BOOTH STAFF	Jessica Range	Kila Alexander, Joe Danner	Luke Lee, Nessa Bolen	Maria Hemandez, Ryan Dalton	Maria Nava, Susana	Rocio Perez, Suzanne Aaron	Kerry Lowry, Mary Griffith	Landria Seals Green, Adam Green		Roseann Slaght, Sherial McKinney	Wendy Bartlo, Emma Lachs
EXHIBITOR NUMBER	800-537-2632	217-557-0419	217-344-6298	708-947-9790	217-800-5725	815-464-1832	217-344-5433	248-919-8627	217-367-4057	309-298-1634	217-300-4323
CONTACT NAME	Jessica Range	Joe Danner	Luke Lee	Maria Hernandez	Stephanie Corrales	Rocio Perez	Mary Griffith	Landria Seals Green	Lauren Chambers	Roseann Slaght	Wendy Bartlo
POWER NEEDED EXHIBITOR NAME	Equip for Equality	Illinois Home Care Ombudsman Program	Rape Advocacy, Counseling & Education Services (RACES)	Paralyzed Veterans of America - Vaughan Chapter	Immigrant Services of Champaign-Urbana	Arc of Illinois, The	PACE, Inc. & ITAC	Excel Prep Schools	Urbana Free Library, The	STAR NET Regions I and III	University of Illinois - Center on Health, Aging, and Disability (CHAD)
POWER NEEDED	YES	9	9	YES	Q N	Q <sub>N</sub>	YES	YES	9	ON.	O <sub>N</sub>
BOOTH SECTION	Advocacy/Legal/ Service	Advocacy/Legal/ Service	Advocacy/Legal/ Service	Advocacy/Legal/ Service	Advocacy/Legal/ Service	Advocacy/Legal/ Service	Advocacy/Legal/ 2 Service	1 Educational Services	1 Educational Services	1 Educational Services	2 Educational Services NO
NUMBER OF # BOOTHS	56 1	1 1	58	59 1	1	61 1	62 2	1	65 1	66 1	67 2
# НТООВ										_	

### CCDDB Liaison Choices 2023

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CU Autism Network (Quarterly, TBD)				
:CRPC/Head Start (1st Wed., 4 pm)				
community Choices				
SC (4th Thurs., 5:30 pm)				
ACE (4th Thurs., 7 pm)				
Expo Committees (various)				

### DRAFT CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD (CCDDB) GUIDELINES FOR BOARD-TO-BOARD PARTICIPATION

CCDDB members may serve as liaisons to funded agencies and community collaborations, to further educate the Board of organizations' goals, accomplishments, and problems. Contact through liaisons is one way of fostering positive relationships with organizations. The following guidelines are meant to clarify the CCDDB member's responsibility and expectations while acting as a liaison to contracting agencies:

- 1. The liaison should attend an orientation to the agency. The session should include the agency's mission, goals, and programs as well as the ways in which CCDDB funds are used by the agency. Attendance at board meetings is encouraged as the liaison's schedule permits. All liaison participation is optional.
- 2. CCDDB members are not members of the provider agency board. We neither vote nor perform functions typically associated with members of the agency's board.
- 3. You may expect to be notified of all meetings and to receive board packets and any appropriate written information given to the provider agency's board members in preparation for their board meetings.
- 4. Questions may be answered about CCDDB processes as appropriate, but no commitments about CCDDB policy or action should be made. Opinions on issues may be given but be clear that it is your individual opinion and not the official position of the CCDDB.
- 5. Multiple CCDDB members may share a liaison assignment, each informing the agency when they will attend an agency board meeting and taking care to comply with Open Meetings Act (OMA).
- 6. Information received during the provider agency's board meeting that is of special interest or concern may be reported back to the CCDDB.
- 7. It is appropriate to ask questions and seek additional information while attending an agency's board meeting.
- 8. Honor any confidentiality requirements associated with board assignments, i.e. proprietary information learned while attending an agency board meeting.
- 9. Avoid any possible conflict of interest situations related to your board-to-board assignment. Questions about potential conflict of interest situations should be directed to the CCDDB executive director. Legal opinions will be sought through Champaign County State's Attorney's Office or the Board's independent legal counsel.