



**Champaign County Mental Health Board (CCMHB)
Study Session Agenda
Wednesday, May 20, 2026, 5:45PM**

This session will be held in person at the Shields-Carter Room of the Bennett Administrative Center, 102 E. Main St., Urbana, IL 61801. Members of the public may attend in person or virtually, using <https://us02web.zoom.us/j/81393675682> Meeting ID: 813 9367 5682

- I. Call to order**
- II. Roll call**
- III. Approval of Agenda***
- IV. Public Participation/Agency Input** See below for details. **
- V. Chairperson’s Comments – Molly McLay**
- VI. Executive Director’s Comments – Lynn Canfield**
- VII. STUDY SESSION: Further Discussion of Funding Requests**
 - a) Program Year 2027 Funding Request (pages 3-8)
A list of all requests for Program Year 2027 Funding and one DRAFT Staff Program Summary are presented to support the Board’s review of the application from GCAP, which is now eligible for consideration.
 - b) Additional Agency Input (pages 9-22)
A briefing memorandum presents applicants’ responses to some staff and board reviews of funding requests.
 - c) Agency Responses Regarding Reduced Budgets (pages 23-50)
A briefing memorandum presents applicants’ responses to questions about reductions.
 - d) Allocation Scenarios (pages 51- 71)
A briefing memorandum presents affordable scenarios for Program Year 2027 allocations. As with all other study session materials, this is included for information only, to support Board discussion. A spreadsheet is attached, tracking totals.

VIII. Public Participation/Agency Input. See below for details.**

IX. Board Announcements and Input

X. Adjournment

* Board action is requested.

**Public input may be given virtually or in person. If the time of the meeting is not convenient, you may communicate with the Board by emailing stephanie@ccmhb.org or leon@ccmhb.org any comments for us to read aloud during the meeting. The Chair reserves the right to limit individual time to five minutes and total time to twenty minutes. All feedback is welcome. The Board does not respond directly but may use input to inform future actions. Agency representatives and others providing input which might impact Board actions should be aware of the [Illinois Lobbyist Registration Act, 25 ILCS 170/1](#), and take appropriate [steps to be in compliance with the Act](#).

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

Requests for CCMHB Funding for Program Year 2027

Agency Name	Program Name	Request	Reviewers
Brightpoint	Healing Beyond Violence NEW	\$ 217,106	Palencia / Patterson
CCRPC - Community Services	Homeless Services System Coordination	\$ 189,007	Arres / Sprandel
CU at Home	Life Skills CM Program NEW	\$ 305,000	Straub / Youakim
CU at Home	Shelter Case Management Program	\$ 295,000	Gomez / Nichols
CU Early	CU Early (DD for PY26 was \$16,145)	\$ 86,701	Arres / Sprandel
CC Head Start/Early Head Start	Early Childhood MH (DD for PY26 was \$216,	\$ 411,062	Straub / Youakim
CC Health Care Consumers	Disability Services	\$ 121,000	Palencia / Patterson
City of Champaign Township Str	Strides Shelter Behavior Health Program NE	\$ 150,000	Gomez / Nichols
Courage Connection	Courage Connection	\$ 176,476	Arres / Sprandel
Cunningham Childrens Home	ECHO Housing and Employment Support	\$ 264,351	Straub / Youakim
Cunningham Childrens Home	Families Stronger Together	\$ 298,532	Arres / Sprandel
Don Moyer Boys and Girls Club	C-U CHANGE	\$ 94,135	Palencia / Patterson
Don Moyer Boys and Girls Club	Community Coalition Summer Initiatives	\$ 100,000	Gomez / Nichols
Family First Advocacy	Empowering Bridge Program - NEW	\$ 233,355	Arres / Sprandel
FirstFollowers	FirstSteps Community Reentry House	\$ 69,500	Straub / Youakim
FirstFollowers	Peer Mentoring for Reentry	\$ 120,000	Palencia / Patterson
GCAP	Advocacy, Care, and Education Services	\$ 113,878	Gomez / Nichols
GROW in Illinois	Peer-Support	\$ 179,805	Straub / Youakim
Habitat for Humanity of CC	Homebuyer Program - NEW	\$ 229,560	Palencia / Patterson
Promise Healthcare	Mobile NEW	\$ 200,000	Straub / Youakim
Rosecrance Central Illinois	Behavioral Health Urgent Care NEW	\$ 360,000	Arres / Sprandel
Rosecrance Central Illinois	Benefits Case Management	\$ 181,000	Palencia / Patterson
Rosecrance Central Illinois	Recovery Home	\$ 200,000	Gomez / Nichols
TASC, Inc.	Outreach and Recovery Support Svcs NEW	\$ 90,429	Straub / Youakim
Uniting Pride of CC	Children, Youth & Families Program	\$ 225,056	Gomez / Nichols
We Never Walk Alone	Trained First Responder Peer Supportt NEW	\$ 20,330	Arres / Sprandel
We Never Walk Alone	Vetted Mental Health Profession Network N	\$ 19,656	Palencia / Patterson
WIN Recovery	Win Resilience Resource Ctr NEW	\$ 270,000	Gomez / Nichols
n/a	Total of Requests	\$ 5,220,939	n/a
n/a	Available to Allocate	\$ 3,245,055	n/a
n/a	DIFFERENCE	\$ (1,975,884)	n/a

Draft MHB Program Year 2027 Program Summary Greater Community AIDS Project (GCAP) – Advocacy, Care, and Education Services

Portions are drawn from the original application, which contains more detail. Staff analysis and comments relate to sections of the application and, if the proposed program has been funded, to previously submitted reports.

Request: \$113,878

Why it matters:

“... bridges the gap with holistic support, empowering individuals through: Independent Living Skills... Transportation Assistance... Social Connection & Belonging...”

Selected priority:

Access and Care

Agency mission and info:

“... To empower members of our community who are HIV+, and to eliminate the transmission of HIV through education and advocacy.” www.gcapnow.com

Services and People Served

Who will benefit:

People living with HIV/AIDS (PLWHA) in GCAP transitional or emergency/rapid rehousing; those who are unsheltered or at risk and seeking housing or supportive services; and those receiving emergency assistance.

Scope of services:

Transitional and rapid-re-housing, housing and financial literacy services, basic-needs financial assistance, and nutritional support through an on-site pantry and monthly \$50 restricted Walmart food vouchers. HIV education and outreach, monthly groups, transportation assistance, and case management. Participants can build community and enhance well-being through peer support, community activities, and creative or physical wellness programs.

Location and frequency of services:

Services will be provided at GCAP transitional housing sites, GCAP-rented emergency/rapid-rehousing motels, and outreach locations. Frequency of services not mentioned but assumed to be individualized.

Staff comment:

An established program with comprehensive services that are clearly described, addressing both housing stability and holistic well-being for people living with HIV/AIDS.

Residency of 19 people served in Program Year 2025 and 16 in the first half of Program Year 2026:

Champaign - 18 in Program Year 2025 and 16 first half of Program Year 2026

Urbana - 1 in Program Year 2025 and 0 first half of Program Year 2026

Demographics of 19 people served during Program Year 2025:

Age

Ages 19-59 - 13

Ages 60-74 - 5

Ages 75+ - 1

Preferred Language

English - 17

French - 1

Spanish - 1

Race/Ethnicity

African American/Black - 8

Latina/e/o/x - 3

White - 8

Gender

Man - 13

Non-binary - 2

Woman - 3

Not Listed - 1

Measures of Client/Participant Access

Eligibility criteria and determination: HIV status, housing and income information, and a background check showing no sex offender or disqualifying drug related convictions.

Outreach to eligible people: outreach events, HIV case manager, infectious disease provider, website, social media.

Within 3 days of referral, 90% of those referred will be assessed.

Within 3 days of assessment, 90% of those assessed will engage in services.

People will engage in services, on average, for: 6-18 months.

Additional demographic data: Income, household size, housing status, PCP access, insurance, risk factors, hospitalizations in past year, and co-morbidities.

Staff comment:

The eligibility criteria are clearly defined and appropriate for the target population and program goals.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. Increased ability to meet basic needs securely and sustainably.
2. Strong social connections and support networks.
3. Confidence and self-sufficiency for long-term success.
4. Reduction in barriers that interfere with access to care.
5. Goal Achievement.

Specific assessment tools and data collection:

1. Self-Sufficiency matrix and (6) Basic Health Questionnaire, (7) PHQ-9

Draft Program Year 2027 Program Summary:

GCAP – Advocacy, Care, and Education Services

2. Multidimensional Scale of Perceived Social Support.
3. Rosenberg Self-Esteem Scale.
4. Self-Sufficiency matrix
5. Goal Achievement Scaling.

Outcome data gathered from all participants: Yes.

Will collect outcome data quarterly.

Staff comment:

Outcomes focus on client change (self-sufficiency, social support, etc..) and are measured using established tools such as the Self-Sufficiency Matrix, MSPSS, and Rosenberg Self-Esteem Scale.

Measures of Utilization

Treatment Plan Clients (TPCs): 20 housing clients.

Non-Treatment Plan Clients (NTPCs): 110 clients receiving emergency, occasional, or one-time assistance.

Community Service Events (CSEs): 7-10 (identifies 7 specific events and likely times of year).

Service Contacts (SCs): 35 individuals screened for treatment.

Other: 8 times per month (twice weekly); case managers must check in with each client.

Staff comment:

Utilization data shows that the program is doing well, with certain indicators doing better than expected and others making good progress toward annual goals.

Program Year 2026 Targets	10 TPCs	60 NTPCs	20 SCs	8 CSEs
Program Year 2026 Mid-Year Results	16 TPCs	87 NTPCs	14 SCs	6 CSEs
Program Year 2025 Targets	10 TPCs	60 NTPCs	20 SCs	8 CSEs
Program Year 2025 Full-Year Results	19 TPCs	96 NTPCs	40 SCs	13 CSEs

Financial Analysis

Program Year 2027 CCMHB request: \$113,878

Program Year 2027 total program budget: \$113,878

Current year CCMHB funding (Program Year 2026): \$61,566

Proposed change in CCMHB funding = 46%

CCMHB request is for 100% of total program revenue. No other program revenue. The agency has revenue for its other programs from United Way, Contributions, Fundraising, state and local grants, and interest income.

Personnel costs of \$74,513 are 65% of the requested amount. Other expenses are Professional Fees/Consultants \$10,600, Consumables \$9,000, General Operating \$6,350, Occupancy \$2,000, Conferences/Staff Development \$2,500, Local Transportation \$1,750, Specific Assistance \$5,000, Membership Dues \$165, and Miscellaneous \$2,000.

Total agency budget has a surplus of \$2,150. Total program and CCMHB budgets are the same and balanced.

Direct staff assigned to the program are 100% of a quarter-time Outreach and Education person (to be hired) and 75% of a full-time Case Manager (to be hired). Indirect staff assigned to the program are 25% of the full time Executive Director.

*Draft Program Year 2027 Program Summary:
GCAP – Advocacy, Care, and Education Services*

Program staff to be funded by CCMHB: 0.25 Indirect + 1.0 Direct = 1.25 FTEs. Total program staff same.

Staff comments:

This increased request will support the addition of a part-time Outreach and Education Specialist. The increased request will also support a 25% increase in hours spent on the program by the Case Manager from .5 FTE in Program Year 2026 to .75 FTE in Program Year 2027. All other expenses appear to be appropriate and necessary and are supported by reasonable explanations in the Budget Narrative.

Agency Cultural and Linguistic Competence Plan

Does the CLC Plan include required benchmarks and CLAS Standards? Yes.

Highlights from the submitted CLC Plan: GCAP will provide training to staff and create policies and procedures for staff and clients to ensure equity. GCAP is one of the only organizations that serves people living with AIDS/HIV in Champaign County with housing services. They collaborate with organizations to provide training for people utilizing language that is trauma-informed and use harm reduction training for their staff.

Criteria for Best Value

Budget and program connectedness:

Yes.

Participant outcomes (see details above):

Five measurable outcomes and appropriate measurement tools/processes for each of these. Specific targets are not included.

Personal agency in individual and program planning:

Individualized treatment plans and Goal Achievement Scaling guide services; clients set and track their own goals with the client services team.

Engaging the whole community:

Serves all of East Central Illinois including rural townships and provides transportation, outreach, and collaboration with minority-serving organizations to ensure access.

Promoting inclusion and reducing stigma:

Uses a harm-reduction approach, promotes non-discrimination related to substance use or HIV status, and trains staff on stigma and bias while maintaining ADA-accessible space.

Technology access and use:

Services can occur in person, by phone, or via Zoom for intake and engagement, allowing access for rural residents and those unable to travel.

Unique approach:

Combines HIV-specific housing support with harm-reduction, motivational interviewing, and strengths-based case management approaches.

Staff credentials and training:

Executive Director (BS Developmental Psychology, DCFS Licensed Child Welfare Employee, Insurance Navigator, HIV counselor); Case Manager trained in Motivational Interviewing, HIV Navigation, strengths-based case management, and crisis de-escalation; volunteer retired nurse practitioner with infectious disease expertise.

*Draft Program Year 2027 Program Summary:
GCAP – Advocacy, Care, and Education Services*

Other funding and resource leveraging:

HOPWA funds secured and used alongside CCMHB funding; program collaborates with partner agencies and uses volunteer expertise; no client fees, sliding scale, or Medicaid billing.

Expectations for Minimal Responsiveness

1. Eligible per registration questionnaire: Yes.
If contracted, any compliance issues: No.
Notes on audit/review/compilation: The agency's Program Year 2025 financial review was delayed due to unexpected medical issues.
2. Capacity for financial clarity: Yes.
3. All forms submitted by deadline: Yes.
4. Addresses improving the quality of life for persons with MI, SUD, or I/DD: Yes.
5. Other sources of funding have been maximized: Yes – HOPWA funding secured and used in tandem with CCMHB requested funding.
6. Coordinated system: Program coordinates through CSPH/Continuum of Care, CES via CCRPC, and ongoing referral coordination with CUPHD and other providers.
Written collaborative agreements: Champaign-Urbana Public Health District, Eastern Illinois Foodbank, Champaign County Continuum of Care/CSPH, Uniting Pride of Champaign County, CCRPC, Compassion and Choices, and Community Choices.

Process Considerations and Caveats

Contracting considerations:

If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final Program Year 2027 contract:

Missing: Program Year 2025 financial review.

Revisions prior to contract: develop specific targets for outcomes.

New special provisions: because the agency serves a broader area, care should be taken that MHB funds are not used for out of county clients; this population cannot be included in the Coordinated Entry system, but a similar system can be implemented; given the agency's small size, identify a board or staff member who may assist operations in a crisis.

Continue Program Year 2026 special provisions. Offer a two-year term.

Review and input:

The applicant is encouraged to review this document upon receipt and notify CCMHB staff in writing of any factual errors made by CCMHB staff which should be corrected prior to completion of the award process.



BRIEFING MEMORANDUM

DATE: May 20, 2026

TO: Members, Champaign County Mental Health Board (CCMHB or MHB)

FROM: Leon Bryson, Associate Director, and Lynn Canfield, Executive Director

SUBJECT: Agency Responses to the Reviews of Program Year 2027 Funding Requests

Purpose:

This memorandum presents additional information from agencies which requested CCMHB funding for the Program Year 2027 (July 1, 2026 through June 30, 2027). Twenty-eight applications were submitted, totaling an amount nearly \$2 million greater than what appears to be affordable. For the Board to give full consideration on what will constitute best value for this community during such a competitive cycle, more information from applicants may be helpful.

