



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

*PLEASE REMEMBER this meeting is being audio recorded.
Speak clearly into the microphone during the meeting.*

Champaign County Developmental Disabilities Board (CCDDB) AGENDA

Wednesday, July 12, 2017

Brookens Administrative Building, Lyle Shields Room
1776 E. Washington St., Urbana, IL 61802

8AM

(Members of the Champaign County Mental Health Board are invited to sit in as special guests)

1. Call to Order
2. Roll Call – Stephanie Howard-Gallo
3. Approval of Agenda*
4. Citizen Input/Public Participation

At the chairperson's discretion, public participation may be limited to five minutes per person.

5. CCMHB Input
6. Approval of CCDDB Board Meeting Minutes* **(pages 2 - 15)**
 - A. *Minutes from 5/17/17 and 6/7/17 meetings are included. Board action is requested.*
7. President's Comments – Ms. Deb Ruesch
8. Executive Director's Report – Lynn Canfield
9. Consultant/Staff Reports – *Barbara Bressner, Kim Bowdry, Stephanie Howard-Gallo, Shandra Summerville* **(pages 16-40)**
10. Agency Information

At the chairperson's discretion, agency information may be limited to five minutes per agency.
11. Financial Report
 - A. **Approval of Claims* (pages 41-42)**

Included in the packet. Board action is requested.
12. New Business

- A. Election of Officers*
- B. Integration Transition Successes
Funded program providers and self-advocates are invited to give oral reports on individuals' successful transitions to community settings.
- C. CCDDDB FY2018 Budget (**pages 43-49**)*
A Decision Memorandum on the CCDDDB Fiscal Year 2018 Budget is included in the packet. Board action is requested.

13. Old Business

- A. CCDDDB and CCMHB ID/DD Program Investments for FY2018 (**pages 50-53**)
Included for information only.
- B. Meeting Schedules (**pages 54-57**)
Copies of CCDDDB and CCMHB meeting schedules and CCDDDB allocation process timeline are included in the packet for information.
- C. Ligas Acronyms (**pages 58-59**)
A list of useful acronyms, compiled and published by the Ligas Family Advocacy Program, is included for information.

14. Board Announcements

15. Adjournment

**Board action requested*

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

Minutes –May 17, 2017

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

8:00 a.m.

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MEMBERS PRESENT: Joyce Dill, Cheryl Hanley-Maxwell, Deb Ruesch, Mike Smith

MEMBERS EXCUSED: David Happ

STAFF PRESENT: Kim Bowdry, Lynn Canfield, Mark Driscoll, Shandra Summerville, Stephanie Howard-Gallo

OTHERS PRESENT: Patrick Leary, Individual Advocacy Group (IAG); Annette Becherer, Danielle Matthews, Jennifer Carlson, Vicki Tolf, Laura Bennett, Felicia Gooler, Patty Walters, Dale Morrissey, Developmental Services Center (DSC); Becca Obuchowski, Community Choices; Melissa McDaniel, Tracy Waverling, CTF Illinois; Kathy Kessler, Rosecrance; Vicki Niswander, IAMC; Linda Tortorelli, TAP; Lisa Benson, Mika Nelson-Klaudt, Champaign County Regional Planning Commission (CCRPC); Amy Slagell, Diane Gordon, CU Able/IAMC; Dylan Boot, Persons Assuming Control of their Environment (PACE); Diane Gordon, Brandi Granse, Elise Belknap, Head Start; Jenny Niebrigge, Pat Gerth, United Cerebral Palsy (UCP); Kyla Chantos, CTF Illinois

CALL TO ORDER:

Ms. Deb Ruesch called the meeting to order at 8:02a.m.

ROLL CALL:

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Roll call was taken and a quorum was present.

ADDITIONS TO AGENDA:

None.

CITIZEN INPUT:

Mr. Dale Morrissey provided an update on the DSP wage bill.

CCMHB INPUT:

Ms. Lynn Canfield provided an update on the CCMHB's funding process.

APPROVAL OF CCDDDB MINUTES:

Minutes from the meeting on April 19, 2017 meeting were included in the Board packet.

MOTION: Ms. Dill moved to approve the minutes from the April 19, 2017 CCDDDB meeting as presented in the Board packet. Mr. Smith seconded the motion. A voice vote was taken and the motion passed.

PRESIDENT'S COMMENTS:

None.

EXECUTIVE DIRECTOR'S REPORT:

Ms. Canfield spoke regarding the DSP wage bill. She also welcomed Ms. Bowdry as the new Associate Director of Developmental Disabilities to the Boards.

STAFF REPORTS:

Staff reports were deferred this month.

CONSULTANT REPORT:

Deferred.

AGENCY INFORMATION:

Ms. Vicki Niswander from IAMC provided clarification on IEP attendance. She also expressed to the Board the impact a funding cut would have on IAMC.

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Ms. Becca Obuchowski from Community Choices provided clarification on IEP attendance. Ms. Patty Walters from Developmental Services Center (DSC) spoke regarding DSC's IEP involvement.

Ms. Lisa Benson from Regional Planning Commission spoke regarding IEP involvement with all of the area agencies.

FINANCIAL REPORT:

The financial claims report was included in the packet.

MOTION: Dr. Hanley-Maxwell moved to accept the claims report as presented. Ms. Dill seconded the motion. A voice vote was taken and the motion passed unanimously.

NEW BUSINESS:

Staff Recommendations for FY18 Program Funding:

A Decision Memorandum was included in the Board packet. The memorandum depicted staff recommendations for FY2018 (July 1, 2017 through June 30, 2018) funding allocations for consideration by the Champaign County Developmental Disabilities Board (CCDDB.) These recommendations were based on a thorough evaluation of applications using decision support criteria approved by the CCDDB in December 2016. The final funding decisions rest solely with the CCDDB and their judgment concerning the most appropriate and efficacious use of available dollars based on assessment of community needs and decision-support match up.

The staff recommendations are based on decision support criteria and other factors outlined in this memorandum. For additional information, please refer to the application Program Summaries presented at the April 2017 CCDDB Meeting.

The Champaign County Mental Health Board (CCMHB) will allocate \$657,294 (\$50,000 of which is already dedicated to CILA home project) for ID/DD services as delineated in the Intergovernmental Agreement. CCMHB decisions have been coordinated with the CCDDB decisions and shall be finalized at a May 2017 CCMHB meeting.

United Cerebral Palsy Land of Lincoln – Vocational Services

Request is for \$34,590. Aligns with priority for Employment Services and Supports. A special provision will be added to the contract to ensure collaboration with providers of similar services. Program reports on hours worked by participants, a measure of value. **Ms. Ruesch moved to approve funding of \$34,590 for United Cerebral Palsy Land of Lincoln – Vocational Services as presented in the memorandum. Mr. Smith seconded. All members voted aye and the motion passed.**

- Approved
- Denied
- Modified
- Additional Information Needed



Rural Champaign County Special Education Cooperative – disABILITY Resource Expo
NEW Funding Request is for \$66,781. Aligns with priority for Linkage & Advocacy for People with ID/DD, features a large-scale annual anti-stigma and networking event, with online and printed resource guide available year-round and several stakeholder meetings for coordination and community awareness. For ten years, this event has been funded through the CCMHB/CCDDB administrative budget and will continue there as we resolve the challenges related to transitioning to an agency contract. **Ms. Ruesch moved to DENY funding of \$66,781 for Rural Champaign County Special Education Cooperative – disABILITY Resource Expo as presented in the memorandum. Dr. Hanley-Maxwell seconded the motion. All members voted aye and the motion passed.** Ms. Hanley-Maxwell requested a thorough report on financial activity and school involvement in the future.

- Approved
- Denied
- Modified
- Additional Information Needed

Rosecrance Champaign/Urbana – Coordination of Services: DD/MI
Request is for \$34,126. Aligns with priority for Linkage & Advocacy for People with ID/DD, improves access to behavioral health services and benefits, and collaborates with other providers toward a system of care. A special provision will be included to ensure collaboration with CCRPC and other CCDDB/CCMHB funded programs to improve coordination and minimize duplication of effort. CCDDB/CCMHB funds should not be used to pay for staff time at IEP and MDC meetings. **Ms. Ruesch moved to approve funding of \$34,126 for Rosecrance Champaign/Urbana – Coordination of Services: DD/MI as presented in the memorandum. Dr. Hanley-Maxwell seconded. All members voted aye and the motion passed.**

- Approved
- Denied
- Modified
- Additional Information Needed

Persons Assuming Control of Their Environment (PACE) – Opportunities for Independence
Request is for \$40,546. Aligns with priority for Linkage & Advocacy for People with ID/DD and proposes an innovation to support individuals transitioning from school. A special provision will be included to ensure collaboration with CCRPC and other CCDDB/CCMHB funded programs to improve coordination and minimize duplication of effort, including for transition. CCDDB/CCMHB funds should not be used to pay for staff time at IEP and MDC meetings. **Ms. Dill moved to approve funding of \$40,546 for Persons Assuming Control of Their Environment (PACE) – Opportunities for Independence as presented in the memorandum. Mr. Smith seconded. The motion passed unanimously.**

- Approved
- Denied
- Modified
- Additional Information Needed



Illinois Association of Microboards and Cooperatives – IAMC Building Inclusive Communities Request is for \$65,700. Aligns with priority for Non-Work Community Life and Flexible Supports. A special provision will be included to ensure collaboration with CCRPC and other CCDDDB/CCMHB funded programs to improve coordination and minimize duplication of effort. CCDDDB/CCMHB funds should not be used to pay for staff time at IEP and MDC meetings. **Mr. Smith moved to approve partial funding of \$52,750 as the second year of a Special Initiative for Illinois Association of Microboards and Cooperatives – IAMC Building Inclusive Communities as presented in the memorandum. Ms. Ruesch seconded the motion.** Ms. Niswander was given an opportunity to express the impact of a cut in funding would have on the agency. Dr. Hanley-Maxwell stated for the record she had reservation voting for approval of the reduced amount of funding. **A roll call vote was taken. The motion passed unanimously.**

Approved
 Denied
 Modified
 Additional Information Needed

Developmental Services Center – Service Coordination

Request is for \$423,165. Aligns with priority for Linkage & Advocacy for People with ID/DD. To reduce risks of Medicaid supplementation and conflict of interest, reporting requirements may be revised. A special provision will be included to ensure collaboration with CCRPC and other CCDDDB/CCMHB funded programs to improve coordination and minimize duplication of effort, including for transition. CCDDDB/CCMHB funds should not be used to pay for staff time at IEP and MDC meetings. **Dr. Hanley-Maxwell moved to approve partial funding of \$410,838 for Developmental Services Center – Service Coordination as presented in the memorandum. Ms. Dill seconded. The motion passed unanimously.**

Approved
 Denied
 Modified
 Additional Information Needed

Developmental Services Center – Integrated/Site Based Services – Community 1st

Request is for \$807,605 and for a two-year term. To support the transformation from shelter based services to meaningful community life for those served, individual needs and preference assessments are central. **Ms. Ruesch moved to approve partial funding of \$799,090 for a one-year term, for Developmental Services Center – Integrated/Site Based Services—Community 1st as presented in the memorandum. Dr. Hanley-Maxwell seconded the motion. All members voted aye and the motion passed.**

Approved
 Denied
 Modified
 Additional Information Needed

Developmental Services Center – Individual and Family Support

Request is for \$399,055. Aligns with priority for Non-Work Community Life and Flexible Support. **Ms. Dill moved to DENY funding for Developmental Services Center – Individual and Family Support as presented in the memorandum. By agreement, the Champaign County Mental Health Board will provide partial funding of \$392,649 for this program. Ms. Ruesch seconded the motion. All members voted aye and the motion passed.**

Approved
 Denied
 Modified
 Additional Information Needed

Developmental Services Center – Family Development Center

Request is for \$579,150. Aligns with priority for Comprehensive Services and Supports for Young Children and collaborates with other funded programs toward system of care approach. A special provision will be included to require collaboration with other early childhood programs to avoid duplication of effort and maximize positive outcomes for children. No service covered by the School Code should be charged to this contract. **Mr. Smith moved to approve partial funding of \$562,280 for Developmental Services Center – Family Development Center as presented in the memorandum. Ms. Ruesch seconded the motion. All members voted aye and the motion passed.**

Approved
 Denied
 Modified
 Additional Information Needed

Developmental Services Center/Community Choices – Employment First

Request is for \$82,400 and for a two-year term. Aligns with priority for Employment Services and Supports. Recommend that the program collect some demographic and residency data on the businesses and families engaged. **Dr. Hanley-Maxwell moved to approve partial funding of \$80,000, for a one year term, for Developmental Services Center – Employment First as presented in the memorandum. Mr. Smith seconded. All members voted aye and the motion passed.**

Approved
 Denied
 Modified
 Additional Information Needed

Developmental Services Center – Connections

Request is for \$90,000. Aligns with priority for Employment Services and Supports. To support the transformation from shelter based services to meaningful community life for those served, individual needs and preference assessments are central. **Ms. Ruesch moved to approve partial funding of \$85,000 for Developmental Services Center – Connections as presented in the memorandum. Ms. Dill seconded. All members voted aye and the motion passed.**

Approved
 Denied



_____ Modified
_____ Additional Information Needed

Developmental Services Center – Community Employment

Request is for \$361,370, with a two-year term. Aligns with priority for Employment Supports and Services. A special provision will be included to ensure collaboration with CCRPC and other CCDDDB/CCMHB funded programs to improve coordination and minimize duplication of effort. CCDDDB/CCMHB funds should not be used to pay for staff time at IEP and MDC meetings. **Ms. Dill moved to approve funding of \$361,370, with a one-year term, for Developmental Services Center – Community Employment as presented in the memorandum. Mr. Smith seconded. All members voted aye and the motion passed.**

Approved
_____ Denied
_____ Modified
_____ Additional Information Needed

Developmental Services Center – Clinical Services

Request is for \$178,986. Aligns with priority for Non-Work Community Life and Flexible Supports, improves access to behavioral health services and benefits, and collaborates with other providers toward a system of care approach. In order to continue serving as many people as possible, greater integration with Medicaid participating providers will be expected. **Mr. Smith moved to approve partial funding of \$174,000 for Developmental Services Center – Clinical Services as presented in the memorandum. Ms. Ruesch seconded the motion. All members voted aye and the motion passed.**

Approved
_____ Denied
_____ Modified
_____ Additional Information Needed

Developmental Services Center – Apartment Services

Request is for \$429,865. Aligns with priority for Non-Work Community Life and Flexible Support. A special provision will be included to ensure collaboration with similar programs. To support a meaningful community life for those served, individual needs and preference assessments are central. **Dr. Hanley-Maxwell moved to approve partial funding of \$417,341 for Developmental Services Center – Apartment Services as presented in the memorandum. Mr. Smith seconded. All members voted aye and the motion passed.**

