

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

Champaign County Mental Health Board (CCMHB)

TUESDAY, OCTOBER 17, 2012

Brookens Administrative Building Lyle Shields Meeting Room 1776 E. Washington St., Urbana, IL

4:30 p.m.

- 1. Call to Order Dr. Deborah Townsend, President
- 2. Roll Call
- 3. Citizen Input
- 4. CCDDB Information
- 5. Approval of CCMHB Minutes
 - A. 9/19/12 Board meeting* Minutes are included in the packet. Action is requested.
- 6. President's Comments
- 7. Executive Director's Comments
- 8. Staff Reports
- 9. Board to Board Reports
- 10. Agency Information
- 11. Financial Information A. Acceptance of Claims*

BROOKENS ADMINISTRATIVE CENTER • 1776 E. WASHINGTON STREET • URBANA, ILLINOIS 61802

- 12. New Business
 - A. United Cerebral Palsy presentation An overview of the UCP and its presence in Champaign County will be provided by a representative of the organization.
 - B. Psychologists Rx Authority A Decision Memo recommending CCMHB support legislation to grant clinical psychologists authority to prescribe medication is included in the board packet
 - C. FY14 Allocation Criteria Discussion Briefing Memorandum on the FY14 Allocation Criteria is included in the Board packet.
- 13. Old Business
 - A. Draft Three-Year Plan Input A memo soliciting community input on the draft Three-Year Plan is included in the packet. This will also be an opportunity for public comment and/or discussion of plan.
 - B. Disability Resource Expo Observations on the Expo will be shared at the meeting.
- 14. Board Announcements
- 15. Adjournment

*Board action

CHAMPAIGN COUNTY MENTAL HEALTH BOARD SPECIAL BOARD MEETING

Minutes—September 19, 2012

Brookens Administrative Building Lyle Shields Room 1776 E. Washington St. Urbana, IL

4:30 p.m.

MEMBERS PRESENT:	Aillinn Dannave, Bill Gleason, Ernie Gullerud, Deloris Henry, Mary Ann Midden, Mike McClellan, Deborah Townsend, Thom Moore
MEMBERS EXCUSED:	Jan Anderson
STAFF PRESENT:	Peter Tracy, Executive Director; Lynn Canfield, Mark Driscoll, Stephanie Howard-Gallo, Tracy Parsons
STAFF EXCUSED:	Nancy Crawford
OTHERS PRESENT:	Danielle Matthews, Developmental Services Center (DSC); Ryoso Sumikawa, Japan Goodwill Ambassador to Champaign Rotary, Bruce Suardini, Prairie Center Health Systems (PCHS); Juli Kartel, Community Elements (CE); Mary Vita Rosemarino, Mahomet Area Youth Club (MAYC); Kevin Bowersox-Johnson, The UP Center; Katie Sissors, Center for Women in Transition (CWT)

CALL TO ORDER:

Dr. Townsend, Board President, called the meeting to order at 4:30 p.m.

ROLL CALL:

Roll call was taken and a quorum was present.

ADDITIONS TO AGENDA:

None.

CITIZEN INPUT:

Mr. Kevin Bowsersox-Johnson from The UP Center thanked the CCMHB for funding and reported a Youth Coordinator would soon be hired for the agency. He also reported on recent UP Center events and provided the Board a packet with informational materials regarding the agency.

CCDDB INFORMATION:

None.

APPROVAL OF MINUTES:

Minutes from the August 21, 2012 Board meeting were included in the packet for review.

MOTION: Ms. Midden moved to approve the minutes from the August 21, 2012 Board meeting. Ms. Dannave seconded the motion. A vote was taken and the motion passed unanimously.

PRESIDENT'S COMMENTS:

None.

EXECUTIVE DIRECTOR'S COMMENTS:

Mr. Tracy distributed information regarding the proposed legislative RxP Bill.

STAFF REPORTS:

Written staff reports from Mr. Driscoll and Mr. Parsons were included in the Board packet. Ms. Canfield provided a verbal report at the meeting.

BOARD TO BOARD:

None.

AGENCY INFORMATION:

Mr. Bruce Suardini provided Board members with a verbal report on recent happenings with Prairie Center Health Systems.

Ms. Mary Vita Rosemarino provided Board members with an update on the Mahomet Area Youth Club's (MAYC) activities.

FINANCIAL INFORMATION:

Approval of Claims:

A copy of the expenditure approval list was included in the Board packet for review.

MOTION: Dr. Moore moved to accept the claims report as presented in the Board packet. Mr. McClellan seconded the motion. The motion passed unanimously.

NEW BUSINESS:

Mandatory Open Meeting Act Certification:

An overview of required Open Meetings Act certification requirements for Board members was provided in the Board packet. Board members will have until December 31, 2012 to certify.

Draft Three-Year Plan 2013-2015 with FY 2013 Objectives:

A draft of the Three-Year Plan with objectives for 2013 was included in the Board packet for review and comment.

Draft Meeting Schedule and Allocation Timeline:

A draft schedule of CCMHB meeting dates and deadlines for the 2013 allocation process was included in the Board packet for review and comment.

OLD BUSINESS:

FY 2013 Budget Documents:

A copy of the CCMHB, CCDDB, ACCESS Initiative, Quarter Cent, and Drug Court fund budget documents were included in the Board packet for information only.

Disability Resource Expo Update:

A report from Ms. Bressner was included in the Board packet.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The business meeting adjourned at 5:45 p.m.

Respectfully Submitted by:		Approved by:	
Submitted by: _	Stephanie Howard-Gallo CCMHB/CCDDB Staff		Deborah Townsend CCMHB President
Date:		Date:	

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

Mark Driscoll Associate Director for Mental Health & Substance Abuse Services

Staff Report – October 17, 2012 Board Meeting

Summary of Activity

<u>Contract Amendments</u>: At the September meeting, Bruce Suardini reported on developments at Prairie Center. Some were positive such as the opportunities for collaboration with Provena Covenant Medical Center while the significant delay in state payments was cause for concern. Following the meeting Mr. Suardini requested consideration of advance payments on Prairie Center's contracts with the board. The request was reviewed and amendments executed to provide an advance of the November payment with the October payment for each of the Prairie Center contracts.

Two agencies requested extensions on the due date for submission of their audits. Community Elements requested a thirty day extension and the Community Health Improvement Center that manages Frances Nelson Health Center requested a sixty day extension. The requests do not require an amendment and were approved.

<u>Draft Three-Year Plan with Objectives for FY 2013</u>: The draft Three-Year Plan 2013-2015 with Objectives for FY 2013 has been sent out to providers and other interested parties for comment. Feedback received so far has not suggested any changes. One commented on the importance of access to services for consumers residing outside of Champaign and Urbana that was addressed in the draft plan. Written comments are due by October 24th. We have also included the solicitation for input in the Board packet and will provide an opportunity for comments on the plan at meeting under Old Business on the meeting agenda.

<u>Mental Health First Aid</u>: Stephanie Howard-Gallo and I along with about 25 others were able to participate in the two day Mental Health First Aid training at Community Elements. Two Community Elements staff were trained in the curriculum in the fourth quarter of FY 12 under a CCMHB contract. The twelve hour course we attended gives an overview of mental illness and substance use disorders and their symptoms, risk factors, treatment options, community resources, and a five step action plan for helping a person in crisis connect with services. The five step action is referred to as ALGEE: Assess for risk of suicide or harm; Listen non-judgmentally; Give reassurance and information; Encourage appropriate professional help; and, Encourage self-help and other supports. I found the training useful and believe it was well received by the other participants, and expect it to be offered again.

<u>Online System Enhancements and Instructions</u>: In preparing for the FY 13 quarterly report cycle, a couple of enhancements have been made to the online system. Agencies will now be required to report on progress made on implementing their annual Cultural and Linguistic Competence (CLC) plans. Shandra Summerville drafted instructions for the CLC report that were shared with me and Lynn Canfield as well as discussed with agencies at the Mental Health Agencies Council meeting. Based on feedback at the MHAC meeting and from me and Lynn, Ms. Summerville reworked the report format and instructions. However the system had no specific space to submit the CLC report. I worked with our system consultant to enable agencies to upload the CLC report to their quarterly report page. Another change enables agencies to upload financial variance reports as part of the second and fourth quarter financial reports. In the past these would

be requested and submitted by letter. Now the variance letter can be submitted when the financial report forms are done on the system.

The CLC instructions along with information on the systems new capacity to accept the CLC report as an uploaded document was sent to all agencies. The instructions were also posted to the agencies quarterly report page along with updated instructions for completing quarterly program and financial reports. The allocation timeline and meeting schedule included in the CCMHB September board packet were also posted to the agencies pages on the system.

And I finally found time to create hard files for all non-Access related contracts and updated the excel workbooks used to track program utilization data. The files include the approved program applications and other contract related notes and records.

Integrated Behavioral Health Meeting: Another local Regional Integrated Behavioral Health Network meeting was organized by Community Elements. Participants included local funders and behavioral health and primary care providers from Champaign and Vermilion counties. Status update of the Innovations application that Community Elements and Crosspoint Human Services were a party to among many others indicated an announcement from the state was expected very soon. Most of the meeting discussion focused on local efforts to integrate care, the role of 708 boards in a regional integrated system, and identifying best practice models for integrated care. A subcommittee was formed to investigate models for integrated care and will report findings at the next meeting.