Background:

To support the Board's April 22 and April 29 discussions of applications for funding, we prepared draft 'program summaries' which were overviews of each funding request, with analysis of some sections and background on prior results of incumbent programs. These draft program summaries were emailed to each applicant with a request for identification of any errors we might have made, especially if these misrepresented their efforts.

Some agencies responded to concerns and comments made by staff in the program summaries, and some responded to issues raised during the board meeting and study session. This was not a step we anticipated for this year's process, but the information may be helpful. These responses are shared below, although many were copied and pasted from emails and attachments not originally accessible. Converting and reformatting may have introduced errors.

Responses to Reviews of the Funding Requests:

Brightpoint – Healing Beyond Violence

From Katie Nicholson, Manager of Public Grants:

I found a, not error but maybe, clarification for the budget sheet. I messed up the salaries tab, accidentally doubling the salaries by misunderstanding that all staff members did not mean, like, adding up what we asked for, but instead, like, if we had staff that we included in the overall budget, but not funded through this grant. I didn't notice that until after I had submitted that form after hours and saw how it populated in the budget form... I know I tried to put a negative that amount somewhere else with that explanation.

City of Champaign Township Strides Shelter – Behavior Health Program

From Charlene Murray, City of Champaign Township Supervisor:

Introduction:

This document provides clarifications and supplemental application materials in response to the staff notes received regarding the City of Champaign Township's recent grant application. Its purpose is to ensure full alignment on the scope of the funding request and to supply the additional information needed to complete the review process. The sections below address the staff comments referenced in the Program Summary Draft provided by CCMHB. The City of Champaign Township welcomes any guidance on specific details that should be prioritized as the application moves forward in the review process.

Cultural and Linguistic Competence Plan:

Organizational Commitment

Strides is committed to delivering culturally responsive, inclusive, and linguistically appropriate services that reflect the diverse needs and lived experiences of individuals experiencing homelessness. Our approach centers equity by recognizing how factors such as race, gender identity, income, disability status, and trauma intersect and impact access to services and outcomes. This commitment is embedded across all levels of our organization, from program design to daily service delivery and staff development.

From August 2025 to February 2026, Strides served 240 unique individuals. The population included 108 Black/African American individuals, 88 White individuals, and 44 individuals identifying as other races, including Hispanic/Latino, Asian, and multiracial. A significant

portion of participants entered services with little to no income, highlighting the economic barriers faced by those we serve.

Additionally, 101 individuals (20.5%) self-reported living with a mental health disorder, substance use disorder, or both. Among this group, 35 identified as female and 66 identified as male. These data points underscore the importance of integrating trauma-informed, culturally responsive, and behaviorally competent practices into all aspects of care.

Strides uses this demographic and program data to continuously assess and strengthen its approach, ensuring services remain equitable, accessible, and responsive to the evolving needs of the community.

Linguistic Access and Communication

To ensure meaningful access for individuals with limited English proficiency, Strides contracts with Propio Language Services, which provides over-the-phone and web-based interpretation as well as document translation in more than 300 languages. This allows staff to communicate effectively with shelter guests in their preferred language and ensures critical information is accessible and understood.

In addition, Strides integrates accessibility into its digital services. Through our Digital Navigator partnership, we provide:

- Access to computers and digital literacy training
- Assistive technologies, including screen readers and closed captioning
- Support navigating online systems for housing, employment, and public benefits

These efforts reduce language and technology barriers that often disproportionately impact marginalized populations.

Culturally Responsive and Trauma-Informed Service Delivery

All staff are trained in best practices that promote culturally competent and trauma-informed care. Staff regularly attend professional development opportunities in:

- Trauma-informed care
- Harm reduction strategies
- Narcan administration
- CPR and First Aid (including Mental Health First Aid)
- Cultural competence
- Verbal de-escalation techniques

This training ensures staff are equipped to respond appropriately to individuals with diverse cultural backgrounds, lived experiences, and behavioral health needs. These competencies are directly applied in daily interactions with shelter guests to foster trust, dignity, and safety.

Participant Engagement and Feedback

Strides prioritizes participant voice in program development and continuous improvement. We utilize multiple feedback mechanisms to ensure services remain culturally relevant and responsive:

- Anonymous feedback forms submitted via secure lock boxes accessible only to administration
- Weekly open administration hours for one-on-one guest engagement
- Monthly guest forums and community dinners hosted by administration
- Ongoing case manager meetings with participants

These channels allow guests to share input, raise concerns, and influence programming in a safe and accessible manner.

Holistic and Inclusive Programming

Our internal programming is structured around the Eight Dimensions of Wellness: physical, emotional, social, intellectual, environmental, financial, occupational, and spiritual. Case managers facilitate weekly classes focused on each dimension, ensuring programming reflects the varied needs, identities, and goals of participants.

To further support culturally competent care, Strides collaborates with community partners to provide:

- On-site healthcare services
- Assistance with public benefits applications
- Connections to culturally specific and community-based resources

This integrated approach ensures participants receive comprehensive, person-centered support.

Data-Driven Equity and Continuous Improvement

Strides is committed to ongoing evaluation and improvement of its cultural and linguistic competence. We collect and analyze program data monthly, sharing reports with staff to:

- Identify disparities in service access and outcomes
- Understand trends across demographic groups
- Establish targeted improvement goals

Staff are actively engaged in discussions about why data is collected and how it can inform more equitable service delivery. This continuous quality improvement process ensures accountability and responsiveness to the populations we serve.

Future Commitment

Strides anticipates serving a similar population in FY27 and will continue to refine its cultural and linguistic competence strategies to meet evolving community needs. We remain dedicated to expanding accessibility, strengthening partnerships, and centering participant voice to ensure all individuals receive respectful, equitable, and effective care.

List of FY27 Grants and Amounts:

Grantor	Program	Awarded Amount	Award Term
Housing Authority of Champaign County	Strides / Township	\$410,000 Awarded	FY27
IDHS Emergency and Transitional Housing	Strides	\$238,500 Renewal	FY27
IDHS Emergency Solutions Grant	Strides	\$150,000 Pending	FY27
IDHS Rapid Rehousing Grant	Strides	\$125,000 Renewal	FY27
Urbana ESS Grant	Strides	\$288,000 Pending	FY27
CCMHB	Strides	\$150,000 Pending	FY27
Total	'n/a	\$1,361,500.00	FY27

Past grant revenue shown in the FY25 AFR reflects time-limited funding that will no longer be available in FY27. Because these sources have ended, they are not reflected in the FY27 program revenue form. Newly awarded and pending grants will be applied for FY27.

Staffing Clarification:

The City of Champaign Township's request for funding is intended to support crisis response within the Strides shelter system by providing internal staff, dedicated specifically to Strides guests. The staffing listed in the CCMHB application represents only the personnel dedicated to this new service layer, not full staffing required to operate the shelter itself.

Core shelter operations, including overnight staffing, safety monitoring, food service, case management infrastructure, and administrative functions are anticipated to be fully funded through Township resources and other grant sources reflected in the FY25 Annual Financial Report, which shows over \$1.26 million in salaries and \$2.02 million in grant revenue supporting shelter operations.

CCMHB grant funding will support 2.0 FTE dedicated to behavioral-health stabilization and linkage which is broken down into 1 FTE Substance Abuse Specialist, one 0.5 FTE Behavioral Support and 0.5 FTE Intake Coordinator (current employee). Approval of the proposal will further support specialized training for this same employee, who has demonstrated strong interest and dedication in working with guests actively struggling with substance use issues. These positions fill a service gap not covered by other funding sources and integrate into the existing operational structure. Full shelter staffing demographics can be provided upon request.

In summary, the FY27 application intentionally reflects only the budget and staffing for the new behavioral health initiative, which is a standalone component of the shelter, not the shelter’s full operating budget.

The differences between the AFR and the FY27 budget therefore reflect the distinction between:

1. full agency operations (as captured in the AFR), and
2. a narrow, program-specific budget aligned to CCMHB requirements

2. AFR vs. Program Budget Reconciliation Table

Category	FY25 AFR (Full Shelter Operations)	PY27 CCMHB Budget (Behavioral Health Program Only)	Explanation
Total Revenues	Over \$2.02 million in shelter grant revenues (multiple sources)	\$150,000 (CCMHB only)	AFR includes all shelter funding; PY27 includes only program funding. Many AFR grants were time-limited and are not available in FY27.
Total Expenditures	Over \$2 million across staffing, occupancy, supplies, services, equipment, printing, etc.	\$150,000 limited to personnel, occupancy allocation, consumables, general operating, staff development, and transportation	AFR reflects full shelter operations; PY27 reflects only incremental behavioral-health program costs.
Personnel Costs	\$1.26 million in salaries for shelter-wide staff (operations, admin, case management, etc.)	\$98,000 in salaries for 2.0 FTE (program staff only)	AFR covers entire shelter workforce; PY27 includes only staff directly billed to

Category	FY25 AFR (Full Shelter Operations)	PY27 CCMHB Budget (Behavioral Health Program Only)	Explanation
			the new CCMHB program.
Professional Fees / Contractual Services	Significant amounts present in AFR (e.g., \$68,657 contractual, \$4,488 professional services)	\$0 in program budget	These costs remain part of base shelter operations and are not allocable to this behavioral-health program.
Equipment / Printing / Supplies	AFR includes equipment, printing, and activity-specific supplies across departments (e.g., \$94,918 activity supplies, \$2,854 printing)	Only minimal consumables needed for program service delivery (e.g., \$1,300 consumables, \$5,953 general operating)	PY27 includes only program-specific materials required for the behavioral-health service model.
Occupancy / Facility Costs	AFR includes full facility utilities and maintenance, including security, repairs, janitorial, and building costs	A proportionate \$10,000 occupancy allocation related solely to program space and usage	PY27 cannot bill for shelter-wide occupancy—only costs tied directly to program activity.
Number of Staff Reflected	Numerous positions across admin, operations, case management, shelter management, and facility support (hundreds of salary lines)	2.0 FTE (Behavioral Health Program-only)	AFR reflects total agency staffing; PY27 reflects only incremental staff funded by CCMHB.

CU at Home – Life Skills Case Management (NEW) and Shelter Case Management

From Melissa Courtwright, Executive Director:

FY27 Operating Budget Narrative

HIGH-LEVEL OVERVIEW

FY-07 Operating Budget is the first year of operating the mid-barrier program out of the campus facility at 1207 S Mattis. Strategically, FY-07 is focused on continuing to mature the Pathways to Progress program and the operations/functionality of the programs on this campus. Due to unforeseen circumstances, the collaboration with City of Champaign Township to run CU at Work/Prosperity Gardens for Summer, 2026 has been tabled.

Total FY-07 Operating Budgeted revenue is expected to come in at \$1,786,990 and is comprised of:

Revenue Source	Program	FY-06 Projected	FY-07 Budgeted	Comments
CCMHB	Case Management	\$256,700	\$295,000	Application Pending
CCMHB	Life Skills Support	\$0	\$305,000	Application Pending
Drug Court	Life Skills/Occupancy	\$104,200	\$84,000	Fee for Service
Housing Authority	Occupancy	\$66,560	\$199,680	SRO's per bed
United Way	Occupancy	\$40,000	\$50,000	Application Pending
United Way	Advanced Shelter	\$0	\$50,000	Application Pending
Fundraising	Various	\$700,000	\$725,000	Public Support
CFECI - Donor Advised	Case Management	\$0	\$66,500	Recovery Support

Operating Expense classifications remain consistent year over year with FY-07 expenses expected to increase with the increase of clients served and moving to the 1207 S Mattis campus. Staffing has evolved to 20 FTEs serving the 26 clients in the new campus, including adding key leadership roles in high-need hours (evenings and weekends).

BY FUNCTIONAL/PROGRAM AREA

CU at Home has undergone significant changes in FY-06. With its operations moving towards a more routine nature, programming and its potential funding sources are also starting to take shape. For the current operating budget, CUH has projected revenue and expenses based on the following programs:

Residential Services/Advanced Shelter

A key component of the Pathways to Progress mid-barrier program is housing. The new campus houses 16 men and 10 women with the off-campus locations able to house up to 14 people. (total of 40)

A key component to the move to 1207 S Mattis was the MOU with the Housing Authority of Champaign County to support the occupancy costs of an expanded mid-barrier housing program. This support comes in the form of Single Room Occupancy vouchers at \$640/available bed (increasing per year). In addition to the SROs from HACC, this program is also funded by 50% of the Fees for Service for Drug Court clients and fundraising.

Occupancy costs for 1207 S Mattis are budgeted at \$263,279 – 14.75% of total expenses. Occupancy costs for the advanced shelters are budgeted at \$51,000 – 2.85% of total expenses. Costs include facilities lease, utilities, repairs and maintenance, cleaning, insurance, depreciation and facilities director. NOTE: Residential services for 1207 S Mattis occupy 75% of the building with costs allocated as such.

Intensive Case Management

All clients in the residential program must agree to participate in Intensive Case Management. The Intensive Case Management program is comprised of 4.8 FTEs and associated costs, funds for client assistance, case management software, and an allocation of occupancy costs to run the program (17.5% of the building). Total costs of program are budgeted at \$454,990 with CCMHB being the main funder at \$295,000 (65%). Remaining revenue needs are from public fundraising/donor advised funds.

Life Skills Supportive Services

Over the past three years, CUH has been operating its facilities 24/7/365 with staffed facilities. These staff roles were and are focused on key roles in the Pathways to Progress program. Focusing on Life Skills, these roles work alongside the clients in meeting their goals as well as ensure residential spaces are safe and provide for healing. Upon moving to 1207 S. Mattis, the Life Skills Supportive Services staffing will include:

- Director, Residential Services (1 FTE). The Director of Residential Services is responsible for staffing the Life Skills team, ongoing training and educational needs of this team, and working alongside the Intensive Case Managers to ensure life-skill focused client goals are carried out.
- Team Leads (2 FTEs} - Women/Men. The staffing structure includes a set of team leaders focused on life-skill development. These two roles are on-site at the 1207 S Mattis facility during key life-skill development times for clients (proposed - 2 to 1Op)
- Life Skills Weekend Leads (2 FTEs} - Women/Men. Like above, the structure includes a set of team leaders for weekends hours- the hours when most clients are in at home and working on their skill development
- Shelter Staff (6 FTEs) - Women/Men/plus 1. Learnings from the past three years of operations as well as experience of housing many people in one location has guided CUH's decision to staff overnight hours with three individuals. These staff are focused on client safety.

In FY-06 and prior, CUH has funded these key roles through its fundraising activities. Expanded staffing has increased the costs of the program. Total program costs are budgeted at \$674,890 with an application request to CCMHB for \$305,000 (45.20% of costs). The program is also funded by 50% of the Fees for Service for Drug Court clients, a potential grant from United Way, and by fundraising (41.20%).

Development/General and Administrative

Total Development/G&A costs for FY-07 are budgeted at 19.20%. CUH operates on a lean G&A budget. FY-07 includes 3.2 FTEs for development/G&A and an allocation of occupancy costs to run the program (7.5% of the building)

[The agency also provided revised detailed agency and program budget forms but in a scanned document with tables. These are not included due to the accessibility issues.]

