



Champaign County Developmental Disabilities Board (CCDDB) Meeting Agenda

Wednesday, November 17, 2021, 9:00AM

CCDDB Office, Brookens Administrative Building

1776 East Washington Street, Urbana, IL

<https://us02web.zoom.us/j/81559124557> 312-626-6799, Meeting ID: 815 5912 4557

Pursuant to the Governor's Executive Order establishing a pandemic disaster in the State of Illinois that covers the County of Champaign, and the CCDDB President's determination that holding this meeting in person is not prudent at this time due to health concerns with rising numbers of COVID-19 cases and hospitalizations being reported in the county, this meeting will be held remotely via zoom. Public comment also will be taken remotely. The public may watch the meeting live through this link or view it later in archived recordings at

<https://www.co.champaign.il.us/mhbddb/MeetingInfo.php>

Public Input: All are welcome to attend the Board's meetings, using the Zoom options or in person, to observe and to offer thoughts during the "Public Participation" period of the meeting. For support to participate during a meeting, let us know how we might help by emailing stephanie@ccmhb.org. If the time or format of the meeting are not convenient, you may still communicate with the Board by emailing stephanie@ccmhb.org any written comments you would like us to read to the Board during the meeting. Your feedback is appreciated but be aware that the time for each person's comments may be limited to 5 minutes.

1. Call to Order
2. Roll Call
3. Zoom Instructions - <https://us02web.zoom.us/j/81559124557> (page 3)
4. Approval of Agenda*
5. Citizen Input/Public Participation
The chairperson may limit public participation to five minutes per person.
6. Chairperson's Comments – Dr. Anne Robin
7. Executive Director's Comments – Lynn Canfield
8. Approval of CCDDB Board Meeting Minutes (pages 4-6)*
Minutes from the 10/20/2021 board meeting are included. Action is requested.
9. Expenditure List (pages 7-11)*
An "Expenditure Approval List" is included. Action is requested, to accept the list and place it on file.
10. New Business – None.
11. 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.
12. Old Business
 - A. Update on CILA Project (pages 12-14)*

Included in the packet is a Decision Memorandum offering an update on the sale of CILA properties and seeking Board action.

B. DRAFT PY2023 Allocation Priorities and Selection Criteria (pages 15-30)

For review and discussion is an initial DRAFT of funding priorities and selection criteria for the Program Year 2023. Also included is feedback from stakeholders, received prior to November 5. No action is requested.

C. DRAFT Revised CCDDDB Funding Guidelines (pages 31-47)

For review and discussion is a new draft of revised CCDDDB Requirements and Guidelines for Allocation of Funds. No action is requested.

D. Agency Service Reports (pages 48-77)

For information only, the packet includes PY2022 1st Quarter Program Reports and PY2022 1st Quarter Service Data charts.

E. Update from 211-PATH (pages 78-91)

Included for information only are communications from the Executive Director of PATH and 211 data reports for the period of July 1 to September 30, 2021.

F. CCDDDB and CCMHB Schedules and CCDDDB Timeline (pages 92-95)

G. Acronyms and Glossary (pages 96-103)

A list of commonly used acronyms is included for information.

13. CCMHB Input

14. Staff Reports (pages 104-115)

Included for information only are reports from Kim Bowdry, Leon Bryson, Stephanie Howard-Gallo, Shandra Summerville, and Chris Wilson.

15. Board Announcements

16. Adjournment

**Board action requested*

#3

Instructions for participating in Zoom Conference Bridge for CCDDB Meeting November 17, 2021 at 9:00 a.m.

You will need a computer with a microphone and speakers to join the Zoom Conference Bridge; if you want your face broadcast you will need a webcam.

Go to Join Zoom Meeting

<https://us02web.zoom.us/j/81559124557>

Meeting ID: 815 5912 4557

One tap mobile

+13126266799,,81559124557# US (Chicago)

+16465588656,,81559124557# US (New York)

Dial by your location

+1 312 626 6799 US (Chicago)

+1 646 558 8656 US (New York)

+1 301 715 8592 US (Germantown)

+1 669 900 9128 US (San Jose)

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

Meeting ID: 815 5912 4557

Find your local number: <https://us02web.zoom.us/u/kCrkmcope>

When the meeting opens, choose to join with or without video. (Joining without video doesn't impact your participation in the meeting, it just turns off YOUR video camera so your face is not seen. Joining without video will also use less bandwidth and will make the meeting experience smoother).

Join with computer audio.

Once you are in the meeting, click on "participants" at the bottom of the screen.

Once you've clicked on participants you should see a list of participants with an option to "Raise Hand" at the bottom of the participants screen. **If you wish to speak, click "raise hand" and the Chair will call on you to speak.**

If you are not a member of the CCDDB or a staff person, **please sign in by writing your name and any agency affiliation in the Chat area.** This, like the recording of the meeting itself, is a public document. There are agenda items for Public Participation and for Agency Input, and we will monitor the 'raised hands' during those times.

If you have called in, please speak up during these portions of the meeting if you would like to make a contribution. If you have called in and therefore do not have access to the chat, there will be an opportunity for you to share your 'sign-in' information. If your name is not displayed in the participant list, we might ask that you change it, especially if many people join the call.

Members of the public should not write questions or comments in the Chat area, unless otherwise prompted by the Board, who may choose to record questions and answers there.

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#8

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

Minutes –October 20, 2021

*This meeting was held with representation at the Brookens Administrative Center
and with remote access via Zoom.*

9:00 a.m.

MEMBERS PRESENT: Anne Robin, Deb Ruesch, Sue Suter, Georgiana Schuster, Kim Wolowiec-Fisher

STAFF PRESENT: Kim Bowdry, Leon Bryson, Lynn Canfield, Stephanie Howard-Gallo, Shandra Summerville, Chris Wilson

OTHERS PRESENT: Annette Becherer, Heather, Levingston, Josh Cornwell, Patty Walters, Greg Schroeder, Danielle Matthews, Laura Bennett, DSC; Becca Obuchowski, Hannah Sheets, Community Choices; Mel Liong, PACE; Angela Yost, Regional Planning Commission; Annabelle Hueber, St. Joseph-Ogden High School; Jorge Rojas Alvarez, University of Illinois

CALL TO ORDER:

Dr. Robin called the meeting to order at 9:00 a.m.

ROLL CALL:

Roll call was taken and a quorum was present.

ZOOM INSTRUCTIONS:

Instructions were included in the packet.

APPROVAL OF AGENDA:

The agenda was in the packet for review. The agenda was approved unanimously by a roll call vote.

CITIZEN INPUT/AGENCY INFORMATION:

None.

PRESIDENT'S COMMENTS:

None.

EXECUTIVE DIRECTOR'S COMMENTS:

Ms. Canfield reviewed the agenda.

APPROVAL OF MINUTES:

Minutes from the 9/22/2021 board meeting were included in the packet.

MOTION: Ms. Suter moved to approve the minutes from the September 22, 2021 meeting. Ms. Ruesch seconded the motion. A voice vote was taken and the motion passed unanimously.

NEW BUSINESS:

Resource Guide Presentation:

Included in the packet was the brochure for a resource guide created by Annabelle Hueber from St. Joseph-Ogden High School, who gave a brief presentation on this Girl Scout Gold Award project. Board members were given an opportunity to ask questions following her presentation.

UIUC Community Data Clinic Resource Project:

Included in the packet was a presentation on the online resource directory project. The project team leader, Jorge Rojas Alvarez, gave a summary of this work so far and of next steps. Board members were given an opportunity to ask questions following the presentation.

Direct Support Professional Workforce Shortage:

Recent news items on the DSP shortage in Illinois and elsewhere in the US was included in the packet.

DRAFT PY2023 Allocation Priorities and Selection Criteria:

An initial DRAFT of funding priorities and selection criteria for the Program Year 2023 was included in the packet for review. A final version will be presented at a later Board meeting.

DRAFT Revised CCDDDB Funding Guidelines:

For review and discussion was an initial draft of revised CCDDDB Requirements and Guidelines for Allocation of Funds. A final version will be presented at a later Board meeting.

Successes and Other Agency Information:

Becca Obuchowski from Community Choices provided an update. Annette Becherer from DSC reported on the upcoming holiday sale at the CROW at 110. Patty Walters from DSC will email some updates to Board members.

OLD BUSINESS:

Update on CILA Project

For information only was a Briefing Memorandum with an update on the CILA houses.

PY2021 Utilization Report for I/DD Programs:

For information only, the packet included a summary of utilization of all I/DD programs funded for PY2021, whether by the CCDDDB or CCMHB.

CCDDDB and CCMHB Schedules and CCDDDB Timeline:

Meeting schedules were included in the Board packet.

Acronyms and Glossary:

A list of commonly used acronyms was included for information.

CCMHB Input:

The CCMHB will meet this evening with many of the same agenda items as the CCDDDB.

Staff Reports:

Included in the board packet were reports from Kim Bowdry, Leon Bryson, Stephanie Howard-Gallo, and Shandra Summerville.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 10:45 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo

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

#9

CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

10/08/21

PAGE 7

VENDOR NO	VENDOR NAME	TRN B TR	TRN DTE N CD	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
***	FUND NO. 108	DEVLPMNTL DISABILITY FUND								
***	DEPT NO. 050	DEVLMTNL DISABILITY BOARD								
90	CHAMPAIGN COUNTY TREASURER-MHB	FUND 090								
	10/05/21	03 VR 108-	83	625179	10/08/21	108-050-533.07-00	PROFESSIONAL SERVICES	OCT ADMIN FEE		32,731.00
								VENDOR TOTAL		32,731.00 *
161	CHAMPAIGN COUNTY TREASURER						REG PLAN COMM FND075			
	10/05/21	03 VR 108-	77	625183	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT DECISION SUPPOR		25,957.00
								VENDOR TOTAL		25,957.00 *
11585	C-U AUTISM NETWORK									
	9/30/21	01 VR 108-	78	625216	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT COMM OUTREACH		3,166.00
								VENDOR TOTAL		3,166.00 *
18203	COMMUNITY CHOICES, INC						SUITE 210			
	9/30/21	01 VR 108-	79	625237	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT COMMUNITY LIVIN		14,161.00
	9/30/21	01 VR 108-	79	625237	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT CUSTOM EMPLOY		16,750.00
	9/30/21	01 VR 108-	79	625237	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT SELF DETERMINAT		13,889.00
								VENDOR TOTAL		44,800.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF						CHAMPAIGN COUNTY INC			
	9/30/21	01 VR 108-	80	625254	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT CLINICAL SVCS		14,500.00
	9/30/21	01 VR 108-	80	625254	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT COMMUNITY EMPLO		30,114.00
	9/30/21	01 VR 108-	80	625254	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT COMMUNITY FIRST		70,638.00
	9/30/21	01 VR 108-	80	625254	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT COMMUNITY LIVIN		38,003.00
	9/30/21	01 VR 108-	80	625254	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT CONNECTIONS		7,083.00
	9/30/21	01 VR 108-	80	625254	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT EMPLOYMENT FIRS		6,667.00
	9/30/21	01 VR 108-	80	625254	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT INDIV/FAMILY SU		35,754.00
	9/30/21	01 VR 108-	80	625254	10/08/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	OCT SERVICE COORD		36,321.00
								VENDOR TOTAL		239,080.00 *

54930

PERSONS ASSUMING CONTROL OF THEIR ENVIRONMENT, INC

7

9/30/21 01 VR 108- 81 625348 10/08/21 108-050-533.92-00 CONTRIBUTIONS & GRANTS OCT CONSUMER CONTRO 2,022.00
VENDOR TOTAL 2,022.00 *
DEVLMTL DISABILITY BOARD DEPARTMENT TOTAL 347,756.00 *



DEVLPMNTL DISABILITY FUND

FUND TOTAL

347,756.00 *

REPORT TOTAL *****

784,288.77 *

CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

11/05/21

PAGE 7

VENDOR NO	VENDOR NAME	TRN B TR	TRN DTE N CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
90	CHAMPAIGN COUNTY TREASURER-MHB	FUND 090									
	11/02/21	02 VR 108-		90		626237	11/05/21	108-050-533.07-00	PROFESSIONAL SERVICES	NOV ADMIN FEE	32,731.00
										VENDOR TOTAL	32,731.00 *
161	CHAMPAIGN COUNTY TREASURER										
	11/05/21	05 VR 108-		85		626241	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV DECISION SUPPOR	25,957.00
										VENDOR TOTAL	25,957.00 *
11585	C-U AUTISM NETWORK										
	11/05/21	05 VR 108-		86		626267	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV COMM OUTREACH	3,166.00
										VENDOR TOTAL	3,166.00 *
11680	CAMP NEW HOPE										
	10/21/21	03 VR 108-		84		625819	10/22/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	J CRITES 11/5-7	300.00
	10/21/21	03 VR 108-		84		625819	10/22/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	J CRITES 11/19-21	300.00
										VENDOR TOTAL	600.00 *
18203	COMMUNITY CHOICES, INC										
										SUITE 210	
	11/05/21	05 VR 108-		87		626281	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV COMMUNITY LIVIN	14,161.00
	11/05/21	05 VR 108-		87		626281	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV CUSTOM EMPLOY	16,750.00
	11/05/21	05 VR 108-		87		626281	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV SELF DETERMINAT	13,889.00
										VENDOR TOTAL	44,800.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF										
										CHAMPAIGN COUNTY INC	
	11/05/21	05 VR 108-		88		626296	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV CLINICAL SVCS	14,500.00
	11/05/21	05 VR 108-		88		626296	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV COMMUNITY EMPLO	30,114.00
	11/05/21	05 VR 108-		88		626296	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV COMMUNITY FIRST	70,638.00
	11/05/21	05 VR 108-		88		626296	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV COMMUNITY LIVIN	38,003.00
	11/05/21	05 VR 108-		88		626296	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV CONNECTIONS	7,083.00
	11/05/21	05 VR 108-		88		626296	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV EMPLOYMENT FIRS	6,667.00

10

CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

11/05/21

PAGE 8

VENDOR NO	VENDOR NAME	TRN B TR	TRN NO	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
***	FUND NO. 108	DEVLPMTL DISABILITY FUND									
	11/05/21	05 VR 108-	88		626296	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV INDIV/FAMILU SU		35,754.00
	11/05/21	05 VR 108-	88		626296	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV SERVICE COORD		36,321.00
									VENDOR TOTAL		239,080.00 *
54930	PERSONS ASSUMING CONTROL OF THEIR								ENVIROMENT, INC		
	11/05/21	05 VR 108-	89		626365	11/05/21	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV CONSUMER CONTRO		2,022.00
									VENDOR TOTAL		2,022.00 *
									DEVLMTL DISABILITY BOARD	DEPARTMENT TOTAL	348,356.00 *
									DEVLPMTL DISABILITY FUND	FUND TOTAL	348,356.00 *

REPORT TOTAL ***** 963,918.29 *

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#12.A1



DECISION MEMORANDUM

DATE: November 17, 2021
TO: Members, Champaign County Developmental Disabilities Board (CCDDB)
FROM: Lynn Canfield, Executive Director
SUBJECT: Update on CILA Facilities Project

Background:

The CILA Facilities Project is a collaboration of the Champaign County Mental Health Board (CCMHB) and the CCDDB since 2014, to address the needs of residents who have I/DD and complex support needs and who as a result had been unable to secure residential services close to home and community. Adjustments have been made to the cost- and authority- sharing agreement between the Boards regarding this project, to ensure the best interests of the County and people served. From the beginning, the project encountered challenges addressed by the service provider, parents of the people living in the homes, Independent Service Coordination Unit staff, CCMHB/CCDDB members, staff, and attorneys. By 2020, the difficulty securing a workforce had become insurmountable. While improving the I/DD service system is a topic at state and federal levels, solutions are slow in coming, and providers are now downsizing rather than expanding community-based services. With our CILA houses empty, in late July, the Boards made the difficult decision to sell them and reinvest in meaningful supports for this population.

Updates:

The first home was sold on September 10, and **\$226,017.05** was deposited into the CILA Facilities Fund. Chris Wilson requested a refund on the property insurance, depositing another **\$681**. Other transactions were payment of attorney's fees of \$700 (related to CILAs only) and \$1,113.10 in expenses charged to the designated donation (applies to one individual).

When residents of the second home moved out in July, Kim Bowdry, Chris Wilson, and I met the service provider and property manager for a walk-through, taking photos and making notes about repair needs. We have received and compared bids on almost all. Upon inspection of the attic, full roof replacement was indicated. When the home was listed in September, there were eleven realtor showings. Some repairs had been completed and others scheduled. An offer was made for the full list price, with credits for remaining repairs and pending inspection report:

- Removal of dead tree and landscaping stones - **\$511+\$195** (*Homeowner's Association paid for stump grinding.*) **DONE**
- Replace garage door and trim - **\$1876** **DONE**
- Refinish hardwood flooring - **\$2275** (bid) *December likely*
- Replace broken face plates - **\$20** or less (bid) **DONE**
- Remove panel under kitchen sink and install cabinet doors - **\$850** or less (bid) **DONE**
- Repair/ repaint kitchen ceiling, remove stickers, interior painting - **\$2650** (bid) **DONE**

- Repair front railing, repair/restrain rear deck, remove picket fence - **\$1635** (bid) *DONE*
- Remove signs from interior – *(waiting, due to potential buyer)*
- Roof replacement – **\$14,432** *DONE*

The buyer's inspection listed many repairs which could not be accomplished by the closing date of October 22, and some beyond the analysis used when setting the list price. Competitive bids have been sought and more minor repairs completed. There is some overlap with the above:

- Repair/replace downspouts as needed – *seeking a second bid*
- Prep and paint trim around exterior doors – *a minor repair*
- Repair auto-retract feature of garage door – *to adjust (not the door which was replaced)*
- Finish drywall and paint garage – *not a qualifying deficiency*
- Qualified electrician to correct double tapping in electrical panel. Properly secure wiring in crawlspace. – *all electrical items can be completed for less than \$300.*
- Professional HVAC company to inspect the heating system and the scorching issue. All repairs and/or replacement to be completed as recommended. – *servicing and inspection \$216.50 - functioning normally, do not replace/repair at this time.*
- Improper filter to be replaced. – *may be done; if not, handyman bid.*
- Qualified plumber to replace improper piping material with appropriate materials, make necessary repairs to low water flow at left side back bathroom sink, and identify the source of the moisture and perform necessary repairs. - **\$729** *(repair shower pan and repair faucet and showerhead in master bath, repair showerhead and faucet in ball bath, install downspout extensions to correct water in crawlspace). Because the issue is failing shower pan, seeking a bid to replace it.*
- Issue with standing water in the crawlspace to be corrected by the installation of a sump pit and sump pump with appropriate plumbing to move the water away from the home.
- Loose insulation in the crawlspace to be repaired or replaced as needed. – *not a qualifying deficiency, could be reattached instead; plumber notes that downspout extensions will correct it, given the amount of seepage and lack of proper downspout extensions; sump pump may not be necessary – seeking a handyman bid.*
- Mold in the garage to be cleaned and treated by an appropriate professional.
- Miscellaneous work: replace 2 cover plates and outlet in back bathroom; repair ceiling fan in SE bedroom; replace 2 outlets on east side of kitchen island; replace doorbell button; replace garage attic access ladder; vent dryer outside. - **\$950**
- Effected subfloor and floor joists to be replaced by a qualified contractor. Any mold/milder remaining after repairs will be leaned and treated by a professional contractor (below back bedroom shower). Bathroom flooring to be repaired or reinstalled after repairs (below back bedroom shower). – *agreed this should be done but difficult to find a contractor who can do it this year; continuing to seek bids.*

Major repairs, along with changes in the market, will justify reconsidering the list price.

Possible Next Steps:

Because this is a shared project of the Boards, their discussion and action will determine the next appropriate uses of the fund. Suggestions from board and staff members have included those listed below, ranked in order of closest alignment with the original purpose of the CILA project:

- Negotiate a contract with an agency to offer specific assistance to people who have I/DD and complex service needs, especially those unable to secure services within Champaign County. This assistance might cover the types of purchase we made through the 2019 CCDDDB mini-grant process or on behalf of the individual with a designated gift managed within the CILA Fund: assistive or adaptive technology; home or vehicle modifications or other equipment; summer camps; speech therapies; cooking lessons; gym memberships; transportation/travel support, etc.
- Fund programs for people who have I/DD and co-occurring behavioral or physical health issues which result in complex support needs.
- Establish a Direct Support Professional retention fund, from which individual DSPs who have a 'satisfactory' or better performance evaluation would receive retention payments after six and twelve months of employment in Champaign County CILAs.
- Purchase or secure a long-term lease on a storefront space to host a permanent art gallery for exhibit and sale of the original works of many local artists who have disabilities. For several years, Stephanie Howard-Gallo has found and developed venues for artists participating through AIR, many of whom have I/DD and complex support needs. The space could include a coffee shop run by people with I/DD and room for case manager workshops, board meetings, and meetings of groups with related missions.
- Include office space for CCDDDB/CCMHB staff in the above, using CILA Facilities fund for any appropriate expenses and covering other administrative costs as typically budgeted. Our office needs have changed, and with the county's new accounting system, we will no longer have to be present at Brookens to create payment vouchers.

DECISION SECTION

Motion to authorize the Executive Director to approve additional repairs, as recommended by the real estate agent, and relist the property when these have been completed, pending similar approval by the CCMHB:

- Approved
- Denied
- Modified
- Additional Information Needed

#12.B.



BRIEFING MEMORANDUM

DATE: November 17, 2021
 TO: Members, Champaign County Developmental Disabilities Board (CCDDB)
 FROM: Lynn Canfield, Executive Director
 SUBJECT: PY2023 Allocation Priorities and Decision Support Criteria

Overview:

The purpose of this memorandum is to recommend allocation decision support criteria and funding priorities for the Champaign County Developmental Disabilities Board (CCDDB) Program Year 2023, July 1, 2022 to June 30, 2023. Funding priorities and decision support criteria are a framework for how contracts with service providers further the mission and goals of the Board. Staff recommendations are based on Board and stakeholder input and our understanding of best practices and state/federal service and payment systems. On October 20, CCDDB members were presented this initial draft, which was then distributed to providers, family members, advocates, and stakeholders, with a request for comments. A final draft will be presented for Board approval prior to the end of 2021.

During their July 21, 2021 meeting, CCDDB members offered input to strategic planning and priorities setting processes. Some may be addressed outside of the priorities document, e.g., through application materials or reporting requirements, as three-year plan goals, or through the staff, with volunteer or consultant support:

- Priority categories had been broad for several years, and the more refined PY2022 categories could be combined once again, or applicants could be allowed to choose more than one priority area per program application. *This version of the document does not combine priority categories, and if this is not done in the final draft, another option is for applicants to propose smaller, more focused, and more descriptive programs for the Board's consideration.*
- To balance the importance of client choice against the risk of overlapping services (i.e., more than one program available to serve a particular need), *funded agencies will be required to report client-level service data to ensure that our system reaches the greatest number of individuals with the services they choose.*
- Especially in light of all that we've learned through the pandemic regarding the need to stay connected through technology, introduce a specific priority category for technology use and access, possibly coordinating with county-wide efforts at broadband expansion/improvement. *A PY2022 priority "Personal Life and Resilience" had pointed to technology and training, so that category has been elaborated to capture this suggestion. Coordination of internet access and use efforts with other broadband infrastructure projects is added as an example under Overarching Considerations, Coordinated System.*

- With the Board suggestion and clear indications from many sources, including our own Community Needs Assessment, *a specific priority category is added through which agencies may propose workforce strengthening and stabilization programs. This category by its nature may not increase the number of eligible people being served but, if successful, would stop further loss of service capacity. This is also added to the Overarching Considerations, Coordinated System, as an example of a potential collaboration. We have described this existential threat in many prior Three Year Plans and Funding Priorities documents and have looked into various possible solutions, repeatedly landing on system advocacy as the clearest sustainable solution. The Self-Advocacy priority also includes a focus on system advocacy, with such issues in mind.*
- Work toward plain language in all public documents. *A tall order, but every read-through gets us a little closer to clear written language. As a related effort, CCDDDB/CCMHB staff are working with UIUC students on translation of approved board documents into other languages.*

Statutory Authority:

The Community Care for Persons with Developmental Disabilities Act (50 ILCS 835/ Sections 0.05 to 14) is the basis for CCDDDB funding policies. All funds shall be allocated within the intent of the controlling act, per 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 which results in contracts for services from July 1 to June 30. Upon approval by the Board, this memorandum becomes an addendum to the Funding Guidelines, incorporated in standard operating procedures.

Operating Environment:

The story of COVID-19 and its long-term impacts is still being written. As noted in the CCDDDB/CCMHB 2021 Community Needs Assessment, weaknesses and gaps in our social service and health care systems were dramatically unveiled and deepened, with the virus and responses to it causing great harm to people who have I/DD.

In previous years' decision support and priorities memoranda, we described an operating environment filled with challenges to the I/DD system and the people it should serve. 2020 and 2021 made the crisis of previous years look like practice. The challenges are interrelated, did not improve from one year to the next, and grew even more dire during the pandemic:

- insufficient provider capacity;
- limited flexibility in the current community-based service array and rules;
- notably low Medicaid-waiver reimbursement rates;
- long waiting lists for Medicaid-waiver services;
- 'change fatigue' experienced by service providers, funders, and advocates; and
- a complicated system for individuals and families to navigate.

During the pandemic, with new and prolonged threats to their well-being, people with I/DD and their family caregivers were under even more pressure. Although the rapid implementation of telehealth and virtual services provided relief, there are likely to be deeper and emerging support needs, which could be temporary if successfully met. A trauma-

informed approach across the service and support system, with consideration for new mental health concerns, is indicated.

Threats to Well-being:

During shelter-in-place and periods of limited in-person activities, people with I/DD experienced the abrupt ending of day programming, education, work life, social life, and other community engagement and relied more on support from others living in their homes, if there were any. Many people with I/DD, including children, had difficulty acquiring and maintaining skills without access to therapists, teachers, and support staff. In addition to restricting community life, Covid-19 and limited health care services took a heavy toll on residents and staff of congregate living settings. People with I/DD and their families and staff experienced greater isolation, fear of becoming sick, loss of loved ones, disruption of routine, and loss of income, all of which contribute to burnout, anxiety, and depression. Recovery from this period requires sensitivity to the impacts of trauma and grief on all participants, providers, and family members. Many caregivers had increased responsibilities for a family member, found caregiving to be more difficult emotionally due to Covid-19, reported anxiety and depression, and experienced the loss of health and finances.

Endangered Provider Capacity:

In August 2021, the American Network of Community Options and Resources (ANCOR) surveyed providers during a 5-week period. Key findings:

- **77% of providers are turning away new referrals**, a 16.7% increase since the beginning of the pandemic.
- **58% of providers are discontinuing programs and services**, a 70.6% increase since the beginning of the pandemic.
- **81% of providers are struggling to achieve quality standards**, a 17.4% increase since the beginning of the pandemic.
- **Nearly 3 in 10 providers report spending at least \$500,000 annually** on costs associated with high turnover and vacancy rates.
- **92% of providers report that the COVID-19 pandemic continues to complicate their ability to recruit and retain** qualified direct support professionals.

