## CHAMPAIGN COUNTY MENTAL HEALTH BOARD



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

## **Champaign County Mental Health Board (CCMHB)**

## WEDNESDAY, JANUARY 22, 2014

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

## 4:30 p.m.

- 1. Call to Order Dr. Deloris Henry, President
- 2. Roll Call
- 3. Citizen Input
- 4. CCDDB Information
- 5. Approval of CCMHB Minutes
  - A.11/20/13 Board meeting\*

    Minutes are included in the packet. Action is requested.
- 6. President's Comments
  - A. Introduction of new Board member: Dr. Susan Fowler
- 7. Executive Director's Comments
- 8. Staff Reports
  Staff reports from Mr. Driscoll, Ms. Canfield, and Mr.
  Parsons are included in the packet.
- 9. Board to Board Reports
- 10. Agency Information

**BROOKENS ADMINISTRATIVE CENTER** 

1776 E. WASHINGTON STREET

URBANA, ILLINOIS 61802

11. Financial Information\*

A copy of the claims report is included in the packet.

#### 12. New Business

- A. Election of Officers\*

  Nomination and election of Board President and Vice President/Secretary is needed. Action is requested.
- B. CCMHB/CCDDB/Quarter Cent NOFA
  Included in the Board packet is a copy of the Notice
  of Funding Availability published in the NewsGazette on December 15, 2013.
- C. CLC Retrospective and Progress Report
  Shandra Summerville, ACCESS initiative Cultural
  and Linguistic Coordinator will present on the
  topic.

## 13. Old Business

- A. 1115 Concept Paper Comments and Waiver.

  Included in the packet are comments from various organizations/associations on the concept paper.

  The 1115 waiver (draft) can be accessed at <a href="http://www2.illinois.gov/gov/healthcarereform/Documents/1115">http://www2.illinois.gov/gov/healthcarereform/Documents/1115</a>
  %20Waiver/14%2001%2007%20waiver%20draft%20for%20po sting.pdf
- 14. Board Announcements
- 15. Adjournment

\*Board action



## CHAMPAIGN COUNTY MENTAL HEALTH BOARD BOARD MEETING

Minutes—November 20, 2013

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

4:30 p.m.

MEMBERS PRESENT: Astrid Berkson, Aillinn Dannave, Bill Gleason, Ernie Gullerud,

Deloris Henry, Mike McClellan, Thom Moore, Julian Rappaport,

Deborah Townsend

**STAFF PRESENT:** Peter Tracy, Executive Director; Lynn Canfield, Nancy Crawford,

Mark Driscoll, Stephanie Howard-Gallo, Tracy Parsons

OTHERS PRESENT: Juli Kartel, Community Elements (CE); Dr. Elaine Shpungin,

Psychological Services Center (PSC); Bruce Suardini, Prairie Center Health Systems (PCHS); Felicia Gooler, Dale Morrissey, Developmental Services Center (DSC); Darlene Kloeppel, Champaign County Regional Planning Commission; Joe Gordon, Champaign County Court Services; Julia Rietz, Champaign County State's Attorney; Leon Bryson, Erin Grace, Marla Elmore, Montel Smith, Prairie Center Health Systems (PCHS)/ Parenting with Love and Limits (PLL); Kami Whightsil and Steve Monical,

**Parents** 

#### **CALL TO ORDER:**

Dr. Henry, 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:	
None.	
CCDDB INFORMATION:	
The CCDDB met earlier in the	he day.
APPROVAL OF MINUTE	S:
Minutes from the October 23	3, 2013 Board meeting were included in the packet for review.
	MOTION: Dr. Moore moved to approve the minutes from the October 23, 2013 Board meeting. Ms. Dannave seconded the motion. A vote was taken and the motion passed unanimously.
PRESIDENT'S COMMEN	TTS:
None.	
EXECUTIVE DIRECTOR	2'S COMMENTS:
None.	
STAFF REPORTS:	
Staff reports from Ms. Canfi	eld and Mr. Driscoll were included in the packet.
Report for the ACCESS In several staff members recent	e Children's Mental Health Initiative System of Care Assessmentitiative of Champaign County. Mr. Parsons announced that he anotally attended the Federation of Families Conference in Washington, Ms. Ratisha Carter was awarded the National Youth Engagement
BOARD TO BOARD:	
None.	
AGENCY INFORMATIO	N:
None.	

#### FINANCIAL INFORMATION:

## **Approval of Claims:**

The claims report was included in the Board packet for acceptance.

MOTION: Ms. Berkson moved to accept the claims report as presented in the Board packet. Ms. Dannave seconded the motion. A voice vote was taken and the motion passed unanimously.

#### **NEW BUSINESS:**

## **PLL Study Presentation:**

Dr. Sells presented the results of a study on the Parenting with Love and Limits (PLL) Extended Care outcomes including reduction in recidivism. Two parents involved in the PLL program shared their experiences with the Board as well. A detailed PLL outcomes report was distributed to Board members and the public. The report is available at the CCMHB office for anyone interested.

#### **State of Illinois Medicaid Section 1115 Waiver:**

A copy of "The Path to Transformation: Concept Paper for the 1115 Waiver for Illinois Medicaid" was included in the packet for information and review.

#### **Emergency Shelter for Families:**

A Briefing Memorandum on the development of an Emergency Family Shelter was included in the Board packet for information only.

## Glossary of Terms/Acronyms:

An updated copy of the glossary of terms and acronyms was included in the Board packet.

#### **OLD BUSINESS:**

#### Draft Three-Year Plan 2013-2015 with FY 2014 Objectives:

The final draft of the Three-Year Plan 2013-2015 with FY 2014 Objectives was included in the Board packet.

MOTION: Mr. McClellan moved to approve the Three-Year Plan 2013-2015 with FY 2014 Objectives as presented. Dr. Gullerud seconded the motion. The motion passed unanimously.

#### **FY15 Allocation Criteria Discussion:**

A Decision Memorandum detailing criteria to be used to evaluate CCMHB and Quarter Cent for Public Safety Fund applications for the 2015 program year allocation cycle was included in the Board packet.

MOTION: Mr. McClellan moved to approve the FY15 Allocation Criteria as written. Dr. Gullerud seconded the motion. A voice vote was taken and the motion passed unanimously.

#### **CCDDB** Allocation Criteria:

A copy of the CCDDB Allocation Criteria was included in the Board packet for information only.

## **Disability Resource Expo:**

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

#### **BOARD ANNOUNCEMENTS:**

Dr. Gullerud announced this would be his last Board meeting and expressed his gratitude to Board members and staff for his experiences with the Board. A reception will be held for Dr. Gullerud in December.

#### ADJOURNMENT:

The business meeting adjourned at 6:30 p.m.

Respectfully

Submitted by: St

Stephanie Howard-Gallo CCMHB/CCDDB Staff

<sup>\*</sup>Minutes are in draft form and are subject to CCMHB approval.



# Mark Driscoll Associate Director for Mental Health & Substance Abuse Services

## Staff Report – January 22, 2014 Board Meeting

### **Summary of Activity**

<u>Contract Amendments</u>: In response to a request from Community Elements, an amendment to the Crisis, Access, Access and Benefits contract was issued in December. The amendment enables two new hires to be trained in Moral Reconation Therapy (MRT). Once trained, the staff will be part of the team available to conduct MRT groups in the jail, the community, and at TIMES Center.

FY 2015 Application Cycle: Preparations for the upcoming application cycle was a primary focus of my work in December. During that time I worked with the online system consultant on enhancements to the online application system. Adjustments have been made to the personnel form, the expense form, and the program plan. Lynn Canfield and I had met with the consultant earlier in the year to discuss the enhancements and timeframe for implementation. Each of the enhancements has been tested and is ready for the FY15 application cycle.

I used the opportunity to test the functioning of each enhancement to draft a complete application. The test application exercise served a dual purpose. The test application is also part of my preparation for an application technical assistance session planned for late January. The technical assistance session will review basic functions including enhancements of the online system, and provide agencies with an opportunity to ask questions about the system and application requirements.

Standard practice is to review the application instructions during the same timeframe the enhancements were being made this year. And there are always a few changes to instructions based on the experience from the prior cycle and with the enhancements to the system. I take the lead in this process with Lynn Canfield and Nancy Crawford providing a final review before Lynn posts the updated instructions to the system.

The FY15 application process kicked off with publication of the updated Notice of Funding Availability in the News-Gazette on December 15<sup>th</sup>. The system opened for applications on January 8<sup>th</sup>. All submitted FY14 applications are copied over to FY15 making them accessible to the respective agencies for the new allocation cycle. The forms can then be edited as needed.

<u>Local Collaboration Initiatives</u>: The CCMHB Allocation Criteria for FY15 (7/1/14-6/30/15) includes local funder collaborations on special initiatives. Any CCMHB funding set aside for local collaboration project(s) will be included as a component of the FY15 allocation decision process. Implementation of CCMHB contracts using "local collaboration set aside dollars" will require an out-of cycle application and explicit CCMHB authorization.

Three potential initiatives have been identified and are in various stages of development. It is evident from the cost and breadth of some of the initiatives that resources beyond the capacity of

any one funding body are necessary and will require not only collaboration of funders but the ability of potential provider(s) to bill Medicaid or to leverage other state and/or federal resources to sustain the initiatives. The three initiatives are expansion of psychiatric services, re-establish a detox program in Champaign County, and develop an Emergency Shelter for Families including case management services.

A Briefing Memo on the Emergency Shelter for Families was included in the November Board packet. Since that time, United Way has committed funds for an interim service plan or phase 2 pilot to bridge the service gap from February 1, 2014 to June 30, 2014. A Request for Proposals (RFP) has been released. The pilot will be modeled after the phase 1 that provided shelter in budget motels with case management services provided to sheltered families. The Housing Authority is moving forward with developing the permanent shelter. CCMHB staff has expressed an interest to United Way about discussing the potential for collaborating on case management services as part of the operation of the permanent shelter.

A meeting on the matter of expanding psychiatric services was held in December. Nancy Greenwalt, Executive Director of Promise Healthcare, asked for the meeting with CCMHB and Community Elements to assess plans for such an initiative. United Way staff was also present to learn more about the issue. Primary concerns include the ability to recruit another psychiatrist and the patient mix and pay sources required to sustain the service. Much work remains before this initiative is expected to move forward although discussions are expected to continue.

Also in December, Prairie Center (PCHS) updated interested parties on plans to re-establish a "Detox" program in Champaign County. PCHS had closed the program several years ago due to state budget cuts. Efforts to reopen the program resulted in a commitment from Presence Covenant Medical Center to provide space and PCHS plans to re-apply to the state for the appropriate license. The cost to start-up and sustain the program are substantial and no state grants or funding outside of billing Medicaid are said to be available. Subsequent to the December meeting, Bruce Suardini, PCHS Executive Director, met with me and Peter to discuss the prospect of an application to CCMHB. The proposal would be to support services for non-Medicaid eligible clients or for services not eligible for Medicaid reimbursement such as substance abuse case management. It was noted a probable contingency of any successful application would be PCHS demonstrating other funding had been secured and sufficient to open and sustain the program before CCMHB funds would be released. An application to fund case management for detox program clients would likely align with the local collaboration and the criminal justice-mental health FY15 allocation criteria.

Reimbursement Tracking System: Several years ago the Proviso Township Mental Health Board developed a Reimbursement Tracking System (RTS). It is a fee for service billing system that enables the Board to track client utilization. A presentation on the system was made at the September ACMHAI meeting held in Champaign. Peter and I attended the presentation and with our interest piqued, I made a site visit to Proviso Township in late November. I spent over four hours with Proviso staff having a detailed discussion and demonstration on the operation of the system from both the board and agency side of the system. Based on the in-depth presentation, arrangements were made for all CCMHB staff to see a demonstration of the system.

The system is web-based and can be used to track mental health, substance use disorder, and/or developmental disability services by client. The system tracks a clients' utilization of services across funded programs using a Recipient Identification Number (RIN) that is unique to the client. Built into the system are current Medicaid rates and billable services as well as the system having the capacity to add non-Medicaid billable services and associated rate.

Access to the system is secure and password protected as well as being HIPAA compliant. The ability to input information is restricted to either Board staff or agency staff although Board staff can view all agency files/pages on the system. Agencies can only view those pages, rates, and claims specific to their funded programs.

Proviso Township provides on-going support for the system, would train CCMHB staff on use of the system, provide an agency training manual, and some customization of the system under the annual franchise fee. CCMHB staff would be responsible for implementation and management of the system in Champaign County. The system would operate independent of the current application and reporting system and expand use of fee for service contracts.

Drug Court Steering Committee: The Steering Committee met following the Drug Court Graduation. At each meeting I give a report on the status of the Drug Court Fund including revenue and expenses for the year and ending balance. The federal Drug Court Expansion grant has been extended through the end of March 2014 to spend down remaining funds. The County Board has approved funds to continue the Drug Court Coordinator position through the end of FY14. This position was created under the Drug Court Expansion grant and would have ended without the commitment from the County Board. The Sheriff has committed to maintaining the 25% of a Sheriff's Deputy's time spent on the program that was also supported under the federal grant. There are currently 53 participants in Drug Court.

Champaign County Re-Entry Program RFP: The County Board has released a Request for Proposals (RFP) to support a re-entry program for persons released from the Champaign County Jail and/or those released from prison and returning to Champaign County. Applicants are to address plans to provide case management services to this population, plans for collaboration with other providers involved with the target population, establishment of a "Re-Entry Council," and leveraging of other resources beyond the investment of county resources. The County has allocated \$100,000 for FY14 to support the program. The RFP can be found at <a href="http://www.co.champaign.il.us/bid\_documents/RFP2013-006/RFP2013-006.pdf">http://www.co.champaign.il.us/bid\_documents/RFP2013-006/RFP2013-006.pdf</a>

Other Activity: The United Way Community Impact Committee (CIC) had a demonstration of the online application system United Way used this year to solicit applications from those agencies whose letters of intent were approved. A total of 64 applications were submitted and will now be reviewed by volunteer panels and the CIC. I sat in on a meeting with Peter Tracy and Tracy Parsons with representatives of the CHOICES pilot project. The meeting was a discussion of possible collaboration between the four county pilot project and ACCESS. The Champaign County Health Care Consumers hosted a meeting on issues related to accessing affordable prescription drugs and shared information on assistance programs. A follow-up meeting is planned but has not been scheduled.



## Lynn Canfield, Associate Director for Developmental Disabilities Staff Report – January 22, 2014

**CCDDB Retreat**: Peter Tracy and I have had two meetings and numerous email exchanges with the retreat facilitator, along with Elaine Palencia, CCDDB President, for planning the day and developing a draft retreat agenda, summary of major system changes, and draft position statements on overarching principles and service areas. We will meet in the Lincoln Room of the iHotel at 8:15AM on Saturday, January 25 and begin the discussion at 9AM, wrapping up by 1PM.

**<u>FY2015 Funding Priorities:</u>** A final draft of the CCDDB FY2015 Allocation Priorities and Decision Support Criteria Decision Memo incorporated new language into the Residential. This was approved. Board documents and revised schedules have been posted to the Champaign County website and our application/reporting site.

**FY2014 Quarterly Reports:** First Quarter data from all ID/DD related programs have been entered, with some clarifications and adjustments requested and received. New this year are reports of persons served, for which I created and then modified new data tables in order to sort by name, across agencies and programs. Although these data may require further refinement, it appears that: of 449 individuals reported in funded program services other than Family Development Center and Head Start/Early Head Start, 56 are involved with more than one funded organization, many in advocacy groups; and, of the 449, 174 participate in more than one funded program through a single agency (Developmental Services Center - 151, Community Choices - 22, and Charleston Transitional Facility - 1). I have requested and received additional information in cases where some state funding appears to be present.

Online Application and Reporting System: Mark Driscoll and I worked on changes to application forms and quarterly reports and system enhancements to improve fee-for-service reporting and tracking. During the early January snow days, we each (separately) made sure that FY14 application forms were 'cloned' to FY15 for agency user convenience and that the application period was set to open on time. Discussion with Proviso Township's mental health board office regarding their reimbursement tracking system is ongoing. FY2015 application instructions have been revised and reposted, and we continue to provide technical support to agency users as needed and to consider modifications based on their experiences with the site. A technical assistance session will be held on Tuesday, January 28, 2014, from 10AM to Noon for current and newly registered users. Our consultant to the website developer will be present at this meeting.

Anti-Stigma Alliance: After several conversations with anti-stigma artists and steering committee members, I made inquiries about possible spaces for an art show and met with the coordinator of Roger Ebert's Film Festival to consider what is possible for 2014. The festival will be held April 23-27, with the Illinois Marathon intersecting it on Saturday, April 26. The Anti-Stigma Alliance Steering Committee had its first meeting, and members are now considering event and promotional options while

we wait to learn more about the featured Anti-Stigma film for this year's festival, which will inform related decisions. The festival has invited us to participate in a panel discussion again this year, and we are collaborating on an art installation at the Springer Cultural Center which would be easily viewed by festival VIPs.

ACMHAI: Participated in a conference call with the consultants drafting the 1115 Waiver submission; one of the authors has experience in both finance and ID/DD and assured the group that the concept paper's focus on higher level controversial aspects is due to their potential for increased revenue; he also noted that the new waiver would ensure compliance with existing consent decrees and, while the rates can be changed right now (independent of the waiver submission), the waiver can develop incentives in priority areas and for providers achieving desired outcomes; across all systems, providers are encouraged to become Medicaid providers in order to accommodate those individuals who will become eligible in 2014. Attended the ACMHAI quarterly membership meeting, which focused on ID/DD with presentations by Ed McManus and Vickie Niswander and a conversation with Illinois DHS DDD Director Kevin Casey. Participated in a DD Subcommittee meeting on January 8, with focus on: developing position statements related to the large scale system changes and helping our communities in the transition; and organizing ourselves for dialog with Director Casey, with issues of particular interest to the group being Medicaid supplementation, EPSDT, Employment First, Independent Service Coordination, and PCP/self-determination awareness system-wide. An ACMHAI conference call is scheduled for January 15 to discuss the Proposed 1115 Draft.