Courage Connection – Courage Connection

From Katie Harmon, Executive Director:

Thank you, Lynn. This is very helpful. In future years, myself and the team here have already discussed reworking our application to provide clarity and distinction in what we are requesting from the CCMHB. The CCMHB has funded a portion of Courage Connection's Counseling Program. Because Courage Connection is a comprehensive Domestic Violence (DV) program, all services need to be available to all eligible clients. Counseling services are offered to both residential and non-residential clients. For clients coming into our DV emergency shelter, because they are fleeing DV, they are considered homeless according to the Department of Housing and Urban Development (HUD). Client Advocates working on the DV hotline assist

callers with safety planning and determining what services they are seeking (including counseling services). Client Advocates also work with residential clients to make referrals to counseling. This is important as there is often stigma associated with counseling. By Client Advocates working in the shelter and developing rapport with residential clients, this makes for a smoother transition to counseling services. In pulling data to share with the Board regarding serving only clients from Champaign County with CCMHB funds (which we absolutely understand), 86% of clients served in our counseling program in FY25 were from Champaign County and 73% of total clients served in all of our comprehensive DV program in FY25 were from Champaign County. Additional funding outside of CCMHB funds that support the Counseling Program are state funds. However, state funds mainly support shelter operations (emergency and transitional housing). This is why CCMHB funds do not fully fund the Counselor positions in order to account for clients served who reside outside of Champaign County (this is a small percentage as indicated above). Also, regarding the Personnel item discrepancy mentioned in terms of paying staff less than minimum wage, you were correct in that these staff should have been indicated as .5FTE. I hope this information is helpful and thank you again.

[To the follow-up question, “Are the funds that are used for out of county clients funds that CANNOT be used for Champaign County folks?” a further reply...]

The funding that we receive from DHS isn't restricted to a county - it covers our Illinois Coalition Against Domestic Violence (ICADV) designated service area of Champaign, Ford, Piatt, and Douglas counties. However, this funding mainly supports shelter operations and only partially funds our counseling programs, so we are requesting the CCMHB funds to make the program whole.

GROW in Illinois – Peer Support

From Brenda Eakins, Executive Director:

I have found the mistakes that I made in the budget. I hope this helps. Please let me know.

Salary / Wages are correct.

Professional fees and services are incorrect should be 15,931.00

General Operating should be 12,789.00

Rent and lease has risen to 2100 a year this need changed in the budget

Equipment purchase needs are wrong, that should be zero, that will change from 2050 I put it in the wrong line.

I have got to change the narrative to match.

6000 in-kind

1000 in contribution

1000 in fundraising

50-dollar fundraising

8050 is our part

I need to change conferences fees and services to reflect 2550 for total program and 500 to Champaign County.

Habitat for Humanity

From Chad Hoffman, Chief Executive Officer:

We appreciate the feedback on our application being completed correctly and the compliments on our program overall.

At the board meeting last night, there were some comments about the mental health impact of homeownership and the Habitat program. Given our connection and positive impact on families, children, and the community, Habitat wanted to share some responses that we think would be valuable to board. Stable housing is a key social determinant of health and can reduce stress, support recovery, and improve individuals' ability to engage in treatment, services, and daily life. Through structured homebuyer education, sweat equity participation, and a relationship-based support model, Habitat provides consistency, accountability, and community connection. These factors are especially beneficial for households navigating mental health challenges, recovery, or developmental disabilities.

We have specific data that was compiled by a University of Illinois Social Work Research Methods class that are relevant to the impact of the Habitat Homebuyer Program:

1. 71% of our homebuyers reported being healthy after homeownership in comparison to 50% of homeowners reporting good health before joining our program.
2. Large increases in family safety, stability, and children's school performance and attendance were reported by more than 60% of our homeowners.
3. 64% of Habitat homebuyers reported sleeping well after home ownership vs. 28% of respondents sleeping well before home ownership.

Additionally, there were concerns in our review about mortgage sustainability and our selection process providing preference to those individuals with mental health diagnosis, substance abuse, or developmental disability. At Habitat, clients that have identified those diagnoses are assessed with a higher level of need upon application review. Additionally, mortgage payment history is tracked and reported to our board through a quarterly dashboard; with 90% of our homeowners accomplishing on-time payments.

Lastly, I wanted to note a few things on our budget submission. We access federal funds through the HUD Comprehensive Housing Counseling Grant as the only HUD-certified counseling agency in our county. Those funds have been reduced by 90% with the latest NOFO that was

issued after our budget submission to the MHB. Additionally, the NOFO for HUD-SHOP funding that allows us to pay for infrastructure on builds has not been issued for over two years. That is typically over \$120,000 per year in funding. The funding request submitted to the Mental Health Board would help us offset some of those decreases. If our funding was cut below the requested levels that is asked about below, we would slow our building pace and serve less families in our community. A funding level at 75% would still allow us to function with little interruption to our services.

Affordable housing is one of the most pressing needs in our community, not only because of rising costs, but because housing stability is foundational to health and well-being. Affordable housing is not just an economic issue; it is a public health intervention. It directly supports mental health stability, strengthens recovery pathways, and reduces the long-term strain on crisis systems such as emergency rooms, shelters, and emergency facilities. Investing in affordable housing is ultimately an investment in healthier individuals, stronger families, and a more resilient community.

Promise Healthcare – Mobile Clinic

From Monica VanDeWalle, FQHC Strategist:

We have reviewed and CCMHB DRAFT program summary and believe that all of the information is accurate. Our team reviewed the budget material to be able to respond to the fiscal questions that were noted in the Staff Comments and we realized that the budget had been entered incorrectly. As you all are meeting today to continue with the review process, we wanted to share an updated budget with the accurate Columns that might help answer any questions the CCMHB review committee has! Please find attached the updated Mobile Clinic CCMHB Budget Template where we have corrected Column D: Total Program Expenses.

Expense Category	Agency	Program	CCMHB	Program %	CCMHB%
Salaries/Wages	\$7,076,913	\$109,967	\$109,967	2%	2%
Payroll Taxes	\$580,307	\$9,017	\$9,017	2%	2%
Benefits	\$1,061,537	\$16,495	\$16,495	2%	2%
Professional Fees/Consultants	\$1,200,000	\$0	\$0	0%	0%
Client Wages/Benefits	\$0	\$0	\$0	'-	'-
Consumables	\$2,100,000	\$0	\$0	0%	0%
General Operating	\$360,000	\$0	\$0	0%	0%
Vehicle Wrap	'-	\$25,000	\$25,000		7%
Maintenance/fuel/insurance/misc	'-	\$10,000	\$10,000	'-	3%
Hotspot	'-	\$3,000	\$3,000	'-	1%
Advertising	'-	\$6,000	\$6,000	'-	2%
Portable Toilet Costs	'-	\$4,800	\$4,800	'-	1%
Site Fees	'-	\$1,000	\$1,000	'-	0%

Expense Category	Agency	Program	CCMHB	Program %	CCMHB%
General Office Supplies	'-	\$1,721	\$1,721	'-	0%
Occupancy	\$190,000	\$0	\$0	0%	0%
Conferences/Staff Development	\$55,000	\$0	\$0	0%	0%
Local Transportation	\$20,000	\$0	\$0	0%	0%
Specific Assistance	\$0	\$0	\$0	'-	'-
Equipment Purchases	\$605,000	\$0	\$0	0%	0%
Tents	-	\$5,000	\$5,000	'-	1%
AC/Heating for Tents	-	\$2,000	\$2,000	'-	0%
Stands, tablet, laptops	-	\$6,000	\$6,000	'-	1%
Leases/Rental	\$427,000	\$0	\$0	0%	0%
Membership Dues	\$24,000	\$0	\$0	0%	0%
Interest Expense	\$0	\$0	\$0	'-	'-
Fund Raising Activities	\$0	\$0	\$0	'-	'-
Cost of Production/In kind vaccines	\$350,000	\$0	\$0	0%	0%
Miscellaneous	\$10,000	\$0	\$0	0%	0%
Depreciation	\$224,002	\$0	\$0	0%	0%
Totals	\$14,283,759	\$200,000	\$200,000	'-	'-

We intend to supplement any deficit through operational revenues and also expect the program to help with outreach in creating new patients to on-site Promise clinics which will add visits and revenue.

Rosecrance – Benefits Case Management

From Melissa Pappas, Executive Director:

Thank you for these summaries – they look great. The only feedback I have is for the Caveat section (at the end of the summary) for Benefits Case Management funding request it stated missing information for reason for increase in request – reasoning was provided that we are requesting to add an additional FTE to this program – that is the purpose of this request for increase. Would we be able to update that summary item? Please let me know...



BRIEFING MEMORANDUM

DATE: May 20, 2026

TO: Members, Champaign County Mental Health Board (CCMHB or MHB)

FROM: Leon Bryson, Associate Director, and Lynn Canfield, Executive Director

SUBJECT: Agency Budget Changes to Program Year 2027 Funding Requests

Purpose

This memorandum presents additional information from agencies requesting CCMHB funding for the Program Year 2027 (July 1, 2026 through June 30, 2027). Twenty-eight applications were submitted, totaling \$5,220,939, nearly \$2 million greater than what appears to be affordable. For the Board to give full consideration on what will constitute best value for this community during such a competitive cycle, more information from applicants may be helpful.

During the April 22 and 29, 2026 Board reviews of funding requests, it became clear that there is not a single standard which can be applied to define an ideal and affordable set of allocations, given the large gap between what was requested and what is affordable.

This memorandum includes brief discussion of possible strategies for determining an ideal set of awards for the coming program year, followed by a great deal of additional information from agencies, all of which should be considered as voluntary and extra. We have not taken a step like this and did not expect to do so.

The Affordability Puzzle

Each strategy which initially seems appropriate has drawbacks.

Current Level Awards.

- If the Board were to fund only programs which continue from Program Year 2026, maintaining them at current funding levels, the total allocation would be \$2,443,066.

- Advantage: the remaining \$801,989 would build back the MHB fund balance or cover increases in other (non-agency) costs.
- Drawback: does not account for increased demand for certain services and economic pressures outside of our control, limiting the Board's ability to achieve its mission of strengthening the system of services and supports.

Current Programs at Higher Levels.

- If the Board were to fund only programs which continue from Program Year 2026 but fund them at the new levels requested, the total allocation would be \$3,355,063.
- Advantage: more affordable than the above and reflects the value of sustaining resources already in use.
- Drawback: eliminates the potential of new proposals, limiting the Board's ability to fund a diverse system.

Audit-Supported Applications.

- If the Board were to fund only those programs for which initial applications were supported by an audit (or equivalent) of the most recently completed agency fiscal year, the total allocation would be \$3,881,615.
- Advantage: reflects the value of the board's approved standards and timeline.
- Drawback: \$636,560 more than appears to be affordable. Further, the strategy is problematic given what we have learned about systemic barriers and other causes of delay. Two agencies' financial reviews were delayed by circumstances outside of their control, and two were finished very soon after the application deadline. In this scenario, they would not be awarded contracts.

Clear and Complete Requests.

- If the Board were to fund only those programs which appear to have no errors in the original application forms, the total allocation would be \$1,035,616.
- Advantage: reflects the value of the approved and published standards.
- Drawback: problematic if the Board wishes to fund organizations which offer local solutions but lack infrastructure due to their size and experience. It also limits the Board's ability to build a full system of services and supports.

Fully Eligible Requests.

- If the Board were to fund only those programs which were requested by fully eligible organizations with complete applications, even if errors were included, the total allocation would be \$4,841,453.
- Advantage: while organizational requirements can take more time to meet than some expect, this would allow the Board to engage with a more diverse set of agencies.
- Drawback: \$1,596,398 greater than what appears to be affordable.

Alignment with Priorities.

- If the Board were to fund only those programs which meet an identified priority need of Champaign County residents, the total allocation would be \$5,080,953.
- Advantage: acknowledges the many thoughtful proposals, which address one or more of important issues.
- Drawback: we would not be able to fulfill these obligations, as fund balance would run out before the end of the contract term.
- However, if we understand which needs are most pressing and least likely to be met in other ways, and if we add the value of maintaining current services to minimize disruption experienced by the people who rely on them, we may be able to narrow this set to an affordable set of Program Year 2027 obligations.

Agency Responses

Board members have asked whether lower contract amounts would be feasible for some projects. Cunningham Children's Home (for Families Stronger Together) and WIN Recovery provided immediate updates lowering the specific amount requested, in each case due to their own budget changes. A third agency indicated they had new revenue which would expand services to better meet the growing needs, though not necessarily lower the request.

On April 28, Mr. Bryson sent all applicants the following email request:

As part of our current funding review process and deficit challenge, we are requesting additional information to help inform allocation decisions.

Please let us know whether your proposed program or service could operate effectively at a lower funding amount than originally requested while maintaining a similar level of impact, scope, and expected outcomes. If so, please indicate:

1. The reduced funding amount you believe would still allow the program to function effectively; and

2. Any anticipated changes to service levels, staffing, capacity, or outcomes at that amount.

This information will assist us in understanding funding flexibility across applications and in making thoughtful, data-informed decisions.

We would appreciate your response by 11:59 PM on Tuesday, May 5th. Please provide your response in the body of your reply email only (no attachments, please).

Thank you for your time and continued commitment to serving the community.

Brightpoint – Healing Beyond Violence

From Katie Nicholson, Manager of Public Grants:

Thank you for the opportunity to provide an updated budget and further clarification for our Healing Beyond Violence program in Champaign County. We are proud that Champaign County residents trust us to help their families heal from the trauma of experiencing domestic violence. Brightpoint knows there were concerns about duplicative services across our programming and Courage Connection. They provide emergency services to victims of domestic violence and their children whereas we provide more long-term behavioral health services that allow the victims to heal from the trauma of experiencing domestic violence. We often receive referrals from Courage Connection for more long-term services and count them as an important partner in our work.

Brightpoint understands that the Mental Health Board was concerned about our total agency deficit of \$1,194,387 and our total program deficit of \$272,761. We know there were also concerns about our overall agency budget. As you know, Brightpoint is a statewide agency that serves over 37,000 children and families each year. To do so and continue to offer our high-quality programming, this requires a large budget. As evidenced by our deficit, we do not have extra money to supplement programs for long once their funding is not renewed, such as our fear with Healing Beyond Violence. We do have endowment funds to pay for overall agency deficits however this is not fiscally responsible to pull from our endowment for long-term program support.

The request Brightpoint made to the Champaign County Mental Health Board (CCMHB) was more than our current US Department of Justice funding because the initial budget was made in 2023. Once a budget is made for a federal grant, you cannot change anything about the grant, including cost-of-living raises or increased mileage rates. Those are costs that the agency must either not offer to its employees or find additional funding to make up the difference. Due to cuts in our Healing Beyond Violence program in Bloomington, Brightpoint made the choice to expand the case management team's

footprint to cover both Bloomington and Champaign County, sharing the costs. The initial ask to the federal government did not include case management services.

Because this program is solely funded through the federal government, we are unable to bill Medicaid for our services, since this is double-dipping federal funds, and therefore prohibited. If we are unable to renew our federal grant, we will start to bill Medicaid for Healing Beyond Violence. Brightpoint does have an active Medicaid license for other Mental Health & Wellness programs across Illinois, so we have the infrastructure to begin billing. We also work with a couple other mental health boards across the state to ensure Medicaid dollars are kept separate from MHB money.

In our initial application to CCMHB, we were novice users of the application portal and because of it, we had some errors in our expenses. We understand now that the MHB was looking for a combined program budget with our ask to the MHB, not separately, which causes some errors. We also understand now that under all Personnel, we were not meant to enter the salaries already listed in that tab, which doubled our total ask and threw off our payroll taxes and fringe benefits. We tried to even out the totals by adding a negative total under Cost of Production, but again, we did not change the fringe to match the inflated salaries. We also did not explicitly say in the narrative that payroll taxes were included in the 30% fringe rate, again, throwing off numbers. We apologize for those errors and are immensely thankful for the opportunity to correct our errors.

Below is a table that includes a corrected initial budget that should have been submitted the first time and a “bottom dollar” budget, which represents that bare minimum ask for us to continue the program in Champaign County. The largest change included removing the part-time Therapist position, which is currently vacant, and change the percentage of certain staff’s FTE. Changed values in the edited column are highlighted in yellow. We have included an updated budget narrative as well on the next pages.