<u>Other Activity</u>: I was able to attend the Continuum of Care meeting where plans to establish a monitoring protocol and tool were discussed. The monitoring process and tool are expected to be presented for approval at the January meeting. I expect to be involved in the monitoring process along with other local funders. Other topics included plans for the CU@Home homeless survey, completing the annual review of the Continuums strategic plan, and setting meeting schedule for the next year. At the Local Funders Group meeting, Joan Dixon shared information on Low-profit Limited Liability Corporations (L3Cs), the City of Urbana reported on the social service funding awards made by the city and Cunningham Township and potential shifts in criteria for next year, and United way gave an update on plans for a Family Emergency Shelter.

Lynn Canfield, Associate Director for Developmental Disabilities Staff Report –October 17, 2012

Draft Three Year Plan: Included in the CCDDB packet are a Draft Three Year Plan for fiscal years 2013-2015 with objectives for FY13 and a Briefing Memorandum for background. The Plan has parallels with the new Draft Three Year Plan under consideration by the Champaign County Mental Health Board and results from staff collaboration. To enhance my understanding of the particular experiences of Champaign County residents with I/DDs and their loved ones, I engaged a diverse set of stakeholders. These included a professional guardian, Pre-Admissions Screening agents, parents of children with I/DDs, service providers, and a psychiatrist. For context and to compare efforts underway in other communities, I read the May 2012 report, "Illinois at the Tipping Point: Blueprint for System Redesign Update" and articles on various issues of interest – community and residential integration, sheltered/supported/integrated employment (including cost studies), community inclusion of aging individuals with I/DD, the impact of monitoring by funders, social inclusion and stigma, inclusion of preschoolers with I/DDs in social activities, and recent developments in neuroscience which may have treatment implications. Even though these conversations and readings were intended to move beyond the readily available feedback regarding our systems of care, I saw no indication that we should put off any of the work previously identified as critical. Skepticism reigns. Evidence from research does not point in one direction. Consumers and members of their networks of support have strong ideas of what they want and need. Providers struggle and search for answers, whether in new sources of funding for services of value or new ways to provide desired services with fewer resources.

FY14 Allocation Criteria: Another staff collaboration, the draft CCDDB FY14 Allocation Criteria memorandum updates previous priorities to align more closely with feedback from local stakeholders as well as the Blueprint for System Redesign and continues to acknowledge the importance of state budget impact on consumers, providers, families, and communities. At the November meeting, a draft incorporating input of the Board and interested parties will be presented for approval.

FY12 Program Monitoring Visits and Agency Reports: All FY12 monitoring visits of CCDDB funded programs and of CCMHB funded DD programs have been completed, and related issues, all minor, sufficiently addressed. No follow up visits were required during this cycle. All agency FY12 fourth quarter and performance measure reports were submitted and have been summarized in a brief format included in the CCDDB board packet.

FY13 Agency Contracts: All CCDDB FY13 contracts and one of the CCMHB contracts for DD services have adjusted contract maximums. The contract amendment process is complete, although most agencies (all but Community Choices and Charleston Transitional Facility) required a brief extension from the September 21 deadline in order to complete revisions of financial forms and, for two agencies, program plans. Performance tables for FY13 have been adjusted accordingly. We hope that no further revisions of FY13 contracts will be required during FY13 and that all may now focus on deliverables.

The Mental Health Agencies Council met on September 25. Mark Driscoll talked about the draft allocation criteria memos, three year plans, and first quarter FY13 reports due October 26. Shandra Summerville presented a sample CLCP quarterly report and got feedback from agencies, later used to finalize the instructions document. Announcements: Psychological Services Center has four individual counseling openings for adults with eating disorders; ACCESS started its fourth year October 1 and is preparing for the Think Tank and a Sustainability Committee; the Regional Planning Commission took on Consortium contracts beginning October 1; Crisis Nursery will hold a wine-tasting on October 24.

Other Activity: In addition to the above, much of my time has been spent preparing the Expo Resource Book and planning Expo activities, providing technical support to users of our online application system and troubleshooting with Mark Driscoll and the developer as issues arose, working with agencies on contract revisions for FY13 as well as some for FY12, and in various meetings. On September 25, Mark Driscoll and I attended a meeting of the Local Funders Group at United Way, where we learned about L3C (Low-Profit Limited Liability Corporation) status, Champaign Rotary donations and applications, Urbana's Consolidated Social Service Funding for 2012-2013, and local funders' shared programs, mission, and priorities. I participated in a series of meetings regarding integrated care in Champaign County, responding to the Regional Integrated Behavioral Health Networks Act while maintaining the CCMHB/CCDDB's commitment to the local community. I continue to attend meetings of the <u>Community Response Group</u> and the <u>Metropolitan Intergovernmental Council</u>. The most recent PUNS report on the DHS DDD website contains data not identical to that reported in May. Champaign County detail is included in the board packet and summarized below.

Unmet DD Service Needs in Champaign County: From the DHS Division of Developmental									
Disabilities w	ebsite, PUNS reports sorted for Champaign County, we have noted:								
2/1/11:	194 residents with emergency need; of 269 in crisis, 116 recent or coming HS graduates.								
4/5/11:	198 with emergency need; of 274 in crisis, 120 recent or coming grads.								
5/12/11:	195 with emergency need; of 272 in crisis, 121 are recent or coming grads.								
6/9/11:	194 with emergency need; of 268 in crisis, 120 are recent or coming grads								
10/4/11:	201 with emergency need; of 278 in crisis, 123 are recent or coming grads.								
12/5/11:	196 with emergency need; of 274 in crisis, 122 are recent or coming grads.								
1/9/12:	no change from 12/5/11 report.								
5/7/12:	222 with emergency need; of 289 in crisis, 127 are recent or coming grads.								
6/4/12:	no change from 5/7/12 report.								
9/10/12:	224 with emergency need; of 288 in crisis, 131 are recent or coming grads.								

The majority of existing supports are in Education, Speech and Occupational Therapy, and Transportation. The most desired supports are Transportation, Personal Support, Occupational Therapy, Support for in-center activities, Support to work in community, Speech Therapy, Behavioral Supports, 24 hour Residential, Other Transportation, Respite, Physical Therapy, Intermittent Residential, and Assistive Technology.





Division of Developmental Disabilities

PUNS Data By County and Selection Detail

September 10, 2012

County: Champaign

Reason for PUNS or PUNS Update	
New	157
Annual Update	91
Change of category (Emergency, Planning, or Critical)	16
Change of service needs (more or less) - unchanged category (Emergency, Planning, or Critical)	4
Person is fully served or is not requesting any supports within the next five (5) years	145
Moved to another state, close PUNS	5
Person withdraws, close PUNS	16
Deceased	2
Other, supports still needed	2
Other, close PUNS	30
EMERGENCY NEED(Person needs in-home or day supports immediately)	
1. Individual needs immediate support to stay in their own home/family home (short term - 90 days or less);	8
e.g., hospitalization of care giver or temporary illness of an individual living in their own home.	
2. Individual needs immediate support to stay in their own home/family home or maintain their employment	20
situation (long term); e.g., due to the person's serious health or behavioral issues.	
3. Care giver needs immediate support to keep their family member at home (short term - 90 days or less); e.g., family member recuperating from illness and needs short term enhanced supports.	4
4. Care giver needs immediate support to keep their family member at home (long term); e.g., care giver is	10
permanently disabled or is terminally ill and needs long term enhanced supports immediately to keep their	
family member at home.	
EMERGENCY NEED(Person needs out-of-home supports immediately)	
1. Care giver is unable or unwilling to continue providing care (e.g., person has been abandoned).	29
2. Death of the care giver with no other supports available.	4
3. Person has been committed by the court or is at risk of incarceration.	3
4. Person is living in a setting where there is suspicion of abuse or neglect.	4
5. Person is in an exceedingly expensive or inappropriate placement and immediately needs a new place to live	7
(for example, an acute care hospital, a mental health placement, a homeless shelter, etc.).	
6. Other crisis, Specify:	135
CRITICAL NEED(Person needs supports within one year)	
1. Individual or care giver will need support within the next year in order for the individual to continue living in	29
their current situation.	_
2. Person has a care giver (age 60+) and will need supports within the next year.	7
3. Person has an ill care giver who will be unable to continue providing care within the next year.	3
4. Person has behavior(s) that warrant additional supports to live in their own home or family home.	25
5. Individual personal care needs cannot be met by current care givers or the person's health has deteriorated.	5
6. There has been a death or other family crisis, requiring additional supports.	3
7. Person has a care giver who would be unable to work if services are not provided.	19
8. Person or care giver needs an alternative living arrangement.	10
9. Person has graduated or left school in the past 10 years, or will be graduating in the next 3 years.	131
10. Person is living in an inappropriate place, awaiting a proper place (can manage for the short term; e.g.,	2
persons aging out of children's residential services). 11. Person moved from another state where they were receiving residential, day and/or in-home supports.	8
12. The state has plans to assist the person in moving within the next year (from a state-operated or private	1
Intermediate Care Facility for People with Developmental Disabilites, nursing home or state hospital).	1
13. Person is losing eligibility for Department of Children and Family Services supports in the next year.	5
14. Person is losing eligibility for Early Periodic Screening, Diagnosis and Treatment supports in the next year.	3
15. Person is losing eligibility for Intermediate Care Facility for People with Developmental Disabilities supports	1
in the next year.	•
16. Person is losing eligibility for Medically Fragile/Technology Dependant Children's Waiver supports in the	1
next year.	
17. Person is residing in an out-of-home residential setting and is losing funding from the public school system.	1



