



**CHAMPAIGN COUNTY MENTAL HEALTH BOARD**

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

*REMEMBER this meeting is being audio recorded. Please speak  
clearly into the microphone during the meeting.*

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

**WEDNESDAY, November 19, 2014**

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

**4:30 p.m.**

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1. Call to Order - Dr. Deloris Henry, President
  2. Roll Call
  3. Citizen Input/Public Participation
  4. Additions to the Agenda
  5. CCDDDB Information  
*Draft minutes from the 10/22/14 are attached for  
information only.*
  6. Approval of CCMHB Minutes
    - A. 10/22/14 Board meeting\*  
*Minutes are included in the packet. Action is  
requested.*
  7. President's Comments
  8. Executive Director's Comments
  9. Staff Reports  
*Reports are included in the packet.*
  9. Board to Board Reports

10. Agency Information
11. Financial Information\*  
*A copy of the claims report is included in the packet.*
12. New Business
  - A. Cultural and Linguistic Competence pertaining to Applications for FY16.
  - B. Out of Cycle Requests\*  
*Included in the Board packet is a Decision Memorandum addressing consideration of out of cycle requests for funding. Action is requested.*
13. Old Business
  - A. ACCESS Initiative Sustainability\*  
*Decision Memorandum outlining a blueprint for the post-cooperative agreement iteration of the ACCESS Initiative is included in the Board packet. Action is requested.*
  - B. Three-Year Plan with One Year Objectives\*  
*Decision Memorandum with Three-Year Plan is included in the Board packet. Action is requested.*
  - C. FY16 Allocation Criteria\*  
*Decision Memorandum detailing criteria to be used to evaluate CCMHB applications for the 2016 program year allocation cycle is included in the Board packet. Action is requested.*
  - D. CCDDDB Allocation Criteria  
*Included in the Board packet for information only is a copy of the CCDDDB allocation criteria Decision Memorandum.*
  - E. Disability Resource Expo Update  
*A written report on the Expo is included in the packet.*
14. Board Announcements
15. Adjournment

*\*Board action*

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

*Minutes –October 22, 2014*

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

**DRAFT**

*6:00 p.m.*

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- MEMBERS PRESENT:** Joyce Dill, Phil Krein, Mike Smith, Deb Ruesch, Sue Suter
- STAFF PRESENT:** Peter Tracy, Lynn Canfield, Nancy Crawford, Mark Driscoll
- STAFF EXCUSED:** Stephanie Howard-Gallo
- OTHERS PRESENT:** Tracy Parsons, Shandra Summerville, ACCESS Initiative (AI); Gary Maxwell, Champaign County Board; Dale Morrissey, Danielle Mathews, Developmental Services Center (DSC); Jennifer Knapp, Jennifer Knapp, Community Choices; Barb Bressner, Consultant; Glenna Tharp, Eric Trusner, PACE; Dennis Carpenter, CTF; Frank Creighton, Citizen; Aillinn Dannave, Susan Fowler, CCMHB
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**CALL TO ORDER:**

Ms. Sue Suter called the meeting to order at 6:03 p.m.

**ROLL CALL:**

Roll call was taken and a quorum was present.

**ADDITIONS TO AGENDA:**

Ms. Suter requested “Transportation Update” be added to the Agenda under “Old Business”.

**CITIZEN INPUT:**

None.

**CCMHB INPUT:**

A copy of the 9/17/14 Board minutes was included in the Board packet for information only.

**APPROVAL OF CCDDDB MINUTES:**

Minutes from the September 17, 2014 CCDDDB meeting were included in the Board packet.

**MOTION: Dr. Krein moved to approve the minutes from the September 17, 2014 CCDDDB meeting. Ms. Dill seconded the motion. A voice vote was taken and the motion passed unanimously.**

**PRESIDENT'S COMMENTS:**

Ms. Suter reported Equip for Equality will present their plan for Employment First and she plans on attending that meeting. Ms. Suter and Deb Ruesch attended an informational meeting regarding the PAS process.

Ms. Suter and Ms. Dill commended Ms. Bressner, staff, planning committee members, and volunteers for a successful disAbility Expo.

**EXECUTIVE DIRECTOR'S REPORT:**

Mr. Tracy reported the Association of Community Mental Health Authorities of Illinois (ACMHAI) will have a 20% dues reduction in the coming year.

**STAFF REPORT:**

Ms. Canfield's staff report was included in the Board packet for review.

**AGENCY INFORMATION:**

Jennifer Knapp from Community Choices announced upcoming Supportive Housing activities.

Dale Morrissey reported on Equip for Equality and Employment First activities. He reported on DSC's budget shortfall and CILA expansion.

## **FINANCIAL REPORT:**

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

**MOTION:** Mr. Smith moved to accept the claims report as presented. Ms. Ruesch seconded the motion. A voice vote was taken and the motion passed unanimously.

## **NEW BUSINESS:**

### **FY16 Allocation Criteria:**

A Briefing Memorandum on preliminary FY16 Allocation Criteria was included in the Board packet for review and comment. The final document will be presented to the CCDDDB for action at the November 19, 2014 meeting. Ms. Dill and Mr. Smith expressed concerns regarding the wording of the "Lobbying Restrictions" portion of the document and the barriers to communication with agencies this portion of the Criteria would provide. Staff members were instructed to research and rework this portion of the Criteria further.

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

Stakeholder comments on the draft Three-Year Plan with Objectives for 2015 were included in the packet for information only. A final draft of the Plan will be presented for approval at the November 19, 2014 meeting.

### **Employment First Initiative:**

Ms. Deb Ruesch reported on the local Employment First group. A study session on the work of the local group is scheduled for November 19, 2014.

### **FY14 Program Performance Outcome Reports and Data Summaries:**

Copies of the Annual Performance Outcome Reports submitted per CCDDDB funded program were included for information only.

## **OLD BUSINESS:**

### **disability Resource Expo:**

Ms. Bressner provided a verbal report on the Expo held on October 18, 2014. It was estimated that approximately 2,500 people were in attendance.

### **Transportation Update:**

Ms. Suter and Ms. Canfield reported on the Regional Planning Commission's (RPC) long-range transportation plan that is underway. Comments on the plan are being solicited.

## **BOARD ANNOUNCEMENTS:**

None.

**ADJOURNMENT:**

The meeting adjourned at 7:05 p.m.  
Respectfully Submitted by: Stephanie Howard-Gallo

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

L.A.

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**CHAMPAIGN COUNTY MENTAL HEALTH BOARD  
BOARD MEETING**

*Minutes—October 22, 2014*

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

**DRAFT**

*4:30 p.m.*

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**MEMBERS PRESENT:** Astrid Berkson, Aillinn Dannave, Susan Fowler, Deloris Henry, Mike McClellan, Julian Rappaport, Deborah Townsend

**MEMBERS EXCUSED:** Bill Gleason, Thom Moore

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

**STAFF EXCUSED:** Stephanie Howard-Gallo

**OTHERS PRESENT:** Gail Raney, Prairie Center Health Systems (PCHS); Jennifer Knapp, Community Choices; Barb Bressner, Consultant; Maggie Thomas, UP Center; Daniel Applegate, Christine Mayer, Compass Counseling and Consulting; Sue Wittman, Sheila Ferguson, Bruce Barnard, Community Elements (CE); Andy Kulczycki, Community Service Center of Northern Champaign County (CSCNCC); Allen Jones, Sheriff's Office, Joel Sanders, Urbana Police Department; Beth Chato, League of Women Voters (LWV); Sue Suter, CCDDDB; Shandra Summerville, ACCESS Initiative, Dale Morrissey, Developmental Services Center (DSC); Gary Maxwell, Champaign County Board

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**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.

**CITIZEN INPUT / PUBLIC PARTICIPATION:**

Maggie Thomas, President of the Board of Directors of the UP Center of Champaign County. She spoke regarding the work of the agency and urged the CCMHB to consider funding the program with any excess funds. The CCMHB funded the program for two prior years and did not fund the program this year due to budget constraints.

Christine Mayer and Douglas Applegate from Compass Counseling and Consulting introduced themselves and spoke regarding their new agency and the services they provide.

**ADDITIONS TO AGENDA:**

None.

**CCDDB INFORMATION:**

Draft minutes from the 9/23/14 CCDDB meeting were included in the packet for information only.

**APPROVAL OF MINUTES:**

Minutes from the 7/23/14 and 9/23/14 Board meetings were included in the Board packet for approval.

**MOTION: Dr. Townsend moved to approve the minutes from 7/23/14 and 9/23/14 as presented in the packet. Mr. McClellan seconded the motion. A voice vote was taken and the motion passed.**

**PRESIDENT'S COMMENTS:**

Dr. Henry commended staff and Ms. Bressner on a great Disability Expo this year.

**EXECUTIVE DIRECTOR'S COMMENTS:**

Mr. Tracy announced the Association of Community Mental Health Authorities of Illinois (ACMHAI) will have a 20% dues reduction this year.

**STAFF REPORTS:**

Staff reports from Mr. Driscoll and Ms. Canfield were included in the Board packet.

**BOARD TO BOARD:**

None.

**AGENCY INFORMATION:**

None.

**FINANCIAL INFORMATION:**

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

**MOTION: Dr. Rappaport moved to accept the claims as presented. Dr. Townsend seconded the motion. A voice vote was taken and the motion passed unanimously.**

**NEW BUSINESS:**

**Criminal Justice Mental Health Presentation:**

An update on the collaboration between the criminal justice system and CCMHB funded mental health programs was provided. Bruce Barnard and Sue Wittman described Community Element's (CE) role in criminal justice services. Lt. Joel Sanders from the Urbana Police Department and Chief Deputy Sheriff Allen Jones described law enforcement's involvement through the crisis intervention team. Discussion ensued regarding gaps and challenges in local services.

**Draft FY16 Allocation Criteria:**

A Briefing Memorandum on the FY16 Allocation Criteria was included in the Board packet for information and discussion.

**ACCESS Initiative Sustainability:**

A Briefing Memorandum outlining a blueprint for the post-cooperative agreement iteration of the ACCESS Initiative was included in the Board packet.

**CCMHB Performance Outcome Reports:**

A Briefing Memorandum with copies of submitted FY14 performance outcome reports for CCMHB funded programs including aggregated zip code and demographic data.

**OLD BUSINESS:**

**disAbility Resource Expo:**

A verbal report from Ms. Barb Bressner was provided regarding the October 18, 2014 Expo. It was estimated that approximately 2,500 were in attendance.

**Addendum to Intergovernmental Agreement:**

A Decision Memorandum and Addendum to the Intergovernmental Agreement between the CCDDDB and the CCMHB was included in the packet for review and action.

**MOTION: Mr. McClellan moved to accept the Addendum to the Intergovernmental Agreement between the CCDDDB and CCMHB. Dr. Rappaport seconded the motion. A voice vote was taken and the motion passed unanimously.**

**BOARD ANNOUNCEMENTS:**

None.

**ADJOURNMENT:**

The meeting adjourned at 5:54 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo  
CCMHB/CCDDDB Staff

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

**Mark Driscoll**

**Associate Director for Mental Health & Substance Abuse Services**

**Staff Report – November 19, 2014 Board Meeting**

**Summary of Activity**

CCMHB Three-Year Plan with Objectives for FY 2015: Included under Old Business is the Three-Year Plan (2013 - 2015) with Objectives for FY 2015 for action by the Board. A Decision Memo recaps the process, provides a brief overview of comments received, and has attached a copy of the letter received from Community Elements. Changes as proposed in the draft Plan released at the September meeting are incorporated into the final document as well as modifications made in response to submitted comments.

Criminal Justice-Mental Health: Recent activities associated with criminal justice-mental health include attending Community Elements forensic team meetings and participating in the monthly Reentry Council meetings. Community Elements holds forensic team meetings every other Tuesday for staff serving the criminal justice population under CCMHB funded contracts. The meetings are an opportunity for direct service staff, coordinators, and supervisors to discuss coordination of services, update one another on program activities, and identify emerging issues. I was invited to sit in on the last two meetings and found them informative and certainly productive for the staff. I plan to continue attending the meetings on a semi regular basis.

The Reentry Council meeting included an update on various topics as well as a report on housing and employment resources. Staff provided an update on number of participants including referral sources, identified needs, and demographic data for those screened and those receiving reentry case management. The Council revisited the priorities set for the target populations. Not currently being served are offenders on electronic home confinement but this group was added to jail target population priority. The meeting packet included a summary of research on the impact education and employment supports can have on offenders reentering the community and in reducing recidivism. This led to a discussion of local housing, education, and employment resources and the need to address gaps that exist.

Program Monitoring: Site visits have just about been wrapped up but many reports remain to be written. The contracts monitored in the last few weeks include three at Prairie Center (Drug Court program, Criminal Justice Substance Abuse Treatment program, and the Youth Services program), and the Community Elements Criminal Justice Integrated Behavioral Health program that had been postponed. All of the Prairie Center contracts monitored met expectations for documentation of reported activity. The Community Elements contract site visit resulted in a finding related to client eligibility. The agency is to review and revise reported clients served in FY14 and submit a plan to address the client eligibility issue. As we move forward it is likely more information will need to be reported beyond number of clients served and may require an amendment to the FY15 contract.

Quarterly Report Activity: First quarter reports were due by the last Friday of October. As is typically the case, some technical assistance on the system was provided and a few agencies requested extensions to file their reports. All programs for which I am responsible have submitted reports. Each report has been reviewed and where necessary clarification or corrections requested and addressed. As part of the review process, the excel spreadsheets used

to track utilization have been updated and first quarter report data posted. Hard files for each program have also been created. The files include the approved program applications and as the year progresses program specific related notes and records.

Audits for the preceding contract year were also due the end of October. Several agencies requested an extension to the deadline and were formally notified their extension had been approved.

Parenting with Love and Limits (PLL): A conference call between Savannah Family Institute, Prairie Center, and CCMHB was held in late October. The purpose of the call was to discuss the opportunity for Savannah Family Institute and the Prairie Center PLL-Extended Care program to work with the CHOICES DCFS pilot project. Savannah Family Institute led the discussion including some advance planning on what this would require of the PLL program.

Savannah Family Institute is referring to the PLL model they intend to use to work with families involved with CHOICES pilot project as PLL-Reentry. This model has twice the number of family coaching sessions, twelve rather than six, and includes development of a family aftercare plan. Length of engagement would last six months. Initially one PLL therapist would be assigned to work with the CHOICES involved families with more of the PLL case manager's time allocated to this population for support services. The day after the call Bruce Suardini and I met to clarify some points regarding CCMHB support for the new initiative. While start-up would be supported through existing capacity under the CCMHB contract, the expectation is that after demonstrating the effectiveness of the PLL-Reentry model, services would be billed to the CHOICES DCFS pilot project. A meeting with CHOICES is being organized by Savannah Family Institute for mid-December to provide a brief orientation/training and planning discussion. The PLL-Reentry model may also be used to serve youth returning to the community from the Department of Juvenile Justice and those youth would be served under the existing CCMHB contract.