Approved
_____ Denied
_____ Modified
_____ Additional Information Needed

Community Choices, Inc. – Self-Determination Support

Request is for \$96,000. Aligns with priorities for Non-Work Community Life and Flexible Support and for Self-Advocacy and Family Support Organizations. Adds stakeholder meetings and self- and family-advocacy for transition from school to adult life. A special provision will be included to ensure collaboration with CCRPC and other CCDDDB/CCMHB funded programs to

improve coordination and minimize duplication of effort, including for transition. CCDDDB/CCMHB funds should not be used to pay for staff time at IEP and MDC meetings. **Ms. Ruesch moved to DENY funding for Community Choices, Inc. – Self-Determination Support as presented in the memorandum. By agreement, the Champaign County Mental Health Board will provide funding of \$96,000 for this program. Dr. Hanley-Maxwell seconded. The motion passed unanimously.**

- Approved
- Denied
- Modified
- Additional Information Needed

Community Choices, Inc. – Customized Employment

Request is for \$99,000. Aligns with priority for Employment Supports and Services. A special provision will be included to ensure collaboration with CCRPC and other CCDDDB/CCMHB funded programs to improve coordination and minimize duplication of effort, including for transition. CCDDDB/CCMHB funds should not be used to pay for staff time at IEP and MDC meetings. **Ms. Dill moved to approve partial funding of \$74,103 for Community Choices, Inc. – Customized Employment as presented in the memorandum. Mr. Smith seconded. All members voted aye and the motion passed.**

- Approved
- Denied
- Modified
- Additional Information Needed

Community Choices, Inc. – Community Living

Request is for \$66,000. Aligns with priority for Expansion of Integrated Residential Opportunities. To support a meaningful community life for those served, individual needs and preference assessments are central. A special provision will be included to ensure collaboration with CCRPC and other CCDDDB/CCMHB funded programs to improve coordination and minimize duplication of effort. CCDDDB/CCMHB funds should not be used to pay for staff time at IEP and MDC meetings. **Mr. Smith moved to DENY funding for Community Choices, Inc. – Community Living as presented in the memorandum. By agreement, the Champaign County Mental Health Board will provide partial funding of \$63,000 for the program. Ms. Ruesch seconded the motion. All members voted aye and the motion passed.**

- Approved
- Denied
- Modified
- Additional Information Needed

Champaign County Head Start/Early Head Start – Social Emotional Disabilities Services

Request is for \$55,645. Aligns with priority for Comprehensive Services and Supports for Young Children and collaborates with other funded programs toward system of care approach. A special provision will be included to require collaboration with other early childhood programs to avoid duplication of effort and maximize positive outcomes for children. No service covered by the School Code should be charged to this contract. **Dr. Hanley-Maxwell to DENY funding for**

Champaign County Head Start/Early Head Start – Social Emotional Disabilities Services as presented in this memorandum. By agreement, the Champaign County Mental Health Board will provide funding of \$55,645 for this program. Ms. Dill seconded and the motion passed unanimously.

- Approved
- Denied
- Modified
- Additional Information Needed

Champaign County Down Syndrome Network – CC Down Syndrome Network
Request is for \$15,000. Aligns with priority for Self-Advocacy and Family Support Organizations, collaborates with other support networks. Input regarding members' service preferences will support CCDDDB/CCMHB planning functions. **Ms. Ruesch moved to approve funding of \$15,000 for Champaign County Down Syndrome Network – CC Down Syndrome Network as presented in the memorandum. Dr. Hanley-Maxwell seconded. The motion passed unanimously.**

- Approved
- Denied
- Modified
- Additional Information Needed

CUAble – Community Outreach
NEW funding request for \$13,802. Aligns with priority for Self-Advocacy and Family Support Organizations, collaborates with other support networks. Input regarding the comprehensive website and members' service preferences will support CCDDDB/CCMHB planning functions. **Ms. Dill moved to approve funding of \$13,802 for CU Able – Community Outreach as presented in the memorandum. Dr. Hanley-Maxwell seconded. The motion passed unanimously.**

- Approved
- Denied
- Modified
- Additional Information Needed

CTF Illinois – Nursing
Request is for \$6,000. Aligns with priority for Non-Work Community Life and Flexible Support. **Mr. Smith moved to approve funding of \$6,000 for CTF Illinois – Nursing as presented in the memorandum. Ms. Ruesch seconded. The motion passed unanimously.**

- Approved
- Denied
- Modified
- Additional Information Needed

CTF Illinois – Advocacy Center
Request is for \$77,008. Aligns with priorities for Linkage & Advocacy for People with ID/DD, Non-Work Community Life and Flexible Support. To support the transformation from shelter based services to meaningful community life for those served, individual needs and preference



assessments are central. Dr. Hanley-Maxwell moved to approve partial funding of \$60,000 for CTF Illinois – Advocacy Center as presented in the memorandum. Ms. Ruesch seconded. Ms. Ruesch asked Melissa McDaniel from CTF Illinois clarification on how funding would be spent. Ms. Ruesch also asked for clarification on where services would be provided. Ms. Hanley-Maxwell requested clarification on clients receiving pay for work and the process of moving clients into the community to work. Collaborations with employers and agencies were discussed. It was decided among Board members this motion would be **deferred** in order for more discussion with CTF Illinois regarding effective inclusion in the community.

Approved
 Denied
 Modified
 Additional Information Needed

CCRPC-Community Services – Decision Support Person for CCDDDB

Request is for \$86,460. Aligns with priority for Linkage and Advocacy for People with ID/DD, supports conflict-free case management and person-centered planning, supports transition from high school to adult life and identification of desired supports, for future funding priorities. A special provision will be included to ensure collaboration with other CCDDDB/CCMHB funded programs, to minimize duplication of effort and move toward Conflict-Free Case Management, including for those in transition. **Ms. Ruesch moved to approve funding of \$86,460 for CCRPC-Community Services – Decision Support Person for CCDDDB/CCMHB as presented in the memorandum. Dr. Hanley-Maxwell seconded. The motion passed unanimously.**

Approved
 Denied
 Modified
 Additional Information Needed

Mr. Smith moved to authorize the executive director to implement contract maximum reductions as described in the “Special Notification Concerning FY18 Awards” section of the memorandum. Ms. Ruesch seconded and the motion passed unanimously.

Approved
 Denied
 Modified
 Additional Information needed

OLD BUSINESS:

Agency Third Quarter Reports:

FY17 Third Quarter Program Reports were included in the Board packet for review.

Meeting Schedules:

A copy of the CCDDDB meeting schedule was included in the packet for information only.

Ligas Family Advocate Program Acronym Sheet:

A list of useful acronyms, compiled and published by the Ligas Family Advocacy Program was included for information only.

BOARD ANNOUNCEMENTS:

June 7, 2017 will be explored as a future meeting date in order to complete funding recommendations.

ADJOURNMENT:

The meeting adjourned at 9:55 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo

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

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

SPECIAL BOARD MEETING

Minutes –June 7, 2017

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

8:00 a.m.

MEMBERS PRESENT: Joyce Dill, Cheryl Hanley-Maxwell, David Happ, Deb Ruesch

MEMBERS EXCUSED: Mike Smith

STAFF PRESENT: Kim Bowdry, Lynn Canfield, Mark Driscoll

STAFF EXCUSED: Stephanie Howard-Gallo, Shandra Summerville,

OTHERS PRESENT: Patty Walters, Laura Bennett, Janice McAteer, Developmental Services Center (DSC); Melissa McDaniel, Tracy Waverling, CTF Illinois; Vicki Niswander, IAMC

CALL TO ORDER:

Ms. Deb Ruesch called the meeting to order at 8:00a.m.

ROLL CALL:

Roll call was taken and a quorum was present.

APPROVAL OF AGENDA:

The agenda was approved.

CITIZEN INPUT:

None.

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CCMHB INPUT:

Ms. Lynn Canfield provided an update on the CCMHB's funding decisions. Chris Wilson was introduced as the new financial manager of the CCMHB/CCDDB.

PRESIDENT'S COMMENTS:

None.

AGENCY INFORMATION:

None.

OLD BUSINESS:

FY 2018 Allocation Decision:

A written response from CTF Illinois and a letter from a participant's parent were included in the Board packet.

MOTION: Ms. Ruesch moved to approved partial funding of \$60,000 for CTF Illinois—Advocacy Center as presented in the Decision Memorandum. Mr. Happ seconded the motion. A brief discussion followed. A roll call vote was taken and the motion passed unanimously.

MOTION: Ms. Hanley-Maxwell moved if additional funds become available CTF Illinois should be fully funded contingent upon CTF Illinois providing a proposed use of the funds. Ms. Ruesch seconded. A voice vote was taken and the motion passed.

Meeting Schedules:

A copy of the CCDDB meeting schedule was included in the packet for information only.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 8:12 a.m.
Respectfully Submitted by: Stephanie Howard-Gallo

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

disABILITY Resource Expo: Reaching Out For Answers
Board Report
July, 2017

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The 11th disABILITY Resource Expo has been scheduled for Saturday, April 7, 2018. Jim Mayer and Barb Bressner have been working with our new venue, The Vineyard Church in Urbana. This new site should nicely accommodate the 100 plus exhibitors we expect to host. We have met with The Vineyard's new Events Director regarding contract specifics for our event, and should have a contract ready for signature very soon.

An Exhibitor Meet and Greet was held at The Vineyard on May 4, with approximately 40 in attendance. During this event, exhibitors were given an opportunity to tour the new venue and hear from State Treasurer Michael Frerichs about the implementation of the ABLE Act in Illinois. We received very positive feedback on the new Expo venue from those in attendance.

Barb & Jim attended the annual Abilities Expo in Schaumburg on June 23 and 24. We were very pleased to have the opportunity to not only chat with several of our previous exhibitors, but also spoke with 4-6 exhibitors who were new to the Abilities Expo who expressed their interest in our event in April. We have attended the Abilities Expo for the past several years, and it has proven to be an invaluable resource to us in terms of recruiting new resources and technology. We have also benefited from the expertise of the owners of the Abilities Expo, who have been great advisors to us over the years.

Jim Mayer has been working on some revision to our current website. He has expanded the resources listed to be a more comprehensive accounting of the disability resources in our area. He is also including some additional category buttons to allow for easier access to information provided (ie. About Us, How To Volunteer). Future plans are to work with CCMHB staff to make the site more disability access friendly per county regulations.

Barb and several Expo Committee members participated in Unity East Elementary Schools' "We All Come In Different Packages" day on April 21. Barb participated in the planning of this event with Unity staff. She and Expo Planning Committee representatives spoke with children and answered their questions on various disabilities to help them have a better understanding and reduce stigma related to persons with a disability. This school-wide event culminated in an assembly where students got to participate in role-plays relative to the information contained in our Expo bookmark, and then watch an expedition scrimmage with members of the Illini Wheelchair Basketball Teams. We commend Unity East for their forward thinking and steps to assist their students in the way they view persons with disabilities. I'm also told we made their local newspaper!

The Human Factors and Aging Laboratory at UIUC, in collaboration with Georgia Institute of Technology, is conducting an interview study that explores the challenges older adults with long-term sensory and mobility impairments have with everyday activities. They were experiencing difficulty in recruiting participants for this study and requested our assistance. Barb provided some potential resources to them, and participated in the study, as well. We will receive feedback, which may assist in our future resource recruitment for the Expo.

Respectfully submitted
Barb Bressner & Jim Mayer
Consultants

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Kim Bowdry, Associate Director for Intellectual & Developmental Disabilities
Staff Report – July 12, 2017

A Warm Reception: I was welcomed by the CCMHB/CCDDB staff and Board members on May 1, 2017. I would like to thank staff and members of both Boards for being so welcoming. I hit the ground running by attending funding allocation meetings with Lynn and Board members.

Prior to joining CCMHB/CCDDB, I spent the past nine years employed at the Champaign County Regional Planning Commission (CCRPC) with the Independent Service Coordination (ISC) team. During the last year of my tenure at CCRPC, I was the ISC Program Manager. Prior to my time at CCRPC, I worked at Developmental Services Center for three and a half years.

CCDDB Contracts & Reporting: FY18 contract negotiations were completed and contracts were finalized to include special provisions. Agency contracts were mailed out in the middle of June and signed contracts began coming in the following week. A special provision was put into most contracts that persons served under CCDDB contracts have been informed of the role of the ISC, enrolled in the PUNS database and identified by ISC or IDHS-DDD staff as eligible for IDHS-DDD services. Individuals deemed ineligible for PUNS enrollment will need to have an individual needs assessment completed by a third party to ensure that the individual is aware of available service options and has been able to choose these options.

The online reporting system has been modified to allow for monthly service activity reporting. This will include identifying all individuals receiving services, as well as the specific services received and whether the services were received on or off-site. Identifying individuals receiving services will allow for better tracking of duplication of services. Training will be provided for agency staff.

Alliance for Inclusion & Respect: I attended a special workshop on updating the Alliance for Inclusion and Respect (AIR) website. It is hoped that the website will be able to be used as an online marketplace (similar to Etsy) with each artist or group having a link or contact information for purchasing items posted on the website. I am looking forward to meeting the artists and working more closely with them in the future.

Association Activities: On May 17th, I participated in an Association of Community Mental Health Authorities of Illinois (ACMHAI) Medicaid-MCO conference call and on June 8th and 9th, I attended the ACMHAI Quarterly Membership Meeting held at the Champaign Hyatt.

Three presentations were given at the June 8th session. Donald Kauerauf, Assistant Director, IDPH gave the first presentation titled, “The Opioid Crisis in Illinois” and noted that in 2016, over 1900 people in Illinois died of opioid-related overdose, with a disproportionate number of those fatalities being white males between the ages of 25-44. The second presentation titled, “A Different Solution to Changing Lives,” was given by David Byram of Braeburn Pharmaceuticals. Mr. Byram presented information on

Braeburn's long-acting implant for treatment of opioid addiction. The final presentation of the afternoon, "Beyond the Epidemic – A Shared Path to Recovery," was given by Ryan Springer, President/CEO Trident House International Lecturer. Mr. Springer shared information on Recovery Oriented Systems of Care (ROSC). A ROSC is a coordinated network of community-based services and supports that is person-centered and builds on the strengths and resiliencies of individuals, families and communities to achieve abstinence and improved health, wellness and quality of life for those with or at risk of alcohol and drug problems.

During the June 9th session, the ACMHAI business meeting was held and a presentation from Illinois Children's Healthcare Foundation (ILCHF) was given by Amy Starin, PhD, LCSW. ILCHF launched the Children's Mental Health Initiative: *Building Systems of Care, Community by Community* (CMHI) to enhance and integrate available resources to build community-wide systems of care that prevent, identify and treat children's mental and behavioral health problems throughout the state of Illinois. Implementation grants are available through ILCHF.

