



**CHAMPAIGN COUNTY
DEVELOPMENTAL
DISABILITIES BOARD**
**CHAMPAIGN COUNTY
MENTAL HEALTH BOARD**

Champaign County Developmental Disabilities Board (CCDDDB) Meeting Agenda

Wednesday, April 17, 2024, 9:00 AM

*This meeting will be held in person at the Shields-Carter Room of the
Brookens Administrative Building, 1776 East Washington Street, Urbana, IL 61802
Members of the public may attend in person or watch the meeting live through this link:
<https://us02web.zoom.us/j/81559124557> Meeting ID: 815 5912 4557*

- I. Call to order**
- II. Roll call**
- III. Approval of Agenda***
- IV. CCDDDB and CCMHB Schedules, CCDDDB Timeline** (pages 2-6) *No action is needed.*
- V. CCDDDB Acronyms and Glossary** (pages 7-18) *No action is needed.*
- VI. Citizen Input/Public Participation** *All are welcome to attend the Board's meeting to observe and to offer thoughts during this time. The Chair may limit public participation to 5 minutes per person and/or 20 minutes total.*
- VII. Chairperson's Comments – Ms. Vicki Niswander**
- VIII. Executive Director's Comments – Lynn Canfield**
- IX. Approval of CCDDDB Board Meeting Minutes** (pages 19 - 23)*
Minutes from the CCDDDB's regular meeting on 3/20/24 and joint study session with CCMHB on 3/27/24 are included for approval. Action is requested.
- X. Vendor Invoice Lists** (pages 24 - 28)*
Action is requested to accept the "Vendor Invoice Lists" and place them on file.
- XI. Staff Reports** -*deferred due to the review of agency requests for funding.*
- XII. New Business**
DRAFT PY2025 Program Summaries (pages 29 - 116)
Included for information are a list of requests and DRAFT staff reviews of requests for I/DD funding, by priority. Applicants are encouraged to answer Board questions.
- XIII. Old Business - None**
- XIV. Successes and Other Agency Information**
The Chair reserves the authority to limit individual agency representative participation to 5 minutes and/or total time to 20 minutes.
- XV. County Board Input**
- XVI. Champaign County Mental Health Board Input**
- XVII. Board Announcements and Input**
- XVIII. Adjournment**

* Board action is requested.

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



CCDDB 2024 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>

January 17, 2024 – Shields-Carter Room

February 21, 2024 – Shields-Carter Room

March 20, 2024 – Shields-Carter Room

March 27, 2024 5:45PM – Shields-Carter Room – *joint study session with the CCMHB*

April 17, 2024 – Shields-Carter Room

May 22, 2024 – Shields-Carter Room

June 12, 2024 – Shields-Carter Room (*off cycle*)

July 17, 2024 – Shields-Carter Room

August 21, 2024 – Shields-Carter Room - *tentative*

September 18, 2024 – Shields-Carter Room

September 25, 2024 5:45PM – Shields-Carter Room – *joint study session with the CCMHB*

October 16, 2024 5:45PM – Shields-Carter Room – *joint meeting with the CCMHB*

October 23, 2024 – Shields-Carter Room

November 20, 2024 – Shields-Carter Room

December 18, 2024 – Shields-Carter Room – *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.
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, whether virtually or in person, 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.



CCMHB 2024 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> (if it is an option)

- January 17, 2024** – Shields-Carter Room
- January 24, 2024** – *Study Session* - Shields-Carter Room
- February 21, 2024** – Shields-Carter Room
- ~~**February 28, 2024** – *Study Session* Shields-Carter Room~~ **CANCELLED**
- March 20, 2024** – Shields-Carter Room
- March 27, 2024** – *Joint Study Session w CCDDDB* - Shields-Carter
- April 17, 2024** – Shields-Carter Room
- April 24, 2024** – *Study Session* - Shields-Carter Room
- May 15, 2024** – *Study Session* - Shields-Carter Room
- May 22, 2024** – Shields-Carter Room
- June 12, 2024** – Shields-Carter Room (*off cycle*)
- July 17, 2024** – Shields-Carter Room
- August 21, 2024** – Shields-Carter Room - *tentative*
- September 18, 2024** – Shields-Carter Room
- September 25, 2024** – *Joint Study Session w CCDDDB* - Shields-Carter
- October 16, 2024** – *Joint Meeting w CCDDDB* - Shields-Carter
- October 23, 2024** – Shields-Carter Room
- November 20, 2024** – Shields-Carter Room
- December 18, 2024** – Shields-Carter Room - *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, whether using the Zoom options or in person, 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

2023-24 Meeting Schedule with Subjects, Agency and Staff Deadlines, and PY25 Allocation Timeline

This schedule offers dates and subject matter of meetings of the Champaign County Developmental Disabilities Board. Included are tentative dates for steps in the funding process for PY25 and deadlines related to PY23 and PY24 agency contracts. Subjects are not exclusive to any given meeting, as other matters requiring Board attention may be addressed. Study sessions may be scheduled on topics raised at meetings or by staff, or in conjunction with the CCMHB. **Regular meetings are held at 9AM; joint study sessions and meetings at 5:45PM; dates and times are subject to change and may be confirmed with Board staff.**

12/1/23	<i>Public Notice of Funding Availability to be published by this date, giving at least 21-day notice of application period.</i>
12/20/23	Regular Board Meeting (off cycle) - <i>tentative</i>
12/22/23	<i>Online System opens for Applications for PY2025 Funding</i>
12/31/23	<i>Agency Independent Audits, Reviews, or Compilations due</i>
1/17/24	Regular Board Meeting
1/26/24	<i>Agency PY24 2nd Quarter and CLC progress reports due</i>
2/12/24	<i>Deadline for submission of applications for PY25 funding (Online system will not accept any forms after 4:30PM)</i>
2/21/24	Regular Board Meeting Discuss list of PY25 Applications, Review Process
3/20/24	Regular Board Meeting Discussion of PY25 Funding Requests
3/27/24	Joint Study Session OR Joint MEETING with CCMHB (5:45PM)
4/10/24	<i>Program summaries released to Board, posted online with CCDDDB April 17 meeting agenda and packet</i>

- 4/17/24** **Regular Board Meeting**
Board Review, Staff Summaries of Funding Requests
- 4/26/24 *Agency PY2024 3rd Quarter Reports due*
- 5/15/24 *Allocation recommendations released to Board, posted online with CCDDDB May 22 board meeting packet*
- 5/22/24** **Regular Board Meeting**
Allocation Decisions; Authorize Contracts for PY25
- 6/1/24 *For contracts with a PY24-PY25 term, all updated PY25 forms should be completed and submitted by this date.*
- 6/12/24** **Regular Board Meeting (off cycle)**
Draft FY2025 Budget
- 6/18/24 *Deadline for agency application/ contract revisions*
Deadline for agency letters of engagement w/ CPA firms
- 6/21/24 *PY2025 agency contracts completed.*
- 6/30/24 *Agency Independent Audits, Reviews, or Compilations due (only applies to those with calendar FY, check contract)*
- 7/17/24** **Regular Board Meeting**
- 8/21/24** **Regular Board Meeting - tentative**
- 8/30/24 *Agency PY2024 4th Quarter reports, CLC progress reports, and Annual Performance Measure Reports due*
- 9/18/24** **Regular Board Meeting**
Community Needs Assessment Report
Draft Three Year Plan 2025-27 with 2025 Objectives
Approve Draft FY2025 Budgets
- 9/25/24** **Joint Study Session with CCMHB (5:45PM)**
- 10/16/24** **Joint Meeting with CCMHB (5:45PM)**

I/DD Special Initiatives

10/23/24

Regular Board Meeting

DRAFT Program Year 2026 Allocation Criteria

10/23/24

Agency PY2025 First Quarter Reports due

11/20/24

Regular Board Meeting

Approve Three Year Plan with One Year Objectives

Approve PY26 Allocation Criteria

11/29/24

Public Notice of Funding Availability to be published by date, giving at least 21-day notice of application period.

12/18/24

Regular Board Meeting— tentative

12/20/24

Online system opens for applications for PY26 funding.

12/30/24

Agency Independent Audits, Reviews, Compilations due.

Agency and Program acronyms commonly used by the CCDDDB

AIR – Alliance for Inclusion and Respect (formerly Anti-Stigma Alliance)
CC – Community Choices
CCCAC or CAC – (Champaign County) Children’s Advocacy Center
CCAMR – Champaign County Advocacy and Mentoring Resources
CCCHC – Champaign County Christian Health Center
CCDDDB or DDB – Champaign County Developmental Disabilities Board
CCHCC – Champaign County Health Care Consumers
CCHS – Champaign County Head Start, a division of the Regional Planning Commission (also CCHS-EHS, for Head Start-Early Head Start)
CCMHB or MHB – Champaign County Mental Health Board
CCRPC or RPC – Champaign County Regional Planning Commission
CN – Crisis Nursery
CSCNCC – Community Service Center of Northern Champaign County, also CSC
CU Able – a parent support group, previously funded by the CCDDDB
CUAN – Champaign-Urbana Autism Network
CU Early – a Prevention Initiative program, is a long-standing collaboration of Urbana School District #116 and Champaign Unit 4 Schools
CU TRI – CU Trauma & Resiliency Initiative, affiliated with the Champaign Community Coalition and CUNC, funded through Don Moyer Boys & Girls Club?
Courage Connection – previously The Center for Women in Transition
DMBGC – Don Moyer Boys & Girls Club
DREAAM – Driven to Reach Excellence and Academic Achievement for Males
DSC – Developmental Services Center
DSN – Down Syndrome Network
ECIRMAC or RAC – East Central Illinois Refugee Mutual Assistance Center or The Refugee Center
FS – Family Service of Champaign County
GCAP – Greater Community AIDS Project of East Central Illinois
IAG – Individual Advocacy Group
IDDSI – Intellectual/Developmental Disabilities Special Initiatives (a joint project of the CCDDDB and CCMHB)
MAYC – Mahomet Area Youth Club
NAMI – National Alliance on Mental Illness
PATH – regional provider of 211 information/call services
PHC – Promise Healthcare
RAC or ECIRMAC – East Central Illinois Refugee Mutual Assistance Center
RACES – Rape Advocacy, Counseling, and Education Services
PACE – Persons Assuming Control of their Environment, Inc.
PCMHC – Piatt County Mental Health Center
PCSI – Prairieland Service Coordination, Inc. – ISC for Champaign County
RCI – Rosecrance Central Illinois
UNCC – Urbana Neighborhood Community Connections Center
UP Center – Uniting Pride
UW or UWCC – United Way of Champaign County
WIN Recovery – Women in Need Recovery
YFPSA-Youth & Family Peer Support Alliance

Glossary of Other Terms and Acronyms

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

988 – Suicide and Crisis Lifeline

AAC – Augmentative and Alternative Communication

AAIDD – The American Association on Intellectual and Developmental Disabilities

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

ALICE – Asset Limited, Income Constrained, Employed

APSE – Association of People Supporting Employment First

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.

BCBA – Board Certified Behavior Analyst

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

C-CARTS – Champaign County Area Rural Transit System

CE – Community Employment, a DSC program

CE – Customized Employment, a Community Choices program

CF – Community First, a DSC program

CL – Community Living, formerly Apartment Services, a DSC program

CCMHDDAC or MHDDAC – Champaign County Mental Health and Developmental Disabilities Agencies Council

CCPS – Consumer Control in Personal Support, a PACE program

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, Medicaid-waiver funded residential services for people with I/DD

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

CSEFEL – Center on the Social and Emotional Foundations for Early Learning

CQL – Council on Quality and Leadership

CSEs – Community Service Events, as described in a funded agency’s program plan, may include 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.

CUSD – Champaign Community Unit School District 4

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

CY – Contract Year, July 1-June 30. Also Program Year (PY), most agencies’ Fiscal Year (FY)

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

DD – Developmental Disability

DDD – Division of Developmental Disabilities

DECA – Devereux Early Childhood Assessment

DEI – Diversity, Equity, and Inclusion

DFI – Donated Funds Initiative, source of matching funds for some CCMHB funded contracts. The Illinois Department of Human Services administers the DFI Program funded with federal Title XX Social Services Block Grant. The DFI is a “match” program meaning community-based agencies must match the DFI funding with locally generated funds. The required local match is 25 percent of the total DFI award.

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

DSPCP – Decision Support Person Centered Planning, a CCRPC program

DT – Developmental Training, now “Community Day Services”

DT – Developmental Therapy, Developmental Therapist

DV – Domestic Violence

Dx – Diagnosis

EBP – Evidence Based Practice

ECMHS – Early Childhood Mental Health Services, a program of CCRPC Head Start

ED – Emergency Department

ED – Emotional Disorder

EF – Employment First, a Community Choices and DSC program

EHR – Electronic Health Record

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.

ER – Emergency Room

FAPE – Free and Appropriate Public Education

FD – Family Development, formerly Family Development Center, a DSC program

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

FOIA – Freedom of Information Act.

FPL – Federal Poverty Level

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.

HACC – Housing Authority of Champaign County

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

HBWD – Health Benefits for Workers with Disabilities

HCBS – Home and Community Based Services

HFS or IDHFS – Illinois Department of Healthcare and Family Services

HI – Hearing Impairment or Health Impairment

HIPPA – Health Insurance Portability and Accountability Act

HUD – Housing and Urban Development

Hx – History

ICAP – Inventory for Client and Agency Planning

ICDD – Illinois Council for Developmental Disabilities

ICFDD – Intermediate Care Facility for the Developmentally Disabled

ICS – Inclusive Community Support, formerly Community Living, a Community Choices program

ID – Intellectual Disability

IDEA – Individuals with Disabilities Education Act

IDHS or DHS – Illinois Department of Human Services

IDOC – Illinois Department of Corrections

IDHFS or HFS – Illinois Department of Healthcare and Family Services

IDPH – Illinois Department of Public Health

IDT – Interdisciplinary Team

IECAM – Illinois Early Childhood Asset Map

IEP – Individualized Education Plan

IFS – Individual and Family Support, a DSC program

IFSP – Individualized Family Service Plan

IGA – Intergovernmental Agreement

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

IRC – Illinois Respite Coalition

ISBE – Illinois State Board of Education

ISC – Independent Service Coordination or Independent Service Coordination Unit

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

LEAP – Leaders Employing All People

LGTBQIA+ – Lesbian, Gay, Bi-Sexual, Transgender, Queer and/or Questioning, Intersex, Asexual/Aromantic/Agender plus all the gender identities and sexual orientations that letters and words cannot yet fully describe.

LIHEAP – Low Income Home Energy Assistance Program

LPC – Licensed Professional Counselor

LPN – Licensed Practical Nurse

MCO – Managed Care Organization

MDC – Multidisciplinary Conference

MDT – Multidisciplinary Team

MH – Mental Health

MHDDAC or CCMHDDAC – Mental Health and Developmental Disabilities Agencies Council

MHFA – Mental Health First Aid

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

NACBHDD – National Association of County Behavioral Health and Developmental Disability Directors

NACO – National Association of Counties

NADSP – National Alliance for Direct Support Professionals

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. The actual activity to be performed should also be described in the Program Plan Narrative 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.

OCD – Obsessive-Compulsive Disorder

ODD – Oppositional Defiant Disorder

OMA – Open Meetings Act

ODEP – Office of Disability Employment Policy

OMA – Open Meetings Act.

OT – Occupational Therapy, Occupational Therapist

OTR – Registered Occupational Therapist

PA – Personal Assistant

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.

POM – Performance Outcome Measures

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. PUNS has 2 categories: Seeking Services (category for people who currently need or desire supports) and Planning for Services (category for people who do not currently want or need supports but may in the future). PUNS selections are based on a person's cumulative length of time in the Seeking Services Category.

PWD – People with Disabilities

PY – Program Year, July 1 to June 30. Also Contract Year (CY), often 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

RFI – Request for Information

RFP – Request for Proposals

RIN – Recipient Identification Number. A unique identification number assigned to the recipient of IDHS services.

RN – Registered Nurse

RT – Recreational Therapy, Recreational Therapist

SA – Sexual Assault

SA – Substance Abuse

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.

SC – Service Coordination, a DSC program

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).

SDA – Self-Direction Assistance

SDS – Self-Determination Support, a Community Choices program

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

SNAP – Supplemental Nutrition Assistance Program

SOAR – SSI/SSDI Outreach, Access, and Recovery, assistance with applications for Social Security Disability and Supplemental Income, provided to homeless population.

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 (replaces SA – Substance Abuse)

SW – Social Worker

TIC – Trauma Informed Care

TPC – Transition Planning Committee

TPCs – Treatment Plan Clients, service participants with case records and treatment plans. 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. Essentially it is a case carried from one program year into the next. New TPCs are new clients with treatment plans written in a given quarter of the program year. Each TPC should be reported only once during a program year.

UECS – Urbana Early Childhood School

USD – Urbana School District #116

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

WIC – Women, Infants, and Children, A food assistance program for pregnant women, new mothers and young children eat well and stay healthy.

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

Minutes March 20, 2024

*This meeting was held at the Brookens Administrative Center
1776 E. Washington St., Urbana, IL 61802
and with remote access via Zoom.*

9:00 a.m.

MEMBERS PRESENT: Kim Fisher, Susan Fowler, Vicki Niswander, Anne Robin,
Georgiana Schuster

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

OTHERS PRESENT: Annette Becherer, Laura Bennett, Sarah Perry, Danielle Matthews,
Patty Walters, Kelli Martin, Nicole Smith, DSC; Becca
Obuchowski, Hannah Sheets, Community Choices; Angela Yost,
CCRPC; Michelle Ingram, Bill Kubaitis, Mel Liong, Paula Vanier,
PACE; Dana Eldreth, Evaluation Capacity Building Project; Brenda
Eakins, Keysa Haley, GROW in Illinois

CALL TO ORDER:

CCDDB President Vicki Niswander called the meeting to order at 9:07 a.m.

ROLL CALL:

Roll call was taken, and a quorum was present.

APPROVAL OF AGENDA:

An agenda was available for review and approved by a unanimous vote.

CCDDB and CCMHB SCHEDULES/TIMELINES:

Updated copies of CCDDB and CCMHB meeting schedules and CCDDB allocation timeline were included in the packet.

ACRONYMS and GLOSSARY:

A list of commonly used acronyms was included for information.

CITIZEN INPUT/PUBLIC PARTICIPATION:

None.

PRESIDENT’S COMMENTS:

Vicki Niswander reviewed the application process.

EXECUTIVE DIRECTOR’S COMMENTS:

Director Canfield discussed the importance of the work of the CCDDDB and past funding challenges.

APPROVAL OF MINUTES:

Minutes from the 2/21/2024 board meeting were included in the packet.

MOTION: Dr. Robin moved to approve the minutes from the 2/21/24 CCDDDB meeting. Ms. Schuster seconded the motion. A voice vote was taken. The motion passed.

VENDOR INVOICE LIST:

The Vendor Invoice List was included in the Board packet.

MOTION: Dr. Robin moved to accept the Vendor Invoice List as presented in the packet. Dr. Fisher seconded the motion. A voice vote was taken, and the motion passed unanimously.

STAFF REPORTS:

A staff report from Director Canfield was included in the packet. Other reports were deferred due to review of funding requests.

NEW BUSINESS:

PY2025 Funding Requests:

A list of agency requests was included in the Board packet. Board members discussed the process and the timeline for reviewing funding requests.

PY2023 I/DD Service Activity Data:

A memo summarizing individual level claims data reported for PY23 I/DD contracts was included in the packet. Dr. Fowler asked for a description of the Connections program at DSC, which was provided by DSC staff who were present.

OLD BUSINESS:

Evaluation Capacity Building Project:

Dana Eldreth provided a verbal update on the project.

Expo Update:

Director Canfield provided a brief update on sponsorship.

SUCSESSES AND AGENCY INFORMATION:

Updates were provided by Patty Walters and Annette Becherer from DSC; Mel Liong and Paula Vanier from PACE; and Becca Obuchowski from Community Choices.

COUNTY BOARD INPUT:

None.

CCMHB INPUT:

The CCMHB will meet this evening with similar agenda items.

BOARD ANNOUNCEMENTS AND INPUT:

None.

REVIEW OF CLOSED SESSION MINUTES:

MOTION: Dr. Fowler moved to accept the February 19, 2020, February 26, 2020, and February 23, 2022 closed session minutes as presented, to continue maintaining them as closed, and to destroy the recordings of the meetings.

ADJOURNMENT:

The meeting adjourned at 10:04 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo,
CCMHB/CCDDB Operations and Compliance Specialist

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

**CHAMPAIGN COUNTY
MENTAL HEALTH BOARD and
DEVELOPMENTAL DISABILITY BOARD
JOINT STUDY SESSION**

Minutes—March 27, 2024

*This meeting at the Brookens Administrative Center, Urbana, IL
and with remote access*

5:45 p.m.

MEMBERS PRESENT: Lisa Liggins-Chambers, Joseph Omo-Osagie, Molly McLay, Jane Sprandel, Jon Paul Youakim, Vicki Niswander, Kim Fisher, Georgiana Schuster, Anne Robin, Susan Fowler

MEMBERS EXCUSED: Elaine Palencia, Jen Straub, Chris Miner

STAFF PRESENT: Kim Bowdry, Leon Bryson, Lynn Canfield, Shandra Summerville, Chris Wilson

OTHERS PRESENT: Paul Blobaum, Community Choices; Angie Pierce, Cunningham Children’s Home; Brenda Eakins, GROW in Illinois; Laura Lindsay, Courage Connection; Angela Yost, CCRPC; Josh Vandiver and Patty Walters, DSC

CALL TO ORDER:

Dr. Youakim called the meeting to order at 5:48 p.m.

ROLL CALL:

Roll call was taken and a quorum was present. In compliance with the CCMHB By-Laws, a motion was requested by Dr. Youakim to allow a board member’s remote attendance.

MOTION: Dr Youakim moved to allow Molly McLay to attend the meeting remotely due to illness, as is allowed by the CCMHB By-Laws. Ms. Sprandel seconded the motion. A voice vote was taken and the motion passed.

CITIZEN INPUT / PUBLIC PARTICIPATION:

None.

APPROVAL OF AGENDA:

The agenda was in the packet for review and approved.

PRESIDENT'S COMMENTS:

None.

STUDY SESSION:

Remote Supports Services: Empowering Independent Living

A copy of the presentation was included in the Board packet.

Kyle Corbin is the Director of Business Development at SafeinHome. In his 20+ year career he has experience with almost every aspect of service delivery in the intellectual and developmental disabilities field. His background offers a unique perspective when discussing Remote Supports Services and community engagement with providers, individuals, and representatives of state agencies. He has held roles in both the public and private side of service delivery and has worked closely with stakeholders in multiple states to develop rules and guidance promoting the use of Supportive Technology across the nation. He was instrumental in the push to make Ohio the first Technology First state and helped dramatically increase the number of individuals using supportive technology nationally.

Board members were given the opportunity to ask questions following each presentation.

AGENCY INPUT:

Josh Vandiver, DSC, commented on the presentation and similar efforts of the agency.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 6:50 p.m.

Respectfully
Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDB Staff

Minutes are in draft form and subject to CCMHB approval.

Champaign County, IL

VENDOR INVOICE LIST



INVOICE	P.O.	INV DATE	CHECK RUN CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	INVOICE DESCRIPTION
10170 DEVELOPMENTAL SERVICES CENTER OF									
Mar '24	IDDSI24-080	03/01/2024	030124A 30040	20,833.00	20,833.00	03/31/2024	INV	PD	IDDSI24-080 Individual
CHECK DATE: 03/01/2024									
10424 PERSONS ASSUMING CONTROL OF THEIR ENVIRONMENT INC.									
Mar '24	IDDSI24-079	03/01/2024	030124A 30077	3,000.00	3,000.00	03/31/2024	INV	PD	IDDSI24-079 Consumer C
CHECK DATE: 03/01/2024									
				3,000.00					
				23,833.00					

2 INVOICES

** END OF REPORT - Generated by Chris M. Wilson **

Champaign County, IL

VENDOR INVOICE LIST



INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	INVOICE DESCRIPTION
1 CHAMPAIGN COUNTY TREASURER										
Mar'24	DD24-078	03/01/2024	030124A	29993	36,148.00	36,148.00	03/31/2024	INV	PD	DD24-078 Decision Supp
CHECK DATE: 03/01/2024										
10146 COMMUNITY CHOICES, INC										
Mar'24	DD24-075	03/01/2024	030124A	30032	14,708.00	14,708.00	03/31/2024	INV	PD	DD24-075 Self-Determin
CHECK DATE: 03/01/2024										
Mar'24	DD24-076	03/01/2024	030124A	30032	2,833.00	2,833.00	03/31/2024	INV	PD	DD24-076 Staff Recruit
CHECK DATE: 03/01/2024										
Mar'24	DD24-077	03/01/2024	030124A	30032	10,499.00	10,499.00	03/31/2024	INV	PD	DD24-077 Transportatio
CHECK DATE: 03/01/2024										
Mar'24	DD24-090	03/01/2024	030124A	30032	16,500.00	16,500.00	03/31/2024	INV	PD	DD24-090 Inclusive Com
CHECK DATE: 03/01/2024										
Mar'24	DD24-095	03/01/2024	030124A	30032	18,875.00	18,875.00	03/31/2024	INV	PD	DD24-095 Customized Em
CHECK DATE: 03/01/2024										
10170 DEVELOPMENTAL SERVICES CENTER OF										
Mar'24	DD23-086	03/01/2024	030124A	30040	18,958.00	18,958.00	03/31/2024	INV	PD	DD23-086 workforce Dev
CHECK DATE: 03/01/2024										
Mar'24	DD24-081	03/01/2024	030124A	30040	47,123.00	47,123.00	03/31/2024	INV	PD	DD24-081 Community Liv
CHECK DATE: 03/01/2024										
Mar'24	DD24-082	03/01/2024	030124A	30040	74,170.00	74,170.00	03/31/2024	INV	PD	DD24-082 Community Fir
CHECK DATE: 03/01/2024										
Mar'24	DD24-083	03/01/2024	030124A	30040	41,340.00	41,340.00	03/31/2024	INV	PD	DD24-083 Service Coord
CHECK DATE: 03/01/2024										
Mar'24	DD24-084	03/01/2024	030124A	30040	20,083.00	20,083.00	03/31/2024	INV	PD	DD24-084 Clinical Serv
CHECK DATE: 03/01/2024										
Mar'24	DD24-085	03/01/2024	030124A	30040	7,508.00	7,508.00	03/31/2024	INV	PD	DD24-085 Employment Fi
CHECK DATE: 03/01/2024										
Mar'24	DD24-091	03/01/2024	030124A	30040	38,300.00	38,300.00	03/31/2024	INV	PD	DD24-091 Community Emp
CHECK DATE: 03/01/2024										
Mar'24	DD24-092	03/01/2024	030124A	30040	8,866.00	8,866.00	03/31/2024	INV	PD	DD24-092 Connections
CHECK DATE: 03/01/2024										
18323 DIMOND BROS. INSURANCE LLC										
					63,415.00					
					256,348.00					

Champaign County, IL

VENDOR INVOICE LIST



INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	INVOICE DESCRIPTION
1102684		03/21/2024	032824A	31083	950.00	950.00	05/05/2024	INV	PD	Policy #EPP 0577739 Co
					950.00					
15 INVOICES					356,861.00					

** END OF REPORT - Generated by Chris M. Wilson **

ACCOUNT DETAIL HISTORY FOR 2024 03 TO 2024 03

ORG	OBJECT PROJ	JNL	EFF DATE	SRC REF1	REF2	REF3	CHECK #	OB	AMOUNT	NET LEDGER BALANCE
21000100	502001			PROFESSIONAL SERVICES						
24/03	291	03/20/24	GEN						35,447.00	35,447.00
	Mar'24	DDB	Mar'24	DDB	Admin Fee					
	LEDGER BALANCES --- DEBITS: 35,447.00 CREDITS:									35,447.00
21000100	502007			INSURANCE (NON-PAYROLL)						
24/03	400	03/22/24	API	018323	60466			31083	950.00	950.00
	W	032824A	Commercial	Property Renewal	DIMOND BROS AGENCY					
	LEDGER BALANCES --- DEBITS: 950.00 CREDITS:									950.00
21000100	502025			CONTRIBUTIONS & GRANTS						
24/03	2	03/01/24	API	000001	DD24-078	58449		29993	36,148.00	36,148.00
	W	030124A	Mar'24	DD24-078	Decision Suppo CCT					
24/03	2	03/01/24	API	010146	DD24-095	58450		30032	18,875.00	55,023.00
	W	030124A	Mar'24	DD24-095	Customized Emp COMMUNITY CHOICES, I					
24/03	2	03/01/24	API	010146	DD24-090	58451		30032	16,500.00	71,523.00
	W	030124A	Mar'24	DD24-090	Inclusive Comm COMMUNITY CHOICES, I					
24/03	2	03/01/24	API	010146	DD24-076	58452		30032	2,833.00	74,356.00
	W	030124A	Mar'24	DD24-076	Staff Recruitm COMMUNITY CHOICES, I					
24/03	2	03/01/24	API	010146	DD24-075	58453		30032	14,708.00	89,064.00
	W	030124A	Mar'24	DD24-075	Self-Determina COMMUNITY CHOICES, I					
24/03	2	03/01/24	API	010146	DD24-077	58454		30032	10,499.00	99,563.00
	W	030124A	Mar'24	DD24-077	Transportation COMMUNITY CHOICES, I					
24/03	2	03/01/24	API	010170	DD24-084	58455		30040	20,083.00	119,646.00
	W	030124A	Mar'24	DD24-084	Clinical Servi DEVELOPMENTAL SERVIC					
24/03	2	03/01/24	API	010170	DD24-091	58456		30040	38,300.00	157,946.00
	W	030124A	Mar'24	DD24-091	Community Emp] DEVELOPMENTAL SERVIC					