Other Activity: At November's Birth to Six Council meeting, I worked with the Provider Recruitment and Retention Subcommittee responding to the scarcity of Speech, Occupational, and Physical Therapy providers in the region. Updates and status reports at the most recent quarterly Metropolitan Intergovernmental Council meeting included the Champaign County Economic Development Corporation Strategic Plan, UC2B Marketing, and data on the high cost of health care in Central Illinois. I remain involved with the Champaign County Crisis Intervention Team Steering Committee through email and informal updates because their regular meeting time often overlaps with CCDDB meetings; I will attend the January 15<sup>th</sup> meeting and have given feedback on the draft document, "CIT Response General Order." I attended the November 26 meeting of Mental Health Agencies Council, with discussion of the Gifford recovery, ACCESS and board business, and MHAC schedule. Mark Driscoll and I attended an initial Rx Access Stakeholder Meeting, coordinated by Champaign County Health Care Consumers, for an overview of problems with the current prescription access situation, the role of ACA, opportunities for improvement, and next steps. Peter Tracy and I met with Darlene Kloeppel and Babette Leek of RPC's PAS/ISC to learn more about their work, state rules, and anticipated expansion of their role, for which statewide discussion is now underway (launch expected in 2015).

<u>Ligas, PUNS, and Unmet Need</u>: During the November 20 Ligas Update, Tony Records offered important clarifications and observations. While the September PUNS selection resulted in 85% of individuals choosing Home Based Support, the large draw anticipated in April is to consist of 500

individuals, all requesting CILA; this makes the development of provider capacity, in Champaign County and across the state, even more urgent. The transition plan developed for each individual receiving an award should answer the key questions "Where do you want to live and with whom?" and "What do you want to do during the day?" and should include discussion of employment, at a minimum "a path to employment." Mr. Records also talked about the need for more flexibility in CILA, enhancing the waiver with Supported Employment, separating housing from services, the calculation of residents' housing costs (portion on earned income, specifically) as a disincentive to work, and Illinois' unique PAS system (in many other states, service coordination is through providers, and there is a choice among them.)

Data sorted for Champaign County, from the DHS website's November 8 update, is added below.

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194 with emergency need; of 269 in crisis, 116 recent or coming grads.
2/1/11:
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 recent or coming grads.
               194 with emergency need; of 268 in crisis, 120 recent or coming grads
6/9/11:
10/4/11:
               201 with emergency need; of 278 in crisis, 123 recent or coming grads.
12/5/11:
               196 with emergency need; of 274 in crisis, 122 recent or coming grads.
5/7/12:
               222 with emergency need; of 289 in crisis, 127 recent or coming grads.
9/10/12:
               224 with emergency need; of 288 in crisis, 131 recent or coming grads.
10/10/12:
               224 with emergency need; of 299 in crisis, 134 recent or coming grads.
               225 with emergency need; of 304 in crisis, 140 recent or coming grads.
1/7/13:
2/11/13:
               226 with emergency need; of 308 in crisis, 141 recent or coming grads.
6/10/13:
               238 with emergency need; of 345 in crisis, 156 recent or coming grads.
10/15/13:
               244with emergency need; of 378 in crisis, 160 recent or coming grads.
11/8/13:
               246 emergency; 392 in crisis, with 164 exiting school in the past 10 or the next 3 years.
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The majority of existing supports are in Education, Speech and Occupational Therapy, Transportation, and Behavioral Supports. The most frequently identified desired supports are Transportation, Personal Support, Support to engage in work/activities in a disability setting, Support to work in the community, Occupational Therapy, Speech Therapy, Behavioral Supports, Other Transportation Service, Out-of-home residential services with 24-hour supports, Physical Therapy, Out-of-home residential services with less than 24-hour supports, Assistive Technology, and Respite.



## Division of Developmental Disabilities

## **PUNS Data By County and Selection Detail**

November 08, 2013

County: Champaign	
Reason for PUNS or PUNS Update	
New	161
Annual Update	93
Change of category (Emergency, Planning, or Critical)	14
Change of service needs (more or less) - unchanged category (Emergency, Planning, or Critical)	18
Person is fully served or is not requesting any supports within the next five (5) years	132
Moved to another state, close PUNS Person withdraws, close PUNS	5 16
Deceased	3
Other, supports still needed	1
Other, close PUNS	83
EMERCENCY NEED/Reman needs in home or day supports immediately)	
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); e.g.,	8
hospitalization of care giver or temporary illness of an individual living in their own home.	0
2. Individual needs immediate support to stay in their own home/family home or maintain their employment	28
situation (long term); e.g., due to the person's serious health or behavioral issues.	Sec. 1
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.	6
<ol> <li>Care giver needs immediate support to keep their family member at home (long term); e.g., care giver is</li> </ol>	15
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)	
Care giver is unable or unwilling to continue providing care (e.g., person has been abandoned).	32
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.	2
4. Person is living in a setting where there is suspicion of abuse or neglect.	5
5. Person is in an exceedingly expensive or inappropriate placement and immediately needs a new place to live	10
(for example, an acute care hospital, a mental health placement, a homeless shelter, etc.).  6. Other crisis, Specify:	136
o. Other crisis, opeciny.	130
CRITICAL NEED(Person needs supports within one year)	
<ol> <li>Individual or care giver will need support within the next year in order for the individual to continue living in their current situation.</li> </ol>	40
<ol> <li>Person has a care giver (age 60+) and will need supports within the next year.</li> </ol>	28
3. Person has an ill care giver who will be unable to continue providing care within the next year.	6
4. Person has behavior(s) that warrant additional supports to live in their own home or family home.	42
5. Individual personal care needs cannot be met by current care givers or the person's health has deteriorated.	7
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.	28
8. Person or care giver needs an alternative living arrangement.	14
9. Person has graduated or left school in the past 10 years, or will be graduating in the next 3 years.	164
10. Person is living in an inappropriate place, awaiting a proper place (can manage for the short term; e.g., persons aging out of children's residential services).	2
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 Disabilities, nursing home or state hospital).	
13. Person is losing eligibilty 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 in the next year.	1
16. Person is losing eligibility for Medically Fragile/Technology Dependant Children's Waiver supports in the next	1
year.	•
17. Person is residing in an out-of-home residential setting and is losing funding from the public school system.	2

November 08, 2013



## Division of Developmental Disabilities

## **PUNS Data By County and Selection Detail**

20. Person wants to leave current setting within the next year. 6 21. Person needs services within the next year for some other reason, specify: 31 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 giver. 74 2. Person lives in a large setting, and person/family has expressed a desire to move (or the state plans to move 1 the person). 3. Person is disatisfied with current residential services and wishes to move to a different residential setting. 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. 6. Person currently lives in out-of-home residential setting and wishes to return to parents' home and parents 2 8. Person or care giver needs increased supports. 71 9. Person is losing eligibility for Department of Children and Family Services supports within 1-5 years. 1 14. Other, Explain: 12 **EXISTING SUPPORTS AND SERVICES** Respite Supports (24 Hour) 18 Respite Supports (<24 hour) 29 Behavioral Supports (includes behavioral intervention, therapy and counseling) 101 Physical Therapy 75 Occupational Therapy 132 Speech Therapy 158 Education 209 Assistive Technology 42 Homemaker/Chore Services 4 Adaptions to Home or Vehicle 6 Personal Support under a Home-Based Program, Which Could Be Funded By Developmental Disabilities, 8 Division of Rehabilitation Services or Department on Aging (can include habilitation, personal care, respite, retirement supports, budgeting, etc.) Medical Equipment/Supplies 14 Nursing Services in the Home, Provided Intermittently 4 Other Individual Supports 22 **TRANPORTATION** Transportation (include trip/mileage reimbursement) 127 Other Transportation Service 65 Senior Adult Day Services 2 **Developmental Training** 81 "Regular Work"/Sheltered Employment 78 Supported Employment 40 Vocational and Educational Programs Funded By the Division of Rehabilitation Services 14 Other Day Supports (e.g. volunteering, community experience) 13 **RESIDENTIAL SUPPORTS** Community Integrated Living Arrangement (CILA)/Family 5 Community Integrated Living Arrangement (CILA)/Intermittent 5 Community Integrated Living Arrangement (CILA)/Host Family 1 Community Integrated Living Arrangement (CILA)/24 Hour 33 Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 16 or Fewer People 9 Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 17 or More People 1 Skilled Nursing Facility/Pediatrics (SNF/PED) 4 Supported Living Arrangement 3 Shelter Care/Board Home 1 Children's Residential Services 6

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## Division of Developmental Disabilities

## **PUNS Data By County and Selection Detail**

November 08, 2013 Child Care Institutions (Including Residential Schools) 6 Other Residential Support (including homeless shelters) 8 SUPPORTS NEEDED 247 Personal Support (includes habilitation, personal care and intermittent respite services) Respite Supports (24 hours or greater) 82 Behavioral Supports (includes behavioral intervention, therapy and counseling) 143 Physical Therapy 96 Occupational Therapy 169 Speech Therapy 152 Assistive Technology 85 Adaptations to Home or Vehicle 32 Nursing Services in the Home, Provided Intermittently 6 Other Individual Supports 49 TRANSPORTATION NEEDED 255 Transportation (include trip/mileage reimbursement) Other Transportation Service 119 **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 169 Support to engage in work/activities in a disability setting 178 RESIDENTIAL SUPPORTS NEEDED 96 Out-of-home residential services with less than 24-hour supports Out-of-home residential services with 24-hour supports 118



## **ACCESS Initiative Staff Update.**

Month of: December 2013 Staff Name: Ratisha Carter Infrastructure Area(s): Youth Engagement

<u>Committee/Working Group Activity</u> – Please list any committee or working group meetings hosted by you. Also provide a short update (upcoming tasks, celebrations, etc.).

Youth Advisory Board Meeting	The Youth Advisory Board met to discuss the following:  -Setting a calendar for the New Year -Commitments as a board member -effective ways of communication -topics for the Youth MOVE Hangouts (monthly psycho-educational meetings) -Goals for the New Year	December 4, 2013
United Way Grant Youth and Family Board Meeting with Consultant	The Youth Engagement Specialist worked on the Program Plan part of the Unite Way Grant.  During this meeting we discuss the next steps for the Family-run Organization with the Youth Advisory Board and Family Advisory Board combined.	Due December 18th  Monthly meeting-December 19th

<u>Strategic Meetings/Community Presentations</u> – Please list any strategic meetings you attended. Provide information regarding who was in attendance, the nature of the meeting, next steps, and outcomes. Please list any community presentations you made on behalf of ACCESS. Provide information regarding your audience, purpose of the presentation, and collateral materials distributed.

Staff Meeting(s)	Weekly meetings	Thursdays 8:30AM- 10:00AM	Staff updates
		10.007 1171	



## **ACCESS Initiative Staff Update**

Month of: November 2013 Staff Name: Jonte' Rollins

Infrastructure Area(s): Linkage, Engagement, and Communications Coordinator (LECC)

## **Highlights**

The ACCESS LECC and Family Engagement Coordinator presented a workshop at the 2013 National Federations Family Conference. Workshop content included steps for developing and implementing Faith-Based initiatives to address stigma, trauma, healing, and forgiveness through peer to peer support.

There was an impressive **agency story profile article featuring ACCESS Initiative** written by University of Illinois student journalist, Sal Nudo, submitted for possible publication on cu-citizenaccess.org

<u>Committee/Working Group Activity</u> – Please list any committee or working group meetings hosted by you. Also provide a short update (upcoming tasks, celebrations, etc.).

The LECC did not host any committee or working group meetings during this reporting period .

<u>Strategic Meetings/Community Presentations</u> – Please list any strategic meetings you attended. Provide information regarding who was in attendance, the nature of the meeting, next steps, and outcomes. Please list any community presentations you made on behalf of ACCESS. Provide information regarding your audience, purpose of the presentation, and collateral materials distributed.

University of Illinois Department of Psychology Child Welfare Seminar	Jonte' Rollins (ACCESS LECC) Heidi Gulbrandson (DCFS Supervisor/ ACCESS Coordinating Council Member)	October 29, 2013	Presentation on SOFTT Community Action Team.  County disparity trends in child serving systems  Community collaboration efforts to improve outcomes for youth and families of color involved with DCFS
ACCESS Community Home Budget Planning Meeting	Jonte' Rollins (ACCESS LECC) Bridgette To	November 5, 2013	Meeting to create ACCESS Community home budget and program plan for October 1, 2013- June 30, 2014.

University Of Illinois Journalism Interview for Agency profile article featuring ACCESS	(DMBGC Director of Finance) Jonte' Rollins (ACCESS LECC) Sal Nudo (U of I Journalism Student)	November 6, 2013	Meeting to provide ACCESS overview and highlights for article being written for U of I Journalism class. Ratisha Carter (ACCESS Y.E.S.) and Steve Higgins (Urbana Schools Superintendent) were also interviewed to contribute to article content.
National Federations of Families Conference	Jonte' Rollins (ACCESS LECC)	November 13-16, 2013	Attended the National Federations of Families Conference in Washington D.C.
National Federations of Families Conference Presentation: From Trauma to Healing Presentation	Jonte' Rollins (ACCESS LECC) Regina Crider (ACCESS LFC)	November 15, 2013	Conference workshop presentation on implementing Faith Based initiatives to address stigma, trauma, healing, and forgiveness through peer to peer suppor.t
ACCESS Social Marketing and Community Engagement Update Meeting	Jonte' Rollins (ACCESS LECC)  Timothy Tunner (Vanguard Communications/N ational Traumatic Stress Network)	November 16, 2013	Met with designated Federal Social Marketing Technical Assistant to provide an update on ACCESS community engagement efforts.

<u>Community Coalitions/Committees/Working Groups</u> – Please list any community coalition/committee/working group meetings you attended as an ACCESS representative. Provide information regarding the nature of the meeting, your role as an attendee, next steps, and outcomes.

LECC did not attend any community coalitions or committee workgroups during this reporting period.

Sal Nudo

**JOUR 415** 

Nov. 10

Agency story on Access Initiative

## Government agency profile: Access Initiative

## All-access help for youth in Champaign County

African-American youths make up 22 percent of the young population in Champaign County, yet they are in the majority when it comes to some troubling statistics. For instance, 81 percent of kids suspended more than once in Champaign-Urbana schools are black, according to a 2010 report from the Illinois State Board of Education.

Numbers like these – and similar stats seen in the local juvenile justice system and foster care homes – are ones that Access Initiative of Champaign County works to turn around. Through "system of care" services that embrace support networks, training, intervention and partnerships, AI helps kids – ages 10 to 18 – and their families deal with a multitude of issues.

With five administrators and approximately 20 people working as a "services support team," AI views itself not as a program but as a "cross system collaboration and communication" within the community, according to one of its ad sheets. Its many partners include Community Elements, the Don Moyers Boys and Girls Club, Family Advocacy of Champaign County and both C-U school districts.

AI "really is strengthening the services that we already have" in C-U, said Jonte Rollins, AI's social marketing and communications coordinator. "We're educating," she said. "We're supposed to be sharing the knowledge and strengthening what's already here. Not saying that it's bad, but just really trying to make it operate in a better functioning way."

AI practices "coordinated care," which entails bringing numerous experts to the table to look at the strengths and needs of a family and developing a plan that meets everyone's

satisfaction, one goal at a time. The organization's focus is on mental health, child welfare, education and juvenile justice.

Rollins said AI's federal funding, which comes from the Substance Abuse Mental Health Services Administration, allows them to look at disparities in Champaign County. The same disproportionate numbers among young black people also apply to low-income families, she said.

The Champaign County Mental Health Board provides AI with matching funds for services such as intervention programs and youth development programming. A report from CCMHB shows that the board contributed \$1,748,241 to AI from October 2012 to June 2013. The Illinois Department of Human Services also supports AI's funding, which began in 2009, after several years of applying for funds.

"There was six years of attempting to get the funds and still commitment to doing the work or trying to build the work to build our case for the funds and the process, and the Mental Health Board was very, very instrumental in that," said Rollins.

When talking to administrators from AI, phrases like "community-based," "youth-guided" "family-driven," "culturally and linguistically competent" and "trauma- and justice-informed" are stated regularly. But the words are described with sincerity and capture the core of AI's mission.

"It's really about helping youth and families sort of lay out their own roadmap, advocate for themselves and be able to navigate the system in a way that helps empower them to do better," said Rollins, a Champaign native.

Andrea Kirkland, a guidance counselor at Urbana Middle School, said an outside entity like AI is a good option for problems happening in her school.

"I think that's the thing that does ultimately help the most is that when we get involved with community programs like Access Initiative. The more that we could get that involvement is always helpful," said Kirkland.

Her colleague, social worker Stephen Higgins, agrees. He worked with AI last spring to help two groups of kids: girls who needed guidance and males who needed motivation. His strategy was to assist certain students who may not have received the guidance otherwise. Higgins said the families of the students were mostly supportive, though it wasn't a perfect setup.

"I think probably the struggle was then once we began putting some things in place, part of it, unfortunately, was then families didn't follow through with keeping their appointments," Higgins said. "I don't know how often that happened, but it did happen."

Higgins was satisfied with the overall collaboration, however, commending AI for its creativity and grass-roots approach of working directly with families for support. He continues to work with the core group of kids at Urbana Middle School who participated in the AI seminars.