Other Activity: At the United Way Community Impact Committee meeting, updates and discussion was held on a number of topics. Staff updated the committee on a logic model example to be followed by agencies when completing the logic model section of applications. A rough draft of the United Way 2015 Community Report was shared with the committee and members were asked to review and comment on the document. And a request to support Austin's Place, an emergency shelter for single women open during the winter months has been approved. A number of agencies presented at the Child and Adolescent Local Area Network including Juvenile Detention Center and Juvenile Probation, Health Alliance, and Don Moyer Boys and Girls Club. I attended the Prairie Center Prevention program's youth committee meeting. The committee is required under a state contract and includes stakeholders involved in alcohol, tobacco, and substance use prevention activities targeted to youth. The Presence Hospital Community Resource Center held an open house to celebrate the opening of the Promise Healthcare satellite site there. While attending the event I received a tour of the center.

## Lynn Canfield, Associate Director for Developmental Disabilities Staff Report – November 19, 2014

**Board Documents:** A final draft of the CCDDDB Three Year Plan for Fiscal Years 2013-2015 with One Year Objectives for Fiscal Year 2015 incorporates feedback from stakeholders along with the initial reactions of Board members. The Plan is presented for approval at today’s meeting. A final draft of the CCDDDB FY16 Allocation Priorities and Decision Support Criteria is also included in the packet for approval.

**FY2015 Contracts, Quarterly Reports, and Audit Reports:** Peter Tracy led contract negotiations with Individual Advocacy Group, attorneys for both parties, a property manager, and myself to finalize a contract and lease agreement. The agency is working with individuals, families and PAS agents, hiring and training new staff, and exploring local resources and possible collaborations.

Through the new reimbursement tracking system, agency users at Community Choices and Developmental Services Center submitted all First Quarter claims for the Community Living and Service Coordination fee for service contracts, respectively. Proviso Township staff resolved some technical issues, and our first experience generated easy-to-read reports. All other I/DD quarterly program and financial reports were submitted in the online application and reporting system, although not without a few glitches, questions, and reminders. I have started reviewing and entering information in the internal performance database. Two audit report extensions were granted following formal requests, and all but one of the audits have been received.

**Alliance for the Promotion of Acceptance, Inclusion, and Respect:** The Alliance Ebertfest planning committee met on November 12 for discussion of the April 15-19, 2015 festival, ongoing activities, and marketing. The committee’s ideas and questions will be shared at a follow up meeting with the festival coordinator; we will once again have a bit of say in the selection of sponsored film, be involved with a panel discussion, have an art show in the Springer ‘green room,’ and have the option to use the tents in front of the Virginia. Additional concurrent activities may be explored. Throughout the year, two walls of Café Kopi are reserved for Alliance artists’ work and currently feature Daniel L’s paintings; installations rotate according to the shop owner’s schedule. These are supported by promotion through our facebook page and by word of mouth. Entrepreneurs from the Expo’s Pride Room are being connected with similar venues at Café Zojo and the Crossroads Corner Consignment Store; the latter now features handmade knit caps and beaded earrings, and the former is not yet installed, as the artists rebuild their inventory. The enthusiasm of the store owners and individual entrepreneurs is exhilarating.

**Other Activity:** I participated in meetings of the Mental Health Agencies Council and the Champaign Community Coalition and conference calls of the Governor’s Office of Health Innovation and Transformation’s Steering Committee and breakthrough groups of the Long-Term Services and Supports Subcommittee on: Intellectual/Developmental Disabilities (now meeting weekly), Conflict-free

Case Management/Person-Centered Planning, and Behavioral Health. I reviewed Proposed Service Definitions and Provider Qualifications for the 1115 Waiver. I was unable to listen to this month's Community of Practice webinar hosted by the Employment First State Leadership Mentoring Program but hope to catch the next one. In addition, I participated in conference calls of the NACBHDD Policy Committee, Affordable Care Act and Waivers group, and I/DD Committee, and I continued email dialogue with Pete Moore of the Good Life Network (Ohio) about a possible board presentation. By phone and email, I reviewed Oak Park Township's Funding Parameters specific to I/DD contracts and their Performance Measures instrument and shared the latter with Mark Driscoll.

**Ligas, PUNS, and Unmet Need:** An October 23<sup>rd</sup> letter from Equip for Equality's Barry Taylor, on behalf of Ligas Class Counsel, formally objects to Court Monitor Tony Records' lack of findings of non-compliance in the Third Annual Report and requests that he reconsider and find the State out of compliance with the Transition Service Plan provision. Issues cited include Class Member Participation (with class members present in only 47% of transition service plan meetings), Integrated Services (limited options relate to low payment rates, lack of flexibility in CILA program, lack of providers/provider capacity, lack of smaller settings), and Work Environments (real employment is not discussed with a majority of class members, e.g.).

Toward expansion/modification of the role of Pre-Admission Screening/Independent Service Coordination agencies and PUNS, some recommendations converge (e.g., eligibility determination to be completed upon enrollment rather than after selection) from the PUNS Listening Tour, the GOHIT I/DD breakthrough group, and the Life Choices Project workgroups. I will receive an update on the latter from Darlene Kloeppel, CCRPC, after November 12<sup>th</sup>, when the sixth workgroup presents on costs and priorities. Full reports of the Life Choices Project workgroups are to be posted to the DHS-DDD website. Recent conversations with provider agency directors about the impact on Champaign County residents underscore the importance of many proposed changes, and most urgently eligibility determination, but during this time of transition in Illinois, we are even less sure what to expect of real progress in any recommended directions.

CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

11/06/14

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VENDOR NO	VENDOR NAME	TRN B TR	TRN NO	PO NO	CHECK NO	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
***	FUND NO. 090	MENTAL HEALTH								
***	DEPT NO. 053	MENTAL HEALTH BOARD								
25	CHAMPAIGN COUNTY TREASURER									
	11/04/14 04 VR 53-	430			514609	11/06/14	090-053-533.50-00	FACILITY/OFFICE RENTALS	NOV OFFICE RENT	2,884.17
									VENDOR TOTAL	2,884.17 *
41	CHAMPAIGN COUNTY TREASURER									
	10/27/14 02 VR 620-	184			514312	10/31/14	090-053-513.06-00	EMPLOYEE HEALTH/LIFE INS	OCT HI,LI,& HRA	3,117.09
									VENDOR TOTAL	3,117.09 *
88	CHAMPAIGN COUNTY TREASURER									
	10/14/14 08 VR 88-	58			513415	10/16/14	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 10/3 P/R	1,405.81
	10/27/14 02 VR 88-	60			514316	10/31/14	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 10/17 P/R	1,404.86
									VENDOR TOTAL	2,810.67 *
96	CHAMPAIGN COUNTY TREASURER									
	10/28/14 05 VR 53-	239			514317	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	TD2372 FLUID EVENT	2,575.00
	10/28/14 05 VR 53-	304			514317	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	TD2397 CUMTD	1,200.00
	10/28/14 05 VR 53-	382			514317	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	TD2433 FLUID EVENTS	2,575.00
	10/28/14 05 VR 53-	383			514317	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	TD2434 CHRIS ERRERA	1,200.00
									VENDOR TOTAL	7,550.00 *
104	CHAMPAIGN COUNTY TREASURER									
	11/04/14 04 VR 53-	418			514613	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SOC/EMOT SVCS NOV	3,419.00
									VENDOR TOTAL	3,419.00 *
161	CHAMPAIGN COUNTY TREASURER									
	11/04/14 04 VR 53-	417			514616	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	YOUTH ASSMNT CTR NO	2,167.00
									VENDOR TOTAL	2,167.00 *
176	CHAMPAIGN COUNTY TREASURER									
	10/21/14 06 VR 119-	61			513945	10/24/14	090-053-513.04-00	WORKERS' COMPENSATION	INSWORK COMP 9/5,19 P/	161.64
									VENDOR TOTAL	161.64 *



CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

11/06/14

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VENDOR NO	VENDOR NAME	TRN B	TR	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
179	CHAMPAIGN COUNTY TREASURER	11/04/14	04 VR	53- 416		514618	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	CAC NOV	3,090.00
										VENDOR TOTAL	3,090.00 *
188	CHAMPAIGN COUNTY TREASURER	10/14/14	08 VR	188- 100		513420	10/16/14	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 10/3 P/R	1,084.10
		10/27/14	02 VR	188- 104		514321	10/31/14	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 10/17 P/R	1,083.40
										VENDOR TOTAL	2,167.50 *
400	AAIM EMPLOYERS ASSOCIATION	10/23/14	02 VR	53- 385		513948	10/24/14	090-053-533.07-00	PROFESSIONAL SERVICES	INV 162350 10/10	500.00
										VENDOR TOTAL	500.00 *
4321	ANIMAL BALLOONS GALORE	10/28/14	05 VR	53- 392		514332	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	BALLOONS EXPO 10/18	125.00
										VENDOR TOTAL	125.00 *
11586	CU BANNERS	10/23/14	02 VR	53- 389		513967	10/24/14	090-053-533.89-00	PUBLIC RELATIONS	INV 286 10/14	405.00
										VENDOR TOTAL	405.00 *
17128	CLASSIC EVENTS	11/04/14	04 VR	53- 432		514645	11/06/14	090-053-533.95-00	CONFERENCES & TRAINING	INV 2014256 10/22	144.90
										VENDOR TOTAL	144.90 *
18052	COMCAST CABLE - MENTAL HEALTH	10/15/14	01 VR	53- 386		513467	10/16/14	090-053-533.29-00	COMPUTER/INF TCH SERVICES	8771403010088314 OC	84.90
										VENDOR TOTAL	84.90 *
18203	COMMUNITY CHOICE, INC	11/04/14	04 VR	53- 410		514648	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	NOV COMMUNITY LIVIN	4,583.00
		11/04/14	04 VR	53- 410		514648	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	NOV CUSTOM EMPLOY	4,167.00

\*\*\* FUND NO. 090 MENTAL HEALTH



CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

11/06/14

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VENDOR NO	VENDOR TRN B TR	DTE N CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 090	MENTAL HEALTH									
24215	11/04/14 04 VR 53- 421		514660	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	TRAUMA TRAINING NOV		2,500.00	
								VENDOR TOTAL	19,167.00 *	
24215	EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR									
	11/04/14 04 VR 53- 422		514663	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAMILY SUPPORT NOV		1,083.00	
								VENDOR TOTAL	1,083.00 *	
26000	FAMILY SERVICE OF CHAMPAIGN COUNTY									
	11/04/14 04 VR 53- 412		514666	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SELF HELP NOV		2,411.00	
	11/04/14 04 VR 53- 412		514666	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SENIOR COUNSEL NOV		11,861.00	
	11/04/14 04 VR 53- 412		514666	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAMILY COUNSEL NOV		4,167.00	
								VENDOR TOTAL	18,439.00 *	
27200	FLUID EVENTS LLC									
	11/04/14 04 VR 53- 405		514669	11/06/14	090-053-533.89-00	PUBLIC RELATIONS	INV 789 10/23 EXPO		466.76	
	11/04/14 04 VR 53- 405		514669	11/06/14	090-053-533.89-00	PUBLIC RELATIONS	INV 790 10/23 EXPO		356.25	
								VENDOR TOTAL	823.01 *	
44570	MAHOMET AREA YOUTH CLUB									
	11/04/14 04 VR 53- 423		514702	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	UNIV SCREENING NOV		1,250.00	
	11/04/14 04 VR 53- 423		514702	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	BLAST NOV		1,250.00	
								VENDOR TOTAL	2,500.00 *	
45445	MARTIN ONE SOURCE									
	10/28/14 05 VR 53- 401		514445	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	INV105697 10/17 EXP		1,301.00	
	10/28/14 05 VR 53- 401		514445	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	INV105705 10/17 EXP		552.00	
	10/28/14 05 VR 53- 401		514445	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	INV105696 10/17 EXP		61.00	
								VENDOR TOTAL	1,914.00 *	
47690	MINUTEMAN PRESS									
	10/28/14 05 VR 53- 400		514449	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	INV 34485 10/17		156.20	
								VENDOR TOTAL	156.20 *	

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53655	PARTY PREP	11/04/14 04 VR 53- 393			514714	11/06/14	090-053-533.89-00	PUBLIC RELATIONS	INV 10180101 10/18	35.00
									VENDOR TOTAL	35.00 *
56750	PRAIRIE CENTER HEALTH SYSTEMS									
		11/04/14 04 VR 53- 413			514718	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SPECIALTY COURTS NO	15,619.00
		11/04/14 04 VR 53- 413			514718	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	PREVENTION NOV	4,712.00
		11/04/14 04 VR 53- 413			514718	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	PLL EXTEND CARE NOV	24,325.00
		11/04/14 04 VR 53- 413			514718	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	YOUTH SVCS NOV	8,750.00
		11/04/14 04 VR 53- 413			514718	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	CJ SUB TREATMENT NO	833.00
		11/04/14 04 VR 53- 413			514718	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	YOUTH SVCS JULY	180.00
									VENDOR TOTAL	54,419.00 *
57190	PROJECT TE									
		10/14/14 06 VR 53- 380			513556	10/16/14	090-053-533.89-00	PUBLIC RELATIONS	INV 7334 9/10	544.00
		10/23/14 02 VR 53- 388			514054	10/24/14	090-053-533.89-00	PUBLIC RELATIONS	INV 7535 10/7	25.00
									VENDOR TOTAL	569.00 *
57196	PROMISE HEALTHCARE									
		11/04/14 04 VR 53- 414			514720	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	WELLNESS/JUSTICE NO	1,666.00
		11/04/14 04 VR 53- 414			514720	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MH SVCS NOV	13,750.00
									VENDOR TOTAL	15,416.00 *
59434	RAPE, ADVOCACY, COUNSELLING & EDUC SRVCS									
		11/04/14 04 VR 53- 415			514722	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	RAPE/ADVC/COUNSL NO	1,550.00
									VENDOR TOTAL	1,550.00 *
62520	SAM'S CLUB DISCOVER/GEGRB									
		10/15/14 01 VR 53- 390			513568	10/16/14	090-053-533.93-00	DUES AND LICENSES	MBR 556053101008467	100.00
									VENDOR TOTAL	100.00 *
67290	SOAR PROGRAMS									
		11/04/14 04 VR 53- 424			514731	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FAM ENGAGEMENT NOV	11,250.00