Division of Developmental Disabilities

PUNS Data By County and Selection Detail

Illinois Department of Human Services Septe	ember 10, 2012
 Person wants to leave current setting within the next year. Person needs services within the next year for some other reason, specify: 	5 29
PLANNING FOR NEED(Person's needs for service is more than a year away but less than 5 years	away, or the
care giver is older than 60 years) 1. Person is not currently in need of services, but will need service if something happens to the care give	er. 71
2. Person lives in a large setting, and person/family has expressed a desire to move (or the state plans to the person).	
3. Person is disatisfied with current residential services and wishes to move to a different residential setti	ing. 1
4. Person wishes to move to a different geographic location in Illinois.	2
5. Person currently lives in out-of-home residential setting and wishes to live in own home.	rents 2
6. Person currently lives in out-of-home residential setting and wishes to return to parents' home and par concur.	ents z
8. Person or care giver needs increased supports.	48
9. Person is losing eligibility for Department of Children and Family Services supports within 1-5 years.	2
14. Other, Explain:	16
EXISTING SUPPORTS AND SERVICES	
Respite Supports (24 Hour)	20
Respite Supports (<24 hour)	21
Behavioral Supports (includes behavioral intervention, therapy and counseling) Physical Therapy	95 66
Occupational Therapy	118
Speech Therapy	147
Education	188
Assistive Technology	35
Homemaker/Chore Services	3
Adaptions to Home or Vehicle Research Support under a Home Read Breaston Which Could Be Europed By Developmental Disabilities	5 s. 6
Personal Support under a Home-Based Program, Which Could Be Funded By Developmental Disabilities Division of Rehabilitation Services or Department on Aging (can include habilitation, personal care, respiretirement supports, budgeting, etc.)	,
Medical Equipment/Supplies	12
Nursing Services in the Home, Provided Intermittently	3
Other Individual Supports	20
TRANPORTATION	
Transportation (include trip/mileage reimbursement)	125
Other Transportation Service	53
Senior Adult Day Services Developmental Training	2 72
"Regular Work"/Sheltered Employment	72
Supported Employment	41
Vocational and Educational Programs Funded By the Division of Rehabilitation Services	13
Other Day Supports (e.g. volunteering, community experience)	10
RESIDENTIAL SUPPORTS	
Community Integrated Living Arrangement (CILA)/Family	4
Community Integrated Living Arrangement (CILA)/Intermittent	4
Community Integrated Living Arrangement (CILA)/Host Family	1
Community Integrated Living Arrangement (CILA)/24 Hour	32
Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 16 or Fewer People Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 17 or More People	8 1
Skilled Nursing Facility/Pediatrics (SNF/PED)	3
Supported Living Arrangement	2
Shelter Care/Board Home	1
Children's Residential Services	6



Division of Developmental Disabilities

PUNS Data By County and Selection Detail

Illinois Department of Human Services	September 10, 2012
Child Care Institutions (Including Residential Schools)	5
Other Residential Support (including homeless shelters)	8
SUPPORTS NEEDED	
Personal Support (includes habilitation, personal care and intermittent respite services)	234
Respite Supports (24 hours or greater)	86
Behavioral Supports (includes behavioral intervention, therapy and counseling)	142
Physical Therapy	85
Occupational Therapy	169
Speech Therapy	145
Assistive Technology	73
Adaptations to Home or Vehicle	30
Nursing Services in the Home, Provided Intermittently	7
Other Individual Supports	45
TRANSPORTATION NEEDED	
Transportation (include trip/mileage reimbursement)	236
Other Transportation Service	99
VOCATIONAL OR OTHER STRUCTURED ACTIVITIES	
Support to work at home (e.g., self employment or earning at home)	6
Support to work in the community	164
Support to engage in work/activities in a disability setting	165
RESIDENTIAL SUPPORTS NEEDED	
Out-of-home residential services with less than 24-hour supports	82
Out-of-home residential services with 24-hour supports	120

EXPENDITURE APPROVAL LIST

10/05/12 PAGE 1 VENDOR VENDOR TRN B TR TRANS PO NO CHECK CHECK ACCOUNT NUMBER ACCOUNT DESCRIPTION ITEM DESCRIPTION EXPENDITURE NAME DTE N CD NUMBER NO DATE AMOUNT *** FUND NO. 090 MENTAL HEALTH *** DEPT NO. 053 MENTAL HEALTH BOARD 25 CHAMPAIGN COUNTY TREASURER RENT-GENERAL CORP 10/03/12 02 VR 53- 384 475219 10/05/12 090-053-533.50-00 FACILITY/OFFICE RENTALS OCT OFFICE RENT 2,066.52 VENDOR TOTAL 2,066.52 * CHAMPAIGN COUNTY TREASURER HEALTH INSUR FND 620 9/26/12 03 VR 620- 147 474884 9/28/12 090-053-513.06-00 EMPLOYEE HEALTH/LIFE INS SEP HI, LI, & HRA 2,817.09 VENDOR TOTAL 2,817.09 * CHAMPAIGN COUNTY TREASURER I.M.R.F. FUND 088 9/26/12 03 VR 88- 70 474888 9/28/12 090-053-513.02-00 IMRF - EMPLOYER COST IMRF 9/7 P/R 1,282.80 VENDOR TOTAL 1,282.80 * 161 CHAMPAIGN COUNTY TREASURER REG PLAN COMM FND075 10/03/12 02 VR 53- 372 475226 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT COURT DIVERSION 2,167.00 VENDOR TOTAL 2,167.00 * CHAMPAIGN COUNTY TREASURER SELF-FUND INS FND476 9/17/12 01 VR 119- 51 474670 9/21/12 090-053-513.04-00 WORKERS' COMPENSATION INSWK COMP 8/10,24,31P 133.20 VENDOR TOTAL 133.20 * 179 CHAMPAIGN COUNTY TREASURER CHLD ADVC CTR FND679 10/03/12 02 VR 53- 371 475228 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT CHILD ADVOCACY 3,090.00 VENDOR TOTAL 3,090.00 * CHAMPAIGN COUNTY TREASURER SOCIAL SECUR FUND188 9/26/12 03 VR 188- 99 474895 9/28/12 090-053-513.01-00 SOCIAL SECURITY-EMPLOYER FICA 9/7 P/R 974.52 VENDOR TOTAL 974.52 *

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EXPENDITURE APPROVAL LIST

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NO

EXPENDITURE APPROVAL LIST

10/05/12PAGE 3 EXPENDITURE VENDOR VENDOR TRN B TR TRANS PO NO CHECK CHECK ACCOUNT NUMBER ACCOUNT DESCRIPTION ITEM DESCRIPTION NAME DTE N CD NO NUMBER DATE AMOUNT *** FUND NO. 090 MENTAL HEALTH 4,000.00 10/03/12 02 VR 53- 364 475264 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT TIMES SCREENING 10/03/12 02 VR 53- 364 475264 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT ERLY CHOOD MH 9,542.00 10/03/12 02 VR 53- 364 475264 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT PLL FRONT END 23,629.00 VENDOR TOTAL 73,095.00 * 18230 COMMUNITY SERVICE CENTER OF NORTHERN CHAMPAIGN COUNTY 10/03/12 02 VR 53- 365 475265 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT 1ST CALL 4 HELP 6,873.00 VENDOR TOTAL 6,873.00 * 19346 CRISIS NURSERY 10/03/12 02 VR 53- 374 5,833.00 475268 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT BEYOND BLUE VENDOR TOTAL 5,833.00 * 22300 DEVELOPMENTAL SERVICES CENTER OF CHAMPAIGN COUNTY INC 10/03/12 02 VR 53- 366 475274 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT DT/EMPLOY 25,391.00 475274 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT FAM DEVELOP CTR 18,225.00 10/03/12 02 VR 53- 366 VENDOR TOTAL 43,616.00 * 24215 EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR 10/03/12 02 VR 53- 375 475278 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT FAMILY SUPPORT 1,083.00 VENDOR TOTAL 1,083.00 * 26000 FAMILY SERVICE OF CHAMPAIGN COUNTY GRANTS OCT 1ST CALL 4 HELP 10/03/12 02 VR 53- 367 475281 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS 5,045.00 10/03/12 02 VR 53- 367 475281 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT SELF HELP CENTE 2,494.00 10/03/12 02 VR 53- 367 475281 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT SENIOR COUNSELN 11,861.00 OCT FAMILY COUNSELN 4,167.00 10/03/12 02 VR 53- 367 475281 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS 23,567.00 * VENDOR TOTAL 27922 FRANCES NELSON HEALTH CENTER MENTAL HLTH GRANTS

OCT MENTAL HLTH CNS 12,398.00 10/03/12 02 VR 53- 376 475285 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS

VENDOR TOTAL 12,398.00 *

EXPENDITURE APPROVAL LIST

					10/05/12		PAGE 4	
	VENDOR TRN B TR NAME DTE N CD	TRANS NO	PO NO CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND	NO. 090 MENTAL	HEALTH						
44570	MAHOMET AREA Y	OUTH CLUB		601	EAST FRANKLIN			
	10/03/12 02 VR	53- 377	475315	10/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	OCT UNIVERSAL SCREE VENDOR TOTAL	1,483.00 1,483.00 *
45436	MARTIN GRAPHIC	S & PRINT	ING SERVICES	INC				
	9/20/12 02 VR 10/03/12 02 VR				090-053-533.89-00 090-053-533.89-00		INV 89133 9/11 INV 89506 9/25 VENDOR TOTAL	15.00 770.00 785.00 *
56750	PRAIRIE CENTER	HEALTH S	YSTEMS	GRAN	TS			
	10/03/12 02 VR 10/03/12 02 VR	53- 368 53- 368 53- 368 53- 368 53- 368 53- 368 53- 368 53- 368 53- 368 53- 368 53- 368 53- 368	475331 475331 475331 475331 475331 475331 475331 475331 475331	10/05/12 10/05/12 10/05/12 10/05/12 10/05/12 10/05/12 10/05/12 10/05/12	090-053-533.92-00 090-053-533.92-00 090-053-533.92-00 090-053-533.92-00 090-053-533.92-00 090-053-533.92-00 090-053-533.92-00 090-053-533.92-00 090-053-533.92-00	CONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTSCONTRIBUTIONS&GRANTS	OCT DRUG COURT NOV DRUG COURT OCT MH COURT NOV MH COURT OCT PREVENTION NOV PREVENTION OCT PLL EXT CARE NOV PLL EXT CARE OCT YOUTH SVCS NOV YOUTH SVCS VENDOR TOTAL	14,438.00 14,438.00 833.00 833.00 4,713.00 23,629.00 23,629.00 8,750.00 8,750.00 104,726.00 *
59434	RAPE, ADVOCACY 10/03/12 02 VR	•			090-053-533.92-00	CONTRIBUTIONS & GRANTS	OCT RACE COUNSELING VENDOR TOTAL	1,550.00 1,550.00 *
62674	SAVANNAH FAMIL 10/03/12 02 VR		•	10/05/12	090-053-533.07-00	PROFESSIONAL SERVICES	OCT CTR OF EXCEL Q2 VENDOR TOTAL	32,000.00 32,000.00 *

67290 SOAR PROGRAMS

10/03/12 02 VR 53- 379 475343 10/05/12 090-053-533.92-00 CONTRIBUTIONS & GRANTS OCT UNIVERSAL SCREE 2,317.00 VENDOR TOTAL 2,317.00 *

EXPENDITURE APPROVAL LIST

								10/05/12		PAGE 5	
VENDOR NO	VENDOR NAME		B TR N CD		TRANS NO	PO NO CHECK NUMBER		ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUN	D NO. 0	90 I	MENTAL	HEA	LTH						
67867	SPOC	LLC					D/B/2	A CHAMPAIGN TEL			
	10/03	/12 (03 VR	28-	159	475344	10/05/12	090-053-533.33-00	TELEPHONE SERVICE	INV 1089801 9/12 VENDOR TOTAL	30.98 30.98 *
69700	STOC	KS, I	INC								
	10/03						•		EQUIPMENT LESS THAN \$100		419.00
	10/03	/12 (02 VR	53-	355	475348	10/05/12	090-053-522.44-00	EQUIPMENT LESS THAN \$100	00INV 89019 9/20 VENDOR TOTAL	745.00 1,164.00 *
71626	TALK	s you	JTH DE	VELO	PMENT	INC NFP	TALK	S MENTORING			
	10/03	/12	02 VR	53-	381	475350	10/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	OCT MEN OF WISDOM VENDOR TOTAL	5,519.00 5,519.00 *
76921	UNIV	ERSI	FY OF	ILLI	NOIS -	PSYCHOLOGICA	L SERVI	ICES			
	10/03	/12 (02 VR	53-	378	475357	10/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	OCT RESTRATV CIRCLE	3,071.00
	10/03	/12 (02 VR	53-	378	475357	10/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	OCT GIRLS ADVOCACY VENDOR TOTAL	2,917.00 5,988.00 *
77280	UP C	ENTEI	R OF C	HAMP	AIGN C	OUNTY	SUITI	E 102			
	10/03	/12 ()2 VR	53-	382	475358	10/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	OCT UP CENTER CNSLN VENDOR TOTAL	1,217.00 1,217.00 *
77295	UPCL	OSE (GRAPHI	cs, :	INC.						
	10/03	/12 ()2 VR	53-	361	475359	10/05/12	090-053-533.89-00	PUBLIC RELATIONS	INV 93215 9/4 VENDOR TOTAL	78.52 78.52 *
78120	URBAI	NA NI	EIGHBO	RHOO	D CONN	ECTION CENTE	ર				
	10/03	/12 (02 VR	53-	380	475361	10/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	OCT UNIVERSAL SCREE VENDOR TOTAL	1,650.00 1,650.00 *

78550 VERIZON WIRELESS-MENTAL HEALTH BOARD AC 386356887-00001

10/03/12 02 VR 53- 387 475364 10/05/12 090-053-533.29-00 COMPUTER/INF TCH SERVICESAC 386356887-01 9/2 89.04

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	VENDOR TRN B TR NAME DTE N CD	TRANS NO	PO NO CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUNE	NO. 090 MENTAL	HEALTH						
	10/03/12 02 VR	53- 387	475364	10/05/12	090-053-533.33-00	TELEPHONE SERVICE	AC 386356887-01 9/2 VENDOR TOTAL	108.07 197.11 *
78873	VISA CARDMEMBE	R SERVICES	3					
,00,5	10/03/12 02 VR			10/05/12	090-053-533.89-00	PUBLIC RELATIONS	7790 ULTA 9/7	48.36-
	10/03/12 02 VR				090-053-533.89-00		7790 WALMART 9/10	1.98-
	10/03/12 02 VR				090-053-522.02-00		7790 STAPLES 8/24	36.63
	10/03/12 02 VR				090-053-533.89-00		7790 SCHNUCKS 8/27	24.12
	10/03/12 02 VR				090-053-533.89-00		7790 AMAZON 8/28-29	84.89
	10/03/12 02 VR		475371	10/05/12	090-053-533.89-00	PUBLIC RELATIONS	7790 ULTA 8/31	72.69
	10/03/12 02 VR	53- 388	475371	10/05/12	090-053-533.89-00	PUBLIC RELATIONS	7790 FARM FLEET 9/5	8.77
	10/03/12 02 VR	53- 388	475371	10/05/12	090-053-533.89-00	PUBLIC RELATIONS	7790 TJ MAXX 9/5	50.91
	10/03/12 02 VR	53- 388	475371	10/05/12	090-053-533.89-00	PUBLIC RELATIONS	7790 BODY SHOP 9/7	80.00
	10/03/12 02 VR	53- 388	475371	10/05/12	090-053-533.89-00	PUBLIC RELATIONS	7790 WALMART 9/7	25.60
	10/03/12 02 VR	53- 388	475371	10/05/12	090-053-533.89-00	PUBLIC RELATIONS	7790 ART MART 9/7	27.04
	10/03/12 02 VR	53- 388	475371	10/05/12	090-053-522.04-00	COPIER SUPPLIES	7790 STAPLES 9/13	209.94
	10/03/12 02 VR	53- 388	475371	10/05/12	090-053-522.02-00	OFFICE SUPPLIES	7790 STAPLES 9/13	597.52
	10/03/12 02 VR	53- 388	475371	10/05/12	090-053-522.02-00	OFFICE SUPPLIES	7790 STAPLES 9/18	414.95
	10/03/12 02 VR	53- 388	475371	10/05/12	090-053-533.95-00	CONFERENCES & TRAINING	7790 EINSTEIN'S 9/1	134.85
	10/03/12 02 VR	53- 388	475371	10/05/12	090-053-533.95-00	CONFERENCES & TRAINING	7790 EINSTEIN'S 8/2	16.13
							VENDOR TOTAL	1,733.70 *
602880	BRESSNER, BARB	ARA J.						
	10/03/12 02 VR		475389	10/05/12	090-053-533.07-00	PROFESSIONAL SERVICES	OCT COUNSULTING FEE	2,625.00
	,,			, ,			VENDOR TOTAL	2,625.00 *
609500	CRAWFORD, NANC		475000		AL HEALTH BOARD		100 MTLE 7/0 0/00	72 02
	10/03/12 02 VR					JOB-REQUIRED TRAVEL EXP		73.82
	10/03/12 02 VR				090-053-533.89-00		REIM EXPO EXPEND 9/	11.97
	10/03/12 02 VR					DUES AND LICENSES	SAMSCLUB MMBRSHP9/2	80.00 238.51
	10/03/12 02 VR	53- 386	4/5392	10/05/12	090-053-533.89-00	FODDIC KEDALIONS	REFESHMENT EXPO 9/2 VENDOR TOTAL	404.30 *