AI administrator Ratisha Carter, a youth engagement specialist, said the young people involved with AI take part in important tasks. Their endeavors include writing grants, participating in training and taking part in the organization's governing body, with votes that count.

"That's a big thing for youth, to actually be a part of a say-so in their services," she said.

Carter once partnered with C-U schools during a summer leadership academy in which AI's older youth conveyed leadership, coping, social and etiquette skills to youngsters with various issues, including being chronically truant in school. She has seen some of the shyest kids imaginable – kids with disorders such as autism – build up their social skills and leave her leadership academy "talking away."

"It's a journey when you're young, to be able to manage your behaviors and to be able to learn how to fully cope and manage your mental health challenge. It's up and down, but I've seen so many youth grow and actually build relationships with us, as well as their parents," said Carter.

According to Rollins, one in five kids has mental health challenges to deal with. When left untreated, children with mental health problems tend to do poorly in school, act out and

sometimes get in trouble with the law. Rollins said one of AI's goals is to help the community recognize signs of mental illness so that kids can get the help they need earlier.

Rollins said 25 percent of kids in the juvenile justice system have a mental health issue, and many of them are black. In 2009, 82 percent of youth in the Champaign County Juvenile Detention Center Admissions were African-American.

"There's a lot of disparities that are happening here and disproportionality in all of our major child-serving systems," said Rollins.

Despite those challenges and the trials of collaboration and funding, Rollins said that people in her line of work ultimately want children to succeed. No matter how AI evolves in the future, maintaining an open mind, promoting a "pay it forward" mentality and thinking outside the box are key components of keeping kids and families engaged, she said.

"The success I would say, for me, is that kids and families are still getting served, and I truly believe that everyone has that intention in mind," Rollins said.

## **ACCESS Initiative Staff Update**

Month of: November 2013 Staff Name: Ratisha Carter Infrastructure Area(s): Youth Engagement

<u>Committee/Working Group Activity</u> – Please list any committee or working group meetings hosted by you. Also provide a short update (upcoming tasks, celebrations, etc.).

Youth Advisory Board Meeting	Prepared presentation for the National Federations of Families Conference.	Youth & Youth Engagement Specialist
		November 15th & 16th This meeting included the two youth who attended the National Federations of Families Conference
Youth MOVE Illinois Conference Planning	Brainstorm ideas and decided if we would like to collaborate with the Statewide NAMI "Piecing It All Together" Conference and host the youth track. This is the statewide Youth MOVE Illinois Conference planning.	November 17 <sup>th</sup> Call included participants from other Illinois Youth MOVE chapters

<u>Strategic Meetings/Community Presentations</u> – Please list any strategic meetings you attended.

Provide information regarding who was in attendance, the nature of the meeting, next steps, and outcomes.

Please list any community presentations you made on behalf of ACCESS. Provide information regarding your audience, purpose of the presentation, and collateral materials distributed.

Thursdays 8:30AM-10:00AM	Staff updates

Attended the National Federations of Families Conference in Washington, DC. November 13th-18th The Youth Engagement Specialist as well as two youth attended the conference and hosted a workshop on How to Engage Youth with Mental Health Challenges.

The Youth Engagement Specialist received a National Award for Leadership and Advocacy from the Youth MOVE National Chapter.

<u>Community Coalitions/Committees/Working Groups</u> – Please list any community coalition/committee/working group meetings you attended as an ACCESS representative. Provide information regarding the nature of the meeting, your role as an attendee, next steps, and outcomes.

Parents Promoting Presence Meeting (P3)

Held monthly

This meeting is a Psychoeducation and support group for the caregivers.

# Training and Technical Assistance and Service Delivery Report

## January 2014

Prepared by: Karen Crawford Simms, Wraparound Training and Technical Assistance Coordinator

## **SERVICES AND SUPPORTS UPDATE:**

## Referrals from December 1 to January 15, 2014

- 31 Referrals
- 3 Enrolled
- 14 Youth Pending Enrollment
- 9 Did not meet eligibility requirements and was referred to (or received only) targeted treatment or was referred to an outside source.

We currently have 12 youth/families that need an assessment in order for eligibility to be determined. The Pavilion no longer has the capacity to provide those services for us.

We hope that the changes in the SED rules may allow us to use functional impairment and multiple system involvement to help us determine eligibility. If these changes are approved we will then be able to further expedite our intake process.

## Referral Sources December 1 - January 15, 2015:

- 7 GAP
- 1 CRSA
- 19 Community Elements (SPARCS)
- 1 Champaign Schools
- 3 DCFS/Self Referrals

As of January 21, 2014 we are in the process of sending out re-engagement letters to the families that did not fully engage in our service process in the hopes of capturing some of the previous referrals.

## ADDITIONAL ACTIVITIES FOR THIS TIME PERIOD

- We have had some additional staff turnover and have hired 3 staff persons to help us adjust to the turnover;
- We continue to work on increasing our engagement and effectiveness. Now that we are fully staffed we will once again utilize the wraparound process;
- Our Spanish speaking bi-lingual ACCESS Coordinator has a few openings for new Spanish speaking families.

## Training and Technical Assistance Activities:

- 1. There was an informational session to support the launch of Motivational Interviewing Training 7 organizations (31 participants) attended part 1 of the training and part 2 will be held in late January.
- 2. Dr. Nicole Allen presented the base-line data from the organizational assessment to the trauma learning community. The presentation and information is being updated and will be distributed in January. Bi-monthly meetings will be scheduled to operationalize the information shared.
- 3. TF-CBT consultation calls are still occurring. Currently there are 11 child-serving agencies using TF-CBT concepts and skills in their practices.

We have completed our Year 6 SAMHSA Program Plan.



## **ACCESS Initiative Staff Update**

Month of: December 2013 Staff Name: Allison Brown Infrastructure Area(s): Evaluation

## **Committee/Working Group Activity**

## Strategic Meetings/Community Presentations.

Evaluation Staff Meetings	Weekly Evaluation Team meetings	Every Thursday 10:30am-12:00pm	Regular team meeting to update and discuss all evaluation activities
Community Interviewer Meetings	Weekly Community Interviewer	Every Thursday 9:00-10:30am	Regular team meeting to update and discuss interviewer issues and activities
ACCESS Admin Meeting	Monthly meetings	Every 3rd Monday of the month 1:30 – 3:00 pm	Meeting of ACCESS and Evaluation administrative staff to discuss issues and updates
Evaluation Site Liaison TA Meeting	Monthly meetings	Every 3 <sup>rd</sup> Monday of the month 12:00pm-1:00pm	Conference call with National Evaluation TA Site liaison
Evaluation Collaboration Team Meeting	Bi-annual meetings	Ongoing	Evaluation Collaboration Team (ECT) Meeting to engage community participation in Evaluation activities; Development of special workgroups
FACE Meeting(s)	As scheduled	Ongoing	Parent Liaison/Community Interviewer informed families about evaluation study and process
AICC Monthly	Monthly ACCESS	Every 3 <sup>rd</sup> Thursday	Preparation and participation of

Meeting	Initiative Coordinating Council meeting	of the Month	evaluation - monthly updates and discussions
ACCESS Initiative Trauma Learning Community	As scheduled	December 4, 2013	Presented baseline summary of trauma-informed organizational assessment data

## **Progress in Work Plan Activities**

GOAL 1: Building a sustainable and replicable service delivery system and infrastructure

GOAL 2: Increasing access to trauma- and justice-informed services and supports that reflect SOC values and principles

GOAL 3: Increasing youth, family, and community leadership and engagement across all levels

GOAL 4: Extending the capacity of organizations, agencies, informal supports and systems

GOAL 5: Promoting authentic cross system/ collaboration and communication

GOAL 6: Expanding the community's capacity to understand mental health

**GOAL 7:** Encouraging rigorous evaluation

National Evaluation	Ongoing /daily Evaluation staff	1. Recruiting new families into National Evaluation 2. Conducting baseline, 6, 12, 18 and 24-month community interviews of families enrolled in National Evaluation 3. Entering EDIF/CIUF, TRAC NOMS, and quarterly IPP data 4. Planning to collect and enter Services and Costs data in TMS system
Local Evaluation	Ongoing/daily Evaluation staff	Analyses for local Organization Assessment Survey     Data entry for InterAgency Network Tool     Archival services chart review tool
Continuous Quality Improvement	Ongoing/daily Evaluation staff	Planning Wraparound Fidelity Index     Maintaining contact with ACCESS staff

		regarding TRAC NOM audits 3. Triennial reports of CQI dashboard data
Required Reporting	Ongoing as required	Quarterly tracking and entry of TRAC IPP     Entering TRAC NOMS and EDIF data     National Evaluation monthly MEAR reports

Issues/Challenges

**Assistance Needed for the Upcoming Month** 

**IPP Accomplishments** 



## **ACCESS Initiative Staff Update**

Please be ready to verbally provide updates regarding the following information at our weekly staff meetings. If you are unable to attend, please send the team an email with this information by 5pm the day prior to our staff meeting. All activities should be directly related to our ACCESS Strategic Goals, our ACCESS Coordinated Work Plan, and IPP Goals.

Each team member is to submit a monthly report using this format. Reports should be submitted electronically to the Project Director one week following the last day of the month.

Month of: December 2013	Staff Name: Regina Crider	Infrastructure Area(s): Family Engagement		
Committee/Working Group Activity – Please list any committee or working group meetings hosted by you. Also provide a short update (upcoming tasks, celebrations, etc.).				
NA				
<u>Strategic Meetings/Community Presentations</u> – Please list any strategic meetings you attended. Provide information regarding who was in attendance, the nature of the meeting, next steps, and outcomes. Please list any community presentations you made on behalf of ACCESS. Provide information regarding your audience, purpose of the presentation, and collateral materials distributed.				
NA				
<u>Community Coalitions/Committees/Working Groups</u> – Please list any community coalition/committee/working group meetings you attended as an ACCESS representative. Provide information regarding the nature of the meeting, your role as an attendee, next steps, and outcomes.				
NA				

<u>Progress in Work Plan Activities</u> – Please highlight current work plan activities and progress made toward completion of these goals.

GOAL 1: Building a sustainable and replica Activity/Strategy 6: Coordinating Council/ Governance Development	FAB members are taking an active role in the CC by presenting about the activities and decisions made by the FAB.	infrastructure  FAB: attended regularly scheduled FAB meeting. Discussed the Family Run Organization. Laura Huth from Do Good Consulting was in attendance.	
Activity/Strategy 7: Workforce Development	NA	NA	
Goal 2: Increasing access to trauma- and j values and principles	ustice-informed services and sup	ports that reflect SOC	
NA			
Goal 3: Increasing youth, family, and com	munity leadership and engageme	ent across all levels	
Activity/Strategy 1: Training for Families/Caregivers	<ul> <li>Family Engagement Coordinator</li> <li>Family Partners</li> <li>Parent Trainer</li> </ul>	Stewards of Children- Darkness to Light (childhood sexual abuse training)	
Activity/Strategy 2: Youth – Training Topics	NA		
GOAL 4: Extending the capacity of organizations, agencies, informal supports and systems			
NA			
GOAL 5: Promoting authentic cross system	। / collaboration and communication	1	
Develop partnerships and collaborations with family/parent organizations to increase the visibility of the ACCESS Initiative			
GOAL 6: Expanding the community's capacity to understand mental health			
NA			
GOAL 7: Encouraging rigorous evaluation		1	
Activity/Strategy 1: Continuous Quality	NA	NA	

Improvement

Issues/Challenges - Please share any challenges.

o NA

<u>Assistance Needed for the Upcoming week</u> – Please share any assistance you need from the ACCESS team for upcoming activities or events.

• NA

**IPP Accomplishments** – Please provide any IPP goals accomplished in the last month.



## **ACCESS Initiative Staff Update**

Please be ready to verbally provide updates regarding the following information at our weekly staff meetings. If you are unable to attend, please send the team an email with this information by 5pm the day prior to our staff meeting. All activities should be directly related to our ACCESS Strategic Goals, our ACCESS Coordinated Work Plan, and IPP Goals.

Each team member is to submit a monthly report using this format. Reports should be submitted electronically to the Project Director one week following the last day of the month.

Month of: November 2013	Staff Name: Regina Crider	Infrastructure Area(s): Family Engagement
Committee/Working Group you. Also provide a short upo		mmittee or working group meetings hosted by ations, etc.).
NA		

<u>Strategic Meetings/Community Presentations</u> – Please list any strategic meetings you attended. Provide information regarding who was in attendance, the nature of the meeting, next steps, and outcomes. Please list any community presentations you made on behalf of ACCESS. Provide information regarding your audience, purpose of the presentation, and collateral materials distributed.

November 5 <sup>th</sup>	Meeting	•	A meeting with Allison Brown	A meeting with to discuss the implementation of the Family Journey Assessment (FJA) for Tier 2 Supports.
November 8 <sup>th</sup>	Meeting		A meeting with Sarah Phillips	Meeting to learn more about the Parent Mentor Project. Sarah will attend a P3 meeting to observe our interactions with families. We will be developing a referral process between to the agencies.

<u>Community Coalitions/Committees/Working Groups</u> – Please list any community coalition/committee/working group meetings you attended as an ACCESS representative. Provide information regarding the nature of the meeting, your role as an attendee, next steps, and outcomes.

<b>DHS-MH:</b> Individual Care Grant Working Group	Restructure and reorganize the Individual Care Grant (CG) Program	<ul> <li>Plans:</li> <li>Revise Rule 135 including (but not limited to) the Application Requirements, Eligibility Criteria and Appeals Process.</li> <li>Establishing additional levels of community-based, levels of care</li> </ul>
		<ul> <li>within the ICG Program to better serve children with serious emotional disturbance and their families.</li> <li>Pursue a legislative change that would permit the reinvestment of lapsed ICG funds into community infrastructure development to better support children with serious emotional disturbance in their homes and in their schools.</li> <li>Further refine ICG data collection and outcome measurement in order to identify those interventions that are most efficacious.</li> </ul>

<u>Progress in Work Plan Activities</u> – Please highlight current work plan activities and progress made toward completion of these goals.

## GOAL 1: Building a sustainable and replicable service delivery system and infrastructure

OOAL 1. Dulluling a sustainable and replicable service delivery system and infrastructure				
Activity/Strategy 6: Coordinating ( Governance Development	Council/ FAB members are taking an active role in the CC by presenting about the activities and decisions made by the FAB.	FAB: attended the Motivational Interviewing Meeting in lieu of the regularly scheduled CC Meeting.		
Activity/Strategy 7: Workforce Development	NA	NA		

Goal 2: Increasing access to trauma- and justice-informed services and supports that reflect SOC values and principles

FP Ulanda Hunter attended a	
presentation at Parkland College	
about PTSD. The information	
gathered from that meeting will be	

November 15, 2013

presented/disseminated across P3, P3 Conversation, YouthMOVE and Women Supporting Women

## Goal 3: Increasing youth, family, and community leadership and engagement across all levels

Activity/Strategy 1: Training for Families/Caregivers	<ul> <li>Family Engagement Coordinator</li> <li>Family Partners</li> <li>FAB Members</li> </ul>	Motivational Interviewing training			
	Family Engagement Coordinator	Attended and presented at the Federation of Families Conference			
Activity/Strategy 2: Youth - Training Topics	NA	NA			
GOAL 4: Extending the capacity of organi	zations, agencies, informal sup	ports and systems			
NA					
GOAL 5: Promoting authentic cross system/	GOAL 5: Promoting authentic cross system/ collaboration and communication				
Develop partnerships and collaborations with family/parent organizations to increase the visibility of the ACCESS Initiative					
GOAL 6: Expanding the community's capacity to understand mental health					
NA					
GOAL 7: Encouraging rigorous evaluation		l			
Activity/Strategy 1: Continuous Quality Improvement	NA	NA			
Issues/Challenges – Please share any challenges	llenges.				

Againtage Needed for the Uncoming week - Diogeo share any assist

<u>Assistance Needed for the Upcoming week</u> – Please share any assistance you need from the ACCESS team for upcoming activities or events.