[Due to formatting issues, I have summarized the table here.]

- Personnel, submitted at \$256,724, is corrected to \$128,362, and could be lowered to \$94,256.
- Payroll Taxes, submitted at \$9,820, could be lowered to \$7,211.
- Benefits, submitted at \$28,688, could be lowered to \$21,066.
- Consumables, submitted at \$2,100, could be lowered to \$370.
- General Operating, submitted at \$2,942, is corrected to \$5,509, could be adjusted to \$4,295.
- Occupancy, submitted at \$3,163, is corrected to \$1,956, could be adjusted to \$2,235.
- Conference/Staff Development, submitted at \$2,525, could be lowered to \$200.
- Local Transportation, submitted at \$5,168, could be lowered to \$2,871.
- Equipment Purchases, submitted at \$1,000, could be lowered to \$0.

- Lease/Rental, submitted at \$2,453, could be lowered to \$1,345.
- Cost of Production, submitted at -\$128,361, was in error, now \$0.
- Miscellaneous, submitted at \$30,885, is corrected to \$28,137, and could be lowered to \$20,077.
- Total Expenses, submitted at \$217,107, are corrected to \$215,899, and could be lowered to \$153,926.

Again, Brightpoint is forever grateful for the opportunity to clarify aspects of our application and to submit a revised budget. If you have any additional questions, please reach out to Katie Nicholson: Manager of Public Grant Operations at knicholson@brightpoint.org.

Thank you for the opportunity and we look forward to hearing from you.

Updated Budget Expenses Narrative:

Personnel (\$94,256) – Personnel included in the budget are listed below. Their positions’ responsibilities for Healing Beyond Violence are unchanged from the initial application.

[The full table is omitted due to personnel details.]

Payroll Taxes (\$7,211) and **Benefits** (\$21,066) – Brightpoint budgets in accordance with our standard benefit package of 30% of each FTE’s salary. This includes payroll taxes/FICA (\$7,211), life insurance (\$1,593), medical insurance (\$16,683), unemployment insurance (\$283), worker’s compensation insurance (\$1,093), and retirement contributions (\$1,414).

Consumables (\$370) – Consumables include therapy supplies include board games, outside toys, toys, craft supplies, and replacement furniture (family table & chairs) to be used during session with families (\$250) and office supplies (\$120).

General Operating (\$4,295) – Brightpoint has telecommunication services for all staff based on their FTE at each location, including phone service (\$31,80 x 12 months=\$382) and WAN communication (\$58.99 x 12 months=\$708). We also provide a stipend to our staff because we know they use their personal cell phone to communicate with families (\$22.50 x 12 months=\$270) in addition to wireless landlines for staff to communicate with each other and the public (\$67.50 x 12 month=\$810). We also include one Zoom account for staff to hold virtual sessions with adult victims (\$20/month for 12 months=\$240). Brightpoint maintains liability insurance for all staff and directors, including umbrella, fiduciary, and crime. This is billed by FTE per program (\$157.08 x 12 months=\$1,885).

Occupancy (\$2,235) – Occupancy for the three offices that Healing Beyond Violence Staff work out is based on their FTE billed to the grant. This includes utilities (\$36,19 x

12 months=\$434); care of building and grounds (\$99.49 x 12 months=\$1,194); other costs associated with renting these buildings, such as pest control and rug cleaning (\$19.20 x 12 months=\$230); and property insurance (\$377).

Conference & Staff Development (\$200) – Brightpoint pays for training materials so our Therapists can maintain their required licensure with the state of Illinois.

Local Transportation (\$2,871) – Both Healing Beyond Violence Therapists provide services in our family’s home, so Brightpoint pays their mileage at the IRS-designated rate of .725/mile for the estimated 220 miles each FTE will travel each month. (1.5FTE x (220x.725) x 12 months = \$2,871). The Case Manager does not travel, so her .1FTE is not included.

Lease/Rental (\$1,345) – Brightpoint rents our Champaign and Granite City offices, allocating those costs to staff based on FTE. This works out to \$112.09/month for 12 months equals \$1,345. We own our offices in Bloomington.

Miscellaneous (\$20,077) –Brightpoint also has a federally approved indirect cost rate of 15% (\$20,077). This includes but is not limited to the following departments: Human Resources, Payroll, Quality Assurance, Resource Development, IS, IT and Finance. Management and staff produce financial reports, oversee the personnel management of the agency, manage benefits, produce payroll, maintain the IS system and perform system maintenance functions.

CCRPC – Homeless Services System Coordination

From Community Services Director Lisa Benson:

With a funding award of **\$98,374**, we believe that we could still administer the programs.

Following are the changes relevant to this reduced funding amount:

Original Funding Request -\$189,007	Alternative Funding Request- \$98,374	Explanation of Difference
2.5 FTEs overall programming	2.0 FTEs overall programming	Remove the CIH Outreach Worker FTE; increase FTE of CIH Coordinator
2.3 FTEs MHB funded	1.0 FTE MHB funded	Remove the CIH Outreach Worker FTE; reduce MHB funded portion of Coordinators
300 TPCs	150 TPCs	Reduced as a result of one less staff person impacting the service delivery
1060 SCs	1000 SCs	Slight reduction due to reallocation of duties to CIH Coordinator, from removed Outreach Worker position
Outcome #3: CES will make referrals to housing opportunities within <u>3</u> business days of the notice....	Outcome #3: CES will make referrals to housing opportunities within <u>5</u> business days of the notice....	Timeliness impacted by one less staff position providing services

CU at Home – Life Skills Case Management and Shelter Case Management

From Executive Director Melissa Courtwright:

Thank you for the opportunity to provide additional information regarding C-U at Home’s FY27 funding requests.

Please see below for our response outlining funding flexibility for both the Shelter Case Management Program and the Life Skills Case Management expansion.

Additionally, I’m happy to provide further budget detail or clarification if that would be helpful.

If you have any questions or would like additional information, please don’t hesitate to reach out.

Thank you for your time and consideration.

1. Existing Case Management Grant (Shelter Case Management Program)

Current Request: \$295,000; Original Request \$295,000

Our Case Management program is a foundational component of C-U at Home’s service model and has been supported through MHB funding for several years. This funding supports core staffing, program continuity, and the integrity of our client-centered, trauma-informed approach.

Due to the essential nature of this program, we do not believe a reduced funding amount would allow us to maintain a similar level of impact, scope, or outcomes. Any reduction would directly affect staffing stability, consistency of care, and our ability to effectively serve vulnerable individuals.

As this program is not an “add-on” but a core operational function, reductions would significantly compromise program effectiveness and client outcomes.

2. Life Skills Case Management (Reduced Funding Scenario)

If full funding is not available for this initiative, we would respectfully propose a reduced funding option that prioritizes a critical operational need:

Proposed Reduced Funding Focus: Life Skills Team Lead (Weekend/Overnight Stability)
Reduced Funding Request: Current Request: \$50,000, 1 FTE; Original Request: \$305,000

Weekend and overnight shifts are consistently complex and high-risk operational periods, often requiring crisis response, staff support, and leadership presence. Funding a dedicated Life Skills Team Lead would:

- Strengthen crisis management and de-escalation
- Improve staff support and supervision during high-need hours
- Increase program consistency and accountability
- Enhance client stability during vulnerable timeframes

We currently have a qualified internal candidate identified for this role, with a BSW, relevant professional experience, and lived experience with homelessness. This allows for immediate implementation and impact.

Estimated Reduced Funding Scope:

- One full-time Life Skills Team Lead position
- Service capacity maintained at approximately 36 clients

Anticipated Program Adjustments at Reduced Funding Level:

- Contacts would decrease due to limited staffing capacity
- Estimated service delivery:
 - about 144 contacts per month
 - about 1,700 contacts annually
- Reduced ability to provide broader Life Skills programming and individualized support beyond core contacts
- Slower client progression due to decreased engagement frequency

While this reduced model would not achieve the full scope of the original proposal, it would provide meaningful stabilization in a critical area of operations and maintain a measurable level of impact.

C-U at Home remains committed to providing high-quality, trauma-informed care to individuals experiencing homelessness, and we appreciate your consideration in supporting both the sustainability of our core services and the strategic expansion of our Life Skills programming.

CU Early – CU Early

From Program Director Kelly Russell:

As you know our budget is extremely tight and we have been at level funding with our ISBE grant for 8 years with no increase anticipated in FY 27... We have made it work and continue to serve families at a high quality level thanks to you all and the Mental Health board funds we receive for a bilingual Spanish speaking home visitor. The Spanish speaking bilingual home visitor remains fully enrolled with a wait list. Our CU Early program is the only home visiting program in the community that has Spanish speaking home visitors which makes such a difference in working with our Spanish speaking families.

The FY 27 application I submitted to you all is based on a 5.25% increase. This is because we are on the same salary schedule as the teachers at Urbana School District and they are in the middle of union negotiations. We are hoping the increase will be 5.25 or lower. If the percentage negotiated is lower, we can definitely make it work with the amount we have requested and can give some funds back. We are not sure when the negotiations will be settled unfortunately.

The funds we receive from you all go directly to one full time staff person and her benefits. We could still make it work with a slightly lower amount. We would just have to cut the number of home visits most likely. She would still be able to serve 20 families, but would most likely provide less visits.

I hope this helps. If you have any other questions and/or need additional clarification, please let me know.

I appreciate all of the work you do for our community even when the decision making is tough.

CC Head Start – Early Childhood MH Services

From Brandi Granse, Early Childhood Division Director:

After reviewing the program's budgets and taking into consideration the climate at the federal level, I provided responses in blue below.

1. The reduced funding amount you believe would still allow the program to function effectively; and

Although a reduction would place a burden on the program, I believe we could decrease the application request by \$26,393 if needed. The total amount would then be \$384,669, which would primarily support the three Social Skills and Prevention Coaches and the Mental Health Consultant.

2. Any anticipated changes to service levels, staffing, capacity, or outcomes at that amount.

This reduction would require eliminating the Off-Site Program Manager from the budget and narrative, but it would not change the services to children and families or expected outcomes. However, if the board requires further reductions, there would be a significant change in service levels, staffing, capacity, and outcomes.

Please let me know if you have any questions or concerns.

CC Healthcare Consumers – Disability Application Services

From Claudia Lennhoff, Executive Director:

Thank you for your email. I have been trying to think through this question carefully, and I have reviewed our application for the Disability Services program, as well as our preliminary budget for next fiscal year. I know how serious this situation is, and how difficult a job the MHB has to do in this funding period.

Lynn and I had a brief conversation about this, and I had mentioned that when CCHCC submits our grant applications to the MHB, we make our requests based on our actual anticipated expenses for the programs. We do not inflate our budgets.

The vast majority of the funding we are seeking from the MHB for this program is dedicated to the costs of staffing this program - salaries, fringe, and benefits/health insurance.

Staff retention is my top priority. The team of staff who work on this program have highly specialized knowledge and experience, and now we can also add Babatunde's skills as an attorney to the services that we can offer our clients, because Babatunde can now represent clients at the level of appeal that involves an Administrative Law Judge.

I'm afraid that if we lose funding, or if we have a deep enough reduction in funding, I will not be able to retain the key staff members who work on this program.

To answer your questions very directly:

1. Regarding reduced funding: I hope to receive the full amount of funding that we had requested. However, if something is to be cut, then perhaps the \$2,478 in the General Operating line item of the budget would be a tolerable cut. We also allocated \$1,500 toward Professional Services, which is for our annual audit. If those two line items were to be cut from our budget, it would bring our request to the MHB down to \$117,022. I realize that this is not a significant reduction to the amount we have requested, but we could certainly tolerate this.

2. With that reduction, I would not anticipate any reductions in service levels, staffing, capacity, or outcomes.

I not only have a fear of losing staff, depending on funding cuts. I also have a fear of having to turn away clients who are in desperate need, if we do not have enough staff to operate this program at the capacity that our community needs. The word is out, and lots of people come to CCHCC for this particular service. It is not an exaggeration to say that at least one new client comes to us every single day for this service. And the vast majority of the clients who are seeking disability application help are individuals who do have behavioral health issues.

I know that the MHB is in a very tough spot this year, given the budget and the funding requests. I wish I could be more helpful in terms of our application, but truly, I do not inflate our budgets or our requests. And I believe that this program provides an incredible value on investment.

Please feel free to let me know if you have any questions or need more information.

City of Champaign Township Strides Shelter – Behavior Health Program

From Charlene Murray, City of Champaign Township Supervisor:

Good afternoon!

I hope you all are well. Mental health has always been a significant gap in homelessness services, so thank you for understanding the importance of these efforts in our setting and considering our proposal at a lower funding amount.

If funding is reduced, we can keep the core Strides services in place, as this grant funding would be used for a new endeavor to provide a mental health program within Strides. However, losing the 0.5 specialist position will reduce how many people we can assess for behavioral health needs and how many referrals we can make to outpatient and inpatient services. Below, you will find an outline of budget adjustments and what a reduced amount would mean for Strides.

Here is what will remain the same:

- We can still meet the goal of 60% of our referred guests completing an outpatient mental health or substance use disorder intake within 90 days, though the total number of people referred will be lower, due to losing 0.5 FTE specialist.
- We can still meet the goal of 50% or more of our guests achieving at least two stability milestones (ID, benefits app, primary care apt, housing plan, etc.) within 45 days.

Here is what will shift:

- Our crisis response reduction goal will need to be adjusted from 20% to about 15% since one specialist covering a 24/7 program will slow progress.
- Community outreach will decrease, due to loss of 0.5 FTE specialist.
- For that same reason, the number of service contacts will decrease from 2500 to about 1800-1900, and
- Partnerships will be established at a slower rate, due to limited capacity.
- General operating costs will be cut in half but we can still cover essentials like HMIS licenses and required administrative and compliance costs.

Here is what we hope other funding (from grants or other resources) might support:

- Transportation support for medical appointments, housing appointments and post-surgery needs
- Staff development which, without funding, will be limited to what we can do with existing resources
- Benefits for 0.5 FTE case manager
 - To keep the program functioning at the level needed, and to meet the adjusted metrics, we need to retain a 0.5 FTE case manager. This role is essential for making sure guests are connected to the specialist, upon entry and without delay.

Budget Adjustment:

Program Needs	Original	Adjusted
.5 Intake CM	\$20,000	\$20,000
.5 specialist	\$26,000	\$0
1 FTE specialist	\$52,000	\$52,000
Payroll taxes	\$7,497	\$5,600
Benefits	\$24,500	\$18,000
Consumables	\$1,300	\$500
General operating	\$5,953	\$3,000
Occupancy	\$10,000	\$10,000
Staff development	\$2,250	\$0
Local transportation	\$500	\$0
TOTALS	\$150,000	\$109,100

I'm hopeful that this overview and breakdown give you a clear picture of what we can maintain with a reduced funding amount. We appreciate your partnership and remain committed to making real impact in the lives of the people we serve.

Please let me know if you have questions, want clarity or need any additional information from us.

Courage Connection – Courage Connection

From Katie Harmon, Executive Director:

While posing some challenges, Courage Connection could operate effectively at a lower funding amount than originally requested while maintaining a similar level of impact, scope, and expected outcomes.

A 16% reduction in our requested funding amount would still allow for our program to function effectively - a request of \$148,322 (from \$176,476). This can be accomplished by removing the requested portion of the Executive Director salary, the requested portion of the Director of Grants' salary, removing .5 FTE of a Client Advocate position, and reducing the costs of professional fees. These changes would not result in a change in service levels or outcomes. However, funding from the Department of Human Services would have to be explored in order to offset these costs.