CCMHB/CCDDB Study Session: I attended the joint CCMHB/CCDDB Study Session on "Building Inclusive Communities" presented by David Wetherow on Friday, May 5, 2017. Mr. Wetherow presented on the Star Raft model, a field-tested pattern for building and sustaining individual support networks that are person-centered, family friendly and anchored in natural community connections.

Mr. Wetherow (and his wife, Faye) created the very first Microboards, and developed Prairie Housing Cooperative (inclusive cooperative housing), L'Avenir Cooperative (a family-and consumer-governed service co-op), the Open Access Resource Centre (a lending library of communications equipment), and some of Canada's earliest supported employment, individualized funding and personal support projects.

Other Activity: I attended a presentation by the Students Consulting for Nonprofit Organization (SCNO). The students researched nonprofit collaboration and resource sharing possibilities for CCMHB funded agencies. I attended two regular meetings of the Mental Health and Developmental Disabilities Agencies Council. I attended a Program Evaluation meeting with other staff, two members of the CCMHB and Mark Aber and Nicole Allen from UIUC. I participated in two National Association of County Behavioral Health & Developmental Disability Directors (NACBHDD) ID/DD Committee Conference Calls. I also participated in an Employment First webinar and call. I participated in an nTIDE Lunch n' Learn webinar and a PEAT Talk Webinar. I participated in the HHS Federal Partners webinar and a Guided Group Discovery: Paving the Way to Employment Webinar, hosted by the LEAD Center. I participated in a regular meeting of the Local Funders Group.

IAG Update: Currently the Individual Advocacy Group (IAG) homes are at near capacity. The all-female home is at capacity with four residents and the male home currently has three residents, with one available opening.

The IAG residents had a busy spring. The residents visited the Alan Strong Car Collection and have done nature walks at the Anita Purves Nature Center. The ladies were able to go for manicures or pedicures at a local nail salon and they also spent time painting on canvas. The residents were able to attend and participate in Champaign Public Library's Science Show. Residents toured the State Farm Center as well. The Champaign Flexible Day Experience has found a new location within the community at the Champaign Public Library.

I am working with IAG staff to get the IAG artists on the Alliance for Inclusion & Respect (AIR) website. A few of IAG's talented residents are in the greeting card business. These cards can be purchased through IAG.

April 2017 PUNS Selection and Unmet Need: In April 2017, there was a PUNS Selection of 917 individuals statewide. Champaign County had 16 individuals selected to apply for waiver-funded services, one individual had previously been awarded CILA placement, although he has yet to move and continues to reside in his family home while he awaits an agency willing to provide services. During the Pre-Admission Screening (PAS) individuals and their families are given the opportunity to select CILA placement or Home-Based Support Services. The ISC continues to work with these 15 individuals and their families to gather required documents for completion of the PAS.

PUNS data pulled from the DHS-DDD website for Champaign County can be found below. I have also included a breakdown of active and total PUNS clients for Champaign County.



Division of Developmental Disabilities
Prioritization of Urgency of Needs for Services (PUNS)
Summary By County and Selection Detail

June 06, 2017

County: Champaign

Reason for PUNS or PUNS Update

New	108
Annual Update	183
Change of category (Emergency, Planning, or Critical)	29
Change of service needs (more or less) - unchanged category (Emergency, Planning, or Critical)	16
Person is fully served or is not requesting any supports within the next five (5) years	183
Moved to another state, close PUNS	12
Person withdraws, close PUNS	20
Deceased	14
Individual Moved to ICF/DD	1
Individual Determined Clinically Ineligible	2
Unable to locate	28
Other, close PUNS	161

EMERGENCY NEED(Person needs in-home or day supports immediately)

1. Individual needs immediate support to stay in their own home/family home (short term - 90 days or less); e.g., hospitalization of care giver or temporary illness of an individual living in their own home.	7
2. Individual needs immediate support to stay in their own home/family home or maintain their employment situation (long term); e.g., due to the person's serious health or behavioral issues.	17
3. Care giver needs immediate support to keep their family member at home (short term - 90 days or less); e.g., family member recuperating from illness and needs short term enhanced supports.	2
4. Care giver needs immediate support to keep their family member at home (long term); e.g., care giver is permanently disabled or is terminally ill and needs long term enhanced supports immediately to keep their family member at home.	7

EMERGENCY NEED(Person needs out-of-home supports immediately)

1. Care giver is unable or unwilling to continue providing care (e.g., person has been abandoned).	21
2. Death of the care giver with no other supports available.	3
3. Person has been committed by the court or is at risk of incarceration.	2
4. Person is living in a setting where there is suspicion of abuse or neglect.	14
5. Person is in an exceedingly expensive or inappropriate placement and immediately needs a new place to live (for example, an acute care hospital, a mental health placement, a homeless shelter, etc.).	7
6. Other crisis. Specify:	105

CRITICAL NEED(Person needs supports within one year)

1. Individual or care giver will need support within the next year in order for the individual to continue living in their current situation.	97
2. Person has a care giver (age 60+) and will need supports within the next year.	56
3. Person has an ill care giver who will be unable to continue providing care within the next year.	22
4. Person has behavior(s) that warrant additional supports to live in their own home or family home.	62
5. Individual personal care needs cannot be met by current care givers or the person's health has deteriorated.	17
6. There has been a death or other family crisis, requiring additional supports.	2
7. Person has a care giver who would be unable to work if services are not provided.	47
8. Person or care giver needs an alternative living arrangement.	12
9. Person has graduated or left school in the past 10 years, or will be graduating in the next 3 years.	177
10. Person is living in an inappropriate place, awaiting a proper place (can manage for the short term; e.g., persons aging out of children's residential services).	5
11. Person moved from another state where they were receiving residential, day and/or in-home supports.	4
12. The state has plans to assist the person in moving within the next year (from a state-operated or private Intermediate Care Facility for People with Developmental Disabilities, nursing home or state hospital).	1
13. Person is losing eligibility for Department of Children and Family Services supports in the next year.	7
17. Person is residing in an out-of-home residential setting and is losing funding from the public school system.	2
20. Person wants to leave current setting within the next year.	7
21. Person needs services within the next year for some other reason, specify:	20



Division of Developmental Disabilities
Prioritization of Urgency of Needs for Services (PUNS)
Summary By County and Selection Detail

June 06, 2017

PLANNING FOR NEED(Person's needs for service is more than a year away but less than 5 years away, or the care giver is older than 60 years)	
1. Person is not currently in need of services, but will need service if something happens to the care giver.	121
2. Person lives in a large setting, and person/family has expressed a desire to move (or the state plans to move the person).	1
3. Person is dissatisfied with current residential services and wishes to move to a different residential setting.	1
4. Person wishes to move to a different geographic location in Illinois.	3
5. Person currently lives in out-of-home residential setting and wishes to live in own home.	2
6. Person currently lives in out-of-home residential setting and wishes to return to parents' home and parents concur.	1
7. Person is receiving supports for vocational or other structured activities and wants and needs increased supports to retire.	1
8. Person or care giver needs increased supports.	62
9. Person is losing eligibility for Department of Children and Family Services supports within 1-5 years.	2
13. Person is residing in an out-of-home residential setting and is losing funding from the public school system within 1-5 years.	1
14. Other, Explain:	7
EXISTING SUPPORTS AND SERVICES	
Respite Supports (24 Hour)	9
Respite Supports (<24 hour)	12
Behavioral Supports (includes behavioral intervention, therapy and counseling)	107
Physical Therapy	49
Occupational Therapy	107
Speech Therapy	123
Education	170
Assistive Technology	49
Homemaker/Chore Services	2
Adaptions to Home or Vehicle	10
Personal Support under a Home-Based Program, Which Could Be Funded By Developmental Disabilities, Division of Rehabilitation Services or Department on Aging (can include habilitation, personal care, respite, retirement supports, budgeting, etc.)	44
Medical Equipment/Supplies	35
Nursing Services in the Home, Provided Intermittently	6
Other Individual Supports	83
TRANSPORTATION	
Transportation (include trip/mileage reimbursement)	94
Other Transportation Service	228
Senior Adult Day Services	1
Developmental Training	95
"Regular Work"/Sheltered Employment	80
Supported Employment	61
Vocational and Educational Programs Funded By the Division of Rehabilitation Services	63
Other Day Supports (e.g. volunteering, community experience)	21
RESIDENTIAL SUPPORTS	
Community Integrated Living Arrangement (CILA)/Family	3
Community Integrated Living Arrangement (CILA)/Intermittent	4
Community Integrated Living Arrangement (CILA)/Host Family	1
Community Integrated Living Arrangement (CILA)/24 Hour	32
Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 16 or Fewer People	1
Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 17 or More People	1
Skilled Nursing Facility/Pediatrics (SNF/PED)	3
Supported Living Arrangement	4
Shelter Care/Board Home	1

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Division of Developmental Disabilities
Prioritization of Urgency of Needs for Services (PUNS)
Summary By County and Selection Detail

June 06, 2017

Nusing Home	2
Children's Residential Services	10
Child Care Institutions (Including Residential Schools)	6
Other Residential Support (Including homeless shelters)	13
SUPPORTS NEEDED	
Personal Support (includes habilitation, personal care and intermittent respite services)	291
Respite Supports (24 hours or greater)	20
Behavioral Supports (Includes behavioral intervention, therapy and counseling)	114
Physical Therapy	53
Occupational Therapy	90
Speech Therapy	106
Assistive Technology	64
Adaptations to Home or Vehicle	19
Nursing Services in the Home, Provided Intermittently	8
Other Individual Supports	56
TRANSPORTATION NEEDED	
Transportation (include trip/mileage reimbursement)	273
Other Transportation Service	282
VOCATIONAL OR OTHER STRUCTURED ACTIVITIES	
Support to work at home (e.g., self employment or earning at home)	16
Support to work in the community	223
Support to engage in work/activities in a disability setting	159
Attendance at activity center for seniors	1
RESIDENTIAL SUPPORTS NEEDED	
Out-of-home residential services with less than 24-hour supports	129
Out-of-home residential services with 24-hour supports	74

**Division of Developmental Disabilities Prioritization of Urgency of Needs for Services (PUNS)
Summary of Total and Active PUNS By Zip Code**

Updated 06/06/17

<http://www.dhs.state.il.us/OneNetLibrary/27897/documents/DD%20Reports/PUNS/PUNSbyZipallandactivevets05102016.pdf>

Zip Code	Active	Total PUNS
60949 Ludlow	2	4
61801 Urbana	38	78
61802 Urbana	36	81
61815 Bondville (PO Box)	1	1
61816 Broadlands	3	3
61820 Champaign	29	61
61821 Champaign	73	156
61822 Champaign	40	80
61840 Dewey	0	2
61843 Fisher	8	10
61845 Foosland	1	1
61847 Gifford	2	3
61849 Homer	1	6
61851 Ivesdale	0	1
61852 Longview	1	1
61853 Mahomet	27	55
61859 Ogden	3	10
61862 Penfield	1	2
61863 Pesotum	1	3
61864 Philo	5	10
61866 Rantoul	24	69
61871 Royal (PO Box)	--	-- no data on website

Zip Code		Active	Total PUNS
61873	St. Joseph	14	24
61874	Savoy	4	10
61875	Seymour	1	2
61877	Sidney	3	6
61878	Thomasboro	1	2
61880	Tolono	8	28
Total		328	710

<http://www.dhs.state.il.us/page.aspx?item=56039>

Summary of PUNS by ISC Agency

Updated 06/06/17

ISC Agency	Individual Count	% of Total PUNS	Estimated Total Census for Agency	Estimated % of IL Census
*CCRPC Total	878	1.72%	244,880	1.90%
ISC Agency	Individual Count	% of Total PUNS	Estimated Total Census for Agency	Estimated % of IL Census
*CCRPC Active	361	1.89%	244,880	1.90%

*Totals include Ford & Iroquois Counties

DHS Definition of Closed PUNS Records

Death
Fully Served
Moved out of state
Withdrawn
Other Closed

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Stephanie Howard-Gallo

**Developmental Disabilities Contract Coordinator Staff Report –
July 2017 Board Meetings**

SUMMARY OF ACTIVITY:

Contracts:

Fifty-eight separate contracts for funding from the CCDDDB and the CCMHB have been drafted and sent with award letters to agencies. An excel spreadsheet tracks the processing of contracts. The spreadsheet indicates which contracts require negotiations, if revised program and/or budget forms must be submitted; if a revised Cultural Competency Plan is needed; or if they only need to be signed. A copy of the Contract Process and Information Sheet is included with the award letter and contracts sent to the agency. The sheet provides a summary of the process and key dates, notes on revised plan requirements, refers to potential special provisions, and a reminder to read the contract.

The date the contract is issued and the date it is returned is noted. Each agency is issued an award letter that indicates the amount allocated by program and if negotiation or revised forms are necessary. Signed copies are provided to the Financial Manager and the Champaign County Auditor before payments can be issued. Contracts returned after the deadline usually mean payments will be delayed.

Issuing and completing the contract process is time consuming and is a group effort among staff members.

Accounts Payable:

Lynn and I continued to share accounting duties up until June 19th when we welcomed Chris Wilson to take over. I assisted in making July payments to the agencies.

Third Quarter Reporting:

Third Quarter financial and program reports were due at the end of April. Most agencies report on time or ask for a small extension. Several agencies were asked to revise and/or correct their reports. No letters of non-compliance were sent out for reports this quarter.

A few of the agencies forget to send us their approved Board minutes, but this is usually resolved by an informal email to them.

Records and Data Retention:

A new funding year means setting up new contract files for the programs. I have also been working toward a paper file purge of old records. Generally, we keep 10 years of paper files in the file room

Other:

I have been participating in an organizational assessment, along with the other staff.

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July 12, 2017- Monthly Staff Report- Shandra Summerville

Cultural and Linguistic Competence Coordinator

I attended small breakout group of the CU **Collaborative Conversations** about Race in CU. This was opportunity to begin to build relationships on a more intentional level outside of the large group. The meeting brought opportunities to build additional partnerships to look at how to continue to build bridges in the community to help address disparities. In addition to the groups, we were invited to break out into other groups in the community to begin looking at how we can make community impact. I was informed about the Community Benefit Fund that looks at ways to reduce disparities in technology for underserved and marginalized communities. I submitted names about being part of the collaboration.