NA

**IPP Accomplishments** – Please provide any IPP goals accomplished in the last month.

# EXPENDITURE APPROVAL LIST

VENDOR NO	VENDOR TRN NAME DTE	B TR N CD	TRANS NO	PO N	O CHECK	CHECK DATE	ACCOUNT	NUMBER	ACCOUNT	DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUN	D NO. 090	MENTAL	HEALTH									
*** DEP	T NO. 053	MENTAL	HEALTH BO	OARD								
25	CHAMPAIG	N COUNT	Y TREASUR	RER		RENT-	-GENERAL	CORP				
	11/13/13	02 VR	53- 454		496548	11/15/13	090-053	-533.50-00	FACILITY	Y/OFFICE RENTALS	OFFICE RENT NOV VENDOR TOTAL	2,884.17 2,884.17 *
41	CHAMPAIG	N COUNT	Y TREASUR	RER		HEAL	TH INSUR	FND 620				
1-	11/19/13			CLIC	496981				EMPLOYE	E HEALTH/LIFE INS	SEP-NOV HI, LI & HR	82.50
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00	11/25/13				497419				IMRF - I	EMPLOYER COST	IMRF 11/1 P/R	1,413.46
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104	CHAMPAIG	N COUNT	Y TREASUR	RER		HEAD	START FU	UND 104				
	11/13/13	02 VR	53- 441		496553	11/15/13	090-053	-533.92-00	CONTRIBU	UTIONS & GRANTS	SOC/EMOT HD SRT NOV VENDOR TOTAL	3,419.00 3,419.00 *
161	CHAMPAIG	N COUNT	Y TREASUR	RER		REG F	PLAN COM	M FND075				
	11/13/13				496557				CONTRIBU	UTIONS & GRANTS	YOUTH ACCESS NOV VENDOR TOTAL	2,167.00 2,167.00 *
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											VENDOR TOTAL	5,579.00 *



#### EXPENDITURE APPROVAL LIST

VENDOR NO	VENDOR T	RN B TR		RANS NO	PO NO CHECK NUMBER		ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
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18052	COMCAS	T CABLE	- MEN'	TAL H	EALTH ACCT	AC#8	771403010088314			
	11/18/1	3 02 VR	53-	464	497038	11/22/13	090-053-533.29-00	COMPUTER/INF TCH SERVICE	ES8771403010088314 NO	59.43
	12/05/1	3 01 VR	53-	1	497785	12/06/13	090-053-533.29-00	COMPUTER/INF TCH SERVIC	ES8771403010088314 DE	25.47
									VENDOR TOTAL	84.90 *
18203		ITY CHO								
	11/13/1	3 02 VR	53-	442	496598	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SELF DETERMIN NOV	2,917.00
									VENDOR TOTAL	2,917.00 *
18209	COMMUN	ITY ELEI	MENTS							
		3 02 VR		432	496599	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	CJ PROB SOLV NOV	12,494.00
		3 02 VR						CONTRIBUTIONS & GRANTS	CRISIS/ACCESS NOV	19,139.00
	11/13/1	3 02 VR	53-	432	496599	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	INTEGRATED BH NOV	6,964.00
		3 02 VR						CONTRIBUTIONS & GRANTS	PSYCH/PRIM CARE NOV	3,592.00
	11/13/1	3 02 VR	53-	432	496599	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	TIMES NOV	5,885.00
	11/13/1	3 02 VR	53-	432	496599	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	EARLY CHILD NOV	9,542.00
	11/13/1	3 02 VR	53-	432	496599	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	PLL FRONT END NOV	24,075.00
									VENDOR TOTAL	81,691.00 *
10000	~~~~									
18230					OF NORTHERN		PAIGN COUNTY	COMPRED IN COMP.	TIDAT CALL YOU	F 400 00
	11/13/1	3 02 VR	53-	433	496600	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FIRST CALL NOV	5,498.00
									VENDOR TOTAL	5,498.00 *
19346	CRISTS	NURSER	Y							
2,010		3 02 VR		443	496605	11/15/13	090-053-533 92-00	CONTRIBUTIONS & GRANTS	BEYOND BLUE NOV	5,833.00
	,				1,0000	11, 10, 10	0,0 000 000.,2		VENDOR TOTAL	5,833.00 *
										,
22300	DEVELO	PMENTAL	SERVI	CES CE	ENTER OF	CHAM	PAIGN COUNTY INC			
	11/13/1	3 02 VR	53-	444	496607	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FDC NOV	41,667.00
									VENDOR TOTAL	41,667.00 *

# EXPENDITURE APPROVAL LIST

		TRN B TR DTE N CD	Т	RANS NO	PO NO CHECK		ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUNI	NO. 09	0 MENTAL	HEAL	TH						
22730	DON M	OYER BOYS	& GI	RLS C	LUB					
	11/13/	13 02 VR	53-	445	496609	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	INTAKE SPECIAL NOV	3,333.00
	11/13/	13 02 VR	53-	445	496609	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	COMMUNITY HOME NOV	11,250.00
	11/13/	13 02 VR	53-	445	496609	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	WRAP FLEX FUNDS NOV	4,444.00
									VENDOR TOTAL	19,027.00 *
24215	EAST	CNTRL IL	REFUG	EE MU	TUAL ASSIST	CTR				
	11/13/	13 02 VR	53-	446	496611	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAMILY SUPPORT NOV	1,083.00
									VENDOR TOTAL	1,083.00 *
26000	FAMIL	Y SERVICE	OF C	HAMPA:	IGN COUNTY	GRAN	TS			
	11/13/	13 02 VR	53-	434	496616	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FIRST CALL NOV	2,500.00
	11/13/	13 02 VR	53-	434	496616	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SELF HELP NOV	2,369.00
	11/13/	13 02 VR	53-	434	496616	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SNR COUNSELING NOV	11,861.00
	11/13/	13 02 VR	53-	434	496616	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAM COUNSEL NOV	4,167.00
									VENDOR TOTAL	20,897.00 *
35349	ILLIN	I MEDIA								
	11/13/	13 02 VR	53-	456	496626	11/15/13	090-053-533.89-00	PUBLIC RELATIONS	EXPO INV 752-2 10/1	300.00
									VENDOR TOTAL	300.00 *
44570	MAHOM	ET AREA Y	OUTH	CLUB		601	EAST FRANKLIN			
	11/13/	13 02 VR	53-	447	496645	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	UNIVERSAL SCREEN NO	1,483.00
									VENDOR TOTAL	1,483.00 *
51600	NEWS	GAZETTE								
	11/13/	13 02 VR	53-	459	496651	11/15/13	090-053-533.89-00	PUBLIC RELATIONS	65730 1200260 10/9	262.50
	11/13/	13 02 VR	53-	459	496651	11/15/13	090-053-533.89-00	PUBLIC RELATIONS	65730 1200261 10/9	225.00
	11/13/	13 02 VR	53-	459	496651	11/15/13	090-053-533.89-00	PUBLIC RELATIONS	65730 1200260 10/10	262.50
	11/13/	13 02 VR	53-	459	496651	11/15/13	090-053-533.89-00	PUBLIC RELATIONS	65730 1200261 10/10	168.75
	11/13/	13 02 VR	53-	459	496651	11/15/13	090-053-533.89-00	PUBLIC RELATIONS	65730 1200261 10/11	56.25
	11/13/	13 02 VR	53-	459	496651	11/15/13	090-053-533.89-00	PUBLIC RELATIONS	65730 1200257 10/12	473.00
									VENDOR TOTAL	1,448.00 *

#### EXPENDITURE APPROVAL LIST

VENDOR NO	VENDOR TRN B TR NAME DTE N CD	Т	RANS NO	PO NO CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUN	D NO. 090 MENTAL	, HEAL	TH.						
56750	PRAIRIE CENTER	HEAL	TH SY	STEMS	GRAN'	TS			
	11/13/13 02 VR	53-	435	496663	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	DRUG COURT NOV	14,875.00
	11/13/13 02 VR	53-	435	496663	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	CJ SA TREAT NOV	833.00
	11/13/13 02 VR	53-	435	496663	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	PREVENTION NOV	4,713.00
	11/13/13 02 VR	53-	435	496663	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	PLL EXTEND CARE NOV	24,075.00
	11/13/13 02 VR	53-	435	496663	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	YOUTH SVCS NOV	8,750.00
								VENDOR TOTAL	53,246.00 *
57196	PROMISE HEALTH	ICARE							
	11/13/13 02 VR	53-	436	496666	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	WELLNESS NOV	3,000.00
	11/13/13 02 VR	53-	436	496666	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MH SVCS NOV	12,398.00
								VENDOR TOTAL	15,398.00 *
59434	RAPE, ADVOCACY	, cou	NSELI	NG & EDUC SRV	7CS				
	11/13/13 02 VR	53-	437	496670	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	RACES NOV	1,550.00
								VENDOR TOTAL	1,550.00 *
62520						AL HEALTH BOARD			
	11/25/13 03 VR	53-	466	497495	11/27/13	090-053-533.89-00	PUBLIC RELATIONS	4803 SCHN EXPO 10/1 VENDOR TOTAL	9.17 9.17 *
67290	SOAR PROGRAMS								
	11/13/13 02 VR	53-	448	496674	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	UNIVERSAL SCREEN NO	2,317.00
	11/13/13 02 VR	53-	448	496674	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAMILY ENGAGE NOV	12,097.00
								VENDOR TOTAL	14,414.00 *
67867	SPOC LLC				D/B/	A CHAMPAIGN TEL			
	11/20/13 02 VR	28-	196	497154	11/22/13	090-053-533.33-00	TELEPHONE SERVICE	1099288 BRKNS 11/12	36.62
								VENDOR TOTAL	36.62 *
71626	TALKS YOUTH DE	VELOP	MENT	INC NFP	TALK	S MENTORING			
	11/13/13 02 VR	53-	450	496680	11/15/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	TALKS NOV	2,742.00
								VENDOR TOTAL	2,742.00 *

# EXPENDITURE APPROVAL LIST

VENDOR NO	VENDOR T	CRN B TR	Ti	RANS NO	PO NO CHECK NUMBER	CHECK DATE	ACCOUNT	NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUNI	NO. 090	) MENTAL	HEAL'	ГН							
76107	UNITED	CEREBAL	PALS	Y LANI	OF LINCOLN						
	11/13/1	.3 02 VR	53-	455	496683	11/15/13	090-053-	533.07-00	PROFESSIONAL SERVICES	JOB FAIR 11/10 VENDOR TOTAL	1,000.00 1,000.00 *
76921	UNIVER	SITY OF	ILLING	OIS -F	SYCHOLOGICAI	SERV:	ICES				
	11/13/1	.3 02 VR	53-	451	496687	11/15/13	090-053-	533.92-00	CONTRIBUTIONS & GRANTS	RESTORA CIRCLES NOV	1,959.00
	11/13/1	.3 02 VR	53-	451					CONTRIBUTIONS & GRANTS	GIRLS ADVOCACY NOV VENDOR TOTAL	2,917.00 4,876.00 *
77280	UP CEN	TER OF C	'HAMPA	IGN CC	DUNTY	SUTTI	E 102				
		.3 02 VR						533.92-00	CONTRIBUTIONS & GRANTS	COUNSELING NOV	1,217.00
						,				VENDOR TOTAL	1,217.00 *
78120	URBANA	NEIGHBO	RHOOD	CONNE	ECTION CENTER	₹					
	11/13/1	.3 02 VR	53-	449	496691	11/15/13	090-053-	533.92-00	CONTRIBUTIONS & GRANTS	UNIVERSAL SCREEN NO VENDOR TOTAL	1,650.00 1,650.00 *
78888	VISA C	ARDMEMBE	R SERV	VICE -	- MENTAL HEAI	TH AC#4	798510049	573930			
		.3 01 VR							PUBLIC RELATIONS	3930 BGLS EXPO 10/1	147.42
	11/20/1	.3 01 VR	53-	467					PUBLIC RELATIONS	3930 EXPOPIZZA 10/1	80.74
	11/20/1	.3 01 VR	53-	467	497181	11/22/13	090-053-	522.02-00	OFFICE SUPPLIES	3930 STAPLES 10/30	378.97
	11/20/1	.3 01 VR	53-	467	497181	11/22/13	090-053-	522.02-00	OFFICE SUPPLIES	3930 STAPLES 11/4	19.58
	11/20/1	.3 01 VR	53-	467	497181	11/22/13	090-053-	533.89-00	PUBLIC RELATIONS	3930 PRKNS EXPO 11/	113.68
	11/20/1	.3 01 VR	53-	467	497181	11/22/13	090-053-	533.84-00	BUSINESS MEALS/EXPENSES	3930 OPH MTG 10/21	29.91
	11/20/1	.3 01 VR	53-	467	497181	11/22/13	090-053-	533.95-00	CONFERENCES & TRAINING	3930 DDB MTG 10/23	3.70
	11/20/1	.3 01 VR	53-	467	497181	11/22/13	090-053-	533.95-00	CONFERENCES & TRAINING	3930 DDB MTG 10/23	9.83
	11/20/1	.3 01 VR	53-	467	497181	11/22/13	090-053-	533.84-00	BUSINESS MEALS/EXPENSES	3930 OPH MTG 10/24 VENDOR TOTAL	35.48 819.31 *
78978	WDWS/W	HMS/WUIL	RADTO	)							
		.3 02 VR			497184	11/22/13	090-053-	533.89-00	PUBLIC RELATIONS	2821000080000 10/31	150.00
		.3 02 VR							PUBLIC RELATIONS	2821000060000 10/31	900.00

# EXPENDITURE APPROVAL LIST

	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						
	11/18/13 02 VR	53- 465	497184	11/22/13	090-053-533.89-00	PUBLIC RELATIONS	2821000070000 10/31 VENDOR TOTAL	902.00 1,952.00 *
81610	XEROX CORPORAT		496706	11 /15 /13	000 052 522 85 00	PHOTOCOPY SERVICES	INV 126796452 10/3	292.69
	11/13/13 UZ VR	53- 458	496706	11/15/13	090-053-533.85-00	PHOTOCOPY SERVICES	VENDOR TOTAL	292.69 *
602880	BRESSNER, BARB	ARA J.						
	11/13/13 02 VR	53- 453	496714	11/15/13	090-053-533.07-00	PROFESSIONAL SERVICES	PROF FEES NOV	2,625.00
	11/13/13 02 VR	53- 453	496714	11/15/13	090-053-533.89-00	PUBLIC RELATIONS	REIM EXPO EXP	138.69
	12/05/13 92 VR	53- 460	497955	12/06/13	090-053-533.07-00	PROFESSIONAL SERVICES	121 ADDL HRS FY13 VENDOR TOTAL	4,235.00 6,998.69 *
604568	CANFIELD, LYNN	Ī		MENT.	AL HEALTH BOARD			
	11/13/13 02 VR	53- 461	496718	11/15/13	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	180 MILES 10/2-30	101.70
							VENDOR TOTAL	101.70 *
619548	HOWARD-GALLO,	STEPHANIE		MENT.	AL HEALTH BD			
	11/13/13 02 VR	53- 462	496740	11/15/13	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	121 MILE 9/10-10/30	68.37
							VENDOR TOTAL	68.37 *
					MENTAL	HEALTH BOARD	DEPARTMENT TOTAL	311,597.99 *
					MENTAL	HEALTH	FUND TOTAL	311,597.99 *

#### EXPENDITURE APPROVAL LIST

	12/06/13										PAGE	7				
VENDOR NO	VENDOR NAME		B TR N CD	_	ANS NO		CHECK NUMBER	CHECK DATE	ACCOUN	r numb	BER	ACCOUNT DESCRIE	TION	ITEM DESCRIPTI	ON	EXPENDITURE AMOUNT
*** FUN	D NO. 1	06 E	OBL S	AFETY	SALES	TAX	FND									
*** DEP	T NO. 2	37 E	ELINQ	PREVE	NTION	GRAN	TS									
161				TY TRE			496557		PLAN CON			CONTRIBUTIONS &	GRANTS	YOUTH ACCESS NO	V	22,165.00
	11/13	, 13	, Z VIC .	200	13		190337	11/15/15	100 23	, 333.	J2 00	CONTRIBUTIONS	Oldavib	VENDOR TOTAL		22,165.00 *
										D	ELINQ	PREVENTION GRAN	TS	DEPARTMENT TO	TAL	22,165.00 *

PUBL SAFETY SALES TAX FND FUND TOTAL

22,165.00 \*

#### EXPENDITURE APPROVAL LIST

12/06/13 PAGE 10

	VENDOR TRN B TR T			CHECK DATE	ACCOUNT N	UMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND	NO. 641 ACCESS INIT	IATIVE GRAN	VT						
*** DEPT	NO. 053 MENTAL HEAL	TH BOARD							
41	CHAMPAIGN COUNTY TR	EASURER		HEALT	H INSUR F	'ND 620			
	11/19/13 03 VR 620-	183	496981 11,	/22/13	641-053-5	13.06-00	EMPLOYEE HEALTH/LIFE INS	SEP-NOV HI, LI & HR	16.50
	11/19/13 03 VR 620-	184	496981 11,	/22/13	641-053-5	13.06-00	EMPLOYEE HEALTH/LIFE INS	NOV HI & LI	576.60
								VENDOR TOTAL	593.10 *
88	CHAMPAIGN COUNTY TR	EASURER		T.M.R	.F. FUND	088			
00			497419 11.				IMRF - EMPLOYER COST	IMRF 11/1 P/R	402.40
	,,		· ,	, ,				VENDOR TOTAL	402.40 *
96	CHAMPAIGN COUNTY TR	ENGIIDED		ייי ג. א	ADVANCES				
90			497729 12	_			CONFERENCES & TRAINING	TD2197 VISA	899.00
	12,03,13 01 VK 011	-	157725 12,	, 00, 13	011 033 3	33.73 00	CONTENENTOLD & FIGURE	VENDOR TOTAL	899.00 *
188	CHAMPAIGN COUNTY TR				L SECUR F				
	11/25/13 06 VR 188-	112	497424 11,	/27/13	641-053-5	13.01-00	SOCIAL SECURITY-EMPLOYER		299.15
								VENDOR TOTAL	299.15 *
572	ABSOPURE WATER								
	11/25/13 03 VR 641-	138	497425 11,	/27/13	641-053-5	22.02-00	OFFICE SUPPLIES	INV 82957033 10/2	26.90
	11/25/13 03 VR 641-	138	497425 11,	/27/13	641-053-5	33.51-00	EQUIPMENT RENTALS	INV 54265725 9/30	9.00
								VENDOR TOTAL	35.90 *
18053	COMCAST CABLE - ACC	ESS INITIAT	TIVE ACCT	AC#87	714030102	17756			
	11/13/13 02 VR 641-	135	496596 11,	/15/13	641-053-5	33.29-00	COMPUTER/INF TCH SERVICES	58771403010217756 OC	94.85
								VENDOR TOTAL	94.85 *
18209	COMMUNITY ELEMENTS								
	11/13/13 02 VR 641-	132	496599 11,	/15/13	641-053-5	33.92-00	CONTRIBUTIONS & GRANTS	SCHOOL BASED NOV	5,583.00