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VENDOR VENDOR TRN B TR TRANS NO NAME DTE N CD NO	PO NO CHECK CHECK ACCOUNT NUMBER NUMBER DATE	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 090 MENTAL HEALTH				
611802 DRISCOLL, MARK	MENTAL HEALTH			
10/03/12 02 VR 53- 357	475396 10/05/12 090-053-533.12-0	0 JOB-REQUIRED TRAVEL EXP	157 MILE 8/2-9/25 VENDOR TOTAL	87.14 87.14 *
619548 HOWARD-GALLO, STEPHANIE	MENTAL HEALTH BD			
9/10/12 03 VR 53- 351	474534 9/13/12 090-053-533.12-0	0 JOB-REQUIRED TRAVEL EXP	65 MILE 7/2-8/27	36.08
			VENDOR TOTAL	36.08 *
644010 TRACY, PETER	MENTAL HEALTH BOARD			
10/03/12 02 VR 53- 358	475418 10/05/12 090-053-533.12-0	0 JOB-REQUIRED TRAVEL EXP	22 MILE 8/20-9/6	12.21
10/03/12 02 VR 53- 358	475418 10/05/12 090-053-533.95-0	0 CONFERENCES & TRAINING	MEETING MEAL 7/18	9.16
10/03/12 02 VR 53- 358	475418 10/05/12 090-053-533.95-0	0 CONFERENCES & TRAINING	106 MILE 9/11-13	58.83
10/03/12 02 VR 53- 358	475418 10/05/12 090-053-533.95-0	0 CONFERENCES & TRAINING	MEALS 9/12 DECATUR	46.00
10/03/12 02 VR 53- 358	475418 10/05/12 090-053-533.95-0	0 CONFERENCES & TRAINING	LODGE 9/11-13 DECAT	156.80
			VENDOR TOTAL	283.00 *
	MENTZ	L HEALTH BOARD	DEPARTMENT TOTAL	373,820.76 *
	MENTA	L HEALTH	FUND TOTAL	373,820.76 *

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VENDOR VENDOR TRN B TR TRANS PO NO CHECK CHECK ACCOUNT NUMBER ACCOUNT DESCRIPTION ITEM DESCRIPTION EXPENDITURE NO NAME DTE N CD NO NUMBER DATE AMOUNT

*** FUND NO. 106 PUBL SAFETY SALES TAX FND

*** DEPT NO. 237 DELINQ PREVENTION GRANTS

 161
 CHAMPAIGN COUNTY TREASURER
 REG PLAN COMM FND075

 10/03/12 02 VR 106- 32
 475226 10/05/12 106-237-533.92-00 CONTRIBUTIONS & GRANTS OCT COURT DIVERSION 13,417.00

- VENDOR TOTAL 13,417.00 *
- DELINQ PREVENTION GRANTS DEPARTMENT TOTAL 13,417.00 *
- PUBL SAFETY SALES TAX FND FUND TOTAL 13,417.00 *

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	YENDOR TRN B TR TRANS PO I NAME DTE N CD NO	NO CHECK NUMBER	CHECK DATE	ACCOUNT	NUMBER	ACCOUNT	DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND	NO. 641 ACCESS INITIATIVE GR	ANT							
*** DEPT	NO. 053 MENTAL HEALTH BOARD								
25	CHAMPAIGN COUNTY TREASURER		RENT	-GENERAL	CORP				
	10/03/12 02 VR 641- 162	475219	10/05/12	641-053-	533.50-00	FACILITY	Y/OFFICE RENTALS	OCT OFFICE RENT VENDOR TOTAL	1,645.62 1,645.62 *
41	CHAMPAIGN COUNTY TREASURER		HEAL'	TH INSUR	FND 620				
	9/26/12 03 VR 620- 147	474884	9/28/12	641-053-	513.06-00	EMPLOYEI	E HEALTH/LIFE INS	SEP HI, LI, & HRA VENDOR TOTAL	1,696.80 1,696.80 *
88	CHAMPAIGN COUNTY TREASURER		I.M.	R.F. FUND	088				
	9/26/12 03 VR 88- 70	474888	9/28/12	641-053-	513.02-00	IMRF - H	EMPLOYER COST	IMRF 9/7 P/R VENDOR TOTAL	633.48 633.48 *
90	CHAMPAIGN COUNTY TREASURER		MENT	HLTH BD	FND 090				
	9/26/12 01 VR 641- 158	474889	9/28/12	641-053-	533.89-00	PUBLIC H	RELATIONS	SPONSOR EXPO 10/13 VENDOR TOTAL	500.00 500.00 *
176	CHAMPAIGN COUNTY TREASURER		SELF	-FUND INS	FND476				
	9/17/12 01 VR 119- 51	474670	9/21/12	641-053-	513.04-00	WORKERS	COMPENSATION IN	SWK COMP 8/10,24,31P VENDOR TOTAL	65.20 65.20 *
188	CHAMPAIGN COUNTY TREASURER		SOCI	AL SECUR	FUND188				
	9/26/12 03 VR 188- 99	474895	9/28/12	641-053-	513.01-00	SOCIAL S	SECURITY-EMPLOYER	FICA 9/7 P/R VENDOR TOTAL	481.24 481.24 *
572	ABSOPURE WATER								
572	9/20/12 02 VR 641- 153	474674	9/21/12	641-053-	533.51-00	EQUIPMEN	NT RENTALS	927471 53645789 8/3 VENDOR TOTAL	9.00 9.00 *
7982	BEST INTEREST OF CHILDREN, II	NC.							
	9/26/12 01 VR 641- 159	474917	9/28/12	641-053-	533.92-00	CONTRIBU	JTIONS & GRANTS	64113110 SYSTM SRV	43,000.00

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VENDOR VENDOR TRN B TR TRANS PO NO CHECK CHECK ACCOUNT NUMBER ACCOUNT DESCRIPTION ITEM DESCR NO NAME DTE N CD NO NUMBER DATE	RIPTION EXPENDITURE AMOUNT
*** FUND NO. 641 ACCESS INITIATIVE GRANT	
9/26/12 01 VR 641- 159 474917 9/28/12 641-053-533.92-00 CONTRIBUTIONS & GRANTS 64113111 PF	RNT YTH S 39,125.00
3/26/12 01 VR 641- 159 474917 $3/26/12$ 641-053-533.92-00 CONTRIBUTIONS & GRANTS 64113111 Pr 10/03/12 02 VR 641- 160 475241 10/05/12 641-053-533.92-00 CONTRIBUTIONS & GRANTS OCT YOUTH N	•
10/03/12 02 VR 041- 100 4/5241 10/05/12 041-055-555.92-00 CONTRIBUTIONS & GRANTS OCT TOUR R VENDOR TO	•
VENDOR IC	JIRE J1,292.00
18053 COMCAST CABLE - ACCESS INITIATIVE ACCT AC#8771403010217756	
9/10/12 03 VR 641- 152 474414 9/13/12 641-053-533.29-00 COMPUTER/INF TCH SERVICES87714030102	217756 82 81.90
VENDOR TO	OTAL 81.90 *
18209 COMMUNITY ELEMENTS	
9/20/12 02 VR 641- 150 474711 9/21/12 641-053-533.18-00 NON-EMPLOYEE TRAINING, SEMREG 8 MH 15	
9/20/12 02 VR 641- 150 474711 9/21/12 641-053-533.95-00 CONFERENCES & TRAINING REG SUMRVL	9/20-21 85.00
10/03/12 02 VR 641- 161 475264 10/05/12 641-053-533.92-00 CONTRIBUTIONS & GRANTS OCT AI SCHO	•
VENDOR TO	OTAL 9,598.00 *
22730 DON MOYER BOYS & GIRLS CLUB	
9/26/12 01 VR 641- 148 474955 9/28/12 641-053-533.92-00 CONTRIBUTIONS & GRANTS SEP ADMN TH 9/26/12 01 VR 641- 148 474955 9/28/12 641-053-533.92-00 CONTRIBUTIONS & GRANTS SEP SUPRT S	
9/26/12 01 VR 641- 148 474955 $9/28/12$ 641-053-533.92-00 CONTRIBUTIONS & GRANTS SEP SOPRI S 9/26/12 01 VR 641- 155 474955 $9/28/12$ 641-053-533.92-00 CONTRIBUTIONS & GRANTS A64113112 F	•
9/26/12 01 VR 641- 155 474955 $9/28/12$ 641-053-533.92-00 CONTRIBUTIONS & GRANTS A64113112 1 9/26/12 01 VR 641- 155 474955 $9/28/12$ 641-053-533.92-00 CONTRIBUTIONS & GRANTS A64113113 5	•
VENDOR TO	
26724 FIREOWL CONSULTING SERVICES ATTN: E. PERRACHIONE	
9/10/12 03 VR 641- 147 474437 9/13/12 641-053-533.07-00 PROFESSIONAL SERVICES INV AI 8/12	2 8/29 630.00
VENDOR TO	OTAL 630.00 *
VENDOR IC	
VENDOR	
58118 QUILL CORPORATION	
	3 8/21 171.60
58118 QUILL CORPORATION	•
58118 QUILL CORPORATION 9/20/12 02 VR 641- 151 474772 9/21/12 641-053-522.02-00 OFFICE SUPPLIES INV 5230743 VENDOR TO	,
58118 QUILL CORPORATION 9/20/12 02 VR 641- 151 474772 9/21/12 641-053-522.02-00 OFFICE SUPPLIES INV 5230743	DTAL 171.60 *

