



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, May 23, 2018

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. President's Comments – Ms. Deb Ruesch
6. Approval of CCDDB Board Meeting Minutes* **(pages 3-5)**

Minutes from 04/25/18 are included. Board action is requested.

7. Financial Information* **(page 6)**

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

8. New Business

A. Board Direction

This item supports board discussion of planning and funding. No action is requested.

- B. Staff Recommendations for FY2019 ID/DD Program Funding* **(pages 7-37)**

The packet includes: spreadsheet of requests for funding, from either the CCDDB or CCMHB, for ID/DD programs; agency responses to board questions; for approval, Decision Memorandum with staff

recommendations for FY19 funding for ID/DD programs; and a list of acronyms specific to CCDDDB/CCMHB application/reporting.

C. Successes and Other Agency Information

Funded program providers and self-advocates are invited to give oral reports on individuals' successes. At the chairperson's discretion, other agency information may be limited to five minutes per agency.

9. Old Business

A. Agency Third Quarter Reports (**pages 38-80**)

B. Meeting Schedules (**pages 81-84**)

Copies of CCDDDB and CCMHB meeting schedules and CCDDDB allocation process timeline are included in the packet for information.

C. Acronyms (**pages 85-86**)

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

10. CCMHB Input

11. Executive Director's Report – Lynn Canfield

12. Staff/Consultant Reports (**pages 87-92**)

Reports from Kim Bowdry, Stephanie Howard-Gallo, Shandra Summerville, and Barbara Bressner are included for information.

13. Board Announcements

14. 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 –April 25, 2018

DRAFT

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

DRAFT

8 a.m.

- MEMBERS PRESENT:** Cheryl Hanley-Maxwell, David Happ, Deb Ruesch
- MEMBERS EXCUSED:** Joyce Dill, Mike Smith
- STAFF PRESENT:** Kim Bowdry, Lynn Canfield, Mark Driscoll, Stephanie Howard-Gallo, Shandra Summerville, Chris Wilson
- OTHERS PRESENT:** Annette Becherer, Laura Bennett, Dale Morrissey, Vicki Tolf, Nicole Sikora, Felecia Gooler, Jennifer Carlson, Ron Bribriesco, Developmental Services Center (DSC); Kathy Kessler, Rosecrance; Amy Slagell, Diane Gordon, CU Able; Kyla Chantos, Becca Obuchowski, Community Choices; Katie Harmon, Lisa Benson, Regional Planning Commission (RPC); Reagan Carey, CTF Illinois; Dylan Boot, Jermaine Warren, PACE; Mark Sheldon, Cius Weibel, Champaign County; Jenny Niebrigge, United Cerebral Palsy (UCP)
-

CALL TO ORDER:

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

ROLL CALL:

Roll call was taken and a quorum was present.

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APPROVAL OF AGENDA:

The agenda was approved.

CITIZEN INPUT:

None.

PRESIDENT’S COMMENTS:

Deb Ruesch reviewed important current Senate bills that are of importance to the developmental/intellectual disabilities community.

APPROVAL OF CCDDDB MINUTES:

Minutes from the March 21, 2018 Board were included in the Board packet.

MOTION: Dr. Hanley-Maxwell moved to approve the minutes from the March 21st Board meeting. Mr. Happ seconded the motion. The motion passed.

FINANCIAL INFORMATION:

The claims report was included in the packet.

MOTION: Mr. Happ moved for approval of the claims report that was included in the Board packet. Dr. Hanley-Maxwell seconded. The motion passed.

NEW BUSINESS:

Board Direction:

There was no discussion.

Agency Requests for Funding FY2019:

Program summaries and reviews of the agencies Cultural and Linguistic Competence (CLC) Plans were included in the packet for review and comment. A spreadsheet of requests for funding was included as well. Ms. Ruesch provided a brief summary of the programs and any questions posed that could not be answered verbally will be given to the agency that provided the application. Questions will be provided to the agencies in writing and they will have until May 4, 2018 to respond.

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Successes:

No report.

OLD BUSINESS:

Meeting Schedules:

Copies of the CCDDDB and CCMHB meeting schedules were 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.

CCMHB Input:

The CCMHB will meet later today. Ms. Canfield reviewed the agenda items they will be discussing.

EXECUTIVE DIRECTOR'S REPORT:

Ms. Canfield reviewed important Senate bills.

STAFF REPORTS:

A staff report from Chris Wilson was included in the packet for review.

CONSULTANT REPORT:

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

AGENCY INFORMATION:

None.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 9:30 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo

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

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CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

5/04/18

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VENDOR NO	VENDOR NAME	TRN B	TR	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 108 DEVLPMNTL DISABILITY FUND											
*** DEPT NO. 050 DEVLMMNTL DISABILITY BOARD											
90	CHAMPAIGN COUNTY TREASURER								MENT HLTH BD FND 090		
		5/01/18	04	VR	108-	45	5/04/18	575492	108-050-533.07-00 PROFESSIONAL SERVICES	MAY ADMIN FEE	28,210.00
										VENDOR TOTAL	28,210.00 *
									DEVLMMNTL DISABILITY BOARD	DEPARTMENT TOTAL	28,210.00 *
									DEVLPMNTL DISABILITY FUND	FUND TOTAL	28,210.00 *
										REPORT TOTAL	69,630.95 *

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J.B.

ID/DD Program Funding Recommendations for FY2019									
July 1, 2018 thru June 30, 2019									
Agency	Program Name	Current Awards		Requests		Recommendations			
		PY18	PY18	PY19	PY19	PY19	PY19		
		DDB	MHB	DDB/MHB	DDB	MHB			
CTF Illinois	CTF Illinois Advocacy Center	\$60,000							
CTF Illinois	CTF Illinois Nursing	\$6,000							
Illinois Association of Microboards and Cooperatives	IAMC Building Inclusive Communities	\$52,750							
<i>Priority: Employment Services and Supports</i>									
Rosecrance Central Illinois	Coordination of Services: DD/MI	\$34,126		\$35,150.00	\$35,150.00				
Developmental Services Center	Service Coordination	\$410,838		\$423,163.00	\$410,838.00				
CCRPC - Community Services	Decision Support for CCDDDB/Person Centered Planning	\$86,460		\$119,629.00	\$119,629.00				
<i>Priority: Employment Services and Supports</i>									
United Cerebral Palsy Land of Lincoln	Vocational Services	\$34,590		\$34,590.00	\$34,590.00				
Developmental Services Center/Community Choices	M Employment First	\$80,000		\$80,000.00	\$80,000.00				
Developmental Services Center	Connections	\$85,000		\$85,000.00	\$85,000.00				
Developmental Services Center	M Community Employment	\$361,370		\$361,370.00	\$361,370.00				
Community Choices, Inc.	Customized Employment	\$74,103		\$87,000.00	\$87,000.00				
<i>Priority: Non-Work Community Life and Flexible Support</i>									
PACE	Consumer Control in Personal Support - NEW			\$22,800.00	\$21,000.00				
Developmental Services Center	Individual & Family Support		\$392,649	\$404,428.00	\$404,428.00				
Developmental Services Center	M Integrated/Site Based Services - Community 1st	\$799,090		\$799,091.00	\$799,000.00				
Developmental Services Center	Clinical Services	\$174,000		\$174,000.00	\$174,000.00				
Developmental Services Center	Apartment Services	\$417,341		\$429,861.00	\$429,861.00				
<i>Priority: Comprehensive Services & Supports for Young Children</i>									
Developmental Services Center	Family Development Center	\$562,280		\$562,280.00	\$562,280.00				
Champaign County Head Start/Early Head Start	Social Emotional Disabilities Svcs		\$55,645	\$73,605.00	\$73,605.00				
<i>Priority: Self-Advocacy and Family Support Organizations</i>									
PACE	Opportunities for Independence	\$40,546		\$49,000.00	\$49,000.00				
Community Choices, Inc.	Self-Determination Support		\$96,000	\$116,000.00	\$116,000.00				
Champaign County Down Syndrome Network	CC Down Syndrome Network	\$15,000		\$15,000.00	\$15,000.00				
CU Able	CU Able Community Outreach	\$13,802		\$15,285.00	\$15,285.00				
<i>Priority: Expansion of Independent Community Residential Opportunities</i>									
Community Choices, Inc.	Community Living		\$63,000	\$72,500.00	\$72,500.00				
CILA (now subtracted from totals)	CILA Expansion	50000	50000	100000	50,000	50,000			
TOTAL		\$3,307,296	\$607,294	\$3,959,752.00	\$3,309,651.00	\$635,885.00			
		total PY18 = \$3,914,590		total requests		total PY19 = \$3,945,536			
		with CILA = \$4,014,590		w/ CILA = \$4,059,752		w/ CILA = \$4,045,536			

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Champaign County Developmental Disabilities Board
FY19 Program Application Review
Agency Response to Board/Staff Questions
May 8, 2018

Agency responses to questions raised by Board members and staff can be found below. The questions are a compilation of those found in the Program Summary and questions submitted after the April 25, 2018 CCDDDB meeting.

CCRPC

Decision Support Person

- 1. It was noted that staff credential information was not included in our application. This information was included in the budget narrative.**

Salaries/Wages include direct salaries of staff members associated with Development Disabilities program activities. Transition Consultants will have a minimum of a Bachelor's degree and direct experience with transition planning. Case Managers are at least Bachelor-level. The Program Manager and Director are both licensed clinical social workers. The Program Manager and Case Managers are QIDP credentialed Qualified Intellectual Disabilities Professionals (QIDP). Volunteer college interns will be trained to do tasks as needed.

CC Head Start

Social-Emotional Disabilities Services

- 1. Why is the revenue from federal grant decreasing?**

The Head Start/Early Head Start grant has not decreased the overall funding level: expenses for the programming, especially salaries and benefits, have significantly increased. This results in less Federal money to help support the Social-Emotional Development Specialist position. Without the DD Board funding, we would not have a Social-Emotional Development Specialist to address the growing needs of children and families.

- 2. Why did the submitted CLC Plan format not align with the CLAS Standards?**

Although the Cultural Competency Committee revised the current CLC Plan to address the CLAS Standards, they did not reformat the plan. The committee will be meeting in May/June and will further refine the plan to align with the format provided.

Community Choices

Community Employment

- 1. Provide data on the assessed level of support needed for all who are served.**

Individuals we work with in our Employment department have a wide range of support needs and levels. In line with CCDDDB contract requirements, we use the PUNS criteria and I/DD diagnosis information as our eligibility determinations and do not complete an independent assessment of support needs. In our efforts to be person centered, we do not tend to give great emphasis or reliance on highly formalized or quantitative assessments such as IQ or ICAP scores. To provide supports, we instead focus on strength-based assessments which are embedded into our Discovery process.

The people that we work need support in a variety of areas. Some areas where support and training are frequently needed are, **communication skills** (how to interact with supervisors, co-workers, how and when to ask for help, how to handle frustration and interpersonal issues on the job, using communication aids), **scheduling and day planning** (checking and maintaining a schedule, using technology on or for the job, planning pre and post work routines), **developing routines on the job** (learning tasks, knowing what to do and when to do it, learning how use adaptive supports and technologies on the job), **transportation** (how to use the MTD, how to arrange back up transportation plans, how to connect with natural supports for rides, etc), and **coping skills** (how to handle difficult people, how to act professional, what to do when things don't go as expected on the job). This is by no means an exhaustive list, but does give a general sense of some of the support needs that we address with many participants in our employment program.

2. Do variations in per-person cost align with level of disability, support needs, and supports provided?

For this program/application, we have identified a goal of supporting 11 individuals to find 11 community-based paid or volunteer jobs. Once an individual has found a job we are able to then provide approximately 18 months of support. This type of long-term support is available for the 11 individuals supported to find jobs within the fiscal year, individuals we continue to support from prior years' job placements, and those individuals who received funding for job placement through DRS, but who need support beyond 90 days.

If we consider this funding as a per person cost, support to 11 individuals with job placement and coaching costs this contract \$7,909 per person. This compares to the \$6,772 that DRS Milestone contracts pay per person for job development. DRS funding does not include the time it takes to complete our discovery process or any support after the person has been on the job for 90 days – both areas that we believe are critical to supporting people with more complex support needs. The additional cost associated with this contract accounts for the longer-term and more in-depth support that we provide to individuals finding jobs within the contract fiscal year, as well as others we work with.

For individuals who have fewer support needs, we fund their job placement support through our DRS Milestone contract.

3. Are we accidentally emphasizing numbers-served to the exclusion of meeting the needs of people with greater disabilities?

The focus and emphasis of this program is to meet the need and desire of many people with disabilities to work independently in the community. Our employment supports are designed to do this in a way that first focuses on the skills, talents, and preferences of the people that we work with, and second on the expectation that people, with the right supports, will be able to work independently at their jobs. This is achieved through a combination of well matched job placements, intentional focus on building the individual's natural supports, and the continued guidance and support from our employment specialists in an advisory role as the person gains greater independence in their job. The number of people using and waiting for our employment support indicate that we are providing a greatly needed service to the residents of Champaign county who have intellectual and developmental disabilities.

Without a clear definition or criteria for “greater disabilities”, I will assume this means individuals who need indefinite, on-going support for both ADLs and most likely employment supports. Our department is made up of three employment specialists, one of whose positions is split between this work and work on our Employment 1st grant with DSC. With this limited staff resource capacity, it is true that we are not able to provide long-term one-on-one support to people on the job. We are open about this both here and when we communicate with our participants and potential participants.

We are also open to finding creative ways to provide that on-going support when the need is present. If individuals have access to HBS waiver personal support workers (PSWs), we will work with them to find and train a PSW to take over some of that on-going support as our employment specialist fades back. We have also been working to partner with an area CILA provider to take over some of the on-going support for individuals once they are comfortable and acclimated to their jobs. Overall though, we have found that many people we have worked with are able to build greater independence at their jobs than they or their families had previously expected. For example:

- We have supported one individual with limited verbal communication to work 20 hours per week with almost no on-the-job support for over 3 years.
- We worked an individual coming out of high school at a job which her vocational coordinator and 1:1 aid both felt she would need on-going on-the-job support. By working with her and her team, we were able fade back to weekly check-ins within two months.
- We worked with a participant who has a medical condition that needs on-going monitoring as well as considerable support needs. We were able to find a placement where the supervisor was understanding to potential medical concerns and support needs. Over the course of one year, we have been able to fade back support from 100% support and step-by-step prompting throughout his job, to just weekly visits.

To answer the question directly, yes, we do use “numbers served” as one empirical evaluation of if the services the CCDDDB is paying for are successful. And no, we do not think that by providing services with our model that we are excluding individuals with higher support needs from employment and support options. On the contrary, the more people who we support in finding and keeping community-based employment, the greater the capacity is for all people with I/DD to access a wider range of employment options and environments.

Questions for Program Summaries:

How many people are supported at one time [by a CC Employment Specialist]?

There is not one set number of people that each Employment Specialist supports at one time. Because participants have different support needs, we keep caseload numbers somewhat flexible. In general, each of our full time ES staff work are supporting 1-2 individuals in the discovery phase of our support, 3-4 people in the development phase, and 7-8 in the job coaching and long term support phases. If someone is working with an individual who needs more in depth support they might work with fewer other participants, or vice versa if individuals they are working with are more independent.

DRS criteria?

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DRS eligibility criteria are more open than waiver or CCDD/MHB funding. DRS requires that the person have a diagnosed disability (they work with people who have a wide variety of disabilities beyond just developmental). We partner with them to support people who have a I/DD diagnosis. People with I/DD funded through DRS do not need to be on the PUNS list in order to access services. Their other criteria is that the person be willing and able to work approximately 20 hours per week.

A Note about Budget Surplus:

Within the Program Summaries it is noted that all CC programs are running at a surplus – a total of \$10,972 for the organization. It is important to look at this surplus in the context of the whole budget. Except for our grant from the ICDD (36K next year), all our other sources of revenue are variable – coming from fee for service contracts with the State of IL, fundraising revenue, or private pay participants. As such they are best case scenario projections of the revenue budget. Because of this, a surplus is built into the overall organizational budget to ensure that all program expenses can be funded even if things do not go as planned. If you were to remove the fundraising contribution portion of each department's budget, for example, all the programs would be running at a deficit.

Developmental Services Center

Question in most program summaries: Attendance at IEPs?

DSC staff work closely with ISC/RPC but are responsive to family requests and typically become involved much sooner than the last year of high school. DSC does not bill CCDDDB for attendance at IEPs.

Clinical Services:

1. Question on who accesses services?

All people receiving support through the Clinical Services Program meet DHS' definition of I/DD as affirmed by RPC PUNS enrollment.

Community Employment:

1. What is the average IQ score of those funded by DDB?

The average IQ score is 61. However, many factors need to be considered and addressed when providing job support which will greatly affect the type and length of support needed outside of a person's IQ score. For instance, a person's work ethic, other diagnoses, the needs of the business, and the complications of each job.

2. Provide data on assessed level of support needed for all who are served. Each person's level of support is assessed annually and speaks to identified strengths, support needs, natural supports and accommodations, as well as current areas of professional growth and interventions currently being used to address these areas.

3. Do variations in per-person cost align with level of disability, support needs, and supports provided? The level of support provided is aligned with the support needs of each person. Although we have found that the learning curve for individuals with lower cognitive functioning is a longer process there is no direct correlation between levels of on-going

support and the person's IQ. Many factors contribute to the amount of support needed to help a person maintain their job including changes in supervisors, changing responsibilities, chaotic work environment, addition of new responsibilities, complexity of the job, work ethic of the individual, and in many cases computerized company training that requires regular support from the job coach to complete.

4. **Are we accidentally emphasizing numbers served to the exclusion of meeting the needs of people with greater disabilities?** Any time there is a requisite number of people to be served, as a service provider, we are very conscious of meeting expectations of funders, and so there is a risk of a greater emphasis on numbers rather than individuals. We have shared in CCDDDB meetings that as we continue the process of assisting people with greater support needs (not based on IQ) currently participating in our in-house programs in their pursuit of employment, the amount of initial support during the job search and length of on-going support needed for each person following employment will likely continue to increase. One of the challenges we face is how to balance increased needs for long term job coaching in addition to a potentially lengthier process of identifying good job matches for people. The addition of the Supported Employment Specialist is one way we are addressing this issue as is the addition of Job Club.

Community First:

1. **The cost of production is not explained in the budget narrative.**
The cost of production reflects the materials (cardboard, soap, etc.) and other costs associated with the production of goods.
2. **Should client wages show a decrease since people are spending more time in the community?** Yes, we do expect client wages to decrease over time.
3. **Provide data on assessed level of support needed for all who are served.**
Activities/groups are decided upon by the voiced interests of those receiving support. People are then paired by those expressed interests and staffing patterns are designed for each group also taking into consideration the complexity of the chosen activity.
4. **Do variations in per-person cost align with level of disability, support needs, and supports provided?**
Variations in per-person costs are directly related to level of participation in the program. Participation is voluntary and based on the person's interest in groups and activities offered. Groups and activities are typically three to four months in length so the number of hours a person participates may vary, depending on the number of groups they participate in.
5. **Are we accidentally emphasizing numbers served to the exclusion of meeting the needs of people with greater disabilities?**
As stated in the Community Employment response, any time there is a requisite number of people to be served, as a service provider, we are very conscious of meeting expectations of funders, and so there is a risk of a greater emphasis on numbers rather than individuals. The goal of this program is to connect people with their community, so in addition to shared interests, group size is a factor. The average group size is no more than four to five people, a level that would be natural for any group of friends who may get together.

6. **How much of this and other proposed program expenses go toward the sheltered workshop building? It is important to have offices and physical space for day programming, so this is a clarifying question on how funds are used.**

Example costs include: Personnel costs for maintenance of the facility; Occupancy, including property insurance, utilities for Clark Road facility, and building and grounds maintenance for Clark Facility; rent for Clark Road building and telephone, internet, and office supplies for the facility. Expenses are allocated based on square footage used by programs located at the facility.

7. **What goes into the Cost of Production?**

The cost of production reflects the materials (cardboard, soap, et) and other costs associated with the production of goods.

Connections:

1. **Are any grants available through City of Champaign to fund this project?**

We will continue to explore available grants and to strengthen our relationship with the local Arts Council.

2. **Can other Champaign County artists with ID/DD who don't receive services from DSC also showcase their art there?**

Although *The Crow at 110* won't be an art gallery, there are plans to provide space to showcase the work of community artists. We anticipate using the same model as other public venues who provide these opportunities for local artists. Space is available for specified lengths of time established by the venue and the cost of showing work is typically 20% of the proceeds of any art sold. The length of each showing will probably be one week. We also anticipate hosting art shows which would be open to artists who want to display their work.

3. **Can funding from Community Day Services fund any of this program?**

The current focus is to provide activities for those without state funding. DDB funding is the difference between someone being on a wait list due to no funding and being actively engaged in services.

Employment First:

1. **Are any grants available through the cities/townships to help support this program?**

Other grant opportunities continue to be explored.

2. **Is there a plan to provide another type of training, once employers and family members are up to speed with current training?**

Meetings with staff from both DSC and Community Choices are held quarterly and include on-going assessment of services provided to families and the business community. A focus group consisting of businesses who have been involved in the LEAP training was held in November 2017 to garner feedback about LEAP and how we could continue to meet the

needs of the local business community. Questions included the value of diversity and inclusion in their place of employment, benefits they have seen since hiring someone with a disability, how the LEAP team could do a better job of creating trust, how LEAP could be more helpful in supporting their efforts to be more inclusive, etc. As a result of the focus group: 1) a quarterly newsletter including information about the disability community and employment of people with ID/DD will be provided for employers; 2) One lunch and learn meeting will be arranged providing an opportunity for employers to learn from service providers as well as each other. We will reach out to the local Chambers of Commerce for collaboration on this project. We have also found that the best attended family informational meetings were those showcasing panels of families or individuals with disabilities and their personal experiences. As a result, two informational meetings including panels will be provided for individuals currently participating in day program, on waiting list for services and those transitioning from high school. Families will be surveyed to determine what they know/need to know about services in Champaign County to assist in choosing meeting topics.

Individual and Family Support:

- 1. If a family or individual choose to hire an independent contractor, is the referral/intake process different?**

The referral/intake process is not different whether the family chooses their own provider or asks DSC to assist in finding one.

- 2. How many choose that option?**

Most families using respite hours choose their own providers be it an aide from school or a family friend – someone the person is already familiar with.

Service Coordination:

- 1. How does agency know that website is reaching people in rural communities? Is there evidence that the website is reaching rural communities more than in-town people?**

We do receive some inquiries directly through the website. Additionally, 24% of those funded by DDB live outside Champaign-Urbana.

- 2. How many people are being reached through IEPs? How many of these people are accessing services when they age out of ISBE services? How many people/families have requested presence at IEPs? Can the schools or ISC share the information offered at IEP meetings?**

So far in FY 18, DSC staff have attended 14 IEPS. None of these students have accessed services as all are still in school. DDB does not pay for attendance at IEPS. DSC staff attend IEPs if requested by families.

- 3. How has the role of the Case Coordinator/QIDP changed since the ISC is writing the person centered plan?**

As the Director of Case Management and Family Support for DSC, it is clear to me that the writing of the Person-Centered Plan is but a very small component of the Case Coordinator/QIDP's job responsibilities. DSC's Person-Centered Plans begin with assessments and interviews conducted by Program Writers and Managers who know and

support a given individual in our day program for over 1000 hours per year. The DHS PCP Discovery process is completed primarily by an Individual Service Coordinator who may or may not have met the client before the discovery meeting and may spend as few as 10 or 12 hours per year in direct contact with the given waiver-funded individual. Collaboration with the ISCs and DSC's focus on relationships for service delivery lends credence to both functions/roles.