5,583.00 \*

VENDOR TOTAL

# EXPENDITURE APPROVAL LIST

	VENDOR TRN B TR NAME DTE N CD	TRANS NO	S PO NO CHECK NUMBER		ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND	NO. 641 ACCESS	INITIAT	VE GRANT					
22730	DON MOYER BOYS	& GIRLS	CLUB					
	11/13/13 02 VR	641- 131	496609	11/15/13	641-053-533.92-	00 CONTRIBUTIONS & GRANTS	SVCS/ADMIN TEAM NOV	15,367.00
	11/13/13 02 VR	641- 131	496609	11/15/13	641-053-533.92-	00 CONTRIBUTIONS & GRANTS	SVCS/SUPPORT STF NO	35,856.00
							VENDOR TOTAL	51,223.00 *
56750	PRAIRIE CENTER	R HEALTH S	SYSTEMS	GRAN	TS			
	11/13/13 02 VR	641- 133	496663	11/15/13	641-053-533.92-	00 CONTRIBUTIONS & GRANTS	CUL & LING SVCS NOV	6,425.00
							VENDOR TOTAL	6,425.00 *
63561	SEABOAT INC							
	12/03/13 90 VR	641- 141	497885	12/06/13	641-053-533.84-	00 BUSINESS MEALS/EXPENSES	AICC MTG 10/24	170.27
							VENDOR TOTAL	170.27 *
67290	SOAR PROGRAMS							
07250		641- 134	496674	11/15/13	641-053-533 92-	00 CONTRIBUTIONS & GRANTS	YOUTH MOVE NOV	4,444.00
	11, 13, 13 02 11	011 15	1300,1	11/15/15	011 033 333.32	oo commisciions a onanis	VENDOR TOTAL	4,444.00 *
67867				•	A CHAMPAIGN TEL			
	11/20/13 02 VR	28- 196	497154	11/22/13	641-053-533.33-	00 TELEPHONE SERVICE	1099288 BRKNS 11/12	33.96
							VENDOR TOTAL	33.96 *
78552	VERIZON WIRELE	ESS-MNTL F	HLTH BD/ACCESS	INT AC 2	86369166-00001			
	11/25/13 03 VR	641- 139	9 497508	11/27/13	641-053-533.33-	00 TELEPHONE SERVICE	28636916600001 11/2	486.23
							VENDOR TOTAL	486.23 *
78892	VISA CARDMEMBE	ER SERVICE	ES-ACCESS INIT	ITIV AC#4	798510049574342			
	11/25/13 03 VR	641- 140	497518	11/27/13	641-053-533.29-	00 COMPUTER/INF TCH SERVIC	ES4342 MITEL 10/14	73.53
	11/25/13 03 VR					00 COMPUTER/INF TCH SERVIC		11.95
	11/25/13 03 VR	641- 140	497518	11/27/13	641-053-533.29-	00 COMPUTER/INF TCH SERVIC	ES4342 BLU NET 10/21	134.87
	11/25/13 03 VR			-		00 JOB-REQUIRED TRAVEL EXP		78.00
	11/25/13 03 VR					00 NON-EMPLOYEE TRAINING,S		825.00
	11/25/13 03 VR	641- 140	497518	11/27/13	641-053-533.18-	00 NON-EMPLOYEE TRAINING,S	EM4342 NAT FED 11/7	550.00

# EXPENDITURE APPROVAL LIST

VENDOR NO	VENDOR NAME	TRN B T		TRANS NO	PO NO CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUNI	D NO. 64	1 ACC	SS IN	TIATIV	E GRANT					
		13 03 7						NON-EMPLOYEE TRAINING		550.00
		′13 03 V ′13 03 V						NON-EMPLOYEE TRAINING NON-EMPLOYEE TRAINING		750.00 784.60
		13 03 \						NON-EMPLOYEE TRAINING	·	784.60
		′13 03 V ′13 03 V						NON-EMPLOYEE TRAINING NON-EMPLOYEE TRAINING		784.60 784.60
									VENDOR TOTAL	6,111.75 *
78975	WBCP-	AM				SUITE	E D			
	11/13/	13 02 \	'R 641-	136	496698	11/15/13	641-053-533.89-00	PUBLIC RELATIONS	934000100008 10/31 VENDOR TOTAL	400.00 400.00 *
81610	XEROX	CORPOR	RATION							
	11/13/	13 02 V	7R 641-	137	496706	11/15/13	641-053-533.85-00	PHOTOCOPY SERVICES	INV 070853766 11/1 VENDOR TOTAL	525.21 525.21 *
							MENTAL	HEALTH BOARD	DEPARTMENT TOTAL	77,726.82 *
							ACCESS	INITIATIVE GRANT	FUND TOTAL	77,726.82 *

#### EXPENDITURE APPROVAL LIST

									12/06/	13				PAGE	13		
VENDOR V			B TR N CD	TRAI NO			CHECK NUMBER	CHECK DATE	ACCOUNT	'NUMBER	ACCOUNT	DESCRIPTION	ΓΊ	TEM DESCRIPTI	ON	EXPENDITUR AMOUNT	E
*** FUND	NO. 68	5 E	DRUG C	OURTS PI	ROGRA	ΔM											
*** DEPT	NO. 05	3 M	<b>I</b> ENTAL	HEALTH	BOAR	RD											
56750	PRAIR	RIE C	CENTER	HEALTH	SYST	EMS		GRAN	TS								
	11/14/	'13 C	)2 VR	685-	3		496663	11/15/13	685-053	-533.92-00	CONTRIB	SUTIONS & GRANTS		R-JUN DRUG CR VENDOR TOTAL	T GR	23,666.49	*
										MENTAL	HEALTH	BOARD	Ι	DEPARTMENT TO	TAL	23,666.49	*
										DRUG C	OURTS PR	OGRAM	FU	UND TOTAL		23,666.49	*

700,687.30 \*

REPORT TOTAL \*\*\*\*\*

# EXPENDITURE APPROVAL LIST

	VENDOR TRI	N B TR E N CD		RANS NO	PO NO CHECK NUMBER		ACCOUNT 1	NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUNI	NO. 090	MENTAL	HEALT	TH.							
*** DEPT	Г NO. 053	MENTAL	HEALT	н воа	RD						
25	CHAMPAIC	GN COUN	TY TRE	ASURE	R	RENT	-GENERAL (	CORP			
	12/10/13	01 VR	53-	22	498069	12/12/13	090-053-5	533.92-00	CONTRIBUTIONS & GRANTS	DEC OFFICE RENT	2,884.17
	1/08/14	04 VR	53-	31	499335	1/13/14	090-053-5	533.50-00	FACILITY/OFFICE RENTALS	OFFICE RENT JAN VENDOR TOTAL	2,884.17 5,768.34 *
88	CHAMPAI	GN COUN	TY TRE	'ASURE	R	T . M . 1	R.F. FUND	088			
	12/23/13			77					IMRF - EMPLOYER COST	IMRF 11/15 P/R	1,413.64
	12/23/13			80		, ,			IMRF - EMPLOYER COST	IMRF 11/27 P/R	1,577.08
										VENDOR TOTAL	2,990.72 *
104	CHAMPAIC	an coiin	דע דפוּ	'A SIIP F	P	неар	START FUN	ND 104			
104	12/10/13			10					CONTRIBUTIONS & GRANTS	SOC/EMOT DIS DEC	3,419.00
	1/08/14			41					CONTRIBUTIONS & GRANTS	SOC/EMOT SVCS JAN	3,419.00
	_,					_,,			00	VENDOR TOTAL	6,838.00 *
161	CHAMPAIC	GN COUN	TY TRE	ASURE	R	REG :	PLAN COMM	FND075			
	12/10/13	01 VR	53-	9	498079	12/12/13	090-053-5	533.92-00	CONTRIBUTIONS & GRANTS	YOUTH ACCESS CTR DE	2,167.00
	1/08/14	04 VR	53-	40	499347	1/13/14	090-053-5	533.92-00	CONTRIBUTIONS & GRANTS	YOUTH ACCSS CNTR JA	2,167.00
										VENDOR TOTAL	4,334.00 *
176	CHAMPAIC	GN COUN	TY TRE	ASURE	R	SELF	-FUND INS	FND476			
170	12/27/13			65					INSURANCE	FY13 PROP INS 090	208.73
	12/27/13			65		•			INSURANCE	FY13 LIAB INS 090	3,312.58
	, ,					, ,				VENDOR TOTAL	3,521.31 *
179	CHAMPAIC	an Colin	אקיד עיד	ASURE	R	CHI'D	ADVC CTR	FND679			
1.7	12/10/13			8					CONTRIBUTIONS & GRANTS	COUNSELING DEC	3,090.00
	1/08/14			39					CONTRIBUTIONS & GRANTS	CAC COUNSEL JAN	3,090.00
	2,00,11	'*'	35	22	122312	1, 13, 11		223.32 00	Commission a old at the	VENDOR TOTAL	6,180.00 *

# EXPENDITURE APPROVAL LIST

	VENDOR TRN B TF NAME DTE N CI		TRANS NO	PO NO CHECK NUMBER	CHECK DATE	ACCOUNT	NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND	NO. 090 MENTA	AL HEAI	TH							
188	CHAMPAIGN COU	NTY TE	REASURE	ER	SOCIA	AL SECUR	FUND188			
	12/23/13 80 VF	188-	114	498851	12/30/13	090-053	-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 11/15 P/R	1,050.95
	12/23/13 80 VF	R 188-	118	498851	12/30/13	090-053	-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 11/27 P/R VENDOR TOTAL	1,065.00 2,115.95 *
572	ABSOPURE WATE	ER								
	12/13/13 01 VF	8 53-	25	498338	12/20/13	090-053-	-533.51-00	EQUIPMENT RENTALS	INV 54351499 DEC	9.00
	12/16/13 92 VF	8 53-	475	498338	12/20/13	090-053	-522.02-00	OFFICE SUPPLIES	INV 83013795 11/26 VENDOR TOTAL	33.50 42.50 *
5780	BP COMPUTER S	SERVICE	ES							
	12/09/13 91 VF	8 53-	474	498096	12/12/13	090-053-	-522.44-00	EQUIPMENT LESS THAN \$5000	OINV 4814 11/27	995.00
	1/08/14 04 VF	8 53-	30	499371	1/13/14	090-053	-533.07-00	PROFESSIONAL SERVICES	1ST QTR CONSULT FEE VENDOR TOTAL	625.00 1,620.00 *
13375	CENTER FOR WO	MEN IN	N TRANS	SITION						
	12/10/13 01 VF	8 53-	2	498104	12/12/13	090-053	-533.92-00	CONTRIBUTIONS & GRANTS	AWP DEC	5,579.00
	1/08/14 04 VF	8 53-	32	499387	1/13/14	090-053	-533.92-00	CONTRIBUTIONS & GRANTS	AWP JAN VENDOR TOTAL	5,579.00 11,158.00 *
18203	COMMUNITY CHO	OICE, I	INC							
	12/10/13 01 VF	8 53-	11	498118	12/12/13	090-053-	-533.92-00	CONTRIBUTIONS & GRANTS	SELF DETERM DEC	2,917.00
	1/08/14 04 VF	8 53-	42	499396	1/13/14	090-053-	-533.92-00	CONTRIBUTIONS & GRANTS	SELF DETERMINATN JA VENDOR TOTAL	2,917.00 5,834.00 *
18209	COMMUNITY ELE	EMENTS								
	12/10/13 01 VF	8 53-	3					CONTRIBUTIONS & GRANTS	CJ & PROB SOLV DEC	12,494.00
	12/10/13 01 VF	8 53-	3	498119	12/12/13	090-053	-533.92-00	CONTRIBUTIONS & GRANTS	CRISIS/ACCESS DEC	19,139.00
	12/10/13 01 VF	8 53-	3	498119	12/12/13	090-053	-533.92-00	CONTRIBUTIONS & GRANTS	INTEGRATED BH DEC	6,964.00
	12/10/13 01 VF	8 53-	3		, ,			CONTRIBUTIONS & GRANTS	PSYCHIATRIC DEC	3,592.00
	12/10/13 01 VF		3					CONTRIBUTIONS & GRANTS	EARLY CH MH DEC	9,542.00
	12/10/13 01 VF	8 53-	3	498119	12/12/13	090-053	-533.92-00	CONTRIBUTIONS & GRANTS	PLL FRONT END DEC	24,075.00

# EXPENDITURE APPROVAL LIST

	VENDOR TRI	N B TR E N CD	Т	RANS NO	PO NO CHECK NUMBER		ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND	NO. 090	MENTAL	HEAL	TH						
	1/08/14	04 VR	53-	33	499397	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JAN CJ PROB SOLV	12,494.00
	1/08/14	04 VR	53-	33	499397	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JAN CRISIS/ACCESS	19,139.00
	1/08/14	04 VR	53-	33	499397	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JAN INTEGRATED BH	6,964.00
	1/08/14	04 VR	53-	33	499397	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JAN PSYCH/PRIM CARE	3,592.00
	1/08/14	04 VR	53-	33	499397	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JAN EARLY C'HOOD	9,542.00
	1/08/14	04 VR	53-	33	499397	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JAN PLL FRONT END	24,075.00
									VENDOR TOTAL	151,612.00 *
18230	COMMUNI'	TY SERV	ICE C	ENTER	OF NORTHERN	CHAM	PAIGN COUNTY			
	12/10/13	01 VR	53-	4	498120	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FIRST CALL DEC	5,498.00
	1/08/14	04 VR	53-	34	499398	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	1ST CALL JAN	5,498.00
									VENDOR TOTAL	10,996.00 *
19346	CRISIS	NURSERY								
	12/10/13	01 VR	53-	12	498124	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	BEYOND BLUE DEC	5,833.00
	1/08/14	04 VR	53-	43	499403	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	BEYOND BLUE JAN	5,833.00
									VENDOR TOTAL	11,666.00 *
22300	DEVELOP	MENTAL	SERVI	CES CE	ENTER OF	CHAM	PAIGN COUNTY INC			
	12/10/13	01 VR	53-	13	498128	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAM DEV CENTER DEC	41,667.00
	1/08/14	04 VR	53-	44	499408	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAM DEV CENTER JAN	41,667.00
									VENDOR TOTAL	83,334.00 *
22730	DON MOY	ER BOYS	& GI	RLS CI	LUB					
	12/10/13	01 VR	53-	14	498132	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	INTAKE SPECIALST DE	3,964.00
	12/10/13	01 VR	53-	14	498132	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	COMMUNITY HOME DEC	11,250.00
	12/10/13	01 VR	53-	14	498132	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	WRAP FLEX FUNDS DEC	4,444.00
	1/08/14			45	499413	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	INTAKE SPECLST JAN	3,964.00
	1/08/14	04 VR	53-	45	499413	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	COMMUNITY HOME JAN	11,250.00
	1/08/14	04 VR	53-	45	499413	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	WRAP FLEX FUNDS JAN	4,444.00
									VENDOR TOTAL	39,316.00 *

# EXPENDITURE APPROVAL LIST

VENDOR NO		TRN B TR DTE N CD		ANS F	NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUN	D NO. 09	0 MENTAL	HEALT	'H						
24215	EAST	CNTRL IL	REFUGE	E MUTU	JAL ASSIST C	TR				
	12/10/	13 01 VR	53-	15	498137	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAMILY SUPPORT DEC	1,083.00
	1/08/	14 04 VR	53-	46	499416	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAMILY SUPPORT JAN	1,083.00
									VENDOR TOTAL	2,166.00 *
26000	FAMIL	Y SERVICE	OF CH	IAMPAIG	N COUNTY	GRAN	rs			
	12/10/	13 01 VR	53-	24	498143	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	1ST CALL DEC	2,500.00
	12/10/	13 01 VR	53-	24	498143	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SELF HELP DEC	2,369.00
	12/10/	13 01 VR	53-	24				CONTRIBUTIONS & GRANTS	SENIOR COUNSEL DEC	11,861.00
	1/08/	14 04 VR	53-	35	499421	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	1ST CALL JAN	2,500.00
	1/08/	14 04 VR	53-	35	499421	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SELF HELP JAN	2,369.00
	1/08/	14 04 VR	53-	35	499421	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SNR COUNSEL JAN	11,861.00
									VENDOR TOTAL	33,460.00 *
44570	МАНОМ	ET AREA Y	OUTH C	LUB		601 I	EAST FRANKLIN			
	12/10/	13 01 VR	53-	16	498171	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	UNIV SCREENING DEC	1,483.00
	1/08/	14 04 VR	53-	47	499459	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	UNIV SCREENING JAN	1,483.00
									VENDOR TOTAL	2,966.00 *
51600	NEWS	GAZETTE								
	1/09/	14 01 VR	53-	26	499467	1/13/14	090-053-522.03-00	BOOKS, PERIODICALS & MAN.	AC 218675 2014 1YR	178.32
									VENDOR TOTAL	178.32 *
55635	PIATO	CAFE, IN	IC.			FC2				
	1/08/	14 04 VR	53-	28	499476	1/13/14	090-053-533.89-00	PUBLIC RELATIONS	INV 3137 12/18	525.25
									VENDOR TOTAL	525.25 *
56750	PRAIR	IE CENTER	HEALT	H SYS'I	TEMS	GRAN	rs			
	12/10/	13 01 VR	53-	5	498184	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	DRUG COURT DEC	14,875.00
	12/10/	13 01 VR	53-	5	498184	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	CJ SUB ABUSE DEC	833.00
	12/10/	13 01 VR	53-	5	498184	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	PREVENTION DEC	4,713.00
	12/10/	13 01 VR	53-	5	498184	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	PLL EXTEND CARE DEC	24,075.00