(Author: Elise Aguilar, October 5, 2021 <https://www.ancor.org/newsroom/news/ancor-issues-findings-2021-state-americas-direct-support-workforce-crisis-survey>)

The Institute on Community Integration at University of Minnesota's "Predictors of Annual Turnover Among Direct Support Professionals" identifies factors leading to high DSP turnover across the country and offers recommendations: DSP wages should rise with skill level, signaling that these workers are valued; these should be 'livable wages' with annual cost of living increases built into states' rates so that they remain competitive over the long-term; health insurance and paid time off should be offered, and states' rates structures should account for these in order to keep them affordable to agencies; states should prioritize moving people from large institutional settings and into community-based care, fully funding this transition and making it sustainable; states should increase participation in Home and Community Based Services; and investments are needed for strengthening the workforce.

In “Ed’s Newsletter” No. 204 September 29, 2021, Ed McManus reminds us that “provider agencies have been experiencing a severe shortage of staff for years due to inadequate funding from the State, and the pandemic has made it worse.” Many of Illinois’ agencies will be unable to take new individuals into CILAs, and at the same time over 100 people with I/DD are ready to transition out of large institutions and into community-based residential services. Mr. McManus notes that the state’s unprecedented appropriation of \$170 million for DD was a great start, but increased funding will also be needed next year, and DSP wages will not become competitive for several more years.

A federal infrastructure bill features funding to increase Medicaid Home and Community Based Services over the next ten years, which might improve the DSP wage and retention situation and allow expansion of these services, but that portion of the bill is at risk of being dropped in order to improve the likelihood of passage of other parts of the bill.

One Step Forward:

Last year, building on providers’ successes in keeping people connected through online platforms, the State approved a new service category within Community Day Services (CDS). Virtual Day Services are person centered and planned so that people may participate safely, mitigating the effects of isolation, assisting with social and adaptive skills, supporting the development of interests and self-advocacy, and increasing interactions outside the home. The service is limited by: billable hours being counted toward the low annual cap on CDS hours; low reimbursement rate and high staff-to-individual ratio; only provided by CDS providers; and other barriers associated with the ‘digital divide’.

With telehealth services and remote meetings rapidly introduced out of necessity, some people were more able to connect with services and with social opportunities than they had been (e.g., if they had access to the internet but not to transportation, or if they preferred being home to being in the community or at an agency). Those who prefer virtual participation over in-person are encouraged to strike a balance, when in-person is safe, for the sake of increasing connections and reducing dependence on others in their home.

The Future:

Our service systems must prepare for increased and emerging needs. Those most deeply impacted require more attention and support to fully recover from losses and then to thrive. Services should be pandemic-proof, supporting individual and family recovery from isolation and stress and securing a more stable system. Recovery should center trauma-informed care, including for providers and family caregivers. CCDDDB funded programs target eligible individuals who do not have other funding or who seek services not billable to other payors.

Expectations for Minimal Responsiveness:

Applications that do not meet these expectations are “non-responsive” and will not be considered for funding. All agencies must be registered using the online system, at <http://ccmhddbrds.org>. All required online application forms must be completed and submitted by the deadline. Accessible documents and technical assistance, limited to navigation of these online tools, are available upon request through the CCDDDB office.

1. Applicant is an eligible organization, demonstrated by responses to the Organization Eligibility Questionnaire.
2. All required application forms must be submitted by the deadline. *Late or incomplete applications will not be accepted.*
3. Proposed services or supports must relate directly to intellectual/developmental disabilities. **How will they improve the quality of life for persons with I/DD?**
4. Application must include evidence that other funding sources are not available to support this program or have been maximized. Other potential sources of support should be identified and explored. This is especially important in 2022, as federal and state opportunities may apply to projects currently supported only by local funding.
5. Application must demonstrate coordination with providers of similar or related services. Interagency agreements should be referenced. Evidence of interagency referral process is preferred, as this expands the service system's reach, respects client choice, and reduces risk of overservice to a few.
6. Application must describe planning for continuation of services during a public health pandemic or epidemic.

“We have great parks. The cost of living is relatively low. It’s easy to get around town by car, bus, bike, or walking. The MTD is fantastic and one of the best bus systems we’ve encountered (out of many states and several countries). We have lots of entertainment options, from live music (Friday Night Live, free concerts in the park, etc), theatrical productions (Krannert), movie theaters...”

“Overall there is a LOT of segregation of people with disabilities in our communities in housing, access to employment and socialization... Transportation is a major issue... I would like to see more supports for caregivers, such as a caregiver support group.”

“Friendly people, great community, good restaurants and libraries, great health department, lots of nature and wonderful parks.”

“Right now, there are very little resources for people like myself who know nobody personally in the area, are disabled and need a helping hand occasionally. It leaves me in a very stressful and desperate situation...”

– *Various Survey Respondents, CCDDDB/CCMHB 2021 Community Needs Assessment*

Assessed Needs of Champaign County Residents:

According to the Illinois Department of Human Services – Division of Developmental Disabilities “Prioritization of Urgency or Needs for Services (PUNS) Summary by County and Selection Detail” for July 14, 2021:

- Of 356 **Supports Needed**, the most frequently identified are Personal Support, Behavioral Supports, Speech Therapy, Other Individual Supports, Occupational

Therapy, Assistive Technology, Physical Therapy, 24-hour Respite, Adaptations to Home or Vehicle, Intermittent Nursing Services in the Home (in rank order).

- 321 people identified the need for **Transportation** Support.
- 243 people identified the need for **Vocational** or Other Structured Activities, preferring (in order) Support to work in the community, Support to engage in work/activities in a disability setting, Support to work at home, and Attendance at activity center for seniors.
- 65 people are waiting for Out-of-home **residential services** with less than 24-hour supports, and 45 are seeking 24-hour residential.

The year-end report prepared by the Champaign County Regional Planning Commission Independent Service Coordination (ISC) unit aggregates results of additional questions asked of those who enroll in or update PUNS information during the contract year. PY2021 responses show that people value: going out to recreation/sports events, eating out, zoo/aquariums, parks, and movies. Recreational and social activities are affordable in our county under 'normal' circumstances, and some work well in online platforms.

Other notable details from the Community Needs Assessment are quotes from focus group participants and an encouraging statement from a provider agency director:

Social interaction missing, beyond skill streaming. I never had a mentor growing up in school. I now mentor a student in high school. I've always struggled with social interactions with teachers and friends who don't understand how I understand things. I still struggle with interactions with people, being able to recruit people for important things, like encouraging people to get involved with leadership and advocacy.

- *Focus Group Member and Community Choices Leadership & Advocacy Co-facilitator*

I live with parents on a farm. I like it, and it works for now. I am concerned that other people might not have as good of a situation as other people, and they may have been forgotten about. Transportation – not as easy for others living in the country, the weather is also an issue. Do those people have enough food, heating? Technology concerns – iPhones or laptops to facilitate communication purposes – training on Zoom, email, etc. Home living supports – training for daily living or in need of an aide. Having access to technology and internet in rural areas is a problem.

- *Focus Group Member and Community Choices and DSC Participant*

Many of our participants are also coming to the employment process with renewed motivation and in some cases new skills. The pull of re-engagement in the community is high and lots of people are excited to find work. Many, like all of us, are also coming to our services with new computer and communication skills picked up from months of searching through emails for zoom links and messages from friends... It has been an extremely heartening pattern to witness when so many people and organizations are struggling. COVID has stretched our community in

many ways, but we hope that this trend toward flexibility and inclusion continues in our workforce.

- *Becca Obuchowski, Executive Director, Community Choices, Inc.*

Program Year 2023 CCDDDB Priorities:

Priority: Self-Advocacy

Nationally most care is provided by family, friends, and community rather than by the formal service system. In addition, parents and self-advocates improve the formal system and non-traditional resources and raise awareness of disabilities and of how the system works or fails. Self-advocacy and peer support organizations, especially those governed by people who have I/DD and their families or supporters, may:

- improve others' understanding of the personal experience of I/DD and the rights of people with disabilities;
- offer peer mentoring and networking to support other family- or self-advocates;
- navigate the service system or share information on helpful current resources; and
- engage in or define system advocacy at the local, state, and federal levels.

Priority: Linkage and Coordination

The CCDDDB will support efforts to connect people who have I/DD to appropriate benefits, state/federal funding, and resources. Agencies qualified to perform linkage, coordination, and planning support may provide these to people with I/DD who are eligible for but not receiving state Medicaid-waiver funding:

- Conflict-free Case Management (CFCM) and Person-Centered Planning (PCP) aligned with federal standards for all Home and Community Based Services, without risk of conflict of interest; and
- intensive case management or coordination of care, guided by a Person-Centered Plan, for people with complex support needs, whether those are related to aging, physical or behavioral health condition, loss of a family member or caregiver, or other traumatic experience.

Priority: Home Life

People who have disabilities should have options for housing of their choice, in their own communities, with people they choose, and with supports appropriate to their needs and preferences. Individualized supports may include:

- assistance for finding, securing, and maintaining a home;
- preparing to live more independently or with a different set of people; and
- given the limitations of community residential options through the state/federal partnership (i.e., Medicaid-waiver), creative approaches for those who qualify for but do not receive these services.

Priority: Personal Life and Resilience

Delivered in the least segregated environments and selected by the person, supports for personal success and resilience are across a broad range:

- assistive and/or adaptive technology and other accessibility supports;

- training in how to use technology, including electronic devices, apps, virtual meeting platforms, social media, Internet access, and online privacy/security;
- speech or occupational therapy;
- respite or personal support in the individual's home;
- personal care in other settings;
- training toward increased self-sufficiency in personal care;
- transportation assistance; and
- strategies to improve physical and mental health.

Priority: Work Life

Community employment opportunities have increased for people with I/DD, and with experience and exposure, people may find even better opportunities. Proposed programs should incorporate recommended or innovative practices and focus on people's aspirations and abilities, in the most integrated community settings possible, and help them achieve their desired outcomes. Programs may offer:

- job development, job matching, and job coaching;
- use of technology to enhance a person's work performance and reduce on-site coaching/training;
- job skills training conducted in the actual community work settings;
- community employment internships, initially paid by the program rather than the employer, especially for people who have relied on traditional sheltered day program;
- support for a path to self-employment or business ownership;
- education of employers about the benefits of working with people who have I/DD which results in work for people with I/DD; and
- other innovative employment supports.

Priority: Community Life and Relationships

Flexible support for people with I/DD can stabilize home and community life in person-centered, family-driven, and culturally appropriate ways, and should emphasize social and community integration. Of interest would be:

- facilitation of social and volunteer or mentoring opportunities;
- support for development of social and communication skills;
- connection to opportunities which are available to community members who do not necessarily have I/DD; and
- access to preferred recreation, hobby, leisure, or worship activities.

Priority: Strengthening the I/DD Workforce (possible collaboration with the CCMHB)

To address this long-standing, deepening existential threat to the I/DD system, agencies may propose strategies to strengthen and stabilize the workforce, with an immediate focus on those direct support professionals performing "essential" services. Such strategies would strive to maintain the current service capacity and allow it to grow to meet the needs of all eligible residents of Champaign County. Agencies may collaborate on a joint application proposing system-wide solutions.

Priority: Young Children and their Families (collaboration with the CCMHB)

Services and supports not covered by Early Intervention or under the School Code, for young children with developmental and social-emotional concerns, 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 childcare providers, pre-school educators, medical professionals, and other service providers;
- education, coaching, and facilitation to focus on strengthening personal and family support networks; and
- identification and mobilization of individual and family gifts and capacities, to access community associations and learning spaces.

Through the Boards' intergovernmental agreement, the Champaign County Mental Health Board (CCMHB) has funded programs which complement those addressing the behavioral health of very young children and their families, and for which service providers collaborate as a System of Care for children and families. For PY2023, the CCMHB may continue this priority area as a demonstration of their continued commitment to people with I/DD.

Overarching Considerations:

Underserved/Underrepresented Populations and Countywide Access

Applications (proposals for funding) should describe how the program will promote access for historically underinvested populations as identified in the 2001 Surgeon General's Report on Mental Health: Culture, Race, and Ethnicity and the federal Substance Abuse and Mental Health Services Administration (SAMHSA). Because members of racial and ethnic minority groups encounter disparities in access and quality of care related to I/DD, applications should address earlier, accurate identification of I/DD in minority children, as well as reduction of racial disparities in the utilization of services across all ages. Members of these groups, people living in rural areas, and those with limited English language proficiency should have access to quality services; engagement strategies should be identified which overcome barriers related to stigma and infrastructure and reach even those who are seeking support for the first time. A Cultural and Linguistic Competence Plan (CLCP) is required of each organization applying for funding. The online system includes a CLCP form which is consistent with requirements of Illinois Department of Human Services and which applies the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS Standards.)

Inclusion, Integration, and Anti-Stigma

Applications should promote the fullest possible community integration. People are most safe when they have routine contacts with other people, whether co-workers, neighbors, members of a faith community, acquaintances at fitness or recreation centers, or social clubs/networks. Community involvement helps decrease stigma. Stigma limits people's participation, inhibits economic self-sufficiency, and increases vulnerability. It may even be a driver of declining State and Federal support for community-based services. Stigma harms communities and individuals, especially those who are underserved or underrepresented due to sexuality, gender, race, ethnicity, immigrant/refugee/asylee status, preferred or first language, or disability. The CCDDDB has an interest in building resilience, community awareness, and inclusion, as well as directly challenging negative attitudes and discriminatory practices. Fullest inclusion aligns with standards established in Home and Community Based Services rules, Workforce Innovation and Opportunity, and Department of Justice

Americans with Disabilities Act/Olmstead findings. Although complicated, the paradigm shift these represent is clear.

Outcomes

Applications should identify measures of access for people seeking to participate in the program and outcomes expected to result from this participation. Because defining and measuring outcomes of value can be challenging, the Board offers support through a research team from University of Illinois at Urbana-Champaign's Department of Psychology, with training and technical assistance on 'theory of change' logic modeling, a consultation 'bank', workshops on reporting, and a template for year-end reports. Agencies using these resources may gain an advantage when competing for other funding. Applicant organizations already reporting on outcomes to other funders may include those outcomes, if relevant, in the application for CCDDDB funding.

The Council on Quality and Leadership and the National Core Indicators share a focus on:

- *Personal Outcomes* – improve people's positive **relationships**, increase personal **satisfaction**, allow them to exercise **choice** in decisions made about/for/with them, support **self-determination**, support real **work**, and increase people's **inclusion** in their community.
- *Family Outcomes* - support **involvement** of family members of people who have I/DD, offer them opportunities for **connection**, reliable resources for **information**, **planning**, **access**, and **support**, give them **choice and control**, and maximize **satisfaction**.

Coordinated System

Toward a more inclusive, efficient, and effective local system, applications should include evidence of collaboration and should acknowledge other resources and how they are linked. The CCDDDB values partnership and collaboration, not only to avoid overserving and overspending but also to reach our least connected residents. Of interest are: combined efforts of providers and schools, support groups, hospitals, advocates, etc.; a commitment to updating information in resource directories and databases; participation in trainings, workshops, or council meetings with other providers of similar services; and partnerships which go further to make sure that all who have a need are reached and that those needs are met. While the CCDDDB cannot pay for services which are covered under the School Code or are the responsibility of other service systems (e.g., medical, law enforcement, justice system), activities may include collaborative planning, linkage, training, and similar as appropriate to the proposed service and people to be served. Written working agreements should include details of coordinated services, referral relationships, and other partnerships. Applications for funding should acknowledge these relationships.

A joint application may be submitted by two or more agencies proposing services and supports consistent with their shared mission. This could include shared infrastructure (physical, data systems, professional services, etc.) to support organizations' common goals and improve administrative functions such as bookkeeping and reporting. Another critically important area appropriate for collaboration would be a joint application proposing strategies to strengthen and stabilize the direct support workforce. An application could

propose to coordinate internet access and use efforts with other local broadband infrastructure projects, to increase the efficiency and effectiveness of all.

Budget and Program Connectedness

Applications include a Budget Narrative which should explain the relationship between anticipated costs and program components. Clarity about what the Board is buying includes the relevance of all expenses, direct and indirect. Per Funding Guidelines, calculation and rationale should be explicit as to the relationship between each expense and the value of the program. Programs offering services billable to Medicaid or other insurance should identify non-billable activities for which the costs may 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 and to ensure that CCDDDB funding does not supplant other public funding.

Person Centered Planning (PCP)

Every person who will participate in a proposed program should have the opportunity to direct their services and supports. The Person-Centered process seeks a balance between what is important TO a person and what is important FOR a person and includes strengths, preferences, clinical and support needs, and the person's desired outcomes. CCDDDB funding should be associated with people rather than programs. All services and supports should be documented in a plan directed by the person and consistent with Illinois Department of Human Services – Division of Developmental Disabilities' guidelines for PCP.

In a self-determined, integrated system:

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

Applications should describe how specific services relate to what people have indicated that they want and need. For PY2023, funded programs will report on individuals' service activities in simple categories, as full hours, to capture whether the service happens with the individual or on their behalf (in their absence) and whether the service is delivered in the community (including the person's home) or at an agency office. Benchmarks may be developed to promote fullest inclusion. Previous years' aggregate reports have demonstrated the complicated service mix and widely varying utilization patterns and costs.

Added Value and Uniqueness

Applications should identify specific, even unique, features of the approach, the staff, and the funding mix.

- Approach/Methods/Innovation: Cite the 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.

- **Staff Credentials:** Highlight staff credentials and specialized training.
- **Resource Leveraging:** While 'leveraging' is interpreted as local match for other funding, describe all approaches which amplify CCDDDB resources: state, federal, and local funding; volunteer or student support; community collaborations. If CCDDDB funds are to be used to meet a match requirement, reference the funder requiring match and identify the match amount in the Budget Narrative.

Process Considerations:

Priority areas and overarching considerations will be used as 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 organizational eligibility questionnaire, before receiving access to online application forms. *Note: During 2021, agencies who registered several years earlier are required to submit a new organizational eligibility questionnaire prior to the application deadline. This should not prevent them submitting PY2023 applications.*

Criteria described in this memorandum 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 and reporting system, at <http://ccmhddbrds.org>. 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.

The Intergovernmental Agreement between the CCDDDB and the Champaign County Mental Health Board (CCMHB) establishes that a portion of CCMHB funding be reserved for allocation to I/DD services and supports. These allocation decisions are aligned with CCDDDB priority areas as defined in this document. Recommendations will be made by the CCDDDB and staff, which are then considered and acted upon by the CCMHB, resulting in contracts between the CCMHB and I/DD service providers.

The CCDDDB allocation of funding is a complex task and not a request for proposals (RFP). Applicants are not responding to a common set of specifications but rather are seeking funding to address a wide variety of support needs of people who have I/DD. The nature and scope of applications may vary widely and may include treatment and early intervention models. A numerical rating/selection methodology is not relevant or feasible. Our focus is on what constitutes a best value to the community, in the service of those who have I/DD, and is therefore based on a combination of cost and non-cost factors, reflecting an integrated assessment of the relative merits of applications using criteria and priorities

approved by the CCDDDB. If applications are not sufficiently responsive to the criteria and priorities described in this memorandum, the CCDDDB may choose to set aside funding to support RFPs with prescriptive specifications to address the priorities. The CCDDDB may also choose to identify requests, including for capital and infrastructure projects, which are appropriate for an award of funding to be issued during the Program Year 2023 but later than July 1, 2022, in the event of greater than expected Board revenue.

Caveats and Application Process Requirements:

- Submission of an application does not commit the CCDDDB to award a contract or to pay any costs incurred in the application preparation or to pay for any other costs incurred prior to the execution of a formal contract.
- During the application period and pending staff availability, technical assistance will be limited to process questions concerning the use of the online registration and application system, application forms, budget forms, application instructions, and CCDDDB Funding Guidelines. Support is also available for CLC planning.
- Applications with excessive information beyond the scope of the application format will not be reviewed and may be disqualified from consideration.
- Letters of support are not considered in the allocation and selection process. Written working agreements with other agencies providing similar services should be referenced in the application and available for review upon request.
- The CCDDDB retains the right to accept or reject any application, or to refrain from making an award, when such action is deemed to be in the best interest of the CCDDDB and residents of Champaign County.
- The CCDDDB reserves the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCDDDB deems such variances to be in the best interest of the CCDDDB and residents of Champaign County.
- Submitted applications become the property of the CCDDDB and, as such, are public documents that may be copied and made available upon request after allocation decisions have been made and contracts executed. Submitted materials will not be returned.
- The CCDDDB reserves the right, but is under no obligation, to negotiate an extension of any contract funded under this allocation process for up to a period not to exceed two years, with or without an increased procurement.
- If selected for contract negotiation, an 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 agreeable to both parties. Failure to submit required information may result in disallowance or cancellation of contract award.
- The execution of final contracts resultant of this application process is dependent upon the availability of adequate funds and the needs of the CCDDDB.
- The CCDDDB reserves the right to further define and add application components as needed. Applicants selected as responsive to the intent of this online application process will be given equal opportunity to update proposals for the newly identified components.
- To be considered, proposals must be complete, received on time, and responsive to the application instructions. Late or incomplete applications will be rejected.

- If selected for funding, the contents of a successful application will be developed into a formal contract. Failure of the applicant to accept these obligations can result in cancellation of the award for contract. The CCDDDB reserves the right to withdraw or reduce the amount of an award if the application has misrepresented the applicant's ability to perform.
- The CCDDDB reserves the right to negotiate the final terms of any or all contracts with the selected applicant, and any such terms negotiated as a result of this process may be renegotiated and/or amended in order to meet the needs of Champaign County. The CCDDDB reserves the right to require the submission of any revision to the application which results from negotiations conducted.
- The CCDDDB reserves the right to contact any individual, agency, or employee listed in the application or to contact others who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.

Lynn Canfield

From: Kim Bowdry <kim@ccmhb.org>
Sent: Wednesday, October 27, 2021 9:32 AM
To: lynn@ccmhb.org
Subject: FW: CCDDDB Allocation Priorities and Decision Support Criteria for PY 2023

Confidentiality Notice: This message and any attachment thereto is for the sole use of the intended recipient(s), and is covered by the Electronic Communications Privacy Act (18 USC 2510 et seq). It may contain information that is confidential and legally privileged within the meaning of applicable law. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message.

From: Sheila F. Krein <skrein@ccrpc.org>
Sent: Thursday, October 21, 2021 4:53 PM
To: Kim Bowdry <kim@ccmhb.org>
Subject: RE: CCDDDB Allocation Priorities and Decision Support Criteria for PY 2023

Love these priorities, Kim! Some random comments follow. So wish the schools could begin self-advocacy at an earlier age and build on it. Parents having a vision for their children to have a full life is so important. I'm hoping parents today want more for their children than just to be safe and happy. I'd like to know who really coordinates and knows all the ins and outs of benefit coordination. I work so hard at learning this, but I'd like to know an expert to answer questions. I'm hoping that workers are learning lots of technology, so they can teach and assist clients. How to reach people who really need to be reached and to get them to respond can be so difficult.

I'm sorry you felt you needed to spend so much time responding to my comments on the plan last month. Thanks for all the great work you do. Sheila

From: Kim Bowdry <kim@ccmhb.org>
Sent: Wednesday, October 20, 2021 12:08 PM
To: 'Kim Bowdry' <kim@ccmhb.org>
Cc: Lynn Canfield <lynn@ccmhb.org>; 'Stephanie Howard-Gallo' <stephanie@ccmhb.org>; shandra@ccmhb.org; chris@ccmhb.org; 'Leon Bryson' <leon@ccmhb.org>
Subject: CCDDDB Allocation Priorities and Decision Support Criteria for PY 2023

CAUTION: External email, be careful when opening.

Hello,

Attached is a draft of proposed Champaign County Developmental Disabilities Board Allocation Priorities and Decision Support Criteria for Program Year 2023 (July 1, 2022 to June 30, 2023). We are interested in your input toward a final draft. Please send any comments to me via email before 4:30 PM on Friday, November 5, 2021.

Thank you,

Kim

Kim Bowdry
(pronouns: she/her/hers)
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CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD REQUIREMENTS AND GUIDELINES FOR ALLOCATION OF FUNDS

INTRODUCTION

It is the policy of the Champaign County Developmental Disabilities Board (CCDDB) that: services be provided in the least restrictive environment appropriate to the needs of the individual; CCDDB funding support be community based; and CCDDB planning and funding efforts be coordinated with governmental and non-governmental providers of services.

Funds allocated by the CCDDB shall be used to contract for intellectual/developmental disability supports and services for Champaign County residents pursuant to the authority contained in the Community Care for Persons with Developmental Disabilities Act, 50 ILCS 835/0.01 et seq.

Only individuals determined to have an intellectual/developmental disability are eligible for services funded by the CCDDB. The definition and eligibility determination process are described in the Illinois Department of Human Services, Division of Developmental Disabilities' Program Manual and website.

This policy should be reviewed by all agency staff responsible for contract management, including those who prepare applications for funding as well as those who record and report on contract activities, deliverables, and financials. This document offers guidance for contract compliance and clarification of expectations for fiscal accountability and financial management systems. In various sections of this document, the terms "applicant," "agency," "organization," and "provider" refer to the entity seeking or receiving funding from the CCDDB. Acceptance of CCDDB funding establishes a legal obligation on the part of the contracted agency to use the funding in full accordance with the provisions, terms and conditions of the contract. The funded agency assumes full responsibility for the conduct of project activities and deliverables and is responsible for meeting CCDDB compliance standards for financial management, internal controls, audits, and periodic reporting. An individual contract, once awarded, will contain additional details.

GENERAL AGENCY AND ADMINISTRATIVE REQUIREMENTS

1. Eligible Organizations for CCDDB Funding

- (a) An applicant for funding may be an individual or a public or private entity providing intellectual/developmental disability supports and services to residents of Champaign County.
- (b) An individual/sole proprietor who is appropriately certified or licensed by the applicable state or national board or organization that demonstrates financial reliability

and stability and who demonstrates appropriate service, fiscal, and administrative accountability is eligible to apply for funding.

- (c) Not-for-profit corporations are eligible to apply for funding. The agency must be chartered as a not-for-profit corporation in the State of Illinois and must be established as a Section 501 (C) (3) under the Internal Revenue Code. The agency must have a board of directors representative of the service area. ~~Consistent with the Internal Revenue Service conflict of interest policy~~, no staff member of the agency or relative of a staff member will be allowed to serve on the agency board.
- (d) For-profit organizations are eligible to apply for funding but must have a community based advisory committee representative of the service area and approved by the CCDDDB.
- (e) The CCDDDB and Champaign County Mental Health Board (CCMHB) may administer other funds on behalf of the Champaign County Board. An intergovernmental agreement will be executed between the respective boards defining the purpose, term, payment, and mutual responsibilities of the parties in the management of the funds. Any such activity shall have a direct relationship to the mission of the CCDDDB or CCMHB. The management of such funds will comply with the CCDDDB and/or CCMHB Funding Guidelines.
- (f) Government agencies ~~other than taxing bodies~~ are eligible to apply with the caveat that there has been a presentation and formal review of the capability of the agency to fund the services and that funding was not available.
- (g) Departments and units within the University of Illinois and Parkland College related to the mission of the CCDDDB are eligible to apply.