At DSC, upon completion of the assessments and interviews, the Case Coordinator/QIDP reviews and synthesizes the assessment and interview information to be included in the Individual Service Plan (ISP). At this point the Case Coordinator/QIDP schedules and facilitates an annual team meeting with the CCDDDB-funded individual's team, which includes the person and their parent or guardian, and/or other significant community members the person chooses to invite, along with DSC team members. The purpose of the annual meeting is support the individual in planning their life for the coming year. The meeting provides a positive forum to exchange ideas and design goals and strategies to support the individual to meet the outcomes they wish to achieve. DSC's DHS/PCP Implementation Strategy was designed and formatted in a manner that is very similar to DSC's Individual Service Plan utilized for CCDDDB-funded individuals. Again, in contrast to the new DHS/Person-Centered Planning process, it is common practice to hold an annual meeting for each CCDDDB-funded individual. However, there is no annual meeting required for DHS Waiver-funded individuals served by DSC. DSC continues to hold an annual team meeting for each individual served, regardless of funding source per its commitment to person-centered planning. Therefore, the time necessary to develop and write a CCDDDB Individual Service Plan or DSC Implementation Strategy, plan and facilitate an annual DSC team meeting is still very significant. Of course, both the Individual Service Plan and Implementation Strategy require a great deal of time with each person and their team along with all subsequent documentation required of DSC Case Coordinators/QIDPs.

In reality, the coordination, design, and documentation of Individual Service Plans and Implementation Strategies are both very time consuming. The Service Coordination/QIDP responsibilities involved in the development of DHS PCP Implementation Strategies are actually more time consuming now than the development of CCDDDB Individual Service Plans, as the new DHS PCP process responsibilities are more dispersed among the responsible parties at ISC and DSC. Therefore, the new DHS PCP process demands a significant increase in collaboration and coordination.

To be clear, there is a time saving factor resulting from the DHS PCP process, however, the time saving aspect is in regard to the Discovery component completed by our local ISC agency for DSC's waiver-funded individuals. This discovery component is similar in function to DSC's assessment and client interview procedure completed by DSC Program Writers and Program Managers for our CCDDDB service recipients. Therefore, the time saving is the consequence of the ISC representatives completing the discovery process for our waiver-funded individuals, which results in fewer assessments and interviews required of DSC's

Program Writers and Managers but does not significantly reduce the work required of Case Coordinators/QIDPs.

4. What are the differences in the Implementation Strategy and the former ISP written by DSC staff?

The attached Implementation Strategy template draft is the DSC Case Coordinator component of the new state PCP process.

5. Can specific “progress” be defined?

DSC has not transitioned to the DHS PCP model and format for everyone as the state is still making changes to the process that was initiated on 7-1-2017. DSC is still utilizing the Individual Service Plan model for individuals funded by CCDDDB affording DSC measurable outcomes for each person via their ISP. Individuals and families continue to provide significant input and exercise choice during their annual meetings and in the development of the plans and desired outcomes.

6. OT charged to grant?

Refers to overtime hours worked by Case Coordinators.

7. Why is a Residential Instructor charged to SC program?

This is an error. The RI – Clark listed should have been the RN Clark.

8. What services are provided outside the scope of the allowed nursing supports in a CILA award?

The DSC nurse also provides services and supports to those funded by DDB in the various programs as needed, i.e. consultation, assessment, emergency response, etc.

9. How many people who go through Intake then receive services through this program or others?

The number of people opened in any given program depends upon the capacity to provide the needed supports and services.

10. Once Admissions agrees to admit, how long do people wait for services?

The length of wait depends upon if the requested program is at capacity and also the support needs required by the person. We need to make sure that our staff to client ratios can support each person safely. Currently, most people on DSC wait lists are still in school and/or not ready for independent living.

11. How many people are admitted/declined, what services are requested, and what do they ultimately receive?

DSC receives requests for all offered programs. If an opening is not available, they often typically request to be added to the wait list. The individual is also informed of other community resources.

12. Why might a person be declined?

A person might be declined for services if they do not have a ID/DD diagnosis or they do not qualify for the PUNS list, do not reside in Champaign County, or pose a health and

safety concern for themselves or others.

13. Justify the cost per person served.

Support varies per month per person. The range is significant as services are unique to each person. Family and natural support is encouraged and pursued when available and appropriate. There are many people in the program that have little to no family support. An emergency response system is available to all individuals after hours and on the weekends.

PACE

Consumer Control in Personal Support

1. Would these PSWs work for people with ID/DD who private pay?

Yes, the PSW could work for any consumer from Champaign County. The idea of the orientation (and this program in general) is for the PSW to learn--consumer control, disability awareness, and the tasks of being a PSW. The concept is for the PSW to learn skills which will hopefully assist them in developing a more collaborative relationship between themselves, and the person with I/DD (and their family). Our belief, is that this enhanced understanding of these key concepts from the PSW can lead to more long-term and fulfilling Consumer-PSW relationships.

2. Would the agency consider becoming a DHS-DDD participating provider and service facilitator, in order to serve more people who have ID/DD?

Yes, PACE would definitely consider (and are planning on) pursuing funding from DHS-DDD to provide service facilitation. In the interim, services to individuals with I/DD (and their families) will be provided under other funding sources (non-CCDDB) which PACE maintains.

3. Is this an option for people/families without DHS-DDD waiver funding who may be interested in private paying PSWs?

Yes, our current program provides services to people in need of Personal Assistants. The majority of our consumers receive funding from the Department of Human Services, Home Services Program to pay for their Personal Assistant, but we do have some consumers whom private pay their PAs. People utilizing the Personal Support Worker portion of the program who are planning to private pay will still be able to utilize the referral list and other services with other funding sources.

4. How will potential PSWs who don't reside in Champaign County be addressed?

Potential PSWs that don't reside in Champaign County will have the opportunity to attend PACE's Personal Assistant Orientations which occur in Douglas, Edgar, Piatt, and Vermilion counties. Though these orientations will be almost exclusively focused on being a Personal Assistant, attendees will be informed of the potential to go through an orientation to work as a PSW.

5. Is there an option for private pay if a Champaign County resident with I/DD wants a person from outside of Champaign County to complete the PSW training?

Individuals and families wishing to private pay a PSW, will have access to our list, just as consumers private paying a Personal Assistant can utilize our list.

6. Does CCDDDB eligibility checklist include PUNS enrollment/eligibility determination by ISC?

When providing services to DDB eligible consumers who do sign up for our other services (but will not be receiving services defined as service facilitation), they complete a checklist which does include the information necessary for the ISC to make initial determination/contact with consumer.

7. What is the screening for Medicaid eligibility?

8. Unclear, NTPCs appear to be PSWs. Does the program target or directly connect to participants who are eligible for DDB funding?

The funding for this portion of the program would not provide “direct” services to consumers with DDB funding. The goal of this portion of the program is to build a referral list of PSWs which have been through an orientation which focuses on developing key skills which we believe can lead to longer-term, and beneficial Consumer-PSW partnerships. Funding to provide services to DDB eligible consumers will be sought directly from DHS-DDD, and will be provided in the meantime with other funding PACE already maintains.

Opportunities for Independence

1. In school groups, how are supports for ineligible students maintained separately from CCDDDB eligible students? Are students referred and enrolled in PUNS?

Coordination with ISC? Program customizes services for each school to avoid duplication, why aren't schools addressing all areas? Below is lightly edited, is any outreach done for group or individual meetings for ILS and Job Readiness?

All students are entered into our system, and then we inform ISC. ISC then tells us whether they are already funded, and if not, they meet with the student and parents to get them enrolled. If they are found ineligible for CCDDDB services, we serve them with our largest ILU grant.

The Independent Living Philosophy with which PACE empowers consumers holds that—peer modeling, consumer control, and self/systems advocacy are key factors toward independence for People with Disabilities. In the educational context, developing the hard-skills of cooking, cleaning, and other like skills is seen as paramount, while the soft-skills of philosophy, advocacy, and accessing of resources are not topics which are covered.. When combined with the peer-modeling facet, these lessons are able to have a significant impact on the students. And thus, rather than it not being something the schools can't address, it's something they aren't in the best position to address.

The ILS mainly advertises the job-readiness and Independent Living services primarily through networking. The ILS is deeply involved in the Transition Planning Council (TPC), and the DisABILITY Expo planning process. Through these venues, and interactions with organizations like Community Choices, the ILS is engaged in doing outreach to targeted populations. As an organization, PACE maintains a presence at transition conferences, expos, and other public events where consumers can find out about our services.

2. Does “CCDDDB eligibility checklist” include PUNS enrollment/eligibility determination by ISC? What is the screening for Medicaid eligibility?

The paperwork for this program mirrors the qualifying documentation for PUNS/Medicaid.

3. How are services for CCDDDB-ineligible people tracked in order to charge them to the other revenue source?

In our consumer database, we apply the funding sources for services to consumers. When a student is CCDDDB eligible, we code the funding source as "CCDDDB." And when they don't qualify, we code them as "ILU," which is our general services contract which we have with the State of Illinois.-+

4. Please edit application to reflect organizations definitions. Hours per service activity are captured in the online claims reports, so that SCs need not be a report of hours but rather of discrete contacts.

In previous years, PACE had unintentionally used the "Service Contact" goal to reflect Service Hours. The drop from 500 to 125 in this target reflects the transition to putting the number of contacts instead of the number of hours.

This Service Hours measure is now being captured in the "other" line of Part 2, and the target is 500 for FY19, just as in FY18." This explanation should hopefully provide the definitions being sought.

Rosecrance

Coordination of Services: DD/MI

1. Clinician should ensure clients are enrolled in PUNS database, DHS-DD eligibility and coordination of servicers.

This is part of our screening process of new clients referred to these services. If it is determined that the client is eligible for PUNS, the Clinician regularly checks with ISC to ensure they are enrolled in PUNS. If not, she works with the client and family in getting set up with ISC and helping them gather all needed documentation for the PUNS application.

2. Access section appears to require that individuals have Medicaid to pay for this program, but this would be a disqualifier for CCDDDB funding; perhaps this is an error.

This was an error which Juli Kartel discussed with Kim and Lynn on 4-20-18 per a telephone consultation. We refer these clients to Kathy Finley, Benefit Case Manager, to help obtain benefits if they do not have them and are determined eligible.

3. Does the application warrant that CCDDDB funding will not supplement Medicaid?

Yes. Clients do not have to have Medicaid to be eligible for services. Those clients not enrolled in Medicaid would be assisted by Kathy Finley, Benefits Case Manager, to apply for Medicaid – if determined eligible.

4. Sample Centered Planning documents should be provided to CCDDDB for contract file.

We have a document that Christine Kline has created entitled Person-Centered Planning Discovery and Strengths Assessment that will be utilized with clients to help determine their specific needs around which services will be tailored. We will be happy to provide a copy for the contract file.

- 5. Program should coordinate with CCRPC ISC to determine eligibility and ensure people are enrolled in PUNS database.**

See the first point above. This continues to be done as part of our new client screening process for this service.

- 6. Service level claims for each client should be entered into the on-line reporting system.**

This information has been downloaded for the past FY, and we are continuing to work out the bugs between the consultant, CCDDDB, and our IT department here at Rosecrance.

- 7. The program may owe excess revenue for the current year, related to staff vacancy.**

Clients in this service continued to be seen during the first quarter by Kathy Kessler, Diane Dailey, and Ed Hawkes during the vacancy and transition period.

UCP Land of Lincoln

Vocational Services

- 1. Is there a fading plan for job support services?**

Yes, there is a fading plan for every person in the program as the ultimate goal of the program is total independence for the individual on the job. While the plan may not be formal, it is very person-centered and is customized to each person in the program. UCP is always connecting to employers and educating on natural supports.

- 2. How many people choose the janitorial program?**

Currently, there are no participants utilizing the janitorial program.

- 3. Provide data on the assessed level of support needed for all who are served.**

When participants enter the program, vocational assessments are done to determine their abilities, likes/dislikes, strengths and needs and what type of jobs interest them. All participants go through some type of vocational training to prepare them for their potential job – the level of training depends on the level of support they require. During this training, vocational staff work with individuals on social skills training, communication with co-workers, resume development, interviewing skills, personal hygiene, money-management, job preparation and development. At this time, vocational staff assess the level of support that the individuals require to complete this training. Once participants start a job, a Job Coach is with them full-time for the first 2 weeks to help them get acclimated to their job. During this time, the Job Coach and Job Development Supervisor complete an informal on-the-job assessment to determine how much support is needed going forward. All services are individualized and person-centered and vary in the amount of support each person receives. UCP is constantly examining when to start the fading plan for each person as the ultimate goal is independence on the job for each individual, but we want to make sure natural supports are in place.

4. Do variations in per-person cost align with level of disability, support needs and supports provided?

Yes – each person receives person-centered services based on his/her strengths and needs.

5. Are we accidentally emphasizing numbers served to the exclusion of meeting the needs of people with greater disabilities?

UCP continues to have openings in the program and has been reaching out to other organizations to let them know about the program – especially if other agencies have waiting lists and individuals do not want to wait, they can receive services sooner through our program. We are not excluding anyone with greater needs as we are trying to recruit more people to enter the program.



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

DECISION MEMORANDUM

DATE: May 23, 2018
TO: Members, Champaign County Developmental Disabilities Board
FROM: Lynn Canfield, Executive Director
SUBJECT: STAFF RECOMMENDATIONS FOR FY19 FUNDING

Purpose

The purpose of this memorandum is to offer to the Champaign County Developmental Disabilities Board (CCDDDB) members a set of staff recommendations for FY2019 (July 1, 2018 through June 30, 2019) funding allocations. These are based on a thorough evaluation of applications using decision support criteria approved by the CCDDDB in December 2017. The final funding decisions rest solely with the CCDDDB and their judgment concerning the most appropriate use of available dollars, based on community needs and decision-support match up. Applicants do not respond to a common set of specifications but instead request funding to address a variety of intellectual and developmental disabilities service and support needs. Evaluation is more difficult than conducting a Request for Proposals (RFP). The nature and scope of applications vary so that a numerical rating/selection methodology is not relevant. Our focus is on best value to the community, based on a combination of cost and non-cost factors, and will reflect an integrated assessment of the relative merits of applications using criteria and priorities approved by the CCDDDB. In the event the applications are not sufficiently responsive to criteria and priorities described in this memorandum, the CCDDDB may choose to set aside funding to support RFPs with more prescriptive specifications.

While a formal community needs assessment is underway, and its conclusions not yet public, the CCDDDB received input at their February 21, 2018 meeting from a group of self-advocates who train organizations on interviewing and hiring staff. Their advice is to: promote dignity and respect; teach staff accountability; listen to problems; discuss with the people who participate in a service; encourage people to become valued members of their community.

Statutory Authority

The CCDDDB funding policies are based on requirements of the County Care for Persons with Developmental Disabilities Act (55 ILCS 105/ Section 0.01 et. seq). All funds shall be allocated within the intent of the controlling act, as codified in the laws of the State of Illinois. CCDDDB Funding Guidelines require annual review of the decision support criteria and priorities to be used in the funding allocation process. Upon approval by the Board, this memorandum shall become an addendum to the CCDDDB Funding Guidelines incorporated in standard operating procedures.

The Operating Environment

The future of health care, especially publicly funded insurance, remains uncertain. Legislative and budget decisions impacting the Affordable Care Act could have devastating near-term and long-term

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effects on Illinois, on Champaign County, and on people who have intellectual/developmental disabilities. Long term supports and services are primarily Medicaid funded. Changes in the enforcement of rules will likely result in increased cost or decreased coverage. The limitations of state appropriations and the uncertain futures of public and private insurance impact services.

Illinois' Medicaid reimbursement rates remain well below the actual cost of their covered services. This has become a central issue in the state's Olmstead ADA case, *Ligas v. Hamos* in which, most recently, the federal judge agreed with the court monitor that Illinois is out of compliance with the consent decree, in part due to these rates. Because the rate paid for each service is inclusive and taken as payment in full, providers cannot charge more for a covered service to an eligible client or accept a third-party payment. Inadequate rates and outdated rules have made it difficult for community-based providers to meet the needs of people who use Medicaid and waiver services. The damage includes a well-known and growing workforce shortage. If Medicaid Managed Care comes to include DD services, we expect additional challenges to providers, insured persons, and funders.

As the State of Illinois has shifted its investments from grant contracts to DD waiver programs to capture federal matching revenue, the limitations of the waivers and rates and the changing requirements of Medicaid have impacted how local funding can best support the people it is intended to serve. Many eligible residents of Champaign County do not yet have Medicaid waiver funding through the state, so their enrollment in the PUNS database not only lets the state know who is waiting but also creates an opportunity to establish their eligibility, justifying the use of local funding to provide relief for those waiting. The CCDDDB will work with traditional and non-traditional providers to identify services not covered by Medicaid or the DD waivers but which have been identified by people with I/DD in their person-centered service and support plans and which improve outcomes for individuals and promote a healthier, more inclusive community.

Expectations for Minimal Responsiveness:

Applications that do not meet the expectations below are “non-responsive” and will not be considered for funding. All agencies must be registered using the online system. The application must be completed using this system, with all required portions completed by the posted deadline. Accessible documents and technical assistance, limited to navigation of the online tools, are available upon request through the CCDDDB office.

1. Eligible Applicant, based on completion of the Organization Eligibility Questionnaire.
2. Compliance with application deadline. *Late applications will not be accepted.*
3. Application must relate directly to intellectual/developmental disabilities programs, services, and supports. How will it improve the quality of life for persons with I/DD, including those with co-occurring conditions helped by treatment?
4. Application must be appropriate to this funding source, providing evidence that other funding sources are not available to support this program/service or are maximized. Other potential sources of support should be identified and explored.

Overarching Priorities:

Inclusion and Integration

All applications for CCDDDB funding should reflect movement toward community integration and away from segregated services and settings. Fullest inclusion aligns with changes in the regulations governing the Center for Medicare and Medicaid Services (CMS) Home and Community Based Services, implementation of Workforce Innovation and Opportunity Act provisions, and Department of Justice Olmstead findings.

In a self-determined, integrated system, with various types of support:

- people control their day, what they do and where, and with whom they interact;
- people building connections to their community as they choose, for work, play, learning, and more, in places other community members use and at the same times they use them;
- people create and use networks of support consisting of friends, family, community members with similar interests, and allies they choose;
- and people advocate for themselves, make informed choices, control their own service plans, and pursue their own aims.

The majority of funded I/DD programs will be required to report on specific services delivered, demonstrating the complicated service mix and utilization patterns. Applications will also be required to include measurable objectives, goals, and timelines.

Underserved/Underrepresented Populations and Countywide Access

Programs should promote access for underserved/underrepresented populations as identified in the Surgeon General's Report on Mental Health: Culture, Race, and Ethnicity and according to the federal Substance Abuse and Mental Health Services Administration (SAMHSA). A Cultural and Linguistic Competence Plan is required of each applicant organization, and the online system holds a template aligned with requirements of Illinois Department of Human Services. The template has been modified for PY2019 so that an agency may include activities consistent with the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS Standards.) Applications should address earlier, more accurate identification of I/DD in underrepresented populations, as well as reduction of racial disparities in the utilization of services. Members of underserved minority populations and people living in rural areas should have the opportunity to use quality services; outreach strategies should be identified.

Inclusion and Anti-Stigma

Applications should describe how the program contributes to reduction of the stigma associated with I/DD. Stigma limits people's participation in their communities, inhibits economic self-sufficiency, and increases personal vulnerability. It may even be a cause of declining State and federal support. The personal cost of stigma is mirrored by the cost to our communities. The CCDDDB is interested in creative approaches toward increasing community awareness and access, promoting inclusion and respect, and challenging negative attitudes and discriminatory practices.

Outcomes

Each application's program plan narrative will identify measures of access for people seeking to participate in the program and outcomes which will result from this participation. Because defining and measuring valuable outcomes is challenging, an 'outcome measure bank' and a reporting template are now available online. Organizations which are required to report on particular outcomes to other funders may consider including those outcomes, if relevant, in the application for CCDDDB funding.

Coordinated System

Without a central location for all services and all providers, and given the known limitations of online resource guides, applications should address awareness of other possible resources for people and how they might be linked. Examples include collaboration with other providers and

stakeholders (schools, support groups, hospitals, advocates, etc.), including distributing information regarding another agency's similar services with individuals on waiting lists and a commitment to updating information about the program in any resource directories.

Budget and Program Connectedness

Applications will include a completed Budget Narrative section, explaining the relationship between anticipated costs and program components. Clarity about what the board is buying will include detail about the relevance of all expenses, including indirect costs. Per the Board's approved funding guidelines, rationale should be explicit, describing the relationship between indirect costs and the value of the proposed program. Programs which offer services billable to Medicaid should identify non-billable activities and the associated costs to be charged to the CCDDDB. While these funds should not pay for service activities or supports billable to another payor, the Board has an interest in programs taking advantage of multiple resources in order to secure long-term sustainability.

Person Centered Planning (PCP)

Applications should reference a PCP process aligned with DHS guidelines for PCP. **The Person Centered process** can be described as finding the balance between what is important to a person and what is important for a person. It is a way to identify strengths, preferences, needs (both clinical and support needs), and desired outcomes of a person. Person Centered Planning includes the Discovery Tool and process, the Personal Plan, and Implementation Strategies and must:

- be driven by the person;
- ensure that service delivery reflects personal preferences and choices;
- include evidence that setting is chosen by the individual;
- assist to achieve personally defined outcomes in the most integrated setting;
- contribute to the health and welfare of the person receiving services;
- include opportunities to seek employment and work in competitive integrated settings, if employment is desired;
- include opportunities to engage in community life, control personal resources, and receive services in the community to the same degree of access as those not receiving Medicaid Home and Community Based Services, if such opportunities are desired;
- include risk factors and measures to minimize risk;
- be written in plain language that can be understood by the person who receives services and their guardian;
- reflect cultural considerations;
- and include strategies for solving disagreements.

To the extent possible, CCDDDB funding will be associated with people rather than programs and will focus on PCP-driven supports and services. Case management supports should be documented in a personal plan, which is directed by the person receiving services and reflects DHS guidelines for the Person-centered Plan.

Workforce Development and Stability

The board's investments in other priorities are contingent on a stable and qualified workforce. The challenges to attracting and retaining this workforce follow from Illinois' inadequate investment in community-based services, in particular through low Medicaid rates. During 2017, a wage increase was approved and incorporated into the rates; this small step toward strengthening the workforce is

important but may not be enough. Communities across the country, including those with somewhat healthier I/DD investments, struggle with the workforce shortage. The board seeks to emphasize efforts to reward this important work with competitive wages and advancement opportunities. Applications should propose creative solutions for recruitment and retention of direct support staff. Systemic problems associated with the workforce shortage include:

- gaps in coverage, disruption of care, and high turnover interfere with the development of positive relationships between staff and people who use services;
- capacity cannot be expanded without a much larger direct support staff workforce, so that even those selected from PUNS for Medicaid-waiver awards struggle to find providers;
- turnover has significant associated costs in recruitment and hiring activities, overtime pay during shortages, and training of new staff;
- agencies and programs compete to keep direct support staff as the need for their services increases in other systems (e.g., care of older citizens.)