#### EXPENDITURE APPROVAL LIST

	VENDOR TRN NAME DTE	B TR N CD	Т	RANS NO	PO NO CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND	NO. 090 N	MENTAL	HEAL	ТН						
	12/10/13 (	01 VR	53-	5	498184	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	YOUTH SRVS DEC	8,750.00
	1/08/14 (	04 VR	53-	36	499478	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	DRUG COURT JAN	14,875.00
	1/08/14 (	04 VR	53-	36	499478	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	CJ SUB TREATMNT JAN	833.00
	1/08/14 (	04 VR	53-	36	499478	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	PREVENTION JAN	4,713.00
	1/08/14 (	)4 VR	53-	36	499478	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	PLL EXT CARE JAN	24,075.00
	1/08/14 (	04 VR	53-	36	499478	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	YOUTH SVCS JAN	8,750.00
									VENDOR TOTAL	106,492.00 *
57196	PROMISE H	HEALTH	CARE							
	12/10/13 (	)1 VR	53-	6	498186	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	WELLNESS DEC	3,000.00
	12/10/13 (	)1 VR	53-	6	498186	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MH SERVICES DEC	12,398.00
	1/08/14 (	04 VR	53-	37	499481	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	WELLNESS PRGM JAN	3,000.00
	1/08/14 0	04 VR	53-	37	499481	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MH SVCS JAN	12,398.00
									VENDOR TOTAL	30,796.00 *
59434	RAPE, ADV	JOCACY	, COU	NSELIN	IG & EDUC SRY	/CS				
	12/10/13 (	)1 VR	53-	7	498188	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	RAPE/ADV/COUNSEL DE	1,550.00
	1/08/14 0	)4 VR	53-	38	499484	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	RAPE/ADVC/COUNSL JA	1,550.00
									VENDOR TOTAL	3,100.00 *
62674	SAVANNAH	FAMIL	Y INS'	TITUTE	I, INC.					
	1/08/14 0	)4 VR	53-	53	499491	1/13/14	090-053-533.07-00	PROFESSIONAL SERVICES	3RD QTR CONSULT FEE	37,500.00
									VENDOR TOTAL	37,500.00 *
67290	SOAR PROG	GRAMS								
	12/10/13 0	)1 VR	53-	17	498204	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	UNIV SCREENING DEC	2,317.00
	12/10/13 0	)1 VR	53-	17	498204	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAMILY ENGAGEMNT DE	12,097.00
	1/08/14 0	)4 VR	53-	48	499493	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	UNIV SCREENING JAN	2,317.00
	1/08/14 0	)4 VR	53-	48	499493	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAM ENGAGEMENT JAN	12,097.00
									VENDOR TOTAL	28,828.00 *
67867	SPOC LLC					D/B/A	A CHAMPAIGN TEL			
	1/08/14 0	)3 VR	28-	9	499496			TELEPHONE SERVICE	INV 1099980 12/12	24.22

# EXPENDITURE APPROVAL LIST

VENDOR NO	VENDOR TRN B TR NAME DTE N CD	TRAN: NO			ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUN	D NO. 090 MENTAL	HEALTH						
	1/03/14 92 VR	28- 21	2 499496	1/13/14	090-053-533.33-00	TELEPHONE SERVICE	INV 1099980 12/12 VENDOR TOTAL	4.21 28.43 *
71626	TALKS YOUTH DE	VELOPMEN'	T INC NFP	TALK	S MENTORING			
	12/10/13 01 VR					CONTRIBUTIONS & GRANTS	MEN OF WISDOM DEC	2,742.00
	1/08/14 04 VR	53- 50				CONTRIBUTIONS & GRANTS	MEN OF WISDOM JAN VENDOR TOTAL	2,742.00 5,484.00 *
75514	UIF/EBERTFEST			119	GREGORY HALL			
, , , ,	1/08/14 04 VR	53- 50	499508		090-053-533.89-00	PUBLIC RELATIONS	SPONSORSHIP FEE 201 VENDOR TOTAL	25,000.00 25,000.00 *
76921	UNIVERSITY OF	ILLINOIS	-PSYCHOLOGICA	L SERV	ICES			
	12/10/13 01 VR					CONTRIBUTIONS & GRANTS	RESTOR CIRCLES DEC	1,959.00
	12/10/13 01 VR		0 498220	12/12/13	090-053-533.92-00	CONTRIBUTIONS & GRANTS	GIRLS ADVOCACY DEC	2,917.00
	1/08/14 04 VR	53- 53	1 499512	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	RESTORTV CRCL JAN	1,959.00
	1/08/14 04 VR	53 - 5	1 499512	1/13/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	GIRLS ADVOCACY JAN	2,917.00
							VENDOR TOTAL	9,752.00 *
77280	UP CENTER OF C	HAMPATAN	COLINTY	יידוופ	E 102			
,,200	12/10/13 01 VR					CONTRIBUTIONS & GRANTS	UP CENTER DEC	1,217.00
	1/08/14 04 VR					CONTRIBUTIONS & GRANTS	UP CENTER JAN	1,217.00
	, ,			-, -,			VENDOR TOTAL	2,434.00 *
78120	URBANA NEIGHBO	ישויטט כטי	NNECTION CENTE	D				
70120	12/10/13 01 VR				090-053-533 92-00	CONTRIBUTIONS & GRANTS	UNIV SCREENING DEC	1,650.00
	1/08/14 04 VR					CONTRIBUTIONS & GRANTS	UNIV SCREENING JAN	1,650.00
	_, 55, 5 _ 440		133313	1, 10, 11	232 000 000.02	January Control of Control	VENDOR TOTAL	3,300.00 *
78550	VERIZON WIRELE	SS-MENTAI	L HEALTH BOARD	ልሮ 3	86356887-00001			
, 5556	12/09/13 91 VR					TELEPHONE SERVICE	38635688700001 11/2	69.87
	12/10/13 01 VR					CONTRIBUTIONS & GRANTS	38635688700001 11/2	99.73

#### EXPENDITURE APPROVAL LIST

	VENDOR TRN B TR NAME DTE N CD	TRAI N			ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND	NO. 090 MENTAL	HEALTH						
	1/08/14 04 VR	53-	499516	1/13/14	090-053-533.33-00	TELEPHONE SERVICE	38635688700001 12/2 VENDOR TOTAL	148.80 318.40 *
78888	VISA CARDMEMBE	R SERVI	CE - MENTAL HEA	LTH AC#4	798510049573930			
	1/08/14 04 VR	53-	499525	1/13/14	090-053-533.95-00	CONFERENCES & TRAINING	3930 MARRIOTT 12/7	147.88
	1/08/14 04 VR	53-	499525	1/13/14	090-053-533.95-00	CONFERENCES & TRAINING	3930 MARRIOTT 12/7	138.88
	1/08/14 04 VR	53-	499525	1/13/14	090-053-533.95-00	CONFERENCES & TRAINING	3930 MARRIOTT 12/7	138.88
	1/08/14 04 VR	53-	499525	1/13/14	090-053-533.95-00	CONFERENCES & TRAINING	3930 MARRIOTT 12/7	138.88
	1/08/14 04 VR	53-	499525	1/13/14	090-053-533.95-00	CONFERENCES & TRAINING	3930 IHOTEL CNF 12/	300.00
	1/08/14 90 VR	53 - 4	9 499525	1/13/14	090-053-533.84-00	BUSINESS MEALS/EXPENSES	3930 ORIG PANC 11/1	27.78
	1/08/14 90 VR	53- 4	9 499525	1/13/14	090-053-533.95-00	CONFERENCES & TRAINING	3930 EINSTEIN 11/20	9.34
	1/08/14 90 VR	53 - 4	9 499525	1/13/14	090-053-533.84-00	BUSINESS MEALS/EXPENSES	3930 BLACK DOG 11/2	45.35
							VENDOR TOTAL	946.99 *
81610	XEROX CORPORAT	'ION						
31313			77 499128	12/30/13	090-053-533-85-00	PHOTOCOPY SERVICES	INV 127789628 12/3	292.69
	,, , ,			,,			VENDOR TOTAL	292.69 *
500000	DDEGGNED DADD							
602880	BRESSNER, BARB			7 /7 2 /7 4	000 050 500 05 00			0 605 00
	1/08/14 04 VR			, ,		PROFESSIONAL SERVICES	DEC PROFESSIONAL FE	2,625.00
	1/08/14 04 VR	53	29 499543	1/13/14	090-053-533.07-00	PROFESSIONAL SERVICES	JAN PROFESSIONAL FE VENDOR TOTAL	2,625.00 5,250.00 *
								3,200.00
604568	CANFIELD, LYNN	•		MENT	AL HEALTH BOARD			
	12/09/13 91 VR	53- 4	70 498244	12/12/13	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	83.5 MILE 11/4-22	47.18
				•			VENDOR TOTAL	47.18 *
			¥					
609500	CRAWFORD, NANC			MENT	AL HEALTH BOARD			
	12/09/13 91 VR	53- 47	1 498251	12/12/13	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP		84.19
							VENDOR TOTAL	84.19 *
611802	DRISCOLL, MARK			тиям	AL HEALTH			
011002	12/09/13 91 VR		2 498258		•	JOB-REQUIRED TRAVEL EXP	459 MTLE 10/1-11/25	259.34
	==, 55, 25 52 110		_ 150250	,,	000 000.12 00	til magornas manda ann	10, 11, 20	202.01

#### EXPENDITURE APPROVAL LIST

	VENDOR TRN B TR NAME DTE N CD	T	TRANS NO	PO NO CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND	NO. 090 MENTAL	HEAL	тн						
	12/09/13 91 VR 12/09/13 91 VR 12/09/13 91 VR	53-	472	498258	12/12/13		JOB-REQUIRED TRAVEL EXP JOB-REQUIRED TRAVEL EXP PUBLIC RELATIONS	PARKING 10/1-11/25 TOLLS 11/22 REIM SCHN ICE 10/12 VENDOR TOTAL	1.40 9.00 15.56 285.30 *
619548	HOWARD-GALLO,	STEPH	LANIE		MENT	AL HEALTH BD			
	12/09/13 91 VR	53-	473	498268	12/12/13	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	12 MILE 11/1-20	6.78
	12/09/13 91 VR	53-	473	498268	12/12/13	090-053-533.95-00	CONFERENCES & TRAINING	372 MILE CONF 11/5	210.18
	12/09/13 91 VR	53-	473	498268	12/12/13	090-053-533.95-00	CONFERENCES & TRAINING	CONF PARKING 11/5	9.75
								VENDOR TOTAL	226.71 *
641999	SUTER, SUSAN								
	12/23/13 94 VR	53-	476	499210	12/30/13	090-053-533.95-00	CONFERENCES & TRAINING	160 MILE 11/18	90.40
	1/08/14 04 VR	53-	27	499616	1/13/14	090-053-533.95-00	CONFERENCES & TRAINING	100 MILE 12/5-6	56.50
	1/08/14 04 VR	53-	27	499616	1/13/14	090-053-533.95-00	CONFERENCES & TRAINING	PARKING 12/5-6	9.00
								VENDOR TOTAL	155.90 *
644010	TRACY, PETER				MENT	AL HEALTH BOARD			
	1/08/14 04 VR	53-	57	499619	1/13/14	090-053-533.95-00	CONFERENCES & TRAINING	100 MILE 12/5-6	56.50
								VENDOR TOTAL	56.50 *
						MENTAL	HEALTH BOARD	DEPARTMENT TOTAL	647,000.68 *
						MENTAL	HEALTH	FUND TOTAL	647,000.68 *

# EXPENDITURE APPROVAL LIST

VENDOR NO	VENDOR NAME		B TR N CD	TRANS NO	PO NO CHECK		ACCOUNT	NUMBER	ACCOUNT DESCR	IPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUNI	NO. 10	06 1	PUBL SA	AFETY SALE	S TAX FND							
*** DEP1	r NO. 23	37 1	DELINQ	PREVENTIO	N GRANTS							
161	CHAME	PAIG	N COUN	TY TREASUR	ER	REG	PLAN COMM	M FND075				
	12/10/	/13 (	01 VR 3	106- 3	498079	12/12/13	106-237-	-533.92-00	CONTRIBUTIONS	& GRANTS	YOUTH ACCESS CTR DE	22,165.00
	1/08/	/14 (	04 VR 1	106- 8	499347	1/13/14	106-237-	-533.92-00	CONTRIBUTIONS	& GRANTS	YOUTH ACCSS CNTR JA	22,165.00
											VENDOR TOTAL	44,330.00 *
								DELINQ	PREVENTION GRA	ANTS	DEPARTMENT TOTAL	44,330.00 *
								PUBL SA	AFETY SALES TAX	X FND	FUND TOTAL	44,330.00 *

# EXPENDITURE APPROVAL LIST

	VENDOR TRN B TR NAME DTE N CD	TRANS PO	NO CHECK	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND	NO. 641 ACCESS IN	ITIATIVE G	RANT					
*** DEPT	NO. 053 MENTAL HE	ALTH BOARD						
88	CHAMPAIGN COUNTY	TREASURER		I.M.	R.F. FUND 088			
	12/23/13 80 VR 88	- 77	498843	12/30/13	641-053-513.02-00	IMRF - EMPLOYER COST	IMRF 11/15 P/R	406.33
	12/23/13 80 VR 88	- 80	498844	12/30/13	641-053-513.02-00	IMRF - EMPLOYER COST	IMRF 11/27 P/R VENDOR TOTAL	411.03 817.36 *
176	CHAMPAIGN COUNTY	TREASURER		SELF	-FUND INS FND476			
	12/27/13 80 VR 118	- 65	498848	12/30/13	641-053-533.20-00	INSURANCE	FY13 PROP INS 641	170.87
	12/27/13 80 VR 118	- 65	498848	12/30/13	641-053-533.20-00	INSURANCE	FY13 LIAB INS 641	1,374.51
							VENDOR TOTAL	1,545.38 *
188	CHAMPAIGN COUNTY	TREASURER		SOCI	AL SECUR FUND188			
	12/23/13 80 VR 188	- 114	498850	12/30/13	641-053-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 11/15 P/R	302.08
	12/23/13 80 VR 188	- 118	498851	12/30/13	641-053-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 11/27 P/R	305.58
							VENDOR TOTAL	607.66 *
18053	COMCAST CABLE - A	CCESS INIT	IATIVE ACC	T AC#8	771403010217756			
	12/13/13 01 VR 641	- 6	498404	12/20/13	641-053-533.29-00	COMPUTER/INF TCH SERVICES	S8771403010217756 DE	94.85
							VENDOR TOTAL	94.85 *
18209	COMMUNITY ELEMENTS	S						
	12/10/13 01 VR 641	- 3	498119	12/12/13	641-053-533.92-00	CONTRIBUTIONS & GRANTS	AI SCHOOL BASED DEC	5,583.00
	1/08/14 04 VR 641	- 12	499397	1/13/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS	AI SCHOOL BASED JAN	5,583.00
							VENDOR TOTAL	11,166.00 *
22730	DON MOYER BOYS & (	GIRLS CLUB						
	12/10/13 01 VR 641	- 2	498132	12/12/13	641-053-533.92-00	CONTRIBUTIONS & GRANTS	ACCESS/ADMIN DEC	15,367.00
	12/10/13 01 VR 641	- 2	498132	12/12/13	641-053-533.92-00	CONTRIBUTIONS & GRANTS	ACCESS/SUPPORT DEC	35,856.00
	12/13/13 01 VR 641	- 8	498422	12/20/13	641-053-533.92-00	CONTRIBUTIONS & GRANTS	COM ENGAGE DEC	4,286.00
	12/13/13 01 VR 641	- 8	498422	12/20/13	641-053-533.92-00	CONTRIBUTIONS & GRANTS	MANAGE & SUP DEC	7,143.00
	12/13/13 01 VR 641	- 8	498422	12/20/13	641-053-533.92-00	CONTRIBUTIONS & GRANTS	SYST SVC STAFF DEC	10,714.00

# EXPENDITURE APPROVAL LIST

	VENDOR I		B TE		RANS NO	PO NO CHECK NUMBER		ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUNI	D NO. 641	1 .	ACCES	ss INIT	TIATIV	E GRANT					
	1/08/	14	04 VF	R 641-	11	499413	1/13/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS	SVCS/ADMIN TEAM JAN	15,367.00
	1/08/1	14	04 VF	R 641-	11	499413	1/13/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS	SCVS/SPPRT STAFF JA	35,856.00
	1/08/	14	04 VF	R 641-	15	499413	1/13/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS	JAN C/O COMM ENGAGE	4,286.00
	1/08/1	14	04 VF	8 641-	15	499413			CONTRIBUTIONS & GRANTS	JAN C/O MGMT SUPPOR	7,143.00
	1/08/1	14	04 VF	R 641-	15	499413	1/13/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS	JAN C/O SYSTEM SVC	10,714.00
										VENDOR TOTAL	146,732.00 *
56750				ER HEAL	TH SY		GRAN'	- <del>-</del>			
	12/10/1				4				CONTRIBUTIONS & GRANTS	CULTRL & LINGSTC DE	6,425.00
	12/13/3				9				CONTRIBUTIONS & GRANTS	CULTURAL SUP DEC	714.00
	1/08/1				13				CONTRIBUTIONS & GRANTS	CUL/LING COMPT JAN	6,425.00
	1/08/1	14	04 VF	R 641-	16	499478	1/13/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS	JAN C/O CULTRL SPPR	714.00
										VENDOR TOTAL	14,278.00 *
67290											
	12/10/1				5				CONTRIBUTIONS & GRANTS	YOUTH MOVE DEC	4,444.00
	12/13/				10				CONTRIBUTIONS & GRANTS	YOUTH&FAM SUPP DEC	8,571.00
	1/08/				14				CONTRIBUTIONS & GRANTS	YOUTH MOVE JAN	4,444.00
	1/08/1	14	04 VF	8 641-	17	499493	1/13/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS	JAN C/O YTH/FAM SUP	8,571.00
										VENDOR TOTAL	26,030.00 *
67867								A CHAMPAIGN TEL			
	1/08/1				9	499496			TELEPHONE SERVICE	INV 1099980 12/12	21.56
	1/03/1	14	92 VF	28-	212	499496	1/13/14	641-053-533.33-00	TELEPHONE SERVICE	INV 1099980 12/12	10.07
										VENDOR TOTAL	31.63 *
78552	VERIZO	N C	WIREL	JESS-MN	TL HL	TH BD/ACCESS	INT AC 28	86369166-00001			
	12/13/1	13	01 VF	8 641-	7	498566	12/20/13	641-053-533.33-00	TELEPHONE SERVICE	28636916600001 DEC	476.24
										VENDOR TOTAL	476.24 *
78892	VISA (	CAR	OMEME	BER SER	VICES	-ACCESS INIT	ITIV AC#4	798510049574342			
	1/08/1	14	04 VF	8 641-	18	499526	1/13/14	641-053-533.95-00	CONFERENCES & TRAINING	4342 RAM RSTRNT 12/	24.96