2. Administrative Requirements of Applicants

- (a) Corporate bylaws at a minimum shall: encourage consumer representation on the board; specify the number of members of the board and include a mandatory board rotation policy; reference term limits for each board office; describe policies for recruitment, nomination and election of board members and officers; address removal and replacement of board members; include an indemnification clause; and describe committee structures.
- (b) The provider must have its principal offices located within Champaign County. Exceptions must be approved by the CCDDDB, and if approved, the provider must have a local advisory board with a mechanism for providing direct input to the corporate board of directors.
- (c) The provider must not discriminate in the acceptance of clients, employment of personnel, appointment to the board of directors, or in any other respect on the basis of race, color, religion, gender, sexual preference, national origin, ancestry, or disability. Services shall not be denied based on a client's inability to pay.
 - (i) Any recipient of funds is required to submit a statement by its director certifying that it does not discriminate in the acceptance of clients, employment of personnel, appointment of members of the board of directors,

or in any other respect, on the basis of race, color, religion, national origin, ancestry, gender, sexual preference, or physical or mental disability.

- (ii) Should any written charge or complaint of discrimination on the basis of race, color, religion, national origin, ancestry, gender, sexual preference, or physical or mental disabilities be made against an organization receiving funds, its employees, or agents in any court or regulatory or administrative body (whether federal, state, or local), the organization shall furnish a copy of said charge or complaint to the CCDDDB. Said organization shall comply with any reasonable request for information about the status of said charge or complaint. The obligations imposed by this paragraph shall be subject to and subordinate to any claim of legal privilege and any non-waivable legal requirement of confidentiality imposed by statute, administrative rule or regulation, local ordinance, court order, pre-existing contract, or collective bargaining agreement. Failure to comply with this provision shall result in immediate termination of the contract.
 - (iii) The CCDDDB reserves the right to conduct its own investigation into any charge or complaint of a violation of this non-discrimination requirement.
 - (iv) By this non-discrimination requirement and any efforts by the CCDDDB, its agents, or employees to enforce it, the CCDDDB assumes no responsibility for enforcement of, or compliance by the recipient organization with, any applicable federal, state, or local laws, regulations, or ordinances prohibiting discrimination. An organization receiving funds must agree to indemnify and hold harmless the CCDDDB for any liability accruing to it for any charges or complaints of discrimination or similar civil rights violations based upon the acts of the organization receiving funds, its agents, or employees and premised on the CCDDDB's provision of these funds.
- (d) The provider shall implement and report on a Cultural and Linguistic Competence Plan for the agency's staff, clients, and governance board and aligned with National Culturally and Linguistically Appropriate Services standards as set forth by the US Department of Health and Human Services.
- (e) The provider shall demonstrate a willingness and ability to enter into networking agreements or contracts with other providers in order to avoid overlapping services and to ensure best outcomes for people using or seeking those services. Said agreements must be updated and on file annually. Because of the CCDDDB's commitment to the principle of continuity of care, agencies and programs must demonstrate a commitment to work cooperatively with all CCDDDB-funded and CCMHB-funded agencies and programs and such other health and human service agencies as are appropriate to the target population. Detailed working agreements with particular agencies with which the agency and program have a similar mission may be required by the CCDDDB.
- (f) The provider will be expected to:
- (i) Make available for inspection by the CCDDDB copies of site, monitoring compliance, licensure/certification, evaluation, and audit visit reports performed by any funding authority;
 - (ii) Cooperate fully in program evaluation and onsite monitoring as conducted by CCDDDB staff pursuant to the mandates contained in the Community Care for Persons with Developmental Disabilities Act;

- (iii) Make available for inspection by the CCDDDB copies of any request/application for new or adjusted funding in any program within the agency funded in whole or part by the CCDDDB;
- (iv) Make available for annual inspection by the CCDDDB copies of all agency budget applications, provider plan forms, program service and funding plans, service agreements and fiscal reports prepared for the Department of Human Services, United Way, Department of Children and Family Services, or any other funding authority;
- (v) Provide services to each eligible client in accordance with a written individual plan (where applicable) which identifies client needs and assets as determined by assessment. At a minimum, the plan will describe long term goals, measurable short-term objectives and expected outcomes of services with evaluative updates at least annually. Client files (where applicable) shall reflect written documentation of service units billed for reimbursement; and
- (vi) Comply with all applicable Illinois and Federal laws and regulations with respect to safeguarding the use and disclosure of confidential information about recipients of services.
- (g) Admission and discharge policies and procedures shall be set forth in writing and be available for review.
- (h) Professional staff must be licensed, registered, or certified by the State of Illinois, as applicable to the discipline and current Illinois regulations/requirements.
- (i) All program facilities shall be in compliance with applicable State of Illinois licensure requirements and local ordinances with regard to fire, building, zoning, sanitation, health, and safety requirements.
- (j) All programs shall certify that they do not use CCDDDB funds:
 - (i) To engage in proselytizing activities with consumers and/or require worship or religious instructional activities as a condition of participation;
 - (ii) For direct or indirect medical (physical health) services that are not related to intellectual/developmental disabilities;
 - (iii) For programs or services under the jurisdiction of public school systems.

3. Accreditation Requirements for Eligible Organizations

All CCDDDB funded agencies and programs shall strive to conform to appropriate standards established by recognized accrediting bodies in their field of services. For example, the CCDDDB recognizes the standards promulgated by the following accrediting bodies as indicative of acceptable agency and program performance: Commission of Accreditation of Services for Families and Children, Joint Commission on Accreditation of Health Care Organizations, Commission on Accreditation of Rehabilitation Facilities, and the Council on Quality and Leadership.

Accredited agencies and programs shall provide the CCDDDB with copies of relevant documents and correspondence between the agency and the accrediting body regarding agency and program compliance with accreditation standards. CCDDDB staff shall determine what documents and correspondence are relevant for the CCDDDB monitoring purposes.

4. Organization Requirements in Lieu of Accreditation

All CCDDDB funded agencies and programs not accredited by a recognized accrediting body shall make available for annual inspection by the CCDDDB copies of the organization's policies and procedures including standard operating procedures (SOP) along with credentials of key staff (i.e., resumes). Quality management mechanisms must be described in detail. CCDDDB staff may develop, make available to agencies, and periodically review a set of compliance indicators. The agency shall meet or exceed all compliance indicators as set forth by the CCDDDB and its staff.

5. Organization Board Meetings

Agency governing boards must notify the CCDDDB of all board meetings, meet in session open to the CCDDDB, with the exception of sessions closed in conformity with the Open Meetings Act, and provide CCDDDB with copies of minutes of all open meetings of the governing board. A request for waiver or modification of the requirement to provide copies of all minutes may be made and considered as part of an individual contract negotiation.

6. Fiscal Requirements

- (a) The organization shall be managed in a manner consistent with sound fiscal standards and shall maintain written policies and procedures regarding its fiscal activities, including but not limited to payroll, purchasing, cash management, relevant fee schedules, contracts, and risk management. The funded agency should choose methods appropriate to the size of the organization and the scale of operations. Funded agencies will be expected to meet the standards specified in the contract, and failure to do so may be cause for suspension of payment or termination of the contract. In addition, an agency not in compliance with financial management standards shall not be eligible for CCDDDB or CCMHB funding for three years; eligibility may be reestablished after that period by demonstrating that the compliance issue has been corrected and no others exist.
- (b) An approved provider plan indicating projected levels of expenses and revenues is required for each CCDDDB funded program.
- (c) The salaries and position titles of staff charged to CCDDDB funded programs must be delineated in a personnel form incorporated into the contract. Employees whose salaries are charged in whole or in part to a CCDDDB contract are required to maintain personnel activity reports in order to account for all compensated time spent on other activities.
- (d) CCDDDB funds are restricted for use in the program(s) described in the contract(s) concerning obligation of funding. CCDDDB funds in excess of actual reimbursable expenses by the program are subject to recovery upon completion of an independent audit, financial review, or compilation, as required (per Audit and Financial Accountability Requirements, below).
- (e) Organizations will establish and maintain an accrual accounting system in accordance with generally accepted accounting principles to include a level of documentation, classification of entries, and audit trails.
 - (i) All accounting entries must be supported by appropriate source documents.
 - (ii) Amounts charged to CCDDDB funded cost centers for personnel services must be based on documented payrolls. Payrolls must be supported by time and attendance records for individual employees.

- (iii) The organization shall have accounting structures that provide accurate and complete information about all financial transactions related to each separate CCDDDB contract.
 - (iv) Contract expenditure records must tie back to cost categories indicated in the final contract budget, including indirect cost charged to the contract. Actual expenditures will be compared with budgeted amounts.
 - (v) Financial records must be supported by source documentation such as cancelled checks, invoices, contracts, travel reports and personnel activity reports. The same costs shall not be claimed and reported for more than one CCDDDB contract or programs funded by other funding sources.
 - (vi) Financial records shall be maintained on a current month basis and balanced monthly.
 - (vii) Costs may be incurred only within the term of the contract ~~as defined in the~~ ~~boilerplate~~, and all obligations must be closed out no later than thirty (30) days following the contract ending date.
 - (viii) All fiscal records shall be maintained for five (5) years after the end of the contract term.
 - (ix) The CCDDDB may establish additional accounting requirements for a funded program or agency. An agency may be required to engage the services of an independent audit firm during the term of the contract in order to implement adequate financial management systems for full compliance.
- (f) CCDDDB funds may only be used for expenses that are reasonable, necessary, and related to the provision of services as specified in the contract. All allowable expenses that can be identified to a specific CCDDDB funded program should be charged to that program on a direct basis. Allowable reimbursable expenses not directly identified to a CCDDDB funded program must be allocated to all programs, both funded and non-funded.
- (g) The following expenses are non-allowable:
- (i) Bad debts;
 - (ii) Contingency reserve fund contributions;
 - (iii) Contributions and donations;
 - (iv) Entertainment;
 - (v) Compensation for board members;
 - (vi) Fines and penalties;
 - (vii) Interest expense;
 - (viii) Sales tax;
 - (ix) Purchase of alcohol;
 - (x) Employee travel expenses in excess of IRS guidelines;
 - (xi) Lobbying costs;
 - (xii) Depreciation costs;
 - (xiii) Rental income received must be used to reduce the reimbursable expense by CCDDDB funds for the item rented;
 - (xiv) Capital expenditures greater than \$500, unless funds are specified for such purpose;
 - (xv) Supplanting funding from another revenue stream. The CCDDDB may delay allocation decisions when anticipated funds from other sources may be influenced by their decisions;

- (xvi) Supplementation of state or federal funds and/or payments subject to the coordination of benefits;
 - (xvii) Expenses or items not otherwise approved through the budget or budget amendment process;
 - (xviii) Expenses incurred outside the term of the contract;
 - (xix) Contributions to any political candidate or party or to another charitable purpose;
 - (xx) Excessive administrative costs including:
 - Any indirect administrative cost rate in excess of 20% (subject to review by the CCDDDB) of the non-administrative portion of the budget, unless approved by the CCDDDB;
 - Any indirect administrative costs that exceed those approved in the program/service budget;
 - Any indirect administrative costs for which an organization's cost allocation plan has not been submitted and deemed acceptable to the CCDDDB.
- (h) Funded agencies shall provide safeguards for all funds provided through CCDDDB contracts to assure they are used solely for authorized purposes. Further, control will be enhanced if the duties of agency staff are divided so no one person handles all aspects of a transaction from start to finish. Although complete separation of functions may not be feasible for a small agency, a measure of effective control may be achieved by planning staff assignment of duties carefully. Some examples of techniques for improving internal controls are:
- (i) Cash receipts should be recorded immediately and deposited daily. Deposits should be reconciled by a second party.
 - (ii) All bank accounts should be reconciled on a monthly basis by someone other than the person who signs the checks.
 - (iii) Checks to vendors should be issued only for payment of approved invoices, and supporting documents should also be recorded. The staff member responsible for issuing check payments should not have signing authority.
 - (iv) The staff person responsible for the physical custody of an asset should not have responsibility for keeping records related to that asset.

ALLOCATION AND DECISION PROCESS

1. All CCDDDB allocation and contracting decisions are made in meetings open to the public. Allocation decisions will be based on statutory mandates, priorities and defined criteria related to the findings of various needs assessment activities sponsored by the CCDDDB. To the extent possible, final decisions will be predicated on how well an application matches up with the statutory mandates, priorities, and criteria.
2. The CCDDDB application for funding process shall include the following steps:
 - (a) Public notification of the availability of funding shall be issued via the News Gazette during the month of December. This announcement will provide information necessary for an organization to submit an application for funding and how to access application materials.

- (b) Funding priorities and criteria will be approved no later than the December Board meeting.
- (c) All potential applicants must register with the CCDDDB. Information on the registration process will be provided by the CCDDDB upon request. Access to application forms and instructions follows completion of the registration process.
- (d) Technical assistance by Board staff may be requested at any time prior to the due date of the application, with the caveat that availability may be limited in the final week.
- (e) Completed application(s) will be due in the month of February on a date specified in the public notice. The CCDDDB may extend the deadline due to extenuating circumstances by posting notice of the extended deadline to the CCDDDB online application system.
- (f) Access to application(s) will be provided to member(s) of the CCDDDB upon a member(s) request and in a medium preferred by the member.
- (g) The CCDDDB may require some or all applicants to be present at an April or May Board meeting to answer questions about their application(s).
- (h) Staff will complete a program level summary of each agency application, for review and discussion by the CCDDDB at the April Board meeting. Program summaries will include fiscal and service data, population served, and expected outcomes in relation to the funding priorities and criteria and goals of the Board. In addition, a decision support “match-up” process comparing the application to established and contemporaneous CCDDDB criteria will be provided.
- (i) Staff will complete preliminary funding recommendations for CCDDDB review and discussion at the May Board meeting. The recommendations will be presented in the form of a decision memorandum. The CCDDDB shall review, discuss, and come to a decision concerning authorization of funding and a spending plan for the contract year.
- (j) Once authorized by the CCDDDB, staff will implement the spending plan and initiate the contracting process. Within the context of the final recommendations, staff are authorized to negotiate and complete the contracts. Execution of the contracts requires the signatures of the respective Executive Directors, agency Board President, and the CCDDDB President. The contract period is July 1 through June 30. Contracts may be for one or two years. Types of programs eligible for a multi-year contract period shall be defined by the CCDDDB as part of the funding priorities and criteria.
- (k) Allocation decisions of the CCDDDB are final and not subject to reconsideration.
- (l) The CCDDDB does not consider out-of-cycle funding requests or proposals.

AWARD PROCESS, CONTRACTS, AND AMENDMENTS

1. Award Procedures

Agencies awarded CCDDDB funds shall receive a letter of notification indicating program allocation(s). This will state the amount of the funds awarded, the effective time period of the award, name of program application receiving the award, and any additional conditions, stipulations, or need for a negotiation of provisions attached to the award.

2. Contracting Format and Implementation Procedures

The contract shall include standard provisions, (optional) special provisions, the boilerplate (i.e., standard language and provisions applicable to all contracts), the relevant

program plan, personnel form (if applicable), rate schedule (if a fee for service contract), Business Associate Agreement (if service claims are to be entered), budget, required financial information, and agency Cultural and Linguistic Competence Plan. Completion of the contract requires the signatures of authorized representatives of the CCDDDB and the provider. Subsequent to execution of the contract, any change or modification requires a contract amendment.

3. Types of CCDDDB Contracts

(a) Grant Contract

Payment is predicated on the budget and obligations associated with the contract. Typically, payments are divided equally (i.e., 1/12 of the contract maximum per month) over the term of the contract, with May and June payments combined and released in June. Reconciliation takes place in the last quarter of the contract term. Accountability is tied to defined performance measures with targets and benchmarks. The annual renewal of a contract is subject to the allocation process and may result in re-negotiation of terms based on provider performance, needs assessment findings, or a desire by the CCDDDB to redirect funding in response to a change in goals, objectives, or priorities. The decision to use the grant contract format rests with the CCDDDB and is based on the appropriateness of this format to the objectives of the program plan.

(b) Fee for Service Contract

Payment is driven by retrospective billing for units of service provided within the constraints of the contract maximum. Typically, an “advance and reconcile” approach is used, with six monthly payments of 1/12th the contract maximum from July through December, and subsequent payment amounts based on reconciliation against billings beginning in January. Billing must be relatively proportional over the course of the contract term. Whenever possible and appropriate, CCDDDB contracts will establish rates based on those used by the State of Illinois. Fee for service contracts may be converted to a grant or value based payment structure.

(c) Consultation Contract

Payment is tied to a specific task or activity defined in the program plan. Typically, payment is tied to an hourly rate or completion of specific tasks (i.e., deliverables). Approved expenses associated with the consult shall be defined in the contract. Consultation contracts are not subject to the allocation process referenced above but rather are negotiated by the Executive Director with Board President approval, with full board approval sought when deemed appropriate by the Board President.

(d) Special Initiative Contract

The format can be either grant or fee-for-service and is subject to the same terms as described in the boilerplate. Most approved applications from “new” providers shall be classified as special initiatives for a period up to three years.

(e) Capital Contract

Terms and conditions are directly tied to expenditures for capital improvements or equipment purchases. Payment is driven by an approved spending plan and/or invoices associated with approved items.

(f) Intergovernmental Agreement

The CCDDDB, at its discretion and with agreement of the Champaign County Board, may enter into an intergovernmental agreement with other units of Champaign County government for the delivery of services.

4. Along with decisions for contract awards to be funded at July 1, the Board may make decisions about awards which would go into effect later in the contract/program year, in the event of additional available revenues which can be allocated to contracts.
5. Contract Amendments

The need for a contract amendment is driven by a change in conditions delineated in the original agreement. The provider is required to report changes that modify the administrative structure and/or implementation of the program plan. It is recognized that programs are dynamic, and it is prudent to make budget and program adjustments to better meet overall goals and objectives.

 - (a) The provider shall submit a formal request for an amendment to initiate the amendment process. The final decision regarding whether an amendment is necessary rests with the CCDDDB Executive Director.
 - (b) In general, decisions about amendments fall under the purview of staff and are executed by the Board President and Executive Director without formal action by the Board. The Board shall be informed of all contract amendments.
 - (c) At their discretion, the Board President or the Executive Director may ask for a full CCDDDB review and approval of a proposed amendment at the next regularly scheduled meeting, including a request to increase or decrease to any contract award amount.
 - (d) Proposed amendments that redirect approved dollars between agencies shall require the formal approval of the CCDDDB.

GENERAL REQUIREMENTS FOR CCDDDB FUNDING

1. CCDDDB contracts shall specify the relationship between funding and services to be provided. Funding shall not be used for purposes other than those specified in the contract unless the contract has been amended.
2. The provider shall not use CCDDDB funds to establish or add to a reserve fund.
3. If the provider accumulates CCDDDB funds in excess of those required for two months operating expenses, written notification and an explanation must be sent to the executive director.
4. CCDDDB funds shall not be used for purposes related to construction of facilities or purchase of equipment unless capital improvement is the explicit purpose of the contract, or is approved as part of the program plan.
5. CCDDDB may provide advance payment(s) to the provider under contract with the Board. Any advance payment will be reconciled against financial reports or other method as defined by CCDDDB. Request for advance payment will follow the contract amendment process.
6. Providers shall maintain accounting systems, including expense and revenue classifications that can accurately and appropriately report and verify financial transactions using CCDDDB forms and comply with the provisions for audits. Providers may be required to

institute special accounting procedures to resolve identified problems in financial accountability.

7. Providers shall notify the CCDDDB of any applications for funding submitted to other public and private funding organizations for services funded by the CCDDDB, especially those that could result in a funding overlap.

8. Provider Reporting Requirements

- (a) Financial and service reporting requirements are delineated in the contract ~~boilerplate~~ and are subject to revision from year to year. In general, quarterly financial and program reports are required for all fee for service, special initiative, and grant contracts. Quarterly financial reports and monthly billings are required for fee for service contracts.
- (b) Change in the Provider's corporate status shall be reported within 30 days of the change.
- (c) Change in the Provider's accreditation status shall be reported within 30 days of the change.
- (d) The Provider shall notify the CCDDDB about accreditation and/or licensing site visits by the State of Illinois or accrediting organizations.
- (e) Additional reporting requirements may be included as provisions of the contract.

9. Monitoring and Evaluation

- (a) CCDDDB staff shall conduct Provider financial and program site visits no less than every two years for the purposes of verifying reported financial and service information and reviewing compliance with the approved Program and Financial Plan.
- (b) CCDDDB shall survey all non-accredited agencies and programs for compliance with CCDDDB Requirements in Lieu of Accreditation on an annual basis.
- (c) CCDDDB staff may seek information to demonstrate continued compliance of all agencies and programs with appropriate standards in the interim between accreditation or certification surveys. Such information may address both individual agency and program issues, as necessary, and system-wide issues and may be obtained through such activities as periodic reports, on-site reviews, and special studies.
- (d) CCDDDB staff shall conduct desk reviews of agency program activity and financial reports, typically submitted each quarter; additional information or revisions may be requested.
- (e) The primary responsibility for on-going evaluation of services rests with the agencies and programs. In order for the CCDDDB to monitor these activities, agencies and programs shall submit at least annually a report of the outcomes achieved by CCDDDB-funded programs, in accordance with their annual Program Service Plan. This report shall also indicate how their results are used in agency and program management.
- (f) Additional monitoring and evaluation activities may be included as provisions of the contract.

10. Non-Compliance with the Terms and Conditions of the Contract

- (a) The CCDDDB Executive Director or their representative shall notify the Provider Executive Director and Provider Board President in writing of any non-compliance issue. The Provider shall provide a corrective action plan within 10 days and correct the deficiency within 30 days of receipt of the notification. Upon approval of the plan,

CCDDB staff shall monitor implementation. If corrective action is not implemented within specified time frames, action may be taken to reduce, suspend, or terminate funding.

- (b) Suspension of Funding: Cause for suspension of funding shall exist when the Provider:
 - (1) fails to comply with terms of the award letter;
 - (2) fails to comply with terms and conditions of the contract, or;
 - (3) fails to comply with CCDDB monitoring and reporting requirements.
- (c) The following procedures will be followed in the process of suspension of funding:
 - (i) The Provider Executive Director and Provider Board President shall be notified in writing, via certified mail, return receipt requested, by CCDDB staff that the agency funding has been suspended.
 - (ii) The notification of suspension will include a statement of the requirements with which the Provider is in non-compliance, the effective date of the suspension, and any conditions deemed appropriate for the agency to meet before termination of the suspension.
 - (iii) The Provider shall respond in writing to the CCDDB office address within ten (10) days of the date of notification of suspension. The response shall include a plan of action to correct the situation or event(s) leading to the suspension of funding, together with a time frame for such action.
 - (iv) The Provider may be requested to appear before the CCDDB.
 - (v) Failure to respond within 10 days shall be just cause for suspension of funding.
 - (vi) Failure to correct within 30 days shall be cause for suspension of funding. A suspension of funding shall remain in effect until the non-compliance leading to suspension has been corrected.
- (d) Reduction of the Contract Maximum: Cause for reduction of the grant award amount shall exist when a Provider fails to expend CCDDB funds or deliver services in accord with the contract, which includes approved Agency Program and Financial Plans. The following procedures will be followed in the process of reduction of funding:
 - (i) The reduction of the grant amount shall be in an amount determined by action of the CCDDB.
 - (ii) The Provider Executive Director and Provider Board President shall be notified, in writing, certified mail, return receipt requested, by CCDDB staff that the contract maximum is being reduced.
 - (iii) The notification of reduction will include a statement of the cause for reduction and of the amount by which the grant amount is reduced.
 - (iv) Within thirty days of the effective date of reduction, the agency may request a re-allocation of the amount by which the funding was reduced.
- (e) Termination of Funds: Due cause for termination of funding exists when a Provider fails to take adequate action to comply with CCDDB requirements within ninety days of notification of suspension of funding; or repeatedly fails to comply with requirements of the CCDDB as stated in the notification of award; in the contract; in the applicable provisions of this document; or in the monitoring procedures and requirements of the CCDDB. The following procedures will be followed in the process of termination of funding:
 - (i) The Provider Executive Director and Provider Board President shall be notified, in writing, certified mail, return receipt requested, by the CCDDB Executive Director that termination of funding is being recommended to the Board.

- (ii) The notification of possible termination will include a statement of the requirements with which the Provider is non-compliant; a statement of the actions of the CCDDDB taken to urge the Provider to avert termination and move to compliance with CCDDDB requirements; a statement of the responses of the agency; and the effective date of the recommended termination of funding.
- (iii) The CCDDDB shall consider and take action on the termination of funding at the next regularly scheduled meeting following the notification of the agency, or at an intervening special meeting if it so chooses.
- ~~(iv) Termination of funding will be undertaken only after the CCDDDB has made reasonable effort to reach an acceptable settlement with the Provider.~~
- (f) Appeal procedures: The CCDDDB Executive Director shall be responsible for implementing and interpreting the provisions pertaining to appeals. The Executive Director may delegate monitoring responsibility to other CCDDDB staff.
 - (i) Disagreements by Providers regarding the implementation and interpretation of the provisions of the policies delineated in this document shall be directed first to the CCDDDB staff member responsible for monitoring compliance with the particular provisions under contention within fourteen (14) calendar days of being notified of the staff decision.
 - (ii) If the Provider is not satisfied with the response received from the CCDDDB monitoring staff, the Provider may appeal the issue to the CCDDDB Executive Director within fourteen (14) calendar days from the date of response.
 - (iii) The Executive Director shall review information from both the CCDDDB monitoring staff and the Provider in arriving at a decision.
 - (iv) Any decision by the Executive Director that a Provider is in non-compliance with ~~these~~ provisions ~~of this chapter~~ shall be communicated in writing to the agency or program within fourteen (14) calendar days of receipt of the appeal.
 - (v) Only decisions by the CCDDDB Executive Director of non-compliance by a Provider with provisions of these policies may be appealed to the CCDDDB. Such appeals must be made in writing by the Provider.
 - (vi) CCDDDB shall review information from the CCDDDB Executive Director and the agency or program in arriving at a decision at the next regularly scheduled meeting following the notification of the agency, or at an intervening special meeting if the Board so chooses. The agency shall be afforded the opportunity to discuss the issue with the CCDDDB prior to a final decision.

AUDIT AND FINANCIAL ACCOUNTABILITY REQUIREMENTS

In the course of doing business, agencies funded by the CCDDDB should maintain a state of audit readiness. This means records relevant to financial and program aspects of contracts must be readily accessible. Failure to provide accurate and reliable information could result in questioned costs and disallowances. All funded agencies awarded contracts for direct services as part of the normal allocation cycle are required to have either an audit, financial review, or compilation conducted by an independent certified public accountant (CPA) registered by the State of Illinois, for the term of the CCDDDB contract and following the close of its fiscal year. These reports must contain schedules using CCDDDB/CCMHB approved source clarifications

for reporting operating income and operating expenses. Contracts with consultants and other specified vendors are exempt from this requirement.

Prior to the execution of a contract between the provider and the CCDDDB, the provider will demonstrate engagement with an independent CPA firm, through a letter from the firm stating that they will be performing the audit, review, or compilation, and specifying the timeline.