FY2019 CCDDDB Priorities:

Priority: Linkage and Advocacy for People with Intellectual and Developmental Disabilities

The CCDDDB will support advocacy efforts to connect people who have I/DD to appropriate state funding. Conflict-free Case Management is a requirement for all Home and Community Based Services, and intensive case management services have demonstrated value for people with I/DD as they define their own goals and how to achieve them. As the DD population continues to age and people have more complex support needs or have co-occurring conditions, applications which reflect more intensive case management supports will be prioritized. Applications should include meaningful measures of outcomes, such as people receiving the benefit, service, or support requested as a result of agency provided linkage and referral activity. Advocacy, linkage, and other service coordination activities should have minimal or no conflict of interest. In addition, with the established ongoing success of the disAbility Resource Expo, applications to coordinate the planning, implementation, and evaluation of the event will be considered.

Priority: Employment Services and Supports

Applications featuring job development and matching, job coaching, job skills training in the community work settings, and innovative employment supports will be prioritized. These should incorporate recommended or innovative practices, the principles of Employment First, and a focus on people's specific employment aspirations and abilities, in the most integrated community settings possible. Community employers who understand the benefits of employing people who have I/DD may be identified and cultivated to successfully employ people who have disabilities. Applications for employment supports should be associated with measures of outcome such as increased hours, promotion, new job, new job skills achieved as a result of the support, or number of individuals placed with community employers who have completed LEAP certification.

Priority: Non-Work Community Life and Flexible Support

Applications emphasizing flexible support for people with I/DD, to stabilize home life in person-centered, family-driven, and culturally appropriate ways, and those emphasizing social and community integration for people with I/DD and behavioral or physical support needs will be prioritized. Selected by the person, supports for success may include: assistive technology and accessibility supports; speech or occupational therapy; respite; personal care support; independent

living skills training; social, communication, or functional academics skills development; vocational training; facilitation of social and volunteer opportunities; transportation assistance; community education and recreation, health and fitness, mentoring or other opportunities; and development of networks of support for individuals and families. Proposed programs should feature these supports in their most natural environment.

Priority: Comprehensive Services and Supports for Young Children

Applications focusing on services and supports, not covered by Early Intervention or under the School Code, for young children with developmental and social-emotional concerns will be prioritized. Examples include: coordinated, home-based services addressing all areas of development and taking into consideration the needs of the family; early identification of delays through consultation with child care providers, pre-school educators, medical professionals, and other providers of service; education, coaching, and facilitation to focus on strengthening personal and family support networks (including community partners); systematic identification and mobilization of individual gifts and capacities, to access community associations and learning spaces.

Priority: Self-Advocacy and Family Support Organizations

Nationally only 11% of people with I/DD rely on agency service providers. The majority of care comes from family, friends, and community. Parent and self-advocate support networks are critical to the system of supports, contribute clarity about service preferences, and raise community awareness. Applications highlighting sustainable self-advocacy and family support organizations, especially those governed by people who have I/DD, their families, and other allies will be prioritized. Activities may center on: improved understanding of I/DD, supports, and rights; peer mentoring; navigating the system of care; social connections; engaging in system advocacy; and distributing up to date information to new families and the relevant professionals.

Priority: Expansion of Independent Community Residential Opportunities

The CCDDDB encourages efforts to support people who have disabilities to live in settings of their choice with staff supports and the use of natural supports. Applications offering creative approaches to expanding independent community living opportunities in Champaign County will be a priority.

Secondary Decision Support and Priority Criteria:

The process items included in this section will be used as important discriminating factors which influence final allocation decision recommendations. The CCDDDB uses an online system for agencies applying for funding. An agency must complete the one-time registration process, including an organization eligibility questionnaire, before receiving access to the online application forms.

1. Approach/Methods/Innovation: Cite the relevant recommended, promising, evidence-based, or evidence-informed practice and address fidelity to the model under which services are to be delivered. In the absence of such an approach to meet defined community need, clearly describe the innovative approach, including method of evaluation, to be considered.
2. Evidence of Collaboration: Applications identifying collaborative efforts with other organizations serving or directed by people with I/DD and members of their support networks, toward a more efficient, effective, inclusive system of care.
3. Staff Credentials: Applications highlighting staff credentials and specialized training.
4. Resource Leveraging: While leveraging is strictly interpreted as local match for other grant funding, describe all approaches which amplify CCDDDB resources: state, federal, and other local funding; volunteer or student support; community collaborations. If CCDDDB funds are

to be used to meet a match requirement, the funder requiring local match must be referenced and the amount required identified in the Budget Narrative.

Process Considerations

The criteria described in the December 2017 priorities memorandum and restated above are to be used as guidance by the Board in assessing applications for funding. They are not the sole considerations in final funding decisions. Other considerations include the judgment of the Board and staff, evidence of the provider's ability to implement the services proposed, the soundness of the proposed methodology, and the administrative and fiscal capacity of the agency. Further, to be eligible to receive CCDDDB funds, applications must reflect the Board's stated goals, objectives, operating principles, and public policy positions; downloadable versions of these Board documents are available on the public page of the online application system. Final decisions rest with the CCDDDB and their judgment concerning the most appropriate and effective use of the fund, based on assessment of community needs, equitable distribution across disability support areas, and alignment with decision-support criteria.

Contract Negotiation Considerations for All FY19 Awards

All recommendations for funding approved by the CCDDDB in the decision section of this memorandum are provisional, with funding contingent on the completion of successful contract negotiation. This may include modification of the budget, program plan, and personnel forms in order to align with CCDDDB specifications. The applicant may be required to prepare and submit additional information prior to final contract execution, in order to reach terms for the provision of services that are agreeable to both parties. Failure to submit required information shall result in cancellation of the award of a contract.

Special Notification Concerning All FY19 Awards

The recommendations in this decision memorandum are based on revenue estimates which will not be finalized until the CCDDDB budget is approved by the Champaign County Board in November or December 2018. For this reason, all FY19 CCDDDB contracts shall be subject to possible reductions in contract maximums necessary to compensate for any CCDDDB revenue shortfall. These reductions shall be documented by contract amendment at the discretion of the CCDDDB executive director with every effort made to maintain the viability and integrity of prioritized contracts. The contract boilerplate shall also include the following provision:

Obligations of the Board will cease immediately without penalty or further payment being required if in any fiscal year the tax that is levied, collected and paid into the Developmental Disabilities Fund is judged by the CCDDDB executive director not to be sufficient for payment as delineated in the terms and conditions under this Contract.

Decision Section

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 2018 CCDDDB Meeting.

Per intergovernmental agreement with the CCMHB, applications related to I/DD supports and services are presented to the CCDDDB for review. Twenty requests for I/DD funding were submitted, totaling \$3,959,752. Agencies identified the priority area per application, as follows:

Linkage & Advocacy for People with I/DD
 3 organizations, 3 applications, totaling \$577,942
 Employment Services & Supports
 3 organizations, 5 applications, totaling \$647,960
 Non-Work Community Life & Flexible Support
 2 organizations, 5 applications, totaling \$1,830,180
 Comprehensive Services & Supports for Young Children
 2 organizations, 2 applications, totaling \$635,885
 Self-Advocacy & Family Support Organizations
 4 organizations, 4 applications, totaling \$195,285
 Expansion of Independent Community Residential Opportunities
 1 organization, 1 application, totaling \$72,500

The Champaign County Mental Health Board (CCMHB) will allocate \$685,885 (*\$50,000 of which is already dedicated to the CILA project and budgeted separately*) for I/DD services, per Intergovernmental Agreement. CCMHB decisions have been coordinated with the CCDDDB decisions and shall be finalized at a May 2018 CCMHB meeting.

Staff Recommendations: Individual Applications

Priority: Linkage & Advocacy for People with I/DD
(3 applications from 3 organizations, totaling \$577,942)

Rosecrance Central Illinois – Coordination of Services: DD/MI

Request is for \$35,150. Aligns with priority for Linkage & Advocacy for People with I/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 as well as other CCDDDB/CCMHB funded programs to improve coordination, minimize duplication of effort, including for transition, and be aware of all local resources. Motion to **approve** funding of \$35,150 for **Rosecrance Central Illinois – Coordination of Services: DD/MI** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

Developmental Services Center – Service Coordination

Request is for \$423,163. Aligns with priority for Linkage & Advocacy for People with I/DD. A special provision will be included to ensure collaboration with CCRPC as well as other CCDDDB/CCMHB funded programs to improve coordination, minimize duplication of effort, including for transition, and to be aware of all local resources. Motion to **approve** partial funding of \$410,838 (FY18 level) for **Developmental Services Center – Service Coordination** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

CCRPC-Community Services – Decision Support/Person-Centered Planning

Request is for \$119,629. Aligns with priority for Linkage and Advocacy for People with I/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. Because the increase in request is associated with a new component, a mid-year progress report will be required. 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, especially for those funded by CCDDDB in Developmental Services Center's Community First program. Motion to **approve** funding of \$119,629 for **CCRPC-Community Services – Decision Support/Person-Centered Planning** as presented in this memorandum:

- _____Approved
- _____Denied
- _____Modified
- _____Additional Information Needed

Priority: Employment Services & Supports

(5 applications from 3 organizations, totaling \$647,960)

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 included to ensure collaboration with other employment service providers to minimize duplication of effort, maximize outcomes, and research and recommend to the CCDDDB a training of value. Motion to **approve** funding of \$34,590 for **United Cerebral Palsy Land of Lincoln – Vocational Services** as presented in this memorandum:

- _____Approved
- _____Denied
- _____Modified
- _____Additional Information Needed

Developmental Services Center/Community Choices – Employment First

Request is for \$80,000 and for a two-year term. Aligns with priority for Employment Services and Supports. A special provision will be included, to develop the content of proposed new LEAP trainings in coordination with other providers of access and transition services. Motion to **approve** funding of \$80,000, for a one-year term, for **Developmental Services Center – Employment First** as presented in this memorandum:

- _____Approved
- _____Denied
- _____Modified
- _____Additional Information Needed

Developmental Services Center – Connections

Request is for \$85,000. Aligns with priority for Employment Services and Supports and increases community capacity. Motion to **approve** funding of \$85,000 for **Developmental Services Center – Connections** as presented in this memorandum:

- _____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 Services and Supports. A special provision will be included to ensure collaboration with other employment service providers to minimize duplication of effort, maximize outcomes, and research and recommend to the CCDDDB a training of value. Motion to **approve** funding of \$361,370, with a one-year term, for **Developmental Services Center – Community Employment** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

Community Choices, Inc. – Customized Employment

Request is for \$87,000. Aligns with priority for Employment Services and Supports. A special provision will be included to ensure collaboration with other employment service providers to minimize duplication of effort, maximize outcomes, and research and recommend to the CCDDDB a training of value. Motion to **approve** funding of \$87,000 for **Community Choices, Inc. – Customized Employment** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

Priority: Non-Work Community Life and Flexible Support

(5 applications from 2 organizations, totaling \$1,830,180)

Persons Assuming Control of Their Environment (PACE) – Consumer Control in Personal Support

Request is for \$22,800, to fund a NEW program. Aligns with priority for Non-Work Community Life and Flexible Support and proposes to train personal support workers (PSWs). Program plan narrative should be revised to anticipate serving eligible people, following a period of training, and to collaborate with parent support groups, including those funded by the CCDDDB, to identify people and families seeking PSWs. A special provision will be included to ensure collaboration with CCRPC and Developmental Services Center’s Individual and Family Support program to improve coordination, reach eligible people in need of PSWs, and minimize duplication of effort. Motion to **approve** partial funding of \$21,000 for **Persons Assuming Control of Their Environment (PACE) – Consumer Control in Personal Support** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

Developmental Services Center – Individual and Family Support

Request is for \$404,428. Aligns with priority for Non-Work Community Life and Flexible Support. Motion to **approve** funding of \$404,428 for **Developmental Services Center – Individual and Family Support** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

Developmental Services Center –Community 1st (formerly Integrated/Site Based Services)

Request is for \$799,091 and for a two-year term. Aligns with priority for Non-Work Community Life and Flexible Support. To support the transformation from shelter-based services to meaningful community life for those served, person centered plans for “treatment plan clients” will inform the service mix and delivery. *Because the state rate for Community Day Services is understood to be inadequate, a higher per person cost will be associated with this program, and benchmarks established for each quarter: for each participating TPC, a PCP which clarifies specific service needs and preferences to be addressed in this program; a quarterly minimum of 10,000 total service hours associated with qualifying TPCs; a minimum of 60% (or 6,000) of those service hours in direct contact with TPCs; and a minimum of 50% (or 3,000) of these direct contact service hours delivered in community settings. If these benchmarks are not met during a quarter, the following quarter’s payments will be pro-rated. Fourth quarter data will inform the final payment.* Motion to **approve** partial funding of \$799,000 for a one-year term, for **Developmental Services Center – Community 1st** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

Developmental Services Center – Clinical Services

Request is for \$174,000. Aligns with priority for Non-Work Community Life and Flexible Support, improves access to behavioral health services and benefits, and collaborates with other providers toward a system of care approach. Motion to **approve** funding of \$174,000 for **Developmental Services Center – Clinical Services** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

Developmental Services Center – Apartment Services

Request is for \$429,861. Aligns with priority for Non-Work Community Life and Flexible Support. A special provision will be included to ensure collaboration with similar programs and coordination with the CCRPC for person centered plans. Motion to **approve** funding of \$429,861 for **Developmental Services Center – Apartment Services** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

Priority: Comprehensive Services & Supports for Young Children
(2 applications from 2 organizations, totaling \$635,885)

Developmental Services Center – Family Development Center

Request is for \$562,280. 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 require collaboration with other early childhood programs to avoid duplication of effort, maximize positive outcomes for children, and inform the Boards of service gaps. Motion to **DENY** funding of \$562,280 for **Developmental Services Center – Family Development Center** as presented in this memorandum. **By agreement, the Champaign County Mental Health Board will provide funding of \$562,280 for this program:**

_____ Approved
_____ Denied
_____ Modified
_____ Additional Information Needed

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

Request is for \$73,605. 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 require collaboration with other early childhood programs to avoid duplication of effort, maximize positive outcomes for children, and inform the Boards of service gaps. Motion 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 \$73,605 for this program:**

_____ Approved
_____ Denied
_____ Modified
_____ Additional Information Needed

Priority: Self-Advocacy and Family Support Organizations

(4 applications from 4 organizations, totaling \$195,285)

Persons Assuming Control of Their Environment (PACE) – Opportunities for Independence

Request is for \$49,000. Aligns with priority for Self-Advocacy & Family Support Organizations. Features an innovation to cultivate self-advocacy skills among young adults transitioning from school. A special provision will be included to ensure collaboration with CCRPC and other CCDDDB/CCMHB funded programs to improve coordination, minimize duplication of effort, and maximize outcomes. Motion to **approve** funding of \$49,000 for **Persons Assuming Control of Their Environment (PACE) – Opportunities for Independence** as presented in this memorandum:

_____ Approved
_____ Denied
_____ Modified
_____ Additional Information Needed

Community Choices, Inc. – Self-Determination Support

Request is for \$116,000. Aligns with priorities for Non-Work Community Life and Flexible Support and for Self-Advocacy and Family Support Organizations. A special provision will be included to ensure collaboration with CCRPC and other CCDDDB/CCMHB funded programs to improve coordination, minimize duplication of effort, and maximize outcomes. Motion to **approve** funding of \$116,000 for **Community Choices, Inc. – Self-Determination Support** as presented in this memorandum:

_____ 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. Motion to **approve** funding of \$15,000 for **Champaign County Down Syndrome Network – CC Down Syndrome Network** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

CUAble – Community Outreach

Request is for \$15,285. 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. Motion to **approve** funding of \$15,285 for **CU Able – Community Outreach** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

Priority: Expansion of Independent Community Residential Opportunities

(1 application from 1 organization, totaling \$72,500)

Community Choices, Inc. – Community Living

Request is for \$72,500. Aligns with priority for Expansion of Independent Community Residential Opportunities. A special provision will be included to ensure collaboration with similar programs and coordination with the CCRPC for person centered plans. Motion to **approve** funding of \$72,500 for **Community Choices, Inc. – Community Living** as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

Motion to authorize the executive director to implement contract maximum reductions as described in the “Special Notification Concerning FY19 Awards” section of this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information needed

A

- AAC - Augmentative and Alternative Communication
- ABA - Applied Behavior Analysis
- ABC - Antecedent-Behavior-Consequences
- ADA - Americans with Disabilities Act
- ADD - Attention Deficit Disorder
- ADHD - Attention Deficit/Hyperactivity Disorder
- ADL - Activities of Daily Living
- APE - Adaptive Physical Education
- ARC - Association of Retarded Citizens
- ASD - Autism Spectrum Disorder
- ASL - American Sign Language

B

- BD - Behavior Disorder
- BIP - Behavior Intervention Plan
- BMP - Behavior Management Plan
- BSP - Behavior Support Plan

C

- CCI - Childcare Institution
- CFC - Child and Family Connections Agency
- COTA - Certified Occupational Therapy Assistant

D

- DCFS - Department of Children and Family Services
- DD - Developmentally Disabled
- DHS - Department of Human Services
- DSCC - Division of Specialized Care for Children
- DT - Developmental Therapy
- DTT - Discrete Trial Training
- Dx - Diagnosis

E

- ED - Emotional Disorder
- EI - Early Intervention Services
- EMR - Educable Mentally Retarded

F

- FAPE - Free and Appropriate Public Education
- FERPA - Family Educational Rights and Privacy Act
- FMA - Fine Motor Activities
- FMC - Fine Motor Coordination

H

- HI - Hearing Impairment
- H&P - History and Physical examination
- Hx - History

I

- IDEA - Individual with Disabilities Education Act
- IDPA - Illinois Department of Public Aid
- IDPH - Illinois Department of Public Health
- IDT - Interdisciplinary Team
- IEP - Individualized Education Plan
- IFSP - Individualized Family Service Plan
- ISBE - Illinois State Board of Education

L

- LD - Learning Disability
- LRE - Least Restrictive Environment
- LPN - Licensed Practical Nurse

M

- MDC - Multidisciplinary Conference
- MDT - Multidisciplinary Team
- MLU - Mean Length of Utterance
- MR - Mental Retardation
- MSW - Master's in Social Work

N

- NOS - Not Otherwise Specified

O

- OT - Occupational Therapy
- OTR - Registered Occupational Therapist

P

- PAS/ISC - Pre-Admission Screening/Independent Service Coordination

- PCP - Primary Care Physician
- PDD - Pervasive Developmental Delay
- PDR - Physician's Desk Reference
- PECS - Picture Exchange Communication System
- PT - Physical Therapy

Q

- QMRP - Qualified Mental Retardation Professional

R

- RD - Registered Dietician
- RDI - Relationship Development Intervention
- Re-eval - Case Study Evaluation; re-evaluation
- RN - Registered Nurse
- RT - Recreational Therapy

S

- SI - Sensory Integration
- SIB - Self-Injurious Behavior
- SLI - Seech/Language Impairment
- SLP - Speech/Language Pathologist
- SSA - Social Security Administration
- SSI - Supplemental Security Income
- SW - Social Worker

T

- TEACCH - Training and Education of Autistic and related Communication handicapped Children
- TTR - Type Token Ratio

V

- VI - Visual Impairment

Instructions

Quarterly Program Activity / Consumer Service Report

[\(Return to Quarterly Reports \)](#)

- * Agency **CU Able, NFP Inc.**
- * Board **Developmental Disabilities Board**
- * Program **CU Able Community Outreach (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted **[Change Status]** to **Submitted** ▼

Date Submitted **04/20/2018 02:21 PM**

Submitted By **BARNESM**

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other (TPC)

	(CSE)	(SC)	(NTPC)	(TPC)
Annual Target	4	150	15	42
Quarterly Data (NEW Clients)	4	63	5	9

CU Able had 2 parent network meetings, one educational event, one social event and 2 social/fundraiser events. We hosted an educational event with Equip for Equality who talked about the rights parents have with IEPs. We went to We Rock the Spectrum, a sensory friendly gym located in Normal, IL. We also hosted 2 social/fundraising dinners at Portillos and Chipotle restaurants in Champaign.

We used FB streaming to provide information/services to our families. We posted a live stream and recording of the January Equip for Equality presentation which has been viewed 287 times. We also posted (most of) the January DD Board meeting which received 152 views and (most of) the March DD Board meeting which received 162 views. We are very excited to bring this sort of information to families who otherwise cannot attend events.

During the third quarter, our Facebook membership increased by 72 new members. The most popular time for members to use our Facebook page was 6-9 pm Monday and Thursday. During the third quarter, our active members (those who viewed, posted, commented, or reacted to a posts) increased to 661 out of a total of 734 members - just over 90% of our FB users.

Instructions

Quarterly Program Activity / Consumer Service Report

[\(Return to Quarterly Reports \)](#)

- * Agency **Champaign County Down Syndrome Network**
- * Board **Developmental Disabilities Board**
- * Program **Champaign County Down Syndrome Network (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted

[**Change Status**] to **Submitted** ▼

Date Submitted 04/06/2018 08:57 PM

Submitted By MSCOTT



Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other (CSE) (SC) (NTPC) (TPC)

Annual Target	20	50	145
Quarterly Data (NEW Clients)	6	5	21

Comments
 TNT New Year's Pizza Party (1/1) - 22
 UI Women's Basketball (2/4) - 77
 Night To Shine Prom (2/9) - 24
 Winter Swim Party (3/10) - 47
 DSN Board Meetings (2/5) & (3/5) - 7 & 7

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- * Agency **CCRPC - Community Services**
- * Board **Developmental Disabilities Board**
- * Program **Decision Support Person for CCDDDB3-2018 (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted [**Change Status**] to **Submitted** ▼

Date Submitted **04/24/2018 02:10 PM**

Submitted By **KHARMON**



Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other (CSE) (SC) (NTPC) (TPC)

Annual Target	40	100	100	48
Quarterly Data (NEW Clients)	24	161	69	9

Community Service Events - 13 IEP's, 4 events (Transition Planning Committee, Choices Community Fun Fair, Urbana School District Teacher In-service, Parkland Volunteer Fair), and 7 provider meetings to promote Transition Consultant Services (Rural Champaign County Special Education Cooperative, LEAP meeting, DHS-Comments DRS, DSC, CUSR, Community Choices, and UCP).