#### EXPENDITURE APPROVAL LIST

	VENDOR TR	N B TR		ANS NO	PO NO CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 641 ACCESS INITIATIVE GRANT										
	1/08/14	04 VR	641-	18	499526	1/13/14	641-053-533.95-00	CONFERENCES & TRAINING	4342 HYATT HTL 12/3	7.49
	1/08/14	04 VR	641-	18	499526	1/13/14	641-053-533.95-00	CONFERENCES & TRAINING	4342 HYATT HTL 12/4	135.66
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.29-00	COMPUTER/INF TCH SERVICE	S4342 CONCENTR 11/13	11.95
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.95-00	CONFERENCES & TRAINING	4342 US AIR 11/13	25.00
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.95-00	CONFERENCES & TRAINING	4342 JOJO RSTR 11/1	31.30
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.29-00	COMPUTER/INF TCH SERVICE	S4342 MITEL SOL 11/1	73.33
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.84-00	BUSINESS MEALS/EXPENSES	4342 CPTL BREW 11/1	50.70
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.95-00	CONFERENCES & TRAINING	4342 TAXI MAGC 11/1	11.17
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.95-00	CONFERENCES & TRAINING	4342 INDY AIRP 11/1	36.00
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.95-00	CONFERENCES & TRAINING	4342 RANCH 11/16	9.67
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.95-00	CONFERENCES & TRAINING	4342 JOJO RSTR 11/1	44.30
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.95-00	CONFERENCES & TRAINING	4342 HYATT HTL 11/1	777.92
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.84-00	BUSINESS MEALS/EXPENSES	4342 GRT IMPST 11/1	23.56
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.18-00	NON-EMPLOYEE TRAINING, SE	M4342 HYATT HTL 11/1	1,504.56
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-522.03-00	BOOKS, PERIODICALS & MAN.	4342 TAR BOOKS 11/2	160.00
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.18-00	NON-EMPLOYEE TRAINING, SE	M4342 HYATT HTL 11/1	1,504.56
	1/08/14	90 VR	641-	145	499526	1/13/14	641-053-533.18-00	NON-EMPLOYEE TRAINING, SE	M4342 HYATT HTL 11/1	1,504.56
									VENDOR TOTAL	5,936.69 *
78975	WBCP-AM SUITE D									
	12/23/13	94 VR	641-	144	499112	12/30/13	641-053-533.89-00	PUBLIC RELATIONS	934000100009 11/30 VENDOR TOTAL	400.00 400.00 *
635152	335152 PARSONS, TRACY ACCESS INITIATIVE									
	12/16/13	92 VR	641-	143	498690	12/20/13	641-053-533.12-00	JOB-REQUIRED TRAVEL EXP	129 MILE 10/1-11/21	72.89
	12/16/13	92 VR	641-	143	498690	12/20/13	641-053-533.12-00	JOB-REQUIRED TRAVEL EXP	TAXI 10/25 CHICAGO	20.00
	12/16/13	92 VR	641-	143	498690	12/20/13	641-053-533.84-00	BUSINESS MEALS/EXPENSES	10/24 MTG FOOD	19.65
	12/16/13	92 VR	641-	143	498690	12/20/13	641-053-533.84-00	BUSINESS MEALS/EXPENSES	10/28 MTG FOOD	8.91
	12/16/13	92 VR	641-	143	498690	12/20/13	641-053-533.95-00	CONFERENCES & TRAINING	230 MILE FOF CONF	129.95
	12/16/13	92 VR	641-	143	498690	12/20/13	641-053-533.95-00	CONFERENCES & TRAINING	TAXI 11/13-11/16 WD	87.00
	12/16/13	92 VR	641-	143	498690	12/20/13	641-053-533.95-00	CONFERENCES & TRAINING	MEAL 11/13 WSHGTN D	18.48
									VENDOR TOTAL	356.88 *
							MENTAL	HEALTH BOARD	DEPARTMENT TOTAL	208,472.69 *



# To be run in the Public Notice section of The News Gazette on December 15, 2013 — one day only.

Notification of Funding Availability – Champaign County Mental Health Board (CCMHB)/ Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDB)/ Quarter Cent for Public Safety – Juvenile Justice Post Detention (Quarter Cent Fund)

The three separate funding sources listed above are utilizing a web-based registration and application system for submission of funding requests for the contract year beginning July 1, 2014 and ending June 30, 2015. The web-based system will be accessible to applicants beginning January 8, 2014. All applicants shall register (if not previously registered) and log-in to access the application forms, allocation decision support criteria, and instructions. Deadline for applications is February 14, 2014 at 4:30 p.m. Final allocation decisions shall be made no later than June 30, 2014.

A technical assistance session on use of the online application system will be held on January 28, 2014 from 10:00 a.m. to noon in the Lyle Shields Room at Brookens Administrative Center, 1776 East Washington Street, Urbana, Illinois.

For more information or for technical assistance regarding the web-based application system contact: Ms. Stephanie Howard-Gallo, CCMHB/CCDDB 217/367-5703 <a href="mailto:stephanie@ccmhb.org">stephanie@ccmhb.org</a>





#### **Briefing Memorandum**

To: Champaign County Mental Health Board and Developmental Disabilities Board

From: Shandra Summerville, CLC Coordinator ACCESS Initiative-Prairie Center Health Systems

Date: January 14, 2014

Purpose: Provide an overview of Cultural and Linguistic Competence (CLC) for CCMHB/DDB

#### **Background:**

In 1999, The Surgeon General's Executive Summary: *Mental Health: Culture, Race & Ethnicity* discussed mental health utilization and the need for more mental health services to underrepresented groups. This report helped shape the vision to begin looking at disparities and disproportionality in Champaign County. Through consultation from Dr. Carl Bell, MD of Chicago, IL, the CCMHB/DDB began requiring applicants and funded agencies to develop a cultural competence/cultural sensitivity plans. The purpose was to ensure that funded agencies were infusing the value of cultural and linguistic competence, providing access to services in community based settings and non-traditional settings, and to persons in underrepresented groups.

#### **Presentation Overview**

Attached to this briefing memo is a "DRAFT" Timeline of the CLC Activities. The meeting presentation will share overview about how the funded agencies are progressing by infusing cultural and linguistic competence as a value. There will be data presented on the CLC quarterly reporting by funded agencies. In addition, there will also be an example of an organization that has demonstrated their process for infusing CLC as a value to the entire organization.

# Follow-Up to CCMHB/DDB

- Full report on yearly progress for all funded agencies by June 2014
- Present recommendations on the sustainability plan for CLC monitoring and technical assistance
- Provide examples of community where CLC has sustained
- Continue to provide support for local agencies as they continue on their journey of CLC



# (Draft) TIMELINE

# **Cultural and Linguistic Competence for CCMHB/DDB**

- 1. 1999— Report from US Department of Health Human Services
  - a. Executive Summary: Mental Health: culture, Race, & Ethnicity
    - shows MH disparities utilization of services, accessibility, appropriateness and outcomes of services, need for services
- 2. 2003 Dr. Carl Bell (from Chicago)
  - a. Contracted by CCMHB to assess where Champaign county was related to CLC and providing recommendations how to improve CLC
  - b. \*\*groundwork of building a System of Care in Champaign County
- 3. 2004— First deliverable of CLC plans for CCMHB
  - a. Funded CCMHB agencies were required to deliver plans they had for CLC to CCMHB
- 4. 2006— Consultant was hired to provide guidance on a Standardized Plan for all funded agencies of CCMHB; and to provide feedback and guidance on how to implement CLC
  - a. DD board was included at this point along with CCMHB providers
  - Assessment of each provider's plan; identifying missing components of each provider's plan = led to recommendation to create Standard Plan of CLC for all providers (funded agencies) of CCMHB
  - c. Consultant: Multicultural Professional Consultants (Maryiam Ar-Raheem)
    - i. Used New York State CC plan as a template
- 5. 2009— CCMHB funded CLC Position (full-time) was for Champaign County
- 6. 2010— CLC position was organizationally moved ("housed") from being outsourced from local agency in community to Administrative Team of ACCESS within Champaign County
- 7. 2010— All providers funded by CCMHB were required to distribute CLC plans to all staff within an organization.
  - a. And CCMHB providers required to create a formal policy to communicate about the CLC plan for each organization
    - i. E.g. each person / staff sign CLC plan annually
  - b. This was not standardized plan
  - c. Note: does not mean that everyone completed a CLC training; just became aware of a CLC plan
- 8. 2011 (FY 2012) Cultural Competence Committee was developed
  - a. Comprised of providers, youth and families
  - b. Objective: providing recommendations on format of standard template for CLC plans, including guidelines such as:
    - i. Annual CLC training
  - c. Developed CLC Quarterly Monitoring Plan (see handout from Shandra)
    - i. Governance & Policy Level
      - 1. Guidelines
      - 2. Timeline/Progress for Plan of Action
      - 3. Benchmark
    - ii. Administrative/Management Level



- 1. Guidelines
- 2. Timeline/Progress for Plan of Action
- 3. Benchmark
- iii. Direct Services
  - 1. Guidelines
  - 2. Timeline/Progress for Plan of Action
  - 3. Benchmark
- iv. Individuals and their Families (or identified support)
  - 1. Guidelines
  - 2. Timeline/Progress for Plan of Action
  - 3. Benchmark
- 2012 (FY 2013)— Implemented Quarterly Monitoring Plan (Quarterly Reporting /Progress on CLC implementation – Note: prior to this CLC reports were annually FY2012) for all providers funded by CCMHB
- 10. 2012— CLC Coordinator position changed locations organizationally: now "housed" (organizationally) outside of County Government/outsourced in a community organization
- 11. 2013 (FY2013) Annual CLC site visits started
  - a. CLC coordinator met with agency leaders to provide individual recommendations on improvement (from annual / quarterly reports) as well as technical assistance
- 12. 2013 Has assisted with development of CLC organizational assessment with Prairie Center for staff
- 13. 2013— CLC Position has partnered and collaborated with non-funded (CCMHB) agencies seeking technical assistance on building CC values and training
  - a. Faith-based organizations
  - b. Rotary club international
  - c. National Federation of Families
  - d. State of Illinois Department of Mental Health-Statewide Family Run Organization



# Comments on the Illinois 1115 Waiver Concept Paper

# From:

The Association of Community Mental Health Authorities of Illinois (ACMHAI)

The ARC of Illinois

The Institute on Public Policy for People with Disabilities

The Illinois Association of Rehabilitation Facilities, Inc.



Association of Community Behavioral Health Authorities of Illinois (ACMHAI)

# Comments on the 1115 Waiver Concept Paper Draft 11/25/13

For additional information, contact Phyllis Russell at phyllis@acmhai.org or 217-369-5168.

ACMHAI is the association representing the network of county, township and municipality behavioral health authorities across Illinois. Mental Health Authorities are statutorily charged with assessing, planning for and directing resources to support systems of care for residents of all ages needing mental health services, substance use disorder services and those with developmental or intellectual disabilities and Authorities for the Care and Treatment of Persons with a Disability have the specific focus on the needs of those with a developmental or intellectual disability. As funders, the behavioral health authorities distribute more than \$60 million into community-based service systems in Illinois annually.

ACMHAI recognizes that the Concept Paper addresses a number of major issues, and is not intended to go deeply into specifics of implementation. Therefore our comments remain general, flagging a handful of issues that we believe are appropriately raised at this point. Overall, while we agree with the movement to consider individuals and their needs that we see throughout the Concept Paper rather than fitting people into categories of need, we have the following concerns:

1. Mental illness is underrepresented in the overall concept paper at this point, with proportionally less incorporated as a component in almost every aspect of the Pathways, particularly when consideration is given to the disproportionate cost of care for those with a serious mental illness and the dually-diagnosed with a chronic physical condition as well.

ACMHALPO Box 935, Aurora, IL 60507/217-369-5168/phyllis@acmhai.org/www.acmhai.org/

- (Take a look at wellness effort targets using the public health model. None are mental health issues.)
- 2. The Illinois 1115 waiver concept paper fails to mention the words "intellectual disability(ies)" anywhere in the document. In addition, "developmental disabilities" specifically are mentioned once on page 6, and this reference is for the purpose of describing the existing (i.e., pre-1115) Home and Community Based Services waiver. We would like to see the populations of need identified specifically throughout the Concept Paper to assure that, at every step, behavioral health needs, services and system design considerations are incorporated as being of equal importance with physical health care.
- 3. Specific components that address early intervention (universal and uniform screening, functional assessment and person-based service plan rather than diagnosis driven plan) are included, but the concept of early intervention as a vitally important system component is lacking. These are critical services in the community-based system of care for children, youth, adults and their families dealing with behavioral health and chronic health issues. Early identification, intervention and connection with community supports make a difference, and the state should be looking to explicitly incorporate options that will enable the strengthening and sustainability of community-based system of care throughout the waiver.
- 4. Workforce is a critical issue, and the Concept Paper recognizes the importance of doing more to attract, prepare and retain primary care physicians, psychiatrists, psychologists, nurse practitioners, etc. But a community-based system of care with wraparound services relies on having a paraprofessional workforce to provide hands-on, in-community services and supports. Use the waiver to support attracting, training and retaining a community-

- based, paraprofessional mental health, substance use, developmental disability and intellectual disability paraprofessional workforce.
- 5. Currently most Behavioral Health Authorities fund predominantly through program grants and fee-for-service variations. As the state moves to capitation and risk-based funding with a service planning and approval role, as well as money-follows the person and expanded state funding for community services through BIP and Medicaid, consider a request 1) to waive supplementation rules for a period to allow community-based funders including 708s to have more options in funding front-end costs to build capacity as the essential benefits, parity and integration with primary care inclusion of mental health work their way through community systems and managed care provider contract and financing practices and 2) to include other waiver components that will bring funding and resources to assist community-based providers in building capacity to make this transition.
- 6. The proposed 1115 waiver is budget neutral. This means that all the different groups will now be competing for dollars from the same funding pool. Based on the emphasis of the Concept Paper, it appears hospitals and nursing facilities will be in a strong position under the new waiver, and this will place ID/DD, BH, and SUD funding in jeopardy. We do not want to see community-based provider networks and those working collaboratively to support a system of services for those with behavioral health needs in a funding competition with the entire public healthcare system.
- 7. It is also of concern that the 1115 waiver concept paper addresses the financial issues faced by hospitals and nursing facilities. Incentive based pools and debt relief is mentioned. Is it the intent for the waiver to also allow incentive based pools to help ID/DD providers develop 4-bed and under

CILAs as required by Ligas? What about assistance for downsizing ICF-DDs? If so, the language needs to be clarified and strengthened.

Thank you for the opportunity to submit written comments. We look forward to further opportunities to engage in discussion related to this important issue.

For additional information, contact Phyllis Russell at <a href="mailto:phyllis@acmhai.org">phyllis@acmhai.org</a> or 217-369-5168.

# **Arc Comments on the 1115 Waiver**

Written on November 26, 2013 by Tony Paulauski in Issues of the Day

Thank you for the opportunity for The Arc to present recommendations on the goals and strategies of the Illinois Medicaid 1115 Waiver. The Arc represents individuals with intellectual and other developmental disabilities (I/DD) and their families.

At this time, neither the concept paper nor other materials shared with The Arc clearly state how this Medicaid Transformation 1115 Waiver will change the way services will be provided, especially to persons with I/DD, and how it will impact our community services capacity and quality.

The template for rebalancing the Developmental Disability System in Illinois is: "Illinois at the Tipping Point – Blueprint for System Redesign in Illinois Update", a seven year outline on necessary changes to establish a personcentered community based system.

Some concerns that we at The Arc have are:

- 1. This is the next step toward Phase III of Integrated Care? From the concept paper, "The waiver will provide the flexibility needed to deliver appropriate and essential HCBS waiver services, also referred to as "long-term supports and services" (LTSS), in a coordinate fashion through managed care entities and their provider networks."
- 2. Do we have the money within the system to do this huge transformation? The funding of community services continues to be among the lowest in the nation.
- 3. The possible elimination of important specialized services for individuals with intellectual and other developmental disabilities.
- 4. The need for free standing, non-conflictual service coordination in all community and institutional settings.

We need to further understand:

- Needs Assessment for the 1115 Waiver
- 2. Eligibility for 1115 Waiver Services

- 3. Cost Analysis of the 1115 Waiver & Disability Services
- 4. Service Definitions or Redefinitions in the 1115 Waiver
- 5. Provider Tax
- 6. Will the Waiting List End?
- 7. Employment First & Flexible Day Services

Based upon the concept paper, we offer the following recommendations for the 1115 Waiver and emphasize the need for flexible supports/services offered in inclusive community settings.