1. **Independent Audit** for agencies with \$300,000 total revenue or greater

- (a) An independent CPA firm performs an audit to provide a high level of assurance regarding the accuracy of financial statements, resulting in a formal report expressing an opinion on the presentation of the financial statements, identifying any significant or material weaknesses in internal control.
- (b) The resultant audit report is to be prepared in accordance auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in "Government Auditing Standards," issued by the Comptroller General of the United States. The report shall contain the basic financial statements presenting the financial position of the agency, the results of its operations, and changes in fund balances. The report shall also contain the auditor's opinion regarding the financial statements, taken as a whole, or an assertion to the effect that an opinion cannot be expressed. If the auditor expressed a qualified opinion, a disclaimer of opinion, or an adverse opinion, the reason therefore must be stated. Supplementary Information (see below) will also be required with the audit.
- (c) A funded agency with total revenue of \$300,000 or greater will be required to have an audit performed by an independent audit firm. An agency with total revenue of less than \$300,000 and greater than \$30,000 may choose or be required by the CCDDDB to have an independent audit performed.
- (d) If a funded agency provider is not required by another funding organization (e.g., state government, federal government, a foundation, etc.) to have an audit completed, and if one is to be completed for the CCDDDB contract, the funded agency may budget for and charge up to \$8,500 (total) to CCDDDB for costs associated with this requirement.

2. **Independent Financial Review** for agencies with total revenue over \$30,000 and below \$300,000

- (a) An independent CPA firm performs a review to provide a basic level of assurance on the accuracy of financial statements, based on inquiries and analytic and other procedures, and narrower in scope than an audit.
- (b) The resultant report is to be prepared in accordance with standards generally accepted in the United States of America. The report shall contain the basic financial statements presenting the financial position of the agency, the results of its operations, and changes in fund balances. Some of the supplementary information required for an audit will also be required in a review (see below).
- (c) A funded agency with total revenue of less than \$300,000 and greater than \$30,000 will be required to have a financial review performed by an independent audit firm. If the agency chooses or is required to have an independent audit rather than a financial review, this should be made clear prior to contract execution.

- (d) If a funded provider is not required by another funding organization (e.g., state government, federal government, a foundation, etc.) to have a financial review, and if one is to be completed for the CCDDDB contract, the funded agency may budget for and charge up to \$5,000 (total) to CCDDDB for costs associated with this requirement.

3. Compilation (for agencies with total revenue below \$30,000)

- (a) An independent audit firm prepares a compilation report on financial statements, not providing a level of assurance but rather considering whether the financial statements appear appropriate in form and are free from obvious material misstatements.
- (b) The resultant report is prepared in accordance with standards generally accepted in the United States of America. Some of the supplementary information required for an audit will also be required in a compilation (see below).
- (c) A funded agency with total revenue of \$30,000 or less will be required to have a compilation performed by an independent audit firm.
- (d) If a funded agency provider is not required by another funding organization to have a compilation, and if one is required for the CCDDDB contract, the funded agency may budget for and charge up to \$2,500 (total) to CCDDDB for costs associated with this requirement.

4. Shared Cost

In the event that the funded provider is required by another funding organization to have an independent audit, financial review, or compilation, the cost is to be pro-rated across revenue sources. Audit, Financial Review, and Compilation cost limits still apply.

5. Supplementary Information (required from all agencies, regardless of total revenue)

The following supplementary financial information shall be completed by an independent CPA firm and included in the audit or review or compilation report (and failure to do so will make the report unacceptable):

- (a) Schedule of Operating Income by CCDDDB-Funded Program: This schedule is to be developed using CCDDDB approved source classification and format modeled after the CCDDDB Revenue Report form. Detail shall include separate columns listing total program as well as CCDDDB-Funded only revenue. Individual sources of income should not be combined. Example: Funds received from several state or federal agencies should not be combined into one classification, such as "State of Illinois" or "Federal Government."
- (b) Schedule of Operating Expenses by CCDDDB-Funded Program: This schedule is to be developed using CCDDDB approved operating expenses categories and format modeled after the CCDDDB Expense Report form. Detail shall include separate columns listing total program as well as CCDDDB-Funded only expenses. The statement is to reflect program expenses in accordance with CCDDDB reporting requirements including the reasonable allocation of administrative expenses to the various programs. The schedule shall **exclude** any expense charged to the Board from the list of non-allowable expenses (above).
- (c) CCDDDB Payment Confirmation: CCDDDB payment confirmation made to an agency required by the independent auditor during the course of the audit or review or compilation is to be secured from the CCDDDB office.
- (d) For Audit Only, Auditor Opinion on Supplementary Information: The independent auditor should clearly establish his/her position regarding the supplementary financial

information presented in the Schedule of Operating Income by CCDDDB-Funded Program and Operating Expenses by CCDDDB-Funded Program. This can be done either by extending the overall opinion on the basic financial statements or by a supplementary opinion. If the independent auditor determines that the additional procedures necessary to permit a supplementary opinion on the schedules of operating income and expenses would materially increase the audit time, he/she may alternatively state the source of the information and the extent of his/her examination and responsibility assumed, if any.

- (e) Capital Improvement Funds: If the agency has received CCDDDB capital improvement funds during the last year, the audit or review or compilation shall include an accounting of the receipt and use of those funds.
- (f) For Audit Only, Internal Controls: The independent auditor should communicate, in written form, material weaknesses in the agency's internal controls when it impacts on the CCDDDB's funding. Copies of these communications are to be forwarded to the CCDDDB with the audit report.
- (g) **The independent CPA report must include, at a minimum, these** items described in the "Financial Accountability Checklist":
 - (i) Agency board-approved financial procedures in place that include separation of duties for preparation of payment authorization, approval of authorization and check signatories;
 - (ii) Agency board review of financial statements at Agency Board meetings and Source Document - Agency Board meeting minutes (dated);
 - (iii) Agency board Minutes with motion approving CCMHB/CCDDDB grant applications for current year;
 - (iv) Agency board minutes with motion approving the budget of the fiscal year under review;
 - (v) Verification that the agency has fulfilled its response to any findings or issues cited in the most recent Auditor's issuing of a Management Letter, if applicable;
 - (vi) Demonstration of tracking of staff time (e.g. time sheets);
 - (vii) Proof of payroll tax payments for at least one quarter, with payment Dates;
 - (viii) Form 941 or IL-941 or UC3, comparison of payroll tax amounts and alignment to period;
 - (ix) W-2s and W-3, comparison to the gross on 941;
 - (x) Verification of 501-C-3 status (IRS Letter), if applicable;
 - (xi) IRS 990 Form or AG990-IL, confirmation that 501-C-3 status is maintained;
 - (xii) IRS 990 Form or AG990-IL for associated foundation, if applicable;
 - (xiii) Secretary of State Annual Report; and
 - (xiv) Accrual Accounting Method is in use.

6. Filing: The audit or review or compilation report is to be filed with the CCDDDB within 6 months of the end of the agency's fiscal year. In order to facilitate meeting filing requirements, agencies are encouraged to contract with certified public accountants before the end of the fiscal year. **A letter of engagement is required prior to contracting (as above.)**

7. Late Audit, Review, or Compilation:

In the event that an independently performed audit, review, or compilation report is not submitted to the CCMHB office prior to the **fore said six-month** deadline, payments on

the agency's contract(s) will be suspended for three months or until the required report is received. If the report is not received within three months, the contract(s) will be automatically terminated and no further payments made to the agency. The payments for services delivered according to the contract(s) and withheld during that three month period will be released upon submission of the required report and resolution of any negative findings. If a satisfactory report is NOT received within 12 months after the close of the agency's fiscal year, the parties agree that the CCDDDB has no obligation to the agency to issue the suspended payments. An agency will not be eligible for subsequent CCMHB funding until the required report is filed and any negative findings (including the return of excess revenue) are resolved.

8. Penalty: Failure to meet these requirements shall be cause for termination or suspension of CCDDDB funding.
9. If the provider organization does not comply with the requirement to produce an audit or financial review or compilation as specified, the organization shall repay all Board CCDDDB funds allocated for such purpose.
10. Records: All fiscal and service records must be maintained for five years after the end of each budget period, and if need still remains, such as unresolved issues arising from an audit or review or compilation, related records must be retained until the matter is completely resolved.
11. At the discretion of the CCDDDB, independent audit or financial review or compilation requirements may be waived for special circumstances. The waiver provision shall be specified in the contract.

EXCEPTIONS TO THE PROVISIONS OF THE FUNDING GUIDELINES

All exceptions to the Funding Guidelines must have the prior approval of the CCDDDB, except for those specific sections of the Funding Guidelines where the authority is delegated to the CCDDDB's designee. Requests for exceptions that require the CCDDDB's approval must be submitted to the Executive Director for review and submission to the CCDDDB. Subsequently, the CCDDDB's written decision will be transmitted to the agency. If the contract and funding guidelines are not in agreement, the contract shall prevail.

Approved May 19, 2021 and Revised/Approved as of December or November 2021

Add to contract template: The CCDDDB Requirements and Guidelines for Allocation of Funds is attached hereto and incorporated into this contract by reference, except this contract will control should there be an inconsistent/contrary provision in the aforesaid Requirements and Guidelines.

#12.D.

PY2022

1st Quarter

Service Activity

Reports

for I/DD programs funded by
the Champaign County Developmental Disabilities Board
and Champaign County Mental Health Board

▶ Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- # Agency CCRPC - Community Services
- # Board Developmental Disabilities Board
- # Program Decision Support PCP (2022)
- # Period 2022 - First Quarter PY22

[Change Status] to Submitted ▼

Status Submitted

Date Submitted 10/25/2021 12:31 PM

Submitted By KHARMON

Community Service Events Service / Screening Contacts (CSE)	40	300	220	220
NON-Treatment Plan Clients (NTPC)			45	
Treatment Plan Clients (TPC)				99
Other				
Annual Target				
Quarterly Data (NEW Clients)	3	17	45	99
Continuing from Last Year (Q1 Only)				

Comments Community Service Events - 2 IEP meetings to present information about PUNNS and Head Start Awareness Walk.

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Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- # Agency CU Autism Network
- # Board Developmental Disabilities Board
- # Program Community Outreach Programs (2022)
- # Period 2022 - First Quarter PY22

[Change Status] to Submitted

Status Submitted

Date Submitted 11/03/2021 02:53 PM

Submitted By JPALERMO

Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
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Annual Target	25	0	0
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Quarterly Data (NEW Clients)

Continuing from Last Year (Q1 Only)

Sensory Swim Event, Sensory CUAN Family Picnic, Curtis Orchard Family Sensory Fall Event, CUAN Trick or Trick, Light Up Sounds Sensory Friendly Movie. UMS Sensory Area Task Force community Team for completion of outdoor sensory area , Multiple meeting with CARLE for continuation of Autism Initiative. We continue to provide update disability/covid 19 information on social media under our virtual CUAN Cares program. We attended CIT and CCDDBC and CCDDBC meetings. We provided various advocacy/parent support via phone calls, email, zoom meetings

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▶ Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- Agency **Community Choices, Inc. DDB**
- Board **Developmental Disabilities Board**
- Program **Community Living (2022)**
- Period **2022 - First Quarter PY22**

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

Status Submitted

Date Submitted 10/28/2021 12:27 PM

Submitted By CCCOOP

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

Quarterly Data (NEW Clients)	2	22	9	0	176.5
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Continuing from Last Year (Q1 Only)

14

CSE: 2 CSE in Q1 - UIUC part-time job fair on 9.14.21, Supportive Housing Collaboration discussion with Cunningham Township Supervisor on 9.9.21.

SC: Service contacts are recorded for non-treatment plan clients in personal development classes, 22 in Q1. Claims for treatment plan clients (279) are reported via the online reporting system.

Comments

NTPC: Non-treatment plan clients include participants in personal development classes, 9 in Q1.

TPC: 14 treatment plan clients continuing, 0 new in Q1.

Other: Direct hours are recorded for NTPCs in personal developmental classes - 176.5. Direct hours for TPCs (405) are reported via the online reporting system.

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▶ Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- # Agency **Community Choices, Inc. DDB**
- # Board **Developmental Disabilities Board**
- # Program **Customized Employment (2022)**
- # Period **2022 - First Quarter PY22**

[Change Status] to Submitted ▼

Status Submitted

Date Submitted 10/29/2021 01:18 PM

Submitted By CCCOOP

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	4	0	40	2772
Quarterly Data (NEW Clients)	0	257	2	
Continuing from Last Year (Q1 Only)			27	320

CSE: 0 for Q1

SC: Service contacts are reported via the online reporting system. 257 in Q1.

Comments TPC: Adults with I/DD who participated in the Customized Employment Program. 27 continuing and 2 new in Q1.

Other = Direct hours spent supporting people with I/DD and their employment goals. These hours were reported using the online claims reporting system. 320 in Q1

▶ Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- # Agency **Community Choices, Inc. DDB**
- # Board **Developmental Disabilities Board**
- # Program **Self-Determination Support (2022)**
- # Period **2022 - First Quarter PY22**

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

Date Submitted 10/29/2021 01:24 PM
Submitted By CCCCOP

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	4	2380	170	0
Quarterly Data (NEW Clients)	0	1037	6	0
Continuing from Last Year (Q1 Only)			182	0

No Community Service events in Q1.

SC: A total of 1037 service contacts in Q1. (644 were with I/DD, while 393 were with family members of people with I/DD.)

Comments NTPC: 182 returning non-treatment plan clients (59 people with I/DD, 123 family members of people with I/DD.) 6 new NTPCs in Q1. (2 people with I/DD and 4 family members of people with I/DD.)

Other: Direct hours - 568.5 in Q1.

Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- # Agency Developmental Services Center
- # Board Developmental Disabilities Board
- # Program Clinical Services (2022)
- # Period 2022 - First Quarter PY22

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

Status Submitted

Date Submitted 10/23/2021 01:51 PM

Submitted By VICKIE2010

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	4	61	
Quarterly Data (NEW Clients)	0	0	0	
Continuing from Last Year (Q1 Only)		3	57	

Community Service Events: None were possible due to COVID-19 restrictions and public outreach events on hold at this time.

Individual Information: Six individuals received two types of clinical services. Two individuals were closed from Clinical Services as met counseling goals.

Service/Screening Contacts: There were no screening contacts this quarter. An individual who receives DSC supports reached out to one of our counselors on his own and set up private pay for his counseling.

Update: Most practitioners are back to in-person sessions with the option of telehealth if preferred.

Extra Reporting Time: 7.5 hours total this quarter. 6 hours of clinical time for billing, reporting, scheduling, quarterly summaries, and discussions regarding psychiatry and counseling practices. 1.5 hours discussing a newly acquired home and psychiatry/counseling service needs of those residents. All are connected with providers established from previous agency so no formal requests for Clinical Services at DSC at this time.

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Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Community Employment (2022)**
- # Period **2022 - First Quarter PY22**

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

Date Submitted 10/25/2021 03:47 PM
Submitted By VICKIE2010

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	15	0	70
Quarterly Data (NEW Clients)	0	3	0	0
Continuing from Last Year (Q1 Only)			0	56

During the first quarter of FY22, DSC's Community Employment (CE) Employment Specialists have worked purposefully to take advantage of easing COVID-19 restrictions. With widespread access to the COVID-19 vaccine the ability for the public to return to many leisure activities including personal care, vacationing, and dining out has increased. The individuals we support who are employed in the personal fitness industry, hospitality industry, and in all aspects of the restaurant industry have especially benefited from this increase in public demand for services. Multiple individuals supported by DSC's CE Program saw their weekly work hours increase this quarter while two individuals in job development were supported in finding employment that meets their skills and preferences.

The use of technology by Employment Specialists at DSC continues to be a major area of concentration when job coaching and providing support to both job seekers and employed individuals. Many individuals we support are required to maintain a level of training and education; using technology (laptops or work computers) to work together towards independently completing the required training or education has proven to be a valuable resource. Many of the individuals we support work for employers who have switched to web-based time clocks and paycheck platforms. Employment Specialists have worked to assist those we support in becoming independent in clocking in and out, requesting time off, checking schedules, and accessing pay stubs. Of late, the Champaign/Urbana Mass Transit (MTD) has reduced and/or changed their routes which has impacted several people. Employment Specialists are some to learn the MTD phone app platform in order to learn the new routes.

Eleven people continued in the supported employment program from the Philo Road site. One individual participated in job development activities. Support continues to be provided to individuals in their jobs with Derek Martin HAIR, Papa John's, Urbana-Champaign Independent Media Center, and Hessel Park Church, with all observing COVID mitigation protocols.

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▶ Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- # Agency Developmental Services Center
- # Board Developmental Disabilities Board
- # Program Community First (2022)
- # Period 2022 - First Quarter PY22

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

Status Submitted

Date Submitted 10/25/2021 04:37 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	3	5	50	55
Quarterly Data (NEW Clients)	0	2	19	1
Continuing from Last Year (Q1 Only)			0	38

Continuing through the pandemic, health and wellness was a primary focus for groups this quarter. Exercise was offered twice per week meeting at the Leonard Center. The group traveled via MTD to provide participants training on independent travel. Health Matters also continued to dive deeper into the healthy habits of nutrition and beyond. Newly offered this quarter was Aqua Fit, taking place at the YMCA. Group members enjoyed water exercises while staying socially distant in the pool.

Both men's and women's groups continued, promoting a place for people to discuss matters of importance and exploring self-advocacy. In-person volunteering returned this quarter with two offerings at Salt and Light. People enrolled in this group have previously expressed interest in volunteering and securing jobs. People worked on processing and sorting donations, light cleaning, and other assigned tasks. The group leader worked with participants to assist them in identifying and maintaining their own goals.

Comic Club was newly offered this quarter based on the expressed interests of participants and the growth of the popular Fan Club Group. People toured the local comic book shop and explored different series. They were introduced to new characters and stories as the group progressed. Fan Club continued to focus on the different fandoms introduced by group participants including: Star Wars, Harry Potter, and the Marvel Universe.

The Nature Exploration Group visited the area's forest preserves and parks to study the outdoors. The group spent time doing scavenger hunts, exploring creeks and streams, and even observed animals in their natural habitats. The group also enjoyed many picnics in the area. The COVID-19 pandemic, and particularly the surge of the Delta variant in our community, had a significant effect on our day programs, including the Community First program this quarter. A few TPCs, some of their support staff, and several of their NTPC peers, had to quarantine/isolate as a result of exposure, positive diagnoses, and breakthrough infections. These circumstances obviously reduced attendance hours, limited some community opportunities, decreased the number and mix of NTPCs who usually join TPCs in groups (in order to reduce exposure risks), and strained already challenging staffing patterns. However, the program continues to adapt and adjust to these situations, with the resilience and incredible enthusiasm of the participants and staff members serving as the validation for our collective efforts.

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▶ Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- * Agency Developmental Services Center
- * Board Developmental Disabilities Board
- * Program Community Living (2022)
- * Period 2022 - First Quarter PY22

Status Submitted

[Change Status] to Submitted ▼

Date Submitted 10/27/2021 08:10 AM

Submitted By VICKIE2010

Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
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Annual Target	8	0	56
Quarterly Data (NEW Clients)	1		1
Continuing from Last Year (Q1 Only)			45

Community Living Direct Care Staff continue to provide supports and services in people's homes and the community such as assisting with budgeting, medical appointments, shopping, and maintaining living environments. Skills are taught so people can remain living as independently as possible.

Comments Monthly housekeeping and safety reviews are completed so staff can educate and support people in those tasks required to maintain a safe home. Staff also assist in community connections such as identifying interests and attending local events.

▶ **Instructions**

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- * Agency **Developmental Services Center**
- * Board **Developmental Disabilities Board**
- * Program **Connections (2022)**
- * Period **2022 - First Quarter PY22**

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

Date Submitted 10/26/2021 08:49 AM
Submitted By VICKIE2010

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	3	0	12	25
Quarterly Data (NEW Clients)	0	2	9	20
Continuing from Last Year (Q1 Only)			0	0

Art groups held at the Crow during the first quarter were offered based on the expressed interests of participants. Making recycled crafts continued in popularity as the team made everything from popular characters to fun objects and animals. The favorite was making spooky spell books in preparation for fall. Many of these unique works are featured on the wall and visible to those walking by to enjoy.

Two-dimensional arts were a focus, including drawing. Many people who were not as familiar or as confident in art had the opportunity to participate in tutorials and eventually worked their way up from simple animals and objects to creating their own self-portraits.

Comments Exploring Famous Artists was also an offering as a way to introduce people to other 2D forms. Artists became familiar with Picasso and practiced cubism as a way to make two dimensions appear multi-dimensional. Leonardo Davinci's Mona Lisa was another famous work the group discussed. They each practiced grids and remade their own "tile" of the Mona Lisa forming a larger block poster that was displayed. The group progressed into exploring more color with watercolor renditions of sunflowers in the style of Georgia O'Keeffe.

The soap makers continued to promote their product at the Urbana Farmer's Market. In addition to exploring product promotion, they also worked on developing new scents for the upcoming fall season. Wax melts were also in progress for fall, pouring scents such as Harvest Apple Pie and Pumpkin Spice.

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Staff Continuing Education: Both members of the LEAP team attended the "People with Disabilities: Bringing Diverse Skills to the Workplace" webinar hosted by the Statewide Independent Living Council of Illinois

Impacts of the LEAP Program for first quarter:

- Champaign Unit #4 School District hired a DSC jobseeker at the end of this quarter. They completed LEAP training in 2017.
- BodyWork Associates hosted a Frontline Staff training this quarter. The connection with them was initially made through a LEAP presentation to the Champaign Rotary club. A DSC jobseeker started working at BodyWork Associates shortly after they completed training and has had a successful start with a supportive employer.
- The Literacy both attended a LEAP training and hired a Community Choices jobseeker this quarter.

Program Development:

LEAP program pamphlets

- Pamphlets were printed and placed on the display rack at the Champaign County Chamber of Commerce. In addition, Visit Champaign County and the Champaign County Economic Development Corporation have digital copies of the pamphlet to distribute to businesses they work with.
- Having a pamphlet to give out has been much more useful than business cards alone when making cold call visits since the information can be passed to management. For cases where corporate headquarters need to approve of their stores hosting a LEAP training, the digital pamphlet is better received than the lengthy email that used to be sent.

152 people in Champaign County were introduced to the LEAP program this quarter via e-mail, virtual meetings, and in-person events in an attempt to solicit participation in the trainings.

The LEAP Coordinator has been asked to provide a program update at the next Transition Planning Committee meeting in November.

Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- * Agency Developmental Services Center
- * Board Developmental Disabilities Board
- * Program Employment First (2022)
- * Period 2022 - First Quarter PY22

Status Submitted [Change Status] to Submitted

Date Submitted 10/23/2021 02:48 PM

Submitted By VICKIE2010

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients (CSE)	(SC)	(NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	25	0	0	0

Quarterly Data (NEW Clients) 9

Continuing from Last Year (Q1 Only)

Comments Employer Training:

LEAP trainings were provided to:

- Curtis Orchard – 61822; The general manager attended a 4th Thursday virtual LEAP session.
- Champaign County Recorder – 61801; 4th Thursday virtual LEAP session; although this office has gone through LEAP training previously, the elected official in the position has changed.
- The Literary – 61820; 4th Thursday virtual LEAP session with the owner and one employee. This was done before the bookstore opened to the public.
- Urbana Park District – 61801; This employer has already attended training and thus is not counted above. A manager who had not been through LEAP training attended a 4th Thursday virtual session.
- Salt & Light (Champaign store) – 61821; In-person LEAP trainings were held over multiple days to ensure all staff could attend. Total staff trained between the two stores was roughly 15.
- Salt & Light (Urbana store) – 61802; In-person LEAP trainings were held over multiple days to ensure all staff could attend. Total staff trained between the two stores was roughly 15.

Frontline Staff trainings were provided to:

- Habitat for Humanity of Champaign County – 61820; In-person Frontline Staff training included 8 staff (director and employees).
- BodyWork Associates – 61820; Virtual Frontline Staff training for the owner and a front desk employee.
- Salt & Light (Champaign store) – 61821; In-person Frontline Staff trainings were held over multiple days to ensure all staff could attend. Total staff trained between the two stores was roughly 15.
- Salt & Light (Urbana store) – 61802; In-person Frontline Staff trainings were held over multiple days to ensure all staff could attend. Total staff trained between the two stores was roughly 15.

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▶ Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Individual and Family Support (2022)**
- # Period **2022 - First Quarter PY22**

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

Date Submitted 10/23/2021 04:24 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	2	8	32	17
Quarterly Data (NEW Clients)	0	1	1	0
Continuing from Last Year (Q1 Only)			29	8

One child was opened in the Intermittent Direct Support (respite) part of the program as an NTPC.

Comments The Individual and Family Support Program continues to provide direct staff support during the day, Intermittent Direct Support and assistance with camps and activity events. Due to the pandemic, IFS staff have been visiting some individuals in the program from a distance by driving past their houses and providing a 'connection' from a distance with not only staff but with peers. Individuals have participated in activities such as playing games, visiting parks and other outdoor activities, working on art projects, cooking, and cleaning up parks.

61

needs/desires are, to be sure it remains conflict free.

- Working with ISC to ensure timely plans and a smoother process for each individual.
- Assisting with linkage for legal support and providing advocacy and support to people with legal concerns/police/court.
- Completion of POM (Personal Outcome Measure) interviews.
- Ensuring agency policies and procedures are being followed.

• An increase in the number of case conferences due to aging and mental health concerns was noted this quarter. Staff continue to spend a considerable amount of time researching housing options, assisting with leases, and troubleshooting benefits.

Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- # Agency Developmental Services Center
- # Board Developmental Disabilities Board
- # Program Service Coordination (2022)
- # Period 2022 - First Quarter PY22

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

Date Submitted 10/24/2021 01:35 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	2	75	36	280
Quarterly Data (NEW Clients)	0	5	1	1
Continuing from Last Year (Q1 Only)			32	228

Comments Supports and Services provided:

- Coordinates services by creating pathways to needed supports and working with the team to integrate care
- Facilitates delivery of service
- Linkage and referral to community resources/direct assistance with housing, needs, resources, and advocacy
- Establishing and maintaining benefits: SNAP, Medical, and Social Security; Shelter Plus Care grants
- 24-hour emergency response team participation and supervision
- Social Security Representative Payee services
- Medical appointment coordination and intermittent direct support with medical care
- Assisting with urgent financial circumstances (benefits and employment, etc)
- Grocery shopping and nutrition guidance
- Increase individual's ability for self-management and decision-making
- Documentation management
- Actively supports measures that prioritize the individual's needs and promotes the effective use of resources
- Intervenes by arranging for services, and by providing psychosocial support to the individual and their family
- Provides individual/family advocacy
- Strives to maximize continuity of care especially during the ongoing pandemic
- Communicates with providers who are delivering care and services for the purpose of maintaining the quality of care
- Review Implementation Strategy Ongoing Supports and provide monthly summaries of services
- When new individuals are opened in the agency or a new program, contacting the ISC to be sure they are touching base with the person first on what their

63

▶ Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- # Agency **PACE, Inc.**
- # Board **Developmental Disabilities Board**
- # Program **Consumer Control in Personal Support (2022)**
- # Period **2022 - First Quarter PY22**

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

Status Submitted

Date Submitted 10/12/2021 10:39 AM

Submitted By SHERRY

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (SC)	Treatment Plan Clients (NTPC)	Other Clients (TPC)
Annual Target	12	200	30	3
Quarterly Data (NEW Clients)	6	47	10	0
Continuing from Last Year (Q1 Only)			0	0

PACE offered orientations via zoom and 1:1 appointments at PACE's office during this quarter to recruit PSWs. Due to the decrease inquiries of potential PSWs, we are currently running PSW Indeed job postings, Facebook postings and attending community events to attempt to recruit PSWs. As for outreach and recruiting efforts during this quarter, I was panelist on a webinar organized by Illinois Self-Advocacy Alliance and Illinois Council on Developmental Disabilities for the topic of Center for Independent Living (CIL) supports and services for the I/DD Community. I also attended Community Change Maker's Expo formerly known as the Volunteer Fair at UIUC.