Screening Contacts - 161 people in attendance at Community Service Events

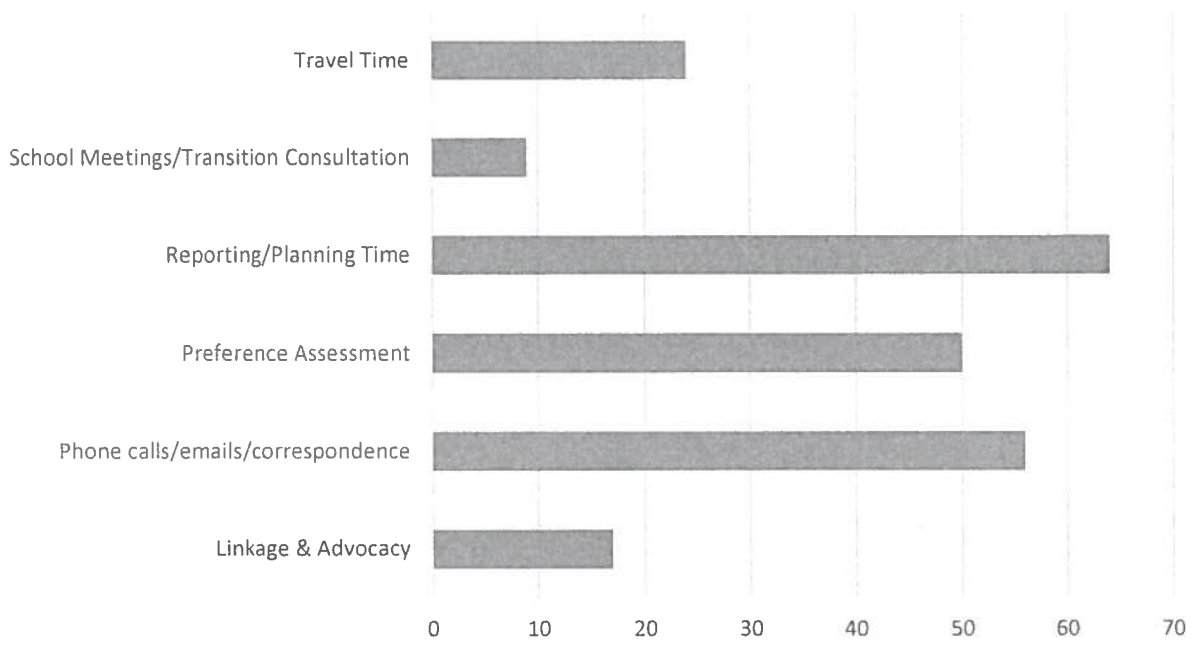
CCRPC - Community Services

Decision Support Person \$86,460

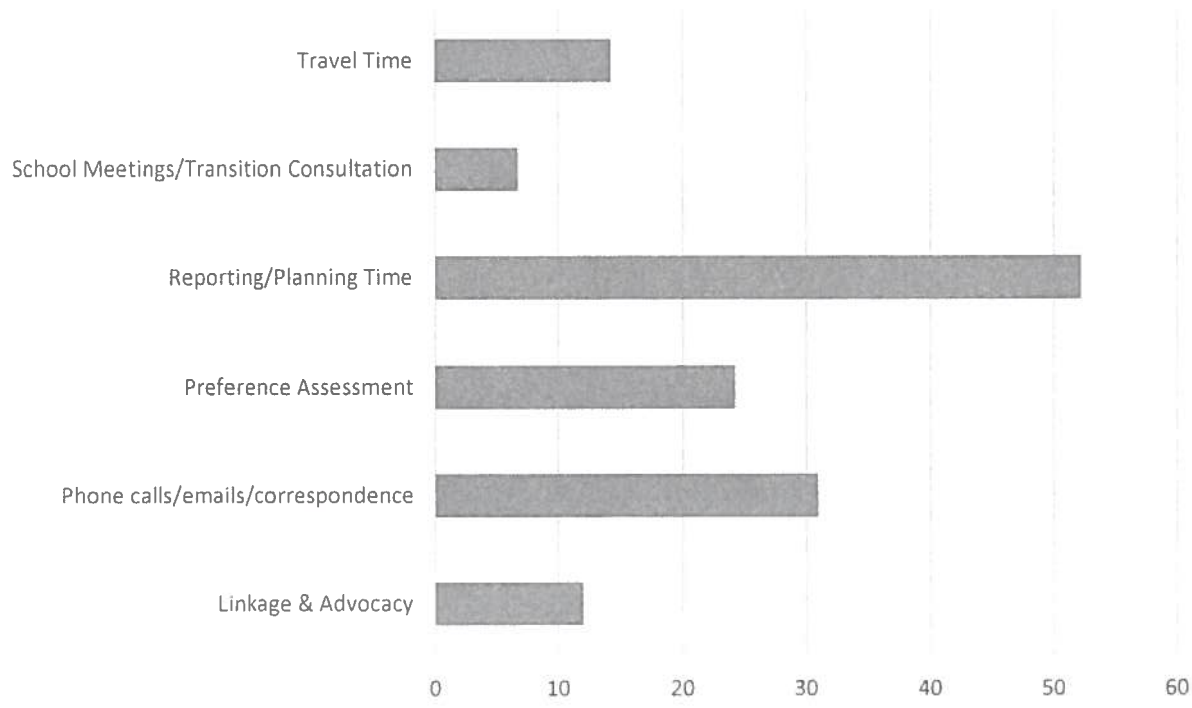
FY18 Third Quarter

90 people were served, for a total of 140.50 hours

Participants per Service Activity



Hours per Service Activity



41

Instructions

Quarterly Program Activity / Consumer Service Report

[\(Return to Quarterly Reports \)](#)

* Agency **Champaign County Head Start/Early Head Start MHB**

* Board **Mental Health Board**

* Program **Social-Emotional Disabilities Svs (2018)**

* Period **2018 - Third Quarter FY18**

Status Submitted

[**Change Status**] to **Submitted** ▼

Date Submitted **04/27/2018 05:32 PM**

Submitted By **BELKNAP**

42

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other Clients
Annual Target	1	55	60	8
Quarterly Data (NEW Clients)	8	4	1	0

Comments:

Community Service events are Birth to 6 Council meetings, Mental Health Advisory Committee, Health Advisory meetings, and Infant Mental Health meetings, Champaign Community Coalition meetings, collaboration with other agencies.

Service/Screening contacts consist of Social Emotional Room Observations, ASQ-SE goal setting, and individual child observations, parent and/or teacher meetings to discuss concerns of a child, counseling sessions, functional behavior assessment interviews, support plan meetings, positive behavior coaching, teacher mentoring, early childhood mental health consultation, social skills classroom lessons, reflective supervision for teachers, contact to support outside referrals, parent support groups, and parent trainings.

Non-Treatment clients are children or parents who have received support, services, or have warranted consultation but do not have a treatment plan. Continuing Treatment Plan clients were in counseling or had a behavior plan carry over from last year.

New Treatment Plan clients are new clients seen individually for counseling, have a new support plan, or have new individual social emotional goals written for them.

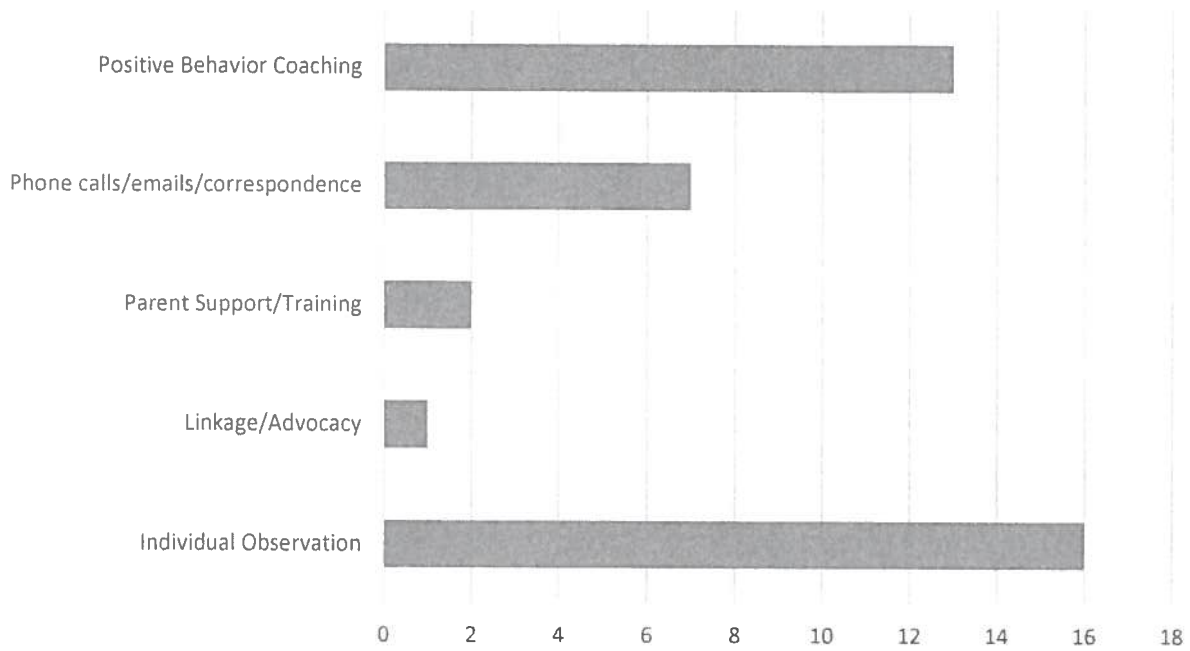
Other consists of mass screening events, staff training, SE news blips for parent newsletters, and Policy Council. Cumulative data is added to each new quarter's data for cumulative data for fiscal year to date numbers.

CCRPC - Head Start/Early Head Start

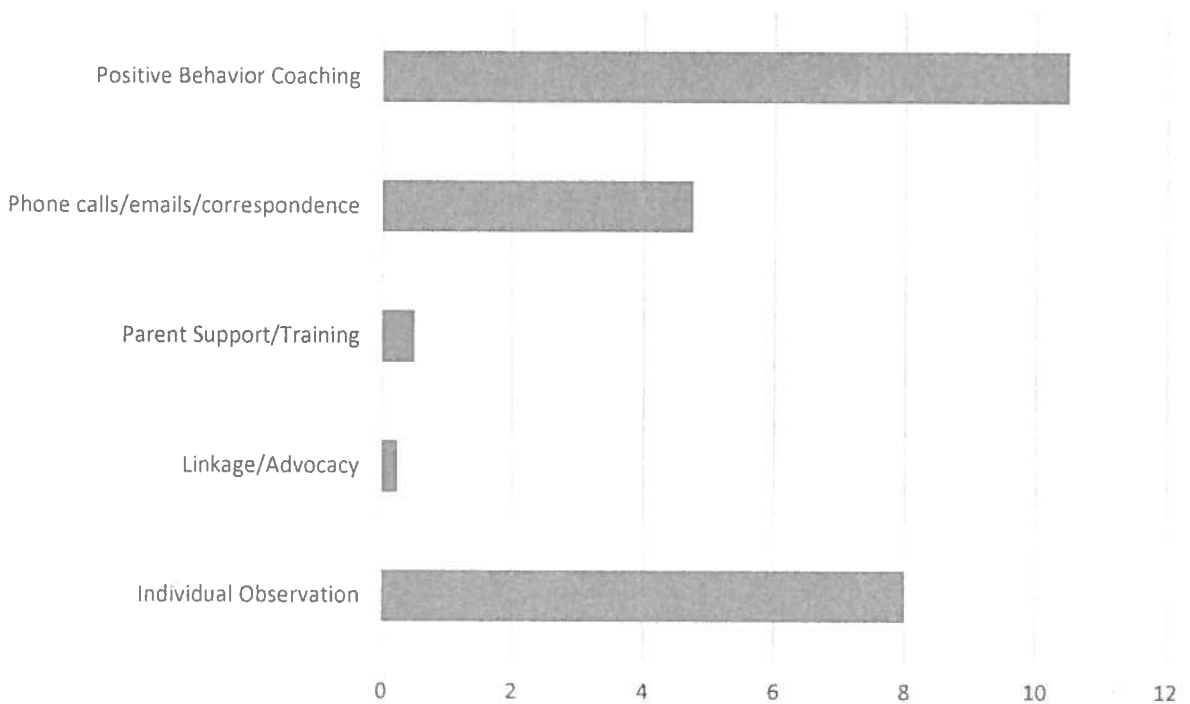
Social Emotional Disabilities Svcs \$55,645 MHB FY18 Third Quarter

20 people were served, for a total of 24 hours

Participants per Service Activity



Hours per Service Activity



43

Instructions

Quarterly Program Activity / Consumer Service Report

[\(Return to Quarterly Reports \)](#)

- * Agency **CTF Illinois**
- * Board **Developmental Disabilities Board**
- * Program **CTF ILLINOIS Advocacy Center (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted **[Change Status]** to **Submitted** ▼

Date Submitted 04/26/2018 04:47 PM
Submitted By CCOREY

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other
(CSE) (SC) (NTPC) (TPC)

Annual Target	2	0	1173.25
Quarterly Data (NEW Clients)			

Continue w/ 7 attendees - only 4 are CCDDDB funded. No new TPC's this quarter. 1173.25 hours provided for those 4 CCDDDB funded people this quarter. No service contracts this month. The Advocacy Program will be closing June 20th, 2018 since not fiscally sound. Community events. Attendees participated in a peer training on rights that they developed. Did presentation at the Charleston Advocacy Program and had a booth at a local high school promoting the "R Word Campaign".

CTF Illinois

Advocacy Center \$60,000

FY18 Third Quarter

4 people were served for a total of 749.75 hours

Participants per Service Activity



Hours per Service Activity



45

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- * Agency **CTF Illinois**
- * Board **Developmental Disabilities Board**
- * Program **CTF ILLINOIS Nursing (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted [**Change Status**] to **Submitted** ▼

Date Submitted 04/26/2018 04:47 PM
Submitted By CCOREY

46

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other
(CSE) (SC) (NTPC) (TPC)

Annual Target	47	0	50
Quarterly Data (NEW Clients)			

Comments We currently have 5 residents at site w/ 2 openings. New admit expected in April. Nursing contracts were 47 this month with 50 nursing hours provided. No new admits this quarter.

CTF Illinois

Nursing Services \$6,000

FY18 Third Quarter

5 people were served for a total of 50 hours

Instructions

Quarterly Program Activity / Consumer Service Report [\(Return to Quarterly Reports\)](#)

- * Agency **Community Choices, Inc. MHB**
- * Board **Mental Health Board**
- * Program **Community Living (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted

Date Submitted 04/25/2018 03:46 PM

Submitted By CHOICES

[**Change Status**] to **Submitted** ▼

48

	Community Service Events (CSE)	Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	1370	12	15	1582
Quarterly Data (NEW Clients)	0	44	3	0	72

Community Service Events - No new CSEs this Quarter

Service Contacts - Service Contacts listed here are specific to our Personal Development/Life Skills Classes. Community Transitional Support (who work with people counted as TPCs) reports service contacts as claims on the online portal. Zip code and demo information for TPCs will be included along with client uploads in online portal claim system.

Comments NTPCs - These are individuals who participate in our Personal Development/Life Skills Classes - we had 3 new individuals taking part in our classes this quarter. Demo and Zip code info for these individuals will be reported here (in respective reports).

TPCs - The Community Transitional Support participants are counted as TPCs - TPC count for the Quarter = 17, no NEW TPCs this quarter (This number should match the number of clients uploaded into the portal)

Other/Direct Hours - Direct Hours reported here are specific to hours spent supporting individuals in our Personal Development/Life Skills classes. Community Transitional Support reports direct hours via claims.

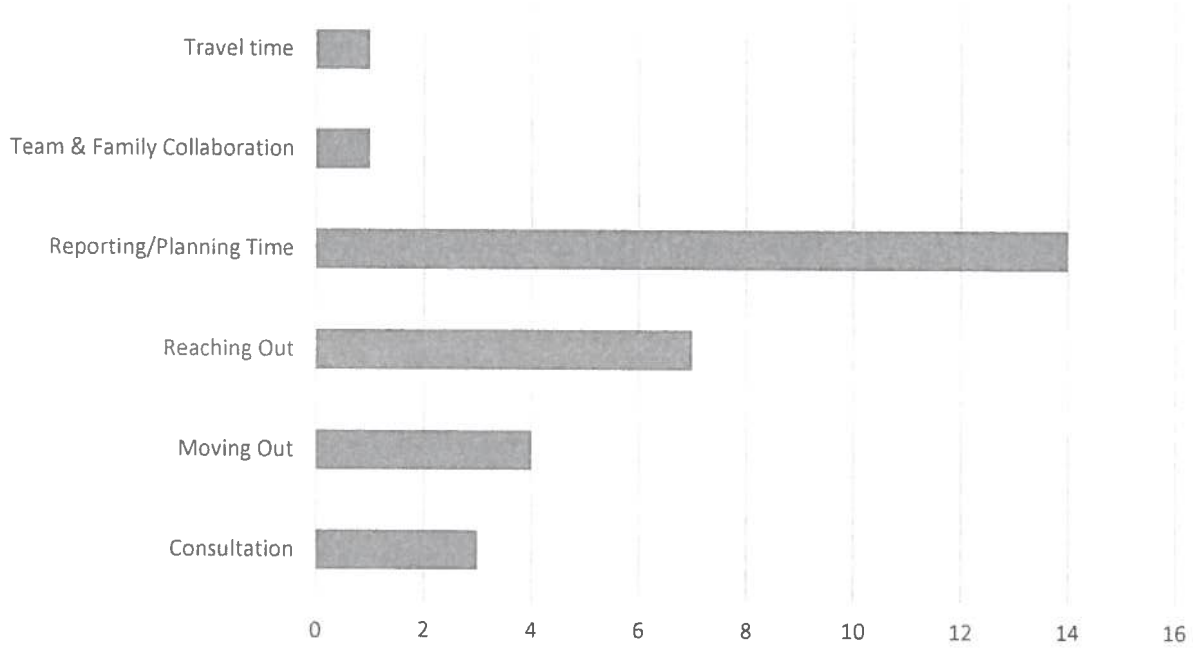
Community Choices

Community Living \$63,000 MHB

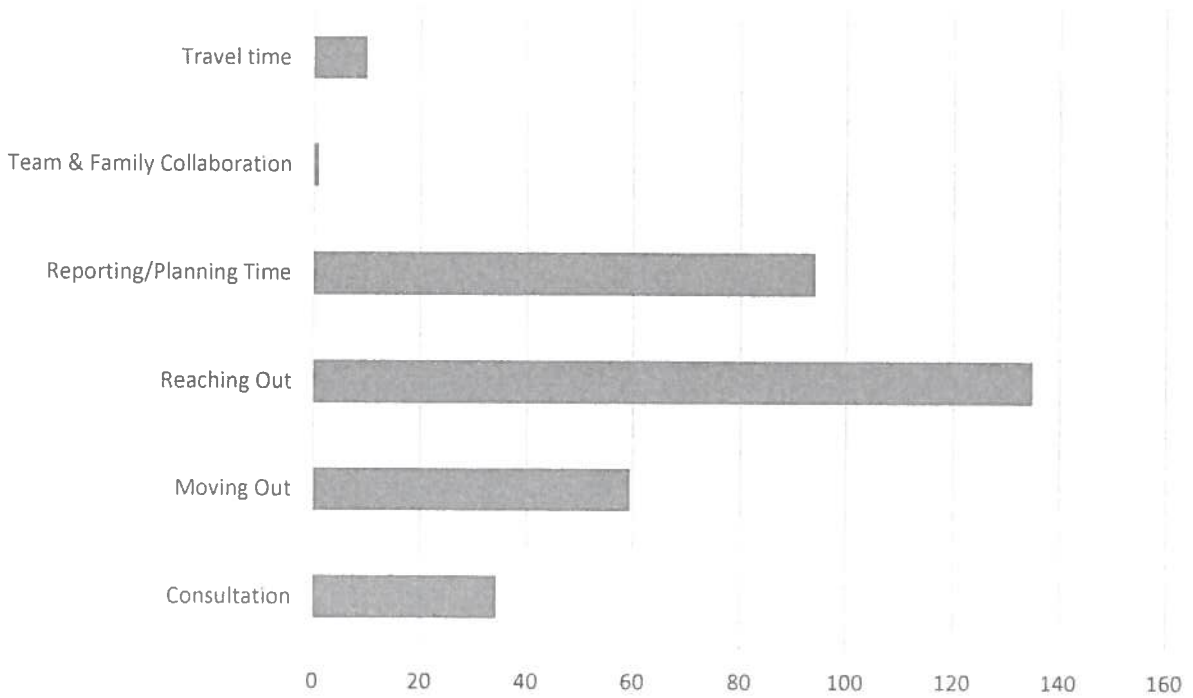
FY18 Third Quarter

14 people were served for a total of 334.25 hours

Participants per Service Activity



Hours per Service Activity



49

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- * Agency **Community Choices, Inc. DDB**
- * Board **Developmental Disabilities Board**
- * Program **Customized Employment (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted [Change Status] to Submitted

Date Submitted 04/25/2018 05:59 PM
Submitted By CCCCOOP

50

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (SC)	Treatment Plan Clients (NTPC)	Other Clients (TPC)
Annual Target	4	1001	0	1446
Quarterly Data (NEW Clients)	1		7	

CSE: 2/16/18 - Presentation to Urbana High School Sped staff about Community Choices programs, services, and supports, as part of their teacher in-service day

Service Contacts - Reported as claims in the online reporting system

NTPCs - this program does not serve individuals as NTPCs

Comments

TPCs - 7 New clients were added to this program during Q3. They were uploaded into the online reporting system. This should include their address and demographic information. It is also reported in the standard Zip Code and Demographic Reports. NOTE: One participant was added as a continuing client this quarter. We had been working together but put things on hold last quarter and restarted support this quarter.

Other - Direct Hours: These are reported now as part of claims in the online reporting system.

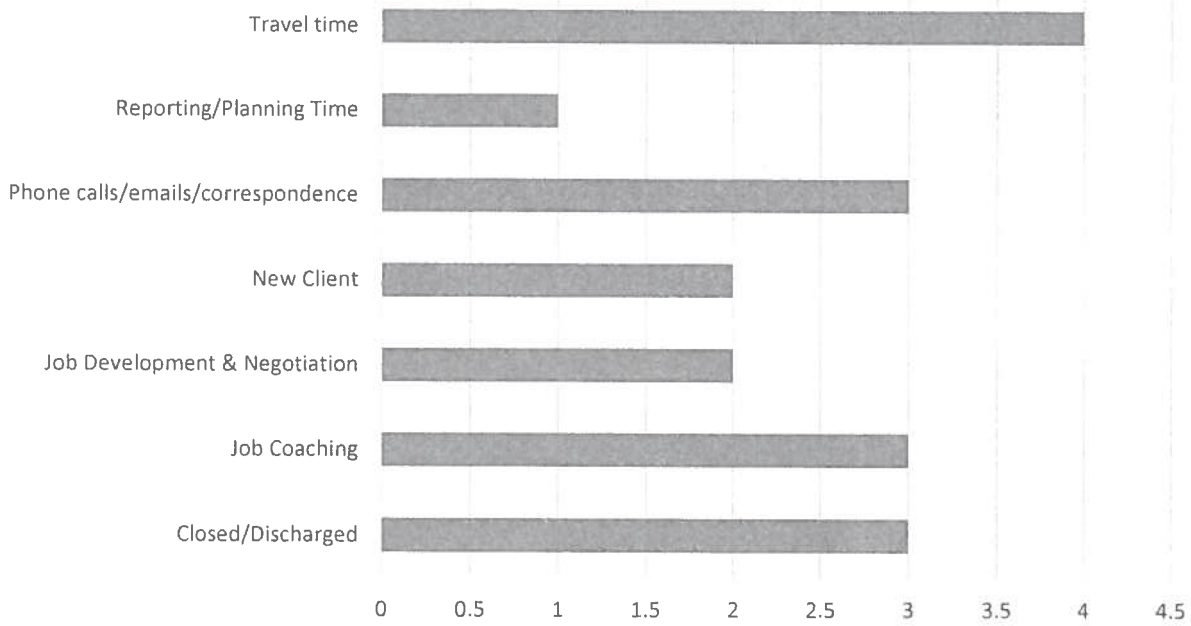
Community Choices

Customized Employment \$74,103

FY18 Third Quarter

10 people were served for a total of 94 hours

Participants per Service Activity



Hours per Service Activity



51

Instructions

Quarterly Program Activity / Consumer Service Report [\(Return to Quarterly Reports \)](#)

- * Agency **Community Choices, Inc. MHB**
- * Board **Mental Health Board**
- * Program **Self-Determination Support (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted **[Change Status]** to **Submitted** ▼

Date Submitted 04/25/2018 04:10 PM

Submitted By CHOICES

52

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other Clients
Annual Target	4	1762	145	0
Quarterly Data (NEW Clients)	2	641	15	1142

CSEs - 2 CSEs for Q:

- 1/25/18: Presentation to UIUC SPED Course: Intro to Developmental Disabilities

Comments - 2/1/18: Presentation with Self-Advocate to UIUC SPED Course: Collaborating with Families

NTPCs - 3 new Co-op Members (Individuals with I/DD), 12 new family members of people with I/DD supported

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- * Agency **Developmental Services Center**
- * Board **Developmental Disabilities Board**
- * Program **Apartment Services (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted [**Change Status**] to **Submitted** ▼

Date Submitted 04/23/2018 04:34 PM
Submitted By VICKIE2010

53

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other
(CSE) (SC) (NTPC) (TPC)

Annual Target	60
Quarterly Data (NEW Clients)	0

There were no openings in the Apartment Services Program this quarter. The program has provided services to 59 people with funding from the Champaign County Developmental Disabilities Board so far this fiscal year.