ACCOUNT DETAIL HISTORY FOR 2024 03 TO 2024 03

ORG YR/PR	OBJECT PROJ	JNL	EFF DATE	SRC	REF1	REF2	REF3	CHECK #	OB	AMOUNT	NET LEDGER BALANCE
24/03	W 030124A	2 03/01/24	Mar'24	API DD24-082	DD24-082	58457			30040	74,170.00	232,116.00
				Community Fir	DEVELOPMENTAL	SERVIC					
24/03	W 030124A	2 03/01/24	Mar'24	API DD24-081	DD24-081	58458			30040	47,123.00	279,239.00
				Community Liv	DEVELOPMENTAL	SERVIC					
24/03	W 030124A	2 03/01/24	Mar'24	API DD24-092	DD24-092	58459			30040	8,866.00	288,105.00
				Connections	DEVELOPMENTAL	SERVIC					
24/03	W 030124A	2 03/01/24	Mar'24	API DD24-085	DD24-085	58460			30040	7,508.00	295,613.00
				Employment Fir	DEVELOPMENTAL	SERVIC					
24/03	W 030124A	2 03/01/24	Mar'24	API DD24-083	DD24-083	58461			30040	41,340.00	336,953.00
				Service Coordi	DEVELOPMENTAL	SERVIC					
24/03	W 030124A	2 03/01/24	Mar'24	API DD23-086	DD23-086	58462			30040	18,958.00	355,911.00
				workforce Deve	DEVELOPMENTAL	SERVIC					
LEDGER BALANCES --- DEBITS: 355,911.00 CREDITS: .00 NET: 355,911.00											
GRAND TOTAL --- DEBITS: 392,308.00 CREDITS: .00 NET: 392,308.00											

16 Records printed

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CCDDB and CCMHB I/DD Funding Requests for PY2025			
July 1, 2024 thru June 30, 2025		Requests PY25	Primary/Secondary
Agency	Program Name	all 3 funds	Reviewer
<i>Priority: Self-Advocacy</i>			
<i>Priority: Linkage and Coordination</i>			
CCRPC - Community Services	Decision Support PCP	\$418,845	KF/SF
DSC	Service Coordination	\$520,500	SF/VN
<i>Priority: Home Life</i>			
Community Choices, Inc.	Inclusive Community Support (formerly Community Living)	\$213,000	GS/VN
DSC	Community Living (formerly Apartment Services)	\$615,000	AR/GS
<i>Priority: Personal Life</i>			
Community Choices, Inc.	Transportation Support	\$171,000	VN/KF
DSC	Clinical Services	\$260,000	SF/AR
DSC (IDDSI PY24)	Individual & Family Support	\$308,000	GS/SF
PACE (IDDSI PY24)	Consumer Control in Personal Support	\$45,972	AR/VN
<i>Priority: Work Life</i>			
Community Choices, Inc.	Customized Employment	\$239,500	KF/GS
DSC	Community Employment	\$500,000	GS/KF
DSC/Community Choices	Employment First	\$98,500	VN/SF
<i>Priority: Community Life</i>			
Community Choices, Inc.	Self-Determination Support	\$213,500	AR/KF
DSC	Community First	\$950,000	SF/VN
DSC	Connections	\$115,000	KF/AR
<i>Priority: Community Life - IDDSI Fund</i>			
CCRPC - IDDSI Fund	Community Life Short Term Assistance - NEW	\$232,033	VN (and MHB Cl)
<i>Priority: Strengthening the I/DD Workforce</i>			
Community Choices	Staff Recruitment and Retention	\$34,000	2 year - no review
DSC	Workforce Development and Retention	\$244,000	GS/AR
<i>Priority: Young Children and their Families - CCMHB Fund</i>			
DSC	Family Development	\$656,174	2 year - no review
CC Head Start/Early Head Start	Early Childhood Mental Health Svs (MH & DD)	\$241,135	SF/GS
CU Early	CU Early	\$16,145	AR/KF
	(amounts listed are for DD portion of MHB contracts)	-	
	TOTAL	\$6,092,304	

Draft CCDDDB PY2025 Program Summary

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

Program: Decision Support PCP

Agency: CCRPC - Community Services

Request: \$418,845

Why it matters: "... conflict-free case management... linkage to community resources based on individual preferences and needs, such as for job support, community day services, and community living supports; advocate for support, and monitor the service providers' implementation of person-centered goals; and assist families with linkage and coordination for Medicaid, Social Security, respite services, etc."

Selected priority: Linkage & Coordination

Services and People Served

Who will benefit: people with I/DD, registered on DHS PUNS database and would like to complete preference assessments and who: do not have waiver funding but are receiving a DDB funded service; are transitioning from ISBE setting to adult services; or have a mental health diagnosis.

Scope of services: consumers' preference assessment data (various modes of collection, plus compilation), conflict-free case management and person-centered planning for those who do not have Medicaid waiver funding, outreach to high school professionals and students' families with info about Transition Consultant services, case management services for people with dual diagnosis (DD and MI), linkage and referral.

Location and frequency of services: high schools, RPC offices, I/DD provider agency sites, person's home, community settings, or virtual; Transition Consultant services are typically 2x month for 1-2 months; PCP services quarterly with monthly check-in calls, ongoing; Dual diagnosis services monthly or more often; preference feedback collected through various means throughout the year and aggregated annually.

Staff comment: This request is to continue funding for a current program.

Residency of 484 people served in PY23 and 204 in the first half of PY24:

Champaign	215 for PY23	88 for PY24
Urbana	123 for PY23	75 for PY24
Rantoul	38 for PY23	8 for PY24
Mahomet	36 for PY23	4 for PY24
Other	72 for PY23	29 for PY24

Demographics of 484 people served during PY23:

Age

Ages 0-6 -----	13
Ages 7-12 -----	34
Ages 13-18 -----	79
Ages 19-59 -----	334
Ages 60+ -----	24

Race

White -----	339
Black / AA -----	104
Asian / PI -----	15
Other (incl. Native American, Bi-racial)-	26

Gender

Male -----	294
Female -----	190
Ethnicity	
Of Hispanic/Latino/a Origin -----	44
Not of Hispanic/Latino/a Origin -----	440

Measures of Client/Participant Access

Eligibility criteria and determination: people who have I/DD and are on PUNS; those seeking services are eligible for conflict free PCP; those nearing HS graduation are eligible for transition services; those with MI diagnosis, 18 and older, and not receiving services through school are eligible for dual diagnosis CM. I/DD criteria are defined by the state of Illinois – hence PUNS enrollment/determination.

Outreach to eligible people: referrals from other provider agencies, schools, and other CCRPC programs; outreach events; flyers to community committees and agencies and individuals enrolled on PUNS; agency website and social media; other individuals with I/DD and their families.

Within 10 days from referral, 95% of those referred will be assessed.

Within 10 days of assessment, 95% of those assessed will engage in services.

People will engage in services, on average, for: for PCP, 1-5 years; for dual diagnosis, 1-3 years

Additional demographic data: insurance information and Medicaid RIN.

Staff comment: Wait times are reasonable given the type of service provided.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. By the end of FY2025, RPC’s Transition Consultant will strengthen community connections to increase referrals for students transitioning out of secondary education by at least 3% from years prior.
2. By the end of FY2025, the Dual Diagnosis Case Manager will have identified & provided linkage to community mental health supports for 75% of individuals served.
3. During FY2025, 95% of Individuals working with PCP Case Manager will have up to date personal plan with a minimum of one identified outcome.

Specific assessment tools and data collection:

1. Preference Assessment, IEP, Satisfaction Surveys - collected by Transition Consultant and Program Coordinator.
2. ICAP, Preference Assessment, Discovery tool, Person-Centered Planning tool - collected by Case Managers and Program Coordinator.
3. ICAP, Preference Assessment, Discovery Tool - collected by Case Managers and Program Coordinator.

Outcome data gathered from all participants: Yes.

Will collect outcome data annually.

Staff comment: Outcomes 2 & 3 are client focused. Outcome 1 is a staff goal that indirectly benefits clients. This section of the application’s Program Plan Narrative contains a great deal more detail.

Measures of Utilization

Treatment Plan Clients (TPCs): 145 people in PCP, transition, or dual diagnosis services

Non-Treatment Plan Clients (NTPCs): 30 people in preference focus groups plus those referred for transition support but not yet enrolled on PUNS

Community Service Events (CSEs): 25 presentations at outreach events or meetings with professionals

Service Contacts (SCs): 100 individuals attending outreach events.

Staff comment: Service contacts and service hours associated with TPCs are documented in Online Reporting System. Program provided 3,280 hours of service to TPCs during PY23. TPC target lowered to match current referrals to dual diagnosis and transition services.

PY25 Targets	145 TPCs	30 NTPCs	100 SCs	25 CSEs
PY24 First Two Quarters (per submitted Service Activity Reports)				
First Quarter	178	67	13	4
Second Quarter	84	18	137	20
<i>Annual Targets</i>	<i>165 TPCs</i>	<i>30 NTPCs</i>	<i>100 SCs</i>	<i>25 CSEs</i>
PY23 All Four Quarters (per submitted Service Activity Reports)				
First Quarter	177	231	39	6
Second Quarter	52	79	165	4
Third Quarter	46	49	390	6
Fourth Quarter	45	70	104	11
<i>Annual Targets</i>	<i>320 TPCs</i>	<i>200 NTPCs</i>	<i>300 SCs</i>	<i>50 CSEs</i>

Financial Analysis

PY2025 CCDDDB request: \$418,845

PY2025 Total program budget: \$418,845

Current year funding (PY2024): \$433,777

Proposed change in funding - PY2024 to PY2025 = 3.6%

CCDDDB request is for 100% of total program revenue.

Personnel costs of \$303,553 are 72% of the requested amount.

Other expenses are Professional Fees/Consultants \$100, Consumables \$500, General Operating \$13,000 (3%), Occupancy \$97,692 (23%), Conferences/Staff Development \$1,000, Local Transportation \$2,500, and Equipment Purchases \$500.

Total agency budget has a surplus of \$321,112, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: 4.15 Direct FTEs.

Total program staff: 4.15 Direct FTEs.

Staff comment: Staff to be charged to the contract are 85% of 3 full-time Case Managers, 60% of another, 80% of full-time Program Manager, and 20% Transition Consultant. The latter is part-time according to Budget Narrative, full-time (in total agency column) in Personnel form; similarly, the 60% case manager may be a part time position. General Operating will pay for Outlook user licenses, phones used by direct staff, background check fees, and user fees for IT support services. Occupancy expenses will pay for administrative indirect costs calculated at 48% of Salaries/Wages. Indirect cost allocation plan is approved by the Illinois Department of Commerce and Economic Opportunity. Staff Development will pay for continuing education for staff to maintain QIDP credential. Local Transportation will reimburse staff for use of personal vehicles.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan:

1. Offer a higher rate of pay to potential employees that are fluent in languages other than English. This action step is important because it incentivizes the recruitment of employees who can effectively communicate with diverse populations and provide culturally and linguistically appropriate care and services.

2. Review and update the Cultural and Linguistic (CLC) plan annually. This is important because it ensures that the organization's policies and practices remain current and aligned with cultural competency standards.
3. Provide language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them. This ensures that language barriers do not hinder individuals from accessing timely and quality care and services.
4. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes. This is important for assessing the effectiveness of cultural competency efforts and identifying areas for improvement.
5. Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities. This ensures that the organization is continuously evaluating and improving its cultural competency practices to better meet the needs of diverse populations.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes.

Highlights from the submitted CLC Progress Report: All Head Start staff completed quarterly CLC on training on culturally responsive teaching and “Cross Linguistic Transfer in Bi-literacy Instruction: Why Connections Matter through as well as Welcoming Each and Every Child.” CCRPC has 4 new members involved in the cultural competency committee as a result of adding an introduction about cultural competence committee component to the new staff orientation. Six parents and five community representatives serve as members of the Policy Council and Parent committees for Head Start.

Staff comment: The Plan is inclusive of Head Start and Community Services Division. It addresses how the committee works with all the divisions of CCRPC to show how CLAS (Cultural and Linguistic Appropriate Services) are being implemented across the entire agency.

Criteria for Best Value

Budget and program connectedness: DDB contract is the only program revenue. Budget Narrative describes each expense item, including how expenses were calculated and items covered in each category. The agency uses an indirect cost allocation methodology approved by the State of Illinois. Relationship between primary cost (staff) and the program activities is clear, and financial forms agree. Relationships between listed personnel and program activities are clear, with credentials identified in both the program narrative and the budget narrative. While FTEs here do not appear to match personnel form, they do not impact program costs.

Participant outcomes (see above for details): the three outcomes relate to performance of various services within the program, with indirect positive impacts on people served. Measurable targets and timeframes and appropriate assessment tools and processes are associated with each of these.

Self-determination and self-direction in service planning: Uses Discovery Tool and Person-Centered Planning model required by State of Illinois for its Medicaid waiver funding recipients.

Eliminating disparities in access and care (see above for Agency CLC Plan details):

Outreach in and beyond Champaign, Urbana, Savoy, and Rantoul; rural High Schools; visits can be in RPC offices (including Rantoul), individuals’ homes or community sites they prefer... connections made and info shared through community events, committees such as Transition Planning Committee, and provider organizations (co-referrals)... Outreach at events which reach members of underserved groups, such as Autism Walk, disability Resource Expo, Rantoul Resource Fair... linkage to Prairieland Service Coordination... Confidentiality and privacy always considered when determining appropriate meeting place. Virtual options.

Promoting inclusion and reducing stigma: person centered planning process collaborates with people served to advocate for increased independence, autonomy, and community inclusion. The application provides details on (and a link to) state guidelines supportive of promoting inclusion, reducing stigma or discrimination, or improving access to the community... program staff attend outreach events, conduct presentations, and

educate the community on strengths and abilities of persons with I/DD and the services available to them to promote inclusion and reduce stigma.

Continuation of services during public health emergency: Virtual options.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: Not a focus.

Unique features - approach: describes the federal Home and Community Based Services regulations, with focus on conflict of interest free case management, person centered planning, and settings; explains 'conflict free' and the relationship between these regulations and design of Illinois' I/DD system.

Unique features - staff credentials:

Coordinator – QIDP, MSW with over 15 years of experience working in social services.

Case Managers providing case management and conflict free person-centered planning services all hold the QIDP credential which requires a minimum of a bachelor's degree in a human services field as well as a minimum of one year of experience in working with people with I/DD.

Transition Consultant – MSW, over 40 years working in social services with a variety of vulnerable populations.

Dual Diagnosis Case Manager - bachelor's in Community Health, ISC/QIDP for 4 years, worked in the mental health field prior to that time for 8 years.

Unique features – resource leveraging: not used as match for other funding; no other payment source; clients do not pay a fee; program does not participate in Medicaid (DD waiver programs).

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: Yes. This is a large organization with financial management staff and oversight by the County Auditor and County Board.

If applicable, audit findings: N/A. CCRPC's programs are included in the County's combined audit.

If applicable, compliance issues: N/A

All forms submitted by deadline: Yes. Completed February 12.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: not explicit.

Coordinated system: addressed in detail, a primary role of the program.

Written collaborative agreements: no written agreements but active involvement with DSC, Community Choices, PACE, Champaign County high school professionals.

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Consider continuing the PY24 special provisions, revised due to changes in local ISC.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Service Coordination

Agency: DSC

Request: \$520,500

Why it matters: "... intensive case management and coordination of services and supports. Guided by the person's individualized plan, DSC's Case Coordinators, who are Qualified Intellectual Disabilities Professionals (QIDPs), support the individual in obtaining what they outlined in their plans... with benefits and complex support needs, providing services and/or linking them with community resources as needed."

Selected priority: Linkage and Coordination

Services and People Served

Who will benefit: Individuals with I/DD who request support to enhance or maintain their highest level of independence in the community, at work, and/or in their home.

Scope of services: Develops Plans (with individuals and other providers) and Implementation Strategies.

Varying types and levels of intensity of support:

Intake screening for agency services, advocacy, medical support, crisis intervention, 24-hour on-call emergency support, referral, linkage to services and benefits (and maintaining eligibility), representative payee support; legal support, housing support, long term care search, referral and transition support.

Location and frequency of services: Agency, medical and other provider offices, individuals' homes, community locations as requested; in-person, email, phone, virtual; people may use online platforms for banking, benefits, health records, with training for staff and clients on their use; frequency varies.

Staff comment: Application includes much more detail; proposes to continue a current program.

Residency of 248 people served in PY23 and 260 in the first half of PY24:

Champaign	96 for PY23	110 for PY24
Urbana	87 for PY23	85 for PY24
Rantoul	14 for PY23	13 for PY24
Mahomet	21 for PY23	24 for PY24
Other	30 for PY23	28 for PY24

Demographics of 248 people served during PY23:

Age

Ages 7-12 -----	3
Ages 13-18 -----	8
Ages 19-59 -----	209
Ages 60+ -----	28

Race

White -----	177
Black / AA -----	50
Asian / PI -----	10
Other (incl. Native American, Bi-racial)-	11

Gender

Male -----	151
Female -----	97

Ethnicity

Of Hispanic/Latino/a Origin ----- 5

Not of Hispanic/Latino/a Origin ----- 243

Measures of Client/Participant Access

Eligibility criteria and determination: People with I/DD (per state rule), enrolled on PUNS; DSC's Admissions Committee determines if a person meets criteria and if program is able to provide needed/requested support.

Outreach to eligible people: Various referral sources (physicians, support groups, agencies, schools, self, family); info through word of mouth, community events and groups, Champaign County Transition Planning Committee, intake/admissions, website/social media, other materials. Agency is willing to speak to groups, classes, etc. about all services.

Within 30 days from referral, 90% of those referred will be assessed.

Within 30 days of assessment, 75% of those assessed will engage in services.

People will engage in services, on average, for: Can be lifelong.

Additional demographic data: Disability, referral source.

Staff comment: Wait times are reasonable.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. 98% of people will actively participate in the development of their personal outcomes driving the content of the implementation strategies documented by assigned QIDP.
2. 20 people will participate in POM (Personal Outcome Measures) interviews this fiscal year.
3. 90% of people will be satisfied with support they receive from Service Coordination.

Specific assessment tools and data collection:

1. Implementation Strategies and monthly QIDP notes in individual's case file. Staff document self-report.
2. Director of Program Assurance maintains POM interview booklets; documentation of these interviews in individuals' case files.
3. Satisfaction surveys distributed annually by the Director of Program Assurance.

Outcome data gathered from all participants: No, a random sample of records are reviewed.

Will collect outcome data Quarterly.

Staff comment: The proposal offers PY24 mid-year progress updates on each outcome (#1 met, #2 – four so far, #3 met) and proposes to continue #1 and #2 for PY25 and replace #3 with one for participant satisfaction.

Measures of Utilization

Treatment Plan Clients (TPCs): 275 people with Individual Plans funded by DDB.

Non-Treatment Plan Clients (NTPCs): 5 children in Family Development program.

Community Service Events (CSEs): 2 presentations/events.

Service Contacts (SCs): 20 people presented to Admissions Committee.

Staff comment: Service contacts and service hours associated with TPCs are documented in online reporting system. Program provided 5,866 hours of service to TPCs during PY23. Section notes that children will become TPCs when they age out of Family Development, but this is also the age at which they should be covered under the school code for this type of service and therefore not eligible for DDB funded services. Proposal is for TPC and CSE targets to continue from PY24 but changes to NTPC and SC.

PY25 Targets	275 TPCs	5 NTPCs	20 SCs	2 CSEs
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PY24 First Two Quarters (per submitted Service Activity Reports)				
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First Quarter	258	2	15	2
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Second Quarter	2	0	3	1
<i>Annual Targets</i>	<i>275 TPCs</i>	<i>10 NTPCs</i>	<i>70 SCs</i>	<i>2 CSEs</i>
PY23 All Four Quarters (per submitted Service Activity Reports)				
First Quarter	228	29	6	1
Second Quarter	3	0	4	1
Third Quarter	7	1	5	1
Fourth Quarter	10	1	9	1
<i>Annual Targets</i>	<i>280 TPCs</i>	<i>36 NTPCs</i>	<i>70 SCs</i>	<i>2 CSEs</i>

Financial Analysis

PY2025 CCDDDB request: \$520,500

PY2025 Total program budget: \$748,682

Current year funding (PY2024): \$496,080

Proposed change in funding - PY2024 to PY2025 = 5%

CCDDDB request is for 70% of total program revenue.

Other program revenue is from DHS Fee for Service \$224,524 (30%) and Miscellaneous \$3,652.

Personnel costs of \$475,061 are 91% of the requested amount.

Other expenses are Professional Fees/Consultants \$4,451, Consumables \$4,117, General Operating \$6,833 (1%), Occupancy \$7,906 (2%), Conferences/Staff Development \$2,616, Local Transportation \$2,474, Equipment Purchases \$901, Lease/Rental \$9,080 (2%), Membership Dues \$2,254, and Miscellaneous \$4,807.

Total agency budget has a deficit of \$109,133, total program deficit of \$2,908, and CCDDDB budget balanced.

Program staff to be funded by CCDDDB: 0.74 Indirect + 6.51 Direct = 7.25 FTEs.

Total program staff: 1.11 Indirect + 9.30 Direct = 10.41 FTEs.

Staff comment: Direct staff to be supported through this contract are: 70% of 8 full-time Case Coordinators; 56% of the full-time Clinical Coordinator; and 35% of full-time Director of Case Management. Indirect staff to be charged consist of: 4% of 13 various full-time positions (1 vacant at the time of application) and 4% of the indirect portion (90%) of full time Director of Program Assurance; 3% of 2 full time Maintenance staff, 3% of the indirect portions (80%) of the Exec VP of Support Services and 1 Maintenance Tech, and 3% of a part time Accounting Assistant (vacant); 2% of part time Bldg Grounds Manager; and 1% of the indirect portion (25%) of full time Exec VP of Clinical Services.

The increased request reflects an average salary increase for DSPs of 7.5% and an organization-wide salary increase of 6.5%, plus the resulting increase in associated payroll taxes, in addition to other inflationary increases in expenses. Proper assessment and analysis of the financial forms is difficult due to how the forms were presented. The Budget Narrative references a "General Agency Expense" section, in which it appears that many different agency-wide expense categories are prorated and allocated to the program. It is not specified in the financial forms how much, if any, of any given expense category includes an agency-wide prorated allocation. Further descriptions of some of these expense categories are vague, provide no specifics, and are therefore insufficient. The result are financial forms that are unclear. It is also very likely that, as a result of these allocations, this program will be charged for expenses from which the program did not benefit or even utilize. Per the CCDDDB Funding Guidelines, section 6(e)(iii) states that the "organization shall have accounting structures that provide accurate and complete information about all financial transactions related to each separate CCDDDB contract." Utilizing an agency-wide cost allocation method is not consistent with this section of the CCDDDB Funding Requirements and Guidelines.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: DSC has a DEI (Diversity Equity and Inclusion) Committee that meets quarterly to look at the goals and actions steps. Meeting minutes outline their plan and actions taken around DEI. DSC conducts on-going surveys with clients and their families about services that are offered and will expand opportunities for people receiving services to be in an advisory capacity in the hiring process, trainings staff, and planning community events.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes.

Highlights from the submitted CLC Progress Report: Staff Training will be completed in 3rd and 4th quarters. Prioritized training and support to reduce burnout for staff and compassion fatigue. A monthly DEI Newsletter is shared with staff and board members. Members of the agency's governing board have lived experience.

Staff comment: DSC is shifting their language around cultural and linguistic competence to include DEI. They have been working with the CLC Coordinator to develop training and support for their board, administration, and direct staff to align with the values and tools for empathy for working with people living with disabilities.

Criteria for Best Value

Budget and program connectedness: The Budget Narrative describes increased costs for this program related to total agency, state funding as the other main revenue for the program, and the roles of those direct staff to be charged to the contract. It refers to general agency cost allocation information provided in the Clinical Services application which itself references the annually reviewed "Allocated Program Expense formula," a document provided separately to DDB staff.

Participant outcomes (see above for details): One measures people's involvement in developing their plans; another measures completion of Personal Outcome Measure interviews (an instrument developed by the Council on Quality and Leadership); the third is for client satisfaction with the service.

Self-determination and self-direction in service planning: Uses agency and state models for all TPCs and CQL's POM tool for 20 participants.

Eliminating disparities in access and care (see above for Agency CLC Plan details): Involvement with Transition Planning Committee; sharing info with many providers and 10 school districts county-wide; Intake Specialist attends neighborhood events and IEPs; services are offered in various locations, including home and community locations preferred by clients, with virtual options.

Promoting inclusion and reducing stigma: Supports people with I/DD to engage through their community, to disrupt loneliness and isolation.

Continuation of services during public health emergency: Virtual options.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: Yes, for the use of online platforms (banking, e.g.)

Unique features - approach: Describes Code of Ethics for QIDPs and links to National Association of QIDPs site.

Unique features - staff credentials: Bachelor's in social service field plus one year working with people with I/DD; DSP training (40 hrs classroom and 80 hrs on the job) plus 40 hrs QIDP training; credential approved by IDHS, requiring 12 CEU hrs a year on topics such as Implicit Bias, Alzheimer's and DD, HIPAA Compliance, Guardianship 101, All About Rights, IL ABLE, Understanding Social Anxiety, Informed Decision Making.

Unique features – resource leveraging: Not used as match for other funding; state funding is also used for this service, and private pay is an option; no client fees; program participates in Medicaid waiver program.

Staff comment: Are services for participants who have Medicaid waiver billed only to the waiver and not to this contract? If billed to both, what are the circumstances, and are there limits? More details would be helpful regarding IEP involvement, including how it is funded and specific activities/staff.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: Known due to prior experience funding the agency.

If applicable, audit findings: PY2023 agency audit was submitted 12/13/23, with no findings of concern; unspent revenue of \$68,859 was returned (of original contract amount of \$468,000.)

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed on February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: Yes, though care should be taken to avoid Medicaid supplementation and duplicating services related to IEPs, making most efficient use of DDB funds.

Coordinated system: Yes. A primary role of the program.

Written collaborative agreements: CCRPC DD Services Program, Prairieland ISC, Community Choices, CRIS Healthy Aging Center, Family Service, PACE, Promise Healthcare, RACES, Rosecrance.

Referral between providers: Yes. Identifies referral collaborators. A featured service of the program, so that a measure of # and success of referrals might be interesting.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: clarify program-specific expenses (as noted in Financial Analysis above).*
- *New special provision: defined role in IEP participation, if needed; parameters on use of this fund for participants who have Medicaid waiver funding for the service.*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Inclusive Community Support

Agency: Community Choices, Inc.

Request: \$213,000

Why it matters: "... to support adults with I/DD to design, build, and maintain their own personalized "Home Life". We assist with all aspects of Community Living and Support including finding and maintaining a home and coaching related to the skills and routines that allow day to day living to be sustained."

Selected priority: Home Life

Staff comment: aligned with the selected priority as well as Personal Life and Community Life priorities

Services and People Served

Who will benefit: people with I/DD who desire to live in the community, family members who will be able to step back from their roles as intensive logistics coordinators for their adult children... those who need a mid-level of support to achieve their community living goals.

Scope of services: Flexible, personalized supports, based on in-depth planning... as a person needs to make their community-based life possible... We offer families the opportunity to shift the roles they play in their adults' life and allow those without robust natural supports the option of community-based living. Supports may be for Housing, Skills, Connections, Resource Coordination, Benefits & Budget Management, Health, Daily Life Coordination, Comprehensive Home-Based Support (HBS) Administration.

After the planning process, participants and their families, if involved... choose one of three tracks of support:

1) Family-Driven Support;

2) Sustained Community Supports - Ala Carte Services (e.g., routine support such as health management or short-term skill building support such as 1:1 bus training, or cooking); and

3) HBS Basic Self-Direction Assistance (SDA) (waiver funded rather than charged to DDB).

Program Design... support provided by a team up to 5 times per week.

Personal Development Classes... on topics such as cooking, transportation, community and home safety, friendship building, and others.

Location and frequency of services: Inclusive Community Supports are in participants' homes and community locations of their choice. Virtual options are available, CC has individualized training and how-to guides for use with program participants. Services are usually available 5 days/week.

Staff comment: this request is for funding for a longstanding program.

Residency of 32 people served in PY23 and 29 in the first half of PY24:

Champaign	19 for PY23	18 for PY24
Urbana	6 for PY23	6 for PY24
Rantoul	1 for PY23	1 for PY24
Mahomet	2 for PY23	2 for PY24
Other	4 for PY23	2 for PY24

Demographics of 32 people served during PY23:

Age	
Ages 19-59 -----	32
Race	
White -----	22
Black / AA -----	6

Asian / PI -----	3
Other (incl. Native American, Bi-racial)-	1
Gender	
Male -----	25
Female -----	7
Ethnicity	
Not of Hispanic/Latino/a Origin -----	32

Measures of Client/Participant Access

Eligibility criteria and determination: adults with I/DD (per state), enrolled on PUNS, who have the desire to live on their own and ability to be by themselves majority of the day OR who are interested in gaining skills; PUNS screening, along with meeting with program staff to determine if the program is a good fit.