\*\*\* FUND NO. 090 MENTAL HEALTH

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***	FUND NO. 090	MENTAL HEALTH									
11/04/14	11/04/14	04 VR	53- 424	514731	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS		UNIV SCREENING NOV		2,317.00
11/04/14	11/04/14	04 VR	53- 424	514731	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS		YOUTH MOVE NOV		5,577.00
									VENDOR TOTAL		19,144.00 *
67867	SPOC LLC								D/B/A CHAMPAIGN TEL		
10/22/14	10/22/14	03 VR	28- 178	514066	10/24/14	090-053-533.33-00	TELEPHONE SERVICE		INV 1107135 10/14		26.64
									VENDOR TOTAL		26.64 *
69540	STEVIE JAY BROADCASTING										
10/14/14	10/14/14	06 VR	53- 381	513582	10/16/14	090-053-533.89-00	PUBLIC RELATIONS		1913000080000 9/30		900.00
10/14/14	10/14/14	06 VR	53- 381	513582	10/16/14	090-053-533.89-00	PUBLIC RELATIONS		1913000090000 9/30		600.00
10/14/14	10/14/14	06 VR	53- 381	513582	10/16/14	090-053-533.89-00	PUBLIC RELATIONS		1913000100000 9/30		300.00
									VENDOR TOTAL		1,800.00 *
76921	UNIVERSITY OF ILLINOIS - PSYCHOLOGICAL SERVICES										
11/04/14	11/04/14	04 VR	53- 426	514748	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS		GIRLS ADVOCACY NOV		2,083.00
									VENDOR TOTAL		2,083.00 *
78120	URBANA NEIGHBORHOOD CONNECTION CENTER										
11/04/14	11/04/14	04 VR	53- 425	514750	11/06/14	090-053-533.92-00	CONTRIBUTIONS & GRANTS		COM STUDY CENTER NO		833.00
									VENDOR TOTAL		833.00 *
78550	VERIZON WIRELESS-MENTAL HEALTH BOARD										
11/04/14	11/04/14	04 VR	53- 406	514753	11/06/14	090-053-533.33-00	TELEPHONE SERVICE		38635688700001 10/2		148.90
									VENDOR TOTAL		148.90 *
78888	VISA CARDMEMBER SERVICE - MENTAL HEALTH										
10/23/14	10/23/14	04 VR	53- 391	514097	10/24/14	090-053-533.89-00	PUBLIC RELATIONS		3930 STAPLES 9/9		90.00
10/23/14	10/23/14	04 VR	53- 391	514097	10/24/14	090-053-533.89-00	PUBLIC RELATIONS		3930 4IMPRINT 9/29		159.11
10/23/14	10/23/14	04 VR	53- 391	514097	10/24/14	090-053-533.89-00	PUBLIC RELATIONS		3930 TARGET 9/30		20.00
10/23/14	10/23/14	04 VR	53- 391	514097	10/24/14	090-053-522.02-00	OFFICE SUPPLIES		3930 STAPLES 9/30		123.21
10/23/14	10/23/14	04 VR	53- 391	514097	10/24/14	090-053-533.89-00	PUBLIC RELATIONS		3930 MICHAELS 10/7		26.97

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***	FUND NO. 090	MENTAL HEALTH										
	10/23/14	04	VR		53- 391		514097	10/24/14	090-053-533.89-00	PUBLIC RELATIONS	3930 HOBBY LBBY 10/	63.94
	10/23/14	04	VR		53- 391		514097	10/24/14	090-053-533.95-00	CONFERENCES & TRAINING	3930 SHERATON 9/13	306.24
	10/23/14	04	VR		53- 391		514097	10/24/14	090-053-533.84-00	BUSINESS MEALS/EXPENSES	3930 TIMPONES 9/11	66.72
	10/23/14	04	VR		53- 391		514097	10/24/14	090-053-533.84-00	BUSINESS MEALS/EXPENSES	3930 OPH MTG 9/15	72.83
	10/23/14	04	VR		53- 391		514097	10/24/14	090-053-533.95-00	CONFERENCES & TRAINING	3930 CROWNE PLZ 10/	78.40
	10/23/14	04	VR		53- 391		514097	10/24/14	090-053-533.84-00	BUSINESS MEALS/EXPENSES	3930 OPH MTG 10/7	37.10
											VENDOR TOTAL	1,044.52 *
81610	XEROX CORPORATION											
	10/23/14	02	VR		53- 387		514111	10/24/14	090-053-533.85-00	PHOTOCOPY SERVICES	INV 132796105 10/4	292.69
											VENDOR TOTAL	292.69 *
601535	BERG, BUNNY											
	10/28/14	05	VR		53- 396		514542	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	INTERP EXPO 10/18	220.00
											VENDOR TOTAL	220.00 *
602880	BRESSNER, BARBARA J.											
	11/04/14	04	VR		53- 404		514768	11/06/14	090-053-533.89-00	PUBLIC RELATIONS	EXPO SPPLY 7/11-10/	151.83
	11/04/14	04	VR		53- 429		514768	11/06/14	090-053-533.07-00	PROFESSIONAL SERVICES	NOV PROFESSIONAL FE	2,625.00
											VENDOR TOTAL	2,776.83 *
609498	CRAWFORD, JEREMY											
	10/28/14	05	VR		53- 394		514549	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	INV 1025 10/12	175.00
											VENDOR TOTAL	175.00 *
609500	CRAWFORD, NANCY K											
	11/04/14	04	VR		53- 402		514778	11/06/14	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	233.5 MILE 9/4-10/2	130.76
	11/04/14	04	VR		53- 402		514778	11/06/14	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	MEAL 9/4-10/24 CHMP	19.28
											VENDOR TOTAL	150.04 *
611802	DRISCOLL, MARK											
	11/04/14	04	VR		53- 407		514780	11/06/14	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	103 MILE 10/1-31	57.68

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***	FUND NO. 090	MENTAL HEALTH									
615730	11/04/14	04 VR	53-	407	514780	11/06/14	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	PARKING 10/1-31		3.00
									VENDOR TOTAL		60.68 *
615730	GODWIN, MARY C.	10/14/14	06 VR	53- 384	513642	10/16/14	090-053-533.07-00	PROFESSIONAL SERVICES	FINAL CONSULT FEE		150.00
									VENDOR TOTAL		150.00 *
631320	MCMURRAY, MARELLA	10/28/14	05 VR	53- 395	514577	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	PRSNL AST EXPO 10/1		61.25
									VENDOR TOTAL		61.25 *
634975	PANEPINTO, ROSE	10/28/14	05 VR	53- 397	514581	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	INTERP EXPO 10/18		247.50
									VENDOR TOTAL		247.50 *
636928	REAR, THERESA A.	10/28/14	05 VR	53- 398	514585	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	INV 123 EXPO 10/18		200.00
									VENDOR TOTAL		200.00 *
641999	SUTER, SUSAN	11/04/14	04 VR	53- 403	514838	11/06/14	090-053-533.95-00	CONFERENCES & TRAINING	180 MILE 10/1-2		100.80
					514838	11/06/14	090-053-533.95-00	CONFERENCES & TRAINING	LODGING 10/1-2 SPGF		75.56
					514838	11/06/14	090-053-533.95-00	CONFERENCES & TRAINING	360 MILE 10/29-30		201.60
					514838	11/06/14	090-053-533.95-00	CONFERENCES & TRAINING	LODGE 10/29-30 CHCG		274.36
					514838	11/06/14	090-053-533.95-00	CONFERENCES & TRAINING	PARKING 10/29-30		79.00
									VENDOR TOTAL		731.32 *
642400	SWIFT, JANI	10/28/14	05 VR	53- 399	514595	10/31/14	090-053-533.89-00	PUBLIC RELATIONS	INTERP EXPO 10/18		192.50
									VENDOR TOTAL		192.50 *
644010	TRACY, PETER	10/14/14	06 VR	53- 379	513705	10/16/14	090-053-533.95-00	CONFERENCES & TRAINING	190 MILE 10/1-2		106.40
									VENDOR TOTAL		106.40 *

MENTAL HEALTH BOARD

DEPARTMENT TOTAL 317,110.35 \*

MENTAL HEALTH

FUND TOTAL 317,110.35 \*

CHAMPAIGN COUNTY

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161	CHAMPAIGN COUNTY TREASURER								

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

\*\*\* DEPT NO. 237 DELINQ PREVENTION GRANTS

161 CHAMPAIGN COUNTY TREASURER  
 11/04/14 04 VR 106- 37  
 514616 11/06/14 106-237-533.92-00 CONTRIBUTIONS & GRANTS

REG PLAN COMM FND075	YOUTH ACCSS CNTR NO	20,051.00
	VENDOR TOTAL	20,051.00 *
DELINQ PREVENTION GRANTS	DEPARTMENT TOTAL	20,051.00 *
PUBL SAFETY SALES TAX FND	FUND TOTAL	20,051.00 *

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*** FUND NO. 641 ACCESS INITIATIVE GRANT									
*** DEPT NO. 053 MENTAL HEALTH BOARD									
41	CHAMPAIGN COUNTY TREASURER								
	10/27/14 02 VR 620- 184			514312	10/31/14	641-053-513.06-00	HEALTH INSUR FND 620	EMPLOYEE HEALTH/LIFE INS OCT HI,LI, & HRA	605.60
								VENDOR TOTAL	605.60 *
88	CHAMPAIGN COUNTY TREASURER								
	10/14/14 08 VR 88- 58			513415	10/16/14	641-053-513.02-00	I.M.R.F. FUND 088	IMRF 10/3 P/R	394.08
	10/27/14 02 VR 88- 60			514316	10/31/14	641-053-513.02-00		IMRF 10/17 P/R	377.15
								VENDOR TOTAL	771.23 *
176	CHAMPAIGN COUNTY TREASURER								
	10/21/14 06 VR 119- 61			513945	10/24/14	641-053-513.04-00	SELF-FUND INS FND476	WORKERS' COMPENSATION INSNORK COMP 9/5,19 P/	44.46
								VENDOR TOTAL	44.46 *
188	CHAMPAIGN COUNTY TREASURER								
	10/14/14 08 VR 188- 100			513420	10/16/14	641-053-513.01-00	SOCIAL SECUR FUND188	SOCIAL SECURITY-EMPLOYER FICA 10/3 P/R	303.91
	10/27/14 02 VR 188- 104			514321	10/31/14	641-053-513.01-00		SOCIAL SECURITY-EMPLOYER FICA 10/17 P/R	290.85
								VENDOR TOTAL	594.76 *
572	ABSOPURE WATER								
	10/28/14 05 VR 641- 116			514325	10/31/14	641-053-533.51-00		INV 54809557 9/30	9.00
	10/28/14 05 VR 641- 116			514325	10/31/14	641-053-533.51-00		INV 54763932 8/31	9.00
	10/28/14 05 VR 641- 116			514325	10/31/14	641-053-533.51-00		INV 54713705 7/31	9.00
	10/28/14 05 VR 641- 116			514325	10/31/14	641-053-522.02-00		INV 83330320 9/3	26.90
	10/28/14 05 VR 641- 116			514325	10/31/14	641-053-522.02-00		INV 83271819 7/15	40.35
								VENDOR TOTAL	94.25 *
18053	COMCAST CABLE - ACCESS INITIATIVE ACCT								
	10/14/14 06 VR 641- 112			513468	10/16/14	641-053-533.29-00	AC#8771403010217756	COMPUTER/INF TCH SERVICES8771403010217756 OC	97.85
								VENDOR TOTAL	97.85 *

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22730	DON MOYER BOYS & GIRLS CLUB									
		11/04/14 04 VR 641-	119		514660	11/06/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS		
		11/04/14 04 VR 641-	119		514660	11/06/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS		13,333.00
		11/04/14 04 VR 641-	119		514660	11/06/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS		18,088.00
									COORD COUNCL NOV	1,250.00
									VENDOR TOTAL	32,671.00 *
56750	PRAIRIE CENTER HEALTH SYSTEMS									
		11/04/14 04 VR 641-	121		514718	11/06/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS		
									CUL/LING COMPT NOV	6,912.00
									VENDOR TOTAL	6,912.00 *
67290	SOAR PROGRAMS									
		11/04/14 04 VR 641-	120		514731	11/06/14	641-053-533.92-00	CONTRIBUTIONS & GRANTS		
									YOUTH MOVE NOV	2,083.00
									VENDOR TOTAL	2,083.00 *
67867	SPOC LLC									
		10/22/14 03 VR 28-	178		514066	10/24/14	641-053-533.33-00	TELEPHONE SERVICE		
									INV 1107135 10/14	24.95
									VENDOR TOTAL	24.95 *
78552	VERIZON WIRELESS-MNTL HLTH									
		10/14/14 06 VR 641-	113		513596	10/16/14	641-053-533.33-00	TELEPHONE SERVICE		
									2863691660001 10/2	153.08
									VENDOR TOTAL	153.08 *
78892	VISA CARDMEMBER SERVICES-ACCESS									
		10/28/14 05 VR 641-	117		514525	10/31/14	641-053-533.95-00	CONFERENCES & TRAINING		
		10/28/14 05 VR 641-	117		514525	10/31/14	641-053-533.95-00	CONFERENCES & TRAINING		575.00
									4342 AM AIRLINE 9/3	360.20
									VENDOR TOTAL	935.20 *
78975	WBCP-AM									
		10/14/14 06 VR 641-	115		513604	10/16/14	641-053-533.89-00	PUBLIC RELATIONS		
									934000160003 9/30	400.00
									VENDOR TOTAL	400.00 *
81610	XEROX CORPORATION									
		10/14/14 06 VR 641-	114		513614	10/16/14	641-053-533.85-00	PHOTOCOPIY SERVICES		
									INV 075949999 9/20	454.71
									VENDOR TOTAL	454.71 *

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*** FUND NO. 641 ACCESS INITIATIVE GRANT											
635152	PARSONS, TRACY	11/04/14	04 VR	641- 118	514822	11/06/14	641-053-533.12-00	JOB-REQUIRED TRAVEL EXP	211 MILE 9/2-30		118.16
									VENDOR TOTAL		118.16 *
									MENTAL HEALTH BOARD	DEPARTMENT TOTAL	45,960.25 *
									ACCESS INITIATIVE GRANT	FUND TOTAL	45,960.25 *
									REPORT TOTAL	*****	655,354.60 *



**CHAMPAIGN COUNTY MENTAL HEALTH BOARD**

12. B

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

**DECISION MEMORANDUM**

**DATE:** November 19, 2014  
**TO:** Members, Champaign County Mental Health Board (CCMHB)  
**FROM:** Peter Tracy, Executive Director  
**SUBJECT:** Out of Cycle Funding Request

**Background**

The Champaign County Mental Health Board (CCMHB) has received a formal request for consideration of out-of-cycle funding using excess revenue from previous years. We have reviewed fourth quarter financial reports and have determined that we expect reimbursement from several providers, but this can't be confirmed accurately until we receive the completed independent financial audits.