It is paramount that Courage Connection receives the increase from FY26 to \$148,322 in order to retain staff by providing a cost-of-living increase. This is directly in line with the CCMHB's priority area of "Strengthening the Behavioral Health Workforce."

Cunningham Children's Home – ECHO Housing and Employment and Families Stronger Together

Prior to Mr. Bryson's email message, and directly after the Board discussed the Cunningham Children's Home applications, the agency offered the following decreased request.

From Paige Garrison, Associate Director of Family and Vocational Services:

After attending the CCMHB meeting last night to review upcoming grant applications and hearing the concerns that were brought up in regard to the Families Stronger Together program, I wanted to reach out to provide an update. We truly value our partnership with the Mental Health Board and the opportunity to serve this difficult population in our community. We hope to remain working alongside you as we collaborate to better serve this population moving forward. I met with our Community Services Director and budget personnel to reevaluate our budget this morning. After this reevaluation, we were able to revise the request to decrease the amount by \$14,711, and this is primarily coming from personnel salaries, benefits, and payroll taxes. This revision means that we would only be requesting an additional \$1682 more than the previous year, bringing our total requested amount to \$283,821. We want to acknowledge and are aware of the challenges that have impacted our programming over this past fiscal year and are committed to enhancing and expanding our services to be more wholistic and in alignment with our measures and program outcomes for our youth and families. We are currently on target to meet our projected TPC served with our current referrals. Please let us know if there are any further questions as you consider our application.

From Ann Percy, Director of Community Services, in response to Mr. Bryson's later email:

Thank you for the opportunity to review and revise our requested funding amount. Our team met to carefully evaluate where reductions could be made while minimizing any impact on clients in the Champaign County community.

Below is our proposed revision, along with an additional reduction option should the Board determine that further adjustments are necessary. Cunningham greatly appreciates the Board's collaborative approach throughout this process. We recognize the challenges involved—particularly this year with the noted two-million-dollar shortfall—and we are grateful for your continued commitment and thoughtful consideration.

Proposed Reductions:

- FST — Reduction of \$15,236
This reduction is primarily from personnel salaries, benefits, and payroll taxes, with no impact on clients served.
- ECHO — Reduction of \$16,800
This reduction reflects the removal of an additional hotel bed added this year and will not impact clients served.
- Combined Original Request (FY27): \$562,882
- Revised Request (FY27): \$530,846

Additional Reduction Option (if required):

If further reductions are necessary, we propose eliminating the part-time case aide position in ECHO that was added two years ago. This would result in an additional reduction of \$43,000 in personnel salaries, benefits, and payroll taxes. However, this change would impact service capacity, reducing the current caseload from 18 clients to a maximum of 15.

Should this additional reduction be implemented, Cunningham's total FY27 funding request would be \$487,915.

Thank you again for your time, effort, and dedication throughout this process. Please do not hesitate to reach out if any additional information is needed.

Don Moyer Boys and Girls Club – CU Change and Community Coalition Summer Initiatives

From Monica Miles, Chief Operating Officer:

Requested information is below:

Program: C-U Change

1. The reduced funding amount you believe would still allow the program to function effectively; and
\$87,830.20
2. Any anticipated changes to service levels, staffing, capacity, or outcomes at that amount.

At this funding level, the COO would be removed from the budget and all responsibility for reporting, assessment, supervision, and program implementation would transition fully to the Director of Family Engagement. As the program budget was currently written the COO would maintain the responsibility of reporting and assessment functions for the Program and the Director of Family Engagement would support with direct supervision of case manager and program implementation/deliverables lead. There will be a learning curve that comes along with transitioning all responsibilities to Director of Family Engagement at once however this should not impact the quality-of-service delivery and would most directly be seen in difficulties in reporting/assessment responsibilities. All additional requested increases were based on increases in expenses for health insurance benefit, mileage cost, and rent- DMBGC unfortunately does not have control over those increases.

Program: Community Coalition Summer Initiatives

1. The reduced funding amount you believe would still allow the program to function effectively; and
\$90,000
2. Any anticipated changes to service levels, staffing, capacity, or outcomes at that amount.

Funding for this program supports 10-15 grassroots organization annually in providing youth services during the crucial summer months when youth spend large amounts of time unsupervised/out of school. To accommodate the reduction, there are two pathways- the first would be reducing the number of grassroots organizations that are receiving funds this year. Our initial goal included funding 10 organizations at \$9,000 each, focusing on programs that have proven they are capable of offering a high level of services both in terms of quality and quantity with the capacity to offer additional opportunities this upcoming summer. With the reduction we could either fund each of the organizations at a reduced amount- \$8,100 or we could fund 9 organizations at the \$9,000 level. The 10 organizations that we were targeting provide an average of 15-20 engagement opportunities each throughout the summer and serve anywhere from 20 youth to 200 youth depending on the intensity of their services. We would project that with the reduction of funding each would reduce

engagement opportunities to provide between 10 - 15 opportunities each and with the reduction of a partner we would see a reduction in 15 - 20 engagement opportunities and a reduction in youth served. The youth served number would vary depending upon the provider chosen to not receive funding.

Please let me know if I can provide any further information.

Family First Advocacy – Empowering Bridge Program

From Katrina Roberts, Founder and Executive Director:

Thank you for your email. The short answer to your question is no, we could not operate effectively at a lower funding amount than originally requested while maintaining a similar level of impact, scope, and expected outcomes. Of course, we are grateful for all investments in our organization, but a decrease in funding would most definitely diminish our services and, therefore, the impact on families. We do our best not to fully rely on one source of income to cover the cost of the Empowering Bridge Program (EPG). I have included our cost analysis for each service in the EPG to provide a clearer perspective on the cost per service compared to what we requested in our grant application. When we submitted our application, we were confident we could cover the cost of services beyond what we requested through volunteers, sponsorships, other grants, and donations. Due to cost increases and an increase in the number of families we serve (we have more than tripled in the last 3 months), this will be a tougher stretch for us. A decrease in the grant funding would mean fewer families served and fewer services/supports we can provide in Champaign County.

Family First Advocacy identifies a “Community” as a school district. There are 23 school districts in Champaign County; therefore, we provide all components of the Empowering Bridge Program to all 23 communities.

Cost Analysis for Empowering Bridge Program, Champaign County

Empowering Bridge Group

Monthly/year-round

- 19 participants X 8 communities (not all 23 communities) X 12 months = 1,824 participants per year.
- Meals: 1,824 participants @ \$20 per person = \$36,480 per year
- Program materials: \$4000
- Childcare: \$2,300 Per month X 12 months = \$27,600
- Cost per year = \$68,080 per year

Community Events

6-month Season

Projected **350 adults & 700 youth** per 6-month season

- Gas - \$150 per event
- Foam - \$100 per event
- Book giveaways – \$300 per event (1 Book per youth)
- \$550 per event X 23 communities (1 time per community) = **\$12,650**

The Jordan Project

9-month school year. We would also like to add summer programs in Champaign County.

This projection is based on our original proposal of us doing just **ten classrooms out of 23 districts (10 classrooms only):**

- 1 book X 250 participants = \$2,500
- 1 Certificate X 250 participants = \$250
- Jordan's Fee: \$100 X 10 classrooms = \$1000 (not all districts)
- Total cost per school year = **\$3,750**

The Jordan project has really taken off since we submitted our grant application. We will have no problem tripling these numbers.

This projection is based on us doing **two classrooms per district (46 classrooms):**

Projected 1,150 participants per school year. 1 Book X 1,150 participants = \$11,500

- 1 certificate X 1,150 participants = \$1,150
- Jordan's Fee: \$100 X 23 classrooms = \$2,300
- Total cost per school year = **\$14,950**

Peer Support

The number of Families served has increased since our application, and we will need to hire and train another Parent Peer Support Partner at \$40,000.

Community Trainings

Projected 400 participants (40 trainings with 10 participants)

- 1 Workbook per 400 participants X \$15 per book = \$6,000
- Print materials per 400 participants X \$10 = \$4,000
- Lite meal: \$20 X 400 participants = \$8,000

- Childcare: \$75 X 40 trainings = \$3,000
- Total cost of community trainings = **\$21,000** for the year

Transition Conference

Projected 25 participants (15 adults and 10 youth)

Two-day conference

- Transportation
- Food Voucher
- Conference transportation
- Hotel
- \$1500 per person X 25 participants = \$37,500

Supported Family Retreat

- Lodging, Meals, Recreation, 3 large meeting spaces = \$37,510

Additional expenses:

We are seeking sponsorships and will be doing a fundraiser to cover these items:

- 25 staff wages
- Additional recreation
- Family First Advocacy staff wages
- Transportation
- Curriculum
- Snacks
- Swag Bags

We were able to secure a mini-grant for:

- Sensory Room items
- Speakers and trainers (fees, travel, food, and lodging if needed)
- Curriculum

Please let me know if you have any questions or need anything more from me.

FirstFollowers – FirstSteps Community Reentry House and Peer Mentoring for Reentry

From Marlon Mitchell, Executive Director and Founder, and James Kilgore, Director of Advocacy and Outreach:

Thanks for giving us this opportunity to change the budget for FY27. We are able to reduce the "consultants and contractors" in the Peer Mentoring Program by \$30,000. We don't anticipate this will make a meaningful difference to our service levels as we have used funding from the City of Champaign to upgrade the skills of our staff so we can do more with less. Also we will have several interns working with us next year for the first time, so that will also ease the pressure.

Please let us know if you require more information on this issue.

GCAP – Advocacy, Care, and Education Services

From Darya Shahgheibi, Executive Director:

I understand these are difficult decisions to make, and I appreciate the team's effort in navigating this. I've included a table that breaks down the specific line items we can alter, along with my notes on the potential impact of each change. With these adjustments, the total expected change would be (\$10,165.00), about a 9% reduction in our initial funding request. Please let me know if you have any questions. If needed, I can look at the impact of further adjustments and send an updated version. Hopefully these changes allow for more programs to be funded and additional resources to be provided to the community!

[Due to the inclusion of a very detailed table, the following summarizes potential reductions to proposed expenses:

No change to Personnel (\$67,293) or Payroll Taxes (\$5,720) or Benefits (\$1,500) as “this would be challenging to alter given it would impact the programs we are able to offer to the community and the limited staff we employ.”

Reduce Professional Fees/Consultants costs from \$10,600 to \$10,000, “We can reduce professional services offered to clients if absolutely needed.”

Reduce Consumables (which lists \$3,000 for office supplies, \$1,000 for outreach/advocacy supplies, \$2,000 for supportive supplies, and \$5,000 for client supplies) from \$9,000 to \$6,500, by securing “in-kind donations for several of these items.”

Reduce General Operating (which lists \$2,000 for subscriptions, \$2,850 client and staff Xfinity services, \$500 for books and similar, \$500 for postage, \$500 for outreach booth fees) from \$6,350 to \$3,950, moving the cable expenses to HOPWA grant.

Reduce Occupancy (which lists \$3,000 for janitorial and \$500 gardening supplies) from \$2,000 to \$0, stating “We can remove this expense if necessary. It is not essential to the program. If clients would like to garden again this year, we can attempt to seek in-kind donations.”

Reduce Conferences/Staff Development (which lists \$750 for various Case Manager trainings, \$250 for all-staff trainings, and \$1,500 for conference costs) from \$2,500 to \$1,000, noting “I can forgo the annual 2-day event that requires registration fees, lodging, etc and limit conferences to those without registration costs. Case Manager training and All Staff training are a necessary expense.”

Local Transportation (\$500 for client rideshares, \$1,250 staff reimbursement) cannot be reduced, as “This is essential for providing client support.”

Reduce Specific Assistance (monthly food vouchers for enrolled clients) from \$5,000 to \$4,200, stating “This would only provide vouchers for 6-8 clients/month, rather than 8-10. Program participation fluctuates throughout year, this may or may have an impact on the program, however fundraising revenue may be able to supplement if necessary.”

Remove the \$165 Membership Dues (Champaign Center Partnership) expense.

Reduce Miscellaneous (for client service outings including client meals, participation costs, etc.) from \$2,000 to \$1,800, stating “This is essential for the ‘care’, support, and belonging initiatives we promote through our program. If needed, we can reduce this amount to \$1800 (an approximate \$15/month reduction).”

The total budgeted amount would be reduced by \$10,165 - from \$113,878 to \$103,713.

GROW in Illinois – Peer Support

Without additional information, an adjustment to lower the award amount from what was requested, by \$8,000, would be based on the total of revenue-based errors. Brenda Eakins, Executive Director, shared information about other errors, which is included in the prior memorandum, including that some expenses, such as Professional Fees, had been understated.

Habitat for Humanity – Homebuyer Program

From Chad Hoffman, Chief Executive Officer (excerpt from the note which is shared in full in the previous briefing memorandum):

Lastly, I wanted to note a few things on our budget submission. We access federal funds through the HUD Comprehensive Housing Counseling Grant as the only HUD-certified counseling agency in our county. Those funds have been reduced by 90% with the latest NOFO that was issued after our budget submission to the MHB. Additionally, the NOFO for HUD-SHOP funding that allows us to pay for infrastructure on builds has not been issued for over two years. That is typically over \$120,000 per year in funding. The funding request submitted to the Mental Health Board would help us offset some of those

decreases. If our funding was cut below the requested levels that is asked about below, we would slow our building pace and serve less families in our community. A funding level at 75% would still allow us to function with little interruption to our services.

Promise Healthcare – Mobile Clinic

At the time of this writing, we have not received a response.

Rosecrance – Behavioral Health Urgent Care, Benefits Case Management, and Recovery Home

From Margaret Bianchi, Coordinator:

Thank you for the opportunity to provide additional information. We appreciate the thoughtful approach to the current funding review process.

Please see below for Rosecrance’s response regarding adjusted funding amounts for our FY27 applications.

Recovery Home

Rosecrance believes the Recovery Home program can continue to operate effectively with CCMHB funding of \$125,000, revised from the original request of \$200,000. At this reduced funding level, Rosecrance would maintain core case management and recovery support services and expects to achieve similar resident outcomes related to housing stability, engagement in treatment, and recovery support.

However, reduced funding would require selectivity in admitting residents who require supplemental assistance with program fees due to employment instability or other financial barriers, which may modestly impact overall capacity. In addition, while the original request included dedicated staffing for therapeutic recreation, these activities would continue at a lower frequency by supporting the position through other grant funds and appropriately allocating staff time across funding sources.

Benefits Case Managers

Rosecrance can reduce the requested funding amount for the proposed additional Benefits Case Manager by staffing the added position at the bachelor’s level, under the oversight of our existing fully credentialed Benefits Case Manager. This staffing model would allow the program to function effectively at a lower cost while maintaining service capacity, quality, and compliance. The revised funding request is \$172,500, reduced from the original \$181,000.

At this reduced amount, anticipated service levels, scope, and outcomes would remain consistent with the original proposal. The fully credentialed Benefits Case Manager would continue to provide supervision and oversight, while the additional staff member would support increased administrative workload associated with healthcare eligibility redeterminations and verification requirements. Rosecrance maintains the need for an additional staff member to meet increased demand, reduce barriers to care, and prevent individuals from forgoing services due to financial concerns.

Behavioral Health Urgent Care

Due to current operational requirements, Rosecrance is not able to reduce the amount requested for the Behavioral Health Urgent Care proposal while maintaining the proposed scope and impact. CCMHB funding is critical to supporting partial PM-shift staffing, which enables the Urgent Care Center to operate during hours identified by community hospital partners (OSF Sacred Heart and Carle Foundation Hospital) as having the greatest diversion potential from emergency departments.