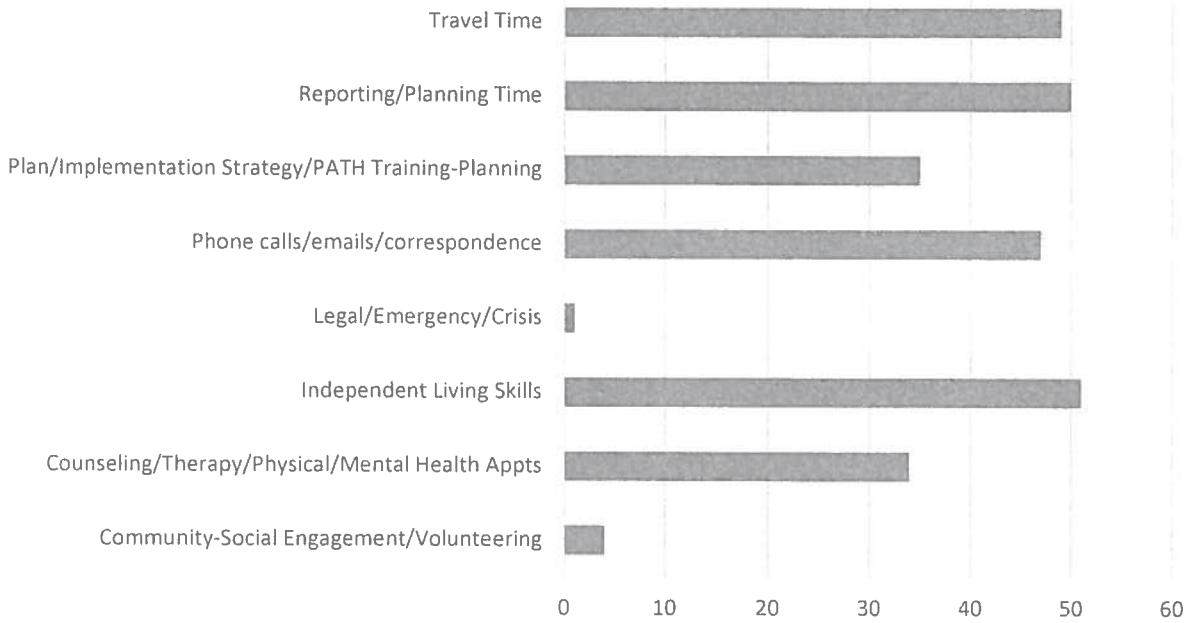
Developmental Services Center

Apartment Services \$417,341

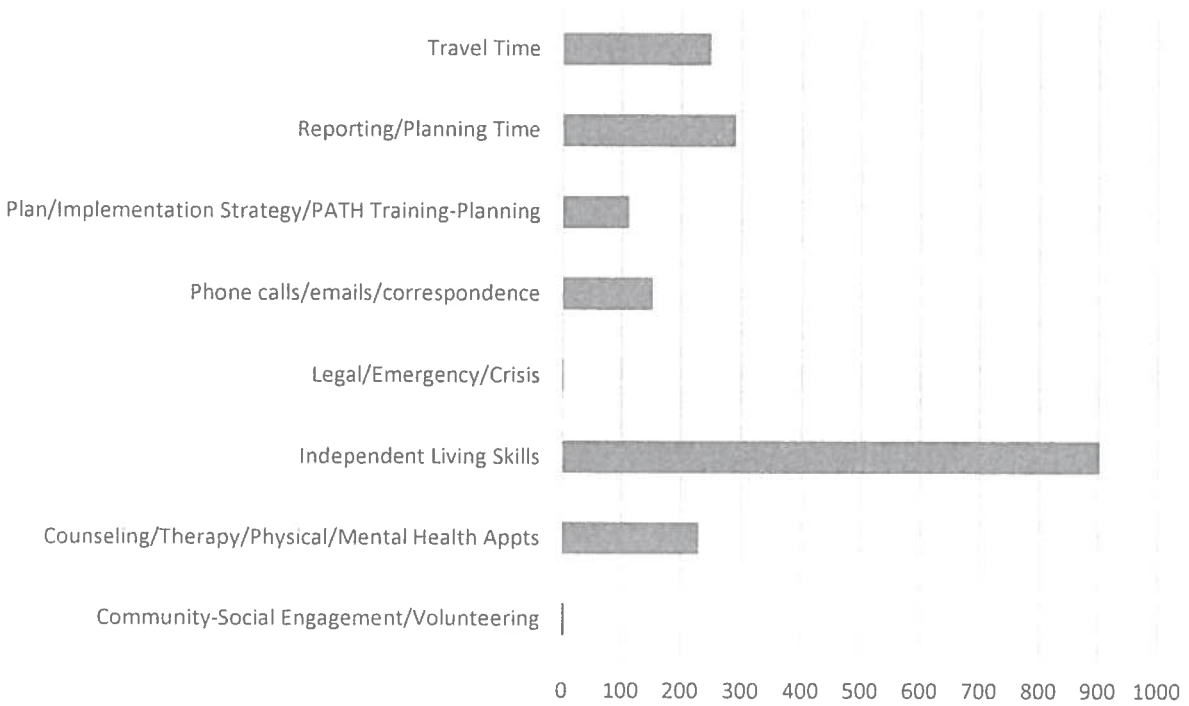
FY18 Third Quarter

51 people were served for a total of 1,941.75 hours

Participants per Service Activity



Hours per Service Activity



54

Instructions

Quarterly Program Activity / Consumer Service Report

[\(Return to Quarterly Reports \)](#)

- * Agency **Developmental Services Center**
- * Board **Developmental Disabilities Board**
- * Program **Clinical Services (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted **[Change Status]** to **Submitted** ▼

Date Submitted 04/23/2018 11:25 AM
Submitted By VICKIE2010

55

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other (TPC) (CSE) (SC) (NTPC)

Annual Target	2	15	3	63
Quarterly Data (NEW Clients)	0	3	1	1

There were two new services provided to one TPC and one NTPC individuals this quarter. The TPC received psychiatry services and the NTPC received counseling services.

Five individuals received two types of clinical services.

Comments Service/Screening Contacts: Of the three reported service/screening contacts, two were for counseling services. The other one was for psychiatry. Since there is at least a five-month wait for psychiatry services through community resources and there was a concern about this person's increased behavior at day program, he did start receiving psychiatry services this quarter.

There are seven service hours to report for the quarter for the overall management of the program, such as working on the schedule, quarterly summaries from counselors, billing codes, billing, and reporting time.

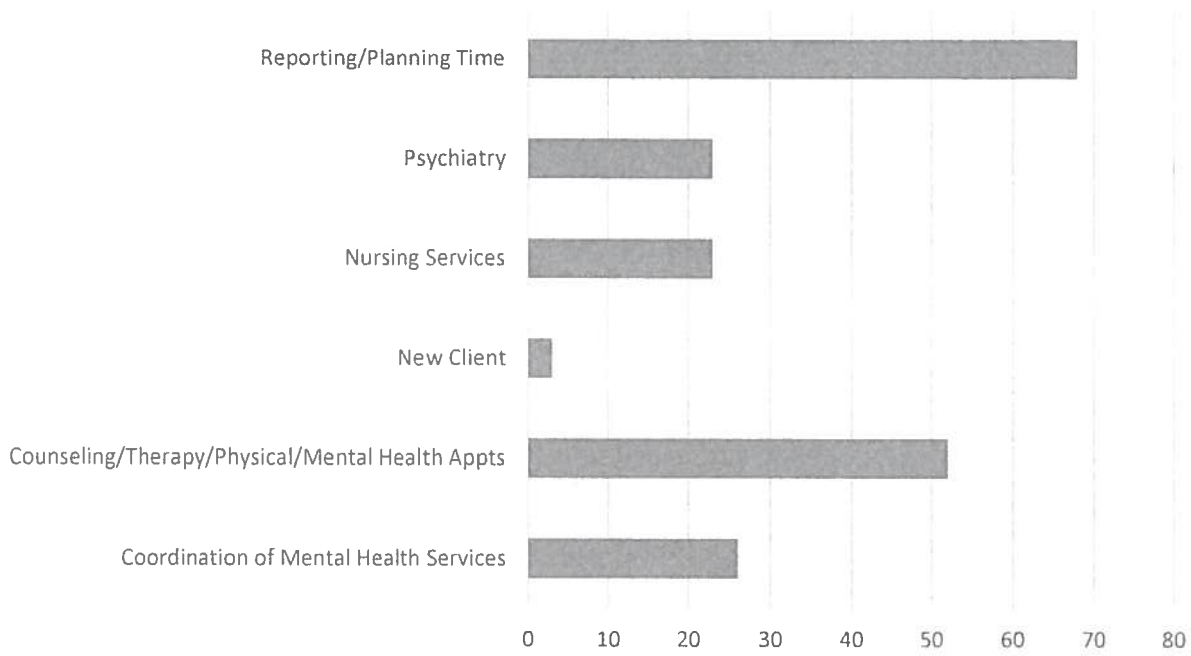
Developmental Services Center

Clinical \$174,000

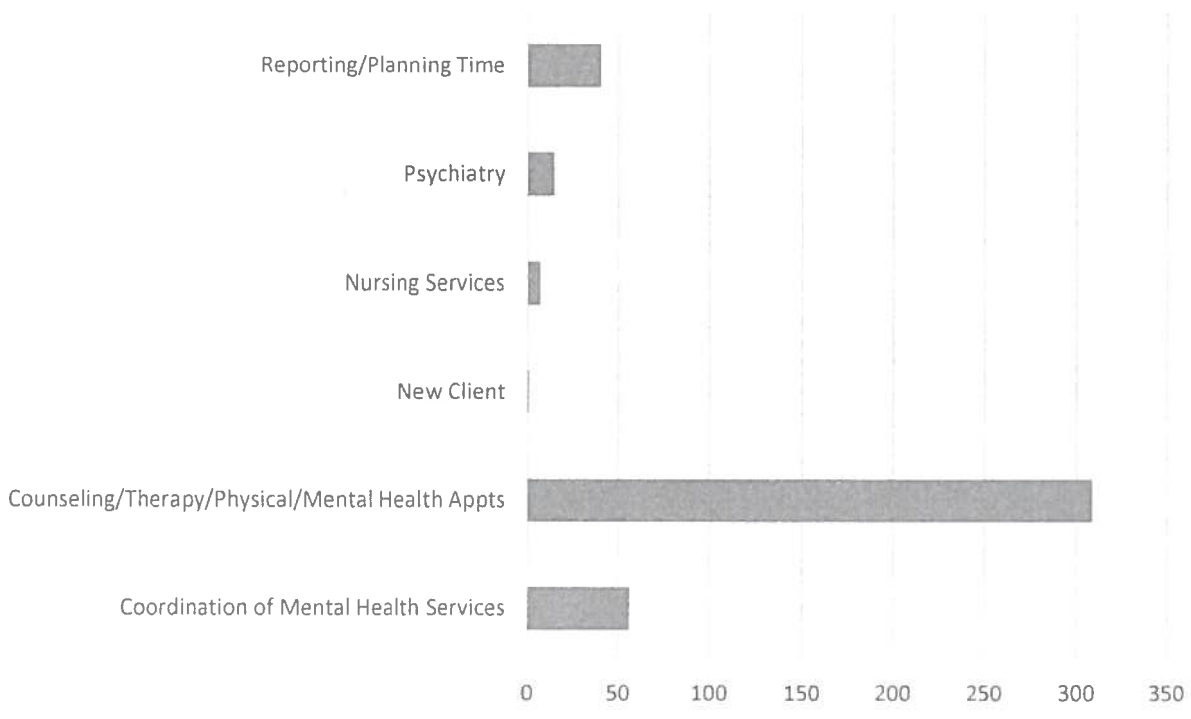
FY18 Third Quarter

70 people were served for a total of 428.25 hours

Participants per Service Activity



Hours per Service Activity



56

▲ Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- * Agency **Developmental Services Center**
- * Board **Developmental Disabilities Board**
- * Program **Community Employment (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted [Change Status] to Submitted ▼

Date Submitted 04/24/2018 09:47 AM

Submitted By VICKIE2010

57

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other (CSE) (SC) (NTPC) (TPC)

Annual Target	2	2	55	10
Quarterly Data (NEW Clients)				

The Community Employment Program continues to expand. Some individuals in the program continued their participation in Job Club, where modules covering different elements of employment are highlighted through classroom instruction, discussion, and activities, as well as experiential opportunities each month. Six new businesses hired people this quarter including Colony Square Cleaners; Dodd and Maatuka Law Offices and Rogers Supply Company.

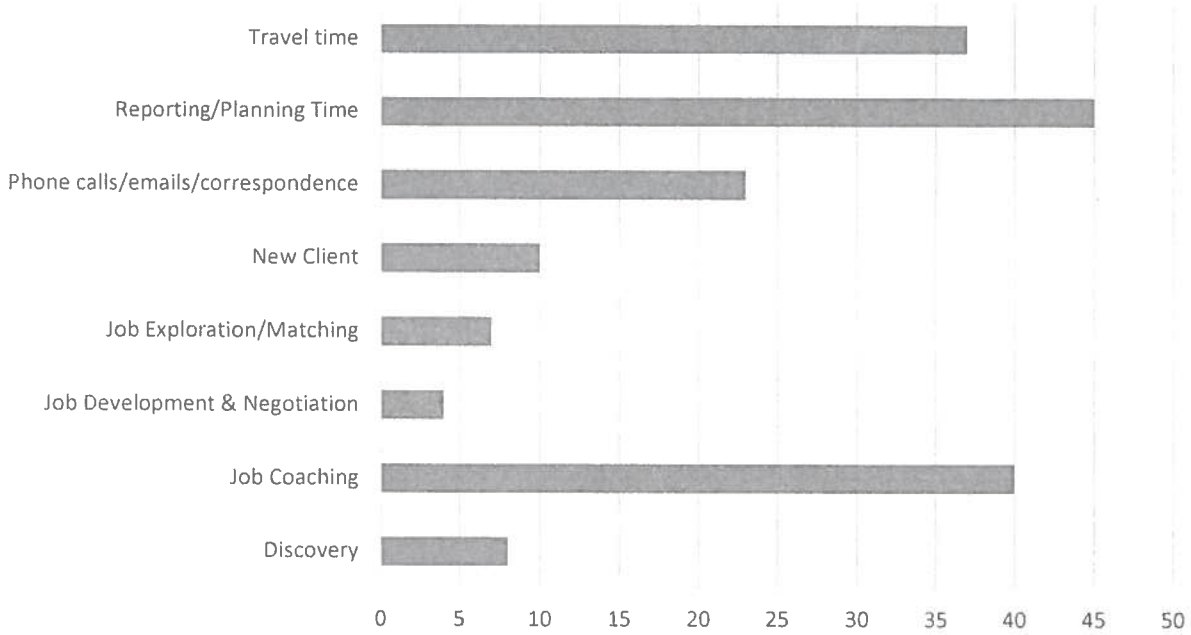
Developmental Services Center

Community Employment \$361,370

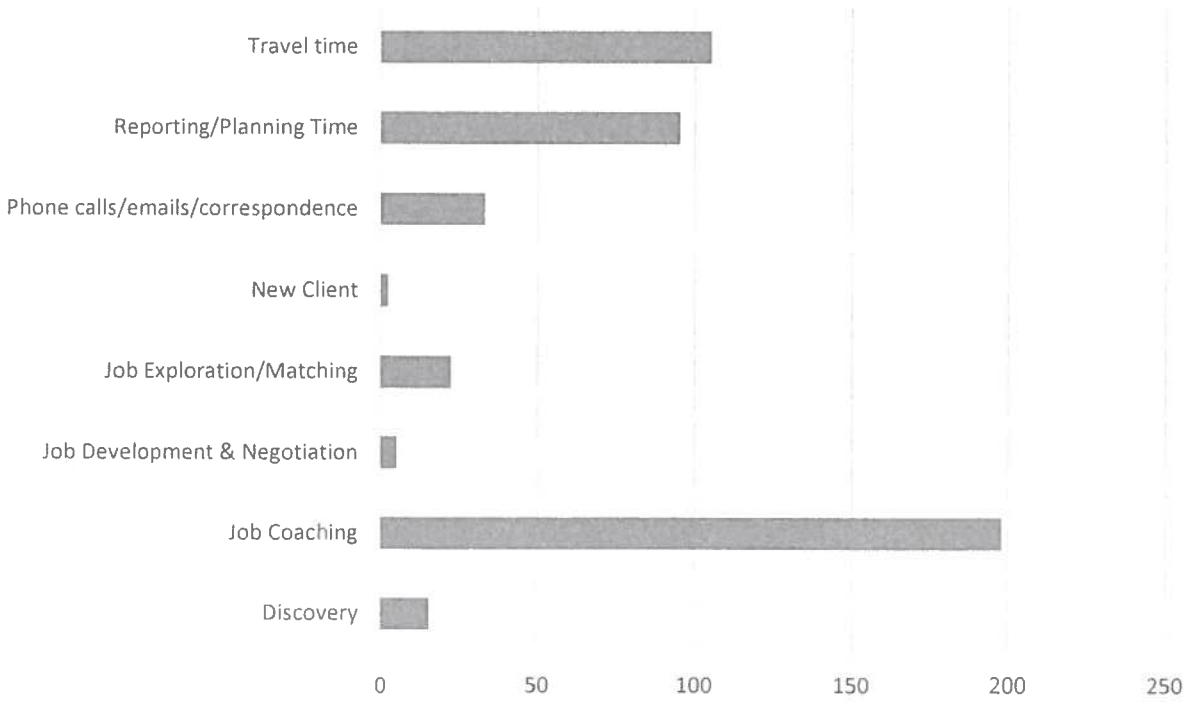
FY18 Third Quarter

56 people were served for a total of 478.25 hours

Participants per Service Activity



Hours per Service Activity



58

Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- * Agency **Developmental Services Center**
- * Board **Developmental Disabilities Board**
- * Program **Connections (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted [Change Status] to Submitted

Date Submitted 04/23/2018 04:01 PM

Submitted By VICKIE2010

59

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other (CSE) (SC) (NTPC) (TPC)

Annual Target	4	2	15	15
Quarterly Data (NEW Clients)		2	1	1

People continue to explore interests in artistic expression with the addition of painting still life, creating 3-D wall hangings, and following the guidance of Bob Ross videos to create landscape oil paintings, to the class curriculum. The Crow at 110 will be a venue for the Boneyard Arts Festival in mid-April and will include artwork of artists from DSC. In addition to preparation for this event, people who expressed an interest in making soap are preparing for Eberfest.

The Enactus group from the U of I continues to work with the individuals starting their own business, "Got You Covered". They continue to work on mastering the printer, how to send professional e-mails, responding to spam, roleplaying how to respond to unhappy customers, website design and how to use it, social media outlets, setting up a Facebook page, pricing and invoice, and to set up a business line on a cellphone.

Although the finished product - whether it's a painting or a sculpture is the final reward - the process of reaching that goal is just as satisfying. One of the people who has chosen to explore art has made a remarkable journey through this process. This person had few meaningful relationships in his life. Interactions with others have historically been contentious. He joined one of the art groups and has really blossomed both artistically and in his relationships with others in the group. Although there are still ups and downs, he is able to give helpful feedback to others in the group as well as receive the same.

Instructions

Quarterly Program Activity / Consumer Service Report

[\(Return to Quarterly Reports \)](#)

- * Agency **Developmental Services Center**
- * Board **Developmental Disabilities Board**
- * Program **Employment First (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted **[Change Status]** to **Submitted** ▼

Date Submitted 04/23/2018 03:37 PM

Submitted By VICKIE2010



	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	0	50	0
Quarterly Data (NEW Clients)	8		45	

New Business Certifications count as the community service events this quarter:

- City of Urbana HR Department 4 attendees Zip code: 61801
- Habitat ReStore 11 attendees Zip Code 61820
- Holiday Inn Express Rantoul-1 attendee Zip Code 61866
- Village of Rantoul-1 attendee Zip Code 61866
- Rantoul Chamber of Commerce-1 attendee Zip Code 61866
- Champaign County Forest Preserve District-35 attendees Zip Code 61853
- Champaign Outdoors-1 attendee Zip Code 61820
- Rugged Outdoors-1 attendee Zip Code 61820

Comments

Family Informational Meeting: The February Family Informational Meeting was on February 21st. A panel of self-advocates were interviewed by Ashley Withers from Community Choices and Annette Becherer from DSC about their experiences with gaining employment. 45 people were in attendance.

Central Illinois Business Magazine-LEAP had a story in the April/May issue of the magazine and another one will appear in the summer issue.

Disability Resource Expo-LEAP had handouts placed in the bags listing the certified businesses at the Expo.

Employment First Staff Training has been presented to new DSC Staff three times.

Instructions

Quarterly Program Activity / Consumer Service Report [\(Return to Quarterly Reports \)](#)

- * Agency **Developmental Services Center**
- * Board **Developmental Disabilities Board**
- * Program **Family Development Center (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted **[Change Status]** to **Submitted** ▼

Date Submitted 04/23/2018 05:03 PM

Submitted By VICKIE2010



	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (SC)	Treatment Plan Clients (NTPC)	Other Clients (TPC)
Annual Target	300	200	0	655
Quarterly Data (NEW Clients)	132	43	0	55

Community service events include participation in day care settings, as well as community events with children and families. Screening contacts include developmental evaluations for the purpose of screening only. Children may be identified for further evaluation or for re-screening at three to six month intervals. Of the total number of children screened this quarter, 30% are bilingual and 17% were referred to Early Intervention. Service hours of 572.75 comprise time spent in activities that are not state funded and could not be matched to a particular child.