Human Services Council of Champaign County: On May 6 and June 1 I co-facilitated a cultural diversity training with Kathy Rhodes of the Circle of Friends Adult Daycare. There were 22 people that participated in the training. This was offered by the HSC to ensure that CEU's were provided for MSW's and LCSW's. The CEU's were sponsored by the School of Social Work. The Objectives of the training were as follows:

- **Participants will become familiar with the National CLAS (Cultural and Linguistic Appropriate Services) Standards**
- **Participants will leave with practical ways of implementation of the CLAS Standards at their agency.**
- **Participants will develop a personal plan of action that will work toward providing care with CLAS Standards at their agency.**
- **Participants will have an interactive discussion with other providers about how the value of cultural competence is being implemented in their agency and others.**
- **Participants will leave with a deepened appreciation of cultural competence and its importance.**

CLC Training and Technical Assistance:

I met with the following organizations to provide technical assistance and CLC Support to promote the value of CLC

- Children's Advocacy
- Urbana Neighborhood Connection Center
- Champaign County Head Start Program
- Don Moyer's Boys and Girls Club

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- Elliot Counseling Group-
- First Followers- CLC Board Training
- University High School Laboratory School
- Centennial High School
- Youth and Family Peer Support Alliance
- Statewide Illinois Youth and Family Alliance
- Illinois Association of Microboards and Cooperatives
- Community Choices

FY 2018- CLC Plans:

I reviewed all of the CLC Plans and provided summaries for the CLC Plans that were submitted. During contract negotiations, there were 3 organizations that had revisions to their CLC Plans. They were to be uploaded to the system by June 30, 2017.

Transition in Champaign County:

Linda Tortorelli of The Autism Program agreed to host a collaboration meeting to discuss Transition in Champaign County with the DD/IDD Providers in Champaign County. The tentative meeting was scheduled March 30, 2017.

Training and Webinars Attended:

I attended the following trainings in person and on-line

- ACHMAI Meeting June 8th & 9th
- WordPress and Website training for the Alliance for Inclusion and Respect
- Effectively Communicating with People on the Autism Spectrum

NAACP Champaign County Branch-

I attended the NAACP meeting in March, April. The planning for the annual Freedom Fund Celebration has started and I will serve on the planning committee.

Anti-Stigma Activites/Community Outreach-

Ebert Festival 2017- Thank you to the support of the Alliance for Inclusion and Respect and CCMHB we were able to sponsor the Anti-Stigma Film “Mind Game-The Unquiet Journey of Chamique Holdsclaw.” This year we provided Festival Passes to members of CCMHB, Retired Educators, Community People and Representatives of the Alliance for Inclusion and Respect. In addition to the festival passes, tickets were available to the sponsored film.

I coordinated the panel discussion of Mental Health Professionals as well faculty from the University of Illinois and Parkland College.

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Film Discussion Panel Included:

Juli Kartel, Rosecrance- Former Athlete

Joseph Omosagie- Parkland College, CCMHB Board Member

Dr. Carla Hunter- University of Illinois, Urbana-Champaign, Associate Director of Clinical Training

(Please see photos at the end of the report)

In an effort to continue with Anti-Stigma activities for the year in connection with the Ebert Film Festival selection “Mind Game” the director Rick Gold Smith provided a copy of the film to be utilized for education in Champaign County. Mahomet Area Youth Club is the first agency that will screen Mind Game and there will be a short discussion.

Enhanced National CLAS(Culturally and Linguistically Appropriate Services) Standards Training was held on June 30, 2017 CEU’s were provided in partnership with Prairie Center Health Systems. Special thanks to the Pavilion for allowing us to utilize the training space. There were 15 participants that signed up to attend the training.

African American Community Healing through Storytelling

I was invited to participate in a research cluster project in partnership with the University of Illinois Urbana-Champaign. It is looking community healing through story telling.

Healing on a community-level has the potential to promote resilience and foster relationships that can help sustain healing. A group of interdisciplinary scholars and community members, whose focus centers on the wellbeing of African Americans, propose to create an IPRH Research Cluster aimed at extending the wellness literature by exploring the concept of community healing through storytelling across various African American community groups within the Champaign-Urbana area. The goals of the research cluster are to: 1) build sustainable partnerships with community members, scholars, and professionals interested in African American community healing; 2) develop a model/framework of community healing through storytelling; and 3) create and capture the perceptions and process of community healing through digital storytelling.

Lead2017- Windsor Road Church is planning a leadership conference for community leaders to focus on being an intentional leader. I was invited to be part of the planning as a CLC expert to infuse the values in the planning of their annual conference.

Unit 4 School District- CU4SD Community Schools Initiative is a partnership to build capacity to support students and families populations that have been marginalized and disenfranchised. I met with Tony Maltbia and Lynn Canfield about serving on one of the Site Advisory Teams.

Men's and Women's SAFE(Substance Abuse Free Environment) House

I attended the planning meeting for the Summer Activities for the SAFE Houses that will be held on August 27, 2017 at Hessel Park.

AIR- Alliance for Inclusion and Respect- Please continue to support the Artists and notice new artwork that has been submitted on the website www.champaigncountyair.com

Rotary Club of Champaign

I attend weekly meeting for the Rotary and serve on communications, music and membership committees. I attended the District Conference and 100 year celebration of the Champaign Rotary Club.



July

<https://www.youtube.com/watch?v=dZfeuYWDs0w>

<https://www.nami.org/Get-Involved/Awareness-Events/Minority-Mental-Health-Awareness-Month/Minority-Mental-Health-Stories>

National Minority Mental Health Month

https://www.nami.org/Get-Involved/Awareness-Events/Awareness-Messaging?utm_source=awareness&utm_medium=website&utm_campaign=intoMH

In May of 2008, the US House of Representatives announce July as Bebe Moore Campbell National Minority Mental Health Awareness Month.

The resolution was sponsored by Rep. Albert Wynn [D-MD] and cosponsored by a large bipartisan group to achieve two goals:

- Improve access to mental health treatment and services and promote public awareness of mental illness.
- Name a month as the Bebe Moore Campbell National Minority Mental Health Awareness Month to enhance public awareness of mental illness and mental illness among minorities.

About Bebe Moore Campbell

- Bebe Moore Campbell was an author, advocate, co-founder of NAMI Urban Los Angeles and national spokesperson, who passed away in November 2006. She received NAMI's 2003 Outstanding Media Award for Literature. Campbell advocated for mental health education and support among individuals of diverse communities. In 2005, inspired by Campbell's charge to end stigma and provide mental health information, longtime friend Linda Wharton-Boyd suggested dedicating a month to the effort.

Facts

- 1 in 5 adults in the United States lives with a mental health condition.
- African Americans and Hispanic Americans used mental health services at about half the rate of whites in the past year, and Asian Americans at about one-third the rate.
- GET INFOGRAPHIC

What is Stigma?

- People experiencing mental health conditions often face rejection, bullying and even discrimination. This can make their journey to recovery longer and more difficult. Stigma is when someone, or you yourself, views you in a negative way because you have a mental health condition. Some people describe stigma as shame that can be felt as a judgement from someone else or a feeling that is internal, something that confuses **feeling** bad with **being** bad.
- Stigma's effects: People experiencing mental health conditions often face rejection, bullying and discrimination. This can make their journey to recovery longer and more difficult. Mental health conditions

are the leading cause of disability across the United States. Even though most people can be successfully treated, less than half of the adults in the U.S. who need services and treatment get the help they need. The average delay between the onset of symptoms and intervention is 8-10 years. Suicide is the second leading cause of death of youth ages 15-24 and the tenth leading cause of death for all Americans.

- <https://www.nami.org/stigmafree>

<https://minorityhealth.hhs.gov/omh/content.aspx?ID=9447&lvl=2&lvlid=12>

- Minorities are less likely to receive diagnosis and treatment for their mental illness, have less access to and availability of mental health services
- nearly two-thirds of people with a diagnosable mental illness do not seek treatment, and racial and ethnic groups in the U.S. are even less likely to get help

African American

- Poverty level affects mental health status. African Americans living below the poverty level, as compared to those over twice the poverty level, are 3 times more likely to report psychological distress.
- African Americans are 10% more likely to report having serious psychological distress than Non-Hispanic whites.
- However, the suicide rate for African Americans is 70% lower than that of the non-Hispanic white population.

American Indians/Alaska Natives

- In 2014, suicide was the second leading cause of death for American Indian/Alaska Natives between the ages of 10 and 34.¹
- American Indian/Alaska Natives are 50% more likely to experience feelings of nervousness or restlessness as compared to non-Hispanic whites.

Asian Americans

- Southeast Asian refugees are at risk for post-traumatic stress disorder (PTSD) associated with trauma experienced before and after immigration to the U.S. One study found that 70% of Southeast Asian refugees receiving mental health care were diagnosed with PTSD.²
- For Asian Americans, the rate of serious psychological distress increases with lower levels of income, as it does in most other ethnic populations.
- The overall suicide rate for Asian Americans is half that of the White population.

Hispanic or Latino Americans

- Hispanics living below the poverty level, as compared to Hispanics over twice the poverty level, are over twice as likely to report psychological distress.
- However, the suicide rate for Hispanics is half that of the non-Hispanic white population.
- White Americans received mental health treatment 2 times more often than Hispanic Americans in 2014.

Percent of adults (18+) that have experienced serious psychological distress in the past 30 days, 2013-2014

Native Hawaiian or Other Pacific	American Indian/Alaska Native	Hispanic or Latino	Black or African American	Asian	White	Two or more races

Islander						
Info unavailable	5.4%	4.5%	3.5%	1.9%	3.4%	8.6%

CDC, 2016. Health United States, 2015. Table 46.


<http://www.cdc.gov/nchs/data/hus/hus15.pdf>

Percent of adults (18+) who received mental health treatment or counseling in 2015

Native Hawaiian or Other Pacific Islander	American Indian/Alaska Native	Hispanic or Latino	Black or African American	Asian	White	Two or more races
6.5%	15.6%	8.1%	8.7%	5.0%	17.3%	17.5%

SAMHSA, 2015. Center for Behavioral Health Statistics and Quality. Results from the 2015 National Survey on Drug Use and Health: Detailed Tables. Table 8.35B. Rockville, MD.

<http://www.samhsa.gov/data/population-data-nsduh/reports?tab=38>



Mental illness doesn't choose who is affected by it, but culture, race, gender or sexual orientation can affect access to treatment, support and quality of care for many.

Minority Mental Health Month

Let's change this.

Learn More at NAMI.org/mmh

#MinorityMentalHealth



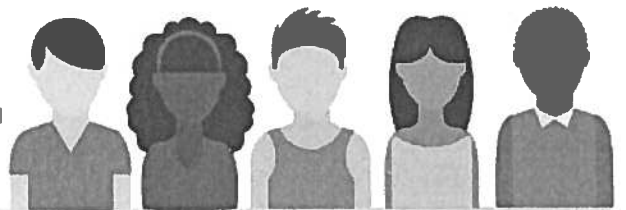
1 IN 5 PEOPLE
EXPERIENCE A MENTAL HEALTH CONDITION

Learn more, share your story and spread the word.

You can make a difference.

Learn more about National Minority Mental Health Awareness Month

MULTICULTURAL MENTAL HEALTH



Does Mental Health Matter?

Mental health directly and indirectly impacts all of us.



1 in every 5 adults
in the U.S. experiences a mental health condition.

1 in every 5 children
ages 13-18 have or will have a serious mental health condition.

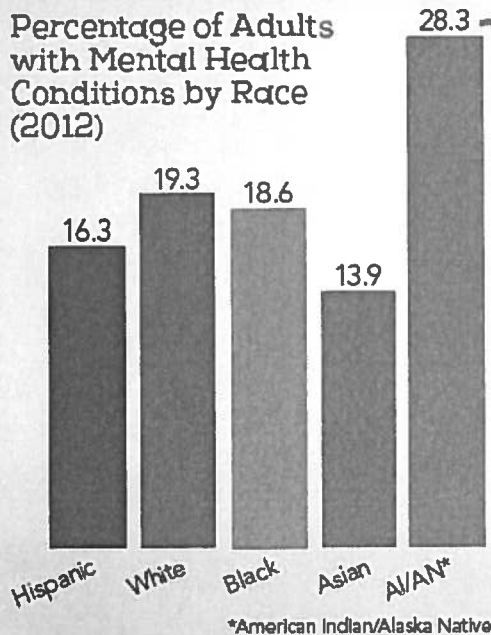
Mental health is part of overall health. Mental health conditions cause changes in thoughts, feelings and mood.

Mental health conditions can affect many areas of your life including: home, work, school, relationships with others, sleep, appetite, decision making and may worsen other medical problems.

Does Mental Health Affect My Community?

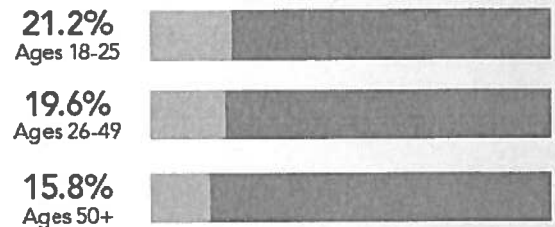
Culture, race, ethnicity, gender, age and sexual orientation influence mental health care rates, attitudes, access and treatment.

Percentage of Adults with Mental Health Conditions by Race (2012)



At 28.3%, American Indians and Alaska Natives have the highest rate of mental health conditions among all communities.

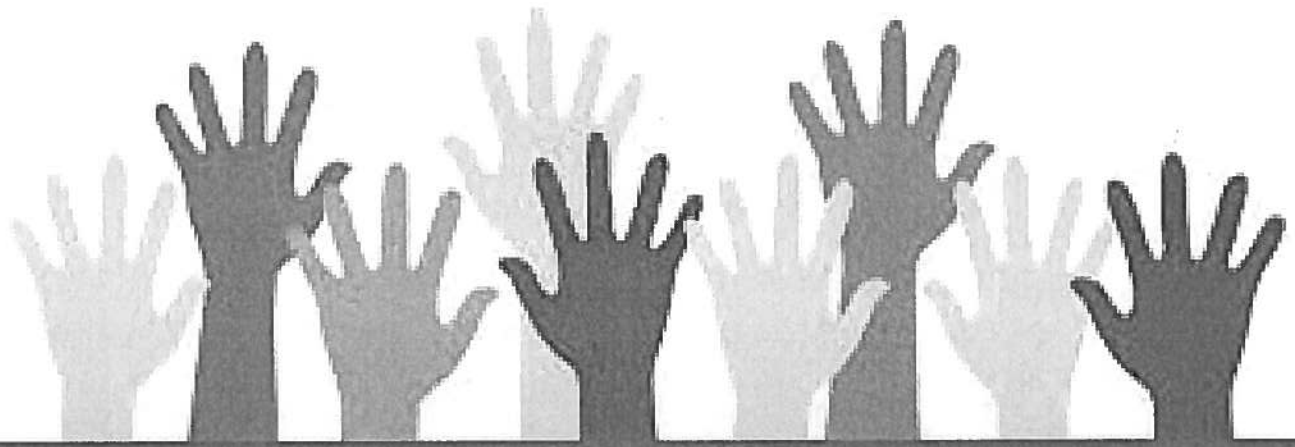
Percentage of Adults with Mental Health Conditions by Age



Lesbian, Gay, Bisexual, Transgender & Questioning (LGBTQ) youth are 2 to 3 times more likely to attempt suicide than straight youth.

LGBTQ individuals are 2 or more times more likely as straight individuals to have a mental health condition.