At a reduced funding level, Rosecrance would need to decrease proposed PM hours and corresponding staffing, which would reduce diversion impact, limit access to timely behavioral health stabilization, and diminish the program's ability to respond to community need. For these reasons, Rosecrance intends to proceed with the full requested amount for this proposal.

We are committed to maintaining the core integrity and impact of these programs to the greatest extent possible, even at a lower funding level.

Please let me know if any additional detail would be helpful, we're happy to discuss further.

Thank you again for your consideration and continued partnership.

TASC, Inc. – Outreach and Recovery Support Services

At the time of this writing, we have not received a response or a copy of the agency's Program Year 2025 audit report.

Uniting Pride – Children, Youth, & Families Program

From Madison Palmer, Executive Director:

My name is Madison and I am the new Executive Director here at Uniting Pride. I have worked closely with Josh over the past two years as the previous Finance and Community Programs Manager, and have worked closely with him on our application. I don't think

we've had the chance to formally meet, but I am excited to get to work with you and the board.

Thank you for allowing us the opportunity to provide additional information about our application. We appreciate the transparency and care the board is bringing to this process. I know you have received many applications and have some tough decisions to make.

Our request of \$225,056 reflects a necessary expansion of services in response to sustained increases in community demand. Over the past several fiscal years, Uniting Pride has experienced consistent growth in participation and service utilization, alongside increasing complexity of client needs. This includes higher demand for basic needs support, individualized advocacy, and services for LGBTQIA+ individuals with intersecting marginalized identities. Over the past year, the broader political and economic climate has significantly increased demand for our services. Ongoing threats to public benefits such as SNAP, coupled with a rise in anti-LGBTQIA+ rhetoric and policy efforts, have created heightened instability for the communities we serve. As a result, we are seeing increased need for basic needs support, individualized advocacy, and safe, affirming spaces where LGBTQIA+ individuals and families can access resources, build connection, and navigate day to day struggles. This has led to growing demand not only for our direct services, but also for expanded programming and community engagement efforts to help fill critical gaps in access and support.

If funded at our current level of \$190,056, we would be able to maintain existing programming but would have to continue operating at current capacity. We would not be able to implement the proposed Outreach Coordinator position, which is critical to expanding equitable access, strengthening engagement with communities of color, and increasing the opportunity to provide the level of individualized support increasingly requested by community members. Over the past few years, Uniting Pride has made intentional progress toward diversifying our staff, Board, and the communities we serve. Currently, 50% of staff and Board members identify as BIPOC, and 100% of staff and more than half of the Board identify as LGBTQIA+. Building on this foundation, expanding our reach into historically underserved communities remains a central priority in all of our programs and operations. The proposed Outreach Coordinator will play a critical role in this effort, with a dedicated focus on intentional community outreach and engagement to ensure services are accessible, culturally responsive, and reflective of the populations we aim to serve.

At this unchanged funding level, services will remain stable but could become constrained. Unfortunately, this would mean we would be limited in our capacity to expand access, deepen engagement, and respond to the growing complexity and number of community needs. We have a small but mighty team that works incredibly hard to deliver our direct services, programs, and evolve our offerings to directly support and

benefit community members' needs. We would love to add more capacity to expand impact with the additional funding.

Additionally, our organization is currently managing a significant funding gap due to the loss of nearly \$100,000 from our previous donor platform, Flipcause, committing fraud and filing for bankruptcy. They owe over 29 million dollars to over 3200 nonprofits and have not dispersed a payment to us this fiscal year. We are expecting the amount owed to us to remain unpaid, and are joining many other nonprofits in looking into what our options are in pursuing payment. This has been a strenuous time that has forced us to tap into our reserves and has limited our ability to independently expand capacity during a period of heightened demand.

Uniting Pride is in an exciting time of growth and wants to continue to deliver high quality, community based services and will maximize impact at any funding level. However, the requested amount represents the level necessary to responsibly meet current demand, expand equitable access, and fully achieve the outcomes outlined in our proposal.

Thank you, Leon, for your support of Uniting Pride and to the entire board for the consideration and continued support of this work. Please feel free to reach out with any additional questions.

We Never Walk Alone – Trained First Responder Peer Support and Vetted MH Professional Network

From VJ Harikrishna:

Thank you for the opportunity to provide additional information and for your thoughtful consideration during this process.

Yes, the proposed program can be adapted to operate effectively at a reduced funding level while maintaining meaningful impact. We understand the current funding constraints and are committed to being flexible in how services are scaled.

We propose the following two adjusted scenarios:

Option 1: Approximately \$25,000 (Moderate Reduction)

Scope:

Full access to the WeNeverWalkAlone and WeNeverFightAlone networks prioritized for Urbana Police Department, based on demonstrated interest and submitted letter of need

Continued inclusion of METCAD 911 dispatch personnel

Limited access extended to other municipalities (Champaign, Rantoul) at a reduced scale

Training:

Reduced number of peer support training seats, with priority given to Urbana
Minimal or deferred training for other agencies, as many personnel may have prior exposure

Impact:

Maintains strong program integrity and immediate usability
Ensures high likelihood of adoption in Urbana while still introducing the program to surrounding agencies
Preserves access to confidential, culturally competent support resources for first responders and dispatch personnel

Option 2: Approximately \$20,000 (Aggressive Reduction / Pilot Model)

Scope:

Full access focused primarily on Urbana Police Department
Inclusion of METCAD 911 dispatch personnel maintained if feasible within budget
Other municipalities deferred or included at a minimal pilot level

Training:

Further reduced training allocation, focused primarily on Urbana
Training for other agencies deferred to future funding cycles

Impact:

Establishes a strong, needs-driven pilot anchored in Urbana
Enables demonstration of program effectiveness and utilization
Creates a pathway for future expansion as additional funding becomes available

In both scenarios, the program continues to provide secure, confidential, and direct access to trained peer supporters and vetted mental health professionals. While reductions would impact training capacity and geographic breadth, core access to support services remains intact, ensuring that first responders have immediate and barrier-free resources available.

We appreciate the Board's consideration and are happy to work within the available funding framework to deliver the greatest possible impact to the community.

WIN Recovery – Win Resilience Resource Center

From Bethany Little, Founder and Executive Director:

The original request of \$270,000 for mental health funding. WIN Recovery decreased the funding request to \$210,000. This adjustment does not represent a reduction in services, but rather a reallocation of costs. A portion of personnel expenses, specifically a key staff position supporting mental health services, will be covered through another funding source as well as identified additional revenue of \$23,689 to support the program increasing the program revenue. This allows us to maintain the same level of service delivery, participant support, and expected outcomes without disruption.

[In a subsequent note, Director Little pointed out that the \$23,689 would be used to cover payroll taxes and benefits, as these were not present in the original application budget.]



Briefing Memorandum – Program Year 2027 Allocation Scenarios

DATE: May 20, 2026

TO: Members, Champaign County Mental Health Board (CCMHB or MHB)

FROM: Leon Bryson and Kim Bowdry, Associate Directors, and Lynn Canfield, Executive Director

SUBJECT: Allocation of CCMHB Program Year 2027 Funding

Purpose:

For consideration by the CCMHB, this memorandum presents staff suggestions related to funding for the Program Year 2027 (July 1, 2026 through June 30, 2027.) Decision authority rests with the CCMHB and their sole discretion concerning appropriate use of available dollars based on assessment of community needs, best value, alignment with decision support criteria, pricing, affordability, and distribution across categories of need and service intensity. Action is not requested during today’s study session, but possible motions are presented for the Board to consider.

Statutory Authority:

The [Illinois Community Mental Health Act \(405 ILCS 20 / Section 0.1 et. seq.\)](https://www.ilga.gov/Legislation/ILCS/Articles?ActID=1499) (<https://www.ilga.gov/Legislation/ILCS/Articles?ActID=1499>) is the basis for CCMHB funding policies. All funds are allocated within the intent of the controlling act as codified in the laws of the State of Illinois. The allocation scenarios described in this memorandum are based on board and staff assessment of how closely applications align with statute, CCMHB funding policies, approved decision support criteria and priorities, and our current understanding of the needs of Champaign County residents. Best and Final Offers may be sought as part of the contract negotiation process. The CCMHB reserves the right to refrain from making an award when such action is deemed to be in the best interest of the County.

Background:

Input from people with Mental Illness (MI), Substance Use Disorder (SUD) or Intellectual/Developmental Disabilities (I/DD) and their supporters should influence system advocacy and planning. The CCMHB participated in collaborative community

health needs assessments, the resulting shared health plans, and priority workgroups, but they also welcome direct input from those who know best.

The CCMHB hosted a study session and survey focused on LGBTQIA+ individuals. The recording of that session can be viewed [at this link](https://www.youtube.com/@champaigncountymhbandddb) (<https://www.youtube.com/@champaigncountymhbandddb>). There was high survey participation, with results on pages 45-56 of the [study session packet linked here](https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2025/250820_Study_Session/250820_Study_Packet.pdf) (https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2025/250820_Study_Session/250820_Study_Packet.pdf).

The CCMHB and CCDDDB hosted a study session on immigrants and refugees, which can be viewed [at this link](https://www.youtube.com/@champaigncountymhbandddb) (<https://www.youtube.com/@champaigncountymhbandddb>). While survey participation was low and the concerns expressed unsurprising, we learned that the particular questions were not easy for respondents to speak to, though some appreciated being asked.

Input from people with I/DD was shared with the CCDDDB and the Champaign County Mental Health Board (CCMHB) during a September 2025 joint study session, the recording of which can be [viewed at this link, on the Boards' YouTube channel](https://www.youtube.com/watch?v=6Axo9IIFEuA) (<https://www.youtube.com/watch?v=6Axo9IIFEuA>). Highlights from that session and written input were incorporated into the Program Year 2027 funding priorities to help guide the decisions now under consideration.

Reports from agencies about the utilization and outcome results of the most recent program year may be helpful in planning for the next set of services and supports.

- Utilization and outcome results for Program Year 2025 are summarized on pages 16-43 of the MHB's 2025 Annual Report, [posted online here](https://champaigncountyil.gov/MHBDDB/reports/25Annualreport.pdf) (<https://champaigncountyil.gov/MHBDDB/reports/25Annualreport.pdf>).
- Outcome reports for Program Year 2025 are in this report posted online (https://champaigncountyil.gov/MHBDDB/PDFS/CCMHB_PY25_Performance_Outcome_Reports.pdf). In these full reports, agencies share information about program goals, successes and plans for improvement, and any challenges which impacted the data.
- The May 27, 2026 Board packet will have current information, as reported by agencies in third quarter reports. Although this is partial year data, and only relates to utilization, it may also support Board decisions about future contracts.

Collaborations and Existing Commitments:

In addition to assessed preferences and funded programs' reports, collaborations with governmental and community partners play a role in setting priorities and in understanding what might constitute best value for residents of Champaign County.

Developmental Disabilities.

Collaboration with the Champaign County Developmental Disabilities Board (CCDDDB) is described in an Intergovernmental Agreement between the Boards, requiring integrated

Intellectual/Developmental Disabilities (I/DD) planning, a specific CCMHB set-aside commitment, and shared authority over a separate special fund.

According to that agreement, the CCMHB set-aside for I/DD programs changes each year by the percentage change in property tax levy revenue. By applying the percentage increase from 2025 to 2026 to the Program Year 2026 I/DD set-aside amount, the amount available for Program Year 2027 contracts is \$964,863, to support Program Year 2027 I/DD contracts. For the new program year, the CCMHB maintains its interest in services for very young children and their families. One current two-year contract for developmental services was approved last year. Each board will consider recommendations for the remaining amount, for which two funding requests were submitted and reviewed by both Boards.

The Boards share a commitment to another I/DD-focused collaboration, which from 2015 to 2021 enabled the operation of two small group homes. After the sale of the homes, the fund was renamed as I/DD Special Initiatives Fund, and the Boards continued to serve people with I/DD and complex service needs through a two-year contract, from July 1, 2024 through June 30, 2026. Requests are no longer submitted to the Special Initiatives fund, but one CCDDDB funding request includes continuation of the contracted services.

NOTE: the Boards might consider transferring equal amounts from this fund's balance to each of their funds, to build up the CCMHB and CCDDDB fund balances or to help fund more of the Program Year 2027 requests than appear affordable, or both, though the maximum amounts are lower than \$200,000 each. Such transfers could be made in 2027, to be used for current or subsequent requests.

Other Public Systems.

Various Justice System and Behavioral Health collaborations aim to support people who have behavioral health needs and some level of involvement with the criminal justice system. Community-based programs can deflect youth and adults from deeper involvement, which promises cross-system cost-shift (every \$1 spent saves \$2-\$10 in other systems) and better quality of life for those individuals, their families, and their supporters. Programs supporting people as they move from incarceration to community life can maximize their success. Alternative crisis response approaches are being developed in this community and by the State. The Board has a longstanding commitment to efforts to reduce justice system and law enforcement involvement through community-based care, a goal shared with Champaign County Problem Solving Courts, Youth Assessment Center Advisory Committee, the Continuum of Service Providers to the Homeless, City of Urbana Alternative Response Task Force, Champaign County Community Coalition, Crisis Intervention Team Steering Committee, Community Emergency Services and Support Act (CESSA) Region 6 Advisory Committee, and others. As our partners have secured other funding for related programs, our involvement in some collaborations has changed. Remaining active and informed is appropriate to the CCMHB's mission and will help us respond to changes in other funding and to emerging best practices. CCMHB funds can be very helpful in filling gaps left by the larger systems or in testing promising practices well-suited for our County.

The Champaign County Community Coalition shares the Board’s interest in trauma-informed and culturally responsive practices. This collaboration includes leadership from local government, other funders, service provider organizations, neighborhoods, education, and the faith community. The Coalition sustains System of Care values through youth programming and efforts to mitigate the impacts of community violence. Early childhood providers are active in this network and in a Home Visiting Consortium which has the goal of serving all of the County’s children.

Multiyear Obligations.

Nineteen contracts were approved last year for Program Year 2026 and Program Year 2027, extending through June 30, 2027. These commitments total \$3,329,421. The annual amounts do not increase in the second year. Application forms are updated during May.

- CCRPC – Youth Assessment Center \$76,350
- CC Children’s Advocacy Center \$63,911
- CC Christian Health Center – Community Mental Health Program \$100,000
- CCHCC – CHW Outreach and Benefits Enrollment \$97,139
- CCHCC – Justice Involved CHW Services & Benefits \$103,284
- CSCNCC – Resource Connection \$70,667
- Crisis Nursery – Beyond Blue Champaign County \$90,000
- DSC – Family Development \$702,000 (uses \$702,000 of MHB I/DD set aside)
- ECIRMAC/The Refugee Center – Family Support & Strengthening \$75,441
- Family Service – Counseling \$143,322
- Family Service – Self-Help Center \$38,191
- Family Service – Senior Counseling & Advocacy \$214,360
- Immigrant Services of CU – Immigrant Mental Health Program \$200,256
- Promise Healthcare – Mental Health Services \$360,000
- Promise Healthcare – PHC Wellness \$125,000
- RACES – Sexual Trauma Therapy Services \$196,205
- RACES – Sexual Violence Prevention Education \$108,115
- Urbana Neighborhood Connections Center – Community Study Center \$382,180
- WIN Recovery – Community Support Re-Entry Houses \$183,000

Priorities, Overarching Considerations, and Expectations for Minimal Responsiveness:

The Program Year 2027 CCMHB funding priorities and decision support criteria were approved on November 19, 2025.

Twenty-eight funding requests were submitted for the Board’s consideration, totaling \$5,220,939. Twenty-six of them focus (directly or indirectly) on supports or services for people with mental health, substance use disorders, or both, and two include social emotional and developmental supports for young children and their families. The latter two were also reviewed by the CCDDDB, and officers of both boards discussed them with staff afterward.