PACE would like to note that during this quarter recruiting efforts was affected by potential PSWs not completing paperwork and not passing the background checks. As a result, for this quarter three (3) potential PSWs were not added on the PSW registry and is not reflected to the number Comments above.

No TPCs due to people being served through this funding are people seeking employment as PSWs and not consumers with I/DD. Continued collaboration is taking place with IRC, DSC and CCRPC-ISC, in that they are referring individuals with I/DD and their family to PACE to hire a PSW that was oriented and put onto a registry through this funding.

PACE continues to reach out and attempt to collaboration with the parent group at Community Choices, IRC and DSC.

For First Quarter PY22, PACE has sent out 4 sets of referrals.

64

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 (2022)
- * Period 2022 - First Quarter PY22

[Change Status] to Submitted

Status Submitted

Date Submitted 10/29/2021 12:30 PM

Submitted By KKESSLER

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	12	0	28	0
Quarterly Data (NEW Clients)	0	1	1	0
Continuing from Last Year (Q1 Only)				

During this quarter we had yet another resignation of our Service Facilitator on 9-17-21. We had 19 carry-over clients that will receive services this FY. We had one client screened who is in the assessment process and will be opened next quarter. We had one new client admitted to the program. There were no Community Service Events. The Service Facilitator continued to provide services to the existing caseload as warranted by their needs. These services will continue to be provided by our current Community Support case managers. Due to the current economic climate we have had difficulty over the past 6 months in finding a clinician who has a background in both developmental disabilities & mental health who meets the qualifications required of this position. We as an agency made the decision to give up the grant for this reason. We will continue to serve our existing caseload and coordinate services in their behalf with local service providers with whom we have already been working. We will continue to take on new clients from local agency referrals as caseloads warrant. We appreciate the support and funding provided to this position by the CCMHDD Board over the years. We felt there was a definite need for this service with these dual populations and thank you for letting us provide this service for the county.

65

PY2022

1st Quarter

Service

Data

Charts

CCRPC - Community Services

Decision Support Person \$77,872

PY22 Q1

168 people were served, for a total of 1,043.75 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



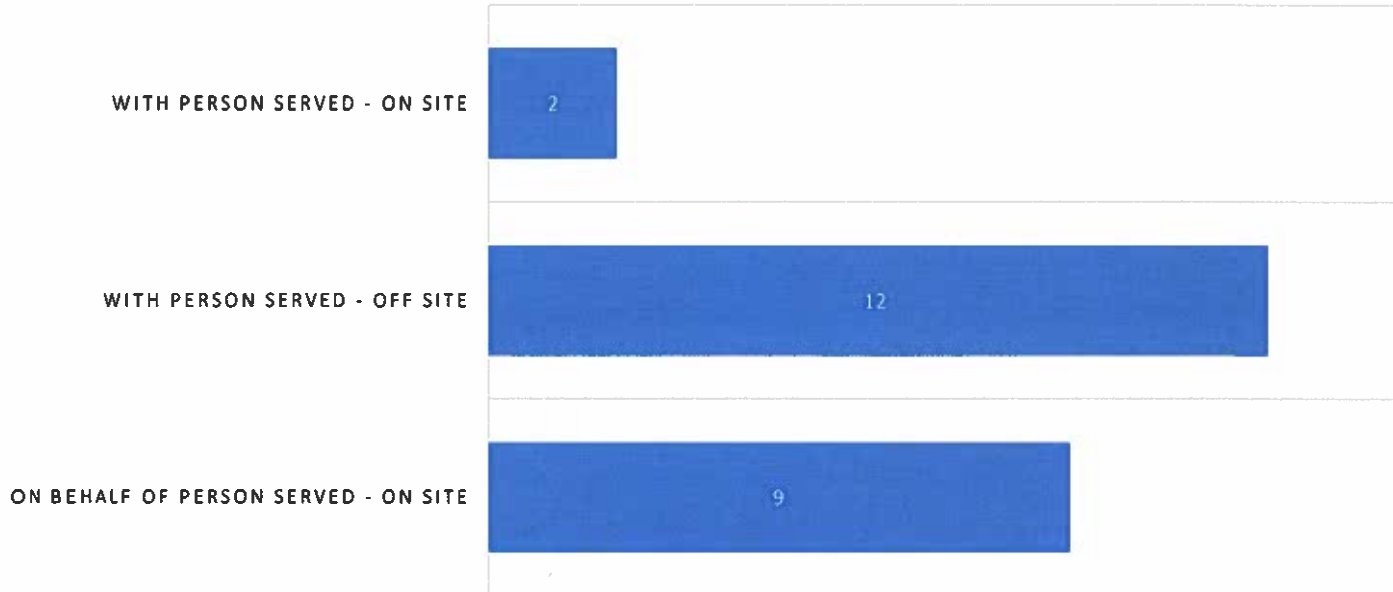
Community Choices

Community Living \$52,500

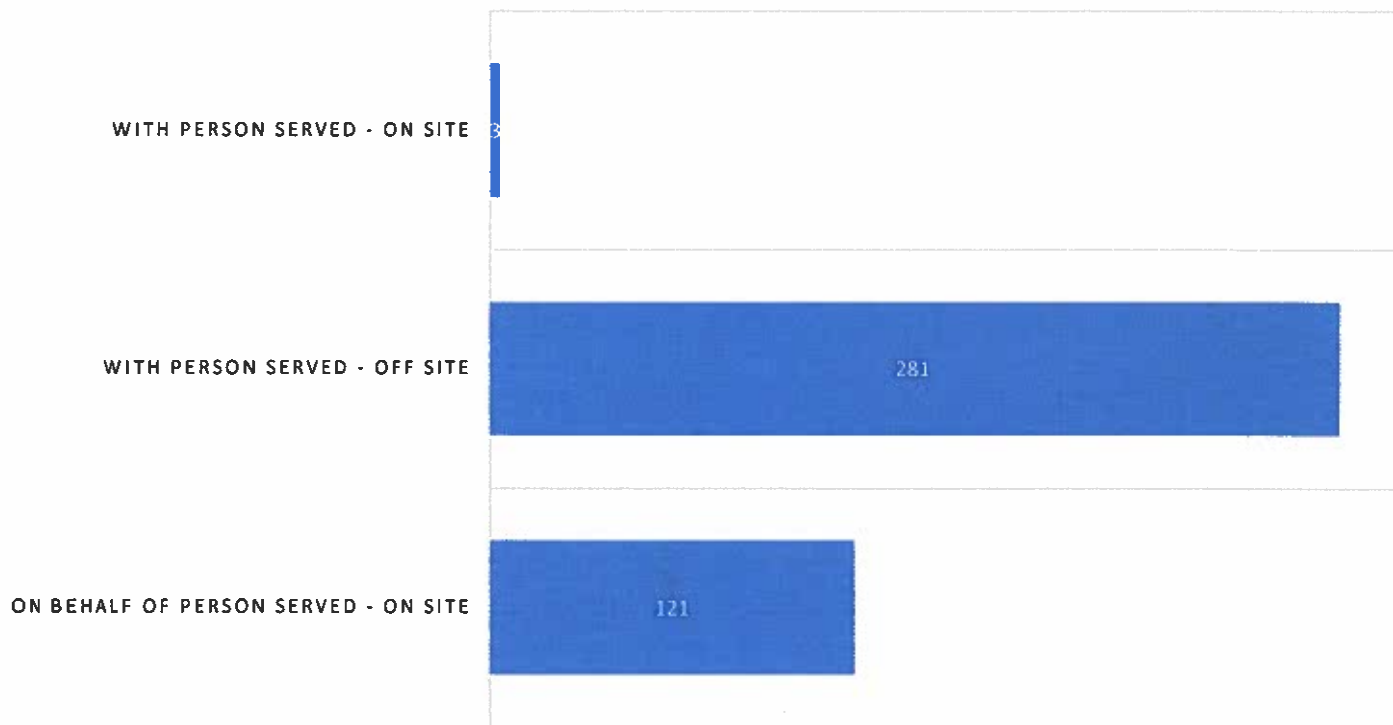
PY22 Q1

12 people were served for a total of 405 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



68

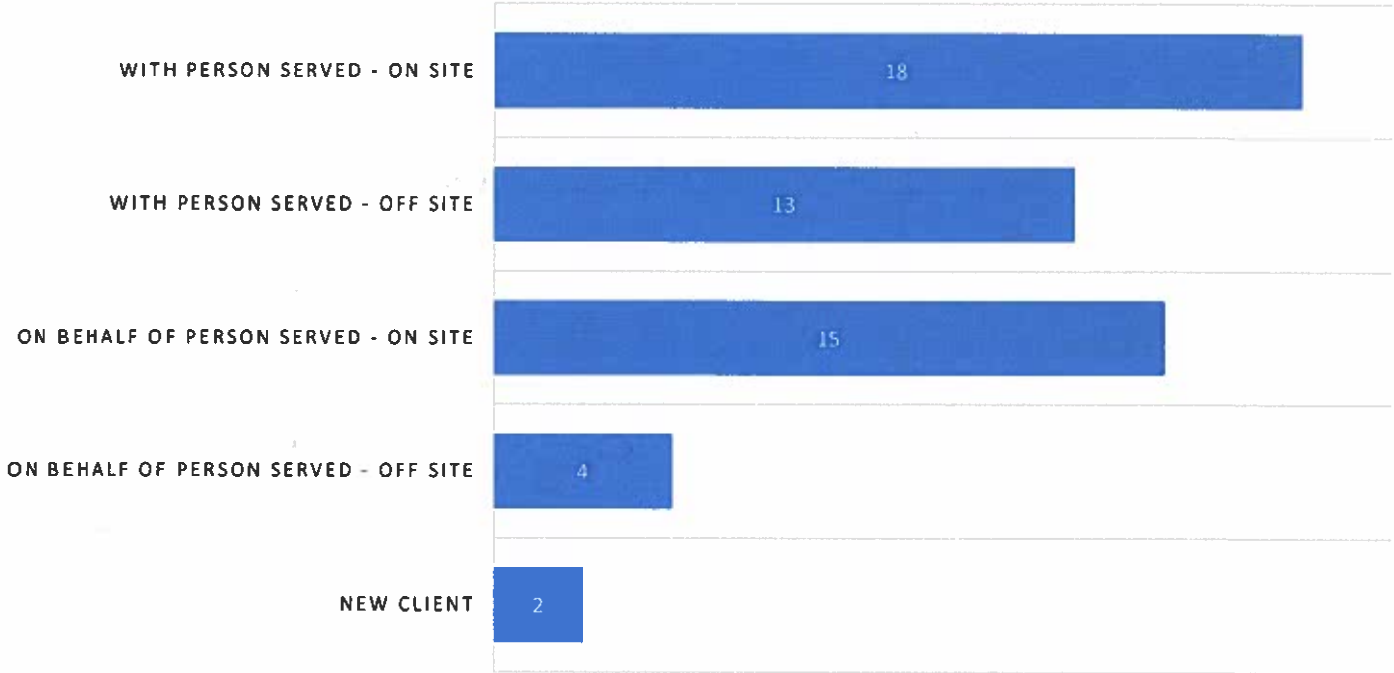
Community Choices

Customized Employment \$52,500

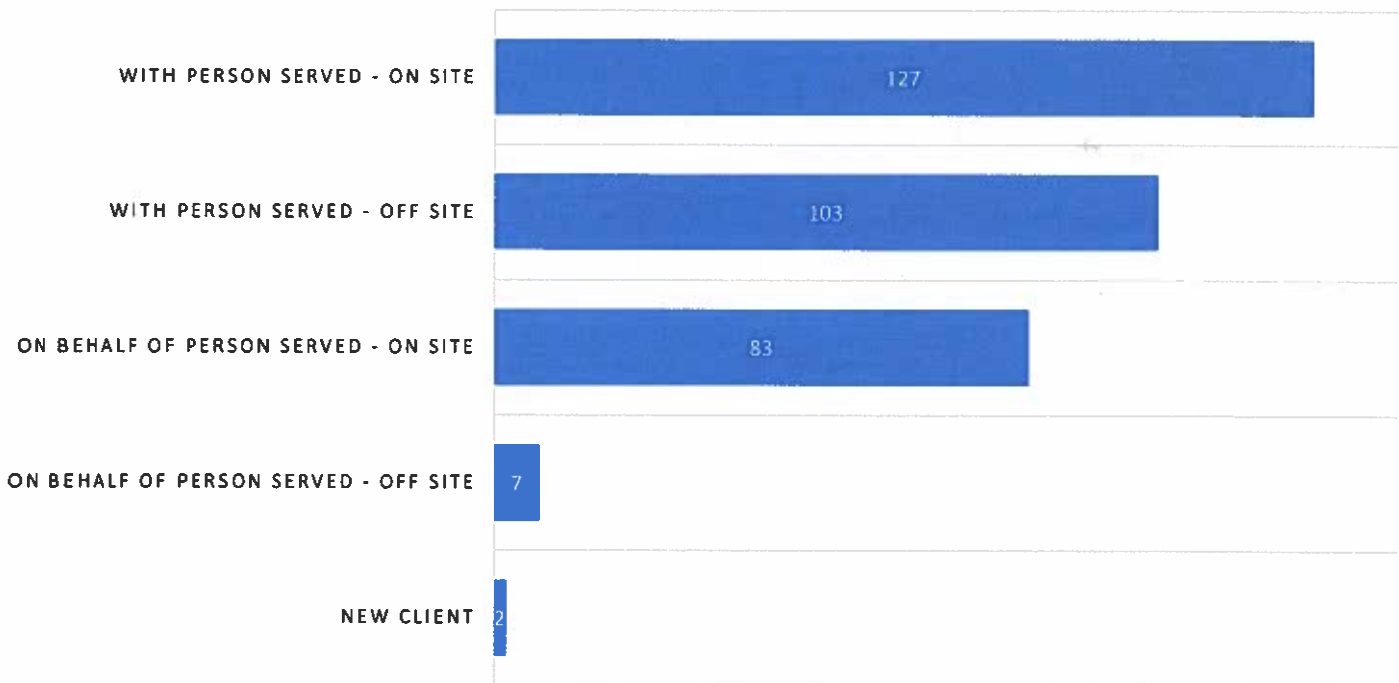
PY22 Q1

23 people were served for a total of 322 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



Developmental Services Center

Clinical \$43,500

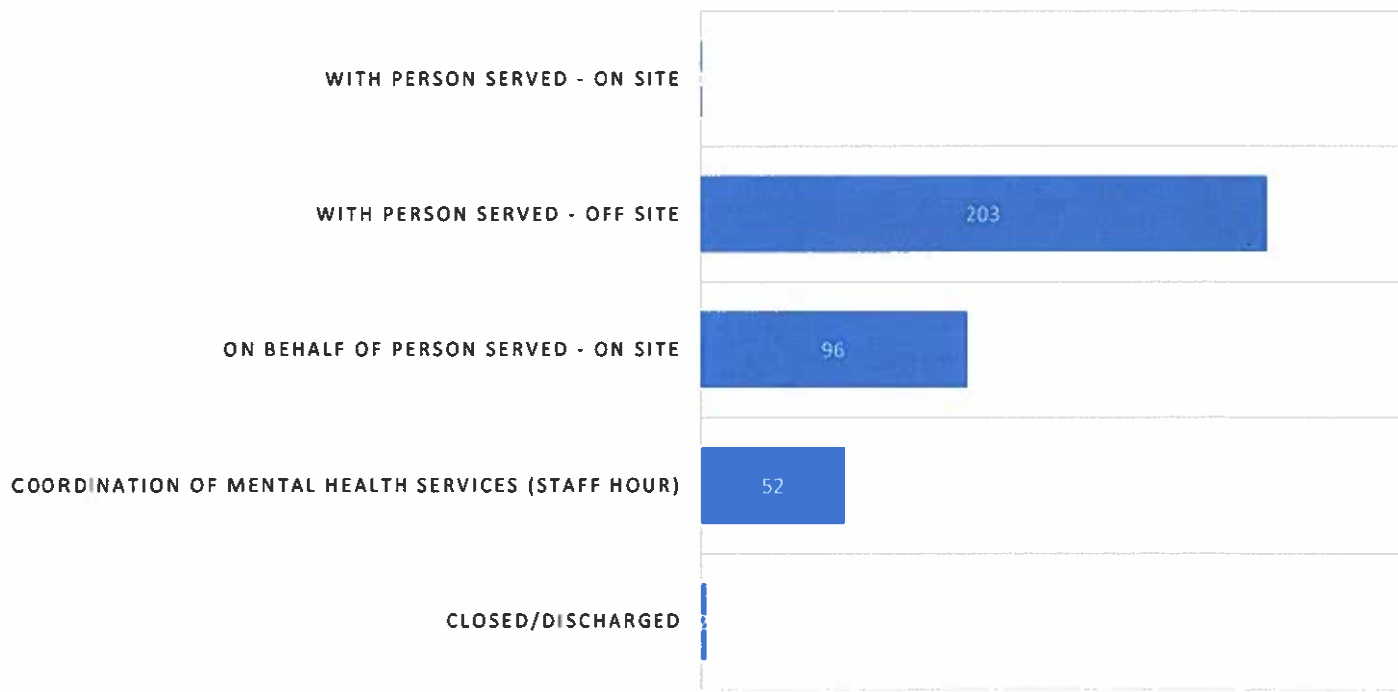
PY22 Q1

46 people were served for a total of 354 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



70

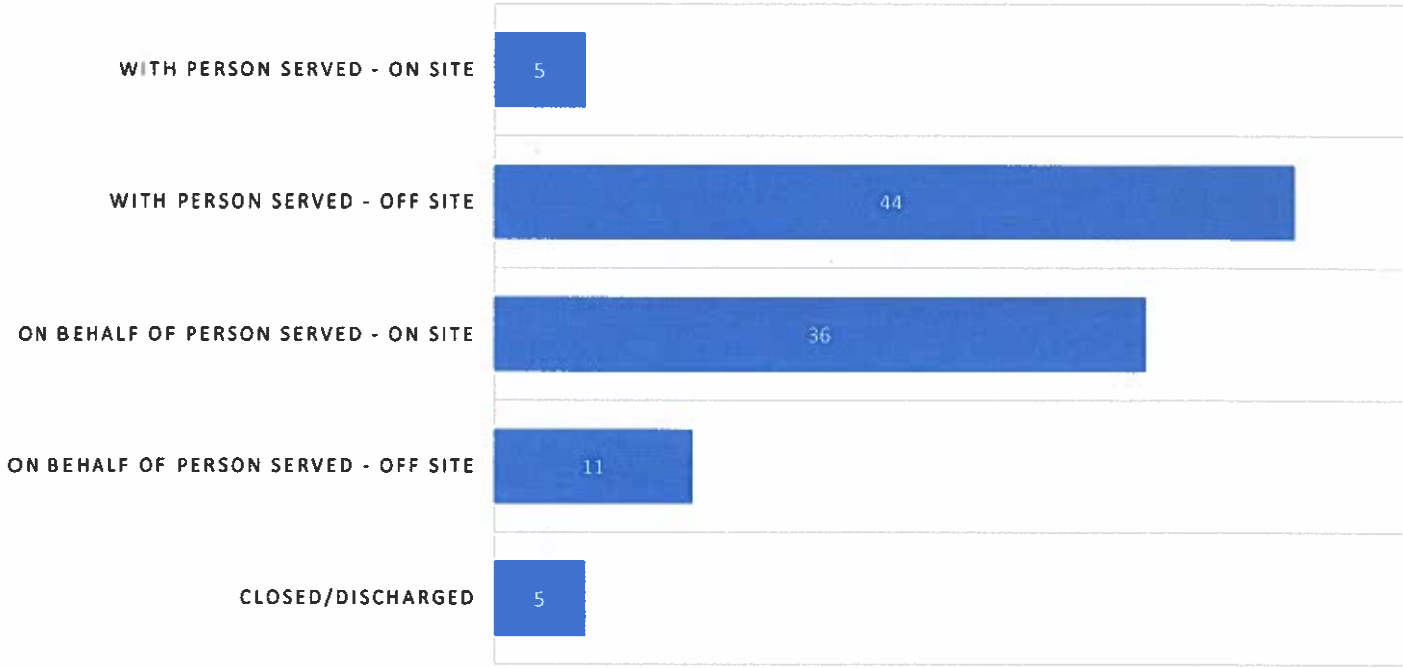
Developmental Services Center

Community Employment \$90,342.50

PY22 Q1

47 people were served for a total of 905.25 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



71

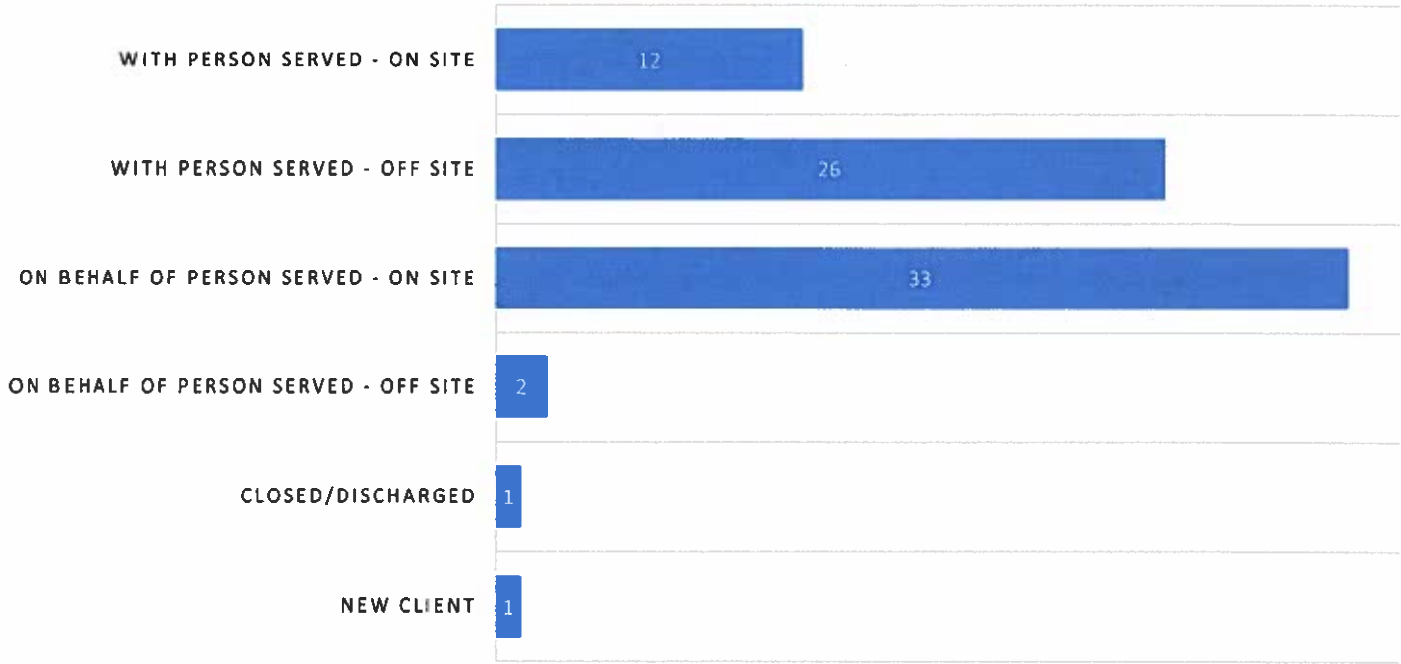
Developmental Services Center

Community First \$211,914.75

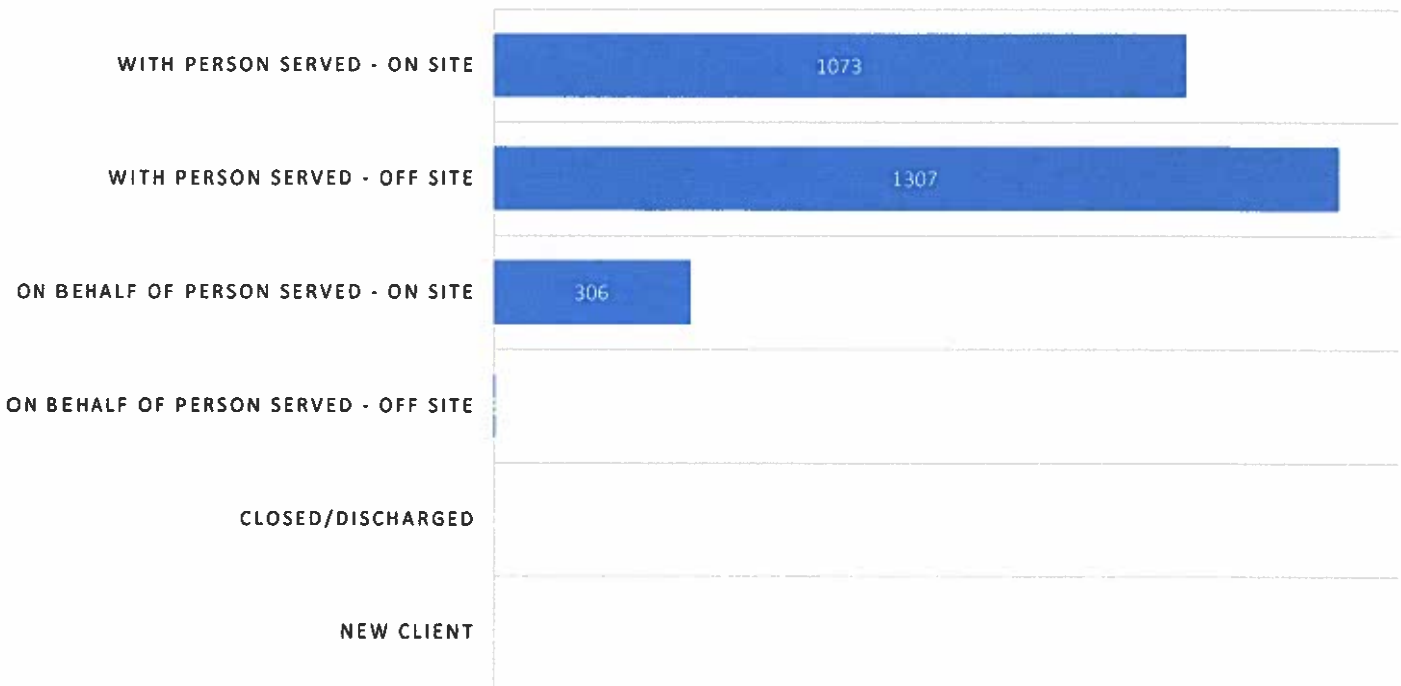
PY22 Q1

37 people were served, for a total of 2,689.50 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