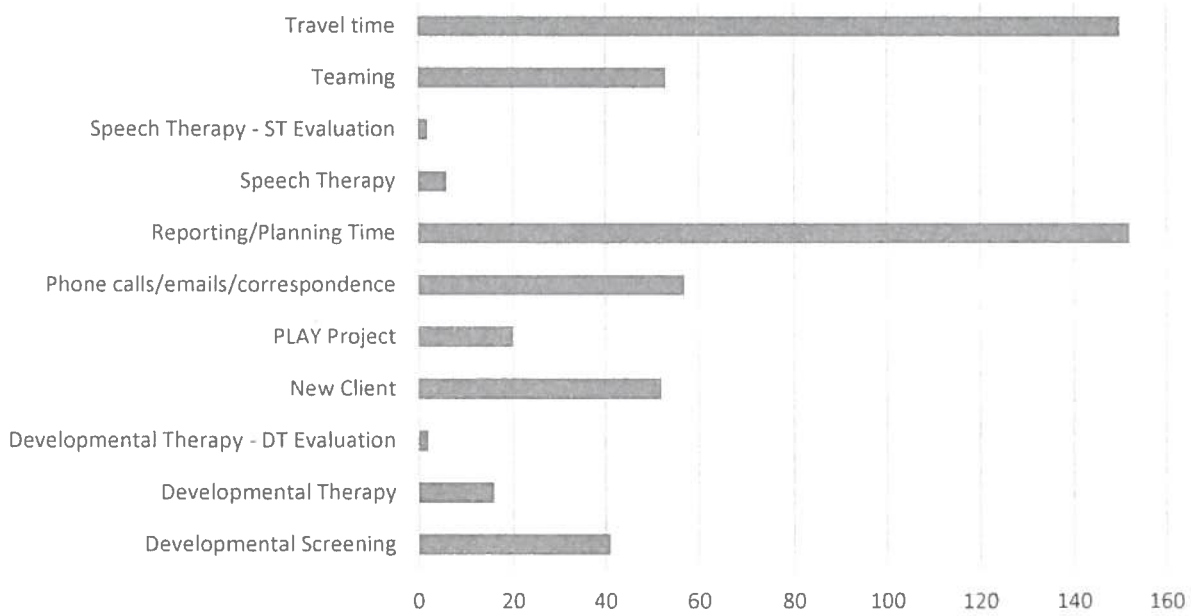
Developmental Services Center

Family Development Center \$562,280

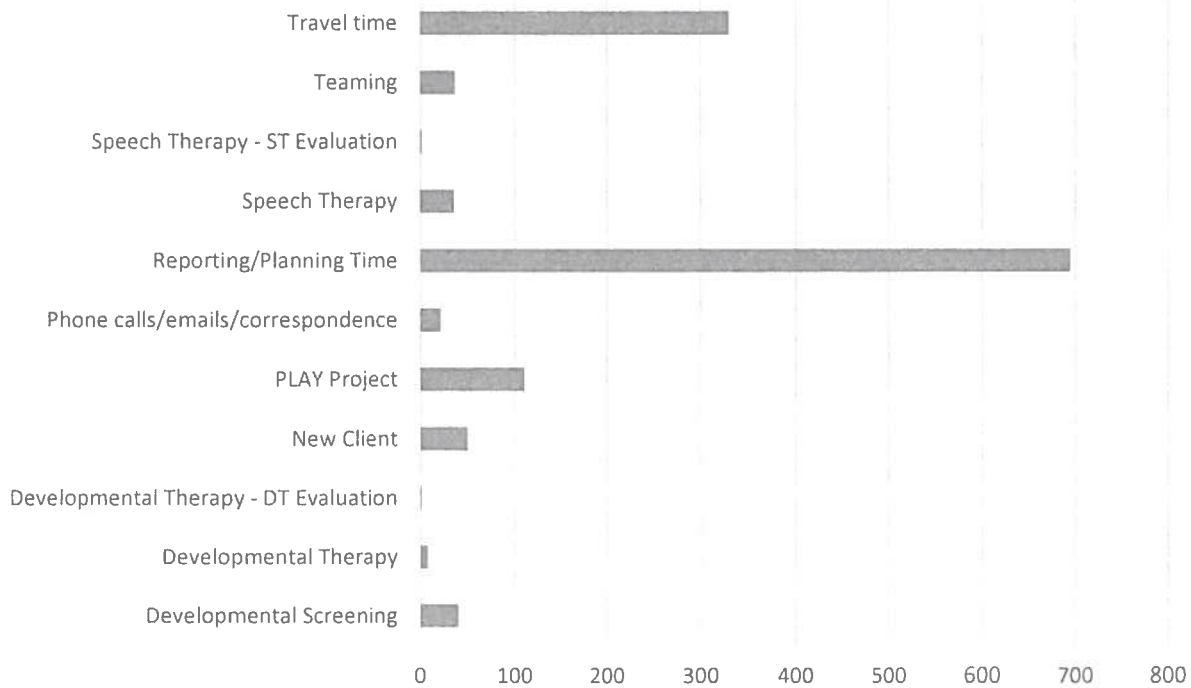
FY18 Third Quarter

172 people were served for a total of 1334.25 hours

Participants per Service Activity



Hours per Service Activity



62

Instructions

Quarterly Program Activity / Consumer Service Report [\(Return to Quarterly Reports \)](#)

- * Agency **Developmental Services Center**
- * Board **Mental Health Board**
- * Program **Individual and Family Support (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted [\[Change Status \]](#) to [Submitted](#) ▼

Date Submitted 04/23/2018 12:01 PM
Submitted By VICKIE2010



Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other (CSE) (SC) (NTPC)

Annual Target	2	5	26	17
Quarterly Data (NEW Clients)	0	2	4	3

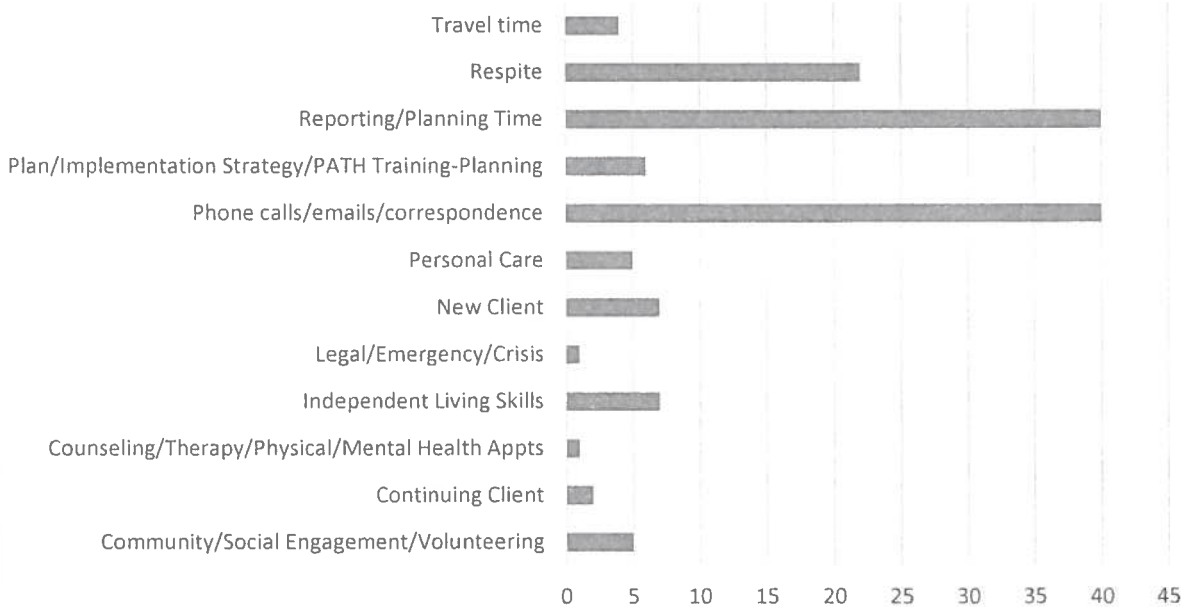
Comments **The Individual and Family Support Program continues to provide services and supports to individuals and families in the following ways: direct staff support; personal care; activity funds; camp registration fees; and YMCA memberships.**

Developmental Services Center

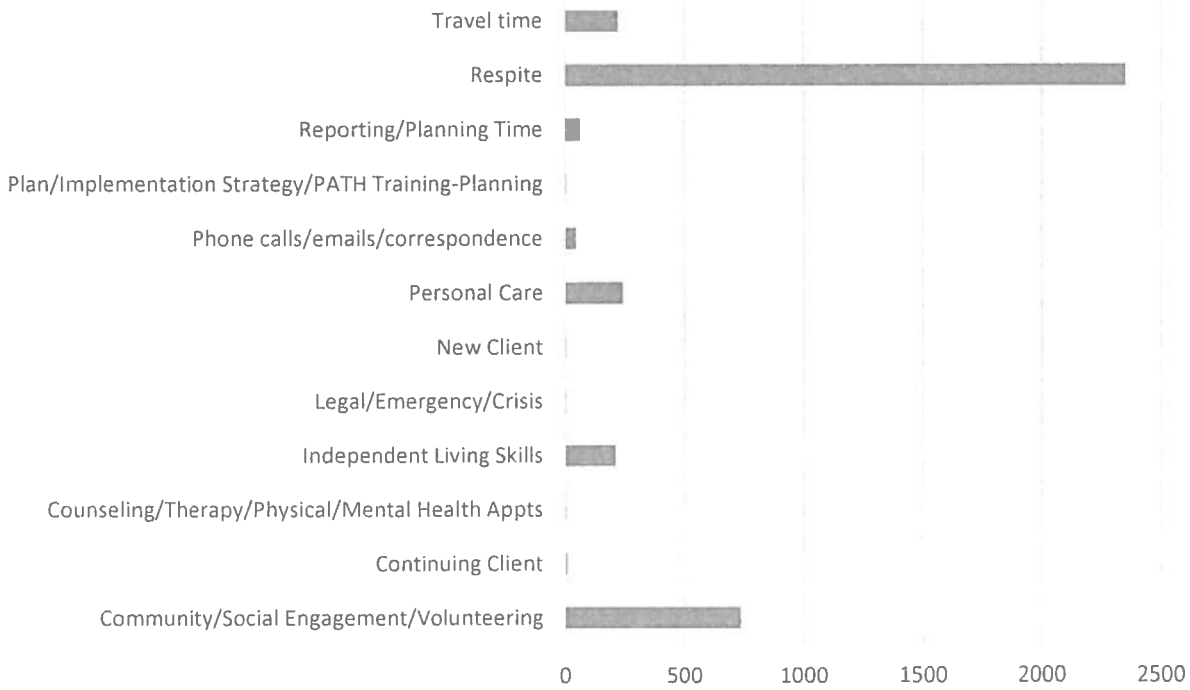
Individual & Family Support \$392,649 MHB FY18 Third Quarter

43 people were served for a total of 3,875.00 hours

Participants per Service Activity



Hours per Service Activity



64

Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- * Agency **Developmental Services Center**
- * Board **Developmental Disabilities Board**
- * Program **Integrated/Site-Based Srvs-Community 1st (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted

[Change Status] to Submitted

Date Submitted 04/24/2018 10:55 AM

Submitted By VICKIE2010

65

	Community Service Events (CSE)	Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	4	4	25	53	
Quarterly Data (NEW Clients)	4	3	9	1	

Comments The four Community Service Events this quarter included discussions of services with family members of prospective consumers and a tour of DSC with the parent and school aid of a Community Day Services Experience prospective participant. Three Service Screenings were also conducted this quarter.

In third quarter, 19 people were spending at least 40% of their time in the community, with a group average of 67%.

Weekly groups included: Cooking groups (Healthy Cooking and beginner, with an additional Microwave Meals group added), Health Matters, Book Clubs, Bowling, Men's Group, an MTD exploration / learning group, "Got You Covered" (Enactus group), Art classes, Exercise, Self Advocacy, Movie Review, Art of Friendship (relationships and social skills), Music group, Nature group, Volunteer Exploration, and Diversity in Dining.

New additions this quarter include a Magic group, learning about different magic tricks, and a Women's group. The Women's group became interested in hair coloring, and several people experimented with pink hair. Along with several small projects, the Men's group helped shovel a member's driveway, and attempted to demonstrate the power of words, thought, and intentions by trying out the "Rice Experiment" created by Masaru Emotos. The group liked the experiment, along with the ensuing conversations about the power of positivity. One of the groups attended a MLK Celebration at the Vineyard, and very much enjoyed the program and hymns.

The Enactus group "Got You Covered" continued to learn and grow. They have increased their knowledge of the software; have filled several orders, and their Facebook page is up and running. Art groups learned about different painting styles, and did an uncanny job of recreating Bob Ross style pictures. Groups at the Crow are working on handmade soaps to sell, and are enjoying blending different styles and scents.

Volunteer efforts continued at Salt and Light, Swann Special Care Center, C-U Rehab, Habitat for Humanity, Adopt-a-Shelter with MTD, and Nature Abounds, with a new group at the I.D.E.A store on Wednesdays. One person who started out volunteering one day a week with a group is now volunteering independently on a regular basis. One person began volunteering at the Vineyard Food Pantry this quarter.

Other participants visited numerous community restaurants, stores, museums, and fitness centers this quarter. In addition, they planned and executed a few special events this quarter, including an Amtrak train trip to Rantoul where they had lunch at Ott's; a tour of the WBGJ radio station; and a trip to Gordville and lunch at Lenny's.

Advocates in Motion stayed active with meetings, webinars, and presented "Expect the Best" at a CCDDDB board meeting. They were invited to Centennial High School on March 7th for "Spread the Word to End the Word". A collaborative effort with one of the art groups at The Crow produced a custom made banner for people to sign, pledging to stop using the word "retard(ed)".



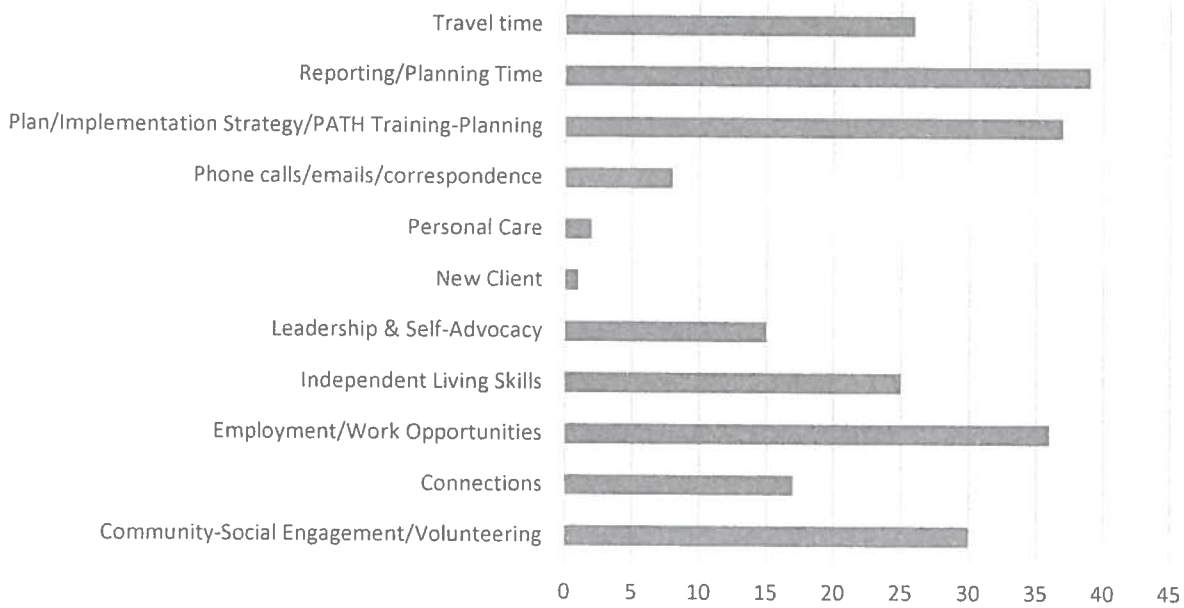
Developmental Services Center

Integrated/Site Based Services \$799,090

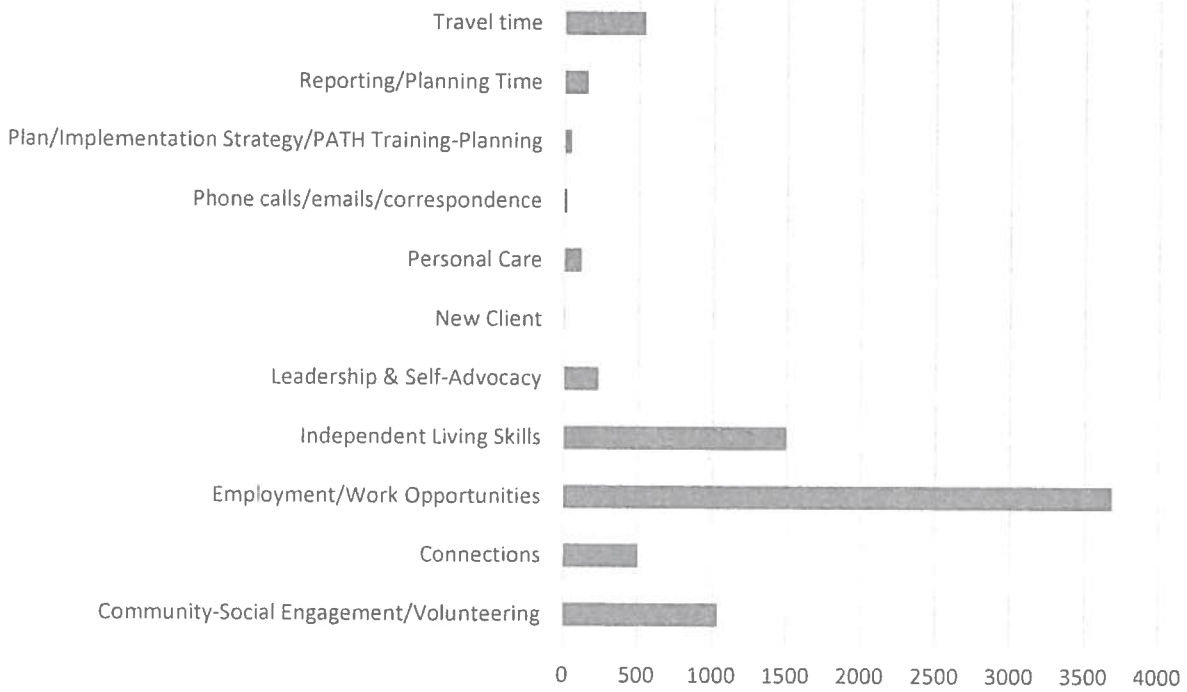
FY18 Third Quarter

40 people were served, for a total of 7,837.60 hours

Participants per Service Activity



Hours per Service Activity



67

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- * Agency **Developmental Services Center**
- * Board **Developmental Disabilities Board**
- * Program **Service Coordination (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted [Change Status] to Submitted

Date Submitted 04/24/2018 09:58 AM
Submitted By VICKIE2010

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	20	296	
Quarterly Data (NEW Clients)	34	5		2

Supports and services include: Person-Centered Case Coordination; Interdisciplinary Team Coordination; linkage and referral to community clinical supports and DSC community and in-house clinical supports; consumer documentation management; DHS Home-Based Support Self-Directed Service Assistance support; DHS Additional Staff Supports Coordination; HFS Medical Card/SNAP Coordination and maintenance; CCDDB Individual and Family Support Coordination/Management; HUD Shelter Plus Care Program Coordination; 24-hour Consumer Emergency Response and Response Team Supervision; Social Security Administration representative payee services; Affordable Care Act Coordination; Illinois Office of the Inspector General Abuse and Neglect Reporting and OIG Agency/State Investigations; DCFS client coordination and support; medical appointment coordination and intermittent direct support. The Services/Screening Contacts reported consist of 27 intake calls received for services funded by CCDDB during January, February, and March of 2018 and staff attendance at seven IEPs.

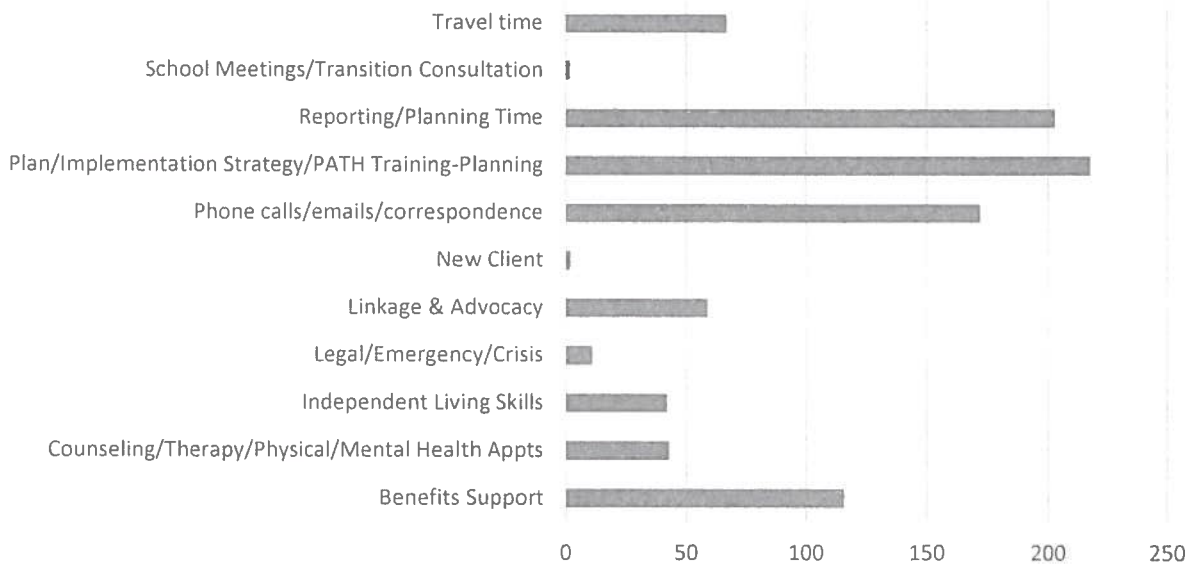
Developmental Services Center

Service Coordination \$410,838

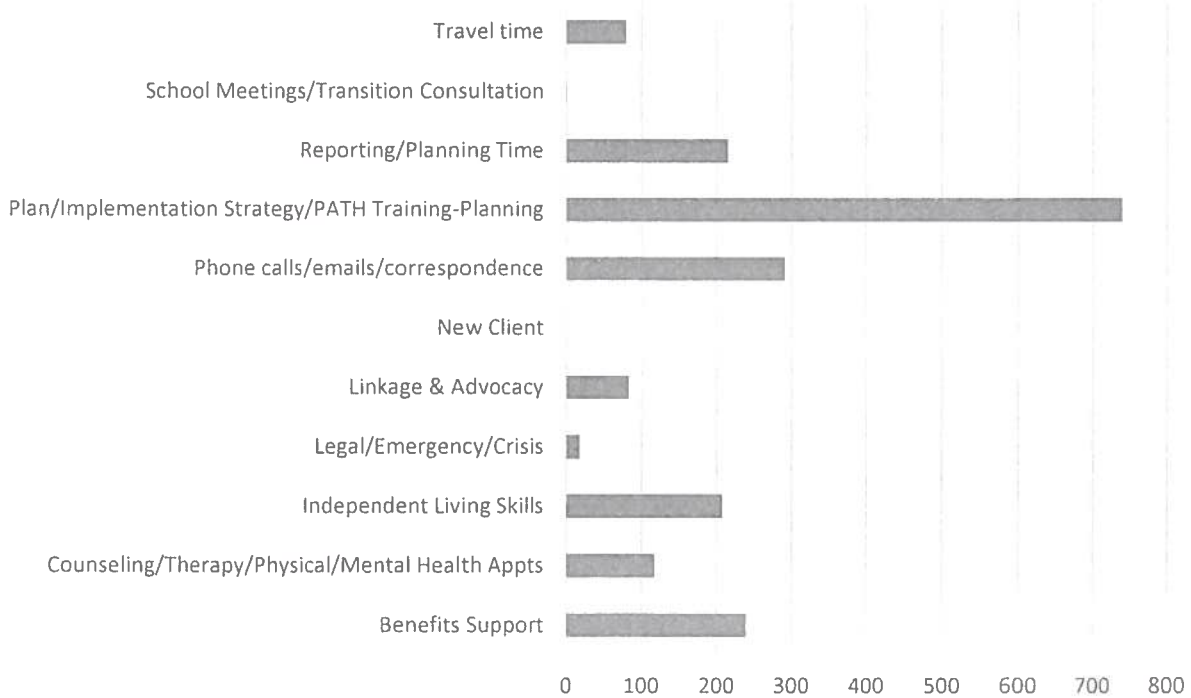
FY18 Third Quarter

241 people were served, for a total of 1994.83 hours

Participants per Service Activity



Hours per Service Activity



69

Instructions

Quarterly Program Activity / Consumer Service Report

[\(Return to Quarterly Reports\)](#)

- * Agency **Illinois Association of Microboards and Cooperatives**
- * Board **Developmental Disabilities Board**
- * Program **IAMC Building Inclusive Communities (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted

[**Change Status**] to **Submitted** ▼

Date Submitted 04/27/2018 04:29 PM

Submitted By VNISWANDER

70

Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
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Annual Target	5	0	0	8
Quarterly Data (NEW Clients)	1	0	0	0

IAMC Staff presented a lecture for a class of approximately 180 students on February 15, 2018 at the University of Illinois.