National Minority Health Awareness Month

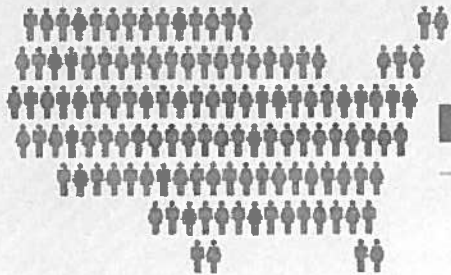
National Minority
Mental Health Awareness Month
JULY

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MENTAL HEALTH AND DIVERSE POPULATIONS AT-A-GLANCE

Mental Illness in the U.S. Affects:

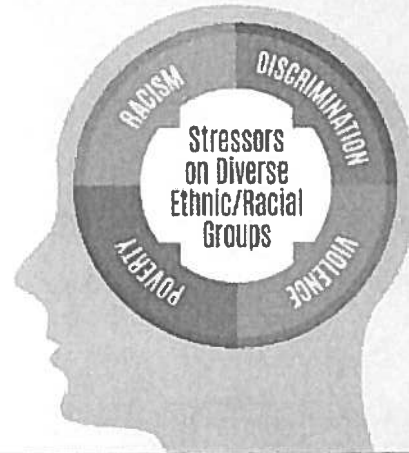
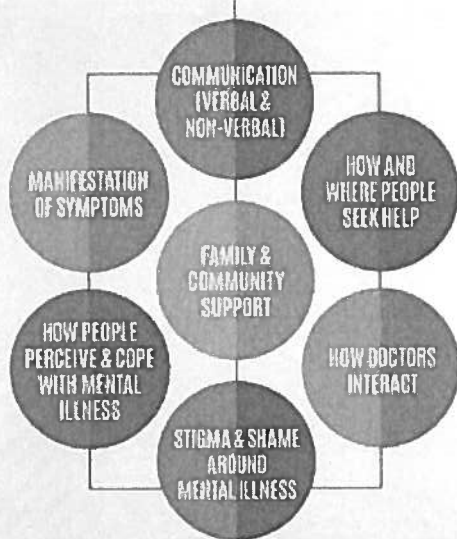


INCREASINGLY DIVERSE POPULATION

1 IN 3 PEOPLE IN THE U.S. identifies themselves as a member of an ethnic/racial group

4% OF THE U.S. POPULATION identify themselves as **LGBT**

How Can Race/Ethnicity/Culture INFLUENCE MENTAL HEALTH?



MENTAL HEALTH DISPARITIES FACTORS

Members of ethnic and racial minority groups in the U.S. "face a social and economic environment of inequality that includes greater exposure to racism, discrimination, violence, and poverty, all of which take a toll on mental health."

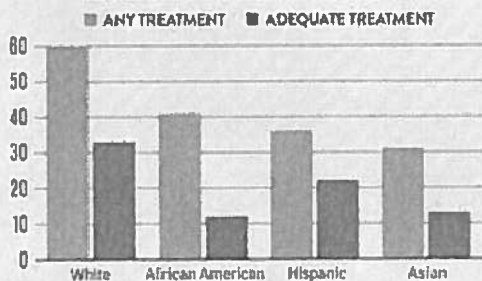
- U.S. SURGEON GENERAL



FACTS ON SUBSTANCE USE DISORDERS

- Hispanics are less likely to receive needed care than whites
- Blacks are less likely to complete treatment than whites
- The rate of substance use disorders among American Indians/Alaska Natives is twice that of other racial/ethnic groups

DEPRESSION TREATMENT: ACCESS & QUALITY



LGBT FACTS

- LGBT individuals are **MORE THAN TWICE AS LIKELY** as straight individuals to have a mental health disorder
- Suicide attempts are **3 TIMES MORE COMMON** among bisexual individuals than straight individuals
- Sexual minorities have a **GREATER RISK** of substance use disorders than straight individuals
- Compared to non-sexual minority youth, sexual minority youth are **TWICE AS LIKELY** to report being bullied

FOR MORE INFORMATION, RESOURCES, AND REFERENCES, PLEASE VISIT WWW.PSYCHIATRY.ORG/DIVERSITY

Social Wellness Month

Social Wellness Month is historically celebrated during the month of July. Social Wellness Month was created / sponsored by Words of Wellness and was put in place to assist people in their efforts to live a healthier life.

<https://www.takingcharge.csh.umn.edu/july-social-wellness-month>

Social wellness means nurturing yourself and your relationships.

It means giving and receiving social support - ensuring that you have friends and other people, including family, to turn to in times of need or crisis to give you a broader focus and positive self-image.

Social support enhances quality of life and provides a buffer against adverse life events. Social support can take different forms:

- **Emotional** (sometimes called non-tangible) support refers to the actions people take to make someone else feel cared for.
- **Instrumental** support refers to the physical, such as money and housekeeping.
- **Informational** support means providing information to help someone.

One of the earliest studies on the physical and psychological health benefits of social support was in 1905. Dr. Joseph Pratt, an internist from Boston, gathered a group of tuberculosis patients together to educate them about hygiene in relation to their illness. This "support group" provided early evidence of the power of psychological support in physical health and healing.

Why is Social Wellness Important?

Healthy relationships are a vital component of health. The health risks from being alone or isolated in one's life are comparable to the risks associated with cigarette smoking, blood pressure, and obesity.

Research shows that:

- People who have a strong social network tend to live longer.
- The heart and blood pressure of people with healthy relationships respond better to stress.
- Strong social networks are associated with a healthier endocrine system and healthier cardiovascular functioning.
- Healthy social networks enhance the immune system's ability to fight off infectious diseases.

Nurture Your Relationships

According to Drs. Gay and Kathlyn Hendricks, in their book *Lasting Love: The 5 Secrets of Growing a Vital, Conscious Relationship*, the following concepts are instrumental in attaining a healthy and lasting relationship.

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1. **Become a master of commitment.** It's important to be aware of precisely what you are committing to, so that you can realistically judge whether or not you have the capacity to follow through on the commitment.
2. **Make commitments you can stand by.** In a relationship, it is important to be honest and empathetic to each other's feelings, hopes, and dreams.
3. **Break the cycle of blame and criticism.** It is important to own your part in the relationship dynamics.
4. **It can be helpful to shift your attention away from "fixing the other person" and onto more creative expressions for resolving conflict.** Shifting the focus in this way will help to inject more positive energy into the relationship.
5. **Become a master of verbal and nonverbal appreciation.** Showing appreciation of others is critical to healthy relationships.

Learn more about nurturing relationships.

WAYS TO IMPROVE SOCIAL WELLNESS

- Reconnect with old friends, or reach out and try to develop new friendships. Are you letting yourself be open enough to allow others to approach you?
- Spend time really listening to other people. Find out what is important to them. What issues are they facing? Listening to someone else is one of the best things that we can do for them and it allows us to keep our own issues and challenges in perspective.
 - **Work out.** Joining a gym or an exercise group allows you to meet new people while exercising.
 - **Take a walk with your pet.** Starting a walking routine after dinner would not only give you another opportunity to be physically active, but it would also create more opportunities for you to meet your neighbors.
 - **Volunteer.** Donate some of your time and hard work to a charity. You'll feel good about the cause, and you'll meet others with similar passions.
 - **Find others who share a hobby,** such as hiking, painting, scrapbooking, running, etc.
 - **Talk to a friend.** Call or visit someone you may not have spoken to in a while and have a positive interaction. Really listen and find out what is important or what issues the person has been facing. Practice empathy by putting yourself in the person's shoes.
 - **Know your needs.** Get to know your own personal needs, and find people who can help nurture those needs. While pursuing your own needs, help others with theirs. Talk to people who are supportive of your needs.
 - **Allow others to care for you.** Sometimes it can be difficult to admit when there's something you can no longer accomplish on your own. When you need assistance with something, even if it's just going to the grocery store or household chores, allow the people who care about you to help you. There's no shame in admitting you can't do it all on your own.
 - **Develop a new friendship.** You're never too old to make a new friend, so don't be afraid to go up and talk to a peer. Enjoy being with others. Social interactions help improve your mood and enhance your self-esteem. Remember, sometimes laughter really is the best medicine.
 - **Relax and find inner peace.** Relaxation is a great way to clear your mind and find inner happiness. Rest and get a good night's sleep- sleep is just as important as leading an active life to keep you alert and healthy.

- **7. Get some sun (and vitamin D).**

- **11. Get a good night's sleep.**

- *Practice self disclosure*
- *Get to know your personal needs and pursue things and people who nurture those needs*
- *Contact and make a specific effort to talk to the people who are supportive in your life*
- *Attend a Wellness Forum*
- *Join a club or organization that interests you*

<http://definitionofwellness.com/dimensions-of-wellness/social-wellness/>

The social dimension of wellness encourages contributing to one's human and physical environment to the common welfare of one's community. Social Wellness emphasizes the interdependence with others and nature. It includes the pursuit of harmony in one's family.' As you travel a wellness path, you'll become more aware of your importance in society as well as the impact you have on nature and your community. You'll take an active part in improving our world by encouraging a healthy living environment and initiating better communication with those around you. You'll actively seek ways to preserve the beauty and balance of nature along the pathway.

Social wellness is having positive interactions with and enjoying being with others. It is having comfort and ease during work and leisure situations and communicating feelings and needs to others. It involves developing and building close friendships and intimacy, practicing empathy and effective listening, caring for others and for the common good, and allowing others to care for you. It is recognizing the need for leisure and recreation and budgeting time for those activities.

As you proceed on your social wellness journey, you'll discover many things-you'll discover that you have the power to make willful choices to enhance personal relationships, important friendships, your community, the environment and, ultimately, the world. As you travel the wellness path, you'll begin to believe that – socially.

Social Wellness Assessment

The social dimension of wellness involves developing, nourishing and encouraging satisfying relationships. Read each statement carefully and respond honestly by using the following scoring:

Almost always = 2 points

Sometimes/occasionally = 1 point

Very seldom = 0 points

_____ 1. I contribute time and/or money to social and community projects.

_____ 2. I am committed to a lifetime of volunteerism.

_____ 3. I exhibit fairness and justice in dealing with people.

_____ 4. I have a network of close friends and/or family.

_____ 5. I am interested in others, including those from different backgrounds than my own.

_____ 6. I am able to balance my own needs with the needs of others.

_____ 7. I am able to communicate with and get along with a wide variety of people.

_____ 8. I obey the laws and rules of our society.

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____ 9. I am a compassionate person and try to help others when I can.

____ 10. I support and help with family, neighborhood, and work social gatherings.

_____ Total for Social Wellness Dimension

Score: **15 to 20 Points** – Excellent strength in this dimension.

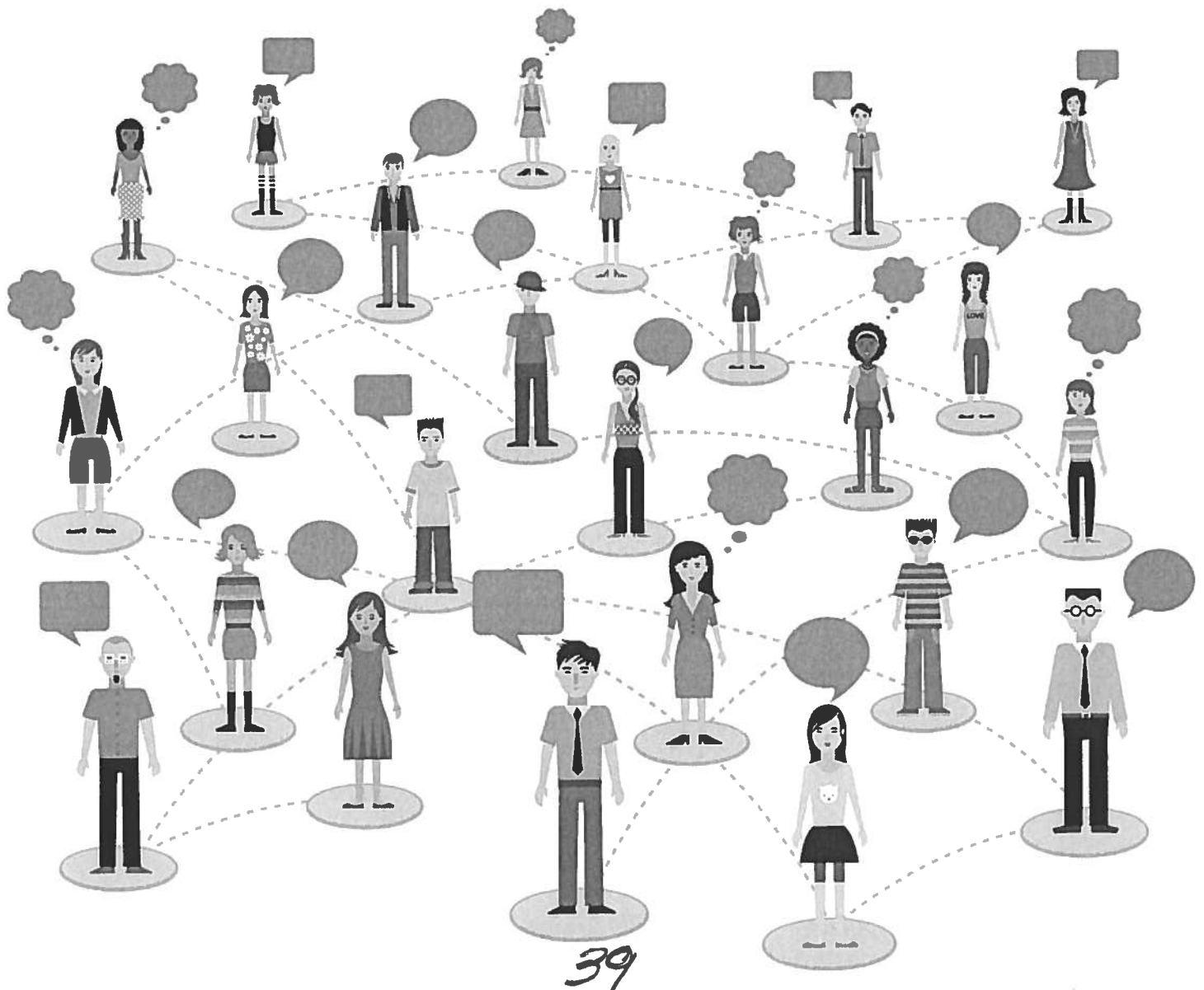
Score: **9 to 14 Points** – There is room for improvement. Look again at the items in which you scored 1 or 0. What changes can you make to improve your score?