Outreach to eligible people: many referral sources (schools, word of mouth, other agencies); outreach through community events

Within 14 days of referral, 90% of those referred will be assessed.

Within 60 days of assessment, 90% of those assessed will engage in services.

People will engage in services, on average, for: support tailored to the person, a few weeks or ongoing; classes are 6-8 weeks.

Additional demographic data: Medicaid RIN, PUNS eligibility, medical insurance, involvement with other agencies' services.

Staff comment: wait times are reasonable given program capacity.

Measures of Client/Participant Outcomes

Outcomes and targets:

1-FAMILY SUPPORT AND PLANNING (Annual Check-In)

- a- Families feel that they have an achievable long-term plan for sustainable community living.
- b-... indicate a decrease in time spent providing daily living support.
- c-... indicate an increase in their quality of life.
- d-... indicate ICS has supported their person to achieve desired housing and build natural supports, skills, and connections.

2-HOUSING, LEARNING, CONNECTING

- a- HOUSING (Annual Check-In)
 - i-95% of participants maintain stable housing.
 - ii-85% of participants indicate they are satisfied with their housing.
 - iii-50% of participants indicate ICS has been helpful in finding/sustaining preferred housing.
- b- LEARNING (Annual Check-In/Quarterly Updates)
 - i-90% of participants develop the skills they identified as critical for community living.
 - ii-90% of participants indicate that Inclusive Community Supports have been helpful in skill building.
- c- CONNECTING (Annual Check-In/Quarterly Updates)
 - i-90% of participants identifying a desire to build connections, find belonging with people, places, or groups in their community.
 - ii-80% of participants indicate ISC has been helpful to their building community connections.
 - iii-100% of participants have people and places where they are comfortable.

3-PERSONAL OUTCOME MEASURES (Annual Check-In; Score compared to initial POM)

- a- 90% of participants increase their POM scores in targeted outcomes.
- b- 90% of participants increase their POM Supports present for targeted outcomes.

4-PERSONAL DEVELOPMENT CLASSES (6-8 week courses)

a- 100% of participants will indicate growth/skill development based on course assessments.

Specific assessment tools and data collection:

1a - INITIAL FAMILY EVALUATION FORM - Self-Report measure given to all families after intake meeting.

1b, 1c, and 1d - ANNUAL FAMILY EVALUATION FORM - Self-report measure given to all families 12 months following their intake and annually thereafter.

2ai - QUARTERLY CHECK-INS /QUARTERLY NARRATIVE REPORTS... by case workers summarizing case notes and participants' progress with their goals over the course of the quarter.

2aii, 2aiii, 2bii, 2cii, and 2ciii - INDEPENDENT LIVING SKILLS CHECKLIST (ILSC)... critical community-living skills, self-efficacy measures, and participant experience questions reviewed with each participant at intake and annually thereafter.

2ai, 2bi, and 2ci- ACTION PLAN - A staff-drafted document summarizing the person's self-determined goals and supports provided. Used to guide the quarterly progress records kept in the Quarterly Narrative Reports

3 - PERSONAL OUTCOME MEASURES - A highly regarded assessment tool developed by CQL to determine the presence of key life outcomes and support toward those outcomes. Agency tracks specific outcomes.

Interview style assessment scored to create a quantitative measurement, completed w/ participants annually.

4 - CLASS PRE/POST EVALUATIONS... to assess course objectives for each class. Effort is taken to collect pre and post class data for all participants.

Outcome data gathered from all participants: Yes

Will collect outcome data annual assessments; formative assessment on self-determined goals quarterly.

Staff comment: highly detailed section, with acknowledgement that personal progress can be slow and varied.

Measures of Utilization

Treatment Plan Clients (TPCs): 30

Non-Treatment Plan Clients (NTPCs): 18

Community Service Events (CSEs): 4

Service Contacts (SCs): total 2063: 1763 Inclusive Community Support contacts; 300 Class contacts.

Other: total 2878 staff hours directly supporting people with I/DD total: 1798 hours Inclusive Community Support; 200 hours Personal Development Classes.

Staff comment: Service contacts and service hours associated with TPCs are documented in online reporting system. Program provided 2,103 hours of service to TPCs during PY23. The proposal is to increase NTPC and SC targets and maintain TPC and CSE at PY24 levels.

PY25 Targets	30 TPCs	18 NTPCs	2063 SCs	4 CSEs	2878 Other (hours)
PY24 First Two Quarters (per submitted Service Activity Reports)					
First Quarter	29	3	513	3	134
Second Quarter	0	10	467	4	456
<i>Annual Targets</i>	<i>30 TPCs</i>	<i>15 NTPCs</i>	<i>2023 SCs</i>	<i>4 CSEs</i>	<i>Other (hours)</i>
PY23 All Four Quarters (per submitted Service Activity Reports)					
First Quarter	24	11	334	2	47
Second Quarter	3	3	388	4	115
Third Quarter	3	4	598	0	84
Fourth Quarter	2	2	610	3	59
<i>Annual Targets</i>	<i>30 TPCs</i>	<i>15 NTPCs</i>	<i>3539 SCs</i>	<i>4 CSEs</i>	<i>Other (hours)</i>

Financial Analysis

PY2025 CCDDDB request: \$213,000

PY2025 Total program budget: \$213,000

Current year funding (PY2024): \$198,000

Proposed change in funding - PY2024 to PY2025 = 8%

CCDDDB request is for 100% of total program revenue.

Personnel costs of \$183,259 are 86% of the requested amount.

Other expenses are Professional Fees/Consultants \$6,621 (3%), Consumables \$2,720 (1%), General Operating \$5,300 (2%), Occupancy \$9,000 (4%), Conferences/Staff Development \$1,000, and Transportation \$5,100 (2%).

Total agency budget has a surplus of \$8,582, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: 0.27 Indirect + 2.78 Direct = 3.05 FTEs.

Total program staff: 0.27 Indirect + 2.78 Direct = 3.05 FTEs.

Staff comment: Indirect staff associated with this program are 7% of the indirect portion (75%) of full-time Executive Director and 20% of the indirect portion (50%) of full-time Associate Director. Direct staff are a full-time Lead Community Support Specialist, 80% of the full-time Community Life Coordinator, 75% of Community Support Specialist, 20% of the direct portion (50%) of Associate Director, and 3% of the direct portion (25%) of full-time Executive Director. Professional Fees will pay for annual financial audit, banking and bookkeeping services, and CQL accreditation. Consumables mentions supplies for individuals living in the community, which may be better charged to Specific Assistance. More information about Staff Development is requested. Local Transportation will pay staff for use of personal vehicles at the federal reimbursement rate.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: outlines clear actions to ensure clients enrolled in their program have a full life with person centered planning and ongoing support for their desires. The Board and Staff receive training annually and review and sign the CLC Plan. A cultural competence assessment will be conducted to ensure that CLC Values are embedded throughout the organization.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes

Highlights from the submitted CLC Progress Report: their community collaboration groups ensure that people living with disabilities are included in the planning and implementation of services in the community. They have participated in a new youth employment program with C-U TRI. The agency's Governing Board has people with lived experience of having a mental illness, substance use disorder, or I/DD or who are the caregiver for such an individual.

Staff comment: continues to utilize innovative practices to ensure that people living with disabilities can have full and meaningful lives. They have expanded their community collaborations to include the Urbana Park District and UIUC to create more opportunities for accessibility.

Criteria for Best Value

Budget and program connectedness: Budget Narrative fully describes: revenues for the total agency, with this contract as the only program revenue; details on program expenses, how they were determined, and items within each category; and the relationship between program activities and staff associated with it, along with how staff costs were calculated (total agency and program specific). Expense amounts agree across forms, but some of the staff costs appear not to match figures in the personnel form.

Participant outcomes (see above for details): participant outcomes are described for each component of the program, with measurable targets, appropriate assessment tools and processes and timeframes.

Self-determination and self-direction in service planning: a focus

Eliminating disparities in access and care (see above for Agency CLC Plan details): services in individuals' homes regardless of location, assist with search for housing in their preferred locations; support to access local resources and build connections; transportation support; outreach events attended by broad scope of people county-wide; resource lists and databases and agency site; relationships with those serving

underrepresented groups - CCRPC, DRS, Housing Authority, churches, CSCNCC, Uniting Pride, Healthcare Consumers, Township Offices, etc.; support to build natural supports/networks within person's community.
Promoting inclusion and reducing stigma: to counter historical/current low access to community-based living options; focus on choice, individualized support, use of community resources and natural supports to fully integrate and include people and give communities access to them.

Continuation of services during public health emergency: some virtual support.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: individualized training and 'how-to guides' (created for CC participants) on the software offer additional virtual supports.

Unique features - approach: Community Support Teams approach; describes and links to DOJ (ADA-Olmstead) statement on community-living and to two articles on the positive impacts of Supportive Housing and Living.

Unique features - staff credentials: new staff will be DSP or QIDP training and/or with undergraduate degrees in fields related to human services; broad range of experience –recreational therapy, rehabilitation counseling, K-12 education, HR, domestic violence services, science, art.

Unique features – resource leveraging: not to be used as match for other funds; no other funding for the program, although some specific supports are billed to the state for people who have waiver funding; people are not asked to pay a fee; describes potential private pay (not yet requested); participates in DD waiver program and is working to become a PSW provider, which will allow billing for additional waiver services.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes

Agency capacity for financial clarity: known due to prior experience funding the agency

If applicable, audit findings: PY2023 agency audit was submitted 01/24/24, with internal control issue relating to small size of the organization (as in prior years, this is understood by the agency's board).

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed on February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: Yes

Coordinated system: Yes – describes how they relate

Written collaborative agreements: PACE, CC Healthcare Consumers, CCRPC, DSC, Urbana Park District, RACES, Experience Champaign Urbana, Continuum of Homeless Service Providers, Uniting Pride of Champaign County, MTD, The Alliance, Queens University (Canada), Champaign Center Partnership (and informal partnerships with CUPHD, UIUC Special Ed Dept, Promise, The Autism Program, CUSR, and Housing Authority)

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: some changes to Expense form; resolve any discrepancies in Personnel costs; if known, clarify Staff Development expense in Budget Narrative.*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Community Living

Agency: DSC

Request: \$615,000

Why it matters: "... to optimize independent living. Most participants reside in their own home or apartment, or in DSC's semi-supported apartment building, C-U Independence (a HUD subsidized, secured apartment building). Participants can also live with their parents/other supporters and receive skill-building training and support as they prepare to move into their own homes in the future..."

Selected priority: Home Life

Services and People Served

Who will benefit: Adults with I/DD and desire/need: to learn or maintain skills within their home or as they prepare to move into a home of their own; to receive ongoing support in areas proving difficult to master; for increased support related to aging or poor health/other chronic conditions jeopardizing independence; or to learn to access resources in their own community.

Scope of services: Based on individual interests identified through the personal plan, self-report, and surveys, may include training, support, and advocacy for:

Life: cooking, cleaning, shopping, dietary/exercise support, hygiene, self-medication, safety, communication and technology, and intermittent crisis support.

Health and Wellness: scheduling/attending annual, routine, and unplanned appointments due to illness/injury; sharing accurate information with medical providers/family members; securing/monitoring medications; and education/advocacy. Health Advocate provides enhanced support for those with emerging medical concerns.

Community: access and participation in social, leisure, and hobby activities; MTD/transportation exploration and training; self-advocacy; securing/moving to a new home; group community activities chosen by the participants, offered for those who choose to attend.

Financial: balancing checkbooks, paying bills, saving/spending money responsibly, budgeting, taxes, and banking are examples of supported activities; representative payee services (for some).

Emergency/Crisis: Response system for after hours and weekends is provided.

Technology: telehealth, accessing electronic medical records, online banking, apps to refill medications, and apps for transportation with and without staff support; training in safety precautions in using such technology; support as individuals express interest in using technology to meet other personal or social needs.

Location and frequency of services: Community sites, participant's home, at locations and times as appropriate to the participant's schedule and priorities; range from a few hours to 40 hours/month; email, phone, and virtual supports; training and use of online banking, benefits, and health records.

Staff comment: The proposal requests funding to continue a current program.

Residency of 76 people served in PY23 and 74 in the first half of PY24:

Champaign	21 for PY23	22 for PY24
Urbana	42 for PY23	40 for PY24
Rantoul	7 for PY23	7 for PY24
Mahomet	1 for PY23	1 for PY24
Other	5 for PY23	4 for PY24

Demographics of 76 people served during PY23:

Age

Ages 19-59 -----	61
Ages 60+ -----	15
Race	
White -----	56
Black / AA -----	17
Asian / PI -----	1
Other (incl. Native American, Bi-racial)-	2
Gender	
Male -----	45
Female -----	31
Ethnicity	
Of Hispanic/Latino/a Origin -----	1
Not of Hispanic/Latino/a Origin -----	75

Measures of Client/Participant Access

Eligibility criteria and determination: I/DD per IDHS, PUNS enrollment. DSC’s Admissions Committee determines if a person meets criteria and if the program is able to provide needed/requested support.

Outreach to eligible people: through various referral sources, word of mouth, community events and groups, intake/admissions activities, website, social media, informational materials.

Within 30 days of referral, 90% of those referred will be assessed.

Within 45 days of assessment, 90% of those assessed will engage in services.

People will engage in services, on average, for: as long as needed and desired.

Additional demographic data: disability, referral source.

Staff comment: Wait times are reasonable.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. 75% of participants will pass monthly housekeeping and safety reviews at 80% or greater.
2. 90% of participants will experience new or maintain community engagements of their choosing.
3. 80% of completed satisfaction surveys will have a score of four points or higher.

Specific assessment tools and data collection:

1. Monthly Housekeeping and Safety Review form and spreadsheet are maintained by program manager.
2. A list of community engagements is maintained by the program manager via staff and participant report.
3. Program Manager and Director of Program Assurance will monitor and record completed surveys.

Outcome data gathered from all participants: Yes.

Will collect outcome data Monthly or quarterly; surveys completed annually.

Staff comment: What is the satisfaction survey (Outcome 3) measuring?

Measures of Utilization

Treatment Plan Clients (TPCs): 78 people with Individual Plans.

Service Contacts (SCs): 6 people screened for program.

Staff comment: Service contacts and service hours associated with TPCs are documented in online reporting system. Program provided 12,023 hours of service to TPCs during PY23. Continues the PY24 targets.

PY25 Targets 78 TPCs 6 SCs

PY24 First Two Quarters (per submitted Service Activity Reports)

First Quarter 72 3

Second Quarter	2	1
<i>Annual Targets</i>	<i>78 TPCs</i>	<i>6 SCs</i>
PY23 All Four Quarters (per submitted Service Activity Reports)		
First Quarter	47	6
Second Quarter	21	2
Third Quarter	5	4
Fourth Quarter	3	3
<i>Annual Targets</i>	<i>64 TPCs</i>	<i>6 SCs</i>

Financial Analysis

PY2025 CCDDDB request: \$615,000

PY2025 Total program budget: \$740,140

Current year funding (PY2024): \$565,480

Proposed change in funding - PY2024 to PY2025 = 9%

CCDDDB request is for 83% of total program revenue.

Other program revenue is from United Way \$45,000 (6%), DHS Fee for Service \$61,184 (8%), and Miscellaneous \$18,949 (3%).

Personnel costs of \$544,672 are 89% of the requested amount.

Other expenses are Professional Fees/Consultants \$5,741, Consumables \$4,836, General Operating \$8,594 (1%), Occupancy \$7,624 (1%), Conferences/Staff Development \$1,628, Local Transportation \$24,642 (4%), Equipment \$1,516, Lease/Rental \$7,125 (1%), Membership Dues \$2,689, and Miscellaneous \$6,293 (1%).

Total agency budget has a deficit of \$109,133, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: 1.01 Indirect + 9.17 Direct = 10.18 FTEs.

Total program staff: 1.20 Indirect + 11.04 Direct = 12.24 FTEs.

Staff comment: This request is related to a large program so that portions of many staff are assigned. Indirect staff include: 6% of 12 full-time positions - HR Manager, 2 AP Associates, 3 Office Support Professionals, AR Associate, Accounting Manager, Executive Assistant (vacant), VP Human Resources, Payroll Coordinator, and Training Coordinator; 5% of 90% of the Director of Program Assurance; 5% of CEO; 4% of 80% of Exec VP of Support Services; 4% of part-time Accounting Assistant (vacant); 3% of full time Maintenance Worker and Maintenance Tech; 2% of part time Bldg Grounds Manager and Maintenance Tech; and 1% of 25% of full time Executive VP of Clinical Services. Direct staff include: 83% of 8 full time Community Living Specialists (one vacant), 1 Community Living Manager, and 1 Health Advocate CLP; 54% of full-time Director of Residential; 32% of part-time CU Relief Staff; and 1% of part-time Residential Bldg Manager.

The increased request reflects an average salary increase for DSPs of 7.5% and an organization-wide salary increase of 6.5%, plus the resulting increase in associated payroll taxes, in addition to other inflationary increases in expenses. Proper assessment and analysis of the financial forms is difficult due to how the forms were presented. The Budget Narrative references a "General Agency Expense" section, in which it appears that many different agency-wide expense categories are prorated and allocated to the program. It is not specified in the financial forms how much, if any, of any given expense category includes an agency-wide prorated allocation. Further descriptions of some of these expense categories are vague, provide no specifics, and are therefore insufficient. The result is financial forms that are unclear. It is also very likely that, as a result of these allocations, this program will be charged for expenses from which the program did not benefit or even utilize. Per the CCDDDB Funding Guidelines, section 6(e)(iii) states that the "organization shall have accounting structures that provide accurate and complete information about all financial transactions related

to each separate CCDDDB contract.” Utilizing an agency-wide cost allocation method is not consistent with this section of the CCDDDB Funding Requirements and Guidelines.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: DSC has a DEI (Diversity Equity and Inclusion) Committee that meets quarterly to look at the goals and actions steps. Meeting minutes outline their plan and actions taken around DEI. DSC conducts on-going surveys with clients and their families about services that are offered and will expand opportunities for people receiving services to be in an advisory capacity in the hiring process, trainings staff, and planning community events.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes

Highlights from the submitted CLC Progress Report: Staff Training will be completed in 3rd and 4th quarters. Prioritized training and support to reduce burnout for staff and compassion fatigue. A monthly DEI Newsletter is shared with staff and board members. Members of the agency’s governing board have lived experience.

Staff comment: DSC is shifting their language around cultural and linguistic competence to include DEI. They have been working with the CLC Coordinator to develop training and support for their board, administration, and direct staff to align with the values and tools for empathy for working with people living with disabilities.

Criteria for Best Value

Budget and program connectedness: The Budget Narrative addresses increased costs, notes that the program expects a deficit in PY25 (related to loss of Intermittent CILA funding for 2 of 3 people), describes other sources of revenue, provides detail on those direct staff to be charged to this contract, and refers to general agency cost allocation info provided in Clinical Services application which itself references the annually reviewed “Allocated Program Expense formula.” Some program-specific expenses could be clarified.

Participant outcomes (see above for details): Measures of participant performance of housekeeping/safety, of community engagement, and of satisfaction with services; use of review form, case notes, survey.

Self-determination and self-direction in service planning: Personal Plan, self-report, surveys.

Eliminating disparities in access and care (see above for Agency CLC Plan details): Referrals from CCRPC Case Managers, Prairieland Service Coordination, other agencies, self, family member. Information shared through Transition Planning Committee, Disability Expo, website, and social media. Services in participant’s homes or preferred community locations, including rural. While in-person services are often most effective, virtual options are available. Outreach to minority populations through schools, community agencies, churches, etc., through involvement with housing coalitions or local events, and by presentations to schools and groups.

Promoting inclusion and reducing stigma: Increasing people’s sense of belonging in their chosen community, emphasis on areas of interest beyond basic needs, encouragement for involvement in community events.

Continuation of services during public health emergency: Phone and virtual support options.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: Yes. For online banking, health, and benefits services, and other, as individuals choose, and new options emerge.

Unique features - approach: Priorities are accessibility and inclusion; quotes ARC article on the importance of home and independence (not linked).

Unique features - staff credentials: Training specific to individuals receiving services; state training (40 hrs classroom and 80 on-the-job); Introduction to Developmental Disability, Human Rights, Human Interaction and Communication, Service Planning, Basic Health & Safety, First Aid/CPR, OIG/Abuse & Neglect; new employee training on Cultural Competence and the agency culture, emphasizing community inclusion and opportunities; annual diversity training; optional webinars from CQL and NADSP. Health Advocate is a CNA and has experience coordinating medical care.

Unique features – resource leveraging: Not to be used as match for other funding; state funding, United Way, and private pay are other revenue; people are not required to pay a fee; those living in CU Independence Apartments pay rent based on income; Medicaid waiver participation (HBS and Intermittent CILA).
Staff comment: More information on the loss of I-CILA funding would be helpful (e.g., whether due to changes internal to the agency or external, state or client.)

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: Known due to prior experience funding the agency.

If applicable, audit findings: PY2023 agency audit was submitted 12/13/23, with no findings of concern; unspent revenue of \$10,261 was returned (of original contract amount of \$536,000.)

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: More information will be helpful.

Coordinated system: Describes similar services and relationship with providers.

Written collaborative agreements: CCRPC Case Managers, CCRPC Permanent Supportive Housing program, Prairieland Service Coordination, Community Choices, CRIS Healthy Aging Center, Family Service, Parkland College OTA Program, and Rosecrance.

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: provide more detail on expenses specific to the program.*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Transportation Support

Agency: Community Choices, Inc.

Request: \$171,000

Why it matters: "... extensively discussed and noted in local and regional needs assessments. We aim to address this need with a personalized and community-focused approach that will allow participants increased ability to access the community. As part of this, we are also emphasizing the ways that technology can be used to support the use of community-transportation options, through training on existing community resources such as MTD, Uber, and Lyft."

Selected priority: Community Life

Services and People Served

Who will benefit: adults with I/DD who have a need to access community locations (for work and more), to reduce barriers (cost, timing, safety)... also supports families who may be default transportation providers.

Scope of services:

TRANSPORTATION COORDINATION AND TRAINING: A dedicated staff person will manage, schedule, and train participants on the use of our transportation options as well as existing options (MTD, Uber, Lyft, etc) and the additional tools, technologies, and apps that can make those options safer and more accessible.

PERSONALIZED DRIVER SERVICES: ... drivers, 8am-8pm on weekdays, provide scheduled rides to members according to their needs and preferences. Rides can be set up (at a minimum the day prior)... for work, routine errands, appointments, community events, trips to meet friends, or any other activity desired by the person. 1:1 rides will be provided by Community Choices staff, known to members, in passenger vehicles typical to those used by the general population. The cost-free rides will be door to door with personalized reminders/arrival confirmations according to the person's needs. Additional group rides will also be made available for Community Choices structured events. Rides will be tracked using a voucher system where each member will have access to a set number of rides each month, with additional vouchers available if certain life events occur, such as obtaining a new job, experiencing an increased medical need, or a change in support from a primary support person etc.

Location and frequency of services: rides to/from any location in the county, based on individuals' requests; meetings and trainings in homes, community sites, or virtual.

Staff comment: New program in PY24, in response to unmet need identified by CC members.

Residency of 25 in the first half of PY24:

Champaign	10 for PY24
Urbana	10 for PY24
Rantoul	1 for PY24
Other	4 for PY24

Measures of Client/Participant Access

Eligibility criteria and determination: adults with I/DD (per state criteria) who are members (engaged in the agency's Connect Department) and who are motivated to share responsibility of working toward outcomes/life they want; PUNS enrollment/screening by ISC and membership intake with Community Choices.

Outreach to eligible people: many referral sources (schools, word of mouth, other agencies); information sharing through community outreach events.

Within 14 days of referral, 90% of those referred will be assessed.

Within 0 days of assessment, 100% of those assessed will engage in services.

People will engage in services, on average, for: membership is for one year, renewable

Additional demographic data: Medicaid RIN, PUNS eligibility, medical insurance, other agencies' services.

Staff comment: Timeframes for service are reasonable.

Measures of Client/Participant Outcomes

Outcomes and targets:

1 - COMMUNITY ACCESS

90% of participants will report increased experiences of community access measures...:

- a - Feeling able to participate in life with family and friends
- b - Able to maintain a job
- c - Able to do things they are interested in
- d - Able take care of basic errands and needs

2 - CONFIDENCE IN COMMUNITY & COMMUNITY TRAVEL

80% of participants will report increased experiences of the following measures of community confidence...:

- a - Confidence/Comfort being in the community
- b - Confidence/Comfort traveling in the community
- c - Knowledge/Confidence using technology related to transportation
- d - Parent comfort with family member traveling in the community

3 - QUALITY OF LIFE

90% of participants will report increased quality of life in the following areas...:

- a - Overall quality of life
- b - Emotional wellbeing/stress
- c - Feeling in control of one's life
- d - Feeling respected and equal to others.

Specific assessment tools and data collection:

For all of the listed outcomes, QUARTERLY TRANSPORTATION USAGE SURVEY after each three months of use. Questions have been developed using a similar model to the article cited on the Voucher Program in Michigan and focus on the three main categories of inquiry listed above... shifted from monthly to quarterly use based on feedback from participants who felt they were repeating themselves too frequently...[hope to] increase response rates. At the end of each quarter, Transportation Coordinator will send the Survey to each participant (and family, if involved) who has used a ride.

Outcome data gathered from all participants: Yes (part of the use agreement with participants)

Will collect outcome data quarterly.

Staff comment: All outcomes relate directly to improved quality of life for program participants.

Measures of Utilization

Non-Treatment Plan Clients (NTPCs): 45 members with I/DD scheduling and using rides.

Community Service Events (CSEs): 4 outreach events promoting the program and the importance of people with I/DD engaged in their communities.

Service Contacts (SCs): 3256 total of: 1560 rides, 1600 scheduling contacts, and 96 training/support contacts.

Other: 1300 staff hours total of: 780 providing rides, 400 scheduling/coordinating, and 120 training/support.

Staff comment: The program provided 532 hours of rides and program support (scheduling, etc.) during PY24 Q1 and Q2. The proposal is to increase the targets for measures of contact and hours and maintain PY24 targets for people served and outreach events.

PY25 Targets 45 NTPCs 3256 SCs 4 CSEs 1300 Other (hours)

PY24 First Two Quarters (per submitted Service Activity Reports)

First Quarter	14	272	6	219
Second Quarter	11	647	3	313
Annual Targets	45 NTPCs	2696 SCs	4 CSEs	1095 Other (hours)

Financial Analysis

PY2025 CCDDDB request: \$171,000

PY2025 Total program budget: \$171,000

Current year funding (PY2024): \$117,697

Proposed change in funding - PY2024 to PY2025 = 45%

CCDDDB request is for 100% of total program revenue.

Personnel costs of \$136,415 are 80% of the requested amount.

Other expenses are Professional Fees/Consultants \$5,320 (3%), Consumables \$2,500 (1%), General Operating \$3,821 (2%), Occupancy \$6,744 (4%), Conferences/Staff Development \$1,000, Local Transportation \$15,000 (9%), and Miscellaneous \$200.

Total agency budget has a surplus of \$8,582, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: 0.12 Indirect + 2.58 Direct = 2.7 FTEs.

Total program staff: 0.12 Indirect + 2.58 Direct = 2.7 FTEs.

Staff comment: Indirect staff associated with this program are 7% of the indirect portion (75%) of the full-time Executive Director and 5% of the indirect portion (50%) of the full-time Associate Director. Direct staff are 100% of a full-time Transportation Coordinator (open as of 7/1/24) and 3 half-time drivers, 5% of the direct portion (50%) of Associate Director, and 3% of the direct portion (25%) of full-time Executive Director. Professional Fees will pay for a CPA firm to perform the annual financial audit, banking and bookkeeping services, and accreditation with CQL. Staff Development includes a defensive driving course for staff. Local Transportation will pay for reimbursement to staff for use of personal vehicles at federal reimbursement rate.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: outlines clear actions to ensure clients enrolled in their program have a full life with person centered planning and ongoing support for their desires. The Board and Staff receive training annually and review and sign the CLC Plan. A cultural competence assessment will be conducted to ensure that CLC Values are embedded throughout the organization.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes

Highlights from the submitted CLC Progress Report: their community collaboration groups ensure that people living with disabilities are included in the planning and implementation of services in the community. They have participated in a new youth employment program with C-U Trauma & Resilience Initiative. The agency's Governing Board has people with lived experience of having a mental illness, substance use disorder, or I/DD or who are the caregiver for such an individual.

Staff comment: continues to utilize innovative practices to ensure that people living with disabilities can have full and meaningful lives. They have expanded their community collaborations to include the Urbana Park District and UIUC to create more opportunities for accessibility.

Criteria for Best Value

Budget and program connectedness: Budget Narrative fully describes: revenues for the total agency, with this contract as the only program revenue; details on program expenses, how they were determined, and items

within each category; and the relationship between program activities and staff associated with it, along with how staff costs were calculated (total agency and program specific). Amounts agree across financial forms.

Participant outcomes (see above for details): participant outcomes in three areas (each with 4 subcategories), with measurable targets, appropriate assessment tools (developed for this program, similar to Michigan Voucher model) and processes and timeframes (revised for PY25 in response to participant feedback).

Self-determination and self-direction in service planning: Rides and schedules are self-directed.