We are pleased to see progress in independent development in continuation of teams and regular meetings. Three of our current teams have convened meetings without the presence of IAMC staff with successful results. This independent functioning is critical for the long-term success of the model.

I also want to note that Arizona State University has begun a research study on the team model of support (based of David Wetherow's Star Raft model). This survey-based study examines the efficacy of the community-based team approach.

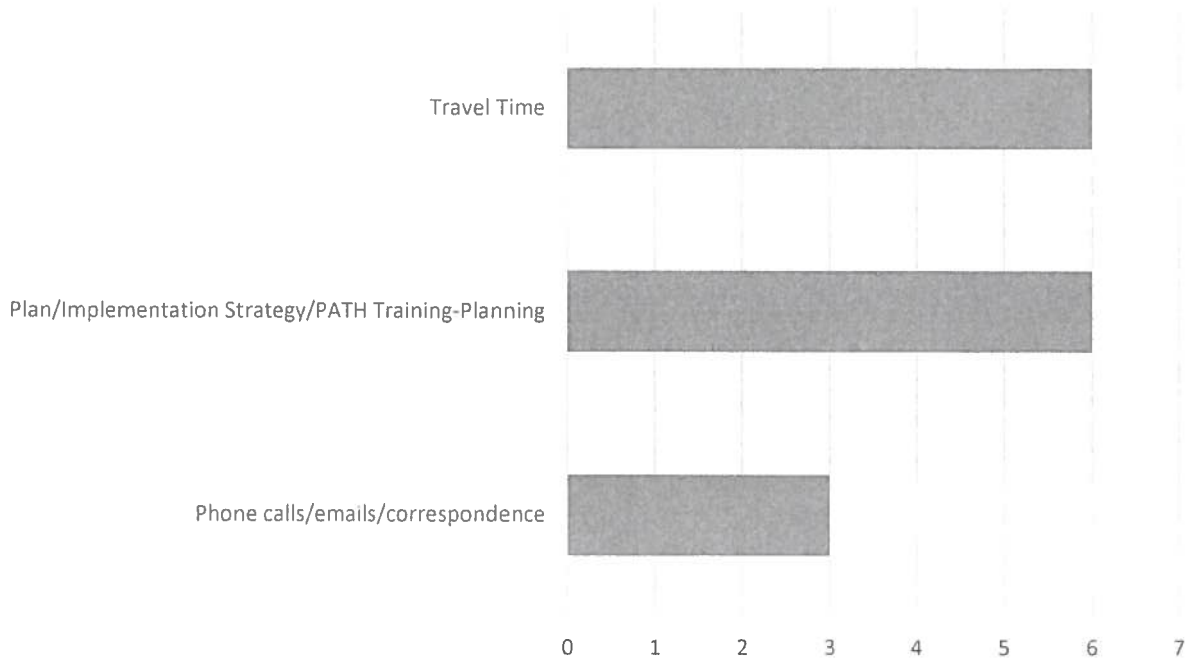
IAMC

Building Inclusive Communities \$52,750

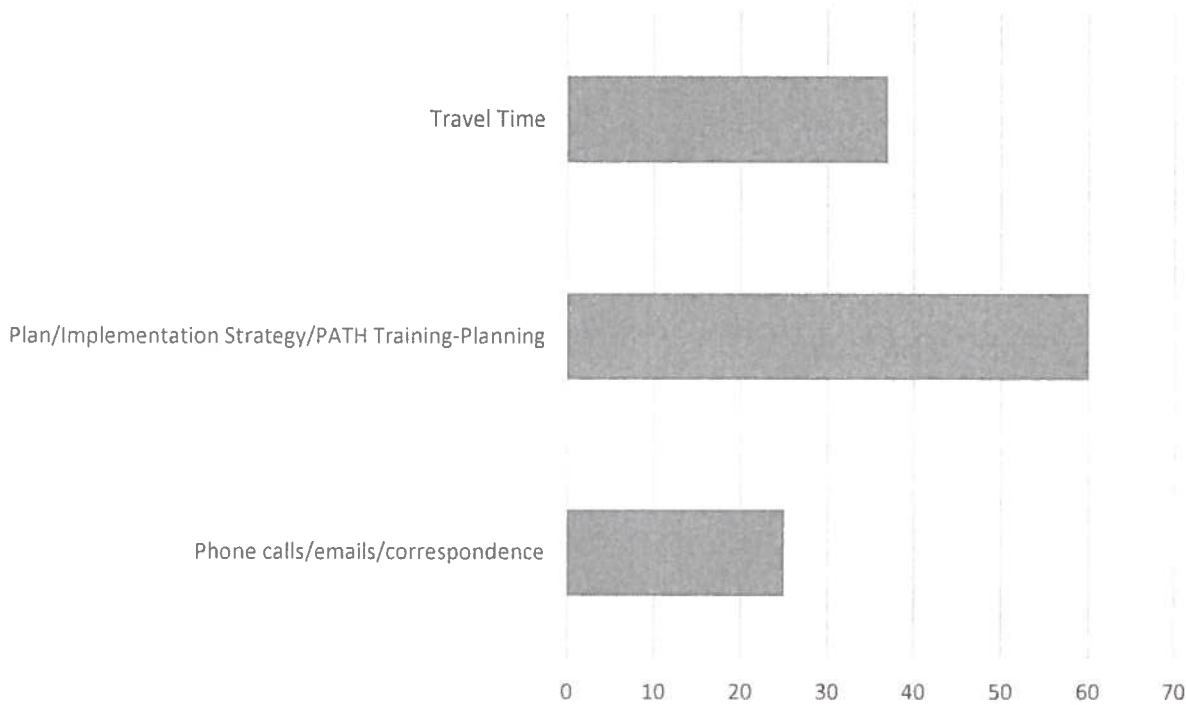
FY18 Third Quarter

8 people were served, for a total of 122 hours

Participants per Service Activity



Hours per Service Activity



71

▶ Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- * Agency **PACE, Inc.**
- * Board **Developmental Disabilities Board**
- * Program **Opportunities for Independence (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted [Change Status] to Submitted ▼

Date Submitted 04/26/2018 05:15 PM

Submitted By NANCY



Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other (CSE) (SC) (NTPC) (TPC)

Annual Target	25	500	30	20
Quarterly Data (NEW Clients)	7	278.5	4	3

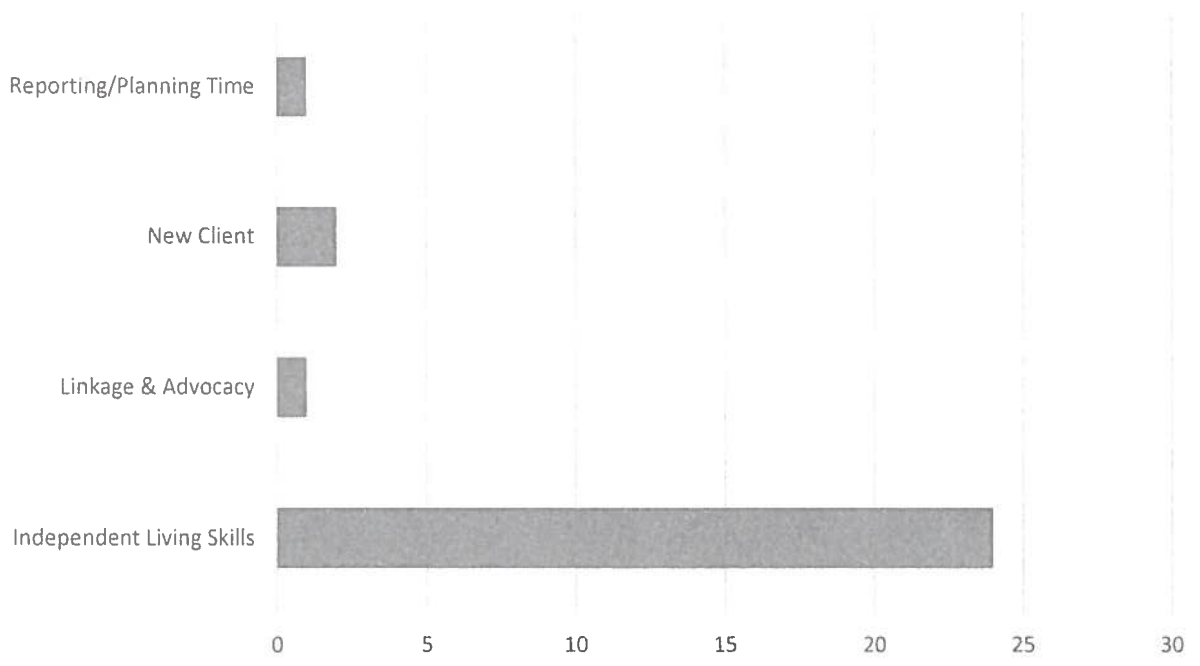
Comments

PACE

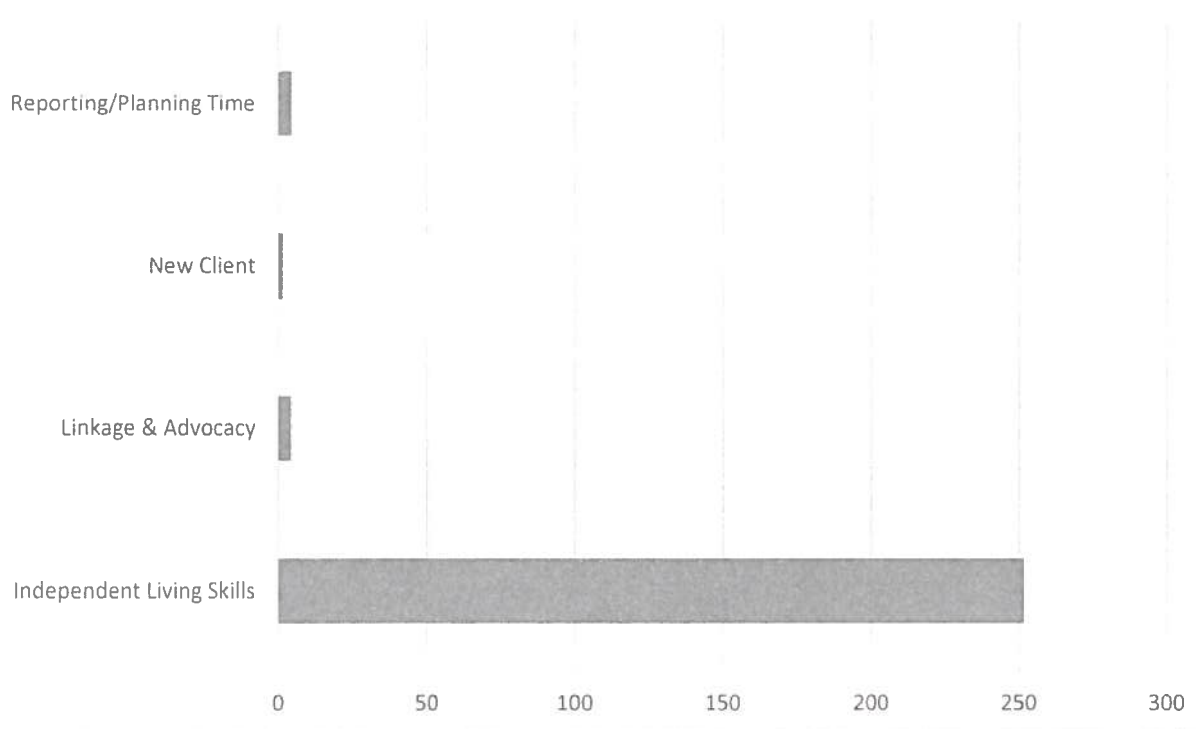
Opportunities for Independence \$40,546 FY18 Third Quarter

27 people were served, for a total of 268 hours

Participants per Service Activity



Hours per Service Activity



73

Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- * Agency **Rosecrance Central Illinois**
- * Board **Developmental Disabilities Board**
- * Program **Coordination of Services: DD/MI (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted [Change Status] to Submitted

Date Submitted 04/26/2018 12:40 PM

Submitted By KKESSLER

74

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other (CSE) (SC) (NTPC) (TPC)

Annual Target	12	15	0	36
Quarterly Data (NEW Clients)	8	8	0	3

Christine Kline has now been in this position of DD MI Clinician for 5 months. During this quarter she had 8 Community Service Events with other providers/agencies who work with DD/ID clients. She provided 8 new Screenings for potential clients to this caseload. 3 clients were admitted to this caseload, 1 client will be transferred to regular case management services, 2 were found not eligible for services and 3 clients did not engage in services once offered to them. 168.68 hours of direct service were provided to this caseload. Christine continued to provide all the warranted mental health services to this caseload. She does a very thorough job of assessing the clients needs/issues and has been most creative with helping clients resolve their issues.

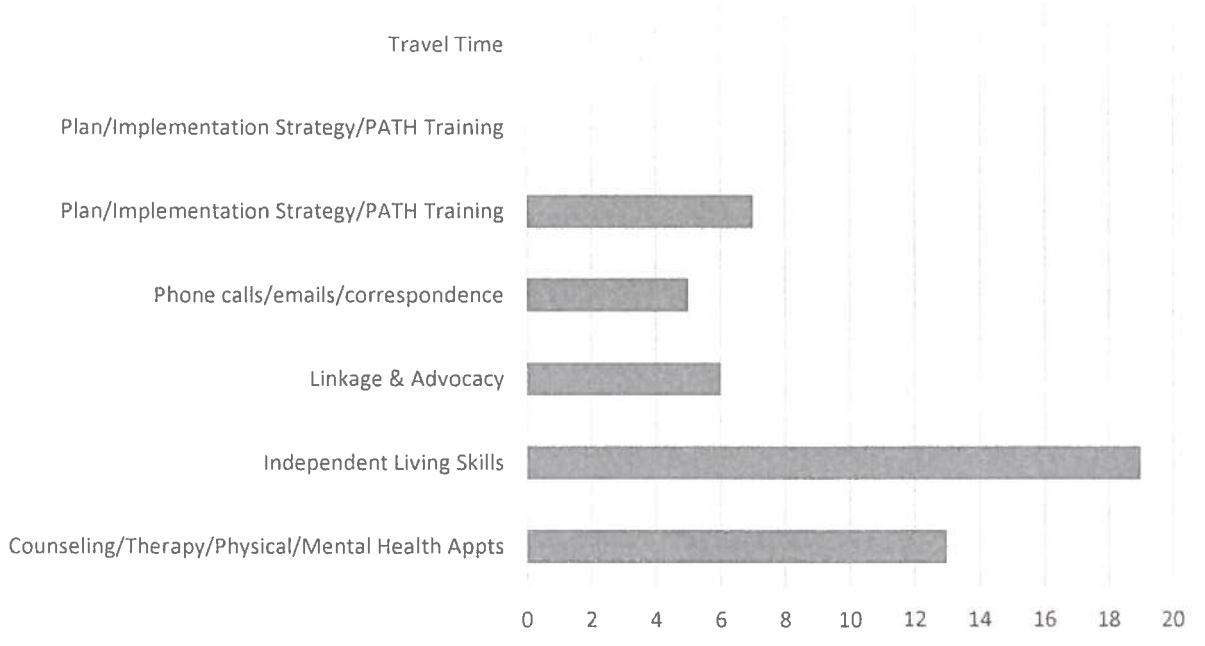
Rosecrance Central Illinois

Coordination DD/MI \$34,126

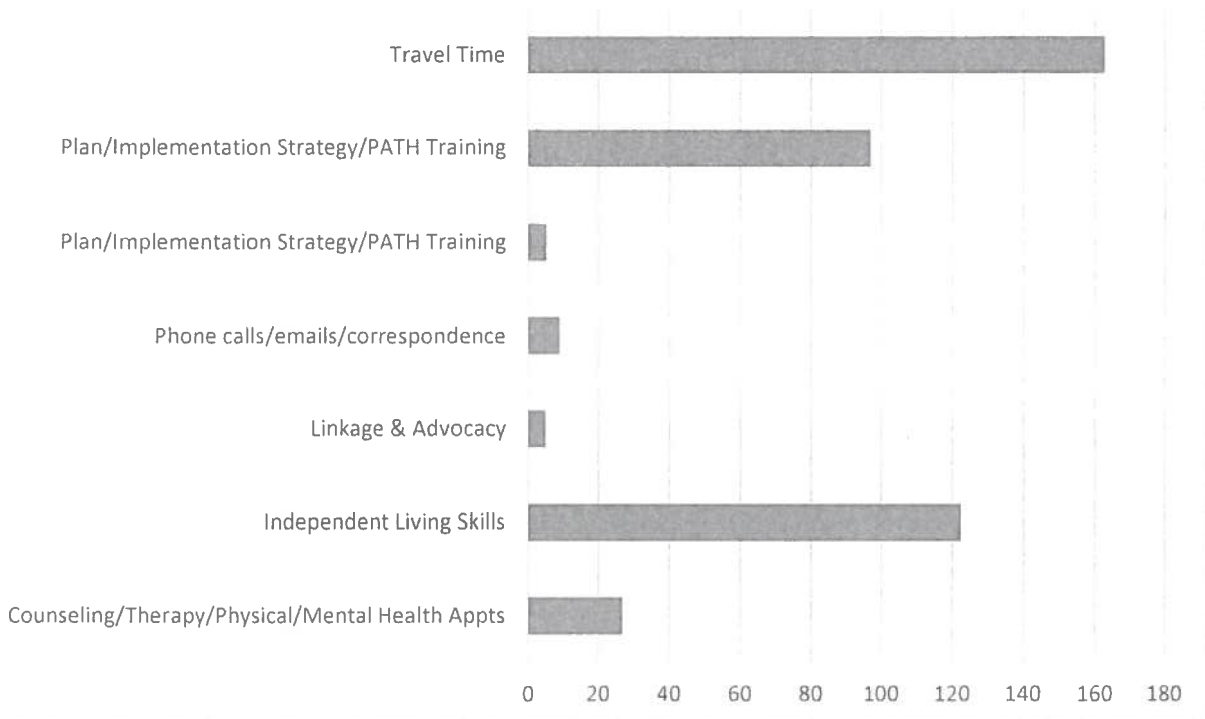
FY18 Third Quarter

22 people were served, for a total of 428.68 hours

Participants per Service Activity



Hours per Service Activity



75

Instructions

Quarterly Program Activity / Consumer Service Report [\(Return to Quarterly Reports \)](#)

- * Agency **United Cerebral Palsy Land of Lincoln**
- * Board **Developmental Disabilities Board**
- * Program **Vocational Services (2018)**
- * Period **2018 - Third Quarter FY18**

Status Submitted [\[Change Status \]](#) to [Submitted](#) ▼

Date Submitted 04/26/2018 12:25 PM

Submitted By **BYARNELL**

	Community Service Events Service / Screening Contacts	NON-Treatment Plan Clients	Treatment Plan Clients	Other
	(CSE)	(SC)	(NTPC)	(TPC)
Annual Target	25	60	0	20
Quarterly Data (NEW Clients)	3	5	0	2
				5000
				362

Comments **UCP has been low on job coaches during all 3 quarters - there have been several openings throughout the year.**