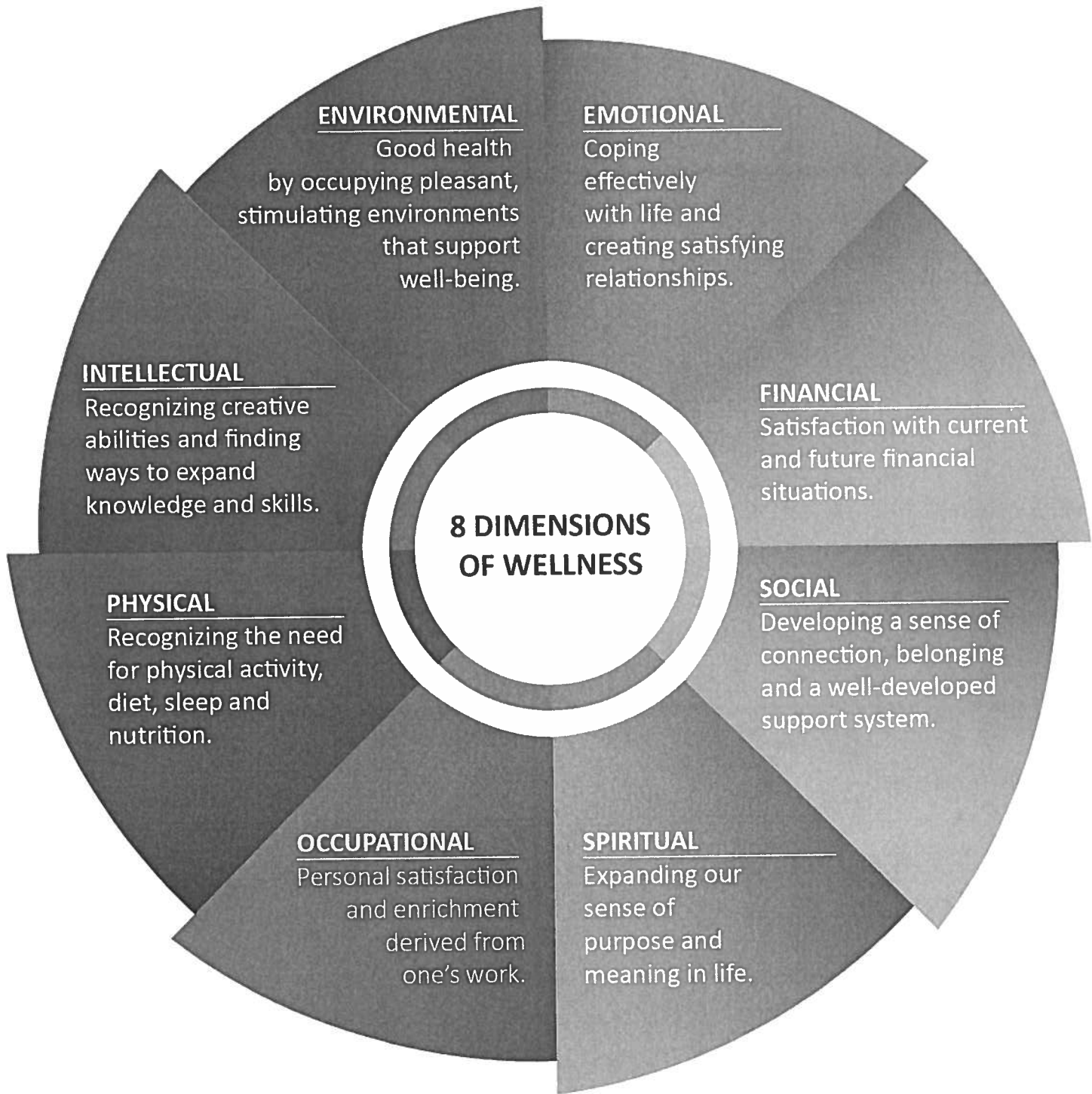
Score: **0 to 8 Points** – This dimension needs a lot of work. Look again at this dimension and challenge yourself to begin making small steps toward growth here. Remember: The goal is balanced wellness.

Source:

Six Dimensions of Wellness Model ©1976 by Bill Hettler, MD

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CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

6/08/17

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VENDOR NO	VENDOR NAME	TRN B	TR	CD	TRANS NO	PO NO	CHECK NO	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
90	CHAMPAIGN COUNTY TREASURER	6/06/17	01	VR	108-45		561085	6/08/17	108-050-533.07-00	MENT HLTH BD FND 090 PROFESSIONAL SERVICES	JUN ADMIN FEE VENDOR TOTAL	29,501.00 29,501.00 *
161	CHAMPAIGN COUNTY TREASURER	6/06/17	01	VR	108-46		561089	6/08/17	108-050-533.92-00	REG PLAN COMM FND075 CONTRIBUTIONS & GRANTS	MAY/JUN DECISION SU VENDOR TOTAL	8,102.00 8,102.00 *
18203	COMMUNITY CHOICE, INC	5/15/17	04	VR	108-42		560139	5/19/17	108-050-533.92-00	SUITE 419 CONTRIBUTIONS & GRANTS	MAY/JUN COMM LIVING VENDOR TOTAL	10,500.00 10,500.00 *
19900	CTF ILLINOIS	6/06/17	01	VR	108-43		561129	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN NURSING	1,000.00
		6/06/17	01	VR	108-43		561129	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN ADV CENTER VENDOR TOTAL	12,500.00 13,500.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF CHAMPAIGN COUNTY INC	6/06/17	01	VR	108-47		561134	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN APT SVCS	69,561.00
		6/06/17	01	VR	108-47		561134	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN CLINICAL	29,826.00
		6/06/17	01	VR	108-47		561134	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN COM EMPLOY	38,244.00
		6/06/17	01	VR	108-47		561134	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN CONNECTIONS	14,590.00
		6/06/17	01	VR	108-47		561134	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN EMPLOY 1ST	13,330.00
		6/06/17	01	VR	108-47		561134	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN FDC	93,710.00
		6/06/17	01	VR	108-47		561134	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN INT SITE SV	150,911.00
		6/06/17	01	VR	108-47		561134	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN SERV COORD VENDOR TOTAL	68,468.00 478,640.00 *
22816	DOWN SYNDROME NETWORK	6/06/17	01	VR	108-44		561137	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN DOWN SYNDRM VENDOR TOTAL	2,500.00 2,500.00 *

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CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

6/08/17

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VENDOR NO	VENDOR NAME	TRN B TR	TRN NO	PO NO	CHECK NO	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 108 DEVLPMNTL DISABILITY FUND										
35550	IL ASSOC OF MICROBOARDS & COOPERATIVES	6/06/17 01 VR 108-	48	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN INCLUSIVE			10,708.00
							VENDOR TOTAL			10,708.00 *
54930	PERSONS ASSUMING CONTROL OF THEIR	6/06/17 01 VR 108-	49	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN INDEPEND			6,756.00
							VENDOR TOTAL			6,756.00 *
61780	ROSECRANCE, INC.	6/06/17 01 VR 108-	50	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN COORD SVCS			5,727.00
							VENDOR TOTAL			5,727.00 *
76107	UNITED CEREBRAL PALSY LAND OF LINCOLN	6/06/17 01 VR 108-	51	6/08/17	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN VOCATNL SVC			14,415.00
							VENDOR TOTAL			14,415.00 *
							DEVLPMNTL DISABILITY BOARD	DEPARTMENT TOTAL		580,349.00 *
							DEVLPMNTL DISABILITY FUND	FUND TOTAL		580,349.00 *
REPORT TOTAL ****										1,214,221.33 *

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1201

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

DECISION MEMORANDUM

DATE: July 12, 2017
TO: Members, Champaign County Developmental Disabilities Board (CCDDDB)
FROM: Lynn Canfield, Executive Director
SUBJECT: FY18 CCDDDB Champaign County Budget Submission

Overview:

The Champaign County Developmental Disabilities Board (CCDDDB) budget process for the County Fiscal Year 2018 (i.e., January 1, 2018 through December 31, 2018) is included as a component (department) of the overall Champaign County Government Budget.

The County Fiscal Year 2018 CCDDDB Budget spreadsheet is attached to this memorandum and manifests projected revenue of \$3,747,759 and projected expenditures for the Contributions and Grants line of \$3,359,244. Note: All CCDDDB contracts with service providers are aligned with the State of Illinois Fiscal Year (July 1 through June 30) in order to improve our financial monitoring and fiscal accountability for CCDDDB funding.

The intergovernmental agreement (IGA) between the CCDDDB and the Champaign County Mental Health Board (CCMHB) specifies that the CCDDDB shall pay "Professional Fees" totaling 42.15% of the operations costs budgeted to the CCMHB, less those costs which do not directly apply to the CCDDDB. The category includes administrative costs and program supports, described in attached documents supporting the Draft Budget. In accordance with the provisions of the IGA, each Board's presidents have reviewed and agreed that the "Professional Fees" line for County Fiscal Year 2018 should be \$338,515.

Decision Section:

Motion to approve the County Fiscal Year 2018 CCDDDB budget with anticipated revenue of \$3,747,759 and Professional Fees of \$338,515. to be paid to the CCMHB as specified in the terms and conditions of the Intergovernmental Agreement between the Boards.

- Approve
Deny
Modify
Request Additional Information

Attachments: DRAFT County Fiscal Year 2018 CCDDDB Budget Spreadsheet
Additional information on 2018 budgets and previous years

Draft 2018 CCDDB Budget

LINE ITEM	BUDGETED REVENUE	
311.19	Property Taxes, Current	\$3,736,959
313.19	Back Property Taxes	\$500
314.10	Mobile Home Tax	\$1,000
315.10	Payment in Lieu of Taxes	\$1,000
361.10	Investment Interest	\$300
371.90	Interfund Transfer of Gifts, Donations, Revenue	\$8,000
369.90	Other Miscellaneous Revenue	\$0
TOTAL REVENUE		\$3,747,759

LINE ITEM	BUDGETED EXPENDITURES	
533.07	Professional Fees (42.15% of an adjusted set of CCMHB Admin Expenses)	\$338,515
533.92	Contributions & Grants	\$3,359,244
571.11	Payment to CILA Fund	\$50,000
TOTAL EXPENSES		\$3,747,759

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Draft 2018 CCMHB Budget

LINE ITEM	BUDGETED REVENUE	
311.24	Property Taxes, Current	\$4,542,542
313.24	Back Property Taxes	\$500
314.10	Mobile Home Tax	\$4,000
315.10	Payment in Lieu of Taxes	\$700
336.23	CCDDB Revenue	\$338,515
361.10	Investment Interest	\$500
363.10	Gifts & Donations	\$20,000
369.90	Other Miscellaneous Revenue	\$0
TOTAL REVENUE		\$4,906,757

LINE ITEM	BUDGETED EXPENDITURES	
511.02	Appointed Official	\$101,000
511.03	Regular FTE	\$307,826
511.09	Overtime Wages	\$1,500
513.01	FICA	\$31,388
513.02	IMRF	\$36,599
513.04	W-Comp	\$2,257
513.05	Unemployment	\$4,200
513.06	Health/Life Insurance	\$63,586
513.20	Retirement Events	\$200
		Personnel Total \$548,556
522.01	Printing	\$1,000
522.02	Office Supplies	\$3,600
522.03	Books/Periodicals	\$400
522.04	Copier Supplies	\$1,000
522.06	Postage/UPS/Fed Ex	\$1,000
522.44	Equipment Under \$1000	\$6,000
		Commodities Total \$13,000
533.01	Accounting Fees	\$10,000
533.07	Professional Fees	\$300,000
533.12	Travel	\$6,000
533.20	Insurance	\$11,000
533.29	Computer Services	\$7,300
533.33	Telephone	\$2,500
533.42	Equipment Maintenance	\$500
533.50	Office Rental	\$21,660
533.51	Equipment Rental	\$900
533.70	Legal Notices/Ads	\$300
533.72	Department Operating	\$400
533.84	Business Meals/Expense	\$250
533.85	Photocopy Services	\$3,800
533.89	Public Relations	\$50,000
533.92	Contributions & Grants	\$3,833,761
533.93	Dues & Licenses	\$22,600
533.95	Conferences/Training	\$16,000
534.37	Finance Charges/Bank Fees	\$30
534.70	Brookens Repair	\$200
		Services Total \$4,287,201
571.08	Payment to CCDDB (Share of Gifts, Donations, Misc Rev)	\$8,000
571.11	Payment to CILA Fund	\$50,000
		Interfund Expenditures TOTAL \$58,000
TOTAL EXPENSES		\$4,906,757

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Background for 2018 CCMHB Budget, with 2017 Projections and Earlier Actuals

2018 BUDGETED REVENUE	2017 PROJECTED REVENUE	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Property Taxes, Current	\$4,453,473	\$4,246,055	\$4,161,439	\$4,037,720
Back Property Taxes	\$500	\$2,486	\$2,861	\$1,612
Mobile Home Tax	\$4,000	\$3,903	\$3,995	\$3,861
Payment in Lieu of Taxes	\$700	\$2,970	\$2,869	\$2,859
CCDDDB Revenue	\$338,916	\$377,695	\$330,637	\$337,536
Investment Interest	\$2,235	\$3,493	\$1,385	\$1,015
Gifts & Donations	\$20,000	\$4,198	\$18,822	\$28,192
Other Miscellaneous Revenue	\$0	\$75,677	\$21,340	\$67,599
TOTAL REVENUE	\$4,906,757	\$4,876,764	\$4,597,006	\$4,498,514

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2018 BUDGETED EXPENDITURES	2017 PROJECTED EXPEND	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Personnel	\$491,000	\$577,548	\$502,890	\$532,909
Commodities	\$18,000	\$7,998	\$11,237	\$9,282
Services (not Contributions & Grants)	\$453,440	\$410,157	\$382,870	\$375,735
Contributions & Grants	\$3,833,761	\$3,428,015	\$3,335,718	\$3,673,966
Interfund Expenditures	\$58,000	\$60,673	\$0	\$0
TOTAL EXPENSES	\$4,906,757	\$4,484,391	\$4,232,715	\$4,591,892

Additional Information about Expenses

Personnel 2018 v 2017

PERSONNEL	2018	2017
Appointed Official	\$101,000	\$101,000
Regular FTE*	\$307,826	\$261,222
Overtime Wages	\$1,500	\$2,505
FICA	\$31,388	\$27,175
IMRF	\$36,599	\$36,599
W-Comp	\$2,257	\$1,954
Unemployment	\$4,200	\$4,200
Health/Life Insurance	\$63,586	\$55,845
Retirement Events	\$200	\$500
	\$548,556	\$491,000

Commodities 2018 v 2017

COMMODITIES	2018	2017
Printing	\$1,000	\$1,000
Office Supplies	\$3,600	\$4,000
Books/Periodicals	\$400	\$500
Copier Supplies	\$1,000	\$1,500
Postage/UPS/Fed Ex	\$1,000	\$1,000
Equipment Under 5000	\$6,000	\$10,000
	\$13,000	\$18,000

Services (not Contributions and Grants)

SERVICES	2018	2017
Accounting Fees	\$10,000	\$10,000
Professional Fees**	\$300,000	\$350,000
Travel	\$6,000	\$7,500
Insurance	\$11,000	\$10,000
Computer Services	\$7,300	\$8,200
Telephone	\$2,500	\$3,500
Equipment Maintenance	\$500	\$500
Office Rental	\$21,660	\$20,768
Equipment Rental	\$900	\$840
Legal Notices/Ads	\$300	\$1,707
Department Operating	\$400	\$200
Business Meals/Expense	\$250	\$250
Photocopy Services	\$3,800	\$4,000
Public Relations***	\$50,000	\$50,000
Dues/Licenses	\$22,600	\$24,961
Conferences/Training	\$16,000	\$15,334
Finance Charges/Bank Fees	\$30	\$19
Brookens Repair	\$200	\$3,000
	\$453,440	\$510,779

Interfund Expenditures 2018 v 2017

INTERFUND TRANSFERS	2018	2017
CCDDDB Share of Donations & Miscellaneous Revenue	\$8,000	\$9,000
Payment to CILA Fund	\$50,000	\$50,000
	\$58,000	\$59,000

***Regular FTE:**

- not fully staffed during 2017

****Professional Fees:**

- legal services, Expo consultants, website development and ongoing support, human resource services, Triad shredding, graphic designer, ADA compliance consultant, independent audit reviewer, application reviewers, organizational assessment, 211 support with United Way, UIUC Evaluation Capacity Project (not shared with CCDDDB), and Savannah Family Institute-PLL (not shared with CCDDDB)

- 85% of this line is program support rather than Management & General.