Eliminating disparities in access and care (see above for Agency CLC Plan details): services tailored to individuals regardless of location, plus training in other transportation options available; outreach events attended by broad scope of people county-wide; resource lists and databases and agency site; relationships with organizations connected to underrepresented groups - CCRPC, DRS, Housing Authority, churches, NCCRC, Uniting Pride, Healthcare Consumers, Township Offices, others; support to build natural supports/networks within the person's community.

Promoting inclusion and reducing stigma: increases "the ability to show up" to engage in community and to change the mindset which has segregated people with I/DD by helping them be more present; increases personal confidence and access.

Continuation of services during public health emergency: virtual meetings, in person service

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: not a focus, but meetings and some training can be done virtually.

Unique features - approach: describes and links to 2 articles on positive impact of accessible transportation and to article promoting transportation vouchers (this program addresses some of the challenges reported)

Unique features - staff credentials: for program staff, full new employee training and orientation plus defensive driver course, with safe driver background checks; current agency staff have broad range of experience –human services, DSPs, QIDPs, recreational therapy, special education, K-12 education, HR, domestic violence services, science, art.

Unique features – resource leveraging: not to be used as match for another source of revenue; no other source of funding; people are not asked to pay a fee, may change with demand; not eligible for DD waiver.

Staff comment: Responsive to gap identified by CC members.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes

Agency capacity for financial clarity: known due to prior experience funding the agency.

If applicable, audit findings: PY2023 agency audit was submitted 01/24/24, with internal control issue relating to small size of the organization (as in prior years, this is understood by the agency's board).

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed on February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: Yes, a focus.

Coordinated system: Yes; members may also use other transportation-related resources.

Written collaborative agreements: PACE, CC Healthcare Consumers, CCRPC, DSC, Urbana Park District, RACES, Experience Champaign Urbana, Continuum of Homeless Service Providers, Uniting Pride of Champaign County, MTD, The Alliance, Queens University (Canada), Champaign Center Partnership (and informal partnerships with CUPHD, UIUC Special Ed Dept, Promise, The Autism Program, CUSR, and Housing Authority)

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Clinical Services

Agency: DSC

Request: \$260,000

Why it matters: "... Engaging with qualified professionals sensitive to co-occurring mental health needs of people with I/DD leads to improved quality of life... People with I/DD who experience mental health issues often have their needs go unrecognized or dismissed as an undesired behavior rather than a need for support through therapy. Emphasis is often put on eliminating or minimizing a behavior rather than providing services those without I/DD would receive when presenting similar symptoms or characteristics. Access to mental health and therapy services is critical to the quality-of-life people deserve."

Selected priority: Personal Life

Services and People Served

Who will benefit: People with I/DD residing in Champaign County [who have need for behavioral health support]; Direct Support Professionals (to build skills and confidence specific to serving such people.)

Scope of services:

Staff Support Specialist - staff training/resources to improve behavioral supports and participant engagement. Counseling assessment and planning, individual, family, and group counseling, crisis response/intervention, short-term, long-term counseling.

Initial/annual psychiatric assessment, quarterly medication review.

Individual Planning consultation.

Psychological assessment, including new prospective participants whose eligibility must be established or re-established periodically, and for those whose level of functioning may have changed.

(New for FY25) Occupational Therapy assessment and planning - to support an individual and their team with functional adaptations and activities, sensory regulation options to decrease maladaptive behaviors, and environmental modification suggestions to enable the person to lead a more fulfilling life.

Location and frequency of services: DSC offices, clinician offices, hospital, home, confidential community location, location appropriate in a crisis. Frequency determined by consultants and coordinator. Counseling and individual planning consultation also offered virtually.

Staff comment: The request is for funding to continue a current program, adding OT assessment/planning. People should enroll in PUNS before working with agency, and due to PUNS requirements, it should be unnecessary for this program to secure and pay for psychological assessments.

Residency of 60 people served in PY23 and 65 in the first half of PY24:

Champaign	27 for PY23	32 for PY24
Urbana	24 for PY23	25 for PY24
Rantoul	3 for PY23	2 for PY24
Mahomet	2 for PY23	2 for PY24
Other	4 for PY23	4 for PY24

Demographics of 60 people served during PY23:

Age	
Ages 7-12 -----	1
Ages 13-18 -----	2
Ages 19-59 -----	54

Ages 60+ -----	3
Race	
White -----	50
Black / AA -----	8
Asian / PI -----	1
Other (incl. Native American, Bi-racial)-	1
Gender	
Male -----	38
Female -----	22
Ethnicity	
Of Hispanic/Latino/a Origin -----	1
Not of Hispanic/Latino/a Origin -----	59

Measures of Client/Participant Access

Eligibility criteria and determination: I/DD (established per state rules), seeking services.

Outreach to eligible people: determined by consultants or referring physician/provider

Within 30 days of referral, 90% of those referred will be assessed.

Within 30 days of assessment, 90% of those assessed will engage in services.

People will engage in services, on average, for: as long as needed (per quarterly reviews by consultants)

Additional demographic data: disability, referral source

Staff comment: If need and eligibility are determined by the consulting clinician, there should be a standard for determining continued treatment. A written clinical plan with client-directed goals might limit overservice.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. ... assessment, progress, and frequency of appointments for all people receiving counseling support 100% of the time this fiscal year.
2. DSC Psychiatric Practice will review patient progress at least quarterly and attempt to reduce the number and dosage of psychotropic medications when deemed clinically appropriate and document such attempts in the psychiatric notes 100% of the time this fiscal year.
3. ... annual individual self-assessments regarding effectiveness of clinical services on the person's overall sense of wellbeing 100% of the time this fiscal year.

Specific assessment tools and data collection:

1. Quarterly reviews maintained by the Clinical Coordinator.
2. Psychiatric notes maintained in the individual's electronic record.
3. Assessment, created using resources from the Evaluation Capacity Building Team online measure bank, and completed by those receiving services. - Clinical Coordinator

In most instances, DSC's consulting psychologist administers the Wechsler Adult Intelligence Scale (WAIS).

.... Each participant engaging in counseling is assessed by his or her counselor who determines the number of sessions appropriate for each. Clinicians' quarterly recommendations regarding continuation or termination of services are submitted to Clinical Coordinator... Each person receiving psychiatric services has an initial assessment to determine appropriate interventions and then meets with the psychiatrist as appropriate and is evaluated routinely...OT conducts assessments using a variety of resources including the Adult Sensory Profile, BOT-2, BRIEF, Sensory Integration Inventory- revised for Individuals with DD, and KELS.

Outcome data gathered from all participants: Yes, for outcomes 1 and 2. No for 3.

Will collect outcome data quarterly.

Staff comment: Section includes update on progress for the current year (1. Met, 2. Met. 3. TBD) and detail on all assessment tools in use. The first two outcomes relate indirectly to positive impact on people served, though they measure staff and consultant efforts to document the need for care and to avoid overmedication, both important. The third is a client self-report on wellbeing.

Measures of Utilization

Treatment Plan Clients (TPCs): 65 – people with an Individual Plan (i.e., open in other DSC program).

Non-Treatment Plan Clients (NTPCs): 5 – people receiving support but not having a formal Individual Plan.

Community Service Events (CSEs): 2 – presentations, community group engagement, etc.

Service Contacts (SCs): 10 – communication with people seeking service due to emergency/crisis.

Staff comment: Are NTPCs people who are not otherwise served by the agency? Service contacts and service hours associated with TPCs are documented in online reporting system. Program provided 1,140 hours of service to TPCs during PY23. PY25 targets are similar, but TPC is increased, presumably for OT assessments.

PY25 Targets	65 TPCs	5 NTPCs	10 SCs	2 CSEs	
PY24 First Two Quarters (per submitted Service Activity Reports)					
First Quarter	59	3	7	2	12
Second Quarter	2	1	5	1	8
<i>Annual Targets</i>	<i>59 TPCs</i>	<i>5 NTPCs</i>	<i>10 SCs</i>	<i>2 CSEs</i>	<i>Other (staff hrs not reported with claims)</i>
PY23 All Four Quarters (per submitted Service Activity Reports)					
First Quarter	50	2	2	1	8
Second Quarter	1	0	4	1	8.5
Third Quarter	1	0	2	1	8.25
Fourth Quarter	6	0	7	1	10
<i>Annual Targets</i>	<i>59 TPCs</i>	<i>6 NTPCs</i>	<i>10 SCs</i>	<i>2 CSEs</i>	<i>Other (staff hrs not reported with claims)</i>

Financial Analysis

PY2025 CCDDDB request: \$260,000

PY2025 Total program budget: \$260,976

Current year funding (PY2024): \$241,000

Proposed change in funding - PY2024 to PY2025 = 8%

CCDDDB request is for 99.6% of total program revenue.

Other program revenue is from DHS Fee for Service \$147 and Miscellaneous \$819.

Personnel costs of \$151,555 are 58% of the requested amount.

Other expenses are Professional Fees/Consultants \$98,106 (38%), Consumables \$738, General Operating \$1,370, Occupancy \$2,238, Conferences/Staff Development \$451, Local Transportation \$711, Equipment Purchases \$295, Lease/Rental \$2,086, Membership Dues \$683, Miscellaneous \$1,767.

Total agency budget has a deficit of \$109,133, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: 0.2 Indirect + 1.8 Direct = 2.0 FTEs.

Total program staff: 0.2 Indirect + 1.8 Direct = 2.0 FTEs.

Staff comment: Direct Personnel assigned to the contract are 20% of Clinical Coordinator, 50% of Director of Case Management, 100% of DSP Support Specialist, and 5% of Director of Program Assurance and Exec VP of Clinical Services (all full time). The large Professional Fees expense category includes psychology and counseling consultants, a part time occupational therapist, and an allocation of the agency's accounting, legal, and IT service costs. The Professional Fees category also includes an allocation of the agency's speech language and nursing services, but the budget narrative does not state if these relate directly to this program.

The requested increase is primarily to add a part-time OT consultant, along with covering increased costs and agency-wide salary increases to keep pace with increased DSP wages. Miscellaneous Revenue is an allocation of management fee and other income from Management & General. Proper assessment and analysis of the financial forms is difficult due to how the forms were presented. The Budget Narrative references a “General Agency Expense” section, in which it appears that many different agency-wide expense categories are prorated and allocated to the program. It is not specified in the financial forms how much, if any, of any given expense category includes an agency-wide prorated allocation. Further descriptions of some of these expense categories are vague, provide no specifics, and are therefore insufficient. The result are financial forms that are unclear. It is also very likely that, as a result of these allocations, this program will be charged for expenses from which the program did not benefit or even utilize. Per the CCDDDB Funding Guidelines, section 6(e)(iii) states that the “organization shall have accounting structures that provide accurate and complete information about all financial transactions related to each separate CCDDDB contract.” Utilizing an agency-wide cost allocation method is not consistent with this section of the CCDDDB Funding Requirements and Guidelines.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: DSC has a DEI (Diversity Equity and Inclusion) Committee that meets quarterly to look at the goals and actions steps. Meeting minutes outline their plan and actions taken around DEI. DSC conducts on-going surveys with clients and their families about services that are offered and will expand opportunities for people receiving services to be in an advisory capacity in the hiring process, trainings staff, and planning community events.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes

Highlights from the submitted CLC Progress Report: Staff Training will be completed in 3rd and 4th quarters. Prioritized training and support to reduce burnout for staff and compassion fatigue. A monthly DEI Newsletter is shared with staff and board members. Members of the agency’s governing board have lived experience.

Staff comment: DSC is shifting their language around cultural and linguistic competence to include DEI. They have been working with the CLC Coordinator to develop training and support for their board, administration, and direct staff to align with the values and tools for empathy for working with people living with disabilities.

Criteria for Best Value

Budget and program connectedness: Specific to Clinical are details on each of the direct staff assigned to this contract. The Budget Narrative for this program contains information for the whole agency (relevant to all other applications) and references the annually reviewed “Allocated Program Expense formula”, which has been provided to CCDDDB staff. The largest portion of Miscellaneous is for computer costs (subscriptions and internet access) and fees associated with a particular program are charged to it, but many costs are distributed based on program wages over total direct wages.

Participant outcomes (*see above for details*): One of the outcomes measures whether the participants’ sense of wellbeing is improved by the service, using a tool developed with evaluation team.

Self-determination and self-direction in service planning: unclear how/whether the individual contributes.

Eliminating disparities in access and care (*see above for Agency CLC Plan details*): Outreach through Transition Planning Committee, disability Resource Expo, other providers and agency staff; flexibility in service location; virtual options; connection to transportation resources and direct transportation support; “responsive to individual or family requests regarding cultural preferences and considerations.”

Promoting inclusion and reducing stigma: Notes value of the service, referrals, and expanding provider base.

Continuation of services during public health emergency: Some virtual options.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: Not a focus of the program.

Unique features - approach: Cites and links to “The Mental Health Crisis of Individuals with Intellection and Developmental Disabilities” and “Occupational Therapy Practice with Adults with Intellectual Disability: What more can we do?”

Unique features - staff credentials: Consultants are Licensed Clinical Social Workers, Licensed Clinical Professional Counselors, Licensed Professional Counselors, psychologist, and a psychiatrist. Plan to add OT.

Unique features – resource leveraging: Not used as match for other funding; no other pay sources support this program though people are referred to providers who bill public or private insurance; participants do not pay a fee; program does not participate in Medicaid, though services would be covered for some participants, which is why the program makes and reports on efforts to connect clients to Medicaid participating providers.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: Known due to prior experience funding the agency.

If applicable, audit findings: PY2023 agency audit was submitted 12/13/23, with no findings of concern; unspent revenue of \$22,924 was returned (original contract amount was \$184,000.)

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: Yes, efforts to refer to community providers is documented in Quarterly Reports; more such successes would allow the program to serve new people.

Coordinated system: Refers people to other community providers, referrals are noted in Quarterly Reports.

Written collaborative agreements: CCRPC’s DD Services Program; Child and Family Counseling; Creative Solutions – Pamela Wendt; Dr. Martin Repetto, MD; Elliott Counseling Group; Family Service of Champaign County; Jamie Stevens Counseling Services LLC; Lindsay Moore/Align Counseling & Wellness; Michael Kleppin, LCP; Prairieland Service Coordination, Inc.; Promise Healthcare; Rosecrance; Kyla Woods, MS., BCBA

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: revise financial forms to include program-specific details and amounts (see above); because the budget narrative submitted for this program details total agency allocation, clarifications related to other contracts may also be needed here; a related concern is purchase of medications, possibly not relevant to all programs and for which client insurance should be used first.*
- *New special provisions: any purchase made on a client’s behalf, including medication, should be supported by documented insurance refusal and prior approval of CCDDDB staff; align quarterly clinicians’ reevaluation of need for services with Medicaid standards and, for clients who do have coverage, provide justification for the use of providers not billing the other payer.*
- *Because this program responds to a national crisis in care for people with I/DD and behavioral health support needs, the agency should inform the CCDDDB of opportunities to advocate for system change.*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Individual and Family Support

Agency: DSC

Request: \$308,000

Why it matters: "... to keep families intact and reduce crises... The Resource Coordinator, supported by this grant, prioritizes education, guidance and support for individuals with needs and interests related to Advocacy, Human Rights, and Sexuality..."

Selected priority: Personal Life

Services and People Served

Who will benefit: Those seeking personal care, respite, behavioral supports, transportation, and community access/participation... people with I/DD, including those with behavioral, medical, or other support needs.

Scope of services: Less restrictive, more individualized care than state funded programs; traditional respite; CUSR camps, after-school programs, and summer camps with specialized supports; YMCA and fitness club memberships; overnight trips to conferences; social skills training; home modifications; and therapy/sensory/accessibility equipment not funded by insurance.

The need for flexible respite services remains high... [response to] input from adults interested in expanding their knowledge, skills, and interests in areas such as human rights, sexuality, and advocacy. Advocates have been able to explore their interests and expand their roles in these areas with increased engagement, empowerment, and community involvement... desire for more opportunities both in person and virtually... to learn more about advocacy at the local and state level and they are looking for training opportunities to build upon their skills in speaking to other advocates, local boards, students, and legislators.

Location and frequency of services: Flexible in location, per primary caregiver; flexible in frequency due to variety of supports, in person and virtual options, educational and networking opportunities online.

Staff comment: The proposal requests funding to continue a current program with Resource Coordinator activities added in PY24; home modifications and equipment purchases have been discouraged, in favor of meeting direct support needs; the proposal contains more detail, including on the rationale for these services.

Residency of 40 people served in PY23 and 35 in the first half of PY24:

Champaign	23 for PY23	24 for PY24
Urbana	5 for PY23	2 for PY24
Mahomet	6 for PY23	5 for PY24
Other	6 for PY23	4 for PY24

Demographics of 40 people served during PY23:

Age		
Ages 0-6	-----	7
Ages 7-12	-----	8
Ages 13-18	-----	13
Ages 19-59	-----	12
Race		
White	-----	28
Black / AA	-----	4
Asian / PI	-----	6
Other (incl. Native American, Bi-racial)-		2

GenderMale ----- **27**Female ----- **13****Ethnicity**Of Hispanic/Latino/a Origin ----- **1**Not of Hispanic/Latino/a Origin ----- **39**

Measures of Client/Participant Access

Eligibility criteria and determination: People over 3 years of age who have I/DD (per state) and are enrolled in PUNS; those under 3 years of age with delay or risk of delay. DSC’s Admissions Committee determines if the person meets criteria and if the program is able to provide the needed/requested support.

Outreach to eligible people: Many referral sources (support groups, physicians, agencies, schools, self, family); info through word of mouth, community events and groups, intake/admissions activities, website and social media, other materials, and agency is willing to speak to classes, groups, etc. to promote the program.

Within 30 days of referral, 90% of those referred will be assessed.

Within 60 days of assessment, 80% of those assessed will engage in services.

People will engage in services, on average, for: As long as needed (utilization monitored quarterly).

Additional demographic data: N/A

Staff comment: Wait times are reasonable given any potential program wait lists.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. 20 individuals will actively participate in educational opportunities and advocacy efforts to include community and virtual options during the fiscal year.
2. 90% of families receiving IFS Respite will be satisfied with services annually.

Specific assessment tools and data collection:

1. Resource Coordinator will document # opportunities presented and mode of access.
2. Survey... to all families receiving respite supports. Resource Coordinator and Director of Program Assurance will evaluate and respond to surveys.

Outcome data gathered from all participants: Yes.

Will collect outcome data Quarterly (though surveys are done annually).

Staff comment: The proposal includes mid-year progress for outcome #1 (on track) and notes that surveys (#2) are yet to be conducted, continues the PY24 outcomes and targets for PY25.

Measures of Utilization

Treatment Plan Clients (TPCs): 40 using IFS direct support.

Non-Treatment Plan Clients (NTPCs): 20 participating in activities facilitated by Resource Coordinator.

Community Service Events (CSEs): 3 presentations/events.

Service Contacts (SCs): 8 people presented to Admissions Committee.

Staff comment: Service contacts and service hours associated with TPCs are documented in online reporting system. Program provided 8,714 hours of service to TPCs during PY23. Proposal is to increase the TPC target and continue the others at PY24 levels.

PY25 Targets	40 TPCs	20 NTPCs	8 SCs	2 CSEs
PY24 First Two Quarters (per submitted Service Activity Reports)				
First Quarter	35	12	4	2
Second Quarter	0	2	0	1
Annual Targets	30 TPCs	20 NTPCs	8 SCs	3 CSEs

PY23 All Four Quarters (per submitted Service Activity Reports)

First Quarter	9	27	5	1
Second Quarter	0	0	0	1
Third Quarter	2	1	7	1
Fourth Quarter	0	1	3	1
<i>Annual Targets</i>	<i>19 TPCs</i>	<i>27 NTPCs</i>	<i>8 SCs</i>	<i>2 CSEs</i>

Financial Analysis

PY2025 CCDDDB request: \$308,000

PY2025 Total program budget: \$309,780

Current year funding (PY2024): \$250,000

Proposed change in funding - PY2024 to PY2025 = 23%

CCDDDB request is for 99% of total program revenue.

Other program revenue is from DHS Fee for Service \$275, Program Service Fees \$3, and Miscellaneous \$1,502.

Personnel costs of \$261,903 are 85% of the requested amount.

Other expenses are Professional Fees/Consultants \$2,716, Client Wages/Benefits \$1,317, Consumables \$4,963 (2%), General Operating \$1,751, Occupancy \$828, Conferences/Staff Development \$5,011 (2%), Local Transportation \$938, Specific Assistance \$22,868 (74%), Equipment Purchases \$540, Lease/Rental \$971, Membership Dues \$1,279, Miscellaneous \$2,915.

Total agency budget has a deficit of \$109,133, total program a deficit of \$772, CCDDDB budget balanced.

Program staff to be funded by CCDDDB: 0.45 Indirect + 4.89 Direct = 5.34 FTEs.

Total program staff: 0.45 Indirect + 4.92 Direct = 5.37 FTEs.

Staff comment: Direct staff to be supported through this contract are: 99% of the full-time Resource Coordinator, 5% of 10% of the Director of Program Assurance, and 3.85 total equivalent of Part Time IFS Respite providers. Indirect staff to be charged consist of: 3% of 12 various full-time positions, 2% of CEO and of indirect portions of full time Director of Program Assurance and Exec VP of Support Services, and of part time Accounting Assistant (vacant), and 1% of the indirect portion (25%) of full time Exec VP of Clinical Services.

The increased request reflects an average salary increase for DSPs of 7.5% and an organization-wide salary increase of 6.5%, plus the resulting increase in associated payroll taxes, in addition to other inflationary increases in expenses. Specific Assistance will pay for items or services utilized by clients and their families. \$10,000 is budgeted for advocacy costs and is split between Client Wages (\$1,325), Consumables (\$3,475), Transportation (\$700), and Conferences (\$4,500). Further clarification of Consumables and Conferences expenses is needed. Proper assessment and analysis of the financial forms is difficult due to how the forms were presented. The Budget Narrative references a "General Agency Expense" section, in which it appears that many different agency-wide expense categories are prorated and allocated to the program. It is not specified in the financial forms how much, if any, of any given expense category includes an agency-wide prorated allocation. Further descriptions of some of these expense categories are vague, provide no specifics, and are therefore insufficient. The result are financial forms that are unclear. It is also very likely that, as a result of these allocations, this program will be charged for expenses from which the program did not benefit or even utilize. Per the CCDDDB Funding Guidelines, section 6(e)(iii) states that the "organization shall have accounting structures that provide accurate and complete information about all financial transactions related to each separate CCDDDB contract." Utilizing an agency-wide cost allocation method is not consistent with this section of the CCDDDB Funding Guidelines.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: DSC has a DEI (Diversity Equity and Inclusion) Committee that meets quarterly to look at the goals and actions steps. Meeting minutes outline their plan and actions taken around DEI. DSC conducts on-going surveys with clients and their families about services that are offered and will expand opportunities for people receiving services to be in an advisory capacity in the hiring process, trainings staff, and planning community events.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes

Highlights from the submitted CLC Progress Report: Staff Training will be completed in 3rd and 4th quarters. Prioritized training and support to reduce burnout for staff and compassion fatigue. A monthly DEI Newsletter is shared with staff and board members. Members of the agency's governing board have lived experience.

Staff comment: DSC is shifting their language around cultural and linguistic competence to include DEI. They have been working with the CLC Coordinator to develop training and support for their board, administration, and direct staff to align with the values and tools for empathy for working with people living with disabilities.

Criteria for Best Value

Budget and program connectedness: The Budget Narrative describes increased costs for the program (addition of \$30k for part time respite wages) and for total agency, the roles of direct program staff, expense categories related to advocacy (Consumables, Transportation, and Conference) and to specific assistance (purchases for clients). It refers to general agency cost allocation information provided in the Clinical Services application which itself references the annually reviewed "Allocated Program Expense formula," a separate document provided to CCDDDB staff.

Participant outcomes (*see above for details*): One measures participant/family satisfaction with the services, and the other is a measure of engagement with additional program activities (also reported as NTPCs).

Self-determination and self-direction in service planning: Model is not specified; the support for self-advocates which was added in PY24 is an opportunity to engage people more actively in their planning.

Eliminating disparities in access and care (*see above for Agency CLC Plan details*): Offered county-wide, with outreach through individuals, parents, ISCs, other agencies; information shared at neighborhood events, IEPs, other community engagements where members of minority populations are present; services based on choice, in community and home locations with some virtual options.

Promoting inclusion and reducing stigma: Increased community involvement, one on one support to increase caregiver confidence and connection, educational opportunities, and advocacy support.

Continuation of services during public health emergency: virtual options.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: Yes, a goal to continue building online tools.

Unique features - approach: Describes and links to a paper on Clinical Center for the Study of Development and Learning on self-determination; describes National Academy for State Health Policy report on benefits of family and self-directed respite.

Unique features - staff credentials: DSP training, including Introduction to Developmental Disabilities, Human Rights, Abuse and Neglect Recognition, Prevention and Intervention, Human Interactions and Communication, and Basic Health and Safety. HIPAA/Confidentiality, OIG, Basic Health and Safety, family member participation in staff training to support their loved one. Candidates should be culturally responsive and open to individualized training specific to the person and family they will be supporting.

Unique features – resource leveraging: Not match for other funding; refers people to state-funded respite, but they can also use this program's more flexible direct support; no other major sources of revenue; no client fees; not funded through Medicaid waiver, though the agency participates in waiver programs.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: Known due to prior experience funding the agency.

If applicable, audit findings: PY2023 agency audit was submitted 12/13/23, with no findings of concern; unspent revenue of \$54,893 was returned (of original contract maximum of \$390,000.)

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: Not specified.

Coordinated system: Yes.

Written collaborative agreements: Illinois Self-Advocacy Alliance, PACE.

Referral between providers: Yes, importantly to providers of state-funded, traditional respite.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: clarify Consumables and Conferences expenses.*
- *New special provision: collaborate with IDDSI program (if funded) on specific assistance purchases to avoid duplication; present all purchase requests to CCDDDB staff for review and approval and align the process with IDHS-DDD purchasing requirements.*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Consumer Control in Personal Support

Agency: PACE, Inc.

Request: \$45,972

Why it matters: "...supports the consumers with I/DD during their PSW search and when choosing, interviewing, and selecting PSWs. ...assists consumers with I/DD in achieving their goals to gain more independence and live in the environment of their choosing. Consumers with I/DD are in control of their services. ...supports consumers and PSWs by providing instructions, guidance and trainings on how to utilize technologies to receive trainings and connect with PSWs. ...services to access potential PSWs and offers guidance on how to improve employer and employee relationships and additional trainings to continue to improve the relationship."

Selected priority: Personal Life

Staff comment: request continues funding for a 5th year. Also aligns with Workforce priority.

Services and People Served

Who will benefit: Consumers with I/DD searching for PSWs benefit from a choice of specially trained workers. Those recruited and added to the PSW registry may be seeking their first job as a PSW for consumers with I/DD or have worked PSWs and now want to be employed by other consumers. They may be underemployed/unemployed, have worked in healthcare or education, looking for a job that makes a difference, or have personal connections to I/DD.

Scope of services: The agency offers comprehensive supports across many disability types, using the Independent Living philosophy and associated tools. Program offers support and guidance in a consumer with I/DD's search for PSWs, including recruitment of new PSWs, registry, referrals, management support, technology assistance, or other support related to the search. Consumers are offered quarterly independent living trainings and opportunities to connect with PSWs.

For PSW candidates, orientation in person, online, and/or over the phone, post-orientation quiz, and background checks (Illinois and National Sex Offender, Healthcare Registry, and CANTS).

Orientation to ensure the PSWs understand and honor the IL philosophy: tasks, avoiding stigma (IL Philosophy), encouraging inclusion/integration, I/DD-MI, and avoiding fraud, abuse, neglect, and exploitation. Support for consumer and PSW in navigating the online platform, completing information, follow up, information, data entry, accuracy in communication, and matching.

Location and frequency of services: office in Urbana; orientations in person, online, or phone – at least monthly; update calls and emails primarily completed at PACE office.

Staff comment: This section of the application includes more detail and the need for robust recruitment efforts to make up for the decline in workers.

Residency of 33 people served in PY23 and 7 in the first half of PY24:

Champaign	11 for PY23	2 for PY24
Urbana	11 for PY23	2 for PY24
Rantoul	2 for PY23	1 for PY24
Other	7 for PY23	2 for PY24

Demographics of 33 people served during PY23:

Age
Ages 19-59 ----- **29**

Ages 60+ -----	4
Race	
White -----	10
Black / AA -----	21
Asian / PI -----	1
Other (incl. Native American, Bi-racial)-	1
Gender	
Male -----	8
Female -----	25
Ethnicity	
Of Hispanic/Latino/a Origin -----	1
Not of Hispanic/Latino/a Origin -----	32

Measures of Client/Participant Access

Eligibility criteria and determination: those seeking to be added to PSW registry must pass background checks, be seeking work in Champaign County, give complete and accurate information on datasheet, and keep contact information up to date. Consumers with I/DD can contact PACE to initiate PSW services, must complete intake process (PACE’s releases, acceptance of the PSW services, PSW preferences.)

Outreach to eligible people: website and social media, online Job Boards, potential ad in local newspapers, word-of-mouth, agency partners, publicly posted flyers, job fair when possible.

Within 30 days of referral, 85% of those referred will be assessed.

Within 60 days of assessment, 85% of those assessed will engage in services.