VENDOR TOTAL 29.92 *

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-	VENDOR TRN B TR VAME DTE N CD	TRANS NO	PO NO CHECK NUMBER	CHECK DATE	ACCOUNT NUM	IBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND	NO. 641 ACCESS INI	TIATIV	E GRANT						
78552	VERIZON WIRELESS-M	NTL HL'	TH BD/ACCESS	INT AC 28	36369166-000	01			
	9/26/12 01 VR 641-	157	475053	9/28/12	641-053-533	.29-00	COMPUTER/INF TCH SERVICE	SAC 28636916601 9/2	92.16
	9/26/12 01 VR 641-	157	475053	9/28/12	641-053-533	.33-00	TELEPHONE SERVICE	AC 28636916601 9/2	567.91
								VENDOR TOTAL	660.07 *
78873	VISA CARDMEMBER SE	RVICES							
	9/26/12 01 VR 641-	156	475063	9/28/12	641-053-533	.29-00	COMPUTER/INF TCH SERVICE	S1939 CONCENTRIC 8/1	11.95
	9/26/12 01 VR 641-	156	475063	9/28/12	641-053-533	.29-00	COMPUTER/INF TCH SERVICE	S1939 GO DADDY 8/27	49.99
				, ,				VENDOR TOTAL	61.94 *
81610	XEROX CORPORATION								
	9/20/12 02 VR 641-	154	474821	9/21/12	641-053-533	.85-00	PHOTOCOPY SERVICES	INV 063579648 9/1	511.49
								VENDOR TOTAL	511.49 *
635152	PARSONS, TRACY			ACCES	SS INITIATIV	Έ			
	9/20/12 02 VR 641-	149	474865	9/21/12	641-053-533	.12-00	JOB-REQUIRED TRAVEL EXP	228 MILES 6/4-26	126.54
	9/20/12 02 VR 641-	149	474865	9/21/12	641-053-533	.95-00	CONFERENCES & TRAINING	577 MILES 6/4-26 SP	320.24
	9/20/12 02 VR 641-	149	474865	9/21/12	641-053-533	.95-00	CONFERENCES & TRAINING	MEALS 6/20-26 SP,NP	43.50
	9/20/12 02 VR 641-	149	474865	9/21/12	641-053-533	.12-00	JOB-REQUIRED TRAVEL EXP	257 MILES 7/2-22	142.64
	9/20/12 02 VR 641-	149	474865	9/21/12	641-053-533	.12-00	JOB-REQUIRED TRAVEL EXP	175 MILES 8/6-22	97.13
	9/20/12 02 VR 641-	149	474865	9/21/12	641-053-533	.95-00	CONFERENCES & TRAINING	200 MILES 8/23PEORI	111.00
								VENDOR TOTAL	841.05 *
						MENTAL	HEALTH BOARD	DEPARTMENT TOTAL	322,777.31 *

ACCESS INITIATIVE GRANT FUND TOTAL 322,777.31 *

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VENDOF	VENDOR	TRN B TR	TRANS	PO NO CHECK	CHECK	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE
NO	NAME	DTE N CD	NO	NUMBER	DATE				AMOUNT

*** FUND NO. 685 DRUG COURTS PROGRAM

*** DEPT NO. 053 MENTAL HEALTH BOARD

56750

PRAIRIE CENTER HEALTH SYSTEMS GRANTS

10/03/12 02 VR 685-	8	475331	10/05/12	685-053	-533.92	-00	CONTRIBUTIONS	& GRANTS	MAY DRUG	COURT PRG	5,951.75	
10/03/12 02 VR 685-	8	475331	10/05/12	685-053	-533.92	-00	CONTRIBUTIONS	& GRANTS	JUN DRUG	COURT PRG	10,541.41	
									VENDOR	TOTAL	16,493.16 *	

- MENTAL HEALTH BOARD DEPARTMENT TOTAL 16,493.16 *
- DRUG COURTS PROGRAM FUND TOTAL 16,493.16 *

REPORT TOTAL ***** 1,016,450.23 *

United Cerebral Palsy Land of Lincoln 101 North 16th Street Springfield, Illinois 62703

Brookens Administrative Center 1776 East Washington St. Urbana, Illinois 61802

Agency Summary

A group of community leaders and parents of children with cerebral palsy founded united Cerebral Palsy Land of Lincoln (UCP) in 1957. The group affiliated with United Cerebral Palsy, a national organization, in 1968. The first program offered by UCP was a school for children with cerebral palsy that operated in a church basement. As these children grew, UCP services evolved to meet their changing needs and the needs of individuals with all types of disabilities and of all ages. The mission of UCP is to provide innovative strategies to connect people with disabilities to their communities. The mission is carried out through an array of dynamic and progressive programs for children and adults including Play 2 Learn toy lending library, computer loan program, camps, respite, Saddle Up! therapeutic horseback riding, developmental training, community based residential supports, supported employment, employment skills training, case management, transition, and assistive technology. UCP operates two businesses, *White Glove Professionals* janitorial services and *Gone for Good* document destruction that provide a service to the community while employing individuals with disabilities.

UCP Land of Lincoln is a 501(c)3 with a voluntary Board of Directors. The Board has established a set of By-laws that include operating procedures and a code of ethics. The organization is lead by an experienced management team. The President/CEO has a Ph.D. in education, over 32 years of experience with UCP and serves on a number of local, state, and national advisory committees.

The Commission of the Accreditation of Rehabilitation Facilities (CARF) since 1995 has accredited UCP. During the most recent survey in August 2011, UCP received a 100% rating for excellence in program quality and innovation. This was the fourth consecutive survey with no recommendations, a benchmark reached by only 1% of CARF accredited organizations throughout the United States. UCP was the recipient of the 2008 and 2010 Lincoln Bronze Award for Commitment to Excellence. The Lincoln Bronze Award, based on the national Baldrige Criteria for Performance Excellence, recognizes Illinois corporations for their commitment to excellence.

Employment Opportunities

UCP Employment Programs have grown tremendously over the past several years. One of UCP's employment partners is NISH, a national nonprofit agency whose mission is to create employment opportunities for people with severe disabilities by securing Federal

contracts through the AbilityOne Program. In 2005, UCP started a custodial training program and business and acquired its first federal janitorial contract through the AbilityOne Program with the Air National Guard in Springfield. Within three years, UCP has obtained additional federal contracts and also added commercial contracts to its resume.

UCP staff work with over 90 employers in various industries for job development activities. Last year, UCP assisted 105 individuals with finding and maintaining their jobs in the community. UCP's vocational training program is results-oriented and focuses on the employment and career development goals of each individual. People's skills are matched with existing opportunities in the community – computer, clerical, janitorial, etc. UCP often begins working with people with disabilities while the individual is in high school and provides a natural segway into a job UCP provides the support services necessary for individuals to become successful with employment through on the job employment skills training, job development and career exploration, and supported employment. Individuals gain the necessary skills to successfully enter the workforce and earn a sustainable wage.

United Cerebral Palsy CEO Brenda Yarnell and Board member Sue Suter met with several community providers and people with disabilities in Champaign County over the past year to talk about UCP's services and to explore unmet service needs. After careful deliberation by the leadership, UCP opened an office in Champaign October 1, 2012 in the Brookens Administrative Center to begin to offer community based employment services.

CHAMPAIGN COUNTY MENTAL HEALTH BOARD



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

DATE: October 17, 2012 TO: Members, Champaign County Mental Health Board and Champaign County Developmental Disabilities Board FROM: Peter Tracy SUBJECT: Support of RxP Illinois – Senate Bill 3329

Recently, the Association for Community Mental Health Authorities of Illinois (ACMHAI) approved a resolution to support SB3329, a bill which would allow specially trained and certified psychologists prescriptive privileges. Under this legislation, psychologists would be given the authority to prescribe and dispense any drugs used in the treatment of mental, emotional, and psychological disorders in accordance with State and federal laws.

The proposed legislation appears to provide a partial solution to the shortages of psychiatrists and other prescribing mental health professionals in Illinois. The information provided at the September 2012 CCMHB meeting details the training, certification, and oversight mechanisms which would be in place. Also cited was information about the success of RxP in other states (e.g., New Mexico and Louisiana) as well as in the military.

<u>Recommendation</u>: Authorize staff to send a letter of support for the RxP legislation in behalf of the Champaign County Mental Health Board.

DECISION SECTION:

Motion to authorize staff to acknowledge the support of the CCMHB for RxP legislation (SB3329).

Approved
Denied
Modified

BROOKENS ADMINISTRATIVE CENTER • 1776 E. WASHINGTON STREET • URBANA, ILLINOIS 61802



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

BRIEFING MEMORANDUM

DATE:	October 17, 2012
TO:	Members, Champaign County Mental Health Board (CCMHB)
FROM:	Peter Tracy, Executive Director
SUBJECT:	Preview: FY14 Allocation Priorities and Decision Support Criteria

BACKGROUND

Against the backdrop of the ongoing State of Illinois budget crisis, it will be our job to again determine how best we can use our local funding to address the needs of people with mental illnesses, substance use disorders, and developmental/intellectual disabilities. But at what point does the immediacy of a crisis become the status quo? The onset of the budget crisis for disabilities services in Illinois was the FY09 contract year (July 1, 2008 through June 30, 2009). After six (6) years of "crisis", perhaps it is time to acknowledge what we have been describing as a crisis is actually our new reality. Why pretend?

Our raison d'etre is to plan, fund, monitor, and evaluate disabilities systems of care in Champaign County. For the last six years we have been making funding decisions primarily in response to what has been characterized as a crisis. If we shift our thinking and redefine the State of Illinois funding and payment (or lack thereof) problems as our new reality rather than a temporary problem, would this result in a change in our priorities?

The challenge for the Champaign County Mental Health Board (CCMHB) will be to change the constructs of our thinking and refocus to address the realities of our new environment. This may well be a seminal year for disabilities programs and services in Illinois.

Statutory Authority

Funding policies of the Champaign County Mental Health Board (CCMHB) are predicated on the requirements of the Illinois Community Mental Health Act (405 ILCS 20 / Section 0.1 et.seq.). All funds shall be allocated within the intent of the controlling act as codified in the laws of the State of Illinois. The purpose of this memorandum is to recommend and confirm service and program priorities for the FY14 (July 1, 2013 through June 30, 2014) funding cycle. CCMHB Funding Guidelines require annual review and update of decision support criteria and priorities in advance of the funding cycle application process.