**Funding Considerations**

It has been the policy of the CCMHB not to consider out-of-cycle funding requests. There have been exceptions to this rule; however, the exceptions were driven by decisions of the CCMHB rather than requests from providers. It is the opinion of staff that to approve out-of-cycle funding requests now would set a precedent which would invite other such requests this year and in the future. This practice would erode our planning process and limit the availability of funds for programs, services and supports prioritized by the CCMHB.

**Recommendation**

It is the recommendation of staff not to approve out-of-cycle requests during the FY15 contract year, and to reaffirm our policy not to consider out-of-cycle requests in the future, unless planned and initiated by the CCMHB.

**Decision Section:**

Motion to deny consideration of out-of-cycle funding requests during FY15.

- \_\_\_\_\_ Approved
- \_\_\_\_\_ Denied
- \_\_\_\_\_ Modified
- \_\_\_\_\_ Additional Information Needed



# CHAMPAIGN COUNTY MENTAL HEALTH BOARD

13.A

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

### DECISION MEMORANDUM

**DATE:** November 19, 2014  
**TO:** Members, Champaign County Mental Health Board (CCMHB)  
**FROM:** Peter Tracy, Executive Director  
**SUBJECT:** ACCESS Initiative Sustainability Plan: Concepts

#### Background:

The six-year Cooperative Agreement between the Federal Substance Abuse and Mental Health Services Administration (SAMHSA), the Illinois Department of Human Services (IDHS), and the Champaign County Mental Health Board (CCMHB) will end on September 30, 2015. Part of the agreement requires development of a Sustainability Plan, and the purpose of this memo is to present recommendations for the ACCESS Initiative Sustainability Plan for action by the CCMHB.

The components of these recommendations are based on the work of an ad hoc ACCESS Initiative Sustainability Committee which included Dr. Julian Rappaport, Dr. Thom Moore, Mr. Tracy Parsons, Mr. Mark Driscoll, and Peter Tracy, Executive Director. This group has convened on three occasions and has reached consensus on the components of this Decision Memorandum.

#### Statutory Authority:

The Champaign County Mental Health Board (CCMHB) is a nine-member body appointed by the Champaign County Board and has statutory responsibility (Illinois Community Mental Health Act, 405 ILCS 20 / Section 0.1 et.seq.) to plan, fund, monitor, and evaluate mental health, substance abuse, and developmental disability services in Champaign County.

#### Proposed ACCESS Sustainability Recommendations:

**1. Establish a permanent full time position to manage the Champaign County Community Coalition and all components of the ACCESS Initiative Sustainability Plan.** Transition Mr. Tracy Parsons from his position as ACCESS Initiative Project Director to a full time permanent position responsible for the administration and operation of the Champaign County Community Coalition and all aspects of the Sustainability Plan approved by the Illinois Department of Human Services (DHS). This position will be responsible for building a sustainable county-wide system of care for multi-system involved youth that is trauma and justice informed. This coalition includes key decision makers from virtually all youth-serving systems including juvenile justice, law enforcement, education, behavioral health, child welfare, recreation, local government, other key stakeholders, and funding organizations in Champaign County. The vision of the Coalition is to provide a system of care to improve the lives of youth and families who are empowered and safe, to promote effective law enforcement and positive

police-community relations, and to support greater knowledge/use of the resources available. The Coalition was born out of a community tragedy which was the shooting of an unarmed youth by local police. Mr. Parsons has played a key role in the development of the Coalition and has served as facilitator of the monthly community-wide meetings and executive committee meetings. Establishing this position will assure the components of the sustainability plan will continue when the Cooperative Agreement ends in September 2015.

**2. Establish a permanent full time position to coordinate all Cultural and Linguistic Competence (CLC) activities tied to the ACCESS Initiative Sustainability Plan.**

Transition Ms. Shandra Summerville from her position as the ACCESS Initiative Cultural and Linguistic Competence Coordinator to a full time permanent position responsible for all CLC planning and activities associated with the mission of the CCMHB, in order to build on the Cultural and Linguistic Competence (CLC) foundation which was one of the key products of the ACCESS Initiative. This position will be responsible for taking CLC to the next level and integrating CLC plans into the funding allocation decision process. This position will be used to reinforce continued improvement in CLC plans and the capacity of service providers to more effectively address the service and support needs of underserved populations and more intentionally underserved minority populations. This position under the ACCESS Initiative is contracted out to a community-based service provider, but it was the recommendation of the Sustainability Committee to move the position in-house with the CCMHB and thereby reinforce our commitment to addressing service disparities in our community.

**3. Coordination of Evidence Based Services and Supports.**

Under the leadership of the Project Director in collaboration with the Associate Director for Behavioral Health, all child and youth services funded by the CCMHB will be organized to support the sustainability of the System of Care. This will include the continued partnership with Parenting with Love and Limits (PLL) and the Quarter Cent for Public Safety Administrative Team. In addition, high-fidelity WRAParound services and supports will continue as a primary component of the CHOICES implementation of the Department of Children and Family Services (DCFS) and Healthcare and Family Services (HFS) contracts for high-end youth at serious risk of psychiatric hospitalization or out of community residential placement. Mr. Parsons has already laid the groundwork for an ongoing relationship between the CCMHB, the Community Coalition, and CHOICES. In addition, the post-cooperative agreement project will continue to collaborate with ACCESS Initiative evaluators to measure the effectiveness of the sustainability plan components.

**4. Ongoing Support of a Champaign County Youth Organization.**

Systems of Care are by definition youth-guided, and this can best be accomplished by developing a sustainable and viable youth organization (e.g., Youth Move). The ACCESS Initiative has accomplished the foundation stages of a youth organization, and the ACCESS Initiative sustainability plan would be remiss if the youth component was not included. The Sustainability Committee recommends continuation of funding of the Youth Organization through the regular contracting and allocation process. The local youth organization will also serve as the lead youth based entity in the State of Illinois, System of Care expansion activities. The main focus of the youth organization will consist of peer to peer support and advocacy.

**5. Ongoing Support of a Champaign County Parent Organization.**

Systems of Care are also by definition "parent-driven" and based on the successful experiences of other systems of care this can best be accomplished by developing and nurturing a strong and viable parent organization. The ACCESS Initiative has supported the development of a Parent Organization (501c3) which has the capacity to move to the next level. Continuation of constructive and ongoing parent input into the system of care is essential to effectively meeting the needs of multi-system involved youth and families. The Sustainability Committee recommends continuation of funding of the Parent Organization through the regular contracting and allocation process. The parent organization has established a board of directors and leadership structure and has begun serving families. Moreover, the parent organization is playing a major role in the State of Illinois System of Care expansion activities. Contracts with CHOICES, HFS, Champaign Schools, and other child serving providers have been confirmed.

**6. Ongoing support of System of Care Expansion in Illinois.**

As the State of Illinois has received a Federal Award to expand system of care principles and practices statewide, the sustained components of the Access Initiative will play a key and instrumental role in those activities. The project director will serve on a statewide leadership committee. The Youth and Family organizations will serve in leadership roles as contractors, advisors, and facilitators. The foundation for this work has been laid and confirmed.

**Budget Implications:**

This plan is budget neutral. Money for permanent positions and contracts will be either continuation of current contracts or redirection/realignment of money current assigned to support the ACCESS Initiative.

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**Decision Section:**

Motion to approve recommendations #1 through #6 as listed above.

\_\_\_\_\_ Approved

\_\_\_\_\_ Denied

\_\_\_\_\_ Modified

\_\_\_\_\_ Additional Information Needed



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

**DECISION MEMORANDUM**

**DATE: November 19, 2014**  
**TO: CCMHB Members**  
**FROM: Mark Driscoll**  
**SUBJECT: Approve Three-Year Plan (2013 - 2015) with FY 2015 Objectives**

The Three Year Plan (2013 – 2015) with FY 2015 Objectives has been finalized and is attached for the Board’s consideration and action. An initial draft was included in the Board packet distributed in advance of the September 17<sup>th</sup> meeting. Copies were then distributed to agencies and other interested parties for comment. The Mental Health Agencies Council meetings in September and October included an announcement about the Plan and that comments were being solicited.

Comments were received from the Access Initiative, Community Elements, Prairie Center, and the National Alliance on Mental Illness (NAMI). Comments from the ACCESS Initiative focused on cultural competence, NAMI inquired about collaboration on educational programming, and Prairie Center focused on substance use disorder prevention activity as a means of educating the community and reducing youth contact with law enforcement. Community Elements sought clarification on several objectives and shared observations on the changing operating environment in a two page letter (copy attached).

The draft Plan has been revised incorporating elements of the points raised by the commenters. The revised Plan is presented for consideration by the Board. Action is requested.

Decision Section

Motion: Move to approve the Three-Year Plan (2013 – 2015) with Fiscal Year 2015 Objectives as presented.

- Approved
- Denied
- Modified
- Additional Information Needed

Oct 31, 2014

CEO  
Sheila Ferguson

PRESIDENT  
Barry J. Ackerson

VICE PRESIDENT  
George Ordal

TREASURER  
Andrea Wallace

SECRETARY  
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DIRECTORS  
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Sandra Houston  
Peggy Monahan  
Jay Ramshaw  
Alan Ryle  
Jill Schreiber

Peter Tracy  
Mark Driscoll  
Champaign County Mental Health Board  
Brookens Administrative Center  
1776 E. Washington St.  
Urbana, IL 61802  
RE: Three Year Plan 2013-2015 with FY 2015 Objectives

Dear Mr. Tracy and Mr. Driscoll,

Thank you for the opportunity to comment on the draft of the Three Year Plan 2013-2015 with FY 2015 Objectives.

1. Goal #2 Objective #3

It is not clear what the Community Alliance is - maybe this could be clarified?

2. Goal #7 Objective #4

Can this objective include increasing residential options for people with behavioral health issues too? There is a great need for decent, affordable and permanent housing options for individuals in our community and with little funding available from other sources.

3. Goal # 11 Objective #3

While this objective is logical from a funding perspective, it raises some interesting challenges for program implementation. Historically, Medicaid rates have been significantly lower than the actual cost of operating a program. The difference has been provided to agencies as "capacity grants." In the current funding climate, additional pressure is imposed by the need to pre-certify eligibility for services and provide reports and data to managed care entities with no means to recover the associated costs.

In our FY 2015 applications we anticipated the issue with Medicaid eligibility and acknowledged the difficulty in projecting the mix of clients. We noted that: "With the implementation of the Affordable Care Act and Medicaid Expansion in Illinois, the environment for third party reimbursements of behavioral health services is in a state of transition. Illinois has chosen to transition many Medicaid recipients to managed care plans. We have begun to see an increase in Medicaid eligible clients at TIMES Center who previously had no health insurance. Other Medicaid clients have been assigned to a managed care organization by the state.



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Champaign County  
Partner Agency

The full implications of managed care involvement are not clear, however what is evident is it will result in a need for pre-authorizations and some restrictions on approved services and medications. Community Elements is engaged in a number of initiatives to improve health outcomes by integrating primary and behavioral health services. We intend to continue to maximize the revenue from providing medically necessary services to clients eligible for third party payments. However, given the current state of transition it is very difficult to project Medicaid or third party revenue in our Mental Health Board funded programs. Our intent is to monitor revenue throughout the year and use third party revenue to increase capacity and expand services."

In our recent presentation to the Mental Health Board regarding Criminal Justice services, the development of a service continuum is challenging in an environment where revenues are committed for one-year terms and client mix affects the service array. One option is to ensure that CCMHB revenues are used to pay for services to non-Medicaid eligible clients and for services that are not reimbursable by Medicaid. This will allow for programs to develop in a more stable environment.

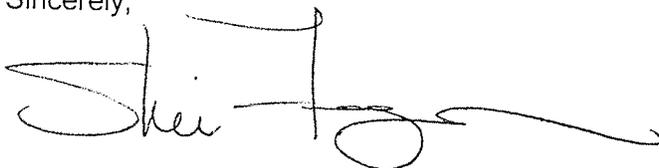
4. Other comments and thoughts for consideration:

Community Elements is interested in how we can begin discussions regarding parity among providers, both Medicaid and Non-Medicaid. If services are fully grant funded for a non-Medicaid organization but, another could potentially capture funding, we should consider this. We should also consider that non-Medicaid providers have reduced paperwork, auditing, and licensing issues which may make them more competitive but not leverage any additional or potential funding. Medicaid and Managed Care contracted organizations will have the potential to possibly offset costs in the future or provide more services than a Non-Medicaid Non-Managed Care contracted organization.

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Hopefully, this response is not too esoteric or philosophical. My intention is to raise these questions so that during this time of major transformation we do not lose sight of the desire everyone has to increase quality, efficacy, access and capacity for individuals in need of behavioral health services in our community.

Sincerely,

A handwritten signature in black ink, appearing to read "Sheila Ferguson", with a long, sweeping flourish extending to the right.

Sheila Ferguson, MSW, LCSW  
Chief Executive Officer

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD**

**THREE-YEAR PLAN**

**FOR**

**FISCAL YEARS 2013 - 2015  
(12/1/12 – 12/31/15)**

**WITH**

**ONE YEAR OBJECTIVES**

**FOR**

**FISCAL YEAR 2015  
(1/1/15 – 12/31/15)**

## CHAMPAIGN COUNTY MENTAL HEALTH BOARD

WHEREAS, the Champaign County Mental Health Board has been established under Illinois Revised Statutes (405 ILCS – 20/Section 0.1 et. seq.) in order to "construct, repair, operate, maintain and regulate community mental health facilities to provide mental health services as defined by the local community mental health board, including services for the developmentally disabled and for the substance abuser, for residents (of Champaign County) and/or to contract therefore..."

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

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

### MISSION STATEMENT

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

### STATEMENT OF PURPOSES

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

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

## CHILDREN, ADOLESCENT, AND FAMILY FOCUSED PROGRAMS AND SERVICES

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

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

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

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

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

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

Objective #2: In collaboration with other units of local government and key stakeholders, implement an effective sustainability plan for the ACCESS Initiative beginning in October 2015. Elements of the sustainability plan should address systems-level coordination, availability of services and supports, cultural and linguistic competence, and viable family and youth organizations.

Objective #3: Reinforce Collaboration efforts with the City Of Champaign and other units of local government to support and expand the Champaign Community Coalition which will serve as the "systems level" for the post-ACCESS Initiative system of care for children and youth.

Objective #4: Support continued implementation of the Parenting with Love and Limits (PLL) program based on positive evaluation and feedback from community partners and stakeholders.