People will engage in services, on average, for: 180 days

Additional demographic data: consumer name, address, phone, disability status, referral source, veteran status, voter registration status.

Staff comment: the application does not define I/DD eligibility criteria (= eligible for PUNS). Program targets people interested in being PSWs, working for those with I/DD. Program maintains PSW register available to people with I/DD seeking PSWs. Wait times are reasonable.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. # attending orientations, 30 PSWs added to the registry.
2. 20 community events, orientations, program outreach
3. 9 PSWs hired and matched with consumers.
4. # utilizing PACE's PSW referral service and set of referrals shared with consumers, 250 service contacts
5. A quarterly PSW advisory is held for consumers and PSWs for program feedback.

Specific assessment tools and data collection:

1. Sign in sheets at orientations, NTPCs receiving information about program at other CSEs, CCDDDB website, event tracker.
2. CILsFirst database, PACE Event Tracker
3. Consumer Service Records of these TPCs being served with funds provided by DHS. Each PSW and consumers successfully matched will be reported in the CCDDDB website throughout FY25.
4. PSW registry and Consumer Service Records.
5. Consumer Service Records, annual State Independent Living Counsel (SILC) Satisfaction Survey

Outcome data gathered from all participants: Yes.

Will collect outcome data during each visit, at least quarterly

Staff comment: 4 of the 5 listed outcomes, while measurable and associated with specific targets and assessment processes, are redundant to the Utilization measures (see below) and not directly focused on the positive impact on consumers. The 5th outcome is focused this way and associated with appropriate assessment tools, though a measurable target is not included.

Measures of Utilization

Non-Treatment Plan Clients (NTPCs): 30 people completing PSW orientation, paperwork, background checks

Community Service Events (CSEs): 20 community events, job fairs, PSW orientations, PSW advisories, groups

Service Contacts (SCs): 250 contacts with NTPCs, with information and updates.

Other: 9 successful matches of a person with I/DD and a PSW – will also report on referrals

Staff comment: Claims for PSWs are entered into the online reporting system. Successful PSW matches are also entered as claims in the Online Reporting System. Program had 9 Successful PSW matches in PY23.

Current targets are to continue for PY25 (a typo in the application, “CSE” instead of “SC”).

PY25 Targets	30 NTPCs	250 SCs	20 CSEs	9 Other
PY24 First Two Quarters (per submitted Service Activity Reports)				
First Quarter	25	50	7	4
Second Quarter	4	45	6	0
<i>Annual Targets</i>	<i>30 NTPCs</i>	<i>250 SCs</i>	<i>20 CSEs</i>	<i>9 Other</i>
PY23 All Four Quarters (per submitted Service Activity Reports)				
First Quarter	56	105	7	4
Second Quarter	4	93	6	4
Third Quarter	12	72	10	2
Fourth Quarter	9	45	5	2
<i>Annual Targets</i>	<i>65 NTPCs</i>	<i>200 SCs</i>	<i>15 CSEs</i>	<i>6 Other</i>

Financial Analysis

PY2025 CCDDDB request: \$45,972

PY2025 Total program budget: \$45,972

Current year funding (PY2024): \$36,000

Proposed change in funding - PY2024 to PY2025 = 28%

CCDDDB request is for 100% of total program revenue.

Personnel costs of \$25,233 are 55% of the requested amount.

Other expenses are Professional Fees/Consultants \$1,500 (3%), Consumables \$325, General Operating \$1,000 (2%), Occupancy \$1,413 (3%), Conferences/Staff Development \$150, Local Transportation \$375, Lease/Rental \$3,500, Membership Dues \$350, and Miscellaneous \$12,126 (26%).

Total agency budget has a surplus of \$26,299, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: 0.8 Direct FTEs.

Total program staff: 0.8 Direct FTEs.

Staff comment: Personnel to be assigned to the contract are all classified as direct staff and include: 25% of the full-time PA/PSW Specialist, 50% of the half-time PA/PSW Coordinator, and 5% of the full-time Program Director; while these total .8 FTE, there appears to be an error due to half of half-time, so that the correct amount is likely 0.55 FTE. An error also exists in the Expense Form. A statement in the Participant Outcomes section explains that the increase is to offer incentive payments for people to complete PSW orientations (though it states “FY24”, assume it means “FY25”), however, it is unclear from which budget line those payments will be made, and what the projected total cost will be. Professional Fees include a portion of the total agency audit cost, interpreter services, and legal fees. The large Miscellaneous expense includes

allocated indirect costs and possibly also the incentive payments – clarification is needed. Membership Dues will pay for association dues to the Illinois Network of Centers for Independent Living (INCIL). It is unclear if Local Transportation will be directly reimbursing employees for use of personal vehicles or to operate and maintain PACE's own vehicles. More information is needed about specific conferences/trainings in which the program will be participating.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: Agency staff will have annual training on Deaf Culture, Racial Justice Inequity Racial Justice Inequity, Race and Disability. A template is being created to help with Board Diversity to build a diverse board. PACE has a Diversity Advisory Committee that reports information about the board make up to ensure balanced participation. All staff members read and sign the CLC Plan Annually.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes

Highlights from the submitted CLC Progress Report: on-going community engagement by providing Braille and ASL Classes for community members, which promotes inclusion of the importance of language access in the community; instituted a CLC Tracker form to ensure that staff will report their CLC Activities, and they have tangible examples of ways they are increasing their engagement with “all” populations; staff have attended several training sessions around wellness and culture for persons living with disabilities; the agency's Governing Board has people with lived experience of having a mental illness, substance use disorder, or I/DD or who are the caregiver for such an individual.

Staff comment: Continues to utilize innovative practices to ensure that people living with disabilities can live independently with support that is needed to live a meaningful life. Reported on the changes they are using to capture CLC activities and how to incorporate involvement from consumers at their advisory meetings.

Criteria for Best Value

Budget and program connectedness: Budget Narrative offers detail on all agency revenues and expenses, then describes costs to be charged to this contract (though some clarifications are needed) and provides an explanation of the Miscellaneous expense which includes allocation of management and general expenses, per the agency's cost rate agreement with US Dept of HHS (27.7%). Personnel form includes information about all agency staff who, while not charged to the contract, are involved with indirect activities; this information is consistent with the budget narrative, which does tend to clarify that the PA/PSW is a half-time position, for which half (10 hours/week) is to be charged to this contract.

Participant outcomes (see above for details): one outcome measures consumer and PSW satisfaction with the service and is associated with assessment tool in use by Centers for Independent Living.

Self-determination and self-direction in service planning: not a focus, but the agency has used a planning tool developed by National Centers for Independent Living, and the proposal supports consumer choice in staffing.

Eliminating disparities in access and care (see above for Agency CLC Plan details): partners with organizations and schools serving rural areas, shares info about the program, including distribution of flyers at county libraries; diversity enhancing goals for board, staff, and consumers; diversity mailing list and advisory; presentations to diverse groups; virtual options.

Promoting inclusion and reducing stigma: repeats the diversity efforts above.

Continuation of services during public health emergency: Virtual options.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: some online supports and flexibility, based on consumer and PSW need.

Unique features - approach: describes the agency's approach and the Independent Living Philosophy, does not link to the source. Includes detail on prior year successes and feedback from participants.

Unique features - staff credentials: Current PSW Coordinator – Associate’s in Human Services, employed at PACE since November 2010, previous board member and volunteer, has a disability, and has been an advocate for disability rights both locally and statewide for many years.

IL-Specialist – Bachelor’s in Accounting, previous Financial Administrative Assistant at PACE, worked at DHS and HFS Division of Child Support Enforcement as a Child Support Specialist 1.

Program Director – QIDP for over 20 years, Bachelor’s in Psychology, Illinois approved QIDP train the trainer, taught the DSP DHS approved curriculum for several years and continues to attend trainings

Unique features – resource leveraging: not used as match for other funds; no other fund source for this program; people served do not pay a fee; a deposit is refunded at completion of orientation (waived when orientation is offered online); not eligible for Medicaid participation; consumers using PSWs may receive services through Independent Living Unit contract.

Staff comment: Although this program’s target population is potential PSWs, it supports people with I/DD seeking PSWs to utilize the list of those who have completed PACE’s PSW orientation.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: agency has rehired their Administrative and Financial Assistant to improve reporting.

If applicable, audit findings: PY2023 agency audit was submitted on 03/28/24, (delayed due to change in CPA firm). Findings include lack of segregation of duties, controls over accounts payable, and compliance with payroll tax regulations (each addressed by the agency) and threat to continued operations, especially due to reliance on state and federal revenues. No unspent funds are owed back to CCDDDB.

If applicable, compliance issues: First Quarter reports were late, and payments were paused until submitted. Approved board minutes should be submitted in a more timely manner.

All forms submitted by deadline: Yes. Required forms were submitted on February 12.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes, indirect as it builds workforce and increases consumer choice.

Evidence that other sources of funding have been maximized: not explicit.

Coordinated system: addressed, with similar/related providers identified.

Written collaborative agreements: Dept of Rehabilitation Services.

Referral between providers: Yes. Though primarily connecting people with PSWs, collaborations with other providers are identified.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: correct typos in Program Plan Narrative form (CSE-SC and FY24-FY25); revise and clarify financial forms (see Financial Analysis comments above)*
- *Improvements during contract year: share the CIL assessment tool with CCDDDB staff; if appropriate, consider implementing a program-specific satisfaction survey of those consumers who have I/DD and their family members*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Customized Employment

Agency: Community Choices, Inc.

Request: \$239,500

Why it matters: "... We support participants to build skills and real-life experiences... We believe anyone can find and sustain meaningful work directly through area employers. We also support the person to be part of the staff community, look to their supervisors and coworkers for assistance and engagement, and to find new opportunities when they have outgrown their current roles."

Selected priority: Work Life

Services and People Served

Who will benefit: Adults with I/DD, unemployed or underemployed, and interested in community-based employment... job seekers with I/DD to work toward and find community-based employment aligned with their strengths, first-time job seekers, those who have found employment to be unsustainable, and those looking to advance their careers.

Scope of services: Individualizing relationships between employees and employers for mutual benefit. DISCOVERY- person-centered approach... with each person to identify their strengths, needs, and desires around employment... to create unique Vocational Themes, Profiles, and Plans and then creatively target ideal job leads and design training necessary for that person to be successful in their chosen work environment.

JOB MATCHING Using the plan and themes... works with the person to develop any social and communication skills necessary to be successful in that work environment and to pinpoint and carve out job opportunities aligned with the person's goals... contacts local businesses to learn about their employment needs... team approach to job development by investigating opportunities based on the connections from all team members. Job seekers learn more about options through job shadowing and business tours.

SHORT-TERM SUPPORT ... works with employee and employer to develop accommodations and support, provides limited job coaching. Intentional efforts to connect and increase natural support within the workplace. As employee's skills, confidence, and natural supports increase, employment specialist fades back.

LONG-TERM SUPPORT After a person has built independence at their job, we continue to be available to support in the expansion of job roles, retraining, and troubleshooting conflicts if they arise.

SUPPORTED EXPERIENCES FOR FIRST-TIME JOB SEEKERS To make informed and self-determined choices about jobs and interests, people with I/DD benefit from real-world experience to base decisions.... A structured 12-week program (classroom and job-shadowing) for first-time job seekers and others.

Location and frequency of services: Home and community locations relevant to job search, virtual support

Staff comment: Request is for funding to continue a currently funded program. Section is well written.

Residency of 51 people served in PY23 and 52 in the first half of PY24:

Champaign	25 for PY23	25 for PY24
Urbana	13 for PY23	13 for PY24
Rantoul	2 for PY23	0 for PY24
Mahomet	2 for PY23	2 for PY24
Other	9 for PY23	11 for PY24
Unknown		1 for PY24

Demographics of 51 people served during PY23:

Age

Ages 13-18 -----	1
Ages 19-59 -----	50
Race	
White -----	33
Black / AA -----	11
Asian / PI -----	2
Other (incl. Native American, Bi-racial)-	5
Gender	
Male -----	31
Female -----	20
Ethnicity	
Of Hispanic/Latino/a Origin -----	2
Not of Hispanic/Latino/a Origin -----	49

Measures of Client/Participant Access

Eligibility criteria and determination: adults with I/DD (per state rules), on PUNS list, motivated to work, and requesting support. Those eligible for short-term DRS funded services access them first and transfer to this program’s long-term support if needed.

Outreach to eligible people: outreach is county wide, including through events; referrals from schools, word of mouth, and other providers.

Within 14 days of referral, 90% of those referred will be assessed.

Within 60 days of assessment, 75% of those assessed will engage in services.

People will engage in services for: 2-6 mos for Discovery and Job Matching, 18 mos for long-term support.

Additional demographic data: Medicaid RIN, PUNS eligibility, medical insurance, involvement with other agencies’ services.

Staff comment: Timeframes are reasonable, given that the program is often at or over capacity.

Measures of Client/Participant Outcomes

Outcomes and targets:

- 1- Program Outcome
 - a- 100% of participants with I/DD... will report engagement and support in the employment process.
 - b- 85% will report that their strengths and interests are important to the employment process.
- 2- DISCOVERY: ... Within 60 days of indicating desire for support, 20 individuals identify their work interests and strengths in the Discovery process [toward individualized plans]
- 3- JOB MATCHING:
 - a- 13 individuals will work to obtain paid employment within the year and 80% will find a job within 6 months.
 - b- 7 individuals will work to obtain volunteer jobs or internships within the year and 80% will find that role within 6 months.
 - c- 100% of job matches relate to a person’s employment themes
- 4- SHORT-TERM SUPPORT: ... 20 individuals become independent at their jobs through job negotiation and coaching within two months of their start date.
- 5- LONG TERM SUPPORT: ... 70% of individuals keep their jobs for at least 1 year.
- 6- WORKFORCE EMPOWERMENT PROGRAM:
 - a- 100% of the 10 participants show growth in knowledge and/or professionalism after 12 weeks.
 - b- 80%... find community jobs within 1 year of program completion, if they choose to seek employment.

Specific assessment tools and data collection:

1. ANNUAL SATISFACTION SURVEY - self-report, all participants/families, developed with Evaluation Team.
2. DISCOVERY ASSESSMENTS AND PLAN - based on Griffin and Hammis' CE Model, asset-based assessment, multiple data sources (observation, interviews) to develop themes for employment plan and job search...
- 2, 3, 4a, and 5. EMPLOYMENT TRACKING SHEET - internal spreadsheet on participant's progress including job placements and their connection to a person's discovery themes.
- 4a and 5. CASE NOTES & QUARTERLY NARRATIVES - Case notes recorded by staff during each encounter, synthesized into a quarterly narrative report to track qualitative measures of a person's progress.
6. FIRST TIME JOB SEEKERS KEY SKILLS PRE/POST ASSESSMENT AND WEEKLY TRACKING - to assess program objectives, pre and post class data for all participants, weekly tracking on key professionalism measures, completed by the facilitator and as participant self-assessment.

Outcome data gathered from all participants: Yes

Will collect outcome data annually; Discovery profile completed at beginning of services; Formative assessment collected "continually."

Staff comment: Outcomes relate to improved quality of life for people served and are measurable.

Measures of Utilization

Treatment Plan Clients (TPCs): 50

Community Service Events (CSEs): 4 outreach events, sharing info on programs and on the importance of people with I/DD having community work opportunities.

Service Contacts (SCs): 2000 total: 120 Discovery, 540 Job Matching, 400 Short-Term Support, 300 Long-Term Support, and 640 First Time Job Seekers

Other: 3020 total direct hours: 240 in Discovery, 875 in Job Matching, 800 Short-Term Support, 225 Long-Term Support, and 880 First Time Job Seekers

Staff comment: Service contacts and service hours associated with TPCs are documented in online reporting system. Program provided 3,741 hours of service to TPCs during PY23. Proposal is to increase the TPC and Other targets for PY25 and maintain the others at PY24 levels.

PY25 Targets	50 TPCs	2000 SCs	4 CSEs	3020 Other (hours)
PY24 First Two Quarters (per submitted Service Activity Reports)				
First Quarter	47	627	2	796
Second Quarter	5	693	3	938
Annual Targets	40 TPCs	2000 SCs	4 CSEs	2572 Other (hours)
PY23 All Four Quarters (per submitted Service Activity Reports)				
First Quarter	36	742	2	991
Second Quarter	4	552	2	767
Third Quarter	6	670	2	918
Fourth Quarter	5	743	2	1030
Annual Targets	40 TPCs	2200 SCs	4 CSEs	3220 Other (hours)

Financial Analysis

PY2025 CCDDDB request: \$239,500

PY2025 Total program budget: \$239,500

Current year funding (PY2024): \$226,500

Proposed change in funding - PY2024 to PY2025 = 6%

CCDDDB request is for 100% of total program revenue.

Personnel costs of \$210,944 are 88% of the requested amount.

Other expenses are Professional Fees/Consultants \$7,050 (3%), Client Wages/Benefits \$500, Consumables \$2,556 (1%), General Operating \$4,950 (2%), Occupancy \$9,500 (4%), Conferences/Staff Development \$1,000, and Local Transportation \$3,000 (1%).

Total agency budget has a surplus of \$8,582, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: 0.26 Indirect + 3.44 Direct = 3.7 FTEs.

Total program staff: 0.26 Indirect + 3.44 Direct = 3.7 FTEs.

Staff comment: Indirect staff associated with this program are 26% of the indirect portion (75%) of the full-time Executive Director. Direct staff are 2 full-time Customized Employment Specialists, 50% of a full-time CE Specialist, 45% of full-time Lead Employment Specialist, 40% of a full-time CE Specialist, and 9% of the direct portion (25%) of full-time Executive Director. Professional Fees will pay for a CPA firm to perform the annual financial audit, banking and bookkeeping services, accreditation with CQL, and administrative support. General Operating will pay for internet, phone, insurance, and business expenses. Occupancy will pay for rent, parking, utilities, and property/liability insurance. More information about Staff Development is requested.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: outlines clear actions to ensure clients enrolled in their program have a full life with person centered planning and ongoing support for their desires. The Board and Staff receive training annually and review and sign the CLC Plan. A cultural competence assessment will be conducted to ensure that CLC Values are embedded throughout the organization.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes

Highlights from the submitted CLC Progress Report: their community collaboration groups ensure that people living with disabilities are included in the planning and implementation of services in the community. They have participated in a new youth employment program with C-U TRI. The agency's Governing Board has people with lived experience of having a mental illness, substance use disorder, or I/DD or who are the caregiver for such an individual.

Staff comment: continues to utilize innovative practices to ensure that people living with disabilities can have full and meaningful lives. They have expanded their community collaborations to include the Urbana Park District and UIUC to create more opportunities for accessibility.

Criteria for Best Value

Budget and program connectedness: Budget Narrative fully describes: revenues for the total agency, with this contract as the only program revenue; details on program expenses, how they were determined, and items within each category; and the relationship between program activities and staff associated with it, along with how staff costs were calculated (total agency and program specific). Amounts agree across financial forms.

Participant outcomes (see above for details): program and participant outcomes are fully described, including for all service components within the program, with appropriate assessment tools and processes.

Self-determination and self-direction in service planning: Discovery process

Eliminating disparities in access and care (see above for Agency CLC Plan details): support available regardless of residence within the county, including for employment in locations preferred by participants; participation through resource fairs county-wide and with diverse attendees; Transition Planning Committee meetings and events; relationship with Rural CC Special Education Cooperative, CCRPC, DRS, Housing Authority, local churches, NCCRC, Uniting Pride, Healthcare Consumers, Township Offices, and others; access expanded by new Transportation program and training on other supports such as CCARTS; virtual options; support for building culturally appropriate natural supports.

Promoting inclusion and reducing stigma: counteracting the tradition of isolation and underemployment of people with I/DD through progressive programs for job seekers, identifying individual preferences and opportunities (can be volunteer)

Continuation of services during public health emergency: some virtual supports

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: not a focus

Unique features - approach: describes Griffin & Hamos and Marc Gold & Associates' approach, customized employment, links to federal Office of Disability Employment Policy site and to review of literature on it; another approach endorsed by the Workforce Innovation and Opportunity Act is work-based learning for young people and first time job seekers (also described and linked).

Unique features - staff credentials: Lead Employment Specialist is a Certified Employment Specialist, with her team each having over 10 years' experience in the field working both with adults and transition aged youth, as well as part of HR teams. Current staff have extensive relevant experience and formal Customized Employment training, one a Master's in Rehabilitation Counseling. Variety of backgrounds noted; DSPs, QIDPs, recreational therapy, special education, K-12 education, HR, domestic violence services, science, art.

Unique features – resource leveraging: not to be used as match for another source of revenue; agency has other funding for similar services (DRS, for 5 people not necessarily eligible for DDB funding); clients are not asked to pay a fee; a sliding scale for private pay is described fully; not eligible for Medicaid participation.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes

Agency capacity for financial clarity: known due to prior experience funding the agency

If applicable, audit findings: PY2023 agency audit was submitted 01/24/24, with internal control issue relating to small size of the organization (as in prior years, this is understood by the agency's board).

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed on February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: Yes

Coordinated system: Yes

Written collaborative agreements: PACE, CC Healthcare Consumers, CCRPC, DSC, Urbana Park District, RACES, Experience Champaign Urbana, Continuum of Homeless Service Providers, Uniting Pride of Champaign County, MTD, The Alliance, Queens University (Canada), Champaign Center Partnership. Also lists informal partnerships with CUPHD, UIUC Special Ed Dept, Promise, The Autism Program, CUSR, and Housing Authority.

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: if known, provide more information on staff trainings in Budget Narrative*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Community Employment

Agency: DSC

Request: \$500,000

Why it matters: "... Employment and volunteer opportunities increase community engagement thereby decreasing stigma and increasing a person's well-being. Support is provided in all aspects of employment... Supported Employment provides ongoing training and guidance needed until a person is ready to be more independent or natural supports are identified."

Selected priority: Work Life

Services and People Served

Who will benefit: adults with I/DD seeking help to find, prepare for, and/or maintain employment.

Scope of services:

Discovery process: interviews with the individual and others they identify as instrumental in their personal life; observation in everyday activities; exploration of job interests; and a review of employment/volunteer history. ... culminates in an employment plan outlining an individualized support to help the person attain their goals.
Resume development: Interview preparation and support; contact with potential employers; soft skills education and practice.

Application process/follow-up: Traditional and non-traditional approaches... Job developers may introduce the person to employers to support personal connection.

You're hired!: Job orientation, skill acquisition including transportation, mastery of specific job responsibilities, potential accommodations, adaptive tools, development of natural supports with supervisor and coworkers.

On-going job coaching: advocacy, development of self-advocacy skills, identification of potential new responsibilities or promotions, monitoring environment for potential risks to job security; identify and facilitate natural supports to promote long-term success.

Supported Employment: establish volunteer/paid work options for a wide range of people including those with significant support needs; increase people's skills in work preparedness; create niches for a small group of people within local businesses.

Employment Plus: work/life balance. Planned get-togethers function as a peer support forum. Topics and activities will be driven by those in attendance.

Location and frequency of services: Services occur in the person's home community or in communities with available jobs specific to a person's interests. Job coaching occurs at the place of employment. Services are available as needed during all hours/shifts. Training occurs during shift and at place of employment and continues until person and employer are comfortable with skill acquisition and intermittently as needed.

Staff comment: The request is for continued funding for a longstanding program.

Residency of 92 people served in PY23 and 80 in the first half of PY24:

Champaign	29 for PY23	29 for PY24
Urbana	44 for PY23	36 for PY24
Rantoul	7 for PY23	6 for PY24
Mahomet	3 for PY23	2 for PY24
Other	9 for PY23	7 for PY24

Demographics of 92 people served during PY23:

Age

Ages 13-18 -----	1
Ages 19-59 -----	86
Ages 60+ -----	5
Race	
White -----	67
Black / AA -----	19
Asian / PI -----	2
Other (incl. Native American, Bi-racial)-	4
Gender	
Male -----	57
Female -----	35
Ethnicity	
Of Hispanic/Latino/a Origin -----	1
Not of Hispanic/Latino/a Origin -----	91

Measures of Client/Participant Access

Eligibility criteria and determination: People with I/DD as defined by the State of Illinois, enrolled on the PUNS list, 18 or older, interested in help finding, preparing for, and/or maintaining employment. DSC's Admissions Committee determines if a person meets eligibility criteria and if the program can provide the needed/requested support.

Outreach to eligible people: Department of Rehabilitation Services, school programs, Champaign County Transition Planning Committee, Champaign County Transition Services Directory, community events such as the Disability Expo, current employers, other individuals/families, social and other media events, and other.

Within 30 days of referral, 90% of those referred will be assessed.

Within 45 days of assessment, 75% of those assessed will engage in services.

People will engage in services, on average, for: as long as needed.

Additional demographic data: disability, referral source.

Staff comment: Wait time is reasonable, given that program is usually at capacity.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. 26 people will participate in job development activities including discovery, volunteering, or supported employment.
2. 80% of people will maintain employment.
3. 90% of people will be satisfied with their Community Employment services.

Specific assessment tools and data collection:

1 and 2 – data maintained by the program manager. 3 – annual satisfaction surveys to participants

Outcome data gathered from all participants: No. Surveys are sent to a random sample of participants.

Will collect outcome data monthly (1 and 2); annually (3)

Staff comment: section also contains information on progress toward outcome target for the current year (exceeding or meeting all); outcome #1 is modified for PY25, the others continued; the first outcome is more a measure of utilization of the program services, though an important one.

Measures of Utilization

Treatment Plan Clients (TPCs): 88 people with Individual Plans and not DRS funded.

Community Service Events (CSEs): 2 presentations, community events, etc.

Service Contacts (SCs): 10 people's referrals presented to admissions committee.

Staff comment: Service contacts and service hours associated with TPCs are documented in online reporting system. Program provided 6,989 hours of service to TPCs during PY23. Targets continue from PY24.

PY25 Targets	88 TPCs	10 SCs	2 CSEs
PY24 First Two Quarters (per submitted Service Activity Reports)			
First Quarter	80	6	2
Second Quarter	0	1	1
<i>Annual Targets</i>	<i>88 TPCs</i>	<i>10 SCs</i>	<i>2 CSEs</i>
PY23 All Four Quarters (per submitted Service Activity Reports)			
First Quarter	63	4	1
Second Quarter	18	2	2
Third Quarter	6	10	1
Fourth Quarter	5	4	1
<i>Annual Targets</i>	<i>70 TPCs</i>	<i>15 SCs</i>	<i>2 CSEs</i>

Financial Analysis

PY2025 CCDDDB request: \$500,000

PY2025 Total program budget: \$628,734

Current year funding (PY2024): \$459,606

Proposed change in funding - PY2024 to PY2025 = 9%

CCDDDB request is for 80% of total program revenue.

Other program revenue is from DHS Fee for Service \$559, DHS DRS \$125,000 (20%), Miscellaneous \$3,169.

Personnel costs of \$463,371 are 93% of the requested amount.

Other expenses are Professional Fees/Consultants \$4,456 (1%), Consumables \$2,019, General Operating \$4,291 (1%), Occupancy \$4,073 (1%), Conferences/Staff Development \$1,294, Local Transportation \$9,248 (2%), Equipment Purchases \$885, Lease/Rental \$3,317, Membership Dues \$2,128, Miscellaneous \$4,918 (1%).

Total agency budget has a deficit of \$109,133, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: 0.63 Indirect + 6.99 Direct = 7.62 FTEs.

Total program staff: 0.91 Indirect + 8.73 Direct = 9.64 FTEs.

Staff comment: Direct personnel to be charged are: 83% of 8 full-time Community Living Specialists (one currently vacant), 1 Health Advocate CLP, 1 Community Living Manager; 54% of the full-time Director of Residential; 32% of part-time CU Relief staff; and 1% of a part-time residential building manager. Describes the relationship of each direct staff position to the program services.

The increased request reflects an average salary increase for DSPs of 7.5% and an organization-wide salary increase of 6.5%, plus the resulting increase in associated payroll taxes. Proper assessment and analysis of the financial forms is difficult due to how the forms were presented. The Budget Narrative references a "General Agency Expense" section, in which it appears that many different agency-wide expense categories are prorated and allocated to the program. It is not specified in the financial forms how much, if any, of any given expense category includes an agency-wide prorated allocation. Further descriptions of some of these expense categories are vague, provide no specifics, and are therefore insufficient. The result are financial forms that are unclear. It is also very likely that, as a result of these allocations, this program will be charged for expenses from which the program did not benefit or even utilize. Per the CCDDDB Funding Guidelines, section 6(e)(iii) states that the "organization shall have accounting structures that provide accurate and complete information about all financial transactions related to each separate CCDDDB contract." Utilizing an agency-wide cost allocation method is not consistent with this section of the CCDDDB Funding Requirements and Guidelines.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: DSC has a DEI (Diversity Equity and Inclusion) Committee that meets quarterly to look at the goals and actions steps. Meeting minutes outline their plan and actions taken around DEI. DSC conducts on-going surveys with clients and their families about services that are offered and will expand opportunities for people receiving services to be in an advisory capacity in the hiring process, trainings staff, and planning community events.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes.

Highlights from the submitted CLC Progress Report: Staff Training will be completed in 3rd and 4th quarters. Prioritized training and support to reduce burnout for staff and compassion fatigue. A monthly DEI Newsletter is shared with staff and board members. Members of the agency's governing board have lived experience.

Staff comment: DSC is shifting their language around cultural and linguistic competence to include DEI. They have been working with the CLC Coordinator to develop training and support for their board, administration, and direct staff to align with the values and tools for empathy for working with people living with disabilities.