Some Program Year 2027 funding applications described alignment with more than one priority category, but all had to select a primary priority. Primary choices are as follows:

- Strengthening the Behavioral Health Workforce:
1 application at \$19,656.
- Safety and Crisis Stabilization:
9 applications, totaling \$2,038,067, plus 3 multi-year contracts adding \$362,634 to this priority category.
- Healing from Violence and Trauma:
1 application at \$176,476, plus 3 multi-year contracts adding \$368,231 to this priority category.
- Access and Care:
8 applications, totaling \$1,056,442, plus 9 multi-year contracts adding \$1,348,935 to this priority category.
- Thriving Children, Youth, and Families:
9 applications, totaling \$1,667,435, plus 3 multi-year contracts adding \$547,621 to this priority category.
- Collaboration with CCDDDB - Very Young Children and Their Families:
2 applications with I/DD portions which should total \$262,863, plus one two-year contract for \$702,000. The CCMHB may allocate a total of \$964,863 for I/DD services, coordinated with CCDDDB. The other portions of these two applications, which total \$234,900, are treated as MH/SUD investments.

Funding Requests and Budget Impact:

CCMHB allocations to agencies have risen steadily from \$3,189,290 in Program Year 2012 to \$6,256,869 in Program Year 2026. Steady increases from 2012 to 2020 were possible due to property tax revenue growth and reductions in administrative costs.

For Program Year 2021, the CCMHB made an informed decision to award contracts greater than budgeted. Due to unspent funds being returned and some payments suspended, this intentional overfunding did not result in a deficit in 2020. Suspended payments were released in 2021, reducing the amount left to allocate and revealing an unsustainable award level as we headed into the next period.

For Program Year 2022, because behavioral health needs had surged and agencies hoped to meet these needs, the County provided American Rescue Plan Act funds, increasing Program Year 2022 awards by \$770,436. For Program Year 2023 and Program Year 2024, awards were based on 2022-2024 property taxes, without other substantial revenue, so that the allocation process remained competitive despite growth in tax revenue.

For 2025, projected growth was less than half the rate increase of 2024. With Program Year 2025 amounts paid half from 2024 and half from 2025, cautious awards continued. For 2026, growth was modest, near 3%. 2027 growth is expected to be even lower. With Program Year 2027 amounts paid half from 2026 and half from 2027, what appears affordable today falls very far short of total amounts requested and previously obligated.

Following submission of proposals for Program Year 2027 funding, CCMHB staff reviewed all materials, along with any previously reported data, independent audit reports, and compliance records of incumbent programs and agencies. Draft program summaries incorporated input from all staff and were shared with agencies, board members, and public, to support the Board reviews which were conducted in a public meeting and study session during April. Agency corrections of staff errors and responses to questions or concerns are included in the May study session packet and might influence the Board's consideration of final allocations.

All Program Year 2027 CCMHB requests taken together total \$5,220,939. Twenty-six proposals relate directly or indirectly to mental health (MH) or substance use disorders (SUD) and total \$4,958,076. Two proposals offer a blend of developmental and social-emotional supports to very young children and their families.

The allocation scenarios presented here should be affordable within revenue projections, but 2027 budgets will be developed later with input from County officials.

If the final awards exceed available funds, it may be necessary to balance with: delayed effective dates; prorated contract award amounts as any compliance issues are resolved; prorated contracts where staff remain to be hired; deferral for later consideration; fee for service contracts; use of fund balance; or commitment to lower total awards next year.

If the final awards are below available funds, the remaining amount will build fund balance toward its goal of six months of operating costs by May, before the first tax distributions have been deposited. The Board might use additional available funds to consider any deferred funding requests. The Board might also use additional available funds to increase a Program Year 2027 contract developed through the current process.

A total Program Year 2027 amount of \$6,574,476 could add MH/SUD contracts totaling \$2,982,192. This is \$516,389 more than last year. Most funding requests address the growing needs of our community and align with Board priorities.

In the event of increased Program Year 2027 revenues, the Board might consider additional funding for contracts. Higher Program Year 2027 revenue could result from an increase in the anticipated property tax revenue for 2026 or 2027, reduction of other Program Year 2027 contracts, or unexpected other revenues. Working against these possibilities is the risk of additional tax liabilities lowering the fund's available amount. This leads us to favor a more cautious scenario which relies on other funding partners to lower the MHB's obligations, although this seems less likely than in recent years.

Contract Negotiations and Special Notifications

Some recommendations are contingent on completion of contract negotiations, application revisions, resolution of compliance issues, and hiring of program staff. Awards may be adjusted by the cost of a staff vacancy and amended when that vacancy is filled. Award recipients may be required to revise program or financial forms to align with CCMHB planning, budget, and policy specifications. They may be asked for more information prior to contract execution, to reach terms agreeable to both parties. If

requirements are not met prior to completion of the contract, a later contract start date will be established and the award reduced commensurate with the shorter term. Failure to submit required information shall result in cancellation of the contract award.

- SUGGESTED motion: to authorize the Executive Director to conduct contract negotiations as specified in this memorandum.

Recommendations are based on revenue estimates not finalized until the Champaign County Board approves appropriations in November or December of 2026. For this reason, all Program Year 2027 contract maximums are subject to reductions to compensate for any CCMHB revenue shortfall. These reductions will be documented by contract amendment at the discretion of the CCMHB Executive Director and Board President or designee, with every effort made to maintain the viability and integrity of contracts. All Program Year 2027 contracts will include the following provision:

Obligations of the Board will cease immediately without penalty or further payment being required if, in any fiscal year, the tax that is levied, collected, and paid into the "Community Mental Health Fund" is judged by the CCMHB Executive Director not to be sufficient for payment as delineated in the terms and conditions under this Contract.

- SUGGESTED motion: to authorize the Executive Director to implement contract maximum reductions as described in this memorandum.

A standard provision has been included in recent years to clarify that specific terms of an agency's contract may supersede provisions of the funding guidelines, if the exception is in the best interest of the CCMHB and Champaign County. This remains relevant:

The CCMHB Requirements and Guidelines for Allocation of Funds are incorporated into this contract by reference, except this contract will control should there be an inconsistent/contrary provision in the aforesaid Requirements and Guidelines. If the contract and funding guidelines are not in agreement, the contract shall prevail. For example, if the Provider will incur higher cost for an audit, review, or compilation than allowed per the Funding Requirements and Guidelines, the greater amount may be agreed to through the original budget submitted with an application or by a subsequent formal written request.

- SUGGESTED motion: to include in all contracts a provision for specific exceptions to Funding Requirements and Guidelines, as described in this memorandum.

A new standard provision was introduced in Program Year 2026, to help CCMHB members and staff more closely track progress on annual independent financial audits, reviews, or compilations. After receiving a bit of input from smaller organizations, related to what they can reasonably expect from their contracted CPA firm, and finding a great deal of context within the current contract template, a simple addition is proposed:

Allocation of Program Year 2027 Funding – page 7

The organization will share documentation of the date their CPA firm began its work on the audit, review, or compilation.

- SUGGESTED motion: to include in all contracts the requirement to share documentation of the onset of work on the audit, review, or compilation, as described in this memorandum.

Allocation Suggestions

To support Board consideration, allocation suggestions are organized in roughly the order in which they were reviewed. Affordability is the key factor, especially as we consider sustainable levels of funding. Where other items are to be addressed, pre-contract conditions or special provisions are suggested. Contract awards could be for two-year terms, a strategy which reduces some administrative effort and increases consistency for those served. Program-specific notes are included for reference. If a contract is awarded, the prerequisites should be completed by June 17 to avoid delayed payments or reduced maximums. Negotiations may be conducted through email or meetings with staff. In the event of a failed contract negotiation, the Board may be asked to take subsequent action.

In addition to the pre-contract actions suggested below, any final award which is for a different amount than that requested will trigger the need for revised budget plan forms and, in some cases, adjustment to the Scope of Services. Special provisions suggested below are additional contract requirements which apply to the program but not all other programs. To complete the contract development, organizations share with the CCMHB Operations and Compliance Coordinator their annual certificates of insurance, any relevant subcontracts, and letters of engagement with CPA firms, and CCMHB staff will verify each agency has not been debarred or otherwise excluded from federal eligibility.

Due to the very large gap between what has been requested and what the Board will be able to afford, the following suggestions do not use fund balance or contribute to it. Strongest consideration is given to the quality of original application submissions, to preserving existing service capacity, and to striking a balance across the compelling needs of County residents. Some applicant organizations may be more ready to meet all contract expectations, and some may have access to other sources of funding, whether through reserves, an affiliate foundation, or federal and state programs. We have tried to take these issues into consideration, along with a great deal of follow up information provided during the short turnaround time between Board discussions. The result includes rejection of some promising solutions. While few are likely to celebrate the final allocation decisions, we can and should celebrate that there is such strong interest in improving the well-being of our neighbors.

Brightpoint – Healing Beyond Violence – NEW – requested \$217,106

- Notes: Thriving Children, Youth, and Families priority; a new application from an agency not previously funded by the MHB; focus on children and families impacted by violence; care should be taken to avoid the risk of Medicaid supplementation, which applies to local funds as well as federal.

- Prior to contract: revise financial forms for clarification; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027; seek and report on other sources of revenue; avoid Medicaid supplementation.
- SUGGESTED motion: to deny CCMHB funding of \$217,106 for Brightpoint – Healing Beyond Violence, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

CCRPC – Community Services – Homeless Services System Coordination – requested \$189,007

- Notes: Safety and Crisis Stabilization priority; proposal to expand a longstanding program, to meet growing needs (and unfunded mandates) as the ‘hub’ for homeless services and planning.
- Prior to contract: resolve financial form discrepancies; if funded at a lower level than request, revise any impacted application forms; share updated indirect cost plan letter and approval.
- Special contract provisions: collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to approve CCMHB funding of \$189,007 per year for a two-year term, for CCRPC – Community Services – Homeless Services System Coordination, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

CU at Home – Life Skills Case Management – NEW – requested \$305,000

- Notes: Safety and Crisis Stabilization priority; a new program proposal from an agency funded by the MHB for shelter case management; focus on people with housing risk; staff and peers with lived expertise inform the program.
- Prior to contract: add priority access for people with MI, SUD, or I/DD; revise financial forms; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: mid-year progress report to the Board; provide data to HMIS, IL-503 Continuum of Care, and Coordinated Entry System; collaborate with providers of similar services and CIT Steering Committee and Specialty Courts; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to deny CCMHB funding of \$305,000 for CU at Home – Life Skills Case Management, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

CU at Home – Shelter Case Management – requested \$295,000

- Notes: Safety and Crisis Stabilization priority; to continue a program the MHB currently funds; focus on people with housing risk and MI or SUD.
- Prior to contract: revise financial forms; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: provide data to HMIS, IL-503 Continuum of Care, and Coordinated Entry System; collaborate with providers of similar services and CIT Steering Committee and Specialty Courts; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to approve CCMHB funding of \$295,000 per year for a two-year term, for CU at Home – Shelter Case Management, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

CU Early – CU Early – requested \$86,701

- Notes: Thriving Children, Youth, and Families and Collaboration with CCDDDB; substantial long-term impacts from preventive Home Visiting and early identification and treatment of delays or social emotional risks; Spanish-speaking staff connect to families who might otherwise not access resources; fills unmet needs.
- Prior to contract: recategorize FICA and Medicare costs to Payroll Taxes line, correct a typo in Budget Narrative, resolve discrepancies between Budget Narrative and Expense forms.
- Special provisions: collaborate with providers of similar services; inform eligible families of PUNS and Independent Service Coordination; and if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- The CCDDDB reviewed and recommended that the CCMHB use \$17,500 of I/DD set-aside funds per year for a two-year term for CU Early – CU Early.
- SUGGESTED motion: to approve CCMHB funding of \$86,701 per year for a two-year term, for CU Early – CU Early, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Champaign County Head Start – Early Childhood MH Services – requested \$411,062

- Notes: Thriving Children, Youth, and Families and Collaboration with CCDDDB; to continue a program currently funded by the MHB; far-reaching impact of developmental and mental health supports; serves children enrolled in HS/EHS and for whom a need has been identified; worked closely with the CLC Coordinator to strengthen services and relationships.

- Prior to contract: add specific targets to each outcome; if a lower amount is awarded, revisions will be needed in application forms.
- Special provisions: collaborate with providers of similar services; inform eligible families of PUNS and Independent Service Coordination; online service claims reporting; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- The CCDDDB reviewed and recommended that the CCMHB use \$245,363 of I/DD set-aside funds per year for a two-year term for Champaign County Head Start – Early Childhood MH Services.
- SUGGESTED motion: to approve CCMHB funding of \$411,062 per year for a two-year term, for Champaign County Head Start – Early Childhood MH Services, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

CC Healthcare Consumers – Disability Application Services – requested \$121,000

- Notes: Access and Care priority; to continue a program currently funded by the MHB; focus on disability benefits acquisition which is becoming more difficult to do alone.
- Prior to contract: update to TPC definition to PY27; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: participate with Coordinated Entry System when appropriate; collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to approve CCMHB funding of \$121,000 per year for a two-year term, for Champaign County Healthcare Consumers – Disability Application Services, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

City of Champaign Township Strides Shelter – Behavior Health Program – NEW – requested \$150,000

- Notes: Access and Care priority; a new application from a local governmental unit which has not received MHB funding; to offer intake and SUD support to shelter guests, a high need population.
- Prior to contract: complete an agency CLC Plan; revise financial forms for clarification; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: mid-year progress report to the Board; provide data to HMIS, IL-503 Continuum of Care, and Coordinated Entry System; collaborate with providers of similar services; if a two-year term, excess revenue cannot be

spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027; seek and report on other sources of funding for the program.