72

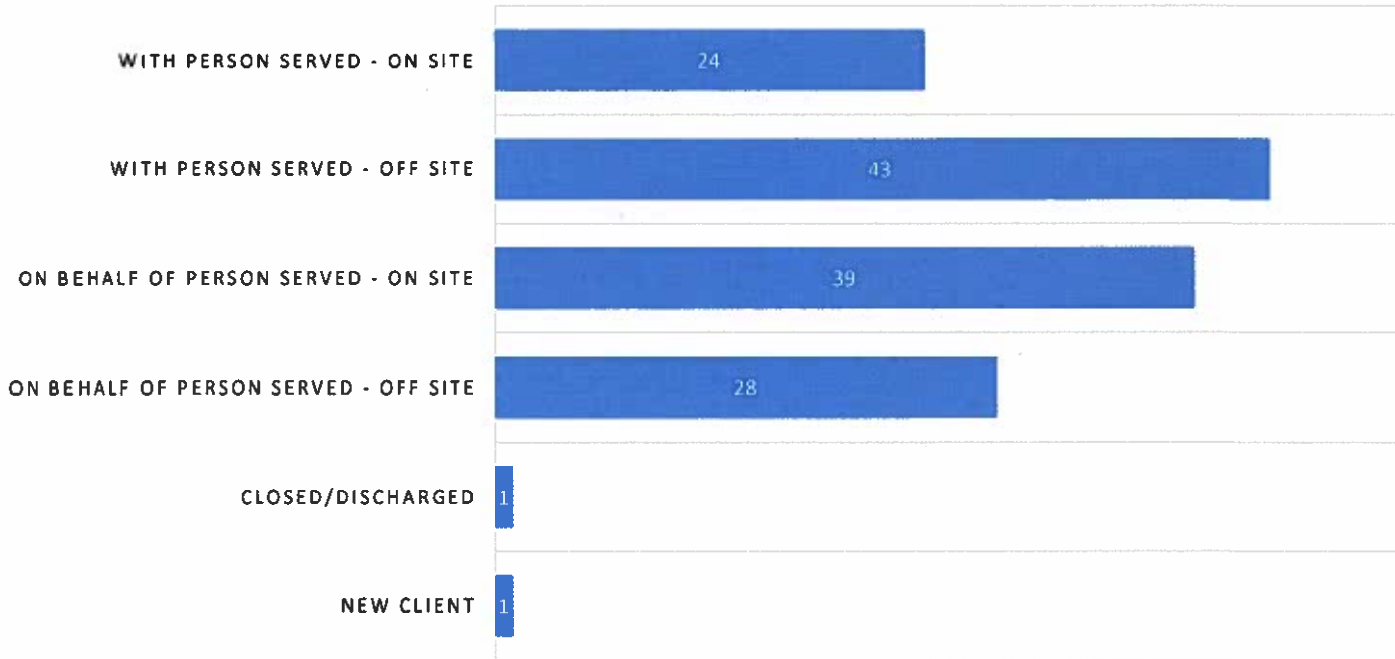
Developmental Services Center

Community Living \$114,010

PY22 Q1

45 people were served for a total of 2,206.50 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



Developmental Services Center

Connections \$21,250

PY22 Q1

21 people were served, for a total of 1,708 hours

PARTICIPANTS PER SERVICE ACTIVITY

WITH PERSON SERVED - OFF SITE

19

NEW CLIENT

20

HOURS PER SERVICE ACTIVITY

WITH PERSON SERVED - OFF SITE

1703

NEW CLIENT

74

Developmental Services Center

Individual & Family Support \$107,264.50

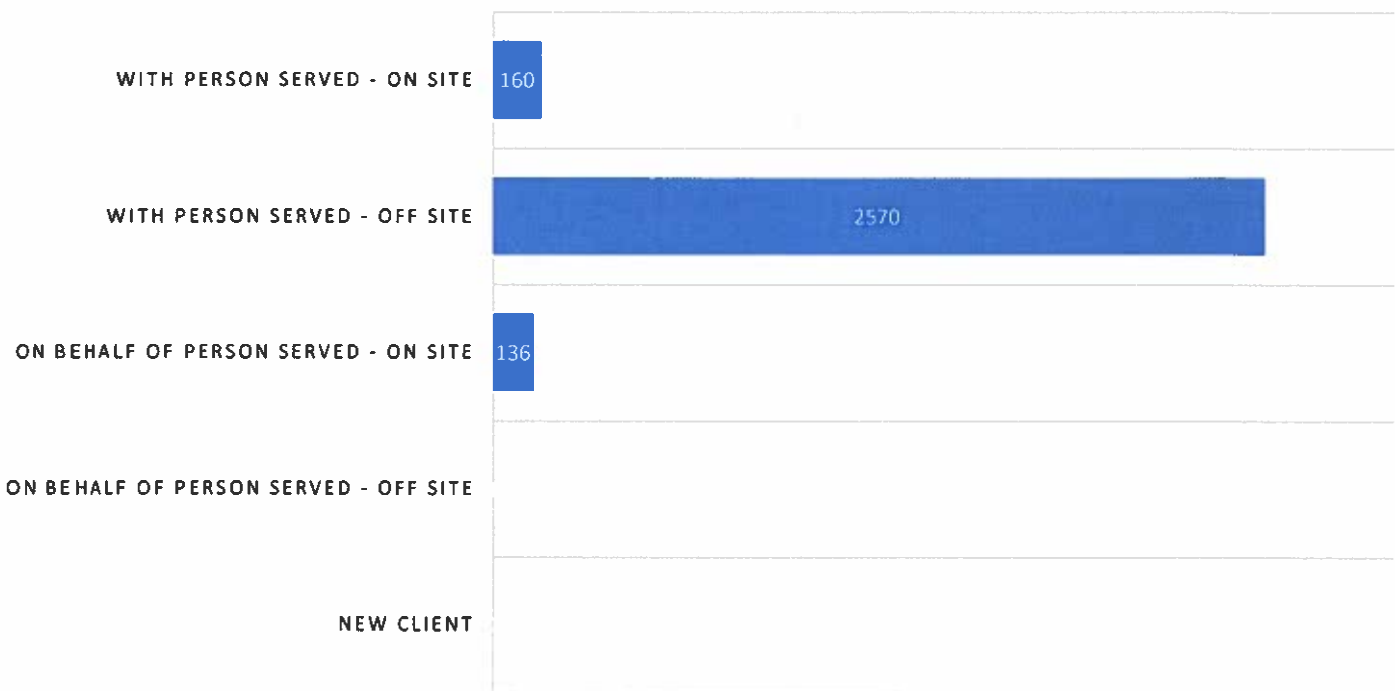
PY22 Q1

28 people were served for a total of 2,867.25 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



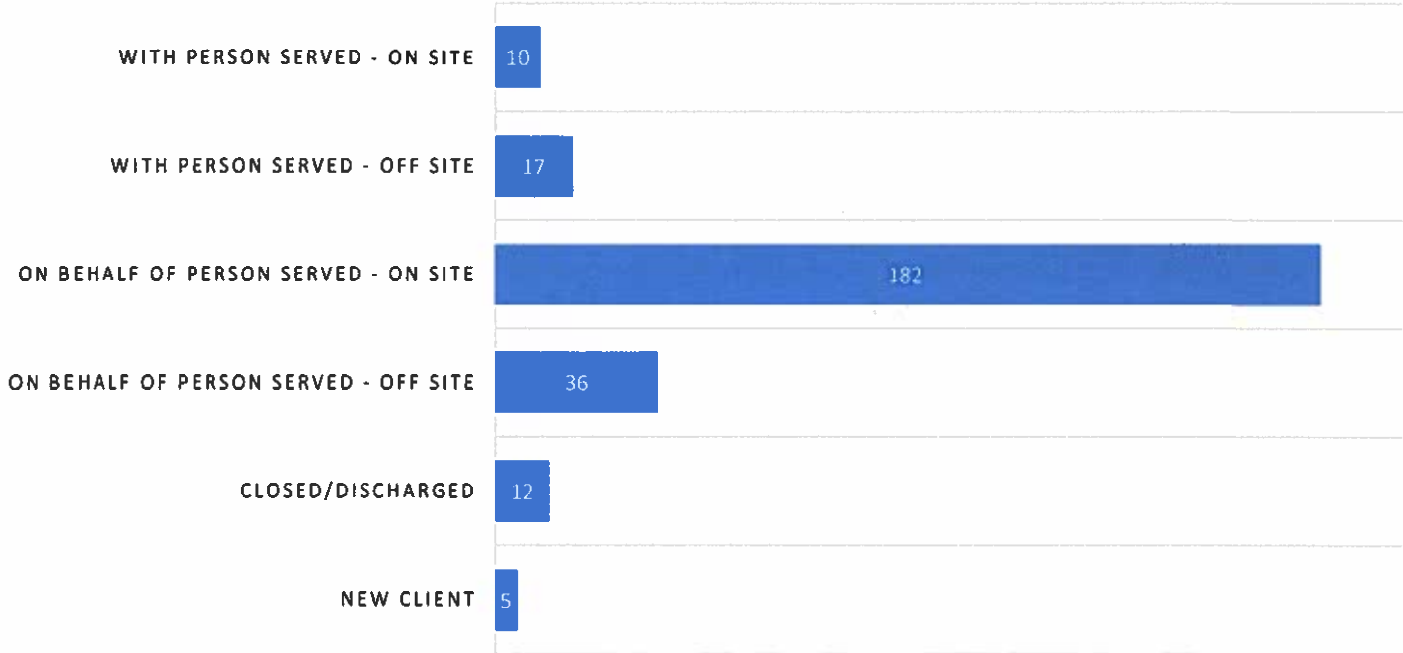
Developmental Services Center

Service Coordination \$108,964.50

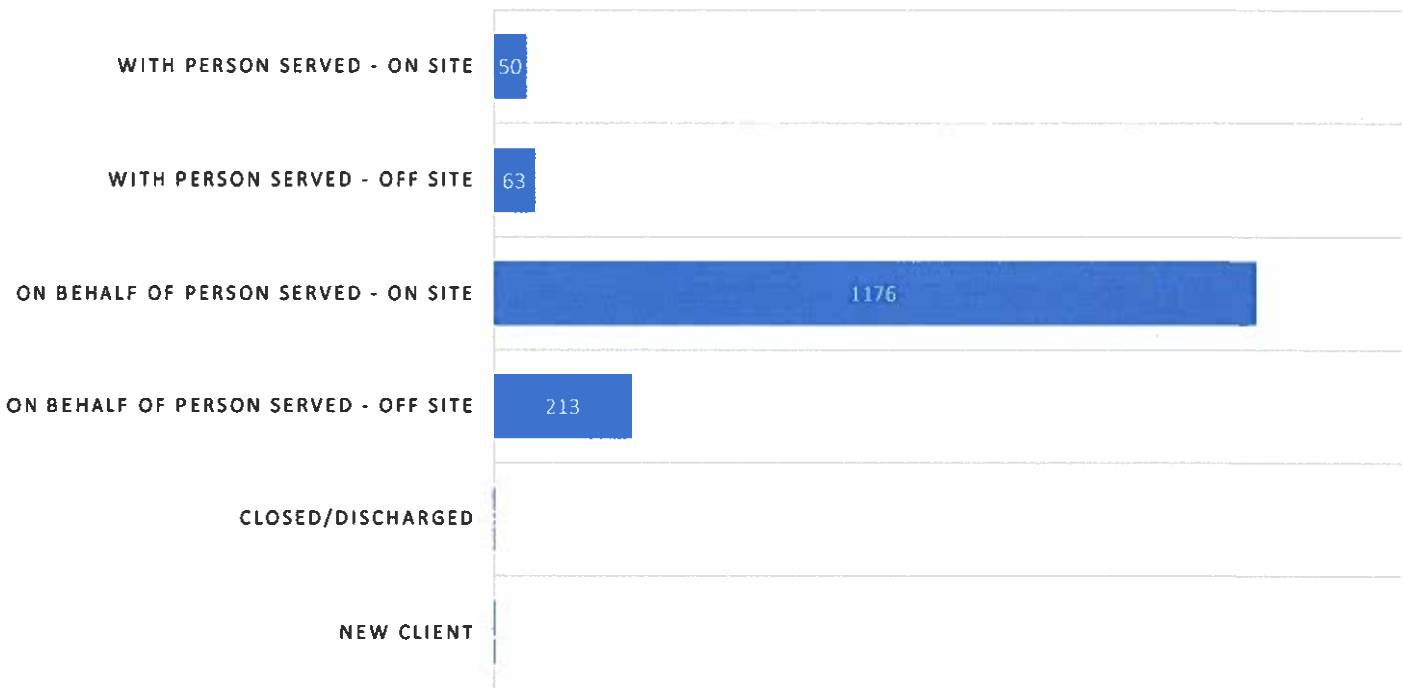
PY22 Q1

215 people were served, for a total of 1,509.25 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



76

Rosecrance Central Illinois

Coordination DD/MI \$8,787.50

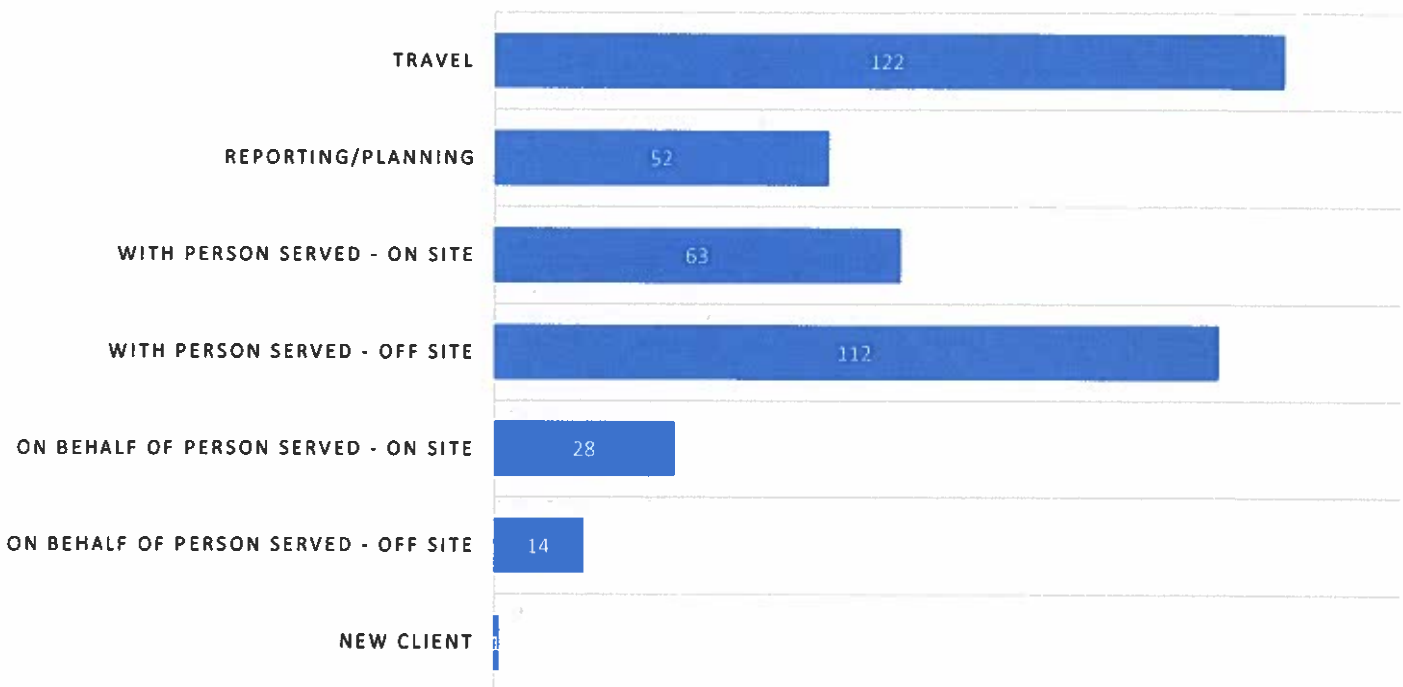
PY22 Q1

20 people were served, for a total of 391 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



(#12.E.)

From the Executive Director

Greetings Stakeholders!!

PATH Inc. has been providing information and referral, and crisis intervention phone services 24/7/365 for over fifty (50) years now. We are so proud to be celebrating our 50th anniversary this year. And we are also celebrating twelve (12) years of providing 3rd party 211 services. The success of 211 has been far-reaching and transformative and would be impossible without our UW partners, their generous funders, and related partners that have led to such an impact on the lives of so many in their community. PATH Inc. is currently serving over three (3) million Illinois citizens.

I am so excited to have taken the leadership role to help move PATH Inc. forward, and work with all of you to not only provide this valuable service, but to improve it. As part of our improvements, I hope you find the new look and feel of your quarterly reports more eye appealing and readable. Violet Pavlik, our new Manager of Database Services, replaced retiring Susan Williams in September. Violet has worked diligently to redesign your quarterly reports to make them more functional. Please reach out to Violet if you have any feedback on the new reports (vpavlik@pathcrisis.org).

Please contact me (cworkman@pathcrisis.org) if there is anything specific you would like to see me address in future quarterly letters. I have provided some general updates below that may be of interest to everyone.

Best Regards,



Chris Workman
Executive Director/CEO PATH Inc.



Updates From the Executive Director

- ▶ **UWW Opportunity** - Ride United Last Mile Delivery partnership between UWW and DoorDash is seeking grant applications. Using the same DoorDash technology that brings burritos, groceries, and pet toys to your home, Ride United's Last Mile Delivery delivers food pantry boxes, prepared meals, hygiene items, school supplies, and much more directly to neighbors' homes for free! UWW notes: "We are accepting applications on a rolling basis, but applications for priority funding should be received by October 27, 2021."
https://drive.google.com/file/d/1XRNDlDTgcB_sTor3YwgcJCRvVSvnMfdr/view
PATH Inc. 211 will work with any organization who receives a grant to make your project successful.
- ▶ **211 Holiday Listings** - PATH Inc. Is prepared to provide excellent holiday information and referral services to your communities. As you can imagine, managing Database Services is no easy feat. The 211 Resource Repository is never the same from one day to the next and requires significant manpower to curate. It's truly a living thing with constant movement rather than a typical database. So it is labor intensive and adding time sensitive requests, such as holiday programs, can be tricky. We ask that you follow this guideline when submitting holiday (and other time sensitive) requests - Try to submit ongoing holiday activities, rather than one (1) time events. For instance, the UW is hosting holiday food pantries through November and December vs. the UW is providing lunch to the homeless on xyz date. Certain exceptions can be made for annual/reoccurring holiday programs with specific dates, depending on service need and timely notice. Thank you for your cooperation.
- ▶ **988** - For those who don't know already, by an Act of Congress in 2020, 988 has been established as the new number to call for mental health and crisis intervention calls. The new number will be effective July 1, 2022. PATH Inc. staff have been on the State of Illinois advisory board and committees. It is still unknown on how Illinois plans to fully implement 988, however you should be aware that this change is anticipated to split our current 211 and crisis intervention model into separate models effective July of 2022. We hope to know more in January 2022 and we will provide you an update in the next quarterly letter.

Champaign County

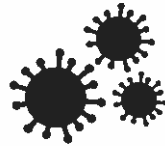
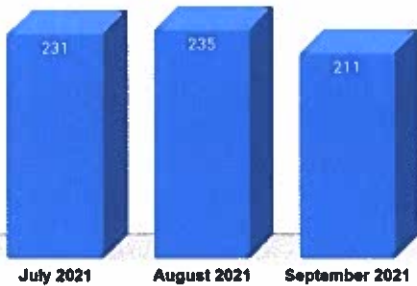


Overview

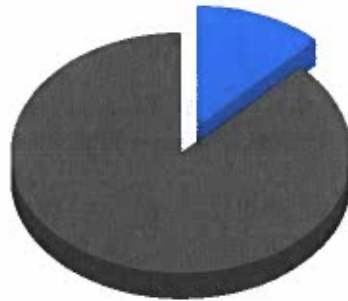
- ✓ Total Calls
- ✓ COVID-19
- ✓ Total Texts
- ✓ Time Stats
- ✓ Service Level
- ✓ Contact Needs
- ✓ Who's Calling
- ✓ Follow-Ups
- ✓ Referral Source
- ✓ PATH Page
- ✓ Links/Resources



211 Calls



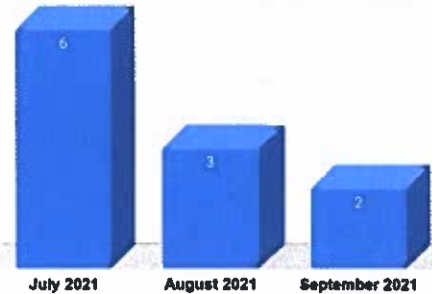
COVID-19 Contacts



• COVID-19 • Not COVID-19



211 Texts



677

Total Calls
Champaign County

83

Of Champaign
contacts were
related to
COVID-19

11

Total Texts
Champaign
County

United Way 211 Report

3rd Quarter

July 1st - September 30th 2021

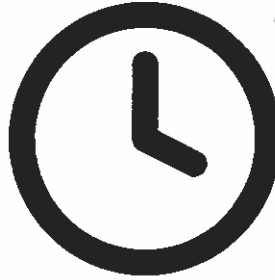
80

Time stats, Service Level

Average Handle Time

7:18

Untied Way 211 Calls

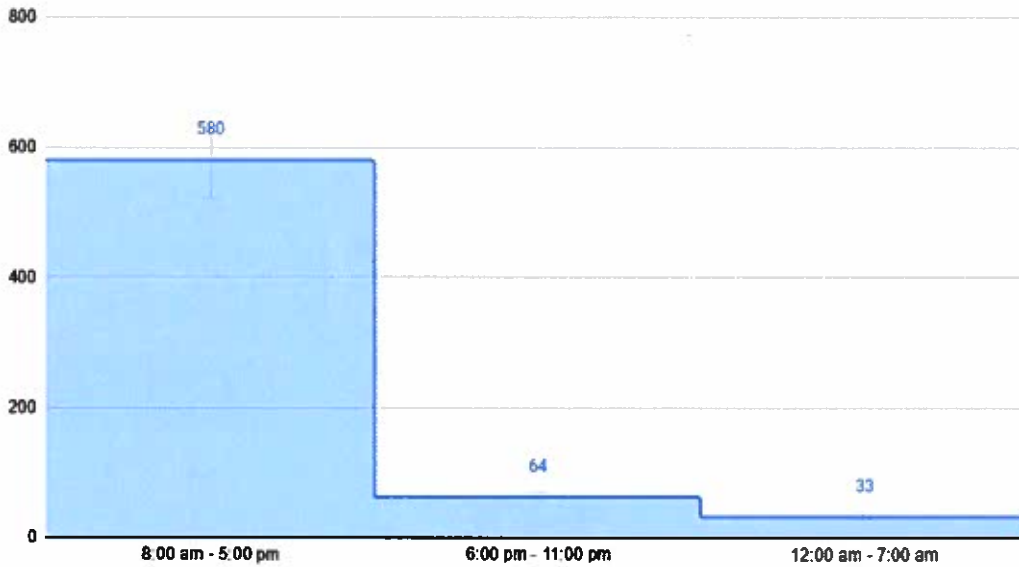


Average InQueue Time

48 Sec

Untied Way 211 Calls

Call Time



Note: Chart describes the distribution of calls received during 3 different time periods: business hours (8am-5pm), after hours (6pm-11pm), and early morning hours (12am-7am).

Service Level

✓ 80.13 % (United Way 211)

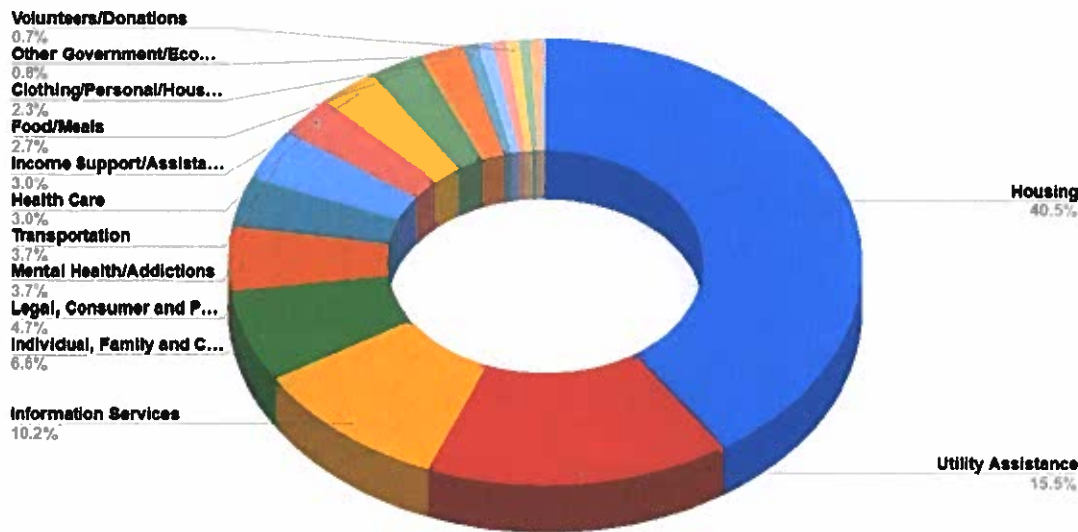


Service Level % = Percentage of calls answered within 90 seconds. Goal 80%

81

Contact Needs

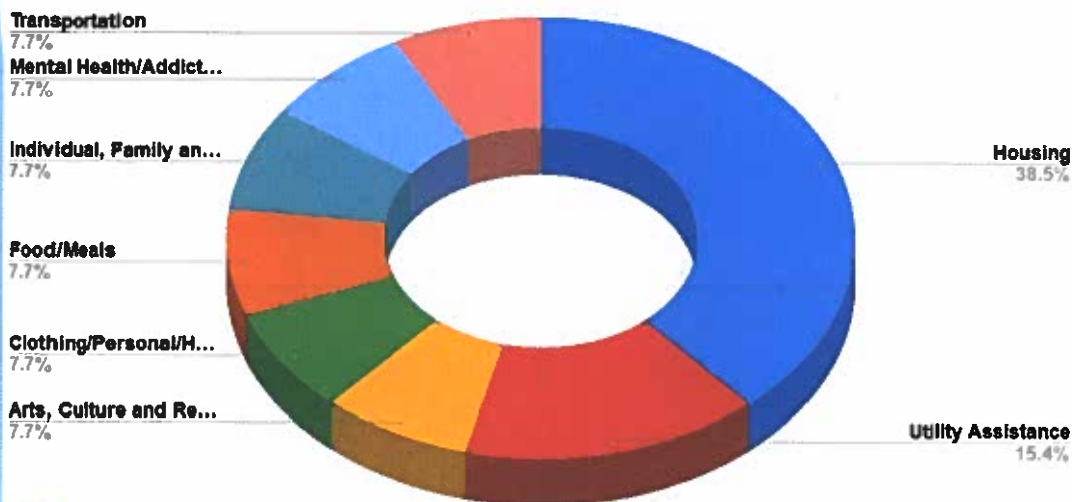
AIRS Problem Needs - Call



Note:

- AIRS - The Alliance of Information and Referral Systems. "AIRS is the driving force behind the delivery of quality I&R services and the sole source for standards, program accreditation and practitioner certification for the I&R sector." ([AIRS home page](#))
- AIRS Problem Needs - AIRS list of national categories for I&R problem/needs is a means to organize the incredibly wide range of inquiries handled by I&R services and to provide for the consistent and credible reporting of community needs across jurisdictions.