Criteria for Best Value

Budget and program connectedness: The Budget Narrative addresses increased costs (some inflationary, some related to agency wide salary increases related to increases for DSPs), describes all of the sources of revenue for the program and loss of DHS funding, provides detail on those direct staff to be charged to this contract, and refers us to general agency cost allocation info provided in the Clinical Services application which references the annually reviewed "Allocated Program Expense formula" shared with DDB staff.

Participant outcomes (see above for details): One outcome relates to participant satisfaction with the program (though not all are asked); another measures retention of employment by all participants.

Self-determination and self-direction in service planning: Discovery process, toward individual plan.

Eliminating disparities in access and care (see above for Agency CLC Plan details): Relationships with rural community resources; exploration of job opportunities in home/nearby communities; partners with Transition Planning Committee (10 school districts), Rural Champaign County Special Education Cooperative, DRS, other providers; virtual options for some services; participates in local events and training hosted by organizations with diverse membership (from minority populations); some transportation support.

Promoting inclusion and reducing stigma: Anti-stigma effect of community employment and the increased community activities (e.g., work holiday parties) which result; agency presentations to interested groups.

Continuation of services during public health emergency: Some virtual options.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: Not a focus but assists with online applications and trainings.

Unique features - approach: Cites and links to Relias article on the benefits of supported employment, a component of the program; notes alignment with federal Home and Community Based Services rules.

Unique features - staff credentials: Training specific to individuals receiving services; new options relevant to state and national trends; state DSP training (120 hrs classroom and on-the-job); Introduction to Developmental Disability, Human Rights, Human Interaction and Communication, Service Planning, Basic Health & Safety, First Aid/CPR, OIG/Abuse & Neglect; new employee training on Employment First as part of DSC's agency culture emphasizing community inclusion and employment; optional monthly webinars from Office of Disability Employment Policy and the Association of People Supporting Employment First.

Unique features – resource leveraging: Program can no longer bill DHS for these services (a loss of \$47k); DRS funding for those who qualify; private pay is an option; people are not asked to pay a fee; program not eligible for Medicaid participation.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: Known due to prior experience funding the agency.

If applicable, audit findings: PY2023 agency audit was submitted 12/13/23, with no findings of concern; unspent revenue of \$24,013 was returned (of original contract maximum of \$435,000.)

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: Yes.

Coordinated system: Participates in Job Developers Network, Transition Planning Committee events, collaboration with DRS and other providers.

Written collaborative agreements: Prairieland ISC, RPC Case Managers, Community Choices, and DRS.

Referral between providers: Yes

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: clarify expenses which are specific to the program.*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Employment First

Agency: DSC (with Community Choices)

Request: \$98,500

Why it matters: "... influencing the business culture in Champaign County. Per the Office of Disability Employment Policy, service providers can often assist companies in becoming disability inclusive on a deeper level by presenting core services in ways that employers can recognize an immediate benefit... disability awareness training; consulting on accommodations; advising on workplace accessibility, both physical and computer-based; recommending job coaching and other onsite support services."

Selected priority: Work Life

Services and People Served

Who will benefit: Business Community (through education and resources regarding the benefits of hiring people with disabilities and the support to incorporate more inclusive practices); People with I/DD (through education and awareness of supports available to the person seeking employment); and Service Providers (by promoting commitment to community employment for those with I/DD.)

Scope of services: To promote a change in culture surrounding people with disabilities and their role and contribution to Champaign County as members of the workforce:

- Outreach and incentive for the business community prioritizing employment for people with disabilities. Through the LEAP (Leaders Employing All People) presentation and frontline staff training, businesses learn about the benefits of inclusive employment and services available when hiring individuals with I/DD.
- The Champaign County Directory of Disability-Inclusive Employers (leapdirectory-cu.org) is a newer endeavor which reflects and promotes businesses identified as inclusive... identifying employers who wish to hire qualified individuals with disabilities... a resource for those seeking employment to identify local businesses who may currently be hiring and want to hire such people; and... employer education in a self-directed manner through the site's resources which can also be facilitated by program representatives.
- Advocacy and ongoing dialogue with various agencies such as the Department of Rehabilitation Services (DRS), local Rotaries and Chambers of Commerce as well as continuing to research the national progress of the Office of Disability Employment Policy (ODEP) and the Association of People Supporting Employment First (APSE) to further employment opportunities for those with DD.

Location and frequency of services: Presentations in person, virtual, and pre-recorded, conducted upon request; online directory/resources also available.

Staff comment: The proposal requests funding for a current program which has evolved over the years, offering new components to employers partaking in LEAP.

Residency and Demographic data are not collected for this program.

Measures of Client/Participant Access

Eligibility criteria and determination: Champaign County employers who want to learn about the benefits of hiring people with I/DD (and about services) through the LEAP training and to access additional disability awareness staff training.

Outreach to eligible people: Info shared through Transition Planning Committee, Job Developer's Network, Chambers of Commerce, social media, and other agency communication; businesses learn about LEAP through

other employers, social media; representatives reach out to employers to educate and schedule training. Champaign County Directory of Disability-Inclusive Employers further promotes E1 efforts.

Within 30 days of referral, 100% of those referred will be assessed.

Within 30 days of assessment, 100% of those assessed will engage in services.

People will engage in services, on average, for: Training is 1 hour, follow-up within a month.

Additional demographic data: # businesses participating in certification process, business zip codes, # of employees attending the session, their job titles, and the business sector of each company.

Staff comment: Wait times are reasonable.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. Ten people will be hired by businesses who have been LEAP trained.
2. Eighty percent of LEAP attendees will provide satisfactory feedback on the benefits of training.

Specific assessment tools and data collection:

1. LEAP Coordinator will maintain records.
2. LEAP Coordinator will provide and maintain survey results.

Outcome data gathered from all participants: Yes.

Will collect outcome data quarterly.

Staff comment: Outcome 1 provides insight into effectiveness of program, responsive to DDB request.

Measures of Utilization

Community Service Events (CSEs): 25 LEAP and frontline staff trainings

Staff comment: Proposes to continue the PY24 events target.

PY25 Targets 25 CSEs

PY24 First Two Quarters (per submitted Service Activity Reports)

First Quarter 10

Second Quarter 5

Annual Targets 25 CSEs

PY23 All Four Quarters (per submitted Service Activity Reports)

First Quarter 12

Second Quarter 9

Third Quarter 17

Fourth Quarter 23

Annual Targets 25 CSEs

Financial Analysis

PY2025 CCDDDB request: \$98,500

PY2025 Total program budget: \$98,914

Current year funding (PY2024): \$90,100

Proposed change in funding - PY2024 to PY2025 = 9%

CCDDDB request is for 99% of total program revenue.

Other program revenue is from DHS Fee for Service \$64 and Miscellaneous \$349.

Personnel costs of \$68,178 are 69% of the requested amount.

Other expenses are Professional Fees/Consultants \$23,724 (24%), Consumables \$1,565 (2%), General Operating \$492, Occupancy \$1,335 (1%), Conferences/Staff Development \$498, Local Transportation \$607, Equipment Purchases \$126, Lease/Rental \$949, Membership Dues \$298, and Miscellaneous \$728.

DSC (with Community Choices, Inc.) – Employment First

Total agency budget has a deficit of \$109,133, total program a deficit of \$192, and CCDDDB budget balanced.

Program staff to be funded by CCDDDB: 0.14 Indirect + 1 Direct = 1.14 FTEs.

Total program staff: 0.14 Indirect + 1 Direct = 1.14 FTEs.

Staff comment: Indirect Personnel to be charged to this contract include 1% of thirteen full-time positions and 1% of one 90% time Director of Program Assurance. Direct staff are 100% of one full-time LEAP Coordinator (vacant at the time of application). The increased request reflects an average salary increase for DSPs of 7.5% and an organization-wide salary increase of 6.5%, plus the resulting increase in associated payroll taxes, in addition to other inflationary increases in expenses. Professional Fees will pay for the contractual payment to Community Choices for their portion of this grant. Proper assessment and analysis of the financial forms is difficult due to how the forms were presented. The Budget Narrative references a “General Agency Expense” section, in which it appears that many different agency-wide expense categories are prorated and allocated to the program. It is not specified in the financial forms how much, if any, of any given expense category includes an agency-wide prorated allocation. Further descriptions of some of these expense categories are vague, provide no specifics, and are therefore insufficient. The result are financial forms that are unclear. It is also very likely that, as a result of these allocations, this program will be charged for expenses from which the program did not benefit or even utilize. Per the CCDDDB Funding Guidelines, section 6(e)(iii) states that the “organization shall have accounting structures that provide accurate and complete information about all financial transactions related to each separate CCDDDB contract.” Utilizing an agency-wide cost allocation method is not consistent with this section of the CCDDDB Funding Requirements and Guidelines.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: DSC has a DEI (Diversity Equity and Inclusion) Committee that meets quarterly to look at the goals and actions steps. Meeting minutes outline their plan and actions taken around DEI. DSC conducts on-going surveys with clients and their families about services that are offered and will expand opportunities for people receiving services to be in an advisory capacity in the hiring process, trainings staff, and planning community events.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes.

Highlights from the submitted CLC Progress Report: Staff Training will be completed in 3rd and 4th quarters. Prioritized training and support to reduce burnout for staff and compassion fatigue. A monthly DEI Newsletter is shared with staff and board members. Members of the agency’s governing board have lived experience.

Staff comment: DSC is shifting their language around cultural and linguistic competence to include DEI. They have been working with the CLC Coordinator to develop training and support for their board, administration, and direct staff to align with the values and tools for empathy for working with people living with disabilities.

Criteria for Best Value

Budget and program connectedness: The Budget Narrative describes increased costs and direct program staff. It refers to the general agency cost allocation info provided in the Clinical Services application which references the annually reviewed “Allocated Program Expense formula.” This has been provided to CCDDDB staff. Beyond staff, the program expenses include Consultants, for the contract with Community Choices.

Participant outcomes (see above for details): One relates to the indirect outcome of increasing community employment opportunities for people with I/DD, the other to trainees’ satisfaction.

Self-determination and self-direction in service planning: N/A

Eliminating disparities in access and care (see above for Agency CLC Plan details): Though not specific to individuals, the program operates countywide, engaging with businesses open to hiring diverse employees.

Promoting inclusion and reducing stigma: Promoting community employment of people with I/DD; platform for businesses to tell other businesses about their positive experiences employing people with I/DD.

Continuation of services during public health emergency: Virtual options.

Builds on successes with technology and virtual platforms, increasing training and access for staff and

people served: Has developed an online directory of employers and resources.

Unique features - approach: Describes the Association of People Supporting Employment First (national membership org) values and provides a link to ASPE site; offers local and national examples of success.

Unique features - staff credentials: Community Choices (.5 FTE) and DSC (one FTE) staff have: knowledge of disability and business communities, ability to present to employers in a manner that increases awareness of employability of people with disabilities, address misgivings or questions, and inform about available partnerships to support their efforts to hire people with disabilities; knowledge of changing concerns and issues that arise from this transition. Provider-specific training; opportunities to learn from international inclusive employment conferences, webinars, and nationally recognized leaders; ODEP monthly webinars.

Unique features – resource leveraging: Not to be used as match for other funding; no other major sources of funding; people do not pay a fee; agency participates in Medicaid waiver, but this program is not covered.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: Known due to prior experience funding the agency.

If applicable, audit findings: PY2023 agency audit was submitted 12/13/23, with no findings of concern; unspent revenue of \$1,877 was returned (of original contract amount of \$85,000.)

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: Yes (traditionally).

Coordinated system: No similar services locally and possibly not in Illinois.

Written collaborative agreements: Community Choices, Illinois Dept of Rehabilitation Services.

Referral between providers: n/a

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: clarify expense items and anticipated costs specific to the program.*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Self-Determination Support

Agency: Community Choices, Inc.

Request: \$213,500

Why it matters: "... opportunities for people with I/DD to participate in social opportunities of their choice... to access opportunities available to any community members and support for building social and communication skills... opportunities for adults with I/DD to increase others' understanding of the experiences and rights of people with I/DD. Families will have opportunities to support each other and share resources."

Selected priority: Community Life

Staff comment: aligned with the selected priority and with Self-Advocacy

Services and People Served

Who will benefit: Adults with DD who wish to expand their social networks and capital, build their familiarity with the resources and opportunities available in our community, and build their leadership skills. Family members of adults with disabilities who wish to learn how the I/DD service system works, about resources available in our community, connect and learn with other families, and build their capacity to advocate for their adult children/family members with disabilities.

Scope of services:

FAMILY SUPPORT AND EDUCATION: ... educating families on the service system, helping people support each other, and advocating for improved services... public quarterly resource meetings, community parties where families can gather informally, and a family support group aimed at providing strategies and community connection... individual consultation for families during times of transition or challenge.

LEADERSHIP AND SELF-ADVOCACY: ... [for adults with DD] to learn and demonstrate self-determination and self-advocacy skills... Leadership Class, Human Rights & Advocacy Group, ongoing projects, and opportunities.

BUILDING COMMUNITY: ... for adults with disabilities to discover what type of engagement they enjoy having with others and interests they'd like to pursue. through:

Social Opportunities (events organized by the agency);

Urban Explorers (participate in community with staff support, two 6-week sessions);

Community Coaching (1:1 personalized support to build the skills, develop the focus, and engage in the steps needed to build and sustain relationships and community connections, including Social Skills Development, Tech Training, Interest Exploration, Individual and group connections);

Cooperative Facilitation (management of resources to build cooperative communities, including member online platforms, individual membership connections, and dissemination of coop news and opportunities.)

Location and frequency of services: community locations, participants' homes; membership is annual.

Staff comment: continues funding for longstanding program.

Residency of 183 people served in PY23 and 218 in the first half of PY24:

Champaign	106 for PY23	113 for PY24
Urbana	29 for PY23	42 for PY24
Rantoul	3 for PY23	3 for PY24
Mahomet	15 for PY23	13 for PY24
Other	23 for PY23	39 for PY24
Unknown	6 for PY23	8 for PY24

Demographics of 183 people served during PY23:

Age	
Ages 13-18 -----	5
Ages 19-59 -----	151
Ages 60+ -----	26
Not Available -----	1
Race	
White -----	150
Black / AA -----	20
Asian / PI -----	10
Other (incl. Native American, Bi-racial)-	2
Not Available -----	1
Gender	
Male -----	69
Female -----	113
Other -----	1
Ethnicity	
Of Hispanic/Latino/a Origin -----	1
Not of Hispanic/Latino/a Origin -----	181
Not Available -----	1

Measures of Client/Participant Access

Eligibility criteria and determination: adults with I/DD who are motivated to share responsibility of working toward outcomes and life they want; PUNS enrollment and internal intake for Co-op membership.

Outreach to eligible people: many referral sources (schools, word of mouth, providers), community events

Within 14 days of referral, 90% of those referred will be assessed.

Within 0 days of assessment, 100% of those assessed will engage in services.

People will engage in services, on average, for: one-year, renewable membership.

Additional demographic data: Medicaid RIN, PUNS eligibility, medical insurance, involvement with other agencies' services.

Staff comment: timeframes are reasonable.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. FAMILY SUPPORT & EDUCATION (Co-op mtgs, Family Parties, Holiday Event, Family Support Group mtgs)
 - A. 80% of Support Group participants indicate a strategy/resource learned or increased connection...
 - B. Family Members who participate, or whose adult participates, in more events/activities throughout the year, report higher rates of connections to others.
 - C. 75% of family members... in programming report greater knowledge of service system and belonging.
2. LEADERSHIP & SELF ADVOCACY (Leadership Course, Human Rights & Advocacy Group, [various] projects)
 - A. 80% of leadership class participants indicate a growth in leadership skills
 - B. HRA members identify areas to grow self-advocacy skills and rate their growth every 6 months
3. BUILDING COMMUNITY (Social Opportunities, Urban Explorers, Community Coaching, Members only Website, Facebook group, and resource dissemination)
 - A. 75% of members with I/DD indicate that CC provides them with a supportive community after a year.
 - B. 75%... in structured opportunities connect to other members or initiate community engagement within a year.
 - C. 50%... who initiate a desire for community engagement report or have an observed connection to

people, groups, or places within 3 months.

D. 50%... who initiate a desire to increase a skill related to connection report or have an observed increase in skill within 3 months.

Specific assessment tools and data collection:

1b, 1c, 3a - ANNUAL MEMBER SURVEY- Self report measure given to all members with I/DD and their family members (if they are involved). Full participation will be encouraged.

2a, 2b, 3a, 3b, 3c, 3d - QUARTERLY NARRATIVE REPORTS... by staff with detailed data collection of # and attendance rate of quarterly co-op meetings, family parities, support groups, social opportunities, connections, Urban Explorers, Community Coaching, leadership classes, and HRA Group activities.

1a, 1c, 2a, 2b, 3c, 3d - PRE/POST SURVEYS... assess Community Coaching, Leadership Class, and Support Group objectives. Effort is taken to collect pre and post data for all participants. Questionnaires about self-identified skills will be given to HRA Group members every 6 months.

Outcome data gathered from all participants: No.

Will collect outcome data annually or following specific activities/events.

Staff comment: outcomes are person/family centered and are measurable.

Measures of Utilization

Non-Treatment Plan Clients (NTPCs): 95 people with I/DD, 120 family or community members.

Community Service Events (CSEs): 4 outreach events, with program info and/or the importance of people with I/DD connecting/engaging in their communities.

Service Contacts (SCs): 3369 interactions with participants or directly related to their support: 535 Family Support & Education; 530 Leadership & Advocacy; 2304 Community Building.

Other: 2259 hours with participants or directly related to their support: 215 Family Support & Education; 350 Leadership & Advocacy; 1694 Community Building.

Staff comment: The proposal includes more detail on SC and Other subcategories. Proposal to increase NTPC, SC, and Other targets, maintains CSEs at PY24 level.

PY25 Targets	215 NTPCs	3369 SCs	4 CSEs	2259 Other (hours)
PY24 First Two Quarters (per submitted Service Activity Reports)				
First Quarter	205	779	2	486
Second Quarter	10	512	4	412.5
<i>Annual Targets</i>	<i>200 NTPCs</i>	<i>2810 SCs</i>	<i>4 CSEs</i>	<i>2086 Other (hours)</i>
PY23 All Four Quarters (per submitted Service Activity Reports)				
First Quarter	153	821	2	543
Second Quarter	4	654	4	548
Third Quarter	11	532	4	492.5
Fourth Quarter	15	854	2	452
<i>Annual Targets</i>	<i>180 NTPCs</i>	<i>2759 SCs</i>	<i>4 CSEs</i>	<i>1953 Other (hours)</i>

Financial Analysis

PY2025 CCDDDB request: \$213,500

PY2025 Total program budget: \$213,500

Current year funding (PY2024): \$176,500

Proposed change in funding - PY2024 to PY2025 = 21%

CCDDDB request is for 100% of total program revenue.

Personnel costs of \$193,427 are 91% of the requested amount.

Other expenses are Professional Fees/Consultants \$5,000 (2%), Consumables \$3,500 (2%), General Operating \$3,773 (2%), Occupancy \$5,700 (3%), Conferences/Staff Development \$500, Local Transportation \$1,200, and Miscellaneous \$400.

Total agency budget has a surplus of \$8,582, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: 0.46 Indirect + 2.79 Direct = 3.25 FTEs.

Total program staff: 0.46 Indirect + 2.79 Direct = 3.25 FTEs.

Staff comment: Indirect staff associated with this program are 26% of the indirect portion (75%) of the full time Executive Director and 20% of the indirect portion (50%) of full time Associate Director. Direct staff are a full-time Membership Coordinator and full-time Social Coach, 50% of part-time Social Coach, 20% of the direct portion (50%) of Associate Director, and 9% of the direct portion (25%) of full-time Executive Director. Professional Fees will pay for a CPA firm to perform the annual financial audit, banking and bookkeeping services, and accreditation with CQL. Consumables includes office supplies, class materials, meeting expenses, and social event expenses. More information about Staff Development is requested. Local Transportation will pay for reimbursement to staff for use of personal vehicles at the federal reimbursement rate.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: outlines clear actions to ensure clients enrolled in their program have a full life with person centered planning and ongoing support for their desires. The Board and Staff receive training annually and review and sign the CLC Plan. A cultural competence assessment will be conducted to ensure that CLC Values are embedded throughout the organization.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes

Highlights from the submitted CLC Progress Report: their community collaboration groups ensure that people living with disabilities are included in the planning and implementation of services in the community. They have participated in a new youth employment program with C-U Trauma & Resilience Initiative. The agency's Governing Board has people with lived experience of having a mental illness, substance use disorder, or I/DD or who are the caregiver for such an individual.

Staff comment: continues to utilize innovative practices to ensure that people living with disabilities can have full and meaningful lives. They have expanded their community collaborations to include the Urbana Park District and UIUC to create more opportunities for accessibility.

Criteria for Best Value

Budget and program connectedness: Budget Narrative fully describes: revenues for the total agency, with this contract as the only program revenue; details on program expenses, how they were determined, and items within each category; and the relationship between program activities and staff associated with it, along with how staff costs were calculated (total agency and program specific). Amounts agree across financial forms.

Participant outcomes (see above for details): participant outcomes are described for each component of the program, with measurable targets, appropriate assessment tools and processes and timeframes.

Self-determination and self-direction in service planning: purpose of the program.

Eliminating disparities in access and care (see above for Agency CLC Plan details): some social events in rural areas, outreach expanded through networks; transportation support; members may choose to develop individualized connections in any area; outreach events attended by broad scope of people county-wide; resource lists and databases and agency site; relationships with organizations connected to underrepresented groups - CCRPC, DRS, Housing Authority, churches, CSCNCC, Uniting Pride, Healthcare Consumers, Township Offices, others; support to build natural supports/networks within the person's community.

Promoting inclusion and reducing stigma: to support people with I/DD to see themselves as valuable members of the community, support their family members, and build the community's capacity for inclusion.

Continuation of services during public health emergency: virtual options

Builds on successes with technology and virtual platforms, increasing training and access for staff and

people served: online resources for members

Unique features - approach: describes and links to articles regarding the positive impact of social support on parents' stress and on the health and wellbeing of people with I/DD, and the positive impact of self-advocacy

Unique features - staff credentials: broad range of experience; masters level recreational therapist, community focused non-profit work, many yrs experience supporting people with I/DD, DSPs, QIDPs, recreational therapy, special education, K-12 education, HR, domestic violence services, science, art.

Unique features – resource leveraging: not to be used as match for another source of revenue; no other source of funding; people are asked to pay a fee to become members of the Community Choices Cooperative, but this may be waived if they are unable to pay; private pay could be developed for those choosing; not eligible for Medicaid participation.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes

Agency capacity for financial clarity: known due to prior experience funding the agency.

If applicable, audit findings: PY2023 agency audit was submitted 01/24/24, with internal control issue relating to small size of the organization (as in prior years, this is understood by the agency's board).

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed on February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: Agency actively pursues other funding.

Coordinated system: Yes.

Written collaborative agreements: PACE, CC Healthcare Consumers, CCRPC, DSC, Urbana Park District, RACES, Experience Champaign Urbana, Continuum of Homeless Service Providers, Uniting Pride of Champaign County, MTD, The Alliance, Queens University (Canada), Champaign Center Partnership (also lists informal partnerships with CUPHD, UIUC Special Ed Dept, Promise, The Autism Program, CUSR, and Housing Authority)

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: if known, provide more detail about staff trainings in the Budget Narrative.*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Community First

Agency: DSC

Request: \$950,000

Why it matters: "... by furthering inclusion, which is simply the opportunity to live like everyone else. Positive outcomes include community presence, participation, confidence, independence, and quality of life. People are enjoying a range of opportunities and expanding their social roles through experience and offerings that introduce and support volunteering, employment readiness, social, recreation, leisure, civic engagement, and peer support. Learning through experiences makes for transferrable skills and many are enjoying greater interests beyond the program by participating in C1st."

Selected priority: Community Life

Services and People Served

Who will benefit: People with I/DD interested in community-focused activities part or full day.

Scope of services: Recreational activities, social events, educational groups, volunteering, and other areas of interest to enhance personal fulfillment and inclusion... extensive menu of over 30 current weekly offerings. Presentations in public forums and participation in interviewing/hiring are highly valued.

Support based on individual interests with choice identified through the personal plan, the discovery process, self-report, and participant surveys completed prior to the rotation of every offering. For most, that means revolving community options and connecting with people who share similar interests. For some, there is a balance between a reliable, nurturing environment and community access for abbreviated times with consideration given to personal support needs, albeit intensive personal care, limited physical stamina, behavioral/emotional challenges, and/or choice. Encouragement, patience, and small steps lead to community participation for those uncomfortable in unfamiliar settings, or hesitant of new opportunities/environments. Propelled by participants with DSPs creating opportunities aligned with participant input, drawing and expanding from their experiences, or learning alongside those requesting a particular group offering. Exposure to new experiences is as ambitious and diverse as those who are choosing to participate.

Location and frequency of services: 4-month rotation of groups people select based on personal interests and desire to broaden their experience; 1-5 days/week. Locations as appropriate to the activity. Use of technology.

Staff comment: The request is for funding to continue a longstanding program.

Residency of 40 people served in PY23 and 43 in the first half of PY24:

Champaign	14 for PY23	17 for PY24
Urbana	14 for PY23	12 for PY24
Rantoul	2 for PY23	3 for PY24
Mahomet	3 for PY23	4 for PY24
Other	7 for PY23	7 for PY24

Demographics of 40 people served during PY23:

Age	
Ages 13-18 -----	1
Ages 19-59 -----	37
Ages 60+ -----	2
Race	

White -----	27
Black / AA -----	11
Asian / PI -----	1
Other (incl. Native American, Bi-racial)-	1
Gender	
Male -----	22
Female -----	18
Ethnicity	
Not of Hispanic/Latino/a Origin -----	40

Measures of Client/Participant Access

Eligibility criteria and determination: Interest in participating in community with staff support, eligible per IDHS-DDD and enrolled in the PUNS database. DSC’s Admission Committee determines if a person meets eligibility criteria and if the program is able to provide the needed/requested service.

Outreach to eligible people: Transition Planning Committee, Disability Expo, website, and circulation of brochures at community events; tours for families that include discussion of possible services and their availability. Referrals from individuals and their families; schools, Prairieland Services, Inc., the Champaign County Developmental Disabilities Case Managers; local DRS office... agency is responsive to requests and enhancing outreach efforts... invites opportunities to speak about this program.

Within 30 days of referral, 90% of those referred will be assessed.

Within 90 days of assessment, 75% of those assessed will engage in services.

People will engage in services, on average, for: ‘until they are no longer interested or in need of services.’

Additional demographic data: disability, referral source.

Staff comment: Wait times are reasonable.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. 80% of participants will be satisfied with chosen activities.
2. 5 new groups will be developed based on participant feedback.

Specific assessment tools and data collection:

1. Survey results at the end of each group - documented by Program Manager
2. List maintained by Program Manager

Outcome data gathered from all participants: yes

Will collect outcome data three times a year (at end of each group session).

Staff comment: This section of the proposal contains mid-year reports on the PY24 outcomes (both exceeded), which are the same as those proposed for PY25. One relates to participants’ satisfaction and the other to implementation of participants’ ideas.

Measures of Utilization

Treatment Plan Clients (TPCs): 45 - with Individual Plans, not receiving state funding for these services.

Non-Treatment Plan Clients (NTPCs): 45 peers accompanying TPCs.

Community Service Events (CSEs): 2 – public presentations, community events, etc.

Service Contacts (SCs): 6 meetings/tours with prospective participants.

Staff comment: Service contacts and service hours associated with TPCs are documented in online reporting system. Program provided 27,408 hours of service to TPCs during PY23. Proposes to continue PY24 targets.

PY25 Targets 45 TPCs 45 NTPCs 6 SCs 2 CSEs

PY24 First Two Quarters (per submitted Service Activity Reports)

First Quarter	42	98	14	2
Second Quarter	1	10	4	1
<i>Annual Targets</i>	<i>45 TPCs</i>	<i>45 NTPCs</i>	<i>6 SCs</i>	<i>2 CSEs</i>
PY23 All Four Quarters (per submitted Service Activity Reports)				
First Quarter	31	56	2	1
Second Quarter	2	15	4	2
Third Quarter	1	20	11	1
Fourth Quarter	6	2	7	1
<i>Annual Targets</i>	<i>50 TPCs</i>	<i>50 NTPCs</i>	<i>5 SCs</i>	<i>2 CSEs</i>

Financial Analysis

PY2025 CCDDDB request: \$950,000

PY2025 Total program budget: \$3,271,578

Current year funding (PY2024): \$890,042

Proposed change in funding - PY2024 to PY2025 = 7%

CCDDDB request is for 29% of total program revenue.

Other program revenue is from Ford County MHB \$24,960, DHS Fee for Service \$2,279,794 (70%), Program Service Fees \$29, and Miscellaneous \$16,795.

Personnel costs of \$688,513 are 72% of the requested amount.

Other expenses are Professional Fees/Consultants \$10,152 (1%), Consumables \$10,615 (1%), General Operating \$10,353 (1%), Occupancy \$58,402 (6%), Conferences/Staff Development \$2,218, Local Transportation \$77,757 (8%), Equipment Purchases \$1,594, Lease/Rental \$76,618 (8%), Membership Dues \$3,160, and Miscellaneous \$10,618 (1%).