Objective #5: As practicable, leverage resources of juvenile justice system stakeholders and units of local government benefitting from the outcomes of youth and families engaged in PLL.

Objective #6: Maintain collaboration with juvenile justice system stakeholders on implementation and evaluation of the Quarter Cent for Public Safety Fund supported services and PLL and the integration of Quarter Cent funded services and PLL with the ACCESS Initiative.

Objective #7: Monitor evaluation of the ACCESS Initiative through engagement with evaluators on progress, including interim outcomes of the local and

national evaluation, and through participation in the ACCESS Evaluation Collaboration Team.

Goal #3: Support adults' and families' access to services and programs, including evidence based/informed behavioral health practices to increase positive outcomes for consumers.

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

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

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

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

Objective #5: Promote culturally responsive and family driven support networks for underrepresented populations, underserved populations and general populations of Champaign County.

## COMMUNITY ENGAGEMENT & ADVOCACY

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

Objective #1: Continue support for and involvement in the Champaign County Alliance for the Promotion of Acceptance, Inclusion and Respect signature event at Roger Ebert's Film Festival and other community education events including disAbility Resource Expo: Reaching Out for Answers and the ACCESS Initiative Children's Mental Health Awareness Week.

Objective #2: Collaborate with NAMI on supportive educational programs and participate in other community based activities such as walks, forums, and presentations to raise awareness of cultural competence, acceptance, inclusion and respect.

Objective #3: Promote substance use disorder prevention initiatives as a community education tool targeting youth and young adults.

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

Objective #1: Monitor implementation of the Affordable Care Act and the expansion of Medicaid by the State of Illinois and advocate for increased

service capacity sufficient to meet consumer demand through active participation in the Association of Community Mental Health Authorities of Illinois (ACMHA) and other state and national associations.

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

Objective #3: Monitor implementation of the Illinois Employment First Act including any associated rulemaking.

Objective #4: Continue broad based advocacy efforts at the state and local levels to respond to continued reductions in state funding and increasing delays in payment for local community based mental health, substance use disorder, and intellectual disability and developmental disability services and supports and to the broader human services network under contract with the State of Illinois.

Objective #5: In collaboration with the United Way of Champaign County, monitor implementation of the regional 211 information and referral system and its impact on local utilization of funded information and referral services.

Objective #6: Assess impact on local systems of care for persons with mental illness, substance use disorder, intellectual disabilities and/or developmental disabilities of the State of Illinois and provider networks movement to a regional service delivery model.

Objective #7: Collaborate with the Illinois Department of Human Services and the Illinois Department of Healthcare and Family Services to support and participate in the implementation of Medicaid managed care pilot projects. This would also include anticipated changes in the Early, Periodic, Screening, Diagnosis and Treatment (EPSDT) Medicaid program.

## RESOURCE DEVELOPMENT & COLLABORATION

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

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

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

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

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

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

Objective #6: Evaluate potential for expansion of residential options for persons with behavioral health needs.

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

Objective #1: Implement the Intergovernmental Agreement between CCMHB and CCDDDB as amended.

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

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

Objective #4: In collaboration with the CCDDDB, implement contracts to expand the availability of Community Integrated Living Arrangement (CILA) housing opportunities for people with ID/DD from Champaign County.

Objective #5: Assure there is adequate collaboration and communication between the CCMHB and the CCDDDB by holding regular quarterly meetings between the Executive Director and the Presidents of the two Boards, sharing of information between the Boards, and co-sponsoring public hearings, trainings and anti-stigma events.

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

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

Objective #2: In collaboration with county government, the criminal justice system and community based behavioral health service providers, develop an efficacious system of care designed to divert people with behavioral health needs from incarceration in the County Jail, assure appropriate linkage to behavioral health services for people discharged from the jail, and provide intensive case management for people with frequent incarcerations.

Objective #3: Continue participation in the Champaign County Specialty Court Steering Committee and support for Champaign County Drug Court and support restoration of the Champaign County Mental Health Court.

Objective #4: Using established oversight committees, review performance and evaluation reports including data on recidivism.

Objective #5: Support integrated planning and service coordination for adults involved in the criminal justice system through participation in the Champaign County Re-Entry Council.

#### ORGANIZATIONAL DEVELOPMENT, ADMINISTRATION, AND ACCOUNTABILITY

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

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

Objective #2: Realign resources to incorporate cultural competence efforts by prioritizing FY16 funding for cultural competence staff and/or consultation, continue to track funded agency progress on implementation of cultural competence plans and support efforts to address issues raised in the Surgeon General's Report Mental health: Race, Culture, and Ethnicity, and use this information as a key component of the allocation decision-making structure.

Objective #3: Solicit input from the service network and community at large on proposed funding priorities prior to adoption.

Objective #4: Utilize a competitive application process to evaluate proposals in relation to annual priorities.

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

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

Objective #2: Implement the web-based billing system to support fee for service contracts and improvement of accountability utilizing the Proviso Reimbursement Tracking System in collaboration with the Proviso Township Mental Health Commission.

Objective #3: Evaluate provider administrative expenses and cost allocation plans to ensure maximum investment in consumer services.

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

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

Objective #2: Monitor the State of Illinois Department of Human Services budget pertaining to the elimination, reduction, or continuation of the temporary state income tax surcharge and the resulting impact on state funding for community based systems of care for mental health, substance use disorders and intellectual disabilities and developmental disabilities.

Objective #3: Continue efforts to separate local funding from State/Medicaid funded programs as a means of avoiding supplementation of Medicaid rates.



# CHAMPAIGN COUNTY MENTAL HEALTH BOARD

B.C.

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

### DECISION MEMORANDUM

**DATE:** November 19, 2014  
**TO:** Members, Champaign County Mental Health Board (CCMHB)  
**FROM:** Peter Tracy, Executive Director  
**SUBJECT:** FY16 Allocation Priorities and Decision Support Criteria

#### Overview:

The purpose of this memorandum is to provide recommendations pertaining to the FY16 (July 1, 2015 through June 30, 2016) Champaign County Mental Health Board (CCMHB) allocation decision support criteria and funding priorities. Stakeholders were invited to review, comment and identify additional priorities for the Board's consideration.

#### Statutory Authority

Funding policies of the Champaign County Mental Health Board (CCMHB) are predicated on the requirements of the Illinois Community Mental Health Act (405 ILCS 20 / Section 0.1 et.seq.). All funds shall be allocated within the intent of the controlling act as codified in the laws of the State of Illinois. The purpose of this memorandum is to recommend and confirm service and program priorities for the FY15 (July 1, 2014 through June 30, 2015) funding cycle. CCMHB Funding Guidelines require annual review and update of decision support criteria and priorities in advance of the funding cycle application process.

#### Coordination of Funding

Changes in law, rules and regulations at the federal and State levels will require local government funders (i.e., CCMHB/CCDDB) to be cognizant of the terms and conditions of Federal and State contracts with local service providers that also receive our funding. Many of these changes including the shift to Medicaid as the primary funding source place limitations on how our funding can be used, and have resulted in realigning our dollars to purchase services and supports for people who are not covered by Medicaid, or for services which are not included specifically as Medicaid Benefits.

All CCMHB/CCDDB contracts specify the eligible populations and the services/supports which are to be delivered consistent with budgeted revenue and costs. Local funding is therefore not to be used to supplement Medicaid services which are provided to Medicaid eligible persons through direct contracts with State of Illinois agencies. The CCMHB/CCDDB requires separate cost centers for all contracts and does not allow providers to comingle local funding with State of Illinois funding, or comingled with a provider's State-Agency cost center. Additionally, CCMHB/CCDDB contracts require our funding to be the last funds used if other funding is available. This means Medicaid eligible clients receiving services from providers via contracts with State Agencies are excluded from access to local (CCMHB/CCDDB) funding for services that are covered by Medicaid or other State of Illinois contracts. It is our position that CCMHB/CCDDB funding shall not be used for services/supports that could be billed to the State of Illinois (i.e., Medicaid), and local funding shall not be used to supplant other funding sources.

particularly Medicaid which is an entitlement with a defined set of benefits for enrolled and eligible individuals.

Insofar as local provider contracts with State of Illinois agencies, the Medicaid rate paid for a service or support is, by law, all-inclusive and must be taken as payment in full by the provider. Because the Medicaid rate is all-inclusive and considered payment in full, the provider is prohibited from charging any amount over and above what Medicaid pays for a covered service to an eligible client. The provider is not allowed to accept additional payment for service by billing any third party, whether or not the third party is willing to help (i.e., supplement). In addition, the Waiver Program Provider Agreement for Participation in the Illinois Medical Assistance Program specifically states in Item #6 **“Payments to the Provider under this agreement shall constitute payment in full. Any payments received by the Provider from other sources shall be shown as a credit and deducted from the Provider’s charges.”**

### **Expectations for Minimal Responsiveness**

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

1. Eligible applicant – based on the Organization Eligibility Questionnaire.
2. Compliance with the application deadline. Late applications will not be accepted.
3. Application must relate directly to mental health, substance abuse or developmental disabilities programs and services.
4. Application must be appropriate to this funding source and shall provide evidence that other funding sources are not available to support this program/service.

### **FY16 Decision Priorities and Decision Support Criteria**

#### **Priority #1: Collaboration with the Champaign County Developmental Disabilities Board**

Full compliance with the terms and conditions of the Intergovernmental Agreement between the CCMHB and the Champaign County Developmental Disabilities Board (CCDDDB). This agreement defines the FY16 allocation for developmental disabilities programs and services, as well as the expectation for integrated planning by the Boards.

There have been significant changes in law, rules, and regulations that have altered the nature of ID/DD services and supports, and these changes also define, to a great extent, the parameters for allocation of funds. The changes have been extended by court orders and recent legislation. These include (a) Olmstead, (b) Ligas Consent Decree (c) Williams Consent Decree, (d) the Illinois Employment First Act, (e) the final CMS Home and Community Based Rule, (f) the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) class action lawsuit in Illinois, (g) executive orders in three states which phase out the use of segregated centers and/or sheltered workshops, (h) the Oregon lawsuit to eliminate segregated centers and sheltered workshops, (i) the Affordable Care Act, (j) the proposed Illinois 1115 Waiver, and (k) the implementation of ID/DD managed care in Illinois.

If asked to identify a common denominator for all of the changes listed above, it is pretty clear that it would be inclusion and integration of people with intellectual and developmental

disabilities (I/DD). All of the major areas of services and supports require movement away from segregated centers and services which limit the person's access to the community. In fact, the new CMS rule actually emphasizes that States are expected to ensure that people with I/DD have the same level of access to the community as people that do not have a disability. Using the Person Centered Planning process as a guide, the emerging changes are focused on integration, quality of life, self-determination, human and civil rights, advocacy, and protection. That said, the CCDDDB strongly believes and will support programs, services and supports which manifest the following:

- Individuals with disabilities have the opportunity to live like those without disabilities, and have control over their day and over where and how they live.
- Supports for individuals with disabilities that focus on building connection, companionship, and contribution in the broader community, and on supporting presence and participation in community settings where their individual contributions will be recognized and valued.
- Supports for individuals with disabilities that focus on developing and strengthening personal support networks that include friends, family members, and community partners.
- Supports for individuals with disabilities that systematically identify and mobilize individual gifts and capacities and create access to community associations, workplaces, and learning spaces in which network members have influence and standing.

As a local funding organization responsive to changes in law, rule, and regulation, all applications associated with the priorities shall be evaluated using the "lens of inclusion and integration."

#### Priority #2 – ACCESS Initiative Sustainability

The CCMHB has committed to sustaining our system-of-care after the term of the cooperative agreement with IDHS expires on September 30, 2015. A concept briefing memorandum outlines the proposed components of the ACCESS Initiative sustainability plan and is a separate agenda item presented for CCMHB consideration. The proposed plan includes the following components: (1) Facilitation of the Community Coalition to serve as the planning/policy integration mechanism for the post-cooperative agreement System-of-Care; (2) an enhanced in-house Cultural and Linguistic Competence coordinator to build on the accomplishments of the ACCESS Initiative; (3) an Integrated Service and Support Network including coordination with CHOICES; (4) A youth organization; (5) a family organization; (6) and, leadership and coordination with State of Illinois System of Care Expansion.

#### Priority #3 – Behavioral Health Programs for Youth with Serious Emotional Disturbance.

Alignment between Quarter Cent for Public Safety funding, CCMHB funding, and other federal, state and/or local funding streams to efficaciously address the needs of multi-system involved youth with SED by supporting the following services and supports:

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

Priority #4 – Behavioral Health Services and Supports for Adults with a Behavioral Health and Criminal Justice Interface.

Continuation during FY16 of the reconfigured behavioral health system which was designed to assure appropriate linkage to behavioral health services following incarceration, deflection of people with serious behavioral health problems prior to incarceration, and improved coordination between community based service providers and the Champaign County Jail's behavioral health service provider for people during their incarceration. Included under this priority is our continued support of the specialty courts, related services and supports. Full compliance with memoranda of understandings pertaining to specialty courts will be continued during FY16. Stakeholder input has identified a need for and recommended development of a diversion alternative such as a recovery center, in Champaign County. Proposals to develop a plan for establishing a recovery center will be accepted under this priority.

Priority #5 – Wellness for People with Disabilities

The CCMHB believes that disparities in life expectancy for people with disabilities is unacceptable, and to the extent possible we should prioritize funding for programs, services and supports consistent with SAMHSA's Eight Dimensions of Wellness. In this context wellness means overall well-being and incorporates the mental, emotional, physical, occupational, intellectual, and spiritual aspects of a person's life.

The significant mortality gap for people with disabilities is predicated on the combination of (1) a higher occurrence of risk factors for chronic diseases and some types of cancer; (2) the iatrogenic effects of some psychiatric medications; (3) higher rates of suicide, accidental and violent death; and (4) poorer access to physical healthcare than for the general population. The following are salient factors which are of specific concern:

- People with serious and persistent mental illness have a life expectancy a full 25 years shorter than people without significant behavioural health needs. Three out of five die from preventable chronic diseases such as asthma, diabetes, cancer, heart disease and cardiopulmonary conditions.
- People with intellectual or developmental disabilities (IDD) experience disparities in oral health outcomes, a key factor in the quality of life and life expectancy of people with disabilities.
- Women with significant disabilities were 57 percent less likely to report receiving Pap tests and 56 percent less likely to report receiving mammograms compared with women who did not have disabilities, regardless of age.
- People with disabilities of all ages have more than twice the incidence of diabetes than those without disabilities.
- People with disabilities older than 18 have a 10% higher incidence of hypertension than adults without disabilities (29.3% versus 39.3%).

The CCMHB is committed to addressing these issues in Champaign County and is seeking applications which provide solutions to these problems by focusing on prevention/health promotion, screening, and access to quality, integrated, individualized care and treatment. Supportive activities could include counselling, advocacy, prevention, and education.