Expectations for Minimal Responsiveness

Applications that do not meet these thresholds are "non-responsive" and will be returned to the applicant. All agencies must be registered using the on-line system. The application(s) must be completed using the on-line system.

1. Eligible applicant – based on the Organization Eligibility Questionnaire.

2. Compliance with the application deadline. Late applications will not be accepted.

3. Application must relate directly to mental health, substance abuse or developmental disabilities programs and services.

4. Application must be appropriate to this funding source and shall provide evidence that other funding sources are not available to support this program/service.

POSSIBLE FY14 Decision Support and Priorities

The on-going state funding reductions for mental health, substance use disorders, and developmental and intellectual disabilities and regionalization proposals indicate the next funding cycle should be focused on retrenching and to the extent possible maintenance-of-effort. With this in mind, the following is suggested for consideration.

Mental Health and Substance Abuse Services for Youth with Serious Emotional Disturbance (SED) Involved in Juvenile Justice and other child serving systems – Alignment between Quarter Cent for Public Safety funding, CCMHB funding, and other federal, state and/or local funding streams to accomplish the following objectives:

(a) Parenting with Love and Limits (PLL) – Maintenance of Parenting with Love and Limits (PLL) as a means of assuring clinical efficacy and attainment of desired outcomes for ACCESS Initiative youth and families, as well as other youth involved in the juvenile justice system.

(b) ACCESS Initiative – Sustainability planning for the post-cooperative agreement phase of the project, in partnership with the Illinois Department of Human Services (IDHS), implementation of the Substance Abuse and Mental Health Services Administration (SAMHSA) Children's Initiative (by subcontract from the IDHS).

(c) Quarter Cent for Public Safety – Full compliance with the MOU and support of development of a system of care which includes integrated planning with PLL and ACCESS Initiative.

Developmental Disabilities Programs and Services - Full compliance with the terms and conditions of the Intergovernmental Agreement between the CCMHB and the Champaign County Developmental Disabilities Board (CCDDB). This agreement defines the FY14 allocation for developmental disabilities programs and services, as well as the expectation for integrated planning by the Boards.

Specialty Courts – Full compliance with the terms and conditions of the Memorandum of Understanding between the CCMHB and the Champaign County Board pertaining to the Champaign County Drug Court. Access to substance abuse programs, services, supports and incentives for Champaign County Drug Court clients shall be prioritized as an area of emphasis. Implementation of Champaign County Mental Health Court and access to appropriate programs and services for participants.

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Integration of Physical and Behavioral Health Programs and Services – To the extent possible, support the activities of the Regional Integrated Behavioral Health Network process as delineated in PA 097-0381. While we agree with the philosophical concepts of this legislation which includes facilitating the integration of behavioral healthcare with primary healthcare, the regionalization of the public behavioral health system may well present barriers for the CCMHB and other local funders limited by geographic boundary considerations. In addition, the CCMHB should continue to explore local (i.e., Champaign County) opportunities for behavioral health and primary care integration.

Support of Projects Consistent with the 10 X 10 Wellness Campaign - Encourage applications which promote wellness and improved physical health of people with serious and persistent mental illness and other disabilities.

Gaps in Core Services Related to State of Illinois Budget Cuts – It is in this category the CCMHB will be challenged to reconsider previous policy pertaining to State of Illinois funding cuts. These policies were based on the premise we were in a crisis situation which could be at least partially mitigated by covering State of Illinois "funding gaps." Now that we are in the sixth year of the "crisis," it is now time to assess the current not-for-profit funding environment and rethink our policies.

Overarching Decision Support Considerations

The FY14 CCMHB allocation process will require all applications to address the overarching criteria listed below. Assessment of all FY14 applications will focus on alignment with these overarching criteria.

1. Underserved Populations - Programs and services that promote access for underserved populations identified in the Surgeon General's Report on Mental Health: Culture, Race, and Ethnicity and the consultation with Carl Bell, M.D.

2. Countywide Access - Programs and services that promote county-wide access for all people in Champaign County. Zip code data is mandated.

4. Budget and Program Connectedness - Applications that clearly explain the relationship between budgeted costs and program components receive additional consideration. "What is the Board buying?" is the salient question that must be answered in the proposal, and clarity is required.

Secondary Decision Support and Priority Criteria

The process items included in this section will be used as discriminating factors which influence final allocation decision recommendations. The CCMHB uses an on-line system for agencies interested in applying for funding. An agency must complete the one-time registration process including the Organization Eligibility Questionnaire before receiving access to the on-line application forms.

<u>Approach/Methods/Innovation</u>: Applications proposing evidence based or research based approaches, and in addition address fidelity to the specific model cited. Applications demonstrating creative and/or innovative approaches to meet defined community need will receive additional consideration.

<u>Staff</u> <u>Credentials</u>: Applications that address and highlight staff credentials and specialized training will receive additional consideration.

Process Considerations

The criteria described in this memorandum are to be used as guidance by the Board in assessing applications for CCMHB funding, however, it is not the sole consideration taken into account in finalizing funding decisions. Other considerations would include the judgment of the Board and its staff, opinion about the provider's ability to implement the program and services proposed, the soundness of the proposed methodology, and the administrative and fiscal capacity of the agency. Further, to be eligible to receive CCMHB funds, applications must reflect the goals and objectives stated in the Three Year Plan as well as the operating principles and public policy positions taken by the Board. The final funding decisions rest with the CCMHB and their judgment concerning the most appropriate and efficacious use of available dollars based on assessment of

community needs, equitable distribution across disability areas, and decision-support match up.

The CCMHB allocation of funding is a complex task predicated on multiple variables. It is important to remember that this allocation process is not a request for proposals (RFP). Applicants for funding are <u>not</u> responding to a common set of specifications, but rather are applying for funding to address a wide variety of mental health, developmental disability and substance abuse treatment needs in our community. In many respects our job is significantly more difficult than simply conducting an RFP. Based on past experience we can anticipate the nature and scope of applications will vary significantly and will include treatment, early intervention and prevention models. For these reasons, a numerical rating/selection methodology is not applicable and relevant to our particular circumstances. Our focus is on what constitutes a best value to our community based on a combination of cost and non-cost factors, and will reflect an integrated assessment of the relative merits of applications using criteria and priorities approved by the CCMHB.

Caveats and Application Process Requirements:

- Submission of an application does not commit the CCMHB to award a contract or to pay any costs incurred in the preparation of an application or to pay for any other costs incurred prior to the execution of a formal contract.
- Technical assistance available to applicants will be limited to process questions concerning the use of the on-line registration and application system, application forms, budget forms, application instructions and CCMHB Funding Guidelines.
- Applications which include excessive information beyond the scope of the application format will not be reviewed and at the discretion of staff may be disqualified from consideration. Letters of support for applications are discouraged and if submitted will not be considered as part of the allocation and selection process.

- The CCMHB and CCDDB retains the right to accept or reject any or all applications, and reserves the right to refrain from making an award when it is deemed to be in the best interests of the county.
- The CCMHB reserves the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCMHB deems such variances to be in the best interest of Champaign County.
- Applications and submissions become the property of the CCMHB and as such, are public documents that may be copied and made available upon request after allocation decisions have been made. Materials submitted will not be returned or deleted from the on-line system.
- The CCMHB reserves the right, but is under no obligation, to negotiate an extension of any contract funded under this allocation process for up to a period not to exceed two years with or without additional procurement.
- If selected for contract negotiations, the applicant may be required to prepare and submit additional information prior to final contract execution, in order to reach terms for the provision of services that are agreeable to both parties.
 Failure to submit required information may result in cancellation of the award of a contract.
- The execution of financial contracts resultant of this application process is dependent upon the availability of adequate funds and the needs of Champaign County.
- The CCMHB reserves the right to further define and add additional application components as needed. Applicants selected as responsive to the intent of this on-line application process will be given equal opportunity to update proposals for the newly identified components.
- All proposals considered must be received on time and must be responsive to the application instructions. The CCMHB is not responsible for lateness or nondelivery of mail or messenger. Late applications shall be rejected.
- The contents of a successful application will be developed into a formal contract, if selected for funding. Failure of the applicant to accept these obligations can

result in cancellation of the award for contract. The CCMHB reserves the right to withdraw or reduce the amount of an award if there is misrepresentation of the applicant's ability to perform as stated in the application.

- The CCMHB reserves the right to negotiate the final terms (i.e., best and final offer) of any or all contracts with the applicant selected and any such terms negotiated as a result of this application process may be renegotiated and/or amended in order to meet the needs of Champaign County. The CCMHB also reserves the right to require the submission of any revision to the application, which results from negotiations conducted.
- The CCMHB reserves the right to contact any individual, agency or employer listed in the application or to contact others who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.
- Final Decision Authority The CCMHB will make the final decision concerning all applications for funding, taking into consideration staff recommendations, defined decision support criteria, best value, availability of funds and equitable distribution of funds between disability areas.

Next Steps – This Briefing Memorandum is intended to preview the Decision Memorandum to be presented at the November 14, 2012 CCMHB meeting. Members of the CCMHB are invited to provide oral or written review, comment, additions, corrections, and alternative recommendations. Key informants and the public are invited to submit written comments for the CCMHB's consideration.