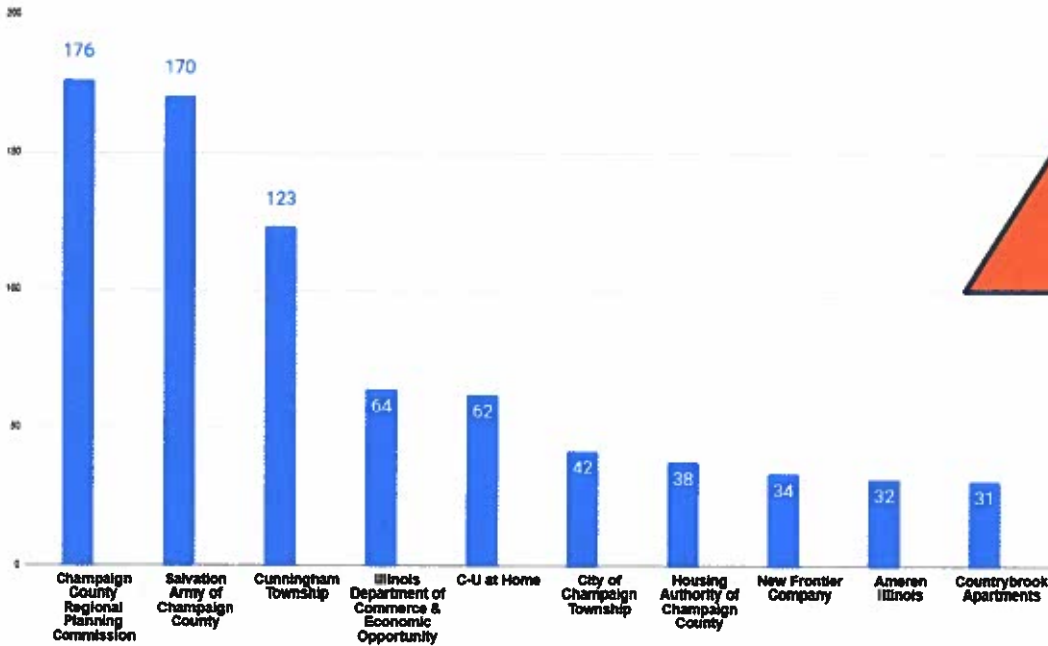
AIRS Problem Needs - Text



Note: Champaign County received 11 total 211 texts. This chart describes the percentage of AIRS Problem Needs recorded on the 211 text-line.

Contact Needs Cont.

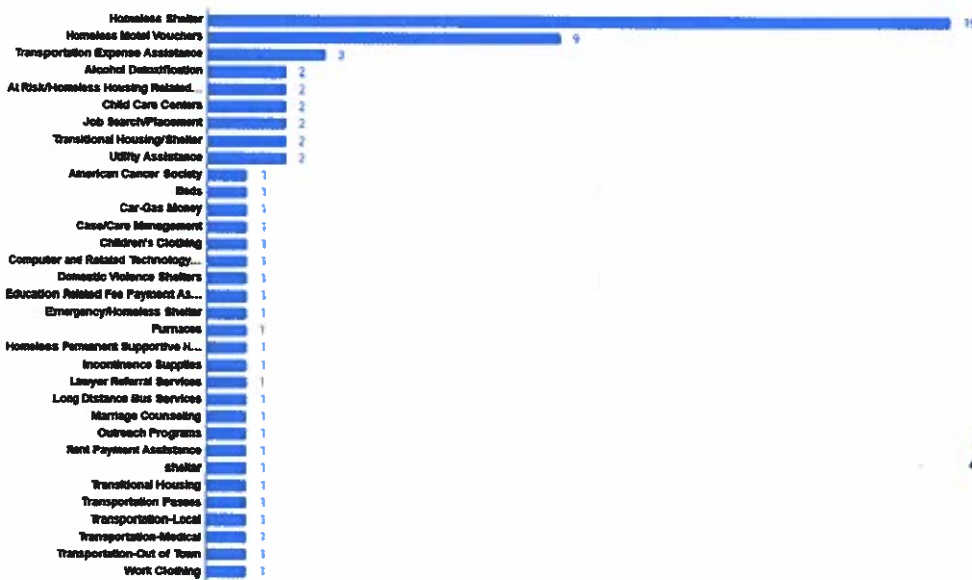
Top 10 Agency Referrals



1,753
Total agencies referred to

Note: 1,753 total agencies were referred to in Champaign County. This chart displays the top ten agencies referred to with exact referral numbers in data labels.

Unmet Needs

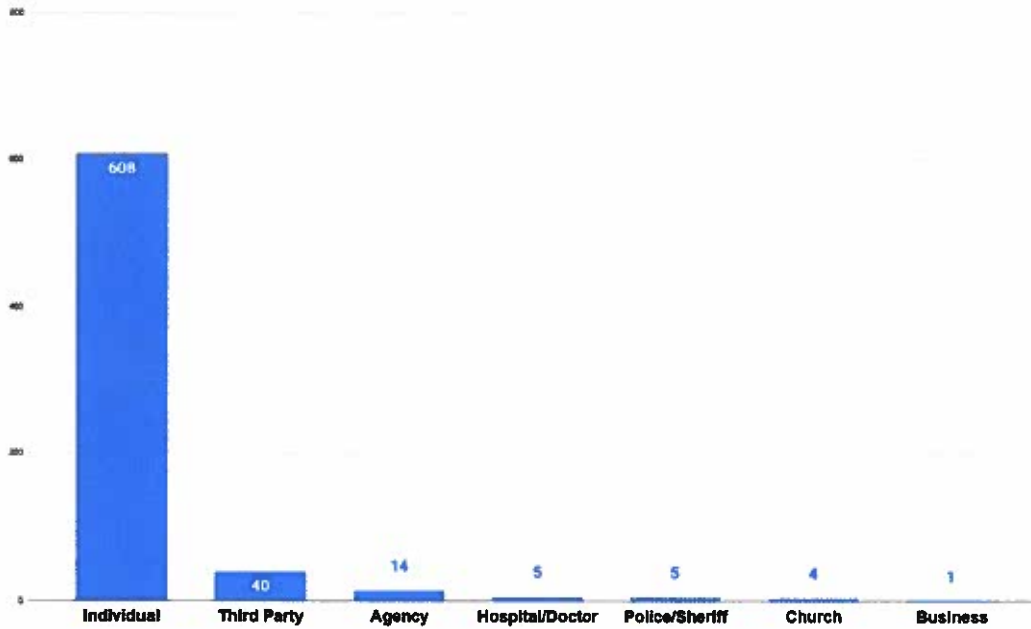


67
Total Unmet Needs

Note: 67 total unmet needs were recorded in Champaign County. The number one unmet need was *Homeless Shelter*.

Who's Calling

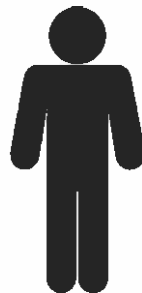
Contact Person Type



Note: Contact Person Type describes the 211 caller and their role in contacting I&R services.



71.6%
Female



27.8%
Male



5
Total Spanish 211
calls



79.0%
Adult
18-54

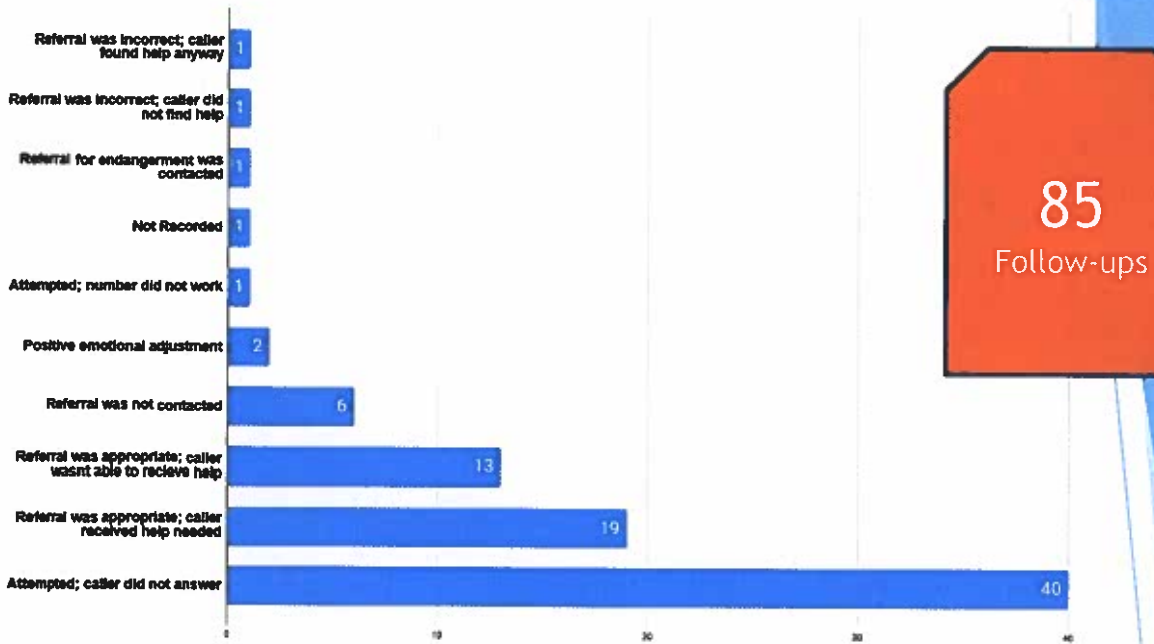


18.5%
Older Adult
55+

84

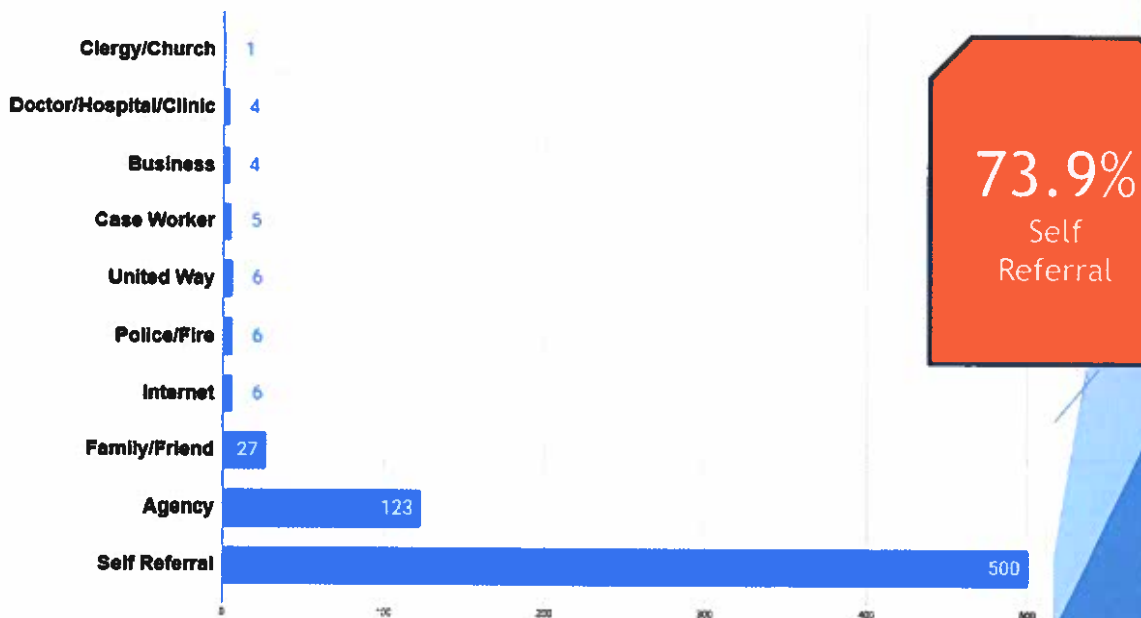
Follow-Ups, Referral Source

Follow-Ups



Note: 85 total follow-ups were performed. This chart describes the breakdown of each follow-up result.

Referral Source



Note: Referral source refers to what motivated the 211 contact to reach out to 211 services.

85



All Calls Answered by PATH Inc.

- ✓ 10,359 calls handled (United Way 211)
- ✓ 318 calls handled (Spanish 211)



All Text Messages Handled by PATH Inc.

- ✓ 73 texts
- ✓ Text your zip-code to 898-211 to get started!



Abandons

- 1,202 (United Way 211)
- 119 (Spanish 211)

Average Abandon Time

- 1 min:17 sec (United Way 211)
- 51 sec (Spanish 211)

% Abandons

- 10.39% (United Way 211)
- 27.23% (Spanish 211)

% Abandon Goal = 9%

PATH Page Cont.



Average Handle Time

- ✓ 7:18 (United Way 211)
- ✓ 5:37 (Spanish 211)

Average InQueue Time

- ✓ 48 sec (United Way 211)
- ✓ 46 sec (Spanish 211)

Service Level

- ✓ 80.13 % (United Way 211)
- ✓ 77.75 % (Spanish 211)



Service Level % = Percentage of calls answered within 90 seconds. Goal 80%

PATH Success Stories (3rd Quarter)

The following are real 211 callers and their stories. Certain details have been changed to preserve their anonymity.



The caller is having trouble paying bills lately. As a result, she does not have a lot of food at the moment. She said she has been living off oatmeal.

She was reluctant to try food pantries because she is picky and wants to leave food for others, but I convinced her to give them a try.

She was happy she had many options, and that there are a lot of pantries to feed many people.

She lives with her dog who she loves very much. He requires many meds and expensive food, but she loves him, so she uses a lot of her money on him.

She was very thankful for our help today.





Caller said that he just needed to talk to someone for a little while because he is really overwhelmed right now. He recently found out that he is HIV positive, and he has been really disappointed with how people have been reacting to him.

He said that some of his friends and family stopped talking to him after he received his diagnosis. It has been a really hurtful time for him. I reflected with him and said, "It must be really hard to go through that, and to be rejected at a time when you need friends and family the most."

He said, "That is exactly how I feel! It sort of feels like coming out all over again."

Caller said that he is getting treatment and would like to reach out to the support group resources I sent to him. He is looking forward to that, it is just a matter of getting through the next bit here.

He really appreciated chatting with me and said that he felt a lot better about his situation.

Links/Resources

PATH Inc. Website

- <https://www.pathcrisis.org/>

211 Counts

- <https://uwaypath.211counts.org/>

PATH Inc. Online Database

- <https://www.navigateresources.net/path/>

AIRS

- <https://www.airs.org/i4a/pages/index.cfm?pageid=1>

Raw Data

- https://docs.google.com/spreadsheets/d/1n0PlZ_bH4JDqTnzA4mRVYuhC8Bf7Bu0l-oITlijRxqnl/edit?usp=sharing

Submitted by:
Violet Pavlik

Database Manager
vpavlik@pathcrisis.org
309-834-0580



PATH, Inc. is aware of an odd 2-1-1 routing issue that is affecting multiple counties within our service area and beyond. 2-1-1 calls from US Cellular customers (we hope this is the only provider and that it is not affecting other major providers like Verizon, AT&T, etc.) are being routed to their local United Way office instead of the local 2-1-1 provider. We have heard reports of this same issue occurring in other states as well.

To correct this issue, PATH needs some very specific information to provide to the Network Operations team at US Cellular. If your United Way office receives a call from someone who dialed 2-1-1, please gather the following:

- Customer's 10-digit Number
- Customer's phone provider
- Date of Call
- Time of Call
- City call was placed from
- County call was placed from
- State call was placed from

While this issue is occurring, after gathering the above info, we recommend the following if callers continue to be routed to your agency: Apologize that this issue seems to be affecting multiple US Cellular customers nationwide.

Provide them with PATH's toll-free 2-1-1 line to reach us 24/7:

888-865-9903.

The network engineering team at US Cellular needs this specific information from callers experiencing the problem, and without it we are unable to resolve the issue. It is absolutely essential that if you are experiencing this issue in your county, you gather the above information and provide it to PATH's call center program manager at krichardson@pathcrisis.org. Unfortunately, just letting us know that this is happening is not enough information to resolve the issue. We have been able to resolve this relatively quickly (within a few days) in at least 1 county after providing US Cellular with the necessary information.

Kevin Richardson, CRS
Call Center Program Manager
PATH, Inc.

201 E. Grove St., Suite 200
Bloomington, IL 61701
Office: (309) 834-0541





#72.F.

CCDDB 2021-2022 Meeting Schedule

9:00AM Wednesday after the third Monday of each month

Brookens Administrative Building, 1776 East Washington Street, Urbana, IL

<https://us02web.zoom.us/j/81559124557> 312-626-6799, Meeting ID: 815 5912 4557

November 17 – CCDDB Office

November 17 at 5:45PM – joint study session with the CCMHB - Shields-Carter Room

December 15 – Shields-Carter Room

January 19, 2022 – Shields-Carter Room

February 23, 2022 – Shields-Carter Room

March 23, 2022 – Shields-Carter Room

April 20, 2022 – Shields-Carter Room

May 18, 2022 – Shields-Carter Room

June 22, 2022 – Shields-Carter Room

July 20, 2022 – Shields-Carter Room

August 17, 2022 – Shields-Carter Room

September 21, 2022 – Shields-Carter Room

October 19, 2022 – Shields-Carter Room

October 26, 5:45PM – Shields-Carter – study session with CCMHB

November 16, 2022 - Shields-Carter Room

December 21, 2022 – Shields-Carter Room

This schedule is subject to change due to unforeseen circumstances.

Please email stephanie@ccmhb.org to confirm meetings or to request alternative format documents, language access, or other accommodation needed to participate.

All meetings and study sessions include time for members of the public to address the Board.

Meetings are posted in advance and recorded and archived at

<http://www.co.champaign.il.us/mhbddb/DDBMeetingDocs.php>

Public Input: All are welcome to attend the Board's meetings, using the Zoom options or in person, in order to observe and to offer thoughts during the "Public Participation" period of the meeting. For support to participate in a meeting, let us know how we might help by emailing stephanie@ccmhb.org.

If the time of the meeting is not convenient, you may still communicate with the Board by emailing stephanie@ccmhb.org any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated but be aware that the time for each person's comments may be limited to five minutes.



CHAMPAIGN COUNTY
DEVELOPMENTAL
DISABILITIES BOARD
CHAMPAIGN COUNTY
MENTAL HEALTH BOARD

CCMHB 2021-2022 Meeting Schedule

5:45PM Wednesday after the third Monday of each month

Brookens Administrative Building, 1776 East Washington Street, Urbana, IL

<https://us02web.zoom.us/j/81393675682> 312-626-6799, Meeting ID: 813 9367 5682

October 27 –*study session* – CCMHB office

November 17 – *joint study session with the CCDDDB* - Shields-Carter Room

November 17 – Shields-Carter Room

December 15 – Shields-Carter Room

January 19, 2022 – Shields-Carter Room

January 26, 2022 – *study session* - Shields-Carter Room

February 16, 2022 – *study session* - Shields-Carter Room

February 23, 2022 – Shields-Carter Room

March 23, 2022 – Shields-Carter Room

March 30, 2022 – *study session* - Shields-Carter Room

April 20, 2022 – Shields-Carter Room

April 27, 2022 – *study session* - Shields-Carter Room

May 18, 2022 – *study session* - Shields-Carter Room

May 25, 2022 – Shields-Carter Room

June 22, 2022 – Shields-Carter Room

July 20, 2022 – Shields-Carter Room

September 21, 2022 – Shields-Carter Room

September 28, 2022 – *study session* - Shields-Carter Room

October 19, 2022 – Shields-Carter Room

October 26, 5:45PM –*study session with CCMHB* - Shields-Carter

November 16, 2022 – Shields-Carter Room (*off cycle*)

December 21, 2022 – Shields-Carter Room (*off cycle*) - *tentative*

This schedule is subject to change due to unforeseen circumstances.

Please email stephanie@ccmhb.org to confirm meetings or to request alternative format documents, language access, or other accommodation needed to participate.

Meetings are archived at <http://www.co.champaign.il.us/mhbddb/MHBMeetingDocs.php>

Public Input: All meetings and study sessions include time for members of the public to address the Board. All are welcome to attend meetings, using the Zoom options or in person, in order to observe and to offer thoughts during "Public Participation". For support to participate, let us know how we might help by emailing stephanie@ccmhb.org.

If the time of the meeting is not convenient, you may still communicate with the Board by emailing stephanie@ccmhb.org any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated but be aware that the time for each person's comments may be limited to five minutes.

**IMPORTANT DATES - DRAFT 2021-2022 Meeting Schedule with Subjects,
Agency and Staff Deadlines, and Allocation Timeline for PY2023**

This schedule offers dates and subject matter of meetings of the Champaign County Developmental Disabilities Board. Subjects are not exclusive to any given meeting, as other matters requiring Board review or action may be addressed. Study sessions may be added on topics raised at meetings or by staff, or with the CCMHB. Regular meetings are held at 9AM; joint study sessions at 5:45PM. Included are tentative dates for steps in the funding process for PY23 and deadlines related to PY21 and PY22 agency contracts.

- | | |
|----------|--|
| 10/20/21 | Regular Board Meeting
Release Draft Program Year 2023 Allocation Criteria |
| 10/29/21 | <i>Agency PY2022 1st Quarter Reports due</i> |
| 11/17/21 | Regular Board Meeting (mtg in staff office)
Review Funding Guidelines
Allocation Decision Support – PY23 Allocation Criteria |
| 11/17/21 | Joint Study Session with the CCMHB-5:45PM |
| 12/13/21 | <i>Public Notice of Funding Availability to be published on or before this date, giving at least 21-day notice of application period.</i> |
| 12/15/21 | Regular Board Meeting
Approve Three Year Plan with One Year Objectives
Allocation Decision Support – PY23 Allocation Criteria |
| 12/31/21 | <i>Agency Independent Audits, Reviews, or Compilations due</i> |
| 1/3/22 | <i>Online System opens for Agency Applications for PY2023 Funding</i> |
| 1/19/22 | Regular Board Meeting |
| 1/28/22 | <i>Agency PY2022 Second Quarter and CLC Progress Reports due.</i> |
| 1/31/22 | <i>Deadline for submission of updated agency eligibility questionnaires</i> |
| 2/11/22 | <i>Deadline for submission of applications for PY2023 funding.
Online System will not accept any forms after 4:30PM.</i> |
| 2/23/22 | Regular Board Meeting
List of Requests for PY2023 Funding |
| 3/23/22 | Regular Board Meeting |
| 4/13/22 | <i>Program summaries released to Board, copies posted online with the
CCDDB April 20, 2022 Board meeting agenda and packet.</i> |

4/20/22	Regular Board Meeting Board Review and Staff Summaries of Funding Requests
4/29/22	<i>Agency PY2022 Third Quarter Reports due</i>
5/11/22	<i>Allocation recommendations released to the Board, copies posted online with the CCDDDB May 18, 2022 Board meeting agenda and packet</i>
5/18/22	Regular Board Meeting Allocation Decisions; Authorize PY2023 Contracts
6/22/22	Regular Board Meeting: Draft FY2023 Budget
6/24/22	<i>Deadline for agency application/ contract revisions Deadline for agency letters of engagement with CPA firms PY2023 contracts completed</i>
6/30/22	<i>Agency Independent Audits, Reviews, or Compilations due (only for those with calendar fiscal year, check Special Provision)</i>
7/20/22	Regular Board Meeting: Election of Officers
8/17/22	Regular Board Meeting
8/26/22	<i>Agency PY2022 4th Q Reports, CLC Progress Reports, and Annual Performance Measure Reports due</i>
9/21/22	Regular Board Meeting Draft Three Year Plan 2022-2024 with 2023 Objectives
10/19/22	Regular Board Meeting Release Draft Program Year 2024 Allocation Criteria
10/26/22	Joint Study Session with CCMHB at 5:45PM
10/28/22	<i>Agency PY2023 First Quarter Reports due</i>
11/16/22	Regular Board Meeting (off cycle) Approve Three Year Plan and PY24 Allocation Criteria
12/11/22	<i>Public Notice of Funding Availability to be published on or before this date, giving at least 21-day notice of application period.</i>
12/21/22	Regular Board Meeting (off cycle)

#12.G

Agency and Program acronyms

- CC – Community Choices
- CCDDDB – Champaign County Developmental Disabilities Board
- CCHS – Champaign County Head Start, a program of the Regional Planning Commission
- CCMHB – Champaign County Mental Health Board
- CCRPC – Champaign County Regional Planning Commission
- DSC - Developmental Services Center
- DSN – Down Syndrome Network
- FDC – Family Development Center
- PACE – Persons Assuming Control of their Environment, Inc.
- RCI – Rosecrance Central Illinois
- RPC – Champaign County Regional Planning Commission
- UCP – United Cerebral Palsy

Glossary of Other Terms and Acronyms

211 – Similar to 411 or 911. Provides telephone access to information and referral services.

AAC – Augmentative and Alternative Communication

ABA – Applied Behavioral Analysis. An intensive behavioral intervention targeted to autistic children and youth and others with associated behaviors.

ABLE Act – Achieving a Better Life Experience Act. A tax advantage investment program which allows people with blindness or disabilities the option to save for disability related expenses without putting their federal means-tested benefits at risk.

ACA – Affordable Care Act

ACMHAI – Association of Community Mental Health Authorities of Illinois

ADA – Americans with Disabilities Act

ADD – Attention Deficit Disorder

ADHD – Attention Deficit/Hyperactivity Disorder

ADL – Activities of Daily Living

ASD – Autism Spectrum Disorder

ASL – American Sign Language

ASQ – Ages and Stages Questionnaire. Screening tool used to evaluate a child's developmental and social emotional growth.

ASQ-SE – Ages and Stages Questionnaire – Social Emotional screen.

BD – Behavior Disorder

BSP – Behavior Support Plan

CANS – Child and Adolescent Needs and Strengths. The CANS is a multi-purpose tool developed to support decision making, including level of care, service planning, and monitoring of outcomes of services.

CARF- Council on Accreditation of Rehabilitation Facilities

CC – Champaign County

CDS – Community Day Services, formerly “Developmental Training”

CFC – Child and Family Connections Agency

CFCM – Conflict Free Case Management

C-GAF – Children’s Global Assessment of Functioning

CILA – Community Integrated Living Arrangement

CLC – Cultural and Linguistic Competence

CMS – Center for Medicare and Medicaid Services, the federal agency administering these programs.

CNA – Certified Nursing Assistant

COTA – Certified Occupational Therapy Assistant

CP – Cerebral Palsy

CQL – Council on Quality and Leadership

CSEs - Community Service Events. A category of service measurement on the Part II Utilization form. Activity to be performed should also be described in the Part I Program Plan form-Utilization section. It relates to the number of public events (including mass media and articles), consultations with community groups and/or caregivers, classroom presentations, and small group workshops to promote a program or educate the community. Activity (meetings) directly related to planning such events may also be counted here. Actual direct service to clientele is counted elsewhere.

CUSR – Champaign Urbana Special Recreation, offered by the park districts.