### Priority #6 - Local Funder Collaboration on Special Initiatives

It is recommended we continue to monitor local funder collaborations intended to expand the availability of psychiatric services in Champaign County, development of alcohol and substance use detoxification services, and/or development of an emergency shelter for families facing homelessness. Expansion of psychiatric services could include supporting a partnership between community based behavioral health providers and the Federally Qualified Health Center (FQHC) in Champaign County. The only caveat to this item pertains to how the ACA and Medicaid expansion addresses this deficiency. The implementation of Medicaid managed care could conceivably address this issue. An emergency shelter for families was piloted in the community last winter and spring. The prospect exists for those involved with the pilot to lead an effort to establish a permanent facility. As part of any collaboration with other local funders on an emergency shelter for families, consideration would be given to providing support services at the shelter.

### Overarching Decision Support Considerations

The FY16 CCMHB allocation process will require all applications to address the overarching criteria listed below. Assessment of all FY16 applications will focus on alignment with these overarching criteria.

1. **Underserved Populations** - Programs and services that promote access for underserved populations identified in the Surgeon General's Report on Mental Health: Culture, Race, and Ethnicity and the consultation with Carl Bell, M.D. In addition, actions should align with the Culturally and Linguistically Appropriate Services (CLAS) standards outlined in "A Blueprint for Advancing and Sustaining CLAS Policy and Practice."
2. **Countywide Access** - Programs and services that promote county-wide access for all people in Champaign County. Zip code data is mandated.
3. **Budget and Program Connectedness** - Applications that clearly explain the relationship between budgeted costs and program components receive additional consideration. "What is the Board buying?" is the salient question that must be answered in the proposal, and clarity is required.
4. **Realignment of Existing FY15 Contracts to Address Priorities** - The CCMHB reserves the right to reduce or eliminate incumbent programs and services in order to support the six FY16 priorities listed in this memorandum.
5. **Anti-Stigma Efforts** - Activities that support efforts to reduce stigma associated with mental health, substance use disorders, and intellectual disabilities/developmental disabilities by increasing community awareness and challenging negative attitudes and discriminatory practices.

### Secondary Decision Support and Priority Criteria

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

Approach/Methods/Innovation: Applications proposing evidence based or research based approaches, and in addition address fidelity to the specific model cited. Applications

demonstrating creative and/or innovative approaches to meet defined community need will receive additional consideration.

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

### **Process Considerations**

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

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

### **Caveats and Application Process Requirements:**

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

- The CCMHB reserves the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCMHB deems such variances to be in the best interest of Champaign County.
- Applications and submissions become the property of the CCMHB and as such, are public documents that may be copied and made available upon request after allocation decisions have been made. Materials submitted will not be returned or deleted from the on-line system.
- The CCMHB reserves the right, but is under no obligation, to negotiate an extension of any contract funded under this allocation process for up to a period not to exceed two years with or without additional procurement.
- If selected for contract negotiations, the applicant may be required to prepare and submit additional information prior to final contract execution, in order to reach terms for the provision of services that are agreeable to both parties. Failure to submit required information may result in cancellation of the award of a contract.
- The execution of financial contracts resultant of this application process is dependent upon the availability of adequate funds and the needs of Champaign County.
- The CCMHB reserves the right to further define and add additional application components as needed. Applicants selected as responsive to the intent of this on-line application process will be given equal opportunity to update proposals for the newly identified components.
- All proposals considered must be received on time and must be responsive to the application instructions. The CCMHB is not responsible for lateness or non-delivery of mail or messenger. Late applications shall be rejected.
- The contents of a successful application will be developed into a formal contract, if selected for funding. Failure of the applicant to accept these obligations can result in cancellation of the award for contract. The CCMHB reserves the right to withdraw or reduce the amount of an award if there is misrepresentation of the applicant's ability to perform as stated in the application.
- The CCMHB reserves the right to negotiate the final terms (i.e., best and final offer) of any or all contracts with the applicant selected and any such terms negotiated as a result of this application process may be renegotiated and/or amended in order to meet the needs of Champaign County. The CCMHB also reserves the right to require the submission of any revision to the application, which results from negotiations conducted.
- The CCMHB reserves the right to contact any individual, agency or employer listed in the application or to contact others who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.

**Decision Section:**

Motion: Move to approve the FY16 Allocation Priorities and Decision Support Criteria as described in this memorandum.

\_\_\_\_\_ Approved

\_\_\_\_\_ Denied

\_\_\_\_\_ Modified

\_\_\_\_\_ Additional Information Needed



## CHAMPAIGN COUNTY MENTAL HEALTH BOARD

13.D

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

#### DECISION MEMORANDUM

**DATE:** November 19, 2014  
**TO:** Members, Champaign County Developmental Disabilities Board  
**FROM:** Peter Tracy, Executive Director  
**SUBJECT:** FY16 Allocation Priorities and Decision Support Criteria

#### Overview:

The purpose of this memorandum is to provide recommendations pertaining to the FY16 (July 1, 2015 through June 30, 2016) Champaign County Developmental Disabilities Board (CCDDB) allocation decision support criteria and funding priorities. Stakeholders were invited to review, comment, and identify additional priorities for the Board's consideration.

#### Statutory Authority

Funding policies of the Champaign County Developmental Disabilities Board (CCDDB) are predicated on the requirements of the County Care for Persons with Developmental Disabilities Act (55 ILCS 105/ Section 0.01 et. seq.). All funds shall be allocated within the intent of the controlling act as codified in the laws of the State of Illinois. CCDDB Funding Guidelines require annual review and update of decision support criteria and priorities in advance of the funding cycle application process.

Upon approval by the Board, this memorandum shall become an addendum to the CCDDB funding guidelines incorporated in standard operating procedures.

#### Coordination of Funding

Changes in law, rules and regulations at the federal and State levels will require local government funders (i.e., CCMHB/CCDDB) to be cognizant of the terms and conditions of Federal and State contracts with local service providers that also receive our funding. Many of these changes including the shift to Medicaid as the primary funding source place limitations on how our funding can be used, and have resulted in realigning our dollars to purchase services and supports for people who are not covered by Medicaid, or for services which are not included specifically as Medicaid Benefits.

All CCMHB/CCDDB contracts specify the eligible populations and the services/supports which are to be delivered consistent with budgeted revenue and costs. Local funding is therefore not to be used to supplement Medicaid services which are provided to Medicaid eligible persons through direct contracts with State of Illinois agencies. The CCMHB/CCDDB requires separate cost centers for all contracts and does not allow providers to comingle local funding with State of Illinois funding, or comingled with a provider's State-Agency cost center. Additionally, CCMHB/CCDDB contracts require our funding to be the last funds used if other funding is available. This means Medicaid eligible clients receiving services from providers via contracts

with State Agencies are excluded from access to local (CCMHB/CCDDB) funding for services that are covered by Medicaid or other State of Illinois contracts. It is our position that CCMHB/CCDDB funding shall not be used for services/supports that could be billed to the State of Illinois (i.e., Medicaid), and local funding shall not be used to supplant other funding sources, particularly Medicaid which is an entitlement with a defined set of benefits for enrolled and eligible individuals.

Insofar as local provider contracts with State of Illinois agencies, the Medicaid rate paid for a service or support is, by law, all-inclusive and must be taken as payment in full by the provider. Because the Medicaid rate is all-inclusive and considered payment in full, the provider is prohibited from charging any amount over and above what Medicaid pays for a covered service to an eligible client. The provider is not allowed to accept additional payment for service by billing any third party, whether or not the third party is willing to help (i.e., supplement). In addition, the Waiver Program Provider Agreement for Participation in the Illinois Medical Assistance Program specifically states in Item #6 **“Payments to the Provider under this agreement shall constitute payment in full. Any payments received by the Provider from other sources shall be shown as a credit and deducted from the Provider’s charges.”**

#### **Expectations for Minimal Responsiveness**

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

1. Eligible applicant – based on the Organization Eligibility Questionnaire.
2. Compliance with the application deadline. Late applications will not be accepted.
3. Application must relate directly to intellectual disabilities and developmental disabilities programs, services, and supports.
4. Application must be appropriate to this funding source and shall provide evidence that other funding sources are not available to support this program/service.

#### **FY16 Priorities and Decision Support Criteria**

There have been significant changes in law, rules, and regulations that have altered the nature of I/DD services and supports, and these changes also define, to a great extent, the parameters for allocation of funds. The changes have been extended by court orders and recent legislation. These include (a) Olmstead, (b) Ligas Consent Decree (c) Williams Consent Decree, (d) the Illinois Employment First Act and subsequent Executive Order, (e) the final CMS Home and Community Based Rule, (f) the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) class action lawsuit in Illinois, (g) executive orders in three states which phase out the use of segregated centers and/or sheltered workshops, (h) the Oregon lawsuit to eliminate segregated centers and sheltered workshops, (i) the Affordable Care Act, (j) the proposed Illinois 1115 Waiver, and (k) the implementation of I/DD managed care in Illinois.

#### **CCDDB FY16 Decisions: A View Through the Lens of Inclusion and Integration**

If asked to identify a common denominator for all of the changes listed above, it is pretty clear that it would be inclusion and integration of people with intellectual disabilities and/or developmental disabilities (I/DD). All of the major areas of services and supports require movement away from segregated centers and services which limit the person’s access to the

community. In fact, the new CMS rule actually emphasizes that States are expected to ensure that people with I/DD have the same level of access to the community as people who do not have a disability. Using the Person Centered Planning process as a guide, the emerging changes are focused on integration, quality of life, self-determination, human and civil rights, advocacy, and protection. That said, the CCDDDB strongly believes and will support programs, services and supports which manifest the following:

- Individuals with disabilities have the opportunity to live like those without disabilities, and have control over their day and over where and how they live.
- Supports for individuals with disabilities that focus on building connection, companionship, and contribution in the broader community, and on supporting presence and participation in community settings where their individual contributions will be recognized and valued.
- Supports for individuals with disabilities that focus on developing and strengthening personal support networks that include friends, family members, and community partners.
- Supports for individuals with disabilities that systematically identify and mobilize individual gifts and capacities and create access to community associations, workplaces, and learning spaces in which network members have influence and standing.

As a local funding organization responsive to changes in law, rule, and regulation, all applications associated with the priorities listed below shall be evaluated using the “lens of inclusion and integration.”

#### Priority: Transition to Inclusion and Integration

Applications which focus on the systematic transition of segregated programming to a fully integrated model consistent with statute and CMS rule changes will be prioritized, but the transition must be aggressive with timelines and measurable goals and objectives. This provision would apply to any existing contract which is obsolete or in line for significant change due to rule changes, court decisions, or statute changes (e.g., Employment First).

#### Priority: Person Centered Planning (PCP)

Applications shall provide detailed information about the PCP process used by the applicant to develop a cogent service and support plan predicated on and specific to CCDDDB funding and which identifies and mobilizes community partnerships and resources that exist beyond the service system. To the extent possible, CCDDDB dollars will follow individuals rather than programs and will focus on PCP-driven services and supports associated with the individual. In addition, the PCP process shall promote self-directed and culturally appropriate individualized service plans which include measurable desired outcomes that strike a balance between what is ‘important-to’ and what is ‘important-for’ the individual.

PCP processes should be outcome-based, directed by and continually focused on the individual (rather than on available services and supports), and building on their gifts and strengths. In addition, the planning process should address an individual's health and welfare needs and their need for information and guidance, and should rely on the participation of allies chosen by the individual. PCP documentation should be meaningful to the individual and useful to those involved with its implementation.

PCP processes must include the presence and participation of the person with a disability, including whatever supports the person needs to express his or her intentions and wishes. These supports may include participation and representation by one or more family members, friends, or community partners in whom the person with a disability has indicated trust, especially in cases where the individual may have significant difficulty expressing their intentions and wishes.

Individuals should have the opportunity to make informed choices, based on access to complete information about services and financial supports available in integrated settings, exposure to integrated settings and individuals who work and live in them, and exploration of any concerns they may have about integrated settings.

Priority: Cultural and Linguistic Competence

Applications focusing on improved, earlier identification of intellectual and developmental disabilities in underrepresented populations and on reduction of racial disparities in I/DD service/support participation shall be prioritized.

Priority: Employment Services and Supports

Applications which focus on vocational services and supports which are predicated on efficacious PCP processes and which incorporate Employment First principles shall be prioritized, with an emphasis on full or part time work in integrated, community settings, consistent with industry standards, based on a person's interests and abilities, and, when indicated and chosen, supported by individually designed services. Applications consistent and aligned with the Equip For Equality Employment First implementation recommendations and applications which aggressively advance Employment First programming will receive additional consideration.

Priority: Expansion of Community Integrated Living Arrangements (CILA)

Applications which offer creative approaches to increasing the availability of smaller CILA (4-person, 3-person, 2-person or 1 person) homes in Champaign County shall be prioritized.

Priority: Workforce Development and Stability

Applications which propose creative solutions concerning recruitment and retention of front-line, direct service staff shall be prioritized. This workforce problem is especially critical for direct care staff in CILAs, which experience high levels of turnover and difficulty in recruitment due to the low salary levels as well as challenging work (e.g., use of bonuses paid to direct care staff as a way of supplementing low salaries). The following is a partial listing of systemic problems associated with this issue:

- High turnover rates of direct care staff in CILAs and developmental training settings
- An increasing need for more direct care staff to address the CILA capacity problems – likely to be more than double the current workforce based on Ligas and PUNS data.
- Significant vacancy rates in existing funded direct care positions.
- Increased costs associated with turnover including recruitment costs, overtime pay, and required training necessary for new staff.

- Significant negative effects on the quality of services and supports manifested by gaps in coverage, discontinuity of care, and interference with the development of positive relationships between workers and those they support.
- There is an increase in competition for direct care staff as the need for people increases in other areas (e.g., long term support for people with age related issues).

Priority: Comprehensive Services and Supports for Young Children

Applications with a focus on services and supports for young children with developmental delays not covered by the State's Early Intervention program(s) or under the School Code shall be prioritized. Examples of services and supports include:

- an array of Early Intervention services addressing all areas of development;
- coordinated, home-based, and taking into consideration the needs of the entire family;
- early identification of developmental delays through consultation with child care providers, pre-school educators, and medical professionals;
- supports (including education, coaching, and facilitation) that focus on developing and strengthening personal and family support networks that include friends, family members, and community partners;
- supports that systematically identify and mobilize individual gifts and capacities and create access to community associations, workplaces, and learning spaces in which network members have influence and standing.