Total agency budget has a deficit of \$109,133, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: 1.73 Indirect + 14.88 Direct = 16.61 FTEs.

Total program staff: 5.8 Indirect + 51.20 Direct = 57 FTEs.

Staff comment: This request is related to a very large program so that portions of many staff are assigned.

Indirect staff include: 16% of full time maintenance tech and maintenance worker; 14% of part time maintenance tech and grounds manager; 8% of full time Training Coordinator and of 90% of full time Director of Program Assurance; 7% of full time HR Manager, AP Associate, 2 Office Support Professionals, AR Associate, Accounting Manager, Executive Assistant (vacant), Payroll Coordinator, and VP Human Resources; 7% of 80% of full time Executive VP of Support Services; 6% of full time CEO; 5% of part time Accounting Assistant (vacant); and 2% of 25% of Exec VP of Clinical Services. Direct staff include: 29% of 6 full time Bus Drivers (2 vacant), 24 DSPs (2 vacant), 8 CDS Specialists (2 vacant), 2 CDS Managers, 1 CDS Assistant Manager, 1 C1st Coordinator, 1 CDS Coordinator, and 1 Director of CDS; 23% of a full-time Employment Services Manager; 22% of a full-time Bus Driver/Production Crew Leader; 18% of a full-time Operations Manager; 15% of 2 full-time Bus Drivers/Production Crew Leaders; 9% of a full time Bus Truck Driver and Director of Employment Services; 6% of 2 full-time Production Crew Leaders, a DSP, a Maintenance Tech, and Director of Business Operations; 6% of part time Bldg Grounds Manager; and 4% of 75% of the Exec VP of Clinical Services.

The increased request reflects an average salary increase for DSPs of 7.5% and an organization-wide salary increase of 6.5%, plus the resulting increase in associated payroll taxes, in addition to other inflationary increases in expenses. Professional Fees will pay for a speech consultant and an allocation of agency's accounting, audit, legal, and IT service expenses. Proper assessment and analysis of the financial forms is difficult due to how the forms were presented. The Budget Narrative references a "General Agency Expense" section, in which it appears that many different agency-wide expense categories are prorated and allocated to

the program. It is not specified in the financial forms how much, if any, of any given expense category includes an agency-wide prorated allocation. Further descriptions of some of these expense categories are vague, provide no specifics, and are therefore insufficient. The result are financial forms that are unclear. It is also very likely that, as a result of these allocations, this program will be charged for expenses from which the program did not benefit or even utilize. Per the CCDDDB Funding Guidelines, section 6(e)(iii) states that the “organization shall have accounting structures that provide accurate and complete information about all financial transactions related to each separate CCDDDB contract.” Utilizing an agency-wide cost allocation method is not consistent with this section of the CCDDDB Funding Requirements and Guidelines.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: DSC has a DEI (Diversity Equity and Inclusion) Committee that meets quarterly to look at the goals and actions steps. Meeting minutes outline their plan and actions taken around DEI. DSC conducts on-going surveys with clients and their families about services that are offered and will expand opportunities for people receiving services to be in an advisory capacity in the hiring process, trainings staff, and planning community events.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes.

Highlights from the submitted CLC Progress Report: Staff Training will be completed in 3rd and 4th quarters. Prioritized training and support to reduce burnout for staff and compassion fatigue. A monthly DEI Newsletter is shared with staff and board members. Members of the agency’s governing board have lived experience.

Staff comment: DSC is shifting their language around cultural and linguistic competence to include DEI. They have been working with the CLC Coordinator to develop training and support for their board, administration, and direct staff to align with the values and tools for empathy for working with people living with disabilities.

Criteria for Best Value

Budget and program connectedness: The Budget Narrative addresses increased costs, notes that the program traditionally runs on a loss and is projected to for PY25, describes other sources of revenue, provides detail on the direct staff to be charged to this contract, and refers us to general agency cost allocation info provided in the Clinical Services application which itself references the annually reviewed “Allocated Program Expense formula.” Program expenses include high transportation costs (buses, drivers, other vehicles), use of large facility space for onsite services, speech consultant, projected based on historic cost analysis.

Participant outcomes (see above for details): Relate to participant satisfaction with each group and to their input in planning future groups/activities.

Self-determination and self-direction in service planning: Discovery, Personal Plan, input from participants.

Eliminating disparities in access and care (see above for Agency CLC Plan details): Referrals from providers, ISCs, high schools, family, etc., increased rural participation; agency involvement in community activities and info through website and social media; transportation assistance; efforts more inclusive partly due to involvement with events and trainings hosted by members of minority populations; wide range of activities and locations based on selected events or resources.

Promoting inclusion and reducing stigma: Positive impacts of being in the community, developing connection to others, increased confidence and sense of belonging, advocacy opportunities, and recently added monthly social activities in various venues (with support from new IFS staff).

Continuation of services during public health emergency: Limited virtual option, but use of technology.

Builds on successes with technology and virtual platforms, increasing training and access for staff and

people served: Yes. Internet safety class, “Learning the Library” utilizing the CPL app to keep track of due dates, request new items, etc.; fantasy football crew using similar apps to make trades and set lineups, with a

few now independently enjoying the ESPN fantasy league page; Music Jam and Songwriting uses Soundtrap; video game group... all sorts of games, fluent with a mobile game some use outside the group.

Unique features - approach: Describes increased use of small groups in community; details and link to Relias blog on promoting community inclusion (choice, responsibility, cultural compatibility, natural supports).

Unique features - staff credentials: Training specific to individuals receiving services; state DSP training (120 hrs classroom and on-the-job); Introduction to Developmental Disability, Human Rights, Human Interaction and Communication, Service Planning, Basic Health & Safety, First Aid/CPR, OIG/Abuse & Neglect; new employee training on Cultural Competence and Employment First as part of DSC's agency culture, emphasizing community inclusion and employment; staff include artists, musicians, exercise enthusiasts, nature lovers, others committed to lifelong learning.

Unique features – resource leveraging: Not to be used as match for other funding; though this proposal is for 29% of total program which does include state funding for some, the focus is on 45 TPCs who do not have state funding; people do not pay a fee; those served are eligible for Medicaid waiver but not receiving it.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: Known due to prior experience funding the agency.

If applicable, audit findings: PY2023 agency audit was submitted 12/13/23, with no findings of concern.

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: Not specified.

Coordinated system: Details similar services and how options may be accessed.

Written collaborative agreements: Illinois Self-Advocacy Alliance, Champaign Park District, YMCA

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: provide details on expenses specific to the program.*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Connections

Agency: DSC

Request: \$115,000

Why it matters: "... recreation, hobby, and leisure choices that otherwise might not be available... exposure to art, music, and other cultural expressions introducing individuals to possible new experiences, expanding their personal connections to their communities and allowing them the venue to share their interests and talents with others."

Selected priority: Community Life

Services and People Served

Who will benefit: Adults with I/DD, interested in opportunities (above) or non-traditional employment; people begin to identify themselves beyond the services they receive and in relation to their community.

Scope of services:

Program includes one FTE, rent, utilities and associated costs for the community site... a beautiful, welcoming, creative space for people needing quiet, accessible opportunities as they discover their inner-artist.

Supports personal exploration and participation in the arts/artistic expression, promoting life enrichment and alternative employment... to experience a creative outlet, promote self-expression, and profit from products they create/produce. Creativity remains a moderm for personal growth and life enrichment for many people.

While there is no requirement for the artists to sell their work, it is an interest and source of pride and income among many. The space is eclectic, deriving ideas, style, or taste, from a broad and diverse range of sources.

The Crow encourages people to be creative and offers a welcoming venue for various events. Specific groups and classes are requested by program participants. Alternative employment (i.e., sale of items created by participants.) On-site events to promote collaboration and a venue for like-minded community artists.

Location and frequency of services: The Crow at 110 E. University (downtown Champaign), other community venues, virtual options; frequency depends on small group rotation.

Staff comment: Request is to continue a current program; services section contains many specific examples.

Residency of 25 people served in PY23 and 21 in the first half of PY24:

Champaign	9 for PY23	6 for PY24
Urbana	8 for PY23	8 for PY24
Rantoul	2 for PY23	2 for PY24
Mahomet	3 for PY23	3 for PY24
Other	3 for PY23	2 for PY24

Demographics of 25 people served during PY23:

Age

Ages 13-18 -----	1
Ages 19-59 -----	22
Ages 60+ -----	2

Race

White -----	18
Black / AA -----	7

Gender

Male -----	10
Female -----	15
Ethnicity	
Not of Hispanic/Latino/a Origin -----	25

Measures of Client/Participant Access

Eligibility criteria and determination: People with I/DD (per state IDHS-DDD rules) and enrolled in PUNS and with an interest in pursuing creative talents.

Outreach to eligible people: Tours that include discussion of possible services/availability; information shared at community service events, media events, student IEPs, schools. Referrals from individuals, families, ISCs, providers, schools, churches. DSC invites speaking engagements to classes, groups, schools, events, etc.

Within 30 days from referral, 90% of those referred will be assessed.

Within 90 days of assessment, 75% of those assessed will engage in services.

People will engage in services, on average, for: Until no longer interested in services.

Additional demographic data: Disability, referral source.

Staff comment: Wait times are reasonable.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. Participants will host or engage in 5 special events to connect people with DD to the greater community.
2. 90% of participants will be satisfied with experience at The Crow at 110.
3. 2 collaborations with community artists teaching classes.

Specific assessment tools and data collection:

1. Program Manager will maintain record of events.
2. Satisfaction Survey will be offered to each participant - results collected by Director of Program Assurance.
3. Program Manager will document artist collaborations.

Outcome data gathered from all participants: Yes.

Will collect outcome data Quarterly.

Staff comment: Section includes updates on PY24 progress in all outcomes, continued for PY25. The first is CSEs below. The second measures the impact on the program participants. The third brings in people from the community and creates new opportunities for program participants.

Measures of Utilization

Treatment Plan Clients (TPCs): 25 people with Individual Plans pursuing creative interests at the Crow.

Non-Treatment Plan Clients (NTPCs): 12 people not receiving county funding.

Community Service Events (CSEs): 5 Crow events or community events including participants.

Staff comment: Service contacts and service hours associated with TPCs are documented in online reporting system. Program provided 1,216 hours of service to TPCs during PY23. Proposes to continue PY24 targets.

PY25 Targets	25 TPCs	12 NTPCs	5 CSEs
PY24 First Two Quarters (per submitted Service Activity Reports)			
First Quarter	19	20	2
Second Quarter	2	4	3
Annual Targets	25 TPCs	12 NTPCs	5 CSEs
PY23 All Four Quarters (per submitted Service Activity Reports)			
First Quarter	14	16	0
Second Quarter	4	1	2
Third Quarter	2	7	2

Fourth Quarter	5	1	3
Annual Targets	25 TPCs	12 NTPCs	5 CSEs

Financial Analysis

PY2025 CCDDDB request: \$115,000

PY2025 Total program budget: \$115,401

Current year funding (PY2024): \$106,400

Proposed change in funding - PY2024 to PY2025 = 8%

CCDDDB request is for 99.7% of total program revenue.

Other program revenue is from DHS Fee for Service \$64, Other Program Service Fees \$1, Miscellaneous \$336.

Personnel costs of \$60,422 are 53% of the requested amount.

Other expenses are Professional Fees/Consultants \$630, Consumables \$5,335 (5%), General Operating \$1,857 (2%), Occupancy \$8,793 (8%), Conferences/Staff Development \$124, Local Transportation \$143, Equipment Purchases \$125, Lease/Rental \$35,181 (31%), Membership Dues \$421, Miscellaneous \$1,969 (2%).

Total agency budget has a deficit of \$109,133, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: 0.14 Indirect + 1.05 Direct = 1.19 FTEs.

Total program staff: 0.14 Indirect + 1.05 Direct = 1.19 FTEs.

Staff comment: Indirect Personnel to be charged to this contract include 1% of 13 full-time positions and 1% of one 90% time (Director of Program Assurance.) Direct staff are 80% of a full-time Community First Direct Support Professional, 20% of Employment Services Manager, and 5% of 75% of Executive VP of Clinical Services. This position is 75% Direct and 25% Indirect for Total Agency, rather than ¾ time.

The increased request reflects an average salary increase for DSPs of 7.5% and an organization-wide salary increase of 6.5%, plus the resulting increase in associated payroll taxes, in addition to other inflationary increases in expenses. Lease/Rental Expense will pay for rent at the Crow facility and transport vehicles. Proper assessment and analysis of the financial forms is difficult due to how the forms were presented. The Budget Narrative references a "General Agency Expense" section, in which it appears that many different agency-wide expense categories are prorated and allocated to the program. It is not specified in the financial forms how much, if any, of any given expense category includes an agency-wide prorated allocation. Further descriptions of some of these expense categories are vague, provide no specifics, and are therefore insufficient. The result are financial forms that are unclear. It is also very likely that, as a result of these allocations, this program will be charged for expenses from which the program did not benefit or even utilize. Per the CCDDDB Funding Guidelines, section 6(e)(iii) states that the "organization shall have accounting structures that provide accurate and complete information about all financial transactions related to each separate CCDDDB contract." Utilizing an agency-wide cost allocation method is not consistent with this section of the CCDDDB Funding Requirements and Guidelines.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: DSC has a DEI (Diversity Equity and Inclusion) Committee that meets quarterly to look at the goals and actions steps. Meeting minutes outline their plan and actions taken around DEI. DSC conducts on-going surveys with clients and their families about services that are offered and will expand opportunities for people receiving services to be in an advisory capacity in the hiring process, trainings staff, and planning community events.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes.

Highlights from the submitted CLC Progress Report: Staff Training will be completed in 3rd and 4th quarters. Prioritized training and support to reduce burnout for staff and compassion fatigue. A monthly DEI Newsletter is shared with staff and board members. Members of the agency's governing board have lived experience.

Staff comment: DSC is shifting their language around cultural and linguistic competence to include DEI. They have been working with the CLC Coordinator to develop training and support for their board, administration, and direct staff to align with the values and tools for empathy for working with people living with disabilities.

Criteria for Best Value

Budget and program connectedness: The Budget Narrative describes increased costs, projected program deficit, and details on direct program staff. It refers us to general agency cost allocation info provided in the Clinical Services application which itself references the annually reviewed "Allocated Program Expense formula." Beyond staff, program-specific expenses include rental of the Crow facility and rental of vehicles.

Participant outcomes (see above for details): measures of participant satisfaction and program performance.

Self-determination and self-direction in service planning: activities based on participant preferences.

Eliminating disparities in access and care (see above for Agency CLC Plan details): referrals from ISCs, high schools, self, family, community partners. DPS and artists may share info during events. Event info shared with schools, agencies, and libraries across the county. Virtual options; online sales throughout the year. Tours of the Crow through special ed teachers. Info shared at community events (Farmer's Markets, Expo, Boneyard Festival) and connections (CU Photo Club, Springer Center, CU Create, Family Service, school art programs.)

Promoting inclusion and reducing stigma: participants engage in other local events (festivals, theater, art shows), building relationships and interests; Open Houses and other Crow events welcome artists from the community to show and share space with participants.

Continuation of services during public health emergency: virtual options.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: not a focus; program does support online sales of participant creations.

Unique features - approach: discussion of creative self-expression, sharing of interests, and article "The Role of Art in Promoting Inclusivity and Accessibility for People with Disabilities" (with link).

Unique features - staff credentials: training specific to individuals receiving services; state DSP training (120 hrs classroom and on-the-job); Introduction to Developmental Disability, Human Rights, Human Interaction and Communication, Service Planning, Basic Health & Safety, First Aid/CPR, OIG/Abuse & Neglect; new employee training on culturally competent topics and Employment First as part of DSC's agency culture, emphasizing community inclusion and employment for all; staff include art/music teachers, exercise enthusiasts, nature lovers, others committed to lifelong learning, interest in local art community.

Unique features – resource leveraging: not to be used as match for other funding; focus is on 25 TPCs but includes peers - 12 NTPCs (who have other funding for day program); people do not pay a fee; agency participates in Medicaid waiver programs and serves those who are eligible.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: known due to prior experience funding the agency.

If applicable, audit findings: PY2023 agency audit was submitted 12/13/23, with no findings of concern.

If applicable, compliance issues: None.

All forms submitted by deadline: Yes. Completed February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: not specified.

Coordinated system: no similar services.

Written collaborative agreements: N/A

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: clarify expense items specific to the program.*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft I/DD Special Initiatives PY2025 Program Summary

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

Program: Community Life Short Term Assistance - NEW

Agency: CCRPC – Community Services

Request: \$232,033

Why it matters: “... by providing financial assistance, along with supportive services to address needs and desires of furthering community life for adults with I/DD... [to] access social, developmental, and leisure activities, that may not otherwise be financially accessible... assisting individuals with I/DD toward further understanding, confidence building and longer-term self-sufficiency...”

Selected priority: Short-Term Supports for People with I/DD

Staff comment: this is a request for funding for a new program, aligned with a PY25 priority category.

Services and People Served

Who will benefit: People eligible for DDB, receiving services through a DDB funded program and those currently registered on PUNS awaiting services; seeking opportunities to expand aspects of their community life; income at or below 60% annual median; priority consideration to those with cooccurring diagnoses, requiring multiple supports or those with limited access to local services.

Scope of services: Direct funding support for activities, hobbies, courses, events, travel, entertainment, or technological devices required to access these. Aligned with person-centered plans. Coaching sessions on resource education, budgeting, self-sufficiency, social skills, etc. Satisfaction survey as follow-up. Participants will complete intake and application (with assistance).

Location and frequency of services: provided in manner most convenient and accessible for participant. CCRPC offices in Champaign, Urbana, and Rantoul or at partnering providers’ offices or community locations. Virtual or in-person. Paperwork requiring participant signature must be completed in-person. Participant engagement will be 30 days per instance of direct client funds assistance.

No residency or demographic data, as this is a NEW program request.

Measures of Client/Participant Access

Eligibility criteria and determination: PUNS enrolled and meeting income guidelines (at or below 60% Annual Median Income).

Outreach to eligible people: referrals from service providers, outreach events, flyer distribution to local committees/agencies, flyer distribution to people on PUNS list, CCRPC’s website and social media accounts, direct contact from individuals with I/DD and their families, and inter-organizational referrals.

Within 2 days of referral, 95% of those referred will be assessed.

Within 10 days of assessment, 95% of those assessed will engage in services.

People will engage in services, on average, for: 30 days per instance of direct funds assistance.

Additional demographic data: n/a (though an early section references income data)

Staff comment: Timeframes are reasonable, although high program demand may pose difficulties.

Measures of Client/Participant Outcomes

Outcomes and targets:

1 – 90% of those receiving financial assistance to purchase technology or equipment will report increased knowledge, skills, ability to engage in social or entrepreneurial activities

2 – 80%... purchase of social events or classes will report an increase in knowledge, skills, ability to engage socially, or overall wellbeing.
3 – 50% ... purchase of travel will report increase in overall wellbeing.
4- 90%... coaching or supportive services...will report increase in confidence to engage in the funded activity.
Specific assessment tools and data collection: Satisfaction surveys.
Outcome data gathered from all participants: Yes.
Will collect outcome data at the close of each instance of funds assistance or final case management session.

Measures of Utilization

Treatment Plan Clients (TPCs): 44 – (50% of NTPCs) people who engage in coaching sessions aimed at supporting skill development in the use of technology (or software), social, recreational, entrepreneurial, or travel costs, with financial support of the program.

Non-Treatment Plan Clients (NTPCs): 88 – individuals receiving financial assistance for technology (or software), social, recreational, entrepreneurial, or travel costs.

Community Service Events (CSEs): 8 – outreach events, presentations, meetings with other professionals.

Service Contacts (SCs): 25 – number of people seeking the service but ineligible and therefore referred to other resources/providers.

Staff comment: Service contacts and service hours associated with TPCs should be documented in the online reporting system.

PY25 Targets	44 TPCs	88 NTPCs	25 SCs	8 CSEs
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Financial Analysis

PY2025 IDDSI request: \$232,033

PY2025 Total program budget: \$232,033

Current year funding (PY2024): \$0

Proposed change in funding - PY2024 to PY2025 N/A

IDDSI request is for 100% of total program revenue.

Personnel costs of \$42,676 are 18% of the requested amount.

Other expenses are Consumables \$200, General Operating \$200, Occupancy \$13,657 (6%), Local Transportation \$300, Specific Assistance \$175,000 (75%).

Total agency budget has a surplus of \$321,112, total program budget and IDDSI budget are balanced.

Program staff to be funded by IDDSI: 0.6 Direct = 0.6 FTEs.

Total program staff: 0.6 Direct = 0.6 FTEs.

Staff comment: An error exists in the Personnel Form which may also contribute to an incorrect calculation of Payroll Taxes, Benefits, and Occupancy categories on the Expense Form. Specific Assistance is limited to a maximum of \$3,000 per client and will be used for the purchase of approved equipment or activities needed to engage in entrepreneurial, social events, hobbies, classes, recreational, or leisure activities to support client well-being. General Operating will pay for Outlook email licenses and phones by direct staff, background check fees, and IT support user fees. Local Transportation will pay for agency vehicles and mileage reimbursement for staff personal vehicles. Occupancy covers GATA-approved indirect administrative costs.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan:

1. Offer a higher rate of pay to potential employees that are fluent in languages other than English. This action step is important because it incentivizes the recruitment of employees who can effectively

communicate with diverse populations and provide culturally and linguistically appropriate care and services.

2. Review and update the Cultural and Linguistic (CLC) plan annually. This is important because it ensures that the organization's policies and practices remain current and aligned with cultural competency standards.
3. Provide language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them. This ensures that language barriers do not hinder individuals from accessing timely and quality care and services.
4. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes. This is important for assessing the effectiveness of cultural competency efforts and identifying areas for improvement.
5. Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities. This ensures that the organization is continuously evaluating and improving its cultural competency practices to better meet the needs of diverse populations.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes.

Highlights from the submitted CLC Progress Report: All Head Start staff completed quarterly CLC on training on culturally responsive teaching and “Cross Linguistic Transfer in Bi-literacy Instruction: Why Connections Matter through as well as Welcoming Each and Every Child.” CCRPC has 4 new members involved in the cultural competency committee as a result of adding an introduction about cultural competence committee component to the new staff orientation. Six parents and five community representatives serve as members of the Policy Council and Parent committees for Head Start.

Staff comment: The Plan is inclusive of Head Start and Community Services Division. It addresses how the committee works with all the divisions of CCRPC to show how CLAS (Cultural and Linguistic Appropriate Services) are being implemented across the entire agency.

Criteria for Best Value

Budget and program connectedness: The financial forms support program activities. See financial analysis above for staff comments on details.

Participant outcomes (*see above for details*): Outcomes are person focused and relate to overall wellbeing and are associated with appropriate assessment tool and process.

Self-determination and self-direction in service planning: Person-centered Planning

Eliminating disparities in access and care (*see above for Agency CLC Plan details*): county-wide outreach, use of offices and community spaces as people prefer; connections made through community events, committees, other providers, and other RPC programs; marketing through website and social media; coordination with rural transportation providers; service locations as convenient to the people served; virtual options.

Promoting inclusion and reducing stigma: collaborates with the people served – to increase their independence, autonomy, and inclusion... through tangible access to supports; outreach events and opportunities to educate the community about abilities of people with I/DD and services they may use.

Continuation of services during public health emergency: Yes, virtual services are available.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: Yes, training on specific technology purchases available.

Unique features - approach: notes barriers in technology access for self-advocates and caregivers. References NCI’s Core Indicator of providing access for financial assistance toward technology for the access of leisure, social or entrepreneurial activities. References NCI – I/DD data: people with I/DD experience “abundant and well-documented” benefits from taking vacations.

Unique features - staff credentials: Coordinator is a Qualified Intellectual Disability Professional (QIDP) and MSW with over 16 years of experience working in social services. Case Manager has a bachelor's degree, has worked as an ISC/QIDP for 4 years, and worked in the mental health field for 8 years.

Unique features – resource leveraging: Not to be used as match for another source of funding. Assists people with CCAMR mini-grant application for funding before purchase of items. No other pay sources, no client fees or sliding scale, no Medicaid participation.

Staff comment: Program request is in direct response to Self-Advocates' wants and desires identified during August 2023 DDB/MHB Joint Study Session.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: Yes. This is a large organization with financial staff and oversight by the County Auditor and County Board.

If applicable, audit findings: N/A. CCRPC's programs are included in the County's combined audit.

If applicable, compliance issues: N/A

All forms submitted by deadline: Yes. Completed on February 12.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: No other funding source. Will require application to CCAMR Mini grant first.

Coordinated system: Program assists clients to utilize CCAMR mini grant prior to using DDB grant funding. RPC works closely with Champaign County IDD providers and will receive program referrals from local providers.

Written collaborative agreements: DSC, Community Choices, PACE, other RPC programs.

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: resolve possible financial forms errors or mismatches.*
- *Special provisions: track contacts with people who do not have any services; coordinate with other agencies providing similar services; report quarterly via Online Reporting System; offer online technology training and access for staff and clients; require scholarship denial prior to specific assistance; align with IDHS-DDD purchase process; execute training activities in natural settings.*
- *Offer agency two-year contract term.*

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

Recommendation: Pending

Draft CCDDDB PY2025 Program Summary

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

Program: Workforce Development and Retention

Agency: DSC

Request: \$244,000

Why it matters: "...to positively impact recruitment and retention of direct care staff [and]... education and resources to improve the knowledge and skill set of direct support professionals."

Selected priority: Strengthening the I/DD Workforce

Services and People Served

Who will benefit: Staff providing direct services/supports for people with IDD. Direct Support Professionals (DSPs), Qualified Intellectual Disability Professionals (QIDPs), and Family Development staff are included in the plan to recognize and retain experienced staff, acknowledging their ongoing contributions. Staff turnover and inability to recruit/fill vacancies have a direct impact on those who stay to do this important work. Employees who require specific training for their role or educational requirements for specialized services are deemed essential workers yet work in a field that is woefully underfunded at a state and national level.

Scope of services: Training, Support, Recognition/Reward

National Alliance for Direct Support Professionals (NADSP) membership and associated benefits to advance professionalizing the field... to elevate the status of DSPs by establishing an interconnected network of DSPs, Frontline Supervisors, self-advocates, family members, human service organizations, healthcare professionals, social workers, statewide groups, national associations, and more... exclusive access to information, resources, and training to improve the knowledge and skill set of the DSP workforce.

Professional development... sending two staff to the annual NADSP conference, demonstrating an investment in staff that can have a positive impact on staff retention. One NADSP training each year to invite/include all direct support staff; Feedback from DSPs – appreciation for the investment in staff development and improved quality of services for those they support.

Hiring/New Employee Bonuses... incentivize new employees by recognizing their completion of training, with a \$400 bonus as each employee completes required training... has proven a successful hiring tool, elevating the starting salary with new employee and retention bonus eligibility.

Retention Bonuses... incentive to keep key employees in knowingly stressful positions. DSP feedback references being valued, and appreciated, as well as incremental bonuses to offset lower than desired salaries... \$400 quarterly bonuses per employee... in recognition of the challenges of a compromised work force and... long-term effects of high turnover and frequent vacancies - \$1,600 per employee per year.

Location and frequency of services: Annual training, annual conference, quarterly payments, one time training completion incentive; some in person (work and conference locations), some virtual.

Staff comment: The request is for a two-year contract supporting continuation of relatively new program.

Residency and Demographic data are not collected for this program.

Measures of Client/Participant Access

Eligibility criteria and determination: (see Scope of Services)

Outreach to eligible people: n/a

Referral and engagement timelines: n/a

People will engage in services, on average, for: n/a

Additional demographic data: n/a

Staff comment: staff length of employment and demographic data could be reported; some national survey data suggest these are relevant to the workforce shortage. Outreach to new employees may be of interest.

Measures of Client/Participant Outcomes

Outcomes and targets:

To provide a more stable and reliable workforce to improve continuity of services and supports -

1. 1 annual training to support professional development: 2 DSPs will attend NADSP Conference.
2. Bonuses for completed employee training for 25 new employees.
3. Quarterly retention bonuses for eligible employees.

Specific assessment tools and data collection:

1. Trainings documented in employee database.
2. Bonuses documented for those completing required training. List to be maintained.
3. List of retention bonuses documented and maintained.

Outcome data gathered from all participants: Yes.

Will collect outcome data quarterly.

Staff comment: HR maintain documentation; although specific assessment tools are not in use, the agency is a member of National Association of DSPs which offers training modules; a measure of positive impact on DSPs could make use of survey feedback (which the agency has conducted) regarding payments, trainings, and NADSP; another measure could relate to the impact on those served by DSPs, QIDPs, and FD staff.

Measures of Utilization

Other: 160 staff receiving bonuses.

Staff comment: Proposal is to continue the target from current and prior years.

PY25 Targets 160 Other

PY24 First Two Quarters (per submitted Service Activity Reports)

First Quarter 7

Second Quarter 131

Annual Targets 160 Other

PY23 All Four Quarters (per submitted Service Activity Reports)

First Quarter 120

Second Quarter 8

Third Quarter 117

Fourth Quarter 128

Annual Targets 160 Other

Financial Analysis

PY2025 CCDDDB request: \$244,000

PY2025 Total program budget: \$244,000

Current year funding (PY2024): \$227,500

Proposed change in funding - PY2024 to PY2025 = 7%

CCDDDB request is for 100% of total program revenue.