CY – Contract Year, runs from July to following June. For example, CY18 is July 1, 2017 to June 30, 2018. May also be referred to as Program Year – PY. Most contracted agency Fiscal

Years are also from July 1 to June 30 and may be interpreted as such when referenced in a Program Summary e.g. FY18.

DCFS – (Illinois) Department of Children and Family Services.

DD – Developmental Disability

DDD – Division of Developmental Disabilities

DHFS – (Illinois) Department of Healthcare and Family Services. Previously known as IDPA (Illinois Department of Public Aid)

DHS – (Illinois) Department of Human Services

DOJ – (US) Department of Justice

DRS – (Illinois) Division of Rehabilitation Services

DSM – Diagnostic Statistical Manual.

DSP – Direct Support Professional

DT – Developmental Training, now “Community Day Services”

DT – Developmental Therapy, Developmental Therapist

Dx – Diagnosis

ED – Emotional Disorder

EI – Early Intervention

EPDS – Edinburgh Postnatal Depression Scale – Screening tool used to identify mothers with newborn children who may be at risk for prenatal depression.

EPSDT – Early Periodic Screening Diagnosis and Treatment. Intended to provide comprehensive and preventative health care services for children under age 21 who are enrolled in Medicaid.

ED – Emergency Department

ER – Emergency Room

FAPE – Free and Appropriate Public Education

FFS – Fee For Service. Type of contract that uses performance-based billings as the method of payment.

FOIA – Freedom of Information Act.

FQHC – Federally Qualified Health Center

FTE – Full Time Equivalent is the aggregated number of employees supported by the program. Can include employees providing direct services (Direct FTE) to clients and indirect employees such as supervisors or management (Indirect FTE).

FY – Fiscal Year, which for the County is January 1 through December 31.

GAF – Global Assessment of Functioning. A subjective rating scale used by clinicians to rate a client's level of social, occupational and psychological functioning. The scale included in the DSM-IV has been replaced in the DSM-V by another instrument.

HBS – Home Based Services, also referred to as HBSS or HBSP

HCBS – Home and Community Based Services

HI – Hearing Impairment or Health Impairment

Hx – History

ICAP – Inventory for Client and Agency Planning

ICDD – Illinois Council for Developmental Disabilities

ICFDD – Intermediate Care Facility for the Developmentally Disabled

ID – Intellectual Disability

IDEA – Individuals with Disabilities Education Act

IDOC – Illinois Department of Corrections

IDPH – Illinois Department of Public Health

IDT – Interdisciplinary Team

IEP – Individualized Education Plan

IFSP – Individualized Family Service Plan

IPLAN - Illinois Project for Local Assessment of Needs. The Illinois Project for Local Assessment of Needs (IPLAN) is a community health assessment and planning process that is conducted every five years by local health jurisdictions in Illinois. Based on the *Assessment Protocol for Excellence in Public Health (APEX-PH)* model, IPLAN is grounded in the core functions of public health and addresses public health practice standards. The completion of IPLAN fulfills most of the requirements for Local Health Department certification under

Illinois Administrative Code Section 600.400: Certified Local Health Department Code Public Health Practice Standards. The essential elements of IPLAN are:

1. an organizational capacity assessment;
2. a community health needs assessment; and
3. a community health plan, focusing on a minimum of three priority health problems.

I&R – Information and Referral

ISBE – Illinois State Board of Education

ISC – Independent Service Coordination

ISP – Individual Service Plan, Individual Success Plan

ISSA – Independent Service & Support Advocacy

LCPC – Licensed Clinical Professional Counselor

LCSW – Licensed Clinical Social Worker

LD – Learning Disability

LGTBQ – Lesbian, Gay, Bi-Sexual, Transgender, Queer

LPC – Licensed Professional Counselor

LPN – Licensed Practical Nurse

MCO – Managed Care Organization

MDC – Multidisciplinary Conference

MDT – Multidisciplinary Team

MH – Mental Health

MHP - Mental Health Professional, a bachelors level staff providing services under the supervision of a QMHP.

MI – Mental Illness

MIDD – A dual diagnosis of Mental Illness and Developmental Disability.

MSW – Master of Social Work

NCI – National Core Indicators

NOS – Not Otherwise Specified

NTPC -- NON - Treatment Plan Clients. Persons engaged in a given quarter with case records but no treatment plan. May include: recipients of material assistance, non-responsive outreach cases, cases closed before a plan was written because the client did not want further service beyond first few contacts, or cases assessed for another agency. It is a category of service measurement, providing an actual number of those served in the prior program year and a projection for the coming program year on the Part II utilization form. The actual activity to be performed should also be described in the Part I Program Form, Utilization section. Similar to TPCs, they may be divided into two groups: New TPCS - first contact within any quarter of the plan year; Continuing NTPCs - those served before the first day of July and actively receiving services within the first quarter of the new program year. The first quarter of the program year is the only quarter in which Continuing NTPCs are reported.

OMA - Open Meetings Act.

OT - Occupational Therapy, Occupational Therapist

OTR - Registered Occupational Therapist

PAS - Pre-Admission Screening

PASS - Plan for Achieving Self Support (Social Security Administration)

PCI - Parent Child Interaction groups.

PCP - Person Centered Planning, Primary Care Physician

PDD - Pervasive Developmental Disorders

PLAY - Play and Language for Autistic Youngsters. PLAY is an early intervention approach that teaches parents ways to interact with their child who has autism that promotes developmental progress.

PRN - when necessary, as needed (i.e., medication)

PSH - Permanent Supportive Housing

PT - Physical Therapy, Physical Therapist

PTSD - Post-Traumatic Stress Disorder

PUNS - Prioritization of Urgency of Need for Services. PUNS is a database implemented by the Illinois Department of Human Services to assist with planning and prioritization of services for individuals with disabilities based on level of need. An individual's classification of need may be emergency, critical, or planning.

PY – Program Year, runs from July to following June. For example, PY18 is July 1, 2017 to June 30, 2018. May also be referred to as Contract Year (CY) and is often the Agency Fiscal Year (FY).

QIDP – Qualified Intellectual Disabilities Professional

QMHP – Qualified Mental Health Professional, a Master’s level clinician with field experience who has been licensed.

RCCSEC – Rural Champaign County Special Education Cooperative

RD – Registered Dietician

RN – Registered Nurse

RT – Recreational Therapy, Recreational Therapist

SAMHSA – Substance Abuse and Mental Health Services Administration, a division of the federal Department of Health and Human Services

SASS – Screening Assessment and Support Services is a state program that provides crisis intervention for children and youth on Medicaid or uninsured.

SCs - Service Contacts/Screening Contacts. The number of phone and face-to-face contacts with eligible persons who may or may not have open cases in the program. Can include information and referral contacts or initial screenings/assessments or crisis services. May sometimes be referred to as a service encounter (SE). It is a category of service measurement providing a picture of the volume of activity in the prior program year and a projection for the coming program year on the Part II form, and the activity to be performed should be described in the Part I Program Plan form-Utilization section.

SEDS – Social Emotional Development Specialist

SEL – Social Emotional Learning

SF – Service Facilitation, now called “Self-Direction Assistance”

SH – Supportive Housing

SIB – Self-Injurious Behavior

SIB-R – Scales of Independent Behavior-Revised

SLI – Speech/Language Impairment

SLP – Speech Language Pathologist

SPD – Sensory Processing Disorder

SSA – Social Security Administration

SSDI – Social Security Disability Insurance

SSI – Supplemental Security Income

SST – Support Services Team

SUD – Substance Use Disorder

SW – Social Worker

TIC – Trauma Informed Care

TPC – Transition Planning Committee

TPCs - Treatment Plan Clients - service recipients with case records and treatment plans. It is a category of service measurement providing an actual number of those served in the prior program year and a projection for the coming program year on the Part II Utilization form, and the actual activity to be performed should also be described in the Part I Program Plan form -Utilization section. Treatment Plan Clients may be divided into two groups: Continuing TPCs are those with treatment plans written prior to the first day of July and actively receiving services within the first quarter of the new program year (the first quarter of the program year is the only quarter in which this data is reported); New NTPCs are those newly served, with treatment plans, in any quarter of the program year.

VI – Visual Impairment

VR – Vocational Rehabilitation

WHODAS – World Health Organization Disability Assessment Schedule. It is a generic assessment instrument for health and disability and can be used across all diseases, including mental and addictive disorders. The instrument covers 6 domains: Cognition, Mobility; Self-care; Getting along; Life activities; and Participation. Replaces the Global Assessment of Functioning in the DSM-V.

WIOA – Workforce Innovation and Opportunity Act

#14

Kim Bowdry, Associate Director for Intellectual & Developmental Disabilities Staff Report – November 2021

CCDDB: PY2022 1st Quarter Program Reports and Service Data Reports for CCDDB and CCMHB I/DD funded programs are in the Board packet. I am reviewing and documenting the information provided in the reports.

I spent time trouble shooting the Online System with agency staff and the system developer.

CU Able submitted their PY21 4th Quarter Program Report, 4th Quarter Zip Code report, and 4th Quarter Demographic Report on October 28, 2021. I am reviewing and documenting these reports.

There is no update from the Champaign County Down Syndrome Network on their PY20 audit.

The following agencies/programs requested extensions for their PY22 1st Quarter reports: CCRPC Head Start/Early Head Start and DSC Family Development. PACE was also granted an extension due to confusion with their claims reporting, related to the change from the PY21 Fee for Service contract to the PY22 grant contract.

I participated in the DSC Financial Site Visit.

CCDDB Mini-Grant: I communicated with one Mini-Grant recipient's father regarding a respite weekend at Camp New Hope, speech therapy services from the UIUC Audiology & Speech-Language Pathology Clinics, and Evergreen Coaching and Counseling. I also communicated with staff from Camp New Hope arrange for payment for these respite weekends.

Learning Opportunities: Elise Belknap presented, "Boundary Work for Helping Professionals" on October 28, 2021. This event was virtual. After the presentation, attendees shared the following comments:

- "I like how Elise presents materials - with plenty of time for processing, comments, and activities to keep the audience engaged."
- "Elise did a great job of discussing how our individual personal experiences impact our work or are impacted by our work."
- "I enjoyed being able to interact with others and hear others' opinions and thoughts."
- "I enjoyed the resources and being able to participate."
- "The conversational nature in Elise's style"

Tamela Milan-Alexander will present on November 18, 2021, to present, "The Importance of Connection and Support." Ms. Milan-Alexander first presented in December 2019. Register to

attend at <https://www.eventbrite.com/e/the-importance-of-connection-and-support-tickets-196118665207>.

Each session offers Social Work CEUs, approved by the University of Illinois School of Social Work. I prepare the required documents to send to the School of Social Work for approval. QIDP CEUs are provided for each session, as well. After the presentations are over, I create QIDP CEU Certificates and Certificates of Attendance, and email them to attendees along with any relevant workshop materials. I also send the sign-in sheet to UIUC School of Social Work for Social Work CEUs for certification.

I continue to explore presenters for 2022 and have been coordinating with past workshop attendees to determine future training topics.

MHDDAC: I participated in the October meeting of the MHDDAC. The Illinois Department of Healthcare and Family Services Bureau Chief, Behavioral Health, Kristine Herman presented the Illinois Pathways to Success program. The program aims to enhance the behavioral health service system for children.

ACMHAI: I participated in the November meeting of the ACMHAI I/DD Committee. Ed McManus, McManus Consulting and Kathy Carmody, CEO, Institute on Public Policy for People with Disabilities were guest speakers and shared information about a DD survey and the DSP workforce crisis in Illinois. I also participated in a planning meeting with Jodi Dart, ACMHAI Coordinator, Lynn Canfield, and Kathy Carmody.

NACBHDD: I participated in the November I/DD committee call.

Disability Resource Expo: The next Expo Steering Committee Meeting is December 1, 2021. I participated in a meeting about the Expo subcommittee. It was determined that organizations outside of Champaign County will need to share how they serve people with I/DD. A Google search will ensure the legitimacy of the organization, and we will not charge a fee so the website can remain as inclusive as possible.

UIUC School of Social Work Community Learning Lab: All the students are wrapping up their projects for the semester. The Expo website will have with several new agency videos, produced by student groups. Another student translated the 2021 Community Needs Assessment Report to Spanish.

Other activities: I participated in several webinars and Facebook lunchtime chats.

I attended the Illinois Department of Human Services Division of Developmental Disabilities DD Advisory Committee meeting.

I participated in multiple meetings with UIUC Community Data Clinic and other partners involved in the Champaign County Resource Directory project.

I participated in the meeting with Regina Stevenson and other CCMHB team members related to the CCMHB Financial Coaching Pilot Project.

I attended the November Human Services Council meeting. Epilepsy Foundation of Greater Chicago provided a presentation from a panel of people living with epilepsy. These experts shared their stories about living with epilepsy.

I participated in the Champaign County LIC meeting. I also participated in the Race Relations Subcommittee Meeting and joined another subcommittee of this group and have met with it.

Leon Bryson, Associate Director for Mental Health & Substance Use Disorders

Staff Report-November 2021

Summary of Activity

CCMHB Three Year Plan with Draft PY22 Objectives. An email was sent out to stakeholders and service providers for suggestions on the draft of Three-Year Plan with FY 2022 Objectives and Allocation Decision Support – PY23. Only one comment was received from a provider, addressing Goal #1 Objective #5. The CCMHB staff will continue to work on the draft for a final document to be presented to the Board in December.

CCMHB PY22 First Quarter Reports: Program Year 2022 1st Quarter reports were due on October 29, 2021. All reports are currently under review for corrections or clarifications. Five agencies requested and were granted extensions for their 1st Quarter reports.

CCMHB staff met with the WIN Recovery agency to confirm PY22 1st Quarter revenue and expense forms are correctly submitted.

CCMHB Contract Amendments:

On October 15, 2021, Lynn and I received an email from the Executive Director of Rattle the Stars who decided to terminate their contract with the CCMHB effective September 30, 2021, due to not being able to meet all their service deliverables. A contract amendment was drafted for the Suicide Prevention program.

Financial Site Visits:

I attended a financial site visit led by Chris Wilson our Financial Manager and CCMHB/CCDDB staff for Developmental Services Center (DSC). The financial site visit is designed to assist the agency with CCMHB/CCDDB funding compliance. Each agency is given a site checklist in advance of the site visit to ensure no auditory surprises. There were no major issues with DSC and their financial site visit at this time.

Financial Management Coaching Pilot Program: The Board approved CCMHB staff to negotiate contracts with independent financial consultants to begin coaching selected agencies on best bookkeeping and internal controls practices. The immediate goals of the pilot are to improve the agencies' financial accountability, assist with accurate quarterly reports and on-time audits/reviews with the ultimate goals of being self-sufficient with bookkeeping and accounting practices. The program began on November 1st. The Terrapin Station Sober Living and The UP Center of Champaign County both agreed to participate in the six-month pilot program. CCMHB/CCDDB staff had preliminary meetings with two independent consultants who will be providing support to the above agencies.

Criminal Justice-Mental Health:

Youth Assessment Center (YAC) Advisory Committee Meeting: YAC hired a new Case Manager and has an additional Case Manager position to fill. Case Managers are sharing office space at Urbana High School/Unit 4 School District (Centennial and Central) and are available 1-2 times a week to complete on-site intakes for YAC referrals. YAC is re-establishing memorandum of understandings (MOUs) with Youth & Family Peer Support, Rosecrance, and Hope Springs. The program has a tentative start date for their Reflections Group on November 15th (Covid precautions in place).

The Champaign County Drug Court celebrated four graduates from the program in a virtual ceremony. Each of the graduates were recognized for their hard work and gave a short speech. Judge Rosenbaum was the master of ceremonies for the occasion.

The Crisis Intervention Team Steering Committee was pushed back to January and Reentry Council meeting was cancelled for November and will reconvene in December.

CCMHDDAC Meeting:

HFS Director Kristine Herman presented on the State's efforts to enhance the behavioral health service system for children. The Pathway to Success program is for children with complex behavioral health challenges that provides access to home and community-based services that is schedule to launch in March 2022. The CCMHDDAC members also heard a presentation from GROW and their work with the Evaluation Capacity Building team.

Other Activities:

Monthly meetings I attended: Child/Adolescent LAN, ACMHAI Legislative Committee, Rantoul Service Providers.

Lynn and I met with CU at Home Executive Director to discuss funding options and Low-Barrier Shelter update. CU at Home will continue with their services. Their plan is to ramp up services for the winter and address the needs of the homeless population who are not ready to make healthy lifestyle changes through a Second-Tier program.

I participated several meetings with UIUC Community Data Clinic and the County Resource Directory project.

Learning Opportunities:

I participated several webinars: NACO's Growing County Economies with Stronger Child Care Systems, SAMHSA's GAINS Center's on Tribal Courts are Problem-Solving Courts: The Healing to Wellness Model, NACO: Reducing Jail Populations through State and Local Policy Coordination, CSBS – U of I School of Social Work Poverty Seminar Series--"Policy Measures to Increase Child Care Stability for Low-Income Families: Equity Impacts of Child Care Development Block Grant (CCDBG) Reform."

I am working with U of I School of Social Work students who are conducting research on DSP workforce shortages.

Stephanie Howard-Gallo

Operations and Compliance Coordinator Staff Report – November 2021 Board Meeting

SUMMARY OF ACTIVITY:

Audits:

An audit from Promise Healthcare was approved by their Board at the end of October and is being reviewed by staff and Consultant John Brusveen. Payments were released and their contracts were reinstated, per the Board's decision at the October Board meeting.

Fourth Quarter Reporting—due August 27, 2021:

Urbana Neighborhood Connections (UNCC, CCMHB funded) did not request an extension and missed the deadline. They submitted some, but not all of the reports on October 5th. Payments to them have been suspended until we receive their reports.

First Quarter Reporting:

First Quarter reports were due October 29, 2021. I sent out a reminder at the beginning of October to all the agencies of the due date. Several of the agencies requested an extension to their deadline, which was approved by staff.

On October 21, 2021, staff members Lynn Canfield, Leon Bryson and I were invited by Chris Wilson to attend a meeting with WIN Recovery (CCMHB funded) to review how to do their first quarter reports to us.

Urbana Neighborhood Connections (UNCC, CCMHB funded) did not request an extension and missed the deadline.

Other Compliance:

I made contact with seven agencies regarding various contract compliance issues which included receiving their Board minutes and eligibility requirements. No suspension letters were sent regarding these issues.

Community Awareness/Anti-Stigma Efforts/Alliance for Inclusion and Respect (AIR):

I continue to look for opportunities for our artists. These times are challenging.

FOIA/OMA Certification:

The Public Access Counselor's web page is **still** being repaired, therefore the Open Meetings Act electronic training, as well as the Freedom of Information Act electronic training, are inaccessible. There is no set completion date for the website repairs at this time.

Other:

- Preparing meeting materials for CCMHB/CCDDB regular meetings, special meetings, and study sessions/presentations.
- Composing minutes from the meetings.
- Attending meetings and study sessions for the CCDDB/CCMHB.

2021 November 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

Agency Support and Technical Assistance:

First Followers

Family Service Center- Tech Support on Self-Care Conference

Urbana Neighborhood Connection Center- CLC Plan Support

MHACDDB- I attended the meeting in October to remind funded agencies about CLC Quarterly Reporting

Developmental Services Center: Reminder about CLC Quarterly Requirements.

Cultural Competence Training/Support

PACE: I attended the Staff Training October 27, 2021. This was an opportunity to introduce the National CLAS Standards and review DDB CLC Requirements.

Family Service Center of Champaign County: I served as a presenter at the Self-Help Workshop on Friday November 5, 2021. I presented a workshop on "Celebrating Wins at the Workplace" Here is an outline of the content that was presented.

1. Brief History of Celebrations
 - Celebrations in the US
 - Why Celebrations Matter Culturally
 - Definition of Culture
2. Celebrating wins at Work Boosts Employee Moral and Retention
 - a. Why celebrations at work matter
 - b. Research about employee recognition
 - c. Ways to build Employee Retention and Moral
3. When Should We Celebrate?
 - Conclusion of a Project
 - Accomplishment
 - Just Because
4. Creative Ways to Celebrate Wins within your Workspace
 - Cost Effective Ways
 - Ideas on how to Celebrate at Work
5. Your Turn- Talk about Ways you Celebrate Outside of Work
 - We talk about celebrations, there are some people that choose not to have celebrations or customs at work.
 - How do you celebrate who you are culturally?

2021 November Staff Report- Shandra Summerville Cultural and Linguistic Competence Coordinator

Champaign County Head Start: In September of 2020 Champaign County Head Start participated in a yearlong CLC Organizational Process. At the study session we will go into detail about the process. I wanted to provide you with an update on the outcomes and the changes that were made within the organization because of this process.

1. We provided space for crucial conversations by establishing psychological safety.
2. The management team completed book study of **White Fragility: Why It's So Hard For White People to Talk About Race.**
3. We conducted several management professional development days around equity in leadership. We attended the following sessions:
 - Diversity, Inclusion, Equality and Equity: What's the difference?
 - Positive Work Environments: Leaning into Equity
 - Supporting Cultural Authenticity in the Early Childhood Classroom
4. We made a conscious effort to listen to staff concerns to make decisions based on individual needs instead of past practices/policies.
5. We reviewed our educational materials and discussed if we were unintentionally promoting stereotypes in the classrooms and how we can meet grant requirements without culturally incompetence.
6. We reviewed policies and procedures for non-bias and equity.
7. We discussed and reflected on the roots of why Head Start exists and how we can go back to the foundational mission and vision to provide better services.
8. We've done work to flush out, reflect on, and change our own implicit biases.
9. We worked on understanding adaptive versus technical problems and solutions.
10. We delved into other areas of cultural competency such as gender bias, disabilities bias, and ageism.

CLC Coordinator Direct Service Activities

Webinar and Training Activities:

October 21st – Global Peer Support Network Day- I sent this toolkit to organizations Peer Support Programs that are funded by CCMHB/DDB. Here is the link to the Toolkit.

<https://files.ctctusercontent.com/770e9cab001/1d34b2cd-9db0-45f6-896e-d53c640cf369.pdf?rdr=true>

Anti-Stigma Activities/Community Collaborations and Partnerships

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C-HEARTS African American Storytelling Project:

The ASPIRE Program received funding from the University of Illinois Call to Action to Address Racism & Social Injustice Research Program. The ASPIRE program is a youth-centered intervention that is co-created between trusted adult facilitators and middle school youth that facilitates psychological health. This team meets bi-weekly to review data collected and develop the implementation for the spring semester.

Community Research Cooperative - ADVISORY BOARD

This is a partnership with the Community Data Clinic. This is a project that is funded by the University of Illinois, Urbana-Champaign, for Community Media, Data and Technology (CMDT) fellowships to provide annual funding and technical support to community organizations in Champaign County looking to advance promising ideas to change local communities and systems. I served as a reviewer for the CMDT Fellowship Program. There were 12 applications, and 4 applications were accepted for the CMDT Fellowship. I will assist with mentoring the community based organizations.

DisAbility Resource Expo-

The vetting committee met to come up with ways to vet resources outside of Champaign County or that had not previously served as an exhibitor. The committee chair reached out and stated that we will simplify the process and will not longer meet. The Steering committee will continue to learn about organizations that are available to serve people that are living with DD/IDD.

ACHMAHI

I attended the Monthly Training webinar on November 2, 2021 for the ACMHAI - Addressing the Mental Health Care Crisis in Rural IL

- What is it?
- Why does it matter?
- What can we do about it?

Short Reading List to continue the conversation about Racism and Trauma as a decision maker.

MENTAL HEALTH: Culture, Race, and Ethnicity

A SUPPLEMENT TO MENTAL HEALTH: A REPORT OF THE SURGEON GENERAL

<https://drum.lib.umd.edu/bitstream/handle/1903/22834/sma-01-3613.pdf?sequence=1&isAllowed=y>

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National CLAS Standards Fact Sheet

<https://thinkculturalhealth.hhs.gov/pdfs/NationalCLASStandardsFactSheet.pdf>

Racial Bias in Health Care Artificial Intelligence

https://nihcm.org/publications/artificial-intelligences-racial-bias-in-health-care?utm_source=NIHCM+Foundation&utm_campaign=25937ad5d7-Disability+Infographic+093021&utm_medium=email&utm_term=0_6f88de9846-25937ad5d7-167751988

Congress mulls ending federal program that OKs sub-minimum wages for workers with disabilities

<https://youthtoday.org/2021/09/congress-mulls-ending-federal-program-that-oks-sub-minimum-wages-for-workers-with-disabilities/>

Champaign County Welcoming Plan

<https://universityymca.org/wp-content/uploads/2021/09/CCWP.pdf>

Black Women's Health Imperative CEO Linda Goler Blount on health equity and reproductive justice

https://www.upworthy.com/linda-golder-blount-health-equity?fbclid=IwAR1dDh96jVt1TtQ1wewQ_XCzsmHHWvmyVQumF0ioBoWsXvs_xFspbMQ8iWk

Champaign County Mental Health Board
 FY21 Revenues and Expenditures as of 09/30/21

Revenue	Q3	YTD	Budget	% of Budget
Property Tax Distributions	\$ 1,513,420.20	\$ 4,340,157.62	\$ 5,312,965.00	81.69%
From Developmental Disabilities Board	\$ 98,193.00	\$ 294,579.00	\$ 404,296.00	72.86%
Gifts & Donations	\$ -	\$ 200.00	\$ 18,000.00	1.11%
Other Misc Revenue	\$ 772,923.45	\$ 773,430.55	\$ 113,000.00	684.45%
TOTAL	\$ 2,384,536.65	\$ 5,408,367.17	\$ 5,848,261.00	92.48%

Expenditure	Q3	YTD	Budget	% of Budget
Personnel	\$ 146,022.27	\$ 410,987.40	\$ 580,633.00	70.78%
Commodities	\$ 2,178.84	\$ 6,137.04	\$ 16,295.00	37.66%
Contributions & Grants	\$ 1,249,506.00	\$ 3,654,054.00	\$ 4,882,008.00	74.85%
Professional Fees	\$ 14,818.00	\$ 80,406.61	\$ 140,000.00	57.43%
Other Services	\$ 28,907.11	\$ 105,575.78	\$ 229,055.00	46.09%
TOTAL	\$ 1,441,432.22	\$ 4,257,160.83	\$ 5,847,991.00	72.80%

Champaign County Developmental Disability Board
 FY21 Revenues and Expenditures as of 09/30/21

Revenue	Q3	YTD	Budget	% of Budget
Property Tax Distributions	\$ 1,242,713.54	\$ 3,563,830.16	\$ 4,360,483.00	81.73%
From Mental Health Board	\$ -	\$ -	\$ 6,800.00	0.00%
Other Misc Revenue	\$ 164.74	\$ 467.74	\$ 19,000.00	2.46%
TOTAL	\$ 1,242,878.28	\$ 3,564,297.90	\$ 4,386,283.00	81.26%

Expenditure	Q3	YTD	Budget	% of Budget
Contributions & Grants	\$ 1,076,790.00	\$ 2,787,194.32	\$ 3,931,987.00	70.89%
Professional Fees	\$ 98,193.00	\$ 294,579.00	\$ 404,296.00	72.86%
Transfer to CILA Fund	\$ -	\$ 50,000.00	\$ 50,000.00	100.00%
TOTAL	\$ 1,174,983.00	\$ 3,131,773.32	\$ 4,386,283.00	71.40%

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