Priority: Flexible Family Support

Applications which focus on flexible, PCP-driven, family support for people with I/DD and their families, which are designed to enhance stability and their ability to live together, shall be prioritized. Examples of flexible family support include:

- family respite, recreational activities, mutual support options, transportation assistance;
- assistive technology, home modification/accessibility supports, information, and education;
- other diverse supports which allow individuals and their families to determine care and treatment;
- assistance to the family to develop and maintain active, engaged personal support networks for themselves and their son or daughter.

Priority: Adult Day Programming and Social and Community Integration

Applications for PCP-driven adult day programming for people with I/DD who may also have behavioral support needs and/or significant physical limitations shall be prioritized. Examples of services include:

- speech therapy, occupational therapy, fitness training, personal care support;
- support for the development of independent living skills, social skills, communication skills, and functional academics skills;
- community integration and vocational training, per consumer preferences
- facilitation of social, friendship, and volunteering opportunities;
- access to community education programs, fitness and health promotion activities, mentoring opportunities, and by other creative means.

Priority: Self Advocacy and Family Support Organizations

Applications highlighting an improved understanding of I/DD through support of sustainable self-advocacy and family support organizations, especially those comprising persons who have I/DD, their parents, and others in their networks of support, shall be prioritized.

Priority: Inclusion and Anti-Stigma Programs and Supports

Applications that support efforts to reduce stigma associated with I/DD may describe creative approaches toward the goals of increasing community awareness, promoting inclusion, and challenging negative attitudes and discriminatory practices.

**Overarching Decision Support Considerations**

The FY16 CCDDDB allocation process will require all applications to address the overarching criteria listed below. Assessment of all FY16 applications will focus on alignment with these overarching criteria.

1. Underserved Populations - Programs and services that promote access for underserved populations identified in the Surgeon General's Report on Mental Health: Culture, Race, and Ethnicity and the consultation with Carl Bell, M.D. In addition, actions should align with the Culturally and Linguistic Appropriate Services (CLAS) standards outlined in 'A Blueprint for Advancing and Sustaining CLAS Policy and Practice.'
2. Countywide Access - Programs and services that promote county-wide access for all people in Champaign County. Zip code data is mandated.
3. Medicaid Anti-Supplementation – Programs and services eligible for Medicaid reimbursement for eligible people with intellectual disabilities and developmental disabilities shall not receive CCDDDB funding.
4. Budget and Program Connectedness - Applications must clearly explain the relationship between budgeted costs and program components and must demonstrate how individuals and their preferences are driving the services. "What is the Board buying and for whom?" is the salient question to be answered in the proposal, and clarity is required.

**Secondary Decision Support and Priority Criteria**

The process items included in this section will be used as important discriminating factors which influence final allocation decision recommendations.

1. Approach/Methods/Innovation: Applications proposing evidence-based or research-based approaches and addressing fidelity to the model cited. Applications demonstrating creative and/or innovative approaches to meet defined community need.
2. Evidence of Collaboration: Applications identifying collaborative efforts with other organizations serving or directed by individuals with I/DD and members of their support networks, toward a more efficient, effective, inclusive system of care.
3. Staff Credentials: Applications highlighting staff credentials and specialized training.
4. Records Systems Reflecting CCDDDB Values and Priorities: Applications proposing to develop and utilize records systems for individual supports, programs, and projects that clearly reflect CCDDDB values and priorities. Such records systems can be used to provide

rapid feedback to CCDDDB on the impact and efficacy of innovative projects and provide project managers and direct support staff with direction and feedback that can be utilized in day-to-day management, supervision, and mentoring / coaching.

### **Process Considerations**

The criteria described in this memorandum are to be used as guidance by the Board in assessing applications for CCDDDB funding. However, they are not the sole consideration taken into account in finalizing funding decisions. Other considerations would include the judgment of the Board and its staff, opinion about the provider's ability to implement the program and services proposed, the soundness of the proposed methodology, and the administrative and fiscal capacity of the agency. Further, to be eligible to receive CCDDDB funds, applications must reflect the Board's stated goals and objectives as well as the operating principles and public policy positions taken by the Board. The final funding decisions rest with the CCDDDB and their judgment concerning the most appropriate and efficacious use of available dollars based on assessment of community needs, equitable distribution across disability areas, and decision-support match up.

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

### **Caveats and Application Process Requirements:**

- Submission of an application does not commit the CCDDDB to award a contract or to pay any costs incurred in the preparation of an application or to pay for any other costs incurred prior to the execution of a formal contract.
- Technical assistance available to applicants will be limited to process questions concerning the use of the online registration and application system, application forms, budget forms, application instructions, and CCDDDB Funding Guidelines.
- Applications which include excessive information beyond the scope of the application format will not be reviewed and, at the discretion of staff, may be disqualified from consideration. Letters of support for applications are discouraged and, if submitted, will not be considered as part of the allocation and selection process.
- The CCDDDB retains the right to accept or reject any or all applications and reserves the right to refrain from making an award when that is deemed to be in the best interest of the county.
- The CCDDDB reserves the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCDDDB deems such variances to be in the best interest of Champaign County.
- Applications and submissions become the property of the CCDDDB and, as such, are public documents that may be copied and made available upon request after allocation

decisions have been made. Materials submitted will not be returned or deleted from the online system.

- The CCDDDB reserves the right, but is under no obligation, to negotiate an extension of any contract funded under this allocation process for up to a period not to exceed two years with or without additional procurement.
- If selected for contract negotiations, the applicant may be required to prepare and submit additional information prior to final contract execution, in order to reach terms for the provision of services that are agreeable to both parties. Failure to submit required information may result in cancellation of the award of a contract.
- The execution of financial contracts resultant of this application process is dependent upon the availability of adequate funds and the needs of Champaign County.
- The CCDDDB reserves the right to further define and add application components as needed. Applicants selected as responsive to the intent of this online application process will be given equal opportunity to update proposals for the newly identified components.
- All proposals considered must be received on time and must be responsive to the application instructions. The CCDDDB is not responsible for lateness or non-delivery of mail or messenger. Late applications shall be rejected.
- The contents of a successful application will be developed into a formal contract, if selected for funding. Failure of the applicant to accept these obligations can result in cancellation of the award for contract. The CCDDDB reserves the right to withdraw or reduce the amount of an award if there is misrepresentation of the applicant's ability to perform as stated in the application.
- The CCDDDB reserves the right to negotiate the final terms (i.e., best and final offer) of any or all contracts with the applicant selected, and any such terms negotiated as a result of this application process may be renegotiated and/or amended in order to meet the needs of Champaign County. The CCDDDB also reserves the right to require the submission of any revision to the application which results from negotiations conducted.
- The CCDDDB reserves the right to contact any individual, agency, or employee listed in the application or to contact others who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.

#### Decision Section

Motion: Move to approve the FY16 Allocation Priorities and Decision Support Criteria as described in this memorandum.

\_\_\_\_\_ Approved  
\_\_\_\_\_ Denied  
\_\_\_\_\_ Modified  
\_\_\_\_\_ Additional Information Needed

13.F.

**Disability Resource Expo: Reaching Out For Answers**  
**Board Report**  
**September, 2014**

The Expo will be held on Saturday, October 18, 2014 at the Fluid Event Center, 601 N. Country Fair Dr., Champaign. As we fast approach the 2014 Expo, our sub-committees have been very busy.

**Exhibitors** – We have approximately 80 exhibitors signed up at this point. I’m happy to report that we have three new exhibitors joining us from our excursion to the Schaumburg Abilities Expo back in early June. These exhibitors will be bringing some very exciting new technology that, we think, will be very interesting to our attendees.

**Marketing/Sponsorship** – The Marketing/Sponsorship Committee has been busy following up on solicitation mailings that went out several weeks ago. I’m happy to report that we currently have more than \$18,000 pledged toward support of the 2014 Expo, with an additional nearly \$9,000 of in-kind support. All promotional materials have been ordered. We will begin to get those out into the community within the next week. We have our radio spots taped and ready to go, thanks to Jim Mayer and Jean Driscoll. We are very excited to be partnering this year with Quality Transport, the only para-transit taxi service in our community. They have generously volunteered to handle all of our yard signs this year, from placement to pick-up. The time this task will save Steering Committee members is huge! Barb B. participated in the United Access Customer Appreciation Day on Sept. 11. This is a wonderful opportunity to share information about the Expo with some of our targeted population. Another opportunity coming up will be Family Service’s Self-Help Conference on Oct. 11, where we will also have an Expo booth.

**Accessibility/Entertainment** – Our accessibility plan and resources are all in place for the Expo. We have a wonderful array of entertainment lined up for this year. It includes the annual presentation of an AMTRYKE; performances by Chris Errera, who is a classical pianist and composer from Schaumburg; a performance by local business owner and musician Rod Sickler, and the Jefferson Jaguar Archery Team from Jefferson Middle School in Champaign will demonstrate their award winning skills.

**Children’s Activities** – We’re pleased to have a wonderful space at the new site that should work beautifully for the children’s activities. Sally Mustered is doing a fabulous job, as usual, planning for the children’s entertainment area.

**PRIDE Room** – The Pride Room sub-committee has been working hard to make this years’ Pride Room the best yet. We currently have 13 vendors confirmed, with more to come. There will also be a disability history display this year, with a slide show.

**Volunteers** – Jen Knapp is handling volunteer recruitment for us, and always does a fantastic job.

**Public Safety** – Premise Alert registration will again take place during the Expo.

Respectfully submitted  
Barb Bressner, Consultant

**Disability Resource Expo**  
**EXHIBITOR EVALUATION SUMMARY**  
**2014**

Expo evaluation forms were given to 84 exhibitors. 68 completed forms (81%) were returned.

The following scale was used for rating: 5-Excellent; 4-Good; 3-Ok; 2-Fair; 1-Poor

**Items rated**

**1. Rate pre-event communication:**

0 – Poor  
1 – Fair  
1 – Ok  
10 – Good  
1- 4.5  
54 – Excellent

**Comments:**

- Really appreciate all the e-mails, info., chance to have input about our booth, publicity in the Resource Book, etc.
- Great e-mail info.
- Great job
- Absolutely wonderful
- I liked getting the e-mails
- Very prompt – appreciated the reminders
- Always good. Thank you, Barb
- It was great to receive reminders
- Very helpful staff!
- Was welcomed at the door and directed to station.
- Very good
- Great distribution of the different areas
- Good pre-event communication emails-updates!
- The exhibitor day of event info. should have been mailed.
- Wasn't sure about the forms/raffle that was given to the visitors. They kept asking if we had pictures at our table for a sheet they had to fill out. I couldn't answer them.
- Through agency committee representatives
- E-mails were replied to quickly
- All communication went to my supervisor-seemed to be valuable and within reasonable timing

**2. Rate event-day check-in process:**

0 – Poor  
0 – Fair  
0 – Ok  
8 – Good  
1 – 4.5  
56 – Excellent  
1 – N/A

**Comments:**

- Very organized – thank you! Parking attendants didn't understand to send us to the unload door at first-so a bit of a "trek" w/stuff, but I know that was rectified.
- Good
- Very easy
- Easy & fast
- Great event, well staffed
- Check in at the door was great. Signs or some direction in the parking lot would have been very helpful.
- So easy!
- It was nice to have the person at the parking lot entrance explaining where to go.
- Parking for vendors could have been better directed
- Fast & easy
- We had no issues!
- "Easy"
- Back entrance was difficult to get to with materials
- Easy and straight forward
- Smooth-Seamless
- Great/fast
- Excellent with guys at the gate-only challenge was gravel in parking lot
- Easy
- Excellent
- Very quick!
- Very easy!

**3. Rate "Find-the-Famous Person Scavenger Hunt" activity:**

0 – Poor  
1 – Fair  
13 – Ok  
8 – Good  
1 – 4.5  
24 – Excellent  
13 – N/A

Comments:

- A lot of people weren't sure what they were supposed to do.
- Didn't get it (good tips, but didn't know how game worked)
- Didn't know about it but a great idea!
- Very helpful as guest here
- Didn't have to use it
- Participants had questions, not fully understanding.
- N/A
- N/A (wasn't involved)
- N/A
- Unsure
- Didn't really pay attention, but sure it was GREAT!
- Fun!
- I wasn't involved
- It was not verbally explained, but the instructions were included in the packet.
- N/A-Was not part of the game, but wasn't around when instruction was given.
- Great way to engage!
- Not used
- ?
- Kids asked about it, but I knew only what was in the packet. Wish I knew more.
- No one seemed to know where to find the pictures

4. **Rate variety of exhibitors/activities:**

0 – Poor

0 – Fair

0 – Ok

7 – Good

59 – Excellent

1 – N/A

Comments:

- Very exciting to see Ambucs giving away the two bikes.
- I kept hearing how awesome it was with how many resources were here.
- Better each yr.
- Really great mix of exhibitors. Everyone is so nice!
- Great
- Nice selection
- Better than in years past
- Awesome!