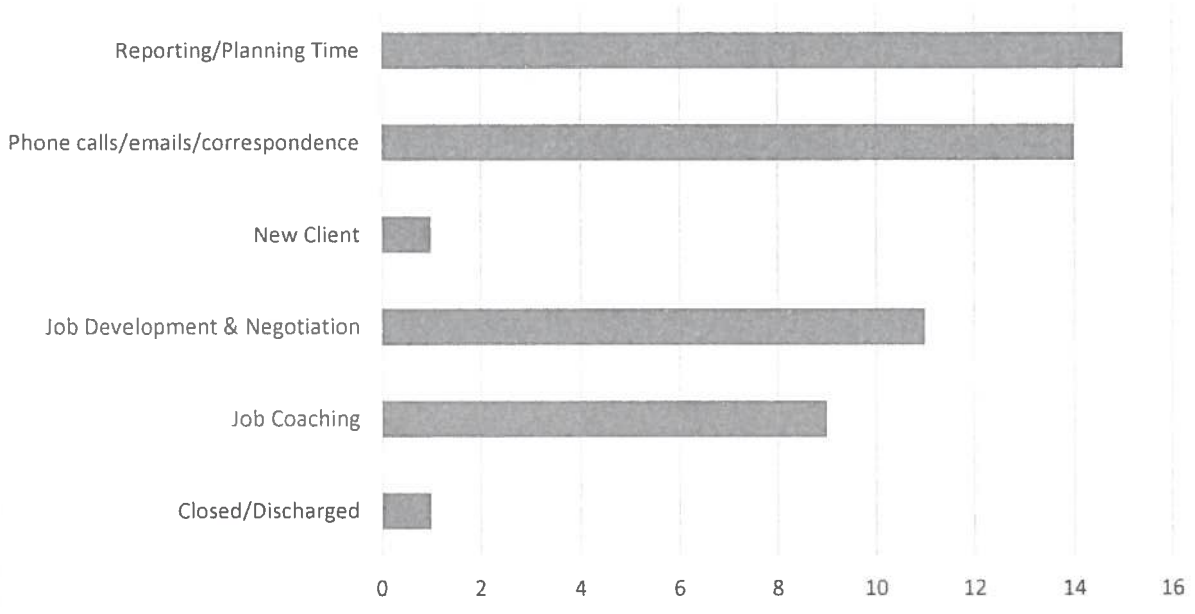
UCP Land of Lincoln

Vocational Services \$34,590

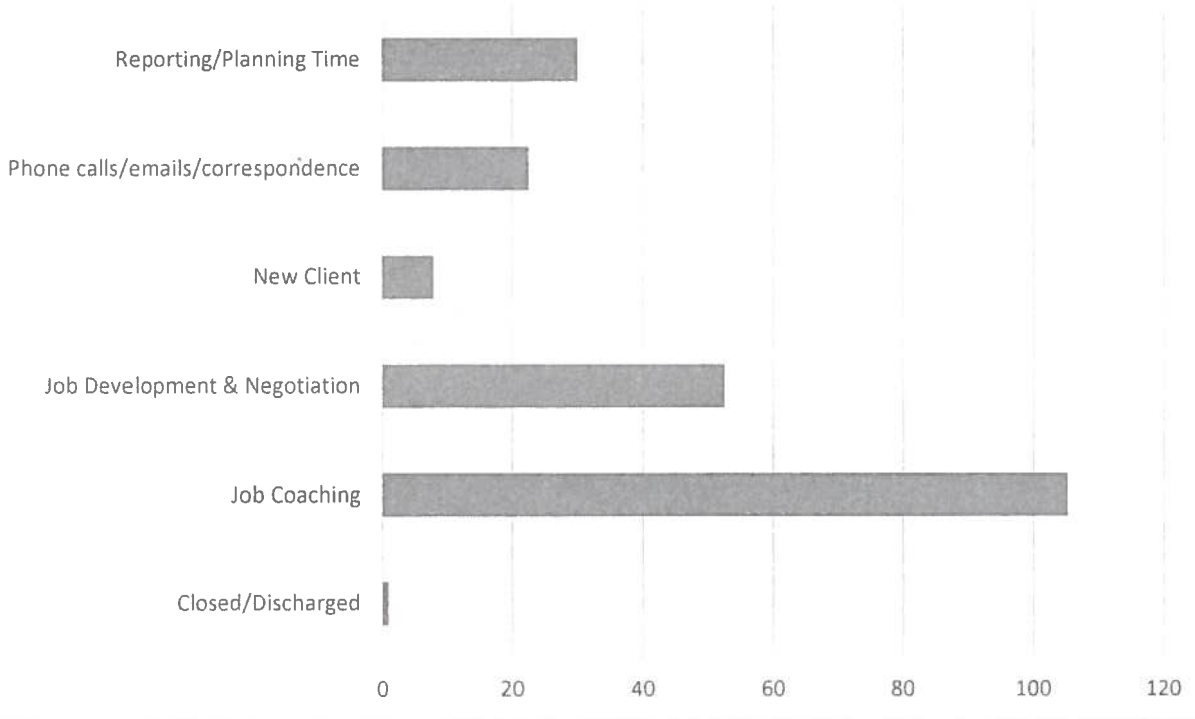
FY18 Third Quarter

16 people were served, for a total of 220.75 hours

Participants per Service Activity

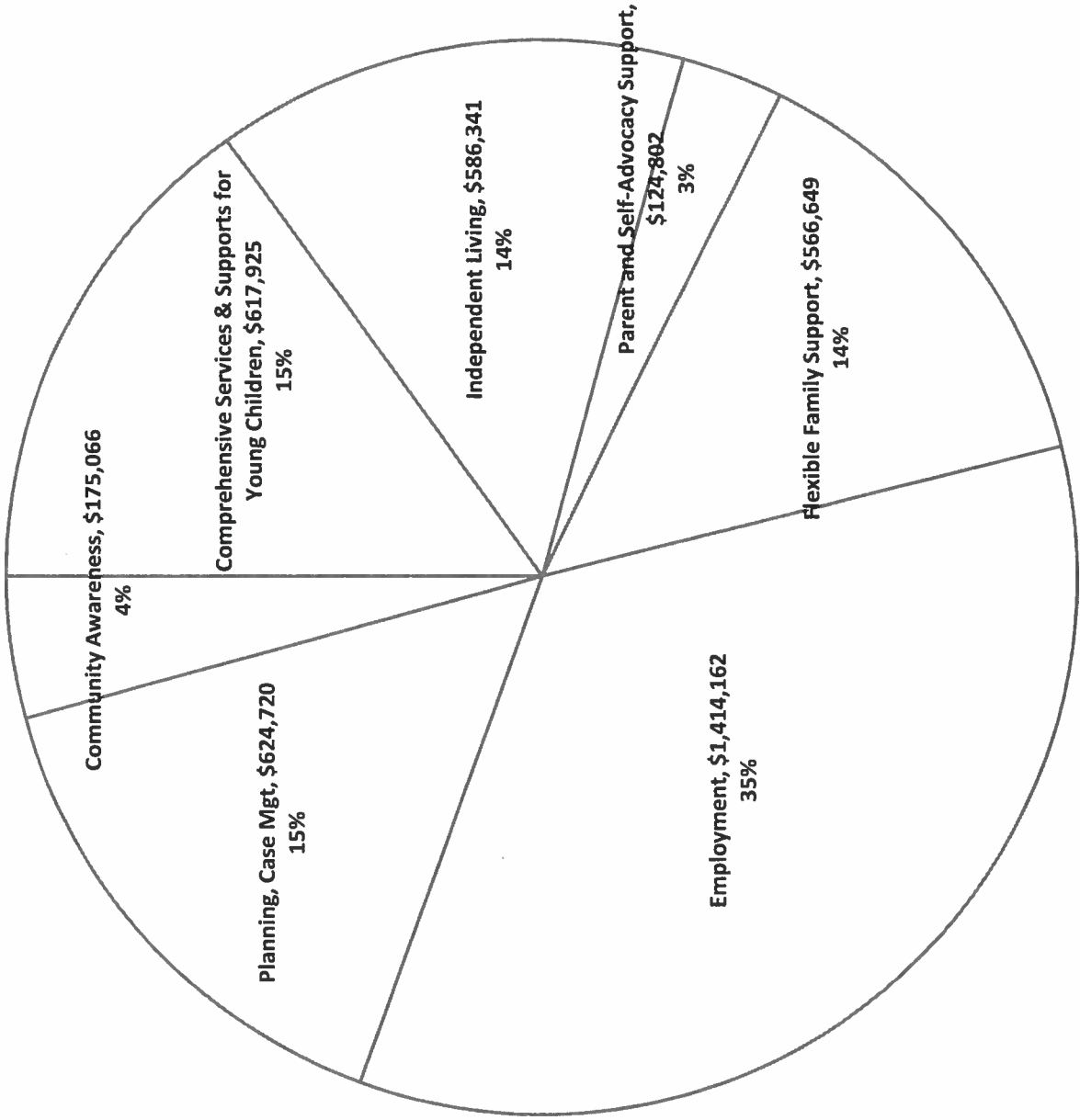


Hours per Service Activity



77

ID/DD \$ INVESTMENTS, BY PRIORITY (BOTH BOARDS)



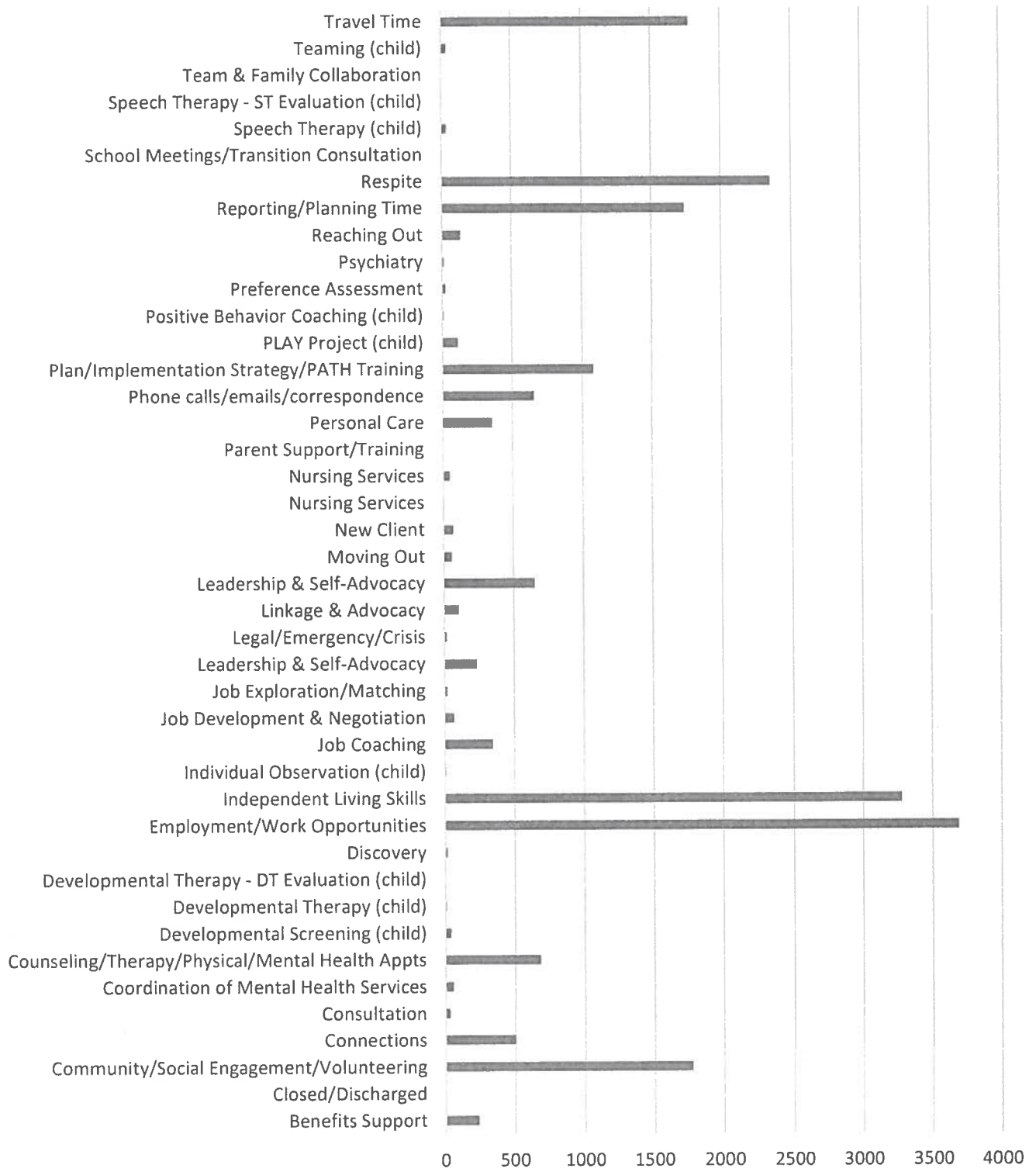
78

People Served (includes duplication), per Service Activity



79

Hours of Service (unduplicated), per Service Activity



80



9.B.

CCDDB 2018 Meeting Schedule

Board Meetings

8:00AM except where noted

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

May 23, 2018

June 27, 2018

July 25, 2018 – Dimit Conference Room

September 19, 2018

October 24, 2018

November 14, 2018

November 28, 2018 – tentative study session

December 19, 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

July 2018 to June 2019 Meeting Schedule with Subject and Allocation Timeline

The schedule provides the dates and subject matter of meetings of the Champaign County Developmental Disabilities Board through June 2019. 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; topics will be based on issues raised at meetings, brought by staff, or in conjunction with the Champaign County Mental Health Board. Regular meetings of the CCDDDB are usually at 8AM; study sessions at 5:30PM. Included with meeting dates are tentative dates for steps in the funding allocation process for Program Year 2020 (July 1, 2019 – June 30, 2020) and deadlines related to current (PY2019) agency contracts.

07/25/18	Regular Board Meeting (Dimit Conference Room) Election of Officers
08/24/18	<i>Agency PY2018 Fourth Quarter and Year End Reports Due</i>
09/19/18	Regular Board Meeting
10/24/18	Regular Board Meeting Draft Three Year Plan 2018-2020 with FY19 Objectives Release Draft Program Year 2020 Allocation Criteria
10/26/18	<i>Agency PY2019 First Quarter Reports Due</i>
10/31/18	<i>Agency Independent Audits Due</i>
11/14/18	Regular Board Meeting
11/28/18	Study Session - tentative
12/12/18	<i>Public Notice to be published on or before this date, giving at least 21-day notice of application period.</i>
12/19/18	Regular Board Meeting Approve Three Year Plan with One Year Objectives Allocation Decision Support – PY20 Allocation Criteria
01/04/19	<i>CCMHB/CCDDDB Online System opens for Agency Registration and Applications for PY20 Funding.</i>
01/23/19	Regular Board Meeting
1/25/19	<i>Agency PY2019 Second Quarter Reports Due</i>
02/08/19	<i>Agency deadline for submission of applications for PY2020 funding. Online system will not accept forms after 4:30PM.</i>

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02/20/19	Regular Board Meeting List of Requests for PY20 Funding
03/20/19	Regular Board Meeting
04/17/19	<i>Program summaries released to Board, copies posted online with the CCDDDB April 24, 2019 Board meeting agenda</i>
04/24/19	Regular Board Meeting Program Summaries Review and Discussion
04/26/19	<i>Agency PY2019 Third Quarter Reports Due</i>
05/15/19	<i>Allocation recommendations released to Board, copies posted online with the CCDDDB May 22, 2019 Board meeting agenda.</i>
05/22/19	Regular Board Meeting Allocation Decisions Authorize Contracts for PY2020
05/23/19-06/05/19	<i>Contract Negotiations</i>
06/19/19	Regular Board Meeting Approve FY2020 Draft Budget
06/27/19	<i>PY20 Contracts completed/First Payment Authorized</i>

83



CCMHB 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)

May 23, 2018

June 27, 2018

July 18, 2018

September 19, 2018

September 26, 2018 – study session

October 17, 2018

October 24, 2018 – study session

November 14, 2018

November 28, 2018 – joint study session with the CCDDDB

December 19, 2018 – tentative

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

84



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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



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

85

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

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Kim Bowdry, Associate Director for Intellectual & Developmental Disabilities
Staff Report – May 2018

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CCDDB Reporting: FY18 Third Quarter reports were due on April 27, 2018. The third Quarter provided a great snapshot of the services that people are getting through CCDDB funded programs. This board packet includes a breakdown of services by hour and by service activity.

Site Visits: In March, I participated in a site visit at the UP Center of Champaign County with Mark Driscoll, Associate Director and Chris Wilson, Financial Manager. Later in March, I completed a site visit for CTF-Nursing with Stephanie Howard-Gallo, Operations and Compliance Coordinator. In April, I conducted a site visit with CTF-Advocacy Center.

DisABILITY Resource Expo: I attended Expo Steering Committee Meetings on March 6th and March 20th. The Expo was held on April 7th and was very well attended by the public. Books from two AIR authors were purchased and given away as prizes this year, both were very well-received. Washcloths crocheted by two other AIR artists were also purchased and used as prizes.

Expo supplies were moved out of the storage space at PNC. CCDDB/CCMHB staff secured a storage space within the Brookens building, which allows for temperature controlled storage, as well as easy access to the supplies.

The 2019 DisABILITY Resource Expo is scheduled for March 30, 2019 at the Vineyard Church.

Program Summaries: CCDDB program summaries were completed on all funding applications and submitted in the April board packet. Questions received after the April 25, 2018 CCDDB meeting were compiled and sent to agencies for response. Agency responses can be found in this board packet.

Community Learning Lab School of Social Work Students: Students from the School of Social Work gave their presentation on April 26, 2018 on developing an employment training program for people with Intellectual and Developmental Disabilities.

NACBHDD: I participated in monthly I/DD committee calls.

ACMHAI: I participated in monthly I/DD committee calls.

TPC: I participated in two meetings of the TPC, on March 9th and May 11th.

MHDDAC: I participated in the monthly meetings of the Mental Health and Developmental Disability Agencies Council in March, April, and May.

SOAR: I participated in A SOAR Planning Workshop, a Fast Tracking Support for Disabled Residents.

Other activities: I participated in the Doors to Wellbeing Peer Specialist Monthly Webinar Series. I participated in a Web Seminar, "The Case for Palliative Care for People with IDD and Dementia." I attended the Ebertfest Challenging Stigma panel. I viewed Bottom Dollars, a Rooted in Rights original documentary. I also participated in an Arc of Illinois Webinar, "Supporting Siblings Throughout Life."

PUNS Selection & Reports: DHS-DDD selected sixteen Champaign County people from the PUNS database in April. Seven of those people have completed the PAS process and are currently receiving services. The remaining people continue to work with the ISC to complete the PAS process.

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Stephanie Howard-Gallo

Operations and Compliance Coordinator Staff Report – May 2018 Board Meeting

SUMMARY OF ACTIVITY:

Third Quarter Reporting:

Third Quarter financial and program reports were due at the end of April. Most agencies report on time. Champaign Urbana Area Project (CUAP) asked for and was granted an extension to complete their reports. Several agencies were asked to revise and/or correct their reports. No letters of non-compliance were sent out for the 3rd quarter.

Anti-Stigma Event/Ebertfest Art Show:

A tent filled with artists (approximately 20 or so) sold their work (soaps, original paintings, books, garden art, greeting cards, T shirts, jewelry) at the art show outside of Ebertfest on Saturday, April 21. Fortunately, we had beautiful weather that day and the artists were able to spill out into the sun. We were at capacity this year. Foot traffic in and out of the tent was steady throughout the day and artists were really pleased with the turnout.

Site Visits:

I participated in a site visit on February 8th (along with Kim Bowdry and Chris Wilson) for C-U Able, held at the YMCA in Champaign. We verified first quarter reporting and talked about how the program was doing. In March, Kim Bowdry and I conducted a CTF Nursing site visit.

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

In April, I attended the ACMHAI strategic planning meeting in Lynn Canfield's place that was held in Utica, IL. The meeting was a two-day event. Members discussed what they wanted the focus of the organization to be in the future. They discussed the potential growth of the organization and its strengths and weaknesses as an organization. It was an interesting exercise in hearing out everyone's opinions and coming to a consensus on where to go from here.

Other:

- Preparing meeting materials for CCMHB/CCDDB regular meetings and study sessions/presentations.
- Composing minutes for the meetings.
- Preparing program summaries for DSN and CU Able.
- Contributing to revisions on the FY19 contract boilerplate.
- Attended steering committee meetings leading up to the disAbility Expo and worked at "tear down" after the event on Saturday, April 7th.

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March-May 2018 Monthly Staff Report

Shandra Summerville , Cultural and Linguistic Competence Coordinator

Agency Cultural and Linguistic Competence (CLC) Technical Assistance, Monitoring, Support and Training for CCMHB/DDB Funded Agencies

Promise Healthcare- Staff members reached out about FY19 CLC Plan Instructions.

Community Choices- I conducted CLC Training for the Board of Directors for Community Choices. The Training was on Effective Collaboration as a board.

Community Services Center of Northern Champaign County- Annual CLC Training was held on March 15 for the board members and staff. There has been a lot of turnover on the Board of Directors, so it was requested that there was a CLC 101 Refresher.

Grow Illinois – The first CLC Training for Grow Illinois was on March 23, 2018. I provided an overview of the requirements and we talked about the historical perspective of CLC for the CCMHB.

CLC Coordinator Direct Service Activities

2019 CLC Plans Review- I reviewed and summarized 28 CLC Plans and read 42 Program applications. I realize there were 62 program applications that were submitted for funding. During my review of the CLC Plans, I looked for connection of the CLC Plan to the funding application to see if there was a parallel connection of CLC Values within the program plans. I learned that most of the program applications align with the value of cultural competence. I noticed there was a disconnect in some applications that will be addressed with technical assistance and monitoring. Some of the applications did not follow the updated template and will be addressed during contract negotiations.

Learning Series: Peer Navigators Support People with Serious Mental Illness- This is a series of webinars that are hosted by, the Substance Abuse and Mental Health Services Administration (SAMHSA's) Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS).

Session One: Thursday, March 1, 2018, 12:30–1:30 p.m. ET --*Health Disparities of People from Latino and African American Communities Living with Serious Mental Illness*

Session Two: Thursday, March 8, 2018, 12:30–1:30 p.m. ET--*Principles and Practices of Peer Navigators*

Session Three: Thursday, March 15, 2018, 12:30–1:30 p.m. ET--*Implementation of Peer Navigator Program*

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Georgetown Leadership Academy: Increasing Cultural Diversity and Cultural and Linguistic Competence in Networks Supporting Individuals with Intellectual and Developmental Disabilities

I attended this conference in Santa Fe, New Mexico April 30-May 4. This was an opportunity for me to meet other people in the country that provide leadership in the area of ID/DD and talk about the opportunities and challenges of advancing the value of cultural diversity and cultural competence. I learned there were over 200 applicants and I was selected out of 35 people that attended the Leadership Academy. This is a year long project that I will provide support, guidance, and coaching on ways to continue to advance the value of cultural competence in Champaign County.

ACMHAI

I participated in the Children's Behavioral Health Committee call. There was discussion about utilizing the CANS as an assessment tool and how it will be implemented across the state. I also provided information about the Children's Mental Health Awareness Activities in Champaign County.

Anti-Stigma Activites/Community Collaborations and Partnerships

University of Illinois African-American Community Healing Storytelling Project- The IRB was completed in March and we began having focus groups to learn about how violence impacts the African American community and what Community Healing would look like. We have over 20 people participate in the various focus groups. I helped with logistics and co-facilitated for one focus group on April 26th.

Digital Story-telling workshop is the next event that will actually capture the stories of people in the community that did not mind sharing their story through video. There will be a community event to share the results of the data that will held in September.

YWCA/Welcome Center- YWCA Women in Leadership Program has completed the first training Module for the Cultural Competence Training for the volunteers of the New American Welcome Center. This will be an on-going project that will add additional training modules so that other people in Champaign County will benefit from the training.

Disability Resource Expo Committee- Thank you for a successful event. Thanks to Becca Obuchowski for overseeing the Volunteer Coordination for the day of the event.

AIR- Alliance for Inclusion and Respect- Ebertfest was held April 18-22. On April 21st we had 20 artists that displayed their art work and books to festival goers. Our sponsored film was "Daughters of the Dust." We focused this year on family resilience in marginalized communities. There was a panel discussion lead by Eric Pearson, a Professor from the University of San Diego.

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Joseph Omo-Osagie, Karen Simms, and Barb Bressner represented the Alliance for Inclusion and Respect of Champaign County. Attached are some of the photos below:



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disABILITY Resource Expo: Reaching Out For Answers
Board Report
April, 2018

The 11th Annual disABILITY Resource Expo took place on April 7, with wrap-up activities completed in early May.

Barb and Jim met with event staff from The Vineyard on April 30 to discuss our recent event and the potential to hold future Expos at their venue. The Vineyard was quite happy with having the Expo there, as were we. Therefore, we are very pleased to report that the 12th Annual Expo will be held at The Vineyard Church in Urbana on **Saturday, March 30, 2019**. We have looked at some added space at The Vineyard, which will better enable us to accommodate the needs of our large number of exhibitors, and will provide a nicely equipped area for our children's activities. We have received a quote from The Vineyard, and will be getting a contract put into place soon. The quote is a bit higher than 2018, but includes the added space and acknowledges their need to pay overtime for some of their staff due to the size of our event.

Steering Committee members gathered for their annual "Celebration/Debriefing" on May 8. This get-together allowed us to celebrate another highly successful Expo. We, also, used this time to review our participant and exhibitor evaluations, talk about specific areas of the Expo, and take into consideration any changes we may want to make for the 2019 Expo. Pre-event volunteer training, increased number of ASL interpreters, entertainment, and ideas for increasing the number of participant evaluations were just a few of the topics addressed.

Due to problems with our set-up for the 2016 Expo, we were provided services from Signature Events (tables, chairs, pipe & drape services) out of Springfield at no cost this year. We were quite pleased overall with the services they provided this year, and plan to develop a contract for their services again in 2019. Barb discussed our wishes with their representative, and we have been given a quote at the same cost as in 2016. We will be completing a contract with them soon.

We will be merging information from the 2018 Expo with our existing directory. Additions and updates will be completed this summer. We will, also, add those organizations who were on a waiting list for this year's Expo, and were unable to be accommodated.

We wish to extend our sincere thanks to the Champaign County Mental Health and Developmental Disabilities Boards, Board staff, Expo Steering Committee, volunteers, and sponsors for their wonderful support of this important event for Champaign County and East Central Illinois.

Respectfully submitted
Barb Bressner & Jim Mayer
Consultants

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