- SUGGESTED motion: to deny CCMHB funding of \$150,000 for City of Champaign Township Strides Shelter – Behavior Health Program, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Courage Connection – Courage Connection – requested \$176,476

- Notes: Healing from Violence and Trauma priority; to continue a program the MHB currently funds; focus on people fleeing domestic violence; people with lived experience have input at the agency board level.
- Prior to contract: update personnel form; revise outdated references in application forms; revise financial forms for clarification; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: use a data tracking system similar to but separate from Coordinated Entry; collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to approve CCMHB funding of \$176,476 per year for a two-year term, for Courage Connection – Courage Connection, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Cunningham Children’s Home – ECHO Housing and Employment - requested \$264,351

- Notes: Thriving Children, Youth, and Families priority; to continue a currently funded program; focus on people who have housing instability.
- Prior to contract: update the CLC Plan; recategorize an expense item from consumables to equipment; revise financial forms for clarification and alignment across programs; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: provide data to HMIS, IL-503 Continuum of Care, and Coordinated Entry System; collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to approve CCMHB funding of \$264,351 per year for a two-year term, for Cunningham Children’s Home – ECHO Housing and Employment, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Cunningham Children’s Home –Families Stronger Together – requested \$298,532

- Notes: Thriving Children, Youth, and Families priority; to continue a program the MHB funds; uses a trauma-informed treatment framework selected by local stakeholders to focus on youth who have justice involvement or similar.
- Prior to contract: update CLC Plan; add targets to outcomes; recategorize expense item from consumable to equipment; revise financial forms for clarification and alignment across programs; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027; seek and report on other funding for the program.
- SUGGESTED motion: to approve CCMHB funding of \$298,532 per year for a two-year term, for Cunningham Children’s Home – Families Stronger Together, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Don Moyer Boys and Girls Club – CU Change – requested \$94,135

- Notes: Thriving Children, Youth, and Families priority; to continue a program the MHB currently funds; offers intensive, personalized support for young people who have justice system involvement or related; some supports for their families.
- Prior to contract: resolve the Service Contract target discrepancy; revise financial forms for clarification; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027; seek and report on other funding for the program.
- SUGGESTED motion: to approve CCMHB funding of \$94,135 per year for a two-year term, for Don Moyer Boys and Girls Club – CU Change, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Don Moyer Boys and Girls Club – Community Coalition Summer Initiatives – requested \$100,000

- Notes: Thriving Children, Youth, and Families priority; to continue a funded program; short-term supportive activities, events, and program options many children would not access otherwise; subcontracts with educators and agencies.
- Prior to contract: if funded at a lower level than requested, revise any impacted forms.
- Special contract provisions: provide all subcontracts to MHB staff; use the year-end outcomes report to share program information (possibly a later deadline);

- report on initiatives to the Coalition Executive Team; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to approve CCMHB funding of \$100,000 per year for a two-year term, for Don Moyer Boys and Girls Club – Community Coalition Summer Initiatives, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Family First Advocacy – Empowering Bridge Program – NEW – requested \$233,355

- Notes: Thriving Children, Youth, and Families priority; a new application from a family-run organization; supports families to advocate for their children; lived experience is central to the development of the program and individual plans.
- Prior to contract: recategorize Cost of Production expense to General Operating; revise program and financial forms for clarification; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: mid-year progress report to the Board; consult with CLC Coordinator for technical assistance and possible training; collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027; seek and report on other sources of revenue for the program, especially from the 23 school districts being served.
- SUGGESTED motion: to deny CCMHB funding of \$233,355 for Family First Advocacy, NFP – Empowering Bridge Program, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

FirstFollowers – FirstSteps Community Reentry House – requested \$69,500

- Notes: Safety and Crisis Stabilization priority; to continue a current program; focus on housing and related support needs of people in reentry; people with lived experience inform every level of the organization.
- Prior to contract: update the CLC Plan; add specific targets for outcomes and indicate which tools measure each; revise financial forms for clarification and alignment across programs; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: develop individualized support plans for residents and directed by them; use a data tracking system similar to Coordinated Entry System, and work with CES and HMIS when appropriate (after initial placement); collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to approve CCMHB funding of \$69,500 per year for a two-year term, for FirstFollowers – FirstSteps Community Reentry House, subject

to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

FirstFollowers – Peer Mentoring for Reentry – requested \$120,000

- Notes: Safety and Crisis Stabilization priority; to continue a current program, with focus on a unique population; support include drop in center, workforce course, gardening initiative; people with lived experience inform every level of the organization.
- Prior to contract: update the CLC Plan; revise financial forms for clarification and alignment across programs; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: report only on TPCs in residency and demographic reports; use a data tracking system similar to Coordinated Entry System, and work with CES and HMIS when appropriate (after initial placement); collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to approve CCMHB funding of \$90,000 per year for a two-year term, for FirstFollowers – Peer Mentoring for Reentry, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

GCAP – Advocacy, Care, and Education Services – requested \$113,878

- Notes: Access and Care priority; to continue a current program and serve higher numbers of housing and short-term clients (unique population); harm-reduction approach and various supports, for which federal and state funding may be cut.
- Prior to contract: develop specific targets for outcomes; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: use a data tracking system similar to Coordinated Entry; identify a Board or staff member who may assist operations and reporting in a crisis; collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to approve CCMHB funding of \$113,878 per year for a two-year term, for Greater Community AIDS Project of East Central Illinois – Advocacy, Care, and Education Services, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

GROW in Illinois – Peer Support – requested \$179,805

- Notes: Access and Care priority; to continue a current program; 12-step peer support approach to mental health recovery, with experienced members leading

many groups, in the community as well as the jail; part of a larger organization with a long history, continues to seek state funding.

- Prior to contract: resolve budget questions (related to other funding); identify specific targets for the consumer outcomes; revise financial forms for clarification; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to approve CCMHB funding of \$171,805 per year for a two-year term, for GROW in Illinois – Peer Support, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Habitat for Humanity – Homebuyer Program – NEW – requested \$229,560

- Notes: Safety and Crisis Stabilization priority; proposal to support a new program, through an agency not previously funded by the MHB; to support 81 people in the homebuyer program and 128 others in the education program; consideration for people with medical or disability accessibility needs; focus on people with lower income and lower loan approval rates.
- Prior to contract: prioritize participants with diagnosed MI, SUD, or I/DD; add a consumer outcome related to housing or mortgage sustainability over time; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: mid-year progress report to the Board; collaborate with providers of similar services, especially the IL-503 Continuum of Care; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027; seek and report on other sources of revenue for the program.
- SUGGESTED motion: to deny CCMHB funding of \$229,560 for Habitat for Humanity – Homebuyer Program, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Promise Healthcare – Mobile Clinic – NEW – requested \$200,000

- Notes: Access and Care priority; proposes a new program component which could be added to another of the agency’s MHB funded programs; currently piloting this service, to which MHB funds would add another day of service, virtual psychiatric nurse practitioner, and enrollment specialist.
- Prior to contract: complete the Budget Narrative explanations; revise financial forms for clarification and alignment with current two year contract budgets; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: mid-year progress report to the Board; collaborate with providers of similar services; due to use of a January 1 to December 31 fiscal year, prepare additional schedules for CCMHB staff review; if a two-year term,

excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027; seek and report on other sources of revenue for this program.

- SUGGESTED motion: to deny CCMHB funding of \$200,000 for Promise Healthcare – Mobile Clinic, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Rosecrance Central Illinois – Behavioral Health Urgent Care – NEW – requested \$360,000

- Notes: Safety and Crisis Stabilization priority; a new request from an agency which has operated several MHB funded programs and made many changes in the last few years, partly due to other funding opportunities and, in this case, to input through their community needs assessment process; to offer 1100 people crisis intervention, clinical assessment, and stabilization plans (to other supports).
- Prior to contract: if funded at a lower level than requested, revise any impacted forms; share the updated indirect cost allocation plan and approval.
- Special contract provisions: mid-year report to the Board; collaborate with providers of similar services; due to multiple vacancies to be filled, a lower initial contract award may be amended by pro-rated increases as each vacancy is filled; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027; seek and report on other sources of revenue for the program.
- SUGGESTED motion: to deny CCMHB funding of \$360,000 for Rosecrance Central Illinois – Behavioral Health Urgent Care, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Rosecrance Central Illinois – Benefits Case Management – requested \$181,000

- Notes: Access and Care priority; to expand a longstanding MHB funded program; helps people secure public benefits, to meet increased demand and improves access for rural residents; experienced staff with specialized credentials.
- Prior to contract: add details to the Budget Narrative; revise financial forms for clarification; if funded at a lower level than request, revise any impacted application forms; share the updated indirect cost allocation plan and approval.
- Special contract provisions: collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027; seek and report on other sources of revenue for the program.
- SUGGESTED motion: to approve CCMHB funding of \$181,000 per year for a two-year term, for Rosecrance Central Illinois – Benefits Case Management, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Rosecrance Central Illinois – Recovery Home – requested \$200,000

- Notes: Safety and Crisis Stabilization priority; to continue a program the MHB currently funds; the only accredited Recovery Home in the county, a ‘step down’ from inpatient substance use treatment; includes intensive case management, peer support, and 12-step approach.
- Prior to contract: resolve total agency revenue form error and its impact on other financial forms; if funded at a lower level than request, revise any impacted application forms; share the indirect cost allocation plan and approval.
- Special contract provisions: collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027 ; seek and report on other sources of revenue for the program.
- SUGGESTED motion: to approve CCMHB funding of \$125,000 per year for a two-year term, for Rosecrance Central Illinois – Recovery Home, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Uniting Pride of Champaign County – Children, Youth, & Families Program – requested \$225,056

- Notes: Thriving Children, Youth, and Families priority; to continue a current program with focus on a unique population; increases services to meet growing demand; offers support groups, specific assistance, educational programs, food pantry, gender affirming clothing, and virtual services; people with relevant lived experience shape the program.
- Prior to contract: resolve errors/discrepancies in the personnel form; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: allow the higher expense for independent CPA services; collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to approve CCMHB funding of \$225,056 per year for a two-year term, for Uniting Pride of Champaign County – Children, Youth, & Families Program, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

We Never Walk Alone – Trained First Responder Peer Support – NEW – requested \$20,330

- Notes: Access and Care priority; to fund a new program from an organization the MHB has not previously worked with; offers peer support to first responders, including dispatchers, retired first responders, and family members.
- Prior to contract: create an agency CLC Plan; due to for profit status, establish a local advisory committee representative of Champaign County; revise financial

Allocation of Program Year 2027 Funding – page 18

- forms to include total agency information and align with the other program; if funded at a lower amount than requested, revise all impacted application forms.
- Special provisions: mid-year progress report to the Board; collaboration with the relevant stakeholders; seek and report on other sources of revenue for the program; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to deny CCMHB funding of \$20,330 for We Never Walk Alone – Trained First Responder Peer Support, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

We Never Walk Alone – Vetted MH Professional Network – NEW – requested \$19,656

- Notes: Strengthening the Behavioral Health Workforce priority; another NEW request from this organization; offers access to licensed mental health professionals who understand the particular stresses and needs of first responders, including those who’ve retired, and their families.
- Prior to contract: create an agency CLC Plan; establish a local advisory committee representative of Champaign County; revise financial forms to include total agency information and align with the other program; if funded at a lower amount than requested, revise all impacted application forms.
- Special provisions: mid-year progress report to the Board; collaboration with the relevant stakeholders; seek and report on other sources of revenue for the program; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to deny CCMHB funding of \$19,656 for We Never Walk Alone – Vetted Mental Health Professional Network, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

WIN Recovery – Win Resilience Resource Center – NEW – requested \$270,000

- Notes: Safety and Crisis Stabilization priority; a new request, improved over the version submitted last year; safe space for members of the target population who are not using the agency’s reentry housing; includes housing navigation, case management, substance use recovery groups, family therapy; peer-led services; people with lived experience shape the program.
- Prior to contract: develop specific targets for outcomes; revise financial forms for clarification and to resolve discrepancies; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: mid-year progress report to the Board; collaborate with providers of similar services, the IL-503 Continuum of Care, and Specialty Courts; if a two-year term, excess revenue cannot be spent in 2nd year, and an

updated Agency Plan for Program Year 2028 submitted prior to June 2027; seek and report on other sources of revenue for the program.

- SUGGESTED motion: to approve CCMHB funding of \$210,000 per year for a two-year term, for WIN Recovery – Win Resilience Resource Center, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

If the Board approves all suggestions above, \$22,552 more could build fund balance toward the goal or be obligated without exceeding the projected affordable amount.

Program Year 2027 Requests Submitted and Reviewed Later in the Process

At the time of this writing, the Board has not reviewed two requests, as the Program Year 2025 audit and review were not presented with submitted applications. With a recently completed financial review, the request from GCAP might be reviewed during the May 20 study session. For this reason, it is included with the allocation suggestions above. In the event the Board chooses to review the TASC, Inc. request for Program Year 2027 funding, staff observations are summarized here. If the audit has not been received by May 27, 2026, the Board might deny funding on the basis of incomplete application.

TASC, Inc. – Outreach and Recovery Support Services – NEW – requested \$90,429

- Notes: Access and Care priority; new program through an agency the MHB has not contracted with in the past; services through Peer Support Specialist; focus on people with SUD, overdose risk, co-occurring MI, or housing instability; specialized case management, harm reduction and trauma-informed care.
- Prior to contract: complete and share Program Year 2025 audit; revise financial forms for clarification, including total agency budget, and resolve discrepancies; if funded at a lower level than request, revise any impacted application forms.
- Special contract provisions: mid-year progress report to the Board; consult with the CLC Coordinator; when serving unhoused clients, participate with IL-503 Continuum of Care and provide data to HMIS and CES; collaborate with providers of similar services; if a two-year term, excess revenue cannot be spent in 2nd year, and an updated Agency Plan for Program Year 2028 submitted prior to June 2027.
- SUGGESTED motion: to deny CCMHB funding of \$90,429 for TASC, Inc. – Outreach and Recovery Support Services, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement.

Requests for CCMHB Funding for PY2027 (July 1, 2026 - June 30, 2027)

Agency Name	Program Name	Requested	for I/DD	for MI/SUD
Brightpoint	Healing Beyond Violence NEW	\$ 217,106	n/a	\$ -
CCRPC - Community Services	Homeless Services System Coordination	\$ 189,007	'n/a	\$ 189,007
CU at Home	Life Skills CM Program NEW	\$ 305,000	'n/a	\$ -
CU at Home	Shelter Case Management Program	\$ 295,000	'n/a	\$ 295,000
CU Early	CU Early (DD portion)	\$ 86,701	\$ 17,500	\$ 69,201
CC Head Start/Early Head Start	Early Childhood MH Svcs (DD portion)	\$ 411,062	\$ 245,363	\$ 165,699
CC Health Care Consumers	Disability Services	\$ 121,000	'n/a	\$ 121,000
City of Champaign Township Strides	Strides Shelter Behavior Health Program NEW	\$ 150,000	'n/a	\$ -
Courage Connection	Courage Connection	\$ 176,476	'n/a	\$ 176,476
Cunningham Childrens Home	ECHO Housing and Employment Support	\$ 264,351	'n/a	\$ 264,351
Cunningham Childrens Home	Families Stronger Together	\$ 298,532	'n/a	\$ 298,532
Don Moyer Boys and Girls Club	C-U CHANGE	\$ 94,135	'n/a	\$ 94,135
Don Moyer Boys and Girls Club	Community Coalition Summer Initiatives	\$ 100,000	'n/a	\$ 100,000
Family First Advocacy	Empowering Bridge Program - NEW	\$ 233,355	'n/a	\$ -
FirstFollowers	FirstSteps Community Reentry House	\$ 69,500	'n/a	\$ 69,500
FirstFollowers	Peer Mentoring for Reentry	\$ 120,000	'n/a	\$ 90,000
GCAP	Advocacy, Care, and Education Services	\$ 113,878	'n/a	\$ 113,878
GROW in Illinois	Peer-Support	\$ 179,805	'n/a	\$ 171,805
Habitat for Humanity of CC	Homebuyer Program - NEW	\$ 229,560	'n/a	\$ -
Promise Healthcare	Mobile NEW	\$ 200,000	'n/a	\$ -
Rosecrance Central Illinois	Behavioral Health Urgent Care NEW	\$ 360,000	'n/a	\$ -
Rosecrance Central Illinois	Benefits Case Management	\$ 181,000	'n/a	\$ 181,000
Rosecrance Central Illinois	Recovery Home	\$ 200,000	'n/a	\$ 125,000
TASC, Inc.	Outreach and Recovery Support Svcs NEW	\$ 90,429	'n/a	\$ -
Uniting Pride of CC	Children, Youth & Families Program	\$ 225,056	'n/a	\$ 225,056
We Never Walk Alone	Trained First Responder Peer Supportt NEW	\$ 20,330	'n/a	\$ -
We Never Walk Alone	Vetted Mental Health Profession Network	\$ 19,656	n/a	\$ -
WIN Recovery	Win Resilience Resource Ctr NEW	\$ 270,000	n/a	\$ 210,000
n/a	Totals	\$ 5,220,939	\$ 262,863	\$ 2,959,640
n/a	Available to Allocate	\$ 3,245,055	\$ 262,863	\$ 2,982,192
n/a	Differences, ideally = 0	\$ (1,975,884)	\$ -	\$ 22,552