- Not as many disability-run businesses
- Excellent
- Great event
- Awesome variety of vendors that were invited.
- Liked horses
- Amazing to see all the different services in the area under one roof
- Made many useful contacts-invaluable
- Didn't get away from my table
- Very helpful to families
- Great to see the option to try out equipment throughout the Expo.
- Very wide variety of participants
- Didn't get a chance to visit other booths but looked like a large variety

5. **Rate the entertainment you had an opportunity to view/hear:**

- 0 – Poor
- 2 – Fair
- 2 – Ok
- 17 – Good
- 40 – Excellent
- 3 – N/A

Comments:

- Great music!
- Loved the morning band.
- Volume was at a good level
- Enjoyed Rod Sickler
- Great – maybe in center of room for more visibility
- Much better than in years past!
- Great!!!
- It is too loud to hear anything
- All good (except sound system)
- Couldn't hear much
- Great first band
- Very nice music
- Great variety. Although vocalist and harmonies were low key-a little loud while talking with families
- I didn't have the opportunity to hear.
- Very good!
- Great

- Loved the music
- What we had was great. Would have liked to see more.
- Great music, but it was too loud to hear customers at our table
- Seated stage side-fun, entertaining-appropriate for venue
- Was not able to hear
- Band far too loud!
- Heard the music from afar – was enjoyable

6. **Rate the physical setting for the event:**

- 0 – Poor
- 1 – Fair
- 5 – Ok
- 16 – Good
- 46 – Excellent

Comments:

- Good access to most places for people. A couple of people had a hard time in the bathroom with their power wheelchairs.
- Little cool
- Lincoln Square brought us more passers-by
- Great venue!
- Lots of room!
- Great location. Flow of traffic was good.
- Best Location Ever
- Much better than Lincoln Square. Parking could use work.
- The vendor lot was gravelly & hard to roll my cart over, but everything else was fine!
- Too cold; difficulty getting over the gravel outside
- Don't want to be a jerk, but it's very cold. Might explore finding a way to turn up the heat 😊
- Banners hung from ceiling was a good idea.
- Hard to bring items inside because parking lot is so rough.
- Love it
- Surprisingly comfortable – well lit, not too noisy.
- Very nice location and area for event. "Best Ever"
- Little chilly
- Very polite and open when asked questions.
- Great distribution according to the different areas
- Not cramped-plenty of room
- Only negative comments we heard was that it was less centrally located
- Nice place but has unfinished look & feel

- Setting is excellent and provided a good area for our miniature horses. LIGHTS NEED TO BE FIXED.
- Gravel in area where exhibitors came in hard to navigate

7. **Rate the Expo overall:**

- 0– Poor
- 0 – Fair
- 0 – Ok
- 8 – Good
- 54 - Excellent

Comments:

- Absolutely great venue!
- Great job! Really enjoyed it!
- Great as always
- Very nice venue & set up. Very friendly & helpful staff
- Thank you!
- Wow!
- Had a great time participating!
- Thank you!
- Thanks for organizing this great event
- Overall-Amazing to see the distribution to gain access to so many programs
- Excellent. I have been to several hundred over the last 20 years. One of the Best!
- 😊
- Great resources

**Narrative Questions**

8. **What did you like best about the Expo?**

- My exhibit table location.
- Everything (is that an ok response? 😊! I loved how many exhibitors were here to provide resources for people. It's been awesome to be a part of this expo!
- The location (venue) is better.
- 1. Lots of attendees; 2. Nice new site; 3. Thank you for the coffee, snacks! 😊
- Number of diff. exhibitors
- Well advertised. Lots of vendors.
- Lots of info.
- Opportunity to meet new people!
- Nice, big event with opportunity to meet other agencies & participants
- Location – space
- Location, set up of exhibitors

- Loved our booth location. Friendly staff. Loved that there's something to enjoy for all ages
- Lots of attendees! Good mix of families & professionals
- Organization, Promotion, Location
- The amount of exhibitors was enormous! Very good planning
- Layout. Closeness of vendors.
- Stead stream of attendees instead of a big rush at the beginning
- Just the environment in general
- I liked that all the exhibitors were all in the same room.
- Good size venue. Good variety of exhibitors
- Clientel
- Great Turnout
- All in one room – separate market & food was nice
- Size, variety of vendors, type & quantity of attendees
- Great variety of booths. Lots of great people
- I liked all of the exhibitors being in the same room of the new location.
- Networking-Learning about new resources
- New space – Not shopping space, too.
- All exhibitors were in same area.
- The variety of exhibits
- The location-Very busy this year-Best Ever
- Number of exhibitors
- Children's activities & numerous variety of vendors
- Very sweet volunteers who watched my table so I could get lunch. Excellent turnout! All staff were very helpful!
- I liked the variety of resources
- The large range and variety of vendors that were present. Staff were very accessible and helpful! There was a large amount of networking for and among vendors as well!
- Great table and glad that community resource groups were at the entrance.
- New contacts
- Great response, very friendly
- The large room & variety of agencies represented.
- Location, different exhibits
- I enjoyed the access to gain contacts and information
- Vendors & the attendance
- Excellent traffic
- Information
- Spacious and lots of variety
- People – friendly, personable, helpful
- There were a lot of resources available for the community to access. I also like the games and different fun activities.

- Adequate space; Good crowd flow; Excellent Pride Room art and space; Clean restrooms
- The location and live music
- A lot of new info. in one spot
- I liked the different variety of individuals that were present.
- Large turn out/Great advertising!
- The set up was excellent; the vendors were very helpful
- Networking; Variety of exhibits
- Provision for horses & number of exhibitors
- There was a lot of variety of vendors. Had a great turnout and plenty of space for all vendors and visitors.

**9. What would you change to improve the Expo in the future?**

- N/A
- Make game clearer to guests as they come in.
- N/A
- Warmer
- Didn't care for Fluid Event Center
- Did not get info. about the hunt
- Cannot think of anything currently
- Unknown
- Clearer game directions
- Nothing at this time
- N/A
- N/A
- 9-1 instead of 9-2, resources in order of age, Recycle
- Shorten hours 11-2
- I don't believe anything needs changed. Excellent Job!
- Sound system, food, & parking guidance. Parking attendant should be in the lot further so traffic is not held up on the street.
- Nothing/more ponies
- The room area was a little chilly
- Pave over the gravel outside to make entry easier.
- Referral sources
- Make sure Barb keeps bringing me coffee ☺
- Better PA system-Couldn't hear any announcements/entertainment. What about playing soft music while people walk?
- I wish exhibitors could spend time together.
- N/A
- Nothing. Great event!
- Combine Pride Room in with exhibitors

- Parking was tight-maybe have some shuttle?
- No problem, except it would be good to be available to hear announcements and music throughout the hall.
- Parking issues
- Table space. Show room space. "Best ever for us"
- Turn up heat
- N/A
- The concession stand ran out of food and seemed overwhelmed with amount of customers.
- Better variety of food options at concessions
- No comments at this time!
- Better food
- Nothing
- Change the hours 10:00-2:00
- Blank – Nothing
- More water fountains. Maybe food vendors (different). Provide a loading/unloading area. The rocks/surface to bldg.. is difficult to cross with large heavy displays/boxes.
- Check list a day or so before the event via e-mail with day of information (like in the envelope)
- Good question....
- Parking was somewhat disorganized. Attendants throughout parking lot would help.
- None – Great job!
- Minor
- Central location for attendees; recycling option
- Nothing
- Quiet room less out of the way – perhaps a clearer area
- Lighting in our area is poor.
- Don't stick me in the corner 😊

**10. What other exhibitors might you suggest we invite to future Expos?**

- None – I thought it was a great variety of exhibitors.
- N/A
- Unknown
- Maybe a couple food vendors if possible.
- N/A
- ?
- ISD and ISVI; Illinois Hands and Voices; Public School Special Services
- 211 Answers
- Land of Lincoln Legal Aid; Prairie State Legal
- ?
- N/A

- Information on Diabetes
- None
- Not sure if mental health was represented well-didn't have a chance to walk around
- None
- It was a very extensive group
- ?
- CIL? PACE was here-what about Adapt or other lobbying/activist groups?
- Very good selection
- Blood pressure locations
- N/A
- Latino Partnership of Champaign County (La Linea help.line). Courage Connections
- It would be great to be able to identify exhibitors who accept Medicaid to prioritize. It would also be great to include dental providers. I'm sure they might have been invited, but didn't have an interest, but keep trying.
- Support dogs
- N/A
- ?
- KRIS Bus
- N/A
- Hermes Clinic – serving children and adults
- ?
- None
- Direct childhood educators

**11. What other entertainment options would you like to see us bring to the Expo, keeping in mind that we strive to have all entertainment performed by or geared toward persons with disabilities.**

- None – I loved the music! 😊
- N/A
- Dance or interactive things
- Kid groups
- I loved the art vendors, would love to see that expanded.
- Service dog demonstration
- Nothing in mind
- N/A
- ?
- Felt the entertainment was very appropriate
- ? – More ponies
- N/A

- High school choirs, Community choirs.
- Something where people can try various instruments? Also tech or video game demos
- None
- Loved the music
- ?
- John Coppess would be great
- Great entertainment
- W/C Dancing
- Magic Show, Wheelchair Modern Dancer
- Entertainment was excellent
- No comments at this time.
- Some form of video, in an area where it can be seen by all.
- Really nice entertainment
- N/A
- ?
- Good
- Continue with musical performances
- The Moon Seven Times!
- Interactive performers
- All was great
- One year there were dancers in wheelchairs
- Provide entertainment that permits people to be heard. It should accompany the event purpose, not drown it.

**Additional comments received through e-mails following event:**

I just wanted to take a minute and say “thank you” for including me at the very last minute. I was overwhelmed by the expo’s organization and marketing – I saw many people I knew and many other people who I am looking forward to getting to know better. I hope I can stay on your mailing list for next year, as I will very much look forward to doing it again.

Just wanted to say this years expo was great not only for the suppliers but for the consumers that came to the event. We were very busy for the complete 5 hour event with about only 30 minutes of down time. We had a lot of exposure this year. But the big thing is that I wanted is for all the consumers see what is offered out there for them. Thanks again and what a great event this year.

The expo overall was great! I do have a comment, however, that I forgot to write on our evaluation. Actually, my mom made this comment. While the bathrooms are handicapped accessible, the mirrors are not low enough for those in a wheelchair or scooter. My mom has a trache tube and needed to clean it out. She uses the mirror to evaluate whether it is clean. She had to stand in order to see, which could have posed a fall risk. Others in a wheelchair or scooter wouldn't have been able to stand to see in the mirrors. I know this is not something directly related to the expo itself, but please pass on to the venue this issue. Thanks!

Hats off (to you, your exceptional staff members and many volunteers)- and again, congratulations on an splendid affair! I had a wonderful time and look forward to next event!  
I was wondering if you had a final count on the number of attendees and also the number of vendors in attendance. If so, I was wondering if you would mind sharing those with me for my paperwork?

Once again, great job last Saturday Barb! You gotta feel good about how it went and proud too!

**disABILITY Resource Expo: Reaching Out For Answers**  
**PARTICIPANT EVALUATION SUMMARY**  
**2014 EXPO**

Expo evaluation forms were returned by 120 participants of the 2014 disABILITY Resource Expo.

**The individual completing this evaluation was:**

- 42 – Family member
- 50 – Person with a disability
- 16 – Other

**The individual completing this evaluation either themselves or a family member had:**

- 30 – Developmental disability
- 31 – Physical disability (1-Stroke)
- 34 – Mental illness
- 17 - Other

**The following scale was used for rating: 5-Excellent; 4-Good; 3-Ok; 2-Fair; 1-Poor**

**Items rated**

**Rate Exhibitor Information:**

- 0 – Poor
- 0 – Fair
- 4 – Ok
- 33 – Good
- 75 – Excellent

**Comments:**

- Nice variety
- Everyone was very nice and knowledgeable
- Most were excellent – a few were a little abrupt
- Vary from booth to booth

**Rate Accessibility:**

- 0 – Poor
- 3 – Fair
- 4 – Ok
- 30 – Good
- 77 – Excellent

Comments:

- No limitation for me, but seems very accessible
- Need to be allowed to park closer. Traffic director directed us away from Handicap parking. I had handicap placard.
- As someone with very limited energy due to my disability, I would appreciate clear labeling of where a rest area is.
- There's a lot of info.-which is great! But on the flipside, it would be very overwhelming for a person with sensory issues. Now that the Expo is growing-designing the layout will also become important, otherwise it runs the chance of becoming about people with disabilities, rather than for.

**Rate Activities/Entertainment:**

0 – Poor
0 – Fair
8 – Ok
37 – Good
63 – Excellent

Comments:

- Child room should have buddies so parent could look around
- Missed it.

**Rate Event Organization:**

0 – Poor
0 – Fair
6 – Ok
26 – Good
80 – Excellent

Comments:

- Everything seems to be running smoothly
- Parking could be better
- Need more exposure and ads

**Rate Expo overall:**

0 – Poor
0 – Fair
1 – Ok
25 – Good
83 – Excellent

Comments:

- Very nice
- I found the Expo had useful information & will attend next year
- Second year here!
- I loved it. I gained a lot of information.
- Good information
- Parking looked crowded

### Narrative Questions

#### **How did you learn about the Disability Resource Expo?**

33 - Brochure

9 - School

23 - Newspaper

24 - Poster

14 - Radio

2 - Window Cling

34 - Yard Sign

14 - TV

3 - Work

1 - Friend/Family

2 - Website

1 - Facebook

#### **Comment:**

- Looked it up online, since it's the same time every year.

#### **Suggestions for Future Exhibitors:**

- I got a lot out of it.
- Maybe booth could be spread out.
- Sad some vendors were not here.
- Have raffle prizes for Pride Room vendors.
- Fashions for the disabled
- A vendor that provides transport for persons with disabilities to Dr. Appts. I am very disappointed this service is unavailable. MTD folks expect everyone to get to a stop-if I could I would not be disabled.
- This place is so much better than Lincoln Square.
- Need better space between exhibits. Bigger hall.
- Numbers hard to find
- Would like if individual booths were numbered
- Keep up the great work. The horses was a great touch.
- More advertisement
- Keep it up!
- Was really loud in exhibitor area. Person directing traffic should wear a vest-people just thought he was chatting and not directing.
- It turned out really nice.
- To make a food stand
- Keep advertising

- Audiologists
- This was my first experience and it was great 😊
- First time visiting this expo. It was pretty informational for me.
- N/A
- None at this time
- Ask to have more crafts/artists from organizations by getting more information on how to get involved.
- Sign up encouragement
- Was wonderful!
- My daughter is selling cards @ the Disability fair (Friends Terrific Little Cards) – but is not even listed by name, nor are they in the mainstream of the big room. Unfortunately, many people will not even venture into the smaller room where they are. How sad – why not showcase the artwork people with disabilities are capable of creating – encouraging others with disabilities and their parents instead of closeting them in a small room off to the side. In my time here today, only a small percent of people in large room seemed to come to the artisan room – a real disappointment.
- I prefer the Lincoln Square location, not only for my own point of view, but also MTD serves Lincoln Square from many directions, where bus services to Fluid Events Center is relatively limited.
- Great at this location!
- It was fun. I wish it was longer.
- Offer a food vendor that provides healthier eating.

**Additional comments:**

- I thought it was a little tight to walk.
- Glad they had food vendors
- Did not understand the game. Should have had an example when you checked in.
- Well organized!
- Need to have places to sit & rest “along the way”. I have much difficulty walking for long distances & long periods.
- This is our first year and I was able to get some much needed information.
- Thanks
- I enjoyed myself and learned a lot.
- Thanks so much! As a professional & family member, it helps to know what is in our community.
- It was a good event. Thanks!
- This venue was much better at this location. Drummer & signer & singer were great.
- Was a little confused by the map. I would’ve been less confused if the map had been printed upside down.
- Much better – less question

- Service was excellent
- Acupuncture was great!
- The set-up of vendors was great! Natural path for seeing all vendors. Networking very helpful. Guy directing traffic in parking lot caused a traffic jam on Country Fair. Have him move closer to building.
- Kid Zone is awesome!
- None
- Let Springfield know about it
- Great event w/ lots of community resources
- Love the Fluid Event Center location!
- N/A
- This was AWESOME!
- Family friendly
- Wonderful family event
- Please include us! We should be with all the other exhibitors-not off in a side room. I know of at least two people who couldn't find us. Include us and list us with the other exhibitors please!
- Also look at entrance & exit flow. Having the exit be the same as the entrance was awkward, especially for people & chairs trying to get through a crowd trying to get in.
- 1<sup>st</sup> time...blew my mind...Wow
- Love the location