*****Public Relations:**

- Ebertfest (not shared with CCDDDB), Expo expenses, community education/awareness; many are program support.

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Additional Information about Services

Approval of 2018 Budgets does not obligate the boards to all expenditures described; many are estimates based on previous years.

	2018	2017
Professional Fees**	\$300,000	\$350,000
	\$143,900 Savannah Family Institute (PLL), not shared with CCDDDB. \$52,976 UI Evaluation, not shared with CCDDDB. \$40,000 Expo Coordinators (Mayer/Bressner). \$18,066 United Way for 211/Path. \$250 human resources services (AAIM). \$3,000 IT services (BPC). \$2,000 organizational assessment (Smith/Campbell). \$1,500 website accessibility testing (Falling Leaf). \$7,000 online application/reporting systems (EMIK). \$750 expanded online resource directory (ChrispMedia). \$450 graphic design. \$1000 shredding services (Triad). \$4,000 legal fees (Barb Weiner, Meyer Capel). \$2,000 individual assessments (per Equip for Equality)	\$146,950 Savannah Family Institute (PLL), not shared with CCDDDB. \$53,757 UI Evaluation, not shared with CCDDDB. \$40,000 Expo Coordinators (Mayer/Bressner). \$18,066 United Way for 211/Path. \$750 human resources services (AAIM). \$3,000 IT services (BPC). \$30,000 organizational assessment (Smith/Campbell). \$1,500 website accessibility testing (Falling Leaf). \$4,000 application reviewers (Knapp/Matheny). \$4,000 CPA review of independent audits (Brusveen). \$500 online reporting (Proviso RTS). \$19,100 online application/reporting systems (EMIK). \$2200 expanded online resource directory (ChrispMedia) - under discussion. \$1000 shredding services (Triad). \$4,000 legal fees (Barb Weiner, Meyer Capel). \$2,000 individual assessments (per Equip for Equality)
Public Relations***	\$50,000	\$50,000
	\$15,000 Eberfest film sponsorship, offset by Alliance member dues and other contributions of \$3k-\$6k/year. \$2,000 estimated for year-round anti-stigma artists and trainings. \$2,000 anti-stigma art show(s), promotion, \$468 anti-stigma artists website support (ChrispMedia). All other items charged here support the Expo, including venue, supplies, food, interpreters, advertising, secondary Expo events. Expo costs are offset by exhibitor/vendor fees and contributions from sponsors (\$20k-\$26k per year)	\$15,000 Eberfest film sponsorship, offset by Alliance member dues and other contributions of \$4,185. \$801 anti-stigma artists website, with training for supporters (ChrispMedia.) \$1,921 print, promotion of artists, supplies for art show. \$1,500 estimated for year-round anti-stigma events and trainings. All other items charged here support the Expo and related events, with costs offset by exhibitor/vendor fees and contributions from sponsors. With no 2017 Expo, expenses and revenues will be lower than budgeted. Related events: 'Meet & Greet' with new venue and presentation on ABLE Act; fall art show in lieu of Expo.
Contributions & Grants	\$3,833,761	\$3,668,301
	Estimated payments to agencies from January 1 to June 30, 2018, as authorized in May and July 2017, plus 1/2 of estimated FY19 annual allocation amount, with agency contract maximums to be authorized by July 1, 2018.	Actual payments to agencies from January 1 to June 30, 2017, as authorized in May 2016, plus payments authorized in May and July 2017, to be made from June through December 2017.
Dues/Licenses	\$22,600	\$24,961
	\$825 national trade association (NACBHDD) dues (\$900 in 2019). \$16,000 state trade association (ACMHA) dues. \$250 Rotary membership dues (Summerville). \$25 Human Services Council membership dues. \$7 for any new membership, e.g., Arc of IL, NCBH, NAADD.	\$1,021 AAIM membership (paid up to 2020). \$750 national trade association (NACBHDD) dues. \$16,000 state trade association (ACMHA) dues. \$250 Rotary membership dues (Summerville). \$25 Human Services Council membership dues. \$7 for any new membership, e.g., Arc of IL, NCBH, NAADD.
Conferences/Training	\$16,000	\$15,334
	\$500-\$700 registration for NACBHDD Legislative and Policy Conference. Costs of travel (plus lodging and food) for 2-3 staff/board members for each of 1-2 NACBHDD meetings. Costs of travel (plus lodging and food) for 2-3 staff/board members for each of 2-3 quarterly ACMHA meetings. Costs of one other conference/training for 1-2 staff/board members.	\$500 registration for NACBHDD Legislative and Policy Conference. Costs of travel (plus lodging and food) for 2-3 staff/board members for each of 1-2 NACBHDD meetings. Costs of travel (plus lodging and food) for 2-3 staff/board members for each of 2-3 quarterly ACMHA meetings. Costs of one other conference/training for 1-2 staff/board members.
Expect the Unexpected		
	The following would require redirection from one expense line to another, best if within the category: need to move staff offices to a different location; payout of accrued benefits (time) upon staff resignation or retirement; legal expenses; changes in costs; etc. County Board approval to use fund balance would be needed for liability associated with hospital tax revenue (previously deposited.)	The following would require redirection from one expense line to another, best if within the category: need to move staff offices to a different location; payout of accrued benefits (time) upon staff resignation or retirement; legal expenses; changes in costs; etc. County Board approval to use fund balance would be needed for liability associated with hospital tax revenue (previously deposited.)

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Calculation of the CCDDB Administrative Share ("Professional Fees")

	2018	2017
Adjustments:		
CCMHB Contributions & Grants	\$3,833,761	\$3,668,301
Savannah Family Institute - PLL	\$143,900	\$146,950
UI Evaluation Capacity Project	\$52,976	\$53,757
Eberfest	\$15,000	\$15,000
Payment to CILA fund	\$50,000	\$50,000
CCDDB Share of Donations & Misc Rev	\$8,000	\$8,000
Adjustments Total:	\$4,103,637	\$3,942,008
CCMHB Total Expenditures:	\$4,906,757	\$4,746,080
Total Expenditures less Adjustments:	\$803,120	\$804,072

	2018	2017
CCDDB Share	\$803,120.00	\$804,072
Total Expenditures less Adjustments	\$338,515	\$338,916
Adjusted Expenditures x 42.15%	\$28,210	\$28,243
Monthly Total for CCDDB Admin		

Toward the end of the County Fiscal Year, actual expenses will be updated, with possible adjustment of the CCDDB current year share.

Background for 2018 CCDDB Budget, with 2017 Projections and Earlier Actuals

	2018 BUDGETED REVENUE	2017 PROJECTED REVENUE	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Property Taxes, Current	\$3,736,959	\$3,700,692	\$3,545,446	\$3,545,446	\$3,501,362
Back Property Taxes	\$500	\$500	\$2,437	\$2,437	\$1,398
Mobile Home Tax	\$1,000	\$1,000	\$3,404	\$3,404	\$3,348
Payment in Lieu of Taxes	\$1,000	\$1,000	\$2,445	\$2,445	\$2,479
Investment Interest	\$300	\$1,270	\$1,488	\$1,488	\$812
Gifts & Donations	\$8,000	\$8,000	\$10,673	\$0	\$0
Other Miscellaneous Revenue	\$0	\$14,432	\$0	\$0	\$11,825
TOTAL REVENUE	\$3,747,759	\$3,726,894	\$3,565,883	\$3,555,220	\$3,521,224

	2018 BUDGETED EXPENDITURES	2017 PROJECTED EXPEND	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Professional Fees (42.15% of some CCMHB exoenses, as above)	\$338,515	\$338,916	\$379,405	\$330,637	\$337,536
Contributions & Grants	\$3,359,244	\$3,314,418	\$3,206,389	\$3,069,122	\$3,224,172
Interfund Expenditure - CILA	\$50,000	\$50,000	\$50,000	\$50,000	\$0
TOTAL EXPENSES	\$3,747,759	\$3,703,334	\$3,635,794	\$3,449,759	\$3,561,708

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Champaign County Developmental Disability Board Program Investments, FY2018 (July 1, 2017 to June 30, 2018)

Agency	Program Name	Focus	Amount	Summary
CILA Expansion (purchase of houses)	Individual Advocacy Group provides CILA services	Independent Living	50,000	IAG helps individuals with special needs live full, self-directed lives with dignity and independence. IAG provides a full array of quality, customized, outcome-focused services for people with developmental, intellectual, emotional, behavioral, neurological or mental disabilities. We enable individuals to define and pursue their life goals and interests, develop skills to reach those goals, grow increasing personal responsibility, engage their community and lead active, enjoyable, independent lives. The agency offers residential and day services to individuals living in board-owned CILAs as well as family-owned residences in the community.
CTF Illinois	CTF Illinois Advocacy Center	Employment and Social	60,000	The mission of CTF ILLINOIS Advocacy Center of Champaign is to empower each individual we support to live the life they want to live. As advocates, we develop the tools and experiences we need to take greater control over our lives. We help speak up for people in the community who feel they have no voice, lobby local and state government to bring about change and work in the community. We also contribute to our community by organizing community events, joining social clubs and volunteering at local businesses and organizations.
	CTF Illinois Nursing	Independent Living	6,000	CTF ILLINOIS provides 24 hr. residential services to seven individuals in Champaign. Some of these individuals are aging and have developed related medical issues (i.e. Dementia, heart failure, diabetes). Nursing services include, but are not limited to: coordination of medical nursing care, medication training for staff members, quality assurance of medical concerns and medication errors, regular site visits, medication checks and physician order sheet review, quarterly medication, annual assessments, on call 24/7 for emergencies and providing information to and participating in Interdisciplinary Team meetings in the development of the residents person centered plan.
CU Able	CU Able Community Outreach	Parent Support	13,802	CU Able is a group of caregivers and professionals affected by all disabilities that offers networking, education and social opportunities. Monthly meetings are held for caregivers of individuals with disabilities, professionals and students from the University of Illinois and Parkland. The online Facebook community allows people to connect at all hours of the day and ask any questions or suggestions of other members and allows caregivers to network and connect with other families. Each year, CU Able organizes a Moms Retreat which provides an opportunity for respite for female caregivers of individuals with disabilities to come together for networking, relaxation and educational opportunities. In addition to networking opportunities, CU Able is planning to create and maintain a website that will be a resource for all caregivers, professionals and individuals in Champaign County.
Champaign County Down Syndrome Network	CC Down Syndrome Network	Parent Support	15,000	The Champaign County Down Syndrome Network serves families who have members with Down syndrome in Champaign County & East Central Illinois. The DSN offers support to families by providing current DS related information for members, parents, professionals and the general public. DSN reaches out to new parents, providing many networking & social opportunities as well as education, support & connections to local resources. DSN hosts many community awareness events including an annual Buddy Walk that draws 1000-2,000 people each year, helping to promote inclusion for individuals with Down syndrome in our community.
Champaign County Regional Planning Commission- Community Services	Decision Support Person for CCIDDB	Planning, Case Mgt	86,460	The Decision Support program targets individuals with developmental disabilities (DD) who are transitioning from an ISBE setting and in need of adult services, including high school students approaching adulthood and transitioning/aging out of ISBE funded services. ISC staff continue to assess persons transitioning from other counties that are eligible for and may or may not be receiving DHS waiver funding, that have not yet been assessed for service preferences will be targeted. Outreach events will be held throughout Champaign County to increase the registration of underserved populations. Transition Consultants assist individuals/families in conflict free transition planning. Conflict free transition planning allows for better matching of individualized services. Families will be supported, better informed and given more voice.