Personnel costs of \$238,000 are 98% of the requested amount.

Other expenses are Conferences/Staff Development \$4,500 (2%) and Membership Dues \$1,500.

Total agency budget (16,135,847) has a deficit of \$109,133, total program and CCDDDB budgets are balanced.

Program staff to be funded by CCDDDB: n/a

Total program staff: n/a

DSC – Workforce Development and Retention

Staff comment: The increase in request relates primarily to change of timing and amounts of DSP retention incentive payments from three \$500 payments to \$400 payments made quarterly. As an unconventional approach, the personnel form lists bonuses of \$213,000 in the Total Program and CCDDB columns but \$0 in the Total Agency column and likely needs to be corrected. NADSP membership will cost \$1,500 and supports the staff associated with this program. Conferences/Staff Development is budgeted at \$4,500 and will pay to send two staff members to the national NADSP conference, and one NADSP training for all direct support staff.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: DSC has a DEI (Diversity Equity and Inclusion) Committee that meets quarterly to look at the goals and actions steps. Meeting minutes outline their plan and actions taken around DEI. DSC conducts on-going surveys with clients and their families about services that are offered and will expand opportunities for people receiving services to be in an advisory capacity in the hiring process, trainings staff, and planning community events.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes.

Highlights from the submitted CLC Progress Report: Staff Training will be completed in 3rd and 4th quarters. Prioritized training and support to reduce burnout for staff and compassion fatigue. A monthly DEI Newsletter is shared with staff and board members. Members of the agency's governing board have lived experience.

Staff comment: DSC is shifting their language around cultural and linguistic competence to include DEI. They have been working with the CLC Coordinator to develop training and support for their board, administration, and direct staff to align with the values and tools for empathy for working with people living with disabilities.

Criteria for Best Value

Budget and program connectedness: Budget Narrative explains that the requested increase is to reorganize retention payments (to quarterly rather than 3x per yr) and to add annual retention payments for part-time DSPs (based on hours worked over 1000). There is clear relationship between program activities and expenses.

Participant outcomes (see above for details): Appropriate measures.

Self-determination and self-direction in service planning: n/a

Eliminating disparities in access and care (see above for Agency CLC Plan details): Not addressed, could be developed, using experience and national data.

Promoting inclusion and reducing stigma: Not addressed, could be developed.

Continuation of services during public health emergency: Yes.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: Yes, use of training tools.

Unique features - approach: Describes and links to three sources supporting professionalization of the field and the positive impact of retention payments.

Unique features - staff credentials: Summarizes all staff training; details credentials of DSPs, QIDPs, and Family Development; previous trainings on Implicit Bias, Alzheimer's and DD, HIPAA Compliance, etc.

Unique features – resource leveraging: Not to be used as match for other revenue; no other pay sources; no client fees; not eligible for Medicaid participation.

Staff comment: A recent development at IDHS-DDD is some level of reimbursement for a subset of the relevant staff, but more information is needed on the details of what could be other funding for the program.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: Known due to prior experience funding the agency.

If applicable, audit findings: PY2023 agency audit was submitted 12/13/23, with no findings of concern; unspent revenue of \$83 was returned (of original contract amount of \$227,500.)

If applicable, compliance issues: None.

All forms submitted by deadline: Yes, all forms submitted February 9, 2024.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes, indirectly, by encouraging staff to stay.

Evidence that other sources of funding have been maximized: Yes.

Coordinated system: Though the application says there are no similar services, DDB funds do support a similar strategy with another DD agency provider.

Written collaborative agreements: N/A

Referral between providers: N/A

Staff comment: Due to a similar program with another provider, some degree of coordination may maximize impact on the local DD community and minimize unintended negative effects of new employee bonuses.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Improvements during contract year: possible work with Evaluation team to connect these activities to positive impacts on people served by the agency programs.*
- *New special provision: agency should utilize IDHS-DDD staff recruitment and retention funds for all eligible staff prior to use of DDB funding.*
- *Consider continuing the PY24 special provisions.*
- *Offer a two-year contract term.*

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

Recommendation: Pending

Draft CCMHB PY2025 Program Summary

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

Program: [Early Childhood Mental Health Svcs](#)

Agency: Champaign County Head Start/Early Head Start

Request: \$388,463

Why it matters: "... Research across disciplines has identified the importance of preschool as a prevention. Preschool plays a role in shrinking the achievement gap as well as slowing the flow of the school-to-prison pipeline. Participation in preschool impacts important quality-of-life outcomes like maintaining employment, reducing participation in the criminal justice system, and having savings accounts. These outcomes are linked to acquiring social-emotional skills such as self-regulation, emotional literacy, empathy, and interpersonal problem-solving during the critical window between birth and 5 years...."

Selected priority: Thriving Children, Youth, and Families

Staff comment: aligns with selected priority and Collaboration with CCDDb: Young Children & their Families.

Services and People Served

Who will benefit: low-income and at-risk children enrolled in RPC Early Childhood Education (Head Start/Early Head Start) and their teachers and parent/guardians... identifying higher numbers of children with developmental delays, close to twice as many as in previous years. Consultant, coaches, and committees meet weekly to develop goals, support teachers and parents, and monitor children with demonstrated delays, concerns, or need for referrals.

Scope of services: identifies children's social-emotional strengths and areas of need, using assessments, observations (including video), and reflective conversation; reviews developmental screenings for enrolled students; supports referral to school districts or developmental pediatricians; supports staff and parents writing individualized social-emotional goals and plans; supports staff and parents in reflection around inter/intra-personal skills used with children to improve co-regulation, attunement, empathy, and compassionate limit setting; collaborates on individualized inter/intra-personal goals and action plans; collaborates on Support Plans for children who engage in challenging behaviors to communicate their needs; stages workshops, support groups, and coaching for staff and parents on social-emotional development, compassionate caregiving, stress-management, functional behavior assessments, trauma-informed practices/leadership, and cultural competency; supports staff in monitoring children's progress and outcomes; offers parenting consultation and coaching through Facebook groups and Zoom meetings; reviews developmental screenings and makes recommendations; creates unique virtual stress management and equity-related content for local Champaign residents in collaboration with CU TRI.

Location and frequency of services: assigned sites are classrooms, daycare home, participant homes, or virtual. Biweekly coaching to support parents' and teachers' relationships with children. Weekly or monthly (depending on need) reflective conversations and consultation.

Staff comment: Edited here for length, the services are as described in prior year contracts. This section states that "funding for a fourth coach was secured through an Early Head Start Expansion grant" as in prior years, but this position is not reflected in personnel forms, and the other funding not included in financial forms. Partners with 7 similar programs through the Champaign County Home Visiting Consortium.

Residency of 74 people served in PY23 and 59 in the first half of PY24:

Champaign	45 for PY23	23 for PY24
Urbana	11 for PY23	16 for PY24
Rantoul	10 for PY23	15 for PY24

Other 8 for PY23 5 for PY24

Demographics of 74 people served during PY23:

Age

Ages 0-6 ----- 70

Ages 19-59 ----- 4

Race

White ----- 16

Black / AA ----- 46

Other (incl. Native American, Bi-racial)- 12

Gender

Male ----- 42

Female ----- 32

Ethnicity

Of Hispanic/Latino/a Origin ----- 3

Not of Hispanic/Latino/a Origin ----- 69

Not Available ----- 2

Measures of Client/Participant Access

Eligibility criteria and determination: Head Start enrolled children may be eligible. Pyramid Model criteria for services: Tier 1 positive relationships with children, families, and colleagues; Tier 2 creating supportive environments; Tier 3 social emotional teaching strategies; and Tier 4 intensive individualized interventions. After screening yields a DECA score indicating eligibility or after documentation of age inappropriate or disruptive behavior in class or at home, the Social Emotional Committee determines need for SE goals. Adults meet criteria if they are a caregiver of an enrolled child and are requesting services.

Outreach to eligible people: Head Start staff learn about the program at orientation; agency shares info at parent meetings, one on one with teachers and advocates, on Facebook, and through brochures and parent handbook. Program offers parent education on trauma-informed care, social emotional development, and strategies to reduce challenging behaviors and increase social-emotional skills.

Within 7 days from referral, 100% of those referred will be assessed.

Within 7 days of assessment, 100% of those assessed will engage in services.

People will engage in services, on average, for 3 months to 2 years.

Additional demographic data: or Office of Head Start, family's structure, income, language, education, employment, military status, marital status, housing status.

Staff comment: Program previously used the Ages and Stages Questionnaire- Social Emotional screening. Wait times are excellent, especially given the nature of some children and families' concerns.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. Children will demonstrate improvement in social skills related to resilience such as: a. Self-Regulation b. Initiative c. Relationship building/Friendship skills d. Emotional Literacy e. Problem-Solving
2. Head Start staff will demonstrate improvement interpersonal, stress management, and caregiving skills. And a reduction in Burnout/compassion fatigue.
3. Parents will demonstrate improvement in stress management and caregiving skills.
4. Classroom management will demonstrate social-emotional sensitive interactions in fidelity with the Pyramid Model.

Specific assessment tools and data collection:

1. Pre and post resilience related social skills are assessed using the Ages and Stages Questionnaire: Social-Emotional and the DECA-P2 and DECA I/T. Throughout the school year, documentation is collected by teachers in teaching strategies GOLD regarding social emotional skills and evaluated during fall, winter, and spring checkpoints.
2. ProQOL Measure of Burnout, Compassion Fatigue, and Vicarious Trauma; and Adult DECA
3. Parenting Stress Index; and Adult DECA
4. TPOT/TPITOS - classroom management

Outcome data gathered from all participants: No, only from those involved with formal/intensive services.

Will collect outcome data 2 to 3 times a year.

Staff comment: Unchanged from current contract. Outcomes are measurable and focused on benefit to the participants (children, families, and teachers.)

Measures of Utilization

Treatment Plan Clients (TPCs): 80 new children, parents, or staff in ongoing support consultation requiring goal setting, planning, and follow-up.

Non-Treatment Plan Clients (NTPCs): 380 new children, parents, or staff receiving screening, intermittent, one-off support and consultation; recipients of psychoeducation, training, or professional development.

Community Service Events (CSEs): 5 community trainings and workshops sharing program info.

Service Contacts (SCs): 3000 meetings and observations of children, Practice Based Coaching with education staff, SE committee meetings, reflective consultation with staff and caregivers, screenings, assessments, other services with or on behalf of TPCs and NTPCs.

Other: 12 psycho-educational workshops, training, professional development efforts with staff and parents.

Staff comment: The targets are to continue at PY24 levels. Service contacts and service hours associated with TPCs are documented in online reporting system. Program provided 974 hours of service to TPCs in PY23.

PY25 Targets	80 TPCs	380 NTPCs	3000 SCs	5 CSEs	12 Other
PY24 First Two Quarters (per submitted Service Activity Reports)					
First Quarter	88	83	416	0	11
Second Quarter	13	188	373	3	8
<i>Annual Targets</i>	<i>80 TPCs</i>	<i>380 NTPCs</i>	<i>3000 SCs</i>	<i>5 CSEs</i>	<i>12 Other</i>
PY23 All Four Quarters (per submitted Service Activity Reports)					
First Quarter	86	14	700	0	3
Second Quarter	20	206	959	0	2
Third Quarter	13	43	1241	2	2
Fourth Quarter	10	99	335	3	4
<i>Annual Targets</i>	<i>90 TPCs</i>	<i>380 NTPCs</i>	<i>3000 SCs</i>	<i>5 CSEs</i>	<i>12 Other</i>

Financial Analysis

PY2025 CCMHB request: \$388,463

PY2025 total program budget: \$388,463

Current year funding (PY2024): \$347,235

Proposed change in funding - PY2024 to PY2025 = 12%

CCMHB request is for 100% of total program revenue.

Personnel costs of \$242,910 are 63% of the requested amount.

Other expenses are Professional Fees \$72,000 (19%) and Occupancy \$73,553 (19%).

Total agency, program, and CCMHB budgets are balanced.

Program staff to be funded by CCMHB: 3.2 Direct FTEs

Total program staff: 3.2 Direct FTEs

Staff comment: No indirect staff costs are assigned to the contract. 100% of 3 full-time Social Skills and Prevention Coaches) and 20% of a full-time Off-Site Program Manager are listed; none of the positions are vacant at the time of application. The Professional Fees/Consultant expense relates to Early Childhood Mental Health Consultant, who has served the program for several years. Increased request relates to increased wages to be comparable with other providers. Occupancy covers GATA-approved indirect administrative costs.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan:

1. Offer a higher rate of pay to potential employees that are fluent in languages other than English. This action step is important because it incentivizes the recruitment of employees who can effectively communicate with diverse populations and provide culturally and linguistically appropriate care and services.
2. Review and update the Cultural and Linguistic (CLC) plan annually. This is important because it ensures that the organization's policies and practices remain current and aligned with cultural competency standards.
3. Provide language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them. This ensures that language barriers do not hinder individuals from accessing timely and quality care and services.
4. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes. This is important for assessing the effectiveness of cultural competency efforts and identifying areas for improvement.
5. Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities. This ensures that the organization is continuously evaluating and improving its cultural competency practices to better meet the needs of diverse populations.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes.

Highlights from the submitted CLC Progress Report: All Head Start staff completed quarterly CLC on training on culturally responsive teaching and "Cross Linguistic Transfer in Bi-literacy Instruction: Why Connections Matter through as well as Welcoming Each and Every Child." CCRPC has 4 new members involved in the cultural competency committee as a result of adding an introduction about cultural competence committee component to the new staff orientation. Six parents and five community representatives serve as members of the Policy Council and Parent committees for Head Start.

Staff comment: The Plan is inclusive of Head Start and Community Services Division. It addresses how the committee works with all the divisions of CCRPC to show how CLAS (Cultural and Linguistic Appropriate Services) are being implemented across the entire agency.

Criteria for Best Value

Budget and program connectedness: Budget Narrative provides detail on each revenue for the Head Start program, identifying the CCMHB grant as the only support for this program and identifies what is to be included in each expense category and how this was calculated (e.g., Occupancy covers some indirect costs, per agency's indirect cost allocation methodology approved by the State of Illinois.) Some costs will not be charged to this contract but instead covered by the agency (conferences/professional development, local transportation, consumables.) The relationships between listed personnel and the program activities are clear, with credentials identified in both the program narrative and the budget narrative, as are screenings and

outreach efforts and the Early Head Start Expansion funding which supports a fourth coach (though this is not identified in the other financial forms.)

Participant outcomes (see above for details): one outcome focuses on positive changes in children, one relates to parents' improved skills, and two relate to positive classroom/staff impacts, with appropriate assessment tools for each; 'improvement' is the target for each, rather than a specific increase in score.

Self-determination and self-direction in service planning: Families participate in planning.

Eliminating disparities in access and care (see above for Agency CLC Plan details): recruits... at local libraries, elementary schools, door to door, grocery/convenience stores, town/village events, community agencies, and many other locations... outreach at community events such as the annual Disability Expo, Read Across America, Week of the Young Child, and local school district early childhood program child-find activities... [Head Start program] must maintain at least 10% of the enrollment for children with diagnosed disabilities... serves children with health conditions such as sickle cell anemia, asthma, and diabetes.

SE Services... through center-based options strategically located in Champaign, Rantoul, and Urbana... home-based option that provides all HS/EHS services to families in their home and particularly meets the needs of families living in rural areas... Another option for families working and attending school is family childcare. Services are also provided in libraries, churches, coffee shops... virtual services... to reach more families... focus recruitment efforts where income-eligible families reside...

[Head Start] information at community meetings... [reaching] providers who serve the same populations... collaborates with Courage Connection that provides housing and supportive services to individuals and families who are victims of domestic violence.

Promoting inclusion and reducing stigma: ...embraces the least restrictive environment and offers this model in the classrooms and family childcare homes... takes seriously the need to reduce implicit bias... and the impact of structural racism... SE staff play an important role in developing and coordinating workshops, trainings, virtual content, and advocacy efforts that reduce stigma and support collective care...

Continuation of services during public health emergency: virtual options.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: not a focus.

Unique features - approach: describes and provides links to Practice-Based Coaching, Illinois Model of Early Childhood Mental Health Consultation (SAMHSA listed EBP), Illinois Association Infant Mental Health resources, Harvard collection of research on early childhood programs, Pyramid Model, and Conscious Discipline (EBP trauma-informed approach).

Unique features - staff credentials:

Social Skills and Prevention Coach – PhD in Clinical Psychology, experience with psychological assessments and individual, group, and family therapy, experience teaching CBT and sensory and sensorimotor assessment, multilingual (French, English, Spanish.)

Social Skills and Prevention Coach – Bachelor's in Psychology, human services work for over 12 years, certified in Illinois Medicaid Comprehensive Assessment of Needs, ARC trauma training, and the Child Endangerment Risk Assessment Protocol.

Social Skills and Prevention Coach –Bachelor's in Child and Family Studies with concentration in Child Development, 4 years' experience working with children as YMCA President of Leader's Club.

ECMHC - Masters in School Counseling, Doctorate in Counselor Education and Supervision, trained in Restorative Practices, Pyramid Model of Social Emotional Learning, Practice Based Coaching, and Self-Compassion Meditation Skills. A trained trainer in Pre-K and Infant Toddler Pyramid Model, National Certified Counselor and Licensed Professional Counselor.

Unique features – resource leveraging: not used as match; while no other fund sources are listed, Infant Toddler Specialist is funded by EHS expansion funds; agency seeks assistance from Medicaid providers prior to using this funding. Clients do not pay a fee, and the program is not eligible for Medicaid participation.

Staff comment: Is the Infant Toddler Specialist the same as the fourth coach, mentioned in a different section of the program plan narrative?

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: Yes. This is a large organization with financial management staff, oversight by the County Auditor and County Board.

If applicable, audit findings: N/A. CCRPC's programs are included in the County's combined audit.

If applicable, compliance issues: N/A

All forms submitted by deadline: Yes. Completed February 12.

Proposal relates directly to I/DD and how it will improve the quality of life for persons with I/DD: Yes.

Evidence that other sources of funding have been maximized: Other funds are mentioned but not reported in financial plan; unclear as to whether other funding has been sought.

Coordinated system: details similar and related services, distinctions between them, referrals a focus.

Written collaborative agreements: Champaign Unit 4, Rantoul City Schools, Mahomet Middletown Early Childhood, Urbana Unit 116, Spectrum Early Childhood, and Child and Family Connections. Memorandum of Understanding with CU Trauma and Resilience Initiative to support collaboration on Trauma-Informed capacity building. Works with the CUPHD on health and nutrition services to children and pregnant women. CU Early is another partner that collaborates with Head Start to offer kindergarten-ready kits to families enrolled in home-based and family childcare homes.

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: the Early Head Start Expansion grant which funds a fourth coach should be included in financial forms (personnel, expense, revenue, and budget narrative) OR if that funding and position have ended, the program plan narrative should be updated.*
- *Due to increased presentation of delays, identify specific shifts in cost and utilization.*
- *Offer a two-year term.*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

Draft CCMHB PY2025 Program Summary

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

Program: CU Early

Agency: CU Early

Request: \$80,723

Why it matters: "... serves at risk expectant families and children up to age 3... developmental screenings on all enrolled children alongside the parent to ensure that children are developing on track. A referral is made to Early Intervention if there is a suspected disability or concern with the Child's development... [CU Early] services are not covered by Early Intervention or under the school code..."

Selected priority: Thriving Children, Youth, and Families

Staff comment: aligns with selected priority and Collaboration with CCDDB: Young Children and their Families.

Services and People Served

Who will benefit: 20-25 'at risk' Spanish speaking families with children, prenatal to age 3; focus on teen parents and homeless families.

Scope of services: The MHB contract focus is linguistically isolated families. Program services include home visits, play groups, teen parent education/support, library groups, toy and book lending library, parent resource library, semi-annual developmental assessments, vision and hearing screenings, and intensive case management. Goals: support families of infants/toddlers as their child's first teacher; build strong foundation for learning within families; assist parents in preparing children for success in kindergarten and beyond. Baby TALK model and curriculum.

Location and frequency of services: Family home or other based on family needs - biweekly or more frequent; playgroups at Urbana Early Childhood School (agency office) - monthly; CU Early Spanish speaking groups at Douglass Libraries- weekly; home visits through a virtual option in case of illness or bad weather.

Staff comment: The request is to continue a program newly funded for PY24 which had previously been funded by ISBE. Program partners with 7 similar programs through the Champaign County Home Visiting Consortium. Application links to program site <https://uecs.usd116.org/cuearly/>

Residency of 25 people served in the first half of PY24:

Champaign 10 for PY24

Urbana 14 for PY24

Rantoul 1 for PY24

Program is newly funded in PY24.

Measures of Client/Participant Access

Eligibility criteria and determination: Every family is screened prior to enrollment, with proof of income. Baby Talk eligibility screen score of 75+.

Highest priority tier - homelessness, English language learner, income 50% of federal poverty level, DCFS involvement, history of DV or SUD.

Second tier - children with developmental delay and Individual Family Support Plan, chronic medical condition, family income 50% to 100% of federal poverty level.

Third tier – family without basic utilities, living in isolation, receiving Public Aid, SNAP, medical card, not high school graduate, family income 100%-130% federal poverty level.

Fourth tier – military service, single parent, low birth weight or prematurity.

Outreach to eligible people: word of mouth, community fairs, visitors to Urbana Early Childhood School where the program office is located, and referrals through home visiting consortium.

Within 3 days of referral, 100% of those referred will be assessed.

Within 3 days of assessment, 95% of those assessed will engage in services.

People will engage in services, on average, for 3 years.

Additional demographic data: family income, parents' languages, employment status, highest level education.

Staff comment: wait times are excellent, especially given the potential needs of children and families; section also lists the types of data collected for tracking and reporting on services, goals, etc.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. Improvement of parenting skills & knowledge... 95% of parents will make progress.
2. Child development... 95% of children will make progress from one screening to the next.
3. Health care... 95% of children will be current on immunizations and well child exams.

Specific assessment tools and data collection:

1. ISBE questionnaires (completed by parent) and Piccolo parent/child interaction tool (completed by home visitor with parent).
2. ASQ and ASQ-SE every six months.
3. 45 days after enrollment, then annually – child's doctor provides records to staff to review.

Outcome data gathered from all participants: Yes.

Will collect outcome data annually, semi-annually, at 45 days and annually.

Staff comment: Individual Family Goal Plans are created by parent and home visitor upon enrollment and reviewed twice a year. Program completes a logic model annually, reviewing goals and child/family outcomes.

Measures of Utilization

Treatment Plan Clients (TPCs): 20-25 families

Non-Treatment Plan Clients (NTPCs): 5 families referred to Early Intervention (EI)

Community Service Events (CSEs): 5 – Read Across America, Prenatal Fair (Parkland), Kindergarten connection (Urbana), and presentations of CCHV Consortium, to School board, and to small groups.

Service Contacts (SCs): 484 home visits (min. 22 per TPC family) and 24 playgroups (with 5 TPC families attending each.)

Staff comment: Proposal shows slight decrease in Service Contacts.

PY25 Targets	20-25 TPCs	5 NTPCs	484 SCs	5 CSEs
PY24 First Two Quarters (per submitted Service Activity Reports)				
First Quarter	23	0	89	5
Second Quarter	2	2	116	2
<i>Annual Targets</i>	<i>20-25 TPCs</i>	<i>5 NTPCs</i>	<i>506 SCs</i>	<i>5 CSEs</i>

Financial Analysis

PY2025 CCMHB request: \$80,723

PY2025 total program budget: \$499,277

Current year funding (PY2024): \$77,184

Proposed change in funding - PY2024 to PY2025 = 4.6%

CCMHB request is for 16% of total program revenue.

Other program revenue is from ISBE Grant \$398,606, or 80%, and In-Kind Contributions \$19,950, 4%.

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Personnel costs of \$80,723 are 100% of the requested amount.

Total agency and program budgets are identical, with a surplus of \$2, and CCMHB budget is balanced.

Program staff to be funded by CCMHB: 0 Indirect + 1 Direct = 1 FTE.

Total program staff: 1 Indirect + 4 Direct = 5 FTEs.

Staff comment: Increased request reflects 6% wage increase plus associated payroll taxes and benefits. (The funded position has the lowest salary of total program positions, and salary ranges are aligned with district standards.) Program personnel are 2 home visitors, 2 bilingual home visitors, and 1 program coordinator, all full-time: the MHB proposal is to fund 1 of the bilingual home visitors.

Agency Cultural and Linguistic Competence Plan

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

Highlights from the submitted CLC Plan: Professional Development funds have been provided to attend two CLC trainings for the entire CU-Early Staff. The Bilingual Home Visitor will provide materials in the native language for the family being served. The Infant Mental Health Consultant will provide reflective supervision, guidance, and support for the CU Early Team, and the Program Coordinator will provide support and supervision to the Bilingual Home Visitor as required.

If currently funded, did the agency submit a complete CLC Progress Report for the first half of PY24? Yes

Highlights from the submitted CLC Progress Report: Uses the Curriculum Baby Talk and attended the training. They have also been collaborating with Krannert, Spurlock Museum, and The Center for Latin American and Caribbean studies (CLACS) to have a cultural celebration for Mayan Families. Currently no members of the Governing Board are people with lived experienced such as a mental illness, substance use disorder, or I/DD or who are the caregiver for such an individual.

Staff comment: CU Early is connected to the Urbana School District Early Childhood program. I reviewed the program plan and a clear description about the work of the Bilingual Home Visitor and the families being served. This program within a school district targets a barrier for families who do not speak English as a first language. CU-Early was a newly funded organization in PY24, and they have made their action more specific to the program upon my review of the CLC Plan. This will ensure they meet the funding requirements for CCMHB that will also enhance their connection with the Urbana School District Early Childhood Program.

Criteria for Best Value

Budget and program connectedness: Budget Narrative explains the primary funding source and the need for additional funding; the in-kind contribution is toys and materials (for families) provided by Head Start (United Way funds the Head Start project); all program expenses are explained, but only personnel costs are to be charged to the MHB; roles of each of the five program staff are clearly described. Financial forms match.

Participant outcomes (*see above for details*): The three outcomes are specific, measurable, relevant to the people served, and associated with specific assessment tools. Outcome targets are based on a logic model and updated annually with consideration for actual outcomes.

Self-determination and self-direction in service planning: Planning is driven by family/child needs, and treatment plans are individualized and include referral to other resources as appropriate and desired.

Eliminating disparities in access and care (*see above for Agency CLC Plan details*): Outreach through the HV Consortium to connect rural residents to providers serving their area; the program focuses on residents of Urbana and Champaign but will serve an enrolled family which has moved to a rural area, continuing home visits (virtual in the event of illness or hazardous travel). Hispanic and Mayan families are a focus and may have additional challenges for which support can be linkage to other resources and services and help with accessing those resources, to reduce financial and emotional stress and increase time for connection with the child; referrals to EI when appropriate; transition to Pre-K programs when the child turns 3; playgroups help connect families and build new communities of support. Services in locations near these families.

Promoting inclusion and reducing stigma: Improve access to community; increase families' connection to each other; improving English through songs and stories during groups; free play after groups; sharing joys and challenges of parenting; singing in all families' languages.

Continuation of services during public health emergency: Virtual option in the event of child illness or inclement weather.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: Not a focus.

Unique features - approach: Describes and links to information about home visiting as a prevention strategy and the specific Baby TALK curriculum/model. The program is 'Quality confirmed' in that services align with the Baby Talk Critical Core Principles and concepts.

Unique features - staff credentials:

Program Coordinator - MA in Education, BS and AA in Child Development, 30 years admin experience in Birth to Five, IL Director Credential level II for professional administrators of Early Children Education.

Bilingual Home Visitor - MA in Early Childhood Ed-Early Intervention, in this position 12 years, fluent in English and Spanish.

Home Visitor - MA in Family Services, 15 years working with Birth to Five and youth, in this position 11 years.

Home Visitor - MA in Early Childhood Special Ed, 10+ years working with families and children, in this position 10 years.

Bilingual Home Visitor (MHB funded) - BA in Psychology, 10 years' working in early childhood education, with program for 3 years. All staff certified in Baby TALK curriculum.

Unique features – resource leveraging: not used as match; in-kind materials (from United Way, through Head Start); primary funding is from ISBE; refers children to state funded EI services; no client fees or sliding scale.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

Agency capacity for financial clarity: newly funded by MHB in PY24 but longstanding recipient of state grants.

If applicable, audit findings: n/a, not funded in PY23; program audit is included in Unit 116's combined audit.

If applicable, compliance issues: n/a

All forms submitted by deadline: Yes. Completed January 30, 2024.

Proposal relates directly to MI, SUD, or I/DD and how it will improve the quality of life for persons with MI, SUD, or I/DD: Yes.

Evidence that other sources of funding have been maximized: Yes – the ISBE funding which covered this second bilingual home visitor will again not be available for PY25.

Coordinated system: Home Visiting Consortium, with 7 partners; through other collaboration and referrals.

Written collaborative agreements: Crisis Nursery, Champaign School District Unit #4, The Well Experience, CUPHD, Young Lives, United Way, RPC (case management and Head Start), Feeding our Kids, Child and Family Connections, Champaign County Home Visiting Consortium, Champaign County Resource and Referral, and Urbana Adult Education.

Referral between providers: Yes.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2025 contract:

- *Revisions prior to contract: set TPC target (rather than a range).*
- *Consider continuing the PY24 special provisions.*

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

Recommendation: Pending

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