# HOME AND COMMUNITY BASED INFRASTRUCTURE, COORDINATION AND CHOICE

- 1. Maintain the social model of disability, rather than shifting back into a medical model. Viewing disability as a medical condition, for people who rely on Medicaid funded services to achieve a wide variety of personal goals, is extremely limiting.
- 2. Continue and expand the Governor's Rebalancing Initiative in the new 1115 Waiver. Reward the transition of individuals from institutional settings through development of capitation model that incentivizes payment for Home & Community Services over institutional services. Pay for performance indicators that are tied to successful transition to community services.
- 3. End the PUNS Waiting List within seven years or sooner.
- 4. 1115 Waiver services/supports to individuals with I/DD must be flexible and offered in inclusive settings and emphasize employment first.
- 5. Innovate the menu of community living options to include but not be limited to: CILA, Intermittent CILA, supported living, Home of Your Own, cooperative living arrangements, live-in caregivers, etc...
- 6. Rates for community services in Illinois remain low, with the majority of people served in eight-person residential settings and attending large, congregate day programs. Illinois rates for developmental disability community services should be increased to the national average of \$44,396 from the current \$31,002. Pay for performance incentives that are tied to creating smaller, more integrated community

living settings and flexible day service options emphasizing employment and community integration.

- 7. Wages for direct care staff will increase by \$3.00 per hour in the first year of the 1115 Waiver
- 8. Maintain and expand the current free standing 18 non-conflictual Independent Service Coordination systems for person-centered planning and advocacy for people with I/DD and their families in all community and institutional settings.
- 9. Expand and enhance services such as crisis stabilization provided in community settings, in-home supports and services, flexible day services, retirement services for aging adults and employment related services. Development of community based services for people with dual diagnosis and/or involvement in the criminal justice system will support efforts to make community living a reality for all.
- 10. There needs to be a statewide program for individuals with I/DD to develop leadership skills, address public policy and advocate for a system that meets their individual needs. Currently this is the Alliance.
- 11. In addition, there needs to be a statewide Partners in Policy Making Program for families and individuals with I/DD: http://mn.gov/mnddc/pipm/
- 12. The new 1115 Waiver should offer self-directed, personal care or other services to meet the needs of those not on the current I/DD Waiver.
- 13. The 1115 Waiver should have a strong independent ombudsman to oversee a rigorous appeal process with the necessary infrastructure to advocate for the rights of persons with I/DD in the system.
- 14. Create a new service eligibility category: "Medically Needy" Children. This category would waive parental income because these families experience extraordinary expenses for ongoing medical needs.
- 15. The new 1115 Waiver must implement aggressive and culturally competent education and outreach strategies to ensure individuals with I/DD have accessible information. An expected "outcome of this waiver should be a Cultural Competence"

Plan.

16. Supported Housing is not a model for individuals with I/DD.

#### **DELIVERY SYSTEM TRANSFORMATION**

1. The UIC-Division of Specialized Care for Children's Habilitation Clinic should be reopened. This clinic was a state-of-the-art integrated developmental pediatrics multi-specialty clinic for children with I/DD and medical needs. The Clinic was also a key training site for future generations of primary care providers.

### 21st CENTURY HEALTH CARE WORKFORCE

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- 1. College of Direct Support, University of Illinois at Chicago, Dept of Disability and Human Development, developed a partnership with the College of Direct Support through a grant from the Illinois Council on Developmental Disabilities. This nationally recognized resource should be utilized here in Illinois for direct care staff who support individuals with I/DD: http://directcourseonline.com/directsupport/
- 2. Loan repayment and other strategies should also include Qualified Intellectual Disability Professionals (QIDP) who have Bachelor's Degrees or Master's Degrees. The QIDP's are responsible for developing and implementing person-centered plans with persons who have I/DD.
- 3. We should work with the community colleges in Illinois to establish certificate and Associate Degree training programs for persons currently employed as Direct Support Professionals, as well as those interested in entering the field. Allow them to receive practicum credit while working in the field.
- 4. Reinstate the regionally based training for respite workers (originally established by old Department of Developmental Disabilities), which included CPR and First Aid training, along with a "DD 101", and expand it to include PAs and Personal Support Workers who are hired by consumers in the self-directed (waiver) mode.

Tony Paulauski, Executive Director

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#### 1115 Waiver Recommendations

Although the Institute on Public Policy for People with Disabilities has concerns regarding the timeline for the 1115 waiver, we submit the following recommendations and look forward to working in partnership with the State and HMA to ensure that the implementation enriches the lives of the State's most vulnerable populations.

It is critical to evaluate the structure, design and components of the service delivery system for Individuals with Developmental Disabilities. The current system is inadequate in nearly every objective measure: the number of persons receiving services, the number of individuals on the waiting list, the range of options for residential and day services, reimbursement rates, etc.

**Rate Methodology**: There must be assurances that rates will not be cut for Individuals with DD, as rates are already some of the lowest in the country, between 45-50<sup>th</sup> depending on what study you look at. The 1115 waiver must be cost neutral, but that neutrality CANNOT fall on the backs of the DD Community. Historically, the ICAP has been used for eligibility determination and for the purposes of "rate setting" even though it was not designed for the latter.

The rate methodology also has not changed materially since the first waiver was approved almost two decades ago in 1989. The rate methodology must be adjusted to focus on the costs of direct labor, clinical supports, medical supports, transportation and other critical costs necessary to provide quality supports. Such rates should include geographical differentials and be based upon existing DOL labor and fringe costs, HUD housing costs and local transportation costs.

**Employment:** The waiver promotes the provision of "employment" services through large-scale congregate developmental training (DT) programs with a modest flat rate of \$12,000 a year if you live in an ICFDD or \$10,000 a year if you

individuals with complex behavioral or medical needs, provide a rate based upon individual needs, and allow multiple year rates. We also suggest eliminating the 90-day review process for the add-on for individual support needs, and make that an annual reassessment.

**Temporary Assistance:** We recognize that temporary assistance is necessary to avoid institutionalization for individuals with I/DD in crisis. However, we strongly suggest the cap of 60 consecutive days be amended, or provisions be included so that this 60 day maximum can be waived by in cases where disruption of the temporary assistance would result in institutionalization of the individual. The waiver needs to enhance the capacity of the current crisis and emergency support system to be more effective and responsive.

**Transportation:** Again, the waiver should allow non-medical transportation costs to be billed through the waiver for door-to-door transport to developmental training, as an allowable cost, rather than as part of the \$10,000 a year total allowable reimbursement. In Arizona their day program allows 1796 hours annually for developmental training and another 510 hours for transportation to and from home to the program.

**Number of Participants**: The waiver must include the over 22, 000 individuals currently on the waiting list. The State has made progress through the Ligas consent decree, but the progress has been slow. The waiver must incorporate benchmarks for lowering the list to 0.

Money Follows the Person: In a national evaluation of the Money Follows the Person Demonstration Programs (Mathematica, October 2011), it was stressed that one of the top success indicators of the MFP was the extra HCBS funding beyond what Medicaid programs typically cover. This supplement, it was found, made the difference in success rates for individuals. The Illinois waiver should allow for extra HCBS service funding as people transition from state facilities, nursing homes, and under the *Ligas* implementation plan. MFP also requires 4 or fewer people to live in one unit of housing. In Illinois, this will require changes to the waiver rates. The 75% match should motivate the state to seek new models of support, like an individual support option.

**Choice:** Just as individuals have a choice of CILA provider, DT provider, supported employment provider, and HBS provider, to name a few, individuals should have a choice of ISSA provider.

**Residential Habilitation:** There is no funding in the waiver for building maintenance. While we understand the cost of typical maintenance cannot be covered under the waiver, we are adamant the waiver should allow for repair of property destroyed as the direct result of complex behavioral challenges. If providers are responsible for bearing the entire cost of these repairs, fewer

A person is only funded for one wellness visit per year. To satisfy this requirement [Administrative Code 115.240 (e)], staff must "create" an excuse for an additional doctor visit. Nurse delegation prohibitions should not be a barrier to residing in the community. Colorado, Iowa, Missouri, Nebraska, and Oregon allow 16 health maintenance tasks to be delegated, yet Illinois permits fewer than 4 tasks to be delegated, thereby increasing cost of care.

**Termination of Services:** Please review closely Administrative Code 115.215 (a), criteria for termination of services. The language as written does not reflect practice.

**Interdisciplinary Process:** The Institute supports the use of an interdisciplinary team in the development of a plan for each individual. The Administrative Code references this in section 115.230. However, discipline trained staff are not funded under the CILA program. The Individual should also be a part of the planning process and when possible individual-led ISP meetings should be the standard.

# More Specific Recommendations from Members:

## DHS/DRS work together to ensure continuity of supports

Some individuals require ongoing job coaching, regardless of their status with DRS. Under the current system, when DRS close an individual to their services, all employment supports provided by a community provider is not reimbursed. For individuals receiving HCBS services under the waiver, a provider agency can apply for "Alternative Day Program" funding (i.e. 39U).

- "Jane" has 2 community jobs, was closed to DRS in June 2011 and receives
  HCBS services. We applied for 39U funding in March of 2013 and it took until
  June of 2013 for us to receive the funding. During the 3 months between the
  time we applied for funding and the time we received the funding, we
  provided 115 hours of job coaching support for which we were not
  reimbursed
- We currently support "John" who has been closed to DRS for well over a year. He lives at home with his family and does not receive HCBS services. A job coach currently conducts twice weekly check-ins at his job site. Additionally, he receives 1:1 support with on line career development courses he takes through his employer. None of those services are reimbursed.

Employment plans and ISPs would be written (and in many cases are) to reflect the need for ongoing, uninterrupted supports.

#### Hours of support

There should not be a cap on the number of reimbursable hours of support someone receives in a day program. If an individual requires support to keep a job and works



November 25, 2013

Doug Elwell Managing Principal Health Management Associates 9000 Keystone Crossing, Suite 550 Indianapolis, IN 46240

RE: IARF Comments on 1115 Medicaid Waiver Application Concept Paper

Mr. Elwell:

IARF is a statewide association of community-based providers serving children and adults with intellectual and developmental disabilities, mental illnesses, and substance use disorders. Our members provide services in over 900 locations throughout Illinois, from Galena to Karnak, and from Quincy to Danville. For over 35 years, the Association has been the voice of community-based services and supports to state government.

On behalf of our 85 member agencies, I again extend my thanks for meeting with my staff and I to discuss some initial questions with respect to the concept paper. Furthermore, we welcome the opportunity to share with comments, questions, and recommendations we've received to date regarding the direction outlined in the concept paper.

To provide context to the comments we provide below, it's important to inform you that our member agencies provide services and supports outlined in four 1915(c) waivers (Adults with Developmental Disabilities, Children with Developmental Disabilities - Residential, Children with Developmental Disabilities - Support, and Persons with Brain Injury), ICFDD (ICF/MR) services, the Medicaid Rehabilitation Option (59 III Adm Code 132) and grant funded/contractual services (respite, case coordination, supervised, supported, and crisis residential, and permanent supported housing). I am also providing you a copy of our 2014 Public Policy Agenda for your reference.

At this stage of the process - a review of the concept paper but absent the details a draft waiver application would provide - we are unable to provide a position in support or opposition to the Administration's pursuit of an 1115 Medicaid Waiver Application.

#### Home and Community-Based Infrastructure, Coordination and Choice

"Our existing community infrastructure needs to be strengthened through the addition of community-based services that will enable individuals to remain in their own community post-transition and avoid re-institutionalization."

- Strengthening the system for individuals currently being served and developing capacity to serve additional
  individuals in the community requires a commitment of resources from the state to ensure rates and
  reimbursements cover the actual cost of providing services and supports.
- The Waiver should ensure multi-year increases to rates and reimbursements (including reformulating rates where appropriate) to increase the average hourly wage paid to direct service personnel (including, but not limited to, direct care staff, front-line supervisors, qualified support professionals, nurses and non-administrative support staff) and ensure community-based providers are able to recruit and retain quality staff and reduce gaps in service needs.
- It is unclear how a uniform assessment instrument will identify the needs and wants of the entire Medicaid

Janet S. Stover, President / CEO ————————————————————————————————————	
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#### 1C. - Stable Living Through Supportive Housing

- We support prioritizing supportive housing and employment programs in the waiver application. In addition, the Waiver should consider other housing models that aid in the long-term recovery of an individual with a serious mental illness, such as scattered site projects.
- The Waiver should ensure a housing continuum of care that incorporates existing services developed by community-based mental health providers to meet specific needs in communities across the state (supervised, supported, and crisis residential as well as supportive housing). The Department of Human Services Division of Mental Health's movement to promulgate regulations around existing residential and housing models has caused concern that capacity grant funds will be diminished and residential and housing capacity will actually diminish as a result.
- We recommend prioritizing resources for outreach and engagement programs. Reimbursing community-based
  mental health providers to go into the community and help individuals with serious mental illnesses access
  services and maintain medication and treatment plans will further bend the cost curve by reducing emergency
  room utilization and admittance into institutional levels of care.
- While we support identifying additional state resources for supportive housing and supported employment
  programs for individuals with serious mental illnesses, we are interested in how a DSRIP or DSRIP-like program
  might be developed specifically for community-based mental health centers and how that might be funded.
  Bonus payments to providers that include bridge payments for housing, reimbursing providers for completing
  SOAR SSI applications, and/or specifying small pilot/demonstration programs that target regions/specific
  populations could be considered in the Waiver.

#### **Delivery System Transformation**

2A. Implement and Expand Innovative Managed Care Models

- Any substantial delivery system transformation that involves long-term services and supports should avoid shifting back to exclusively medical models of care delivery. The Waiver must include social benefit indicators (and outcome measures with financial incentives) such as habilitation, preventative health services, skill development, employment, transportation and housing supports.
- The Waiver should prioritize pilot/demonstration programs for community-based providers becoming specialty
  patient-centered health homes for individuals with intellectual and developmental disabilities and/or serious
  mental illnesses.

#### ID/DD Residential Habilitation Transformation - Not Referenced in the Concept Paper

- The Waiver should identify reimbursement and regulatory barriers that prevent community-based providers from downsizing facilities (ICFDD and CILA).
- With respect to ICFDD (ICF/MR) debt relief capital investment and transition rates (or maintenance of rates)
  are potential ways to incentivize providers to downsize or close these facilities according to the wishes and
  needs of the residents. While this is an identified priority in the Department of Human Services Division of
  Developmental Disabilities Seven Year Strategic Plan, it remains unresolved and is a barrier.
- With respect to CILA, the rate methodology is a primary contributor to 75% of CILA packets for 6-8 bed group homes (December, 2012 data). Also, state law and regulations (59 III Adm Code 116) are barriers to individuals requiring injectable medications living in CILA group homes. The Waiver should prioritize rate models that incentivize providers to create residential capacity that responds to the needs and wishes of individuals currently receiving services and those who will in the future. Furthermore, the Waiver should speak specifically to regulatory barriers that must be addressed for individuals accessing CILA and those providers who support them.

#### Build Capacity of the Health Care System for Population Health Management

- The Waiver should identify reimbursement and regulatory barriers that cause individuals with intellectual and developmental disabilities, mental illnesses, and substance use disorders to access costlier back-end care in hospital emergency departments and other high cost settings:
  - ICFDD (ICF/MR) regulations may promote the utilization of hospital emergency departments to stabilize an individual with a medical condition or behavioral crisis due to staff support limitations and fear of costly citations from the Department of Public Health survey process.

service needs of individuals currently being served in the community. In addition, several workgroup reports and studies have provided recommendations with respect to updating and reformulating rates and reimbursements. Therefore, to show a commitment to individuals currently being served and the professionals that support them, the Waiver must prioritize a commitment to rates and reimbursements for long-term services and supports that reflect the high quality system of choice both the Administration and the community wish to build.

- The lack of detail within the Concept Paper in areas that involve financing (DSRIP, pools of resources, expansion
  of services, CNOMs, etc.) has generated more questions than comments/recommendations. The net effect is
  skepticism that enough savings will be realized in other areas of the Medicaid program to shift resources to clear
  areas of need to meet the goals of the Waiver.
- Whether in the Waiver, or as a statement from the Administration, it should be clear that the Waiver does not prohibit the state from prioritizing additional GRF investments in community-based services and supports. The resource needs in the community-based system are too great to give advocates, providers, and other stakeholders the impression that the state does not have an obligation to address them.

Again, I appreciate the opportunity to provide comments to you and your staff on this important endeavor. My staff and I stand ready to discuss these comments with you further and look forward to future conversations over the next several weeks on areas where the Waiver application may intersect with community-based services and supports.

Sincerely,

Janet S. Stover, President & CEO

and I Stover

CC: Carl LaMell, Chairman, IARF Board of Directors
Cristal Thomas, Deputy Governor
Michael Gelder, Senior Advisor on Health Policy, Office of the Governor
Julie Hamos, Director, Department of Healthcare and Family Services
Michelle Saddler, Secretary, Department of Human Services



## CHAMPAIGN COUNTY MENTAL HEALTH BOARD



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

# **CCMHB 2014 Meeting Schedule**

First Wednesday after the third Monday of each month--4:30 p.m. **Brookens Administrative Center** Lyle Shields Room 1776 E. Washington St., Urbana, IL (unless noted otherwise)

January 22

February 19

March 19

April 23

May 21

June 18

July 23

No August Meeting

September 17

October 22

November 19

December 17

\*This schedule is subject to change due to unforeseen circumstances. Please call the CCMHB-CCDDB office to confirm all meetings.