Community Choices, Inc.	Customized Employment	Employment	74,103	<p>Customized employment focuses on individualizing relationships between employees and employers resulting in mutually beneficial relationships. DISCOVERY: Using the person-centered approach of Discovery to identify the strengths, needs and desires of individuals seeking employment. JOB MATCHING: Identifying employers through business contact and learning about their needs, and the possibilities of meeting those needs through customized employment. SHORT-TERM SUPPORT: Employment Specialists work with employers and employees to develop accommodations and support, and provide limited job coaching. LONG-TERM SUPPORT: Employment Specialists provide support for individuals to help maintain and expand employment, ensuring they remain valued members of their work communities. CUSTOMIZED EMPLOYMENT TAILORED FOR TRANSITION: The Discovery process will be utilized with more input from students, parents/guardians and schools. Education and Advocacy: Employment Specialists will connect students with opportunities to increase self-determination and adult community options. Seamless Transition: Employment Specialists will participate in final transition meetings and provide meaningful linkages to adult supports, including developing written plans for continuing employment and community connections once students leave school.</p>
Developmental Services Center	Apartment Services	Independent Living	417,341	<p>Apartment Services supports people with ID/DD that reside in their own home in the community (an apartment or house of their choice, including DSC's semi-supported apartment building, a HUD subsidized, secured apartment building). The program has three primary goals to support participants: 1. Promote independence by learning/maintaining skills within a safe environment; 2. Provide long-term/on-going support in areas that cannot be mastered; 3. Provide increased support as needed due to aging, deteriorating health or other chronic conditions that jeopardize their ability to maintain their independence. Emergency Response is available to individuals in this program to support for those needing assistance after hours and on the weekends.</p>
	Clinical Services	Various	174,000	<p>The Clinical Services Program provides an array of clinical supports and services to children and adults with ID/DD. Consultants under contract with DSC include one Licensed Clinical Psychologist, two Licensed Clinical Social Workers, three Licensed Clinical Professional Counselors, one Licensed Professional Counselor and one Psychiatrist. Consultants meet with individuals at their private practice, at the individual's home or in some instances at DSC locations. Individuals schedule their own appointments or receive support from family members and/or DSC staff members for scheduling and transportation, if necessary.</p>
	Community Employment	Employment	361,370	<p>Community Employment assists individuals to obtain and keep jobs. This includes a person-centered discovery process; business exploration, online research and speaking/listening to others' regarding their job experience; resume/portfolio development; interview prep and meetings with potential employers; identifying niches in local businesses that emphasize the job seeker's strengths; advocating for reasonable accommodations; self-advocacy support; provision of benefits information; discussion/experiential opportunities for soft skills; develop and maintain long-term relationships with businesses.</p>
	Connections	Social Connection; Self-Advocacy Support	85,000	<p>Connections continues to focus on building connection, companionship and contribution in the broader community and pursues creative employment possibilities. People have become more vocal about what they want and many have expressed a desire to expand on their interest in art nurturing their creative self, fostering community engagement and pursuing a desire for employment opportunities. Through Connections individual and small group activities will occur during the day. Services are driven by each person, therefore attendance and participation vary with some people participating daily and others invited to visit or spend a portion of their time discovering these new opportunities.</p>
	Employment First	Employment, Community Awareness	80,000	<p>This joint application between Community Choices and DSC represents a continuation of the plan to cultivate and promote employment of individuals with ID/DD in Champaign County. Emphasis and priorities of this Employment First grant include the following stakeholders and activities: 1. Individual and family education events for those currently participating in day program, on waiting lists for services and transitioning out of school. One specific event will be dedicated to transition with outreach targeting students/families not currently affiliated with adult service providers. 2. Ongoing staff development to facilitate DSC's shift in culture to more community and employment focused outcomes. 3. Continued business/employer outreach to provide education and certification for disability awareness for local employers; establishing and maintaining relationships with all newly certified businesses. 4. System Reform - engage in communication and advocacy with various state agencies/representatives around Employment First implementation.</p>

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	Family Development Center	Young Children	562,280	<p>The FDC serves young children, age birth to five years, with or at risk of developmental disabilities and their families. The FDC responds to the needs of young children and their families with culturally responsive, innovative, evidence-based services. Early detection and prompt, appropriate intervention can improve developmental outcomes for children with delays and disabilities and children living in at-risk environments. Family-centered intervention maximizes the gifts and capacities of families to provide responsive intervention within familiar routines and environments. Comprehensive intervention services provided are Developmental Therapy, Speech Therapy, Comprehensive Evaluation, Developmental Play Groups, Parent Support Groups, Child Care Consultation and PLAY Project.</p>
	Integrated/Site Based Services - Community 1st	Employment and Social	799,090	<p>ISBS serves adults with ID/DD currently receiving both community and site-based services and are transitioning from a primarily center-based model to one emphasizing community connection and involvement. Continuing efforts to support individuals in strengthening connections with friends, family and local community through volunteering, civic duty, citizenship and self-advocacy opportunities; enhancing quality of life through participation in recreational activities, social events, educational and other areas of interest that bring personal fulfillment; access to new acquaintances through regular patronage of local establishments; and exploration of jobs in an area of interest and identification of support necessary for their long term employment goals. Opportunities to participate in community experiences have opened the door to new interests, facilitated the development of new or stronger friendships and strengthened community connections.</p>
	Service Coordination	Planning, Case Mgt	410,838	<p>Service Coordination serves children and adults with ID/DD who request support to enhance or maintain their highest level of independence in the community, at work, and in their home. Focusing on the hopes, dreams, and aspirations rather than the needs or deficits of an individual, serve as the basis of planning and outcomes for that person. With each person as the center of their team, Case Coordinators/QIDPs work closely with all members of each individual's team assuring service coordination in the most person-centered and effective manner possible. They facilitate each team with a clear focus on each individual's strengths, preferences and needs to identify and define the comprehensive level of supports requested by the consumer and to advocate that each individual's supports and services be provided in integrated community, work, learning and recreational environments.</p>
Illinois Association of Microboards and Cooperatives	IAMC Building Inclusive Communities	Planning, Awareness	52,750	<p>IAMC services include a person-centered plan using PATH (Planning Alternative Tomorrows with Hope) with a group that includes family and one or more non-family members with strong community connections. Once the individual's hopes, dreams, needs and interests have been identified, the team develops concrete steps leading to positive outcomes. Teams meet regularly (every 4-6 weeks) to maintain momentum on the plan, celebrate accomplishments, discuss barriers and ways to address them, assign next steps (including possible new team members to invite) and set the next meeting date. For teams choosing to incorporate, the IAMC will provide technical assistance, training and support to achieve those ends.</p>
PACE	Opportunities for Independence	Case Mgt, Self Advocacy Support	40,546	<p>PACE's Opportunities For Independence (OIP) serves individuals with ID/DD whom wish to participate in an Independent Living Philosophy based program to grow and/or maintain their independence. PACE provides individuals with these core services: Information and Referral, Individual and Systemic Advocacy, Independent Living Skills Training, Peer Support and Transition services. Services extend beyond Person-Centered Planning and represent Consumer Control. Consumer Control contains person-centered planning and goes beyond that to persons with disabilities directing program development, center administration and providing services.</p>
Rosecrance Champaign-Urbana	Coordination of Services: DD/MI	Case Mgt, Awareness	34,126	<p>Intensive Case Management, with a person-centered, strength-based approach is provided to individuals 18 years or older who are dually diagnosed with a developmental and mental health disability. Emphasis is placed on serving consumers that are presently residing in residential settings for persons with ID/DD, are living in other settings (families, friends, or self) but are struggling in caring for self in these environments or are at-risk of hospitalization or homelessness due to inadequate supports for their co-occurring conditions. The focus is to ensure that the services received by the consumer are coordinated effectively, that consistent messages and language are used by service providers, and that individual service needs receive appropriate priority in both systems of care.</p>
United Cerebral Palsy Land of Lincoln	Vocational Services	Employment	34,590	<p>UCP provides vocational support services to individuals with developmental disabilities, ages 18-55, in Champaign County. Services include extended job coaching and case management to individuals currently working in the community as well as vocational training and job development to individuals with disabilities who have lost employment or want to improve their job skills. UCP provides job coaching/support services to allow individuals to continue working in their community, receive promotions, and have the opportunity to work more hours. Individuals looking for employment receive vocational training to help prepare them for the workforce and to increase their employability skills. UCP works with participants on assessments, interviews and career exploration and assists the individuals in developing a profile that includes information on their skills, interests, preferences and strengths.</p>

CCDDDB Total Investment in Programs: 3,357,296

Champaign County Mental Health Board's ID/DD Program Investments, FY2018 (July 1, 2017 to June 30, 2018)

CILA Expansion (purchase of houses)	Individual Advocacy Group provides CILA services	ID/DD	50,000	IAG helps individuals with special needs live full, self-directed lives with dignity and independence. IAG provides a full array of quality, customized, outcome-focused services for people with developmental, intellectual, emotional, behavioral, neurological or mental disabilities. We enable individuals to define and pursue their life goals and interests, develop skills to reach those goals, grow increasing personal responsibility, engage their community and lead active, enjoyable, independent lives. The agency offers residential and day services to individuals living in board-owned CILAs as well as family-owned residences in the community.
Champaign County Regional Planning Commission - Head Start/Early Head Start	Social Emotional Disabilities Services	ID/DD	55,645	Champaign County Head Start/Early Head Start seeks to identify and address social-emotional concerns in the early childhood period, as well as to promote mental health among all Head Start children. The social-emotional portion of the program focuses on aiding the development of positive self-worth, self-regulation, respect for individual differences and appropriate social skills. Accomplishments in these areas will affect a child's ability to play, love, learn and work within the home, school and other environments. All fit together to form the foundation of a mentally healthy individual.
Community Choices	Community Living	ID/DD	63,000	COMMUNITY TRANSITIONAL SUPPORT - A four-phase model for supporting individuals with developmental disabilities to move into the community. The planning stage includes assessments, observations, financial discussions and identifying a participant's capabilities in core skill areas. In the move out stage, the focus shifts to establishing schedules and working on life skill areas with support. During the reaching out stage, participants work on community connections and finding meaningful activities. The final stage is consultation, where support from CC is decreased to only check-ins as needed. PERSONAL DEVELOPMENT TRAINING includes small classes and 1-on-1 instruction. Eight sessions of hands-on, interactive instruction are held throughout the year. Each 8 session class focuses on different topics and individuals can take multiple sessions. The intent is to build the skills and confidence of participants so they can continue their lifelong learning in integrated settings in the community.
	Self Determination Support	ID/DD; Parent and Self-Advocacy Support	96,000	LEADERSHIP & SELF-ADVOCACY : offers a two-tiered Leadership Class, co-developed by self-advocates, focusing on fostering leadership skills and putting leadership into action. FAMILY SUPPORT & EDUCATION : offers a public monthly meeting, where attendees learn best practices and options, community parties where families can gather informally and new this year, a family specific support group. BUILDING COMMUNITY : offers options for adults with disabilities to become engaged with others: Social Events - organized events for adults such as dinner and a movie, sports, trivia, video-gaming, concerts, etc. Co-op Clubs - individuals engaging in activities they design in smaller groups of people (3-5). Togethering/Open Champaign - focuses on 1:1 support to assist individuals in joining community groups, attending the first several times, making a connection, building natural supports and then fading out staff support.
Developmental Services Center	Individual & Family Support	ID/DD	392,649	DSC's IFS program serves children and adults with ID/DD with priority consideration given to individuals with severe behavioral, medical or support needs. The IFS program is a flexible and effective type of choice-driven service to individuals and families in a variety of integrated community settings. Individuals and families may choose to purchase services from an agency or an independent contractor/vendor, based on the specific need of the individual with ID/DD and their family. The program continues to provide remarkably creative planning, intervention and home/community support, in close collaboration with families, teachers and other members of the individual's support circle.

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CCMHB Total 657,294

13.B.

CCDDB 2017-2018 Meeting Schedule

Board Meetings

8:00AM except where noted

Brookens Administrative Building, Lyle Shields Room
1776 East Washington Street, Urbana, IL

July 12, 2017

September 20, 2017

October 25, 2017

November 15, 2017

December 13, 2017

January 24, 2018

February 21, 2018

March 21, 2018

April 25, 2018

May 23, 2018

June 20, 2018

This schedule is subject to change due to unforeseen circumstances.

Please call the CCMHB/CCDDB office to confirm all meetings.

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DRAFT
2017-2018 MEETING SCHEDULE WITH SUBJECT AND
ALLOCATION TIMELINE AND PROCESS

The schedule provides the dates of board meetings for the Champaign County Developmental Disabilities Board. The subjects are not exclusive to any given meeting as other matters requiring Board review or action may also be addressed or may replace the subject listed. Study sessions may be scheduled throughout the year with the presentation and discussion held during the meeting or during a meeting of the Champaign County Mental Health Board. Included is a tentative schedule for the CCDDDB allocation process for Contract Year 2018 (July 1, 2017 – June 30, 2018).

<u>Timeline</u>	<u>Tasks</u>
07/12/17	Regular Board Meeting Approve Draft Budget Election of Officers
09/20/17	Regular Board Meeting
10/25/17	Regular Board Meeting Release Draft Three Year Plan 2016-2018 with FY18 Objectives Release Draft Contract Year 2019 Allocation Criteria
11/15/17	Regular Board Meeting Approve Three Year Plan with One Year Objectives Allocation Decision Support – CY19 Allocation Criteria
12/13/17	Public Notice to be published on or before this date, giving at least 21 day notice of application period.
12/13/17	Regular Board Meeting
01/05/18	Open CCMHB/CCDDDB Online System access to CCDDDB CY 2019 Agency Program and Financial Plan Application forms.
01/24/18	Regular Board Meeting Election of Officers
02/02/18	Online System Application deadline – System suspends applications at 4:30PM (CCDDDB close of business).
02/21/18	Regular Board Meeting List of Requests for CY19 Funding

03/21/18	Regular Board Meeting 2017 Annual Report
04/18/18	Program summaries released to Board, copies posted online with the CCDDDB April 25, 2018 Board meeting agenda
04/25/18	Regular Board Meeting Program Summaries Review and Discussion
05/14/18	Allocation recommendations released to Board, copies posted online with the CCDDDB May 23, 2018 Board meeting agenda.
05/23/18	Regular Board Meeting Allocation Decisions Authorize Contracts for CY19
06/20/18	Regular Board Meeting Approve FY19 Draft Budget
06/29/18	CY19 Contracts completed/First Payment Authorized

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CCMHB 2017-2018 Meeting Schedule

First Wednesday after the third Monday of each month--5:30 p.m.
Brookens Administrative Center
Lyle Shields Room
1776 E. Washington St., Urbana, IL (unless noted otherwise)

June 28, 2017 – study session

July 19, 2017

July 26, 2017 – tentative study session

September 20, 2017

October 18, 2017

November 15, 2017

December 13, 2017

January 17, 2018

February 21, 2018

March 21, 2018

April 18, 2018

May 23, 2018

June 20, 2018

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

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ACRONYMS

ABA	Applied Behavior Analysis
ADA	Americans with Disabilities Act
ADL	Activities of Daily Living
ASD	Autism Spectrum Disorders
CART	Clinical Administrative Review Team
CILA	Community Integrated Living Arrangement
CMS	Center for Medicaid & Medicare Services
DCFS	Department of Children and Family Services
DD	Developmental Disabilities
DDD	Division of Developmental Disabilities
DHS	Department of Human Services
DMH	Division of Mental Health
DPH	Department of Public Health
DRS	Division of Rehabilitation Services
DSCC	Division of Specialized Care for Children
DT	Developmental Training Day Program for adults
EI	Early Intervention (birth to 3)
HBS	Home Based Services
HFS	Department of Health Care and & Family Services (Public Aid)
HUD	Housing & Urban Development
ICAP	Inventory for Client and Agency Planning
ICF – DD	Intermediate Care Facility for Individuals with Developmental Disabilities
IDEA	Individual with Disabilities Education Act
IDPH	Illinois Department of Public Health
IEP	Individual Education Plan
ISBE	Illinois State Board of Education
ISC	Individual Service Coordination
ISP	Individual Support Plan
ISSA	Individual Service and Support Advocacy

OIG	Office of the Inspector General
PACKET	Information on paper going to Network Facilitator advocating your need for help
PAS	Pre-Admission Screening
PDD	Pervasive Developmental Disorder
POS	Purchase of Service funding method – fee for service
PUNS	Prioritization of Urgency of Need for Services (waiting list)
QA	Quality Assurance
QIDP	Qualified Intellectual Disabilities Professional
QSP	Qualified Support Professional
SEP	Supported Employment Program
SNAP	Supplemental Nutritional Assistance Program (food stamps)
SNT	Special Needs Trust
SODC	State Operated Developmental Center
SSA	Social Security Administration
SSDI	Social Security Disability Insurance
SSI	Supplemental Security Income
SST	Support Service Team
UCP	United Cerebral Palsy