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

MEMORANDUM

DATE:September 20, 2012TO:Key Informants and Other Interested PartiesFROM:Mark Driscoll, Associate DirectorSUBJECT:Draft Three-Year Plan with FY 2013 Objectives

Building on the prior three year cycle and consideration of emerging issues, a Three Year Plan for fiscal years 2013 through 2015 with objectives for FY 2013 has been drafted. Past goals that represent on-going activities have been updated and new or revised objectives identified for the coming fiscal year. Other proposed goals and objectives in the plan are tied to long-term commitments that extend into the new three year period or are a response to state and federal policy impacting local systems of care. The plan itself is structured similar to the current plan with goals and objectives divided into four sections: Children, Adolescent, and Family Focused Programs and Services; Community Engagement and Advocacy; Resource Development and Collaboration; and Organizational Development, Administration, and Accountability.

The Champaign County Mental Health Board is soliciting input on the draft Three Year Plan 2013 - 2015 with FY 2013 Objectives. The goals listed are for the period of 2010 through 2012. Objectives are focused on the 2013 fiscal year. A copy of the draft Plan is attached for your review and comment.

All comments should be submitted in writing and are due at the Champaign County Mental Health Board by October 24th.

Please send comments to:

Mark Driscoll Champaign County Mental Health Board Brookens Administrative Center 1776 E. Washington St. Urbana, IL 61802

Or by e-mail to: mark@ccmhb.org

The Three Year Plan 2013 – 2015 with FY 2013 Objectives will be presented to the CCMHB for action at the November 14, 2012 Board meeting.

Your input is appreciated. Thank you.

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DRAFT

CHAMPAIGN COUNTY MENTAL HEALTH BOARD

THREE-YEAR PLAN

FOR

FISCAL YEARS 2013 - 2015 (12/1/12 - 11/30/15)

WITH

ONE YEAR OBJECTIVES

FOR

FISCAL YEAR 2013 (12/1/12 – 11/30/13)

CHAMPAIGN COUNTY MENTAL HEALTH BOARD

WHEREAS, the Champaign County Mental Health Board has been established under Illinois Revised Statutes (Ch. 91-1/2, Sections 301-314, inclusive) in order to "construct, repair, operate, maintain and regulate community mental health facilities to provide mental health services as defined by the local community mental health board, including services for the developmentally disabled and for the substance abuser, for residents (of Champaign County) and/or to contract therefore..."

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

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

MISSION STATEMENT

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

STATEMENT OF PURPOSES

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

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

CHILDREN, ADOLESCENT, AND FAMILY FOCUSED PROGRAMS AND SERVICES

Goal #1: Identify children at-risk of developmental delay and intellectual disability and support early intervention services and family supports.

Objective #1: Support use of evidence based/informed models for provider programs serving families with children age birth to five, and require collaboration and coordination by providers to limit duplication of effort.

Objective #2: Participate in collaborative bodies such as the Champaign County Birth to Six Council whose mission focuses on serving families with young children.

Objective #3: Collaborate with the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability on issues of mutual interest associated with early intervention services and programs.

Goal #2: Identify youth at risk of social, emotional, and/or behavioral health issues and, using evidence based/informed services, engage in a process of healing and positive development.

Objective #1: Continue development and implementation of the SAMHSA Children's Mental Health Initiative Cooperative Agreement for the ACCESS Initiative system of care delineated in the SAMHSA application, including cultural competence development and support, subject to post-award changes as determined by the Coordinating Council, principle investigators, project director, and ACCESS team and partners.

Objective #2: Begin discussions with ACCESS Initiative partners whose systems benefit from the youth and family interventions delivered through the ACCESS Initiative system of care to identify innovative means for sustaining system change.

Objective #3: Support continued implementation of the Parenting with Love and Limits (PLL) program based on positive evaluation and feedback from community partners and stakeholders.

Objective #4: As practicable, leverage resources of juvenile justice system stakeholders and units of local government benefitting from the outcomes of youth and families engaged in PLL.

Objective #5: Maintain collaboration with juvenile justice system stakeholders on implementation and evaluation of the Quarter Cent for Public Safety Fund supported services and PLL and the integration of Quarter Cent funded services and PLL with the ACCESS Initiative.

Objective #6: Monitor evaluation of the ACCESS Initiative through engagement with evaluators on progress, including interim outcomes of the local and national evaluation, and through participation in the ACCESS Evaluation Collaboration Team. Goal #3: Support adults' and families' access to services and programs, including evidence based/informed behavioral health practices to increase positive outcomes for consumers.

Objective #1: Continue participation and support for Champaign County Specialty Courts serving persons with substance use disorders and/or mental health disorders.

Objective #2: Support a continuum of services for persons with a mental health, substance use disorder, and/or developmental disability in response to reduced state supported services.

Objective #3: Promote wellness for people with mental illnesses, substance use disorders, and/or developmental disabilities to prevent and reduce early mortality as embodied in the "10x10 Wellness Campaign."

Objective #4: Encourage training of staff across the service spectrum on use of evidence based/informed practice and associated outcome measurement.

COMMUNITY ENGAGEMENT & ADVOCACY

Goal #4: Address stigma associated with a person's or family members' mental illness, substance use disorder, and/or developmental disability through broad based community education efforts to increase community acceptance and positive self-image.

Objective #1: Continue support for and involvement in the signature antistigma and community education events Reaching Out for Answers – Disability Resource Expo, Roger Ebert's Film Festival, and the ACCESS Initiative Children's Mental Health Awareness Week.

Objective #2: Participate in other community based activities such as walks, forums, and presentations to raise awareness.

Goal #5: Stay abreast of emerging issues affecting the local systems of care and consumer access to services and be proactive through concerted advocacy efforts.

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

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

Objective #3: Continue broad based advocacy efforts at the state and local levels to respond to continued reductions in state funding and increasing delays in payment for local community based mental health, substance use disorder, and developmental disability services and to the broader human services network under contract with the State of Illinois.

Objective #4: In collaboration with the United Way of Champaign County, monitor implementation of the regional 211 information and referral system and its impact on local utilization of funded information and referral services.

Objective #5: Assess impact on local systems of care for persons with mental illness, substance use disorder and/or developmental disabilities of the State of Illinois and provider networks movement to a regional service delivery model.

RESOURCE DEVELOPMENT & COLLABORATION

Goal #6: Increase investment in programs and services through promotion of collaborative and innovative approaches.

Objective #1: Through participation in the Association of Community Mental Health Authorities of Illinois (ACMHAI), seek input and feedback on innovative approaches for resource development or cost containment.

Objective #2: Partner with other local entities for a coordinated response to needs of at-risk populations.

Objective #3: Consider non-financial support to agencies to offset state funding reductions and control costs.

Objective #4: Support and assist with affiliations and mergers of providers as a means to streamline the delivery of services and enable administrative cost savings through economies of scale.

Objective #5: Encourage development of collaborative agreements between providers to increase or maintain access and coordination of services for consumers residing in Rantoul and rural Champaign County.

Goal #7: Sustain the collaborative working relationship with the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDB).

Objective #1: Implement the Intergovernmental Agreement between CCMHB and CCDDB.

Objective #2: Coordinate integration, alignment, and allocation of resources with the CCDDB to ensure the efficacious use of resources within the developmental disability service continuum.

Objective #3: Assess alternative service strategies that empower consumers and increase access to needed but underutilized services.

Goal #8: Reduce involvement of target populations in the criminal justice system.

Objective #1: Collaborate with juvenile justice system partners on implementation of services supported with Quarter Cent for Public Safety Fund, Board resources, and the ACCESS Initiative to reduce youth contact and involvement with the criminal justice system.

Objective #2: Continue participation in the Champaign County Specialty Court Steering Committee and support for Champaign County Drug Court and Champaign County Mental Health Court.

Objective #3: Using established oversight committees, review performance and evaluation reports including data on recidivism.

Objective #4: Support continuation of Champaign County Drug Court services funded through the Department of Justice Bureau of Justice Assistance Enhancement Grant award and the pursuit of non-CCMHB funding to sustain the enhanced services.

ORGANIZATIONAL DEVELOPMENT, ADMINISTRATION, AND ACCOUNTABILITY

Goal #9: Set priorities for funding through an annual review and allocation process to ensure access to core mental health, substance use disorder, and developmental disability services by consumers.

Objective #1: Draft priorities based on current service needs and operating conditions including consideration of changes in state funding and payment practices, commitments to implementation of the ACCESS Initiative, and obligations established through Memoranda of Understanding and Intergovernmental Agreements.

Objective #2: Solicit input from the service network and community at large on proposed funding priorities prior to adoption.

Objective #3: Utilize a competitive application process to evaluate proposals in relation to annual priorities.

Goal #10: Maintain program and fiscal accountability of service providers and programs under contract with Board.

Objective #1: Evaluate program performance on a quarterly and annual basis.

Objective #2: Implement the Audit and Financial Accountability policy.

Objective #3: Maintain the on-line application and reporting system and provide enhancements as necessary.

Objective #4: Evaluate provider administrative expenses and cost allocation plans to ensure maximum investment in consumer services.

Goal #11: Respond to State funding reductions for mental health, substance use disorder and developmental disability services through administrative efficiencies at the Board level enabling maximum investment in community service grants and contracts.

Objective #1: Continue the administrative services agreement as defined in the Intergovernmental Agreement the Board and the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability.