Champaign County Board for Care and Treatment of Persons with a Developmental Disability, referred to as Champaign County Developmental Disabilities Board (CCDDB)
Meeting Agenda
Wednesday, September 23, 2026, 9:00 AM

This meeting will be held in person in the Shields-Carter Room of the Scott M. Bennett Administrative Center, 102 E. Main St., Urbana, IL 61801. Members of the public may attend in person or virtually: *https://us02web.zoom.us/j/81559124557* Meeting ID: 815 5912 4557

I. **Call to order**

II. **Roll call**

III. **Approval of Agenda***

IV. **Schedules and Timelines**

For information only are the CCDDB Meeting Schedule and Allocation Timeline posted here (https://ccmhddbrds.org/ords/f?p=189:8::::::).

And Champaign County Mental Health Board (CCMHB) 2026 Meeting Schedule and Timeline posted here (https://ccmhddbrds.org/ords/f?p=189:9::::::).

V. **Acronyms and Glossary**

For information only, an updated glossary of terms is posted here (https://ccmhddbrds.org/ords/f?p=189:12::::::).

VI. **Citizen Input/Public Participation - See below for details.****

VII. **Chairperson's Comments – Dr. Anne Robin**

VIII. **Executive Director's Comments – Lynn Canfield**

IX. **Approval of CCDDB Board Meeting Minutes** (pages 5-10)*

Action is requested to approve the minutes of the CCDDB's July 29, 2026 meeting.

X. **Vendor Invoice Lists** (pages 11-12)*

Action is requested to accept the "Vendor Invoice Lists" and place them on file.

XI. **Staff Reports** (pages 13-30)

Reports from Kim Bowdry, Leon Bryson, Stephanie Howard-Gallo, Shandra Summerville, and Chris Wilson are included in the packet for information only.

XII. New Business

a) **Fund Balance Policy Review** (pages 31-34)*

A Decision Memorandum describes the longstanding fund balance target and offers detail on annual fluctuations. Action is requested to review and approve the policy.

b) **DRAFT 2027 Objectives for Three Year Plan** (pages 35-48)

A Briefing Memorandum presents attached CCDDB Three Year Plan with DRAFT 2027 objectives for consideration. No action is requested.

c) **DRAFT Allocation Priorities for Program Year 2028** (pages 49-68)

For information only is a briefing memorandum as a DRAFT of Program Year 2028 funding allocation priorities and decision support criteria. No action is requested.

XIII. Old Business

a) **Agency Special Request** (pages 69-78)*

A Decision Memorandum requests action related to closing out the business of Program Year 2024 contracts with the CU Autism Network. A letter from the organization's attorney is included. Action is requested.

b) **Emerging Threats** - The Board may discuss threats to the safety and stability of people with I/DD and other vulnerable residents.

c) **Input from People with I/DD** - People with I/DD may choose to offer input to the Board and public at this time.

d) **Engage Illinois** - An oral update will be provided.

e) **Anti-Stigma Activities** (pages 79-84)

An update is offered for information only. See also https://disabilityresourceexpo.org and https://champaigncountyair.com.

f) **Program Year 2026 Fourth Quarter Service Activity Reports** (pages 85-116)

For information only are service/consumer activity reports from all I/DD programs funded in Program Year 2026. No action is requested.

g) **Program Year 2026 Year End Service Claims Data** (pages 117-131)

For information only are service claims data reported by many I/DD programs funded in Program Year 2026. No action is requested.

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. See below for details.**

XV. County Board Input

XVI. Champaign County Mental Health Board Input

XVII. Board Announcements and Input

XVIII. Adjournment

Upcoming Joint Study Session on I/DD: September 30, 5:45PM

Upcoming Regular Meetings: October 28, November 25, December 9

* Board action is requested.

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

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

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

July 29, 2026

This meeting was held at the Scott Bennett Administrative Center

102 E. Main St., Urbana, IL 61801

and with remote access via Zoom.

9:00 a.m.

MEMBERS PRESENT:

Kim Fisher, Anne Robin, Dianne Husby-Gordon, Susan Fowler, Neil Sharma

MEMBERS EXCUSED:

None.

STAFF PRESENT:

Kim Bowdry, Leon Bryson, Lynn Canfield, Shandra Summerville

OTHERS PRESENT:

Danielle Matthews, Kelli Martin, Jodie Harmon, AJ Zwettler, Anne Marshall, Heather Levingston, Sarah Perry, Laura Bennett, DSC; Hannah Sheets, Becca Obuchowski, Community Choices; Eric Enger, Michelle Ingram, Mel Liong, PACE; Jacinda Dariotis, Family Resiliency Center UIUC; Jessica Heckenmueller, CCRPC; Jessie Stevens, Greater Community Aids Project (GCAP).

CALL TO ORDER:

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

ROLL CALL:

Roll call was taken, and a quorum was present.

APPROVAL OF AGENDA:

An agenda was included in the packet and approved by the Board.

CCDDB and CCMHB SCHEDULES/TIMELINES:

Draft CCDDB and CCMHB meeting schedules and CCDDB allocation timeline were posted online and linked in the agenda.

ACRONYMS and GLOSSARY:

A list of commonly used acronyms was posted publicly and linked in the agenda.

CITIZEN INPUT/PUBLIC PARTICIPATION:

None.

CHAIR'S COMMENTS:

Dr. Robin had no comments.

EXECUTIVE DIRECTOR'S COMMENTS:

Director Canfield reported news on Choate Mental Health and Developmental Center.

APPROVAL OF MINUTES:

Minutes from the May 27, 2026 meeting and the June 24, 2026 meeting were included in the packet.

MOTION: Dr. Sharma moved to approve the minutes from the May 27, 2026 CCDDB meeting. Dr. Fowler seconded. A voice vote was taken and the motion passed.

MOTION: Dr. Fowler moved to approve the minutes from the June 24, 2026 meeting. Ms. Gordon seconded. A voice vote was taken and the motion passed.

VENDOR INVOICE LISTS:

The Vendor Invoice List was included in the packet. Dr. Fowler asked for clarification on a mattress purchase, which was provided by Director Canfield.

MOTION: Dr. Fowler moved to accept the Vendor Invoice List as presented. Ms. Gordon seconded the motion. A voice vote was taken and the motion passed unanimously

STAFF REPORTS:

Staff reports from Leon Bryson, Director Canfield, Kim Bowdry, Stephanie Howard-Gallo, and Shandra Summerville were included in the packet.

NEW BUSINESS:

Officer Elections:
CCDDB By-laws were included in the packet.

> **MOTION: Dr. Fowler moved for Dr. Robin to continue as Board President and Dr. Sharma to continue as Secretary for the CCDDB 2027 Program Year. Dr. Fisher seconded the motion. A voice vote was taken and the motion passed.**

Draft 2027 Budgets:
A Decision Memorandum and draft budgets were included in the Board packet. The Intergovernmental Agreement between the CCMHB and the CCDDB was included as well.

> **MOTION: Dr. Robin moved to approve the attached draft 2027 CCDDB Budget, with anticipated revenues and expenditures of $5,829,835. Dr. Fisher seconded the motion. A roll call vote was taken and the motion passed unanimously.**

> **MOTION: Dr. Robin moved to approve amending the 2026 I/DD Special Initiatives and CCDDDB Fund Budgets, to transfer the remaining I/DD SI fund balance in equal amounts to the CCMHB and CCDDB Funds at the end of 2026. Use of this fund is consistent with the terms of Intergovernmental Agreement between CCDDB and CCMHB, and full approval is contingent on CCMHB action. Dr. Fowler seconded the motion. A roll call vote was taken and the motion passed.**

> **MOTION: Dr. Robin moved to approve the attached 2027 I/DD Special Initiatives and CCDDB Fund Budget, with anticipated revenues and expenditures of $0. Use of this fund is consistent with the terms of Intergovernmental Agreement between CCDDB and CCMHB, and full approval is contingent on CCMHB action. Ms. Gordon seconded the motion. A roll call vote was taken and the motion passed unanimously.**

Draft Request for Proposals (RFP):
A Decision Memorandum was included in the packet.

> **MOTION: Dr. Robin moved to approve the attached "Request for Proposals, Evaluation Capacity Building Project for the County of**

Champaign". Dr. Sharma seconded the motion. A voice vote was taken and the motion passed.

Setting the Stage for 2027 and Program Year 2028:
A briefing memorandum detailing current Three-Year plan objectives and tactics, Program Year 2027 funding allocation priorities, and lists of Program Year 2027 awards was included in the packet for review.

OLD BUSINESS:

Emerging Threats:
Dr. Fisher provided updates.

Input from People with I/DD:
None.

Engage Illinois:
Dr. Fowler provided an update.

Anti-Stigma Activities:
A report on planned anti-stigma activities for 2026 was included in the packet. There was Board discussion regarding the value of the Expo Resource Book.

MOTION: Dr. Robin moved to establish an annual recognition award in memory of Barbara Bressner, with any associated costs not to exceed budgeted amounts. Dr. Sharma seconded. A voice vote was taken and the motion passed.

MOTION: Dr. Robin moved to authorize the CCDDB/CCMHB Executive Director and staff to implement anti-stigma events during 2027, not to exceed budgeted amounts. Dr. Fisher seconded. A voice vote was taken and the motion passed unanimously.

SUCCESSES AND AGENCY INFORMATION:

Successes and agency information was provided by Hannah Sheets from Community Choices.

COUNTY BOARD INPUT:

None.

CHAMPAIGN COUNTY MENTAL HEALTH BOARD (CCMHB) INPUT:

The CCMHB met last week with similar agenda items.

BOARD ANNOUNCEMENTS AND INPUT:

Board members decided to cancel the August Board meeting. The next CCDDB meeting will be September 23, 2026. Board members requested that a CU Autism Network update be added to the next meeting agenda.

ADJOURNMENT:

The meeting adjourned at 10:05 a.m.

Respectfully Submitted by:

Stephanie Howard-Gallo

CCMHB/CCDDB Compliance and Operations Coordinator

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

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CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

Champaign County Developmental Disabilities Board

Vendor Invoice List – July 2026

VENDOR NAME	INVOICE	INVOICE NET	INVOICE DESCRIPTION	CHECK DATE
CHAMPAIGN COUNTY TREASURER	Jul'26 DD27-078	35,420.00	DD27-078 Decision Support PCP	7/17/2026
COMMUNITY CHOICES, INC	Jul'26 DD27-095	22,291.00	DD27-095 Customized Employment	7/1/2026
COMMUNITY CHOICES, INC	Jul'26 DD27-090	20,500.00	DD27-090 Inclusive Community S	7/1/2026
COMMUNITY CHOICES, INC	Jul'26 DD26-076	4,000.00	DD26-076 Staff Recruitment & R	7/1/2026
COMMUNITY CHOICES, INC	Jul'26 DD27-077	21,750.00	DD27-077 Transportation Suppor	7/1/2026
COMMUNITY CHOICES, INC	Jul'26 DD27-075	19,916.00	DD27-075 Self-Determination Su	7/1/2026
DEVELOPMENTAL SERVICES CENTER OF	Jul'26 DD27-084	22,058.00	DD27-084 Clinical Services	7/1/2026
DEVELOPMENTAL SERVICES CENTER OF	Jul'26 DD27-091	45,016.00	DD27-091 Community Employment	7/1/2026
DEVELOPMENTAL SERVICES CENTER OF	Jul'26 DD27-082	86,250.00	DD27-082 Community First	7/1/2026
DEVELOPMENTAL SERVICES CENTER OF	Jul'26 DD27-081	53,833.00	DD27-081 Community Living	7/1/2026
DEVELOPMENTAL SERVICES CENTER OF	Jul'26 DD27-092	10,458.00	DD27-092 Connections	7/1/2026
DEVELOPMENTAL SERVICES CENTER OF	Jul'26 DD27-085	8,833.00	DD27-085 Employment First	7/1/2026
DEVELOPMENTAL SERVICES CENTER OF	Jul'26 DD27-080	26,666.00	DD27-080 Individual and Family	7/1/2026
DEVELOPMENTAL SERVICES CENTER OF	Jul'26 DD27-083	41,666.00	DD27-083 Service Coordination	7/1/2026
DEVELOPMENTAL SERVICES CENTER OF	Jul'26 DD27-086	23,942.00	DD27-086 Workforce Development	7/1/2026
PERSONS ASSUMING CONTROL OF THEIR ENVIRONMENT INC.	Jul'27 DD27-079	3,831.00	DD27-079 Consumer Control in P	7/17/2026

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

Champaign County Developmental Disabilities Board

Vendor Invoice List – August 2026

VENDOR NAME	INVOICE	INVOICE NET	INVOICE DESCRIPTION	CHECK DATE
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COMMUNITY CHOICES, INC	Aug'26 DD27-090	20,500.00	DD27-090 Inclusive Community S	8/7/2026
COMMUNITY CHOICES, INC	Aug'26 DD26-076	4,000.00	DD26-076 Staff Recruitment & R	8/7/2026
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DEVELOPMENTAL SERVICES CENTER OF	Aug'26 DD27-082	86,250.00	DD27-082 Community First	8/7/2026
DEVELOPMENTAL SERVICES CENTER OF	Aug'26 DD27-081	53,833.00	DD27-081 Community Living	8/7/2026
DEVELOPMENTAL SERVICES CENTER OF	Aug'26 DD27-092	10,458.00	DD27-092 Connections	8/7/2026
DEVELOPMENTAL SERVICES CENTER OF	Aug'26 DD27-085	8,833.00	DD27-085 Employment First	8/7/2026
DEVELOPMENTAL SERVICES CENTER OF	Aug'26 DD27-080	26,666.00	DD27-080 Individual and Family	8/7/2026
DEVELOPMENTAL SERVICES CENTER OF	Aug'26 DD27-083	41,666.00	DD27-083 Service Coordination	8/7/2026
DEVELOPMENTAL SERVICES CENTER OF	Aug'26 DD27-086	23,942.00	DD27-086 Workforce Development	8/7/2026
PERSONS ASSUMING CONTROL OF THEIR ENVIRONMENT INC.	Aug'26 DD27-079	3,831.00	DD27-079 Consumer Control in P	8/7/2026

Kim Bowdry,

Associate Director for Intellectual & Developmental Disabilities

Staff Report – August & September 2026

CCDDB/CCMHB:

Program Year 2026 4th Quarter reports and year-end Performance Outcome Reports were due August 26, 2026. Stephanie Howard-Gallo, Operations and Compliance Coordinator emailed a due date reminder to agency representatives on August 14, 2026. 4th Quarter Program Reports and Program Year 2026 Service Data are included in the CCDDB Packet for review.

The Program Year 2026 Service Data for CCDDB and CCMHB I/DD Funded Programs document was created using the Claims Data entered in the Online Reporting System by agency staff. I am reviewing and documenting the information provided in the reports. The information provided in the 4th Quarter Program Reports was added to the CCDDB and CCMHB I/DD funded program Performance Data Charts. Full year results were included on each 4th Quarter Program Report. Performance Data Charts were also prepared for Program Year 2027 reporting.

PACE did not submit their complete Performance Outcome Report by the deadline and did not submit an Extension Request. PACE's complete Performance Outcome Report was submitted on September 1, 2026.

I provided support to some agencies with resetting usernames/passwords and with 4th Quarter reports. I also created the Performance Outcome Report on the IDDSI side of the Online Application and Reporting System.

Program Year 2026 Performance Outcome Reports were also due on August 26, 2026. I am in the process of reviewing each POR. The PORs will be compiled and posted at https://ccmhddbrds.org. I also worked with the Online Application and Reporting System developer to create a single PDF version of the Performance Outcome Reports which includes the program's Main Performance Outcome Report and all program Outcome Reports.

I am using data from the Program Year 2026 reports, to create the 'Utilization Summaries for Program Year 2026 CCDDB and CCMHB I/DD Programs' document. This document will also report on the Outcomes that were identified in each Program's application for Program Year 2026. This will be included in the CCDDB Packet for October 2026.

I contributed to the Program Year 2028 Allocation Priorities and Decision Support Criteria for the CCMHB and the CCDDB. I also contributed to the Draft Three Year Plans for Fiscal Years 2026 through 2028 for the CCMHB and the CCDDB.

I participated in monthly meetings with CCDDB/CCMHB staff and staff from the Family Resiliency Center, related to the Evaluation Capacity project.

I participated in a meeting with Executive Director Canfield and a Board Member regarding the September CCDDB Meeting.

I participated in meetings with Christopher Wimbush, Wimbush Consulting.

I coordinated with agency representatives from Community Choices and DSC related to the Joint Study Session scheduled for September 30, 2026 at 5:45pm. This Study Session will feature Advocates, who will share their perspectives on I/DD services in Champaign County and their additional advocacy efforts.

I added captions to the July CCDDB and CCMHB meetings and uploaded the recordings to the CCDDB/CCMHB YouTube Channel. Please visit the CCDDB/CCMHB YouTube Channel to view the recordings (http://www.youtube.com/@champaigncountymhbandddb).

I created the CCDDB/CCMHB Newsletters for August and September. The October Newsletter is in progress and will be sent out in early October. You can sign up for the CCDDB/CCMHB newsletter here. I also created PDF versions of each newsletter for records retention. Newsletter information can be emailed to me (kim@ccmhb.org).

I reviewed Board Meeting Minutes from each Board's previous monthly meetings.

Site Visits:

I completed site visits with CU Early, Community Choices, DSC, and PACE in late August and September. Site visits for CCRPC – Developmental Disability Services, CCRPC Head Start/Early Head Start, and the remaining DSC programs are scheduled for late September and early October. Associate Director Bryson and Operations and Compliance Coordinator Howard-Gallo accompanied me on site visits. No concerns were noted during any of the site visits. I continue finalizing Site Visit Reports for each program and will share those with agency representatives for review and feedback upon completion.

Illinois Department of Human Services - Division of Developmental Disabilities IDHS-DDD:

I inquired with IDHS-DDD regarding updated PUNS information. That information was used to add updates to the CCDDB Draft Program Year 2028 Allocation Priorities and Decision Criteria. I also contacted Prairieland Service Coordination, Inc. to inquire about recent Champaign County PUNS Selections. Prairieland staff shared that 23 people were selected from Champaign County between March 2026 and July 2026 PUNS selections.

I am working with our State Association Coordinator to seek further clarification on an IDHS-DDD Draft Information Bulletin related to Clinical Eligibility determinations. A portion of the Draft Information Bulletin states:

"Intellectual Disability: The independent service coordination agency (ISC) is able to make determinations on clinical eligibility for individuals with clear evidence (consistent IQs of sixty (60) or below) of an intellectual disability. If the IQ scores are inconsistent or borderline (between 60-70 or higher), ISCs should refer the application to DDD.

Related Conditions: The ISCs cannot make clinical eligibility determinations for individuals seeking eligibility due to a related condition. These applications should will be referred to DDD to determine clinical eligibility."

Contract Amendments:

I recreated a contract amendment for EMK Consulting related to accessibility changes in the Online Application and Reporting System. I created an additional contract amendment for EMK Consulting related to an enhancement in the Online Application and Reporting System for compiling the annual Performance Outcome Reports.

Learning Opportunities:

Making Strategic Decisions was held on September 16, 2026 at the Champaign Public Library. Prior to the event, over ten agency staff representing 6 different agencies funded by CCDDB or CCMHB were registered with a total of over 50 people registered for the event.

Addressing Conflict in Teams is scheduled for October 14, 2026, from 9:30-10:30 at the Champaign Public Library. This Leadership Training Series is a collaboration of CCDDB/CCMHB, the Illinois Leadership Center, UIUC School of Social Work, Community Foundation of East Central Illinois, and United Way of Champaign County.

Please register here to join (https://socialwork.illinois.edu/2026/02/03/foundations-of-effective-leadership-training-series/).

DISABILITY Resource Expo:

I created a survey that was emailed to organizations who participated in the 2024 and 2025 Disability Resource Expos. The survey sought to gather updated information for Resources to be listed in the 2027 Disability Resource Expo Guidebook. The survey link was emailed four separate times to gather as many resources as possible. After the survey closed, I organized the data and sought out additional updates from unresponsive agencies. This information was then shared with our contracted Social Media expert who will organize it and compile it for the updated Disability Resource Expo Guidebook.

In late August, I went to the Expo storage facility to pick up Disability Resource Expo Guidebooks to be distributed at the Scott Bennett Family Resources Day. I participated in the annual Scott Bennett Family Resources Day held at Lincoln Square Mall on August 28, 2026. Disability Resource Expo books were shared with community members and other local providers in attendance. I also emailed the Expo Resources survey link to Agency representatives who attended the Scott Bennett Family Resources Day and were not previously a part of the Disability Resource Expo Guidebook.

Mental Health and Developmental Disabilities Agencies Council (MHDDAC):

I participated in the August and September MHDDAC meetings. During their August meeting, the group discussed removing all AI Notetakers from future meetings. The group also discussed what they would like to see during future meetings of the group.

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

I participated in the August ACMHAI Executive Committee meeting. I also participated in the Summer Membership Meeting in early August. The I/DD Committee met on September 9, 2026 and held a discussion on State and National Updates, as well as community updates from those in attendance.

I have contacted LEAP staff from Community Choices and DSC about providing a presentation on the LEAP Program to the ACMHAI I/DD Committee at an upcoming meeting.

National Association for County Behavioral Health and Developmental Disability Directors (NACBHDD):

The next I/DD Committee meeting is scheduled for October 13, 2026.

Champaign County Transition Planning Committee (TPC):

The TPC hosted its first meeting of the new school year on September 11, 2026.

Champaign County Community Coalition Race Relations Subcommittee:

The 4th Annual Black Mental Health and Wellness Conference is scheduled for September 26, 2026. The flyer and registration link for this event was shared in the CCDDB/CCMHB Newsletter. You can still register to attend (https://forms.cloud.microsoft/pages/responsepage.aspx?id=h9DeulNmC0GGjWInWQw6NigTVmaqlSlPhpHnJ9aKCC9UOEpOQVBLSDlWV1FTNUZBRjRGOVo0WVdDNC4u&route=shorturl).

Other:

Other time was spent reviewing documents for accessibility and other information.

Leon Bryson,
Associate Director for Mental Health & Substance Use Disorders
Staff Report-September 2026

This board packet includes a briefing memo on the Draft 2027 Objectives and Tactics for the Three-Year Plans. The drafts follow the present plans' direction while considering updated timetables, current community needs, organizational capability, and possibilities for improvement.

I designed a survey for Board members to help assess and refine the proposed priority areas for the next year. The 23-day survey had six multiple-choice questions for each of the six priorities: Strengthening the Behavioral Health Workforce, Safety and Crisis Stabilization, Healing from Violence and Trauma, Access and Care, Thriving Children, Youth, and Families, and Collaboration with the CCDDB-Young Children and Their Families. Five board members answered the survey. Results are: Most respondents considered each priority important to meeting community needs. How clearly does this priority identify the community problem or need? Most (67%), reported extremely clear or clear. How appropriate is CCMHB/CCDDB funding for addressing each priority? Between 67% and 83% of respondents regarded priority funding very appropriate. Does this priority adequately address equity, diversity, cultural/linguistic competency, and underserved populations? On average, 63% said yes across all priorities. Should this priority remain a CCMHB/CCDDB funding for the next program year? Across all priorities, 83% agreed this priority should be funded next year. What changes or additions should be made to this priority? Most responders recommended maintaining current emphasis or increasing emphasis.

Agency Progress Reports: Agency PY26 Program Service Activity, financials, CLC Progress Report and Performance Outcome Reports for the fourth quarter were to be submitted by 11:59pm CST on August 26, 2026. A reminder about the reporting deadline and the procedure for requesting extensions was circulated by Ms. Stephanie Howard-Gallo to the agencies involved. A few agencies requested deadline extensions and were granted. Champaign County Health Care Consumers and Urbana Neighborhood Connections Center did not ask for an extension and were notified by Ms. Howard-Gallo via email and certified letter that they were out of compliance. The two agencies eventually submitted all missing reports and are now back in compliance. All submitted reports were then examined and compiled into a single report, which is part of this board packet. Some agencies are required to reexamine submitted client data from previous quarters for accuracy purposes. The data are organized in Excel files saved in the Program Performance Data Charts. All Annual Performance Outcome Reports will be compiled into one large report and made available for your review in the upcoming months.

Site Visits: During the month of August, I conducted site visits at Family Service and Promise Healthcare's main offices with the assistance of Ms. Shandra Summerville. There were no immediate concerns detected with the agency's programming services. During the same month, I assisted Ms. Kim Bowdry on a DSC site visit. In September, I partnered again with Ms. Bowdry to perform site visits with Community Choices, CU Early, some DSC programs, and PACE. Up next are scheduled site visits with CCRPC Head Start/Early Head Start and DSC's Family Development programs. Each site visit includes a discussion with the Program Director and appropriate staff members about the program's efficacy, as well as a review of client records and service utilization data. Upon request, the program directors and their teams supplied all essential supporting documents.

ACMHAI Committee Meetings: I took part in the monthly meetings for the I/DD Committee. Members discussed State/National Updates.

CCMHDDAC Meeting: On August 25th, committee members voted in favor of banning AI notetaking applications due to compliance issues such as waiving privileges and a lack of participant permission. Family First, an agency that applied for MHB funds, has joined the committee. Dr. Katrina Roberts provided details regarding her agency's services.

CIT Steering Committee: I attended the August 5th meeting via zoom. Members provided updates about the various matters within their agencies.

Continuum of Service Providers to the Homeless (CSPH): On September 1st, members heard multiple presentations: Bridget from Homebase addressed members with an update on their strategic plan. Landowners Roots at Philo and Silver Street Capital, LLC discuss the acquisition of 96 apartment units on Silver St. and Philo Road in Urbana. The proprietors accept Section 8, subsidized housing vouchers, and have already rehabilitated 46 units and are working on the other ones with the goal of improving the Urbana area. They will be hiring anyone interested in assisting them with labor for the units. They currently have 12 units ready, with 30-60 units expected by the end of the month. They found another investor willing to make an investment over time. Ms. Lily L. Walton, Executive Director of the Housing Authority of Champaign County, discussed work requirements and term limits. Ms. Kenzie Dodds of Rosecrance discussed the company's Urgent Care services. Food Access Specialist (New Position) Ms. Teri McCarthy from Public Health described how her role is geared to assist providers in establishing a HUB for information exchange and collaborative efforts with a goal to establish a food access alliance.

Evaluation Capacity Committee Team: I participated in the monthly meetings with the Evaluation Capacity project team. On August 14th and September 11th, Dr. Jacinda Dariotis and her colleagues met with CCMHB staff to discuss technical support, accessible office hours for agencies, working groups, and possible MHB agencies that could benefit from their expertise. I sent introductory emails to the agencies. We were also reintroduced to their new researcher, Dr. Virnaliz Jimenez.

Rantoul Service Provider's Meeting: For the August 17th meeting, Ms. Tasha Brasher from the Rantoul Police Department 4U Rantoul provided a presentation for the members. The meeting had a handful of members, but the discussion was impactful.

SOFTT/LANS Meeting: At the August 19th meeting, members discussed meeting at a different day and time to accommodate other members. The Chair of the committee sent out information about the history of the committee for newcomers, and there was more discussion about ideas for the upcoming year such as an event for single mothers.

Other Activities:

- September 10th, I attended the Community Service Center of Northern Champaign County Donor Appreciation Event in Rantoul.
- On August 21st, I met with Dr. Lisa Liggins-Chambers of CAC and provided comprehensive guidance for their Annual Performance Outcome Report.

Stephanie Howard-Gallo
Operations and Compliance Coordinator
Staff Report – September 2026 Board Meeting

SUMMARY OF ACTIVITY:

4th Quarter Reporting 2026:

4th quarter financial and program reporting was due at the end of August, giving the agencies an extra month to submit their reports. I sent them a reminder of the deadline on August 14th, as well as an extension request form if needed.

Don Moyer Boys and Girls Club and the Refugee Center (both CCMHB funded) requested extensions, which were approved. Letters of suspension were sent to Urbana Neighborhood Connections Center, Champaign County Health Care Consumers (CCMHB funded), and PACE (CCDDB funded) for late or missing reports. All reports are now in and payments will resume.

Audits:

On August 18, 2026 I sent a reminder to the agencies that their contract with us requires they will share documentation of the date their CPA firm began its work on the audit, review, or compilation. Most audits will be due December 30th.

Site Visits:

I am scheduling site visits with Leon Bryson and Kim Bowdry.

Request for Proposals (RFP):

I submitted the following ad to the News Gazette and the Daily Illini for publication. I also submitted it to the Champaign County website for posting. Kim Bowdry added it to the August CCMHB/CCDDB newsletter. Lynn shared it with ACMHAI.

Notification of Bid Process: The Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDB) and the Champaign County Mental Health Board (CCMHB) are

seeking bid proposals from academic and/or professional research teams for an "Evaluation Capacity Building" Project. For details, see https://champaigncountyil.gov/CountyExecutive/bids.php.

The proposal should identify researchers' qualifications and experience, a plan to support social service providers in the measurement and reporting of outcomes, annual costs, and an implementation timeline. The Boards will select the proposal which offers the best value and will negotiate a two-year contract with renewal option. The Boards reserve the right to reject any and all proposals. Proposals are due to the CCDDB/CCMHB Executive Director no later than Noon on Wednesday, December 9, 2026. Email stephanie@ccmhb.org and lynn@ccmhb.org

Alliance for Inclusion and Respect (AIR):

I have been communicating with the AIR artists concerning their interest in exploring online sales through the AIR website and small shows at spaces that will host us.

Other Compliance:

Other:

- Prepared meeting materials for CCMHB/CCDDB regular meetings and study sessions/presentations.
- Attended meetings for the CCMHB/CCDDB.
- Composed minutes for the CCMHB/CCDDB meetings.
- I am working on revisions to the CCMHB/CCDDB Personnel Policies. They will be presented to you at a future meeting.

August-September 2026
Staff Report- Shandra Summerville
Cultural and Linguistic Competence Coordinator

CCMHB/DDB Cultural Competence Requirements for Annual CLC Plans connected to National CLAS (Culturally and Linguistically Appropriate Services) Standards

Annually for submitting CLC Plan with actions supporting the National CLAS Standards. Cultural Competence is a journey, and each organization is responsible for meeting the following requirements:

1. **Annual Cultural Competence Training-** All training related to building skills around the values of CLC and ways to engage marginalized communities and populations that have experienced historical trauma, systematic barriers to receiving quality care. Each organization is responsible for completing and reporting on the training during PY25/26
2. **Recruitment of Diverse backgrounds and skills for Board of Director and Workforce**- Report activities and strategies used to recruit diverse backgrounds for the board of directors and workforce to address the needs of target population that is explained in the program application.
3. **Cultural Competence Organizational or Individual Assessment/Evaluation-** A self-assessment organizational should be conducted to assess the views and attitudes towards the culture of the people that are being served. This also can be an assessment that will identify bias and other implicit attitudes that prevent a person from receiving quality care. This can also include client satisfaction surveys to ensure the services are culturally responsive.
4. **Implementation of Cultural Competence Values/Trauma Informed Practices-** The actions in the CLC Plan will identify actions that show how policies and procedures are responsive to a person culture and the well-being of employees/staff and clients being served. . This can also show how culturally responsive, and trauma informed practices are creating a sense of safety and positive outcomes for clients that are being served by the program.
5. Outreach and Engagement of Underrepresented and Marginalized Communities defined in the criteria in the program application.
6. **Inter-Agency Collaboration**- This action is included in the program application about how organizations collaborate with other organizations formally (Written agreements) and informally through activities and programs in partnership with other organizations. Meetings with other organizations without a specific activity or action as an outcome is not considered interagency collaboration.

7. **Language and Communication Assistance-** Actions associated with CLAS Standards 5-8 must be identified and implemented in the Annual CLC Plan. The State of Illinois requires access an accommodation for language and communication access with qualified interpreters or language access lines based on the client's communication needs. This includes print materials as assistive communication devices.

(Source: Think Cultural Health)

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

Agency Monitoring and Site Visits

CLC Site Visits for PY2025-26

- Children's Advocacy Center- Completed
- Christian Health Center- Completed
- CSCNCC- Completed
- CU Early- Desk Site Review In progress
- DMBGC (2 programs)
- Family Service (3 programs) Completed
- GROW- Completed
- Head Start/Early Head Start- Completed
- Immigrant Services- Completed
- Promise (2 programs) Completed
- WIN Recovery

I reviewed 4th Quarter Reports that were due on August 27th.

Anti-Stigma Activities/Community Collaborations and Partnerships

ACMHAI: I attended the following meetings and will attend upcoming meetings for ACMHAI-

Executive Committee Meeting- August 5th and September 2, 2027

ADA- Accessibility Training- Creating Accessible Word and PDF Documents

Children's Behavioral Health Committee – September 22, 2027

The Illinois State Board of Education has released guidance on Universal Mental Health Screening. This process is scheduled to be implemented in the school year 2027-2028. This is

being implemented to serve as strategy to have an “early identification check” to connect young people with the appropriate support before mental health challenges escalate.

https://www.isbe.net/Documents/Universal-Mental-Health-Screening-Guidance.pdf

Illinois Children’s Healthcare Foundation

I currently serve as a member of this board until FY 2028- We cultivate, support, and promote initiatives that improve the health and wellness of children in Illinois. The vision is for every child to grow up healthy in Illinois. Currently serve on Social Justice Committee and Grants Committee. The board has representation from the entire state of Illinois. I am one of the members that is representative of Champaign County. Please visit the website for additional information click on the link here: Illinois Children's Healthcare Foundation

I will be attending a conference called Mapping The Future for Children’s Behavioral Health. This will be an opportunity to connect with providers state wide that will be looking at the future for Children’s Mental Health

Community Alliance- Meeting for people serving Immigrant Community

This meeting was once a open space but the focus has shifted to an invited community to ensure that safety and support for the immigrant community in Champaign County. We meet monthly via ZOOM if you are interested in participating in this meeting please email: Shandra Summerville

Welcome Week is an opportunity for Immigrants in our community to receive information and resources about immigrant services in our community. It was held September 7-12, 2026. There was a forum sponsored by The Refugee Center and The New American Welcome Center in partnership with the City of Champaign.

Beyond Borders Global Mental Health Conference October 2027

“This conference aims to create a collaborative space where people with lived experience, caregivers, community members, artists, advocates, service providers, traditional healers, and researchers can learn from one another. We encourage proposals that connect ideas to practice and highlight voices that are often left out of global mental health conversations.

The theme of this year’s conference is **Building Resiliency**. We are interested in both creative and critical ideas about how people, communities, and systems stay strong and support wellbeing during hard times. Submissions may focus on research, professional practice, teaching, policy, or personal and community experiences. This conference will be held online. “

. Registration for the conference is now open. The conference will be held on October 8-9, 2026. This conference will be virtual. You can register here: Beyond Borders Global Mental Health Conference Registration

Champaign Community Coalition

I attended the Champaign Community Coalition on for August and September. They meet on the 2nd Wednesday of each month. The highlights included information on the Community Coalition Summer Initiative Program: That's What Teens Say. Its a summer internship that provides youth with an opportunity to learn about storytelling, event coordination, and building community.

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

Champaign County
Developmental Disabilities Board
Statement of Activities

REVENUES	ACTUAL JAN-AUG 2025	ACTUAL JAN-AUG 2026	% OF ANNUAL BUDGET 2026	ANNUAL BUDGET 2026
Prop Taxes – Current	-2,839,807.51	-2,973,270.56	53%	-5,624,961.00
Prop Taxes – Back Tax	0.00	0.00	0%	-2,000.00
Payment in Lieu of Taxes	-370.21	0.00	0%	-4,000.00
Mobile Home Tax	0.00	-1,966.01	66%	-3,000.00
Investment Interest	-7,951.57	-5,966.22	14%	-43,000.00
Gain/Loss on Sale of Investment	0.00	-874.74	100%	0.00
Other Misc Revenue	0.00	-1,344.00	45%	-3,000.00
Transfers In	0.00	0.00	0%	-10,000.00
TOTAL REVENUES	***-2,848,129.29***	***-2,983,421.53***	***52%***	***-5,689,961.00***

EXPENDITURES	ACTUAL JAN-AUG 2025	ACTUAL JAN-AUG 2026	% OF ANNUAL BUDGET 2026	ANNUAL BUDGET 2026
Professional Services	297,400.00	79,984.00	17%	477,402.00
Insurance (Non-Payroll)	4,333.00	5,157.00	69%	7,483.00
Finance Charges & Bank Fees	0.00	170.30	100%	0.00
Contributions & Grants	3,353,797.00	3,313,650.00	64%	5,205,076.00
TOTAL EXPENDITURES	***3,655,530.00***	***3,398,961.30***	***60%***	***5,689,961.00***

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

Champaign County
Developmental Disabilities Board
Estimated Fund Balance Report

ESTIMATED DDB FUND BALANCE	2025	2026
January	3,505,357	3,673,624
February	3,057,835	3,204,525
March	2,607,538	2,773,571
April	2,159,849	2,429,278
May	1,711,199	2,084,181
June	4,079,969	1,731,830
July	3,612,896	4,260,637
August	3,145,495	3,814,207
September	2,677,912	
October	4,402,632	
November	3,523,525	
December	4,139,739	
EOY	4,139,747	

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

Champaign County Developmental Disabilities Board

PY26 Q4 Financial Report Summary

Contract #	Agency	Program	YTD Revenue Reported	YTD Expense Reported	$ Diff	% Diff	Notes
DD26-078	CCRPC	Decision Support PCP	425,042.00	425,042.00	0.00	0.00%	None
DD26-095	Community Choices	Customized Employment	256,000.00	256,000.00	0.00	0.00%	None
DD26-090	Community Choices	Inclusive Community Support	233,000.00	233,000.00	0.00	0.00%	Variance comments missing. Corrected 9/3/26.
DD26-075	Community Choices	Self-Determination Support	228,000.00	228,000.00	0.00	0.00%	None
DD26-076	Community Choices	Staff Recruitment & Retention	48,000.00	47,389.00	611.00	1.27%	$611 unspent grant funds.
DD26-077	Community Choices	Transportation Support	243,000.00	239,415.00	3,585.00	1.48%	$3,585 unspent grant funds.
DD26-084	DSC	Clinical Services	263,000.00	244,027.00	18,973.00	7.21%	$18,973 unspent grant funds.
DD26-091	DSC	Community Employment	523,000.00	483,868.00	39,132.00	7.48%	$39,132 unspent grant funds.
DD26-082	DSC	Community First	990,000.00	1,106,342.00	(116,342.00)	-11.75%	None
DD26-081	DSC	Community Living	628,000.00	571,626.00	56,374.00	8.98%	$56,37 unspent grant funds.
DD26-092	DSC	Connections	122,000.00	126,671.00	(4,671.00)	-3.83%	None
DD26-085	DSC	Employment First	102,500.00	90,799.00	11,701.00	11.42%	$11,701 unspent grant funds.

DD26-080	DSC	Individual and Family Support	320,000.00	306,379.00	13,621.00	4.26%	$13,621 unspent grant funds.
DD26-083	DSC	Service Coordination	500,000.00	485,195.00	14,805.00	2.96%	$14,805 unspent grant funds.
DD25-086	DSC	Workforce Development and Retention	244,000.00	238,865.00	5,135.00	2.10%	$5,135 unspent grant funds.
DD26-079	Persons Assuming Control of Their Environment	Consumer Control in Personal Support	45,972.00	39,714.00	6,258.00	13.61%	$6,258 unspent grant funds.

Contract #	Agency	Program	YTD Revenue Reported	YTD Expense Reported	$ Diff	% Diff	Notes
IDDSI25-89	CCRPC	Community Life Short Term Assistance	$232,033	$107,412	$124,621	54%	$124,621 unspent grant funds.

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

Decision Memorandum – Fund Balance Goal

To: Members, Champaign County Developmental Disabilities Board (CCDDB)
From: Lynn Canfield, Executive Director
Date: September 23, 2026
Re: CCDDB Fund Balance Reserve Policy

Purpose:

This memorandum describes the current fund balance policy and seeks Board review and renewal.

- The "Background" section gives context about fund balance targets and how the fund is typically used, with roughly equal monthly expenditures against revenue deposits which do not begin until summer.
- A "Data" section offers details from 2022 to present, followed by "Discussion" of basic analysis, recent experience, and the rationale for the 'ideal' fund balance target.
- A "Decision Section" requests Board reapproval of the policy.

Background:

Champaign County's fiscal year runs from January 1st through December 31st each year. The CCDDB uses this fiscal year and develops its budget using the County's standards and input. Below is a chart that shows estimated monthly fund balances for the Developmental Disabilities Board Fund. There are significant fluctuations in monthly amounts due to timing of property tax distributions. In May or June every year, the balance reaches low points until a large property tax distribution is received in June or July.

The Board's current fund balance target was set many years ago, based on a recommendation from long-serving CCDDB member and Certified Public Accountant, Michael Smith. Since that time, it has not been explicitly demonstrated or reviewed separate from budgets. The ideal/optimal target is difficult to achieve because it calls for six months of operating costs at the low point in the year, which would be equal to the full annual budget as of January 1. A minimum target is for three months operating costs.

The rationale for the higher target of six months is that, by June or July, we will have spent roughly half of the full annual budget and will have just completed the contract process with agencies, establishing a new set of obligations, typically at higher monthly amounts than those paid from January through June. These expenses are "Contributions and Grants" and comprise around 90% of total annual budget. Also in June we might have received no property tax revenues. When first deposits are delayed, which happened in 2026 and will likely again, we should not linger near zero.

Data:

This chart shows figures provided by the County Finance Department. Some recent amounts are unaudited. CCMHB-CCDDB Financial Manager Chris Wilson has created a similar report which compares the current year with the most recent year and which can be updated for regular board meeting packets.

DDB Fund Balance	2022	2023	2024	2025	2026
January	2,010,634	2,370,305	3,194,814	3,505,356	3,673,624
February	1,668,898	1,919,095	2,857,643	3,057,835	3,204,525
March	1,391,818	1,603,270	2,472,434	2,607,538	2,773,571
April	1,392,137	1,602,652	2,160,198	2,159,849	2,429,278
May	***758,517***	***1,248,198***	1,775,787	***1,711,199***	1,994,181
June	1,897,706	2,054,946	***1,463,745***	4,079,969	***1,641,830***
July	2,889,554	2,409,563	3,932,881	3,612,896	4,260,637
August	1,952,014	2,806,497	3,611,389	3,145,495	3,814,207
September	3,122,789	4,125,790	4,917,678	2,677,912	

October	3,125,243	3,778,587	4,475,208	4,402,632	
November	2,776,758	3,695,129	4,008,236	3,523,525	
December	3,116,620	3,617,989	3,960,707	4,139,739	
End of Year	3,123,529	3,618,736	3,952,167	4,139,747	
Total Expenses	4,185,657	4,530,095	4,947,671	5,320,738	5,723,320

Discussion:

The lowest fund balance in each year can be compared to the total annual budget for that year, to understand how close we were to the fund balance targets. With the benefit of hindsight, this review compares total actual (rather than budgeted) expenses for the years 2022-2025 and total projected expenses for 2026:

- In 2022, the low of $758,517 was 18% of total expenses $4,185,657.
- In 2023, the low of $1,248,198 was 28% of total expenses $4,530,095.
- In 2024, the low of $1,463,745 was 30% of total expenses $4,947,671.
- In 2025, the low of $1,711,199 was 32% of total expenses $5,320,738.
- In 2026, the low of $1,641,830 was 29% of total expenses $5,723,320.

The minimum fund balance target was not achieved in 2022 but has been since. Actual expenses are lower than budgeted each year; if we use budgeted amounts instead of actual, the percentages would be lower. The optimal target of 50% is more elusive.

In 2022, 2023, and 2025, the lowest balances were reached in May. During 2024 and 2026, the lowest balances occurred in June, making it difficult to issue payments owed to agencies for the program year ending June 30 and adding uncertainty about timely payments on the new contracts which started July 1.

This year, to alleviate the potential harm this delay might cause funded programs, Mr. Wilson worked with agencies and the County Finance Department to enroll vendors in electronic transfer/direct deposit, eliminating any delay caused by postal service. The low point was also later this year due to changes in other County operations which may become permanent and which call our attention to the purpose of the ideal/optimal fund balance: 50% of total annual budget available at the low point.

Other disruptions to the distribution of property taxes, such as low collection or external tax abatement decision, would jeopardize the fund. In that event, six months of payments to agency programs would allow them to transition staff and clients thoughtfully as they terminate operations, and it would allow for our own office to do the same. These are extreme possibilities which we wouldn't normally predict, but economic downturn and sweeping policy changes could precipitate them. Beyond dramatic tax revenue disruptions, the fund could be removed by legislative action.

Late in 2026, half of the available amount in the I/DD Special Initiatives fund will be transferred to the DDB fund, adding a small unallocated cushion for 2027 and beyond.

Decision Section:

Motion to affirm the fund balance policy of maintaining between 25% and 50% of total annual budget throughout the fiscal year.

_____ Approved

_____ Denied

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

BRIEFING MEMORANDUM

DATE: September 23, 2026
TO: Members, Champaign County Developmental Disabilities Board (CCDDB)
FROM: Kim Bowdry, Associate Director for I/DD and Leon Bryson, Associate Director for MH/SUD
SUBJECT: DRAFT Three Year Plan for 2026-2028 with Objectives and Tactics for Fiscal Year 2027

Purpose

Staff have prepared the DRAFT Three Year Plan for 2026-2028 with Objectives and Tactics for Fiscal Year 2027. The draft continues commitments to existing collaborations, to needs and preferences of people with I/DD, and incorporates updated timelines, current community needs, organizational capacity, and opportunities for improvement.

Updates

- Continued Priorities: Most objectives and tactics are carried forward with updated timelines and clarifications.
- Planning: For 2027, the draft seeks to remove the proposed practice of requesting input directly from people with I/DD and their supporters prior to every Board meeting, as this has not been feasible. Other opportunities for input from people with I/DD continue.
- Advocacy: For 2027, the draft shifts the focus from hosting the annual Disability Resource Expo to hosting or promoting community events focused on resource sharing.
- Organizational Health Assessment: The focus shifts from completing the Organizational Health Assessment to strategically implementing its recommendations based on need, impact, and available capacity.
- Ongoing Community Needs Assessment: Staff will continue monitoring community needs through workgroups, reports, community initiatives, and input received through Board meetings and study sessions.

Next Steps

The DRAFT Three Year Plan for 2026-2028 with Objectives and Tactics for Fiscal Year 2027 will be shared with people with I/DD and their supporters, funded agencies, stakeholders, and community partners for their feedback with a deadline of November 6, 2026 for providing input. What is learned through the Advocate Presentation at the September 30, 2026 Joint Study Session, stakeholder feedback, public comment in meetings, and further input from Board members and staff will shape a final version which will be presented to the Board for approval.

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Champaign County Board for Care and Treatment of Persons with a Developmental Disability, as

Champaign County Developmental Disabilities Board

THREE YEAR PLAN

For Fiscal Years 2026 through 2028

(1/1/26 – 12/31/28)

With DRAFT One Year Objectives and Tactics

for Fiscal Year 2027

(1/1/27-12/31/27)

Champaign County Board for Care and Treatment of Persons with a Developmental Disability, referred to as Champaign County Developmental Disabilities Board (CCDDB)

WHEREAS**,** the Champaign County Board for Care and Treatment of Persons with a Developmental Disability, referred to as Champaign County Developmental Disabilities Board (CCDDB), was established under the Illinois County Care for Persons with Developmental Disabilities Act, now revised as the Community Care for Persons with Developmental Disabilities Act (IL Compiled Statutes, Chapter 50, Sections 835/0.05 to 835/14 inclusive) in order to "provide facilities or services for the benefit of its residents who are persons with intellectual or developmental disabilities and who are not eligible to participate in any such program conducted under Article 14 of the School Code, or may contract therefore with any privately or publicly operated entity which provides facilities or services either in or out of such county."

WHEREAS, while the CCDDB is not required by statute or other authority to prepare a one- and three-year plan for a program of supports and services for people with intellectual and developmental disabilities, planning with input from stakeholders and constituents is highly valued.

THEREFORE**,** the CCDDB does hereby adopt the following Mission Statement and Statement of Purposes to guide the development of the intellectual and developmental disabilities supports and services plan for Champaign County:

Mission Statement

The mission of the CCDDB is the advancement of a local system of supports and services for people with intellectual and/or developmental disabilities, in accordance with the assessed priorities of Champaign County residents.

Statement of Purposes

1. **Planning** for the intellectual and developmental disability support and service system to assure accomplishment of the CCDDB goals.
2. **Allocation** of local funds to assure the provision of a comprehensive system of community based intellectual and developmental disability supports and services anchored in high-quality person-centered planning.
3. Increase **access** to all relevant resources for an interrelated and robust system of care.
4. **Advocating** for improvements to the local system and larger funding and services systems.
5. **Evaluation** of the system of care to assure that supports and services are provided as planned and that services are aligned with the needs and values of the community.

To accomplish these purposes, the CCDDB collaborates on the resources necessary for an effective support and service system. The CCDDB shall fulfill responsibilities specified in Sections 835/0.05 to 835/14 inclusive of the Community Care for Persons with Developmental Disabilities Act.

This Three-Year Plan is organized according to the five purposes identified above. Each purpose is followed by at least one strategy and goal. Each goal has measurable objectives, which are likely to continue from one year to the next, and tactics which may be completed or substantially revised in subsequent years.

Purpose #1: Planning

STRATEGY: The people most directly affected by our work should influence it.

Goal 1.1: Gather information about the support and service needs and preferences of adults with intellectual and/or developmental disabilities (I/DD) who reside in Champaign County.

- At each regular Board meeting in 2027, invite written or oral input from people with I/DD.
- ~~Prior to each regular Board meeting during 2026, reach out to individuals, advocacy groups, family members, and other supporters, for any input they would offer.~~ (DELETE, as staff have found this to be impractical.)

At least once during 2027, and prior to the final draft of Program Year 2029 funding priorities:

- Host a presentation in which people with I/DD may address the Board directly.
- Summarize Illinois Department of Human Services – Division of Developmental Disabilities PUNS data sorted for Champaign County.
- Review local preference assessment data provided by people who have I/DD or their guardians or family supporters on their behalf.

Goal 1.2: Gather information about the support and service needs of youth and young adults who have I/DD and who reside in Champaign County.

At least once during 2027, and prior to final draft of Program Year 2029 funding priorities:

- Participate in the Transition Planning Committee.
- Use data reported by those offering transition support to young adults leaving the school system.
- Request information from students, families, school districts, and service providers regarding supports which would be helpful to those who are otherwise served under the School Code.
- Use data provided through collaborations such as Champaign County Community Coalition, Continuum of Service Providers to the Homeless, Youth Assessment Center Advisory Committee, and Juvenile Redeploy to understand which additional services might benefit youth who have I/DD and multi-system involvement.

Goal 1.3: Gather information about the support and service needs of young children who have developmental delays, disabilities, or risk and who reside in Champaign County.

At least once during 2027, and prior to final draft of Program Year 2029 funding priorities:

- Seek input from the Early Childhood Home Visiting Consortium.
- Seek input from the Region 9 Birth to Five Council or similar collaboration.
- Exchange updates with United Way of Champaign County and other local funders currently prioritizing the needs of very young children and their families.
- Review local Child Find Data with the Local Interagency Council Coordinator.

Goal 1.4: Increase engagement with family support and advocacy organizations.

At least once during 2027, and prior to final draft of Program Year 2029 funding priorities:

- Seek input from local family support organizations which are focused on people with I/DD.
- Seek feedback about family support organization activities and events to understand who is reached and whether desired services or activities are available.
- Participate in statewide networks which include family members and other supporters of people with I/DD.

STRATEGY: Recognize challenges and opportunities.

Goal 1.5: Identify service gaps and other challenges related to the operating environment, including desired services not covered by state/federal funding.

At least once during 2027, and prior to final draft of Program Year 2029 funding priorities:

- Through local collaborations such as the Transition Planning Committee and Health Plan Priority workgroups, identify community-wide barriers and possible solutions.
- Through state and national trade association activities, track changes in and implementation of state and/or federally funded programs as well as legislative activity likely to impact people served or waiting for services.
- Seek input on the larger service systems from funders, state officials, and others with expertise.
- Track relevant class action cases, such as the Ligas Consent Decree.
- Monitor changes in the Medicaid waivers and Managed Care, especially whether service capacity and options are sufficient to meet demand in Champaign County.

Goal 1.6: Stay informed of current best practices and promising practices.

At least twice during 2027:

- Attend state and national association (and similar) meetings, webinars, and communities of practice to learn about evidence-based, evidence-informed, recommended, innovative, and promising practice models which may benefit people who have I/DD.
- Through relationships with other funders, state officials, and other experts, gather and share such information, including whether other pay sources are available.

At least once during 2027, and prior to final draft of Program Year 2029 funding priorities:

- For the best outcomes for people with I/DD, and based on their input, identify any appropriate practice models for implementation.

STRATEGY: Learn from the most recently completed allocation cycle.

Goal 1.7: Compare funded program reports to determine whether service capacity and delivery are likely to meet the needs and preferences as understood through the above objectives and tactics. *(See below for Purpose #5: Evaluation.)*

At least 80% completion by November 1, 2027:

- Summarize funded program utilization and related results for publication and for feedback from Board members and interested parties.
- Invite public input at each regular meeting and in response to published reports.

Purpose #2: Allocation

STRATEGY: Fund a range of community-based supports and services to meet the needs and preferences of people with I/DD.

Goal 2.1: Allocate funds for community-based supports and services, for people with I/DD who are eligible but do not have state funding or for services not covered by other funding sources, and according to the people's identified needs and preferences.

- With at least 80% completion by May 1, 2027, solicit and review proposals for Program Year 2028 funding (July 1, 2027 through June 30, 2028) from community-based providers in response to approved priorities and criteria using a competitive application process.
- During this review process, and with at least 80% completion, examine proposed budgets for allocation of sufficient amounts to indirect but critically important items such as bookkeeping, annual independent CPA audit/review, training, technical assistance, language/communication assistance, professional development for staff and governing/advisory boards, e.g., to advance CLC and diversity the workforce.
- During this review process, and with at least 80% completion, note whether proposed plans align with at least one Program Year 2028 priority category, whether all minimum expectations are met, and how they compare with 'best value' criteria.

- With at least 80% completion by June 1, 2027, from among Program Year 2028 funding requests submitted by eligible providers, select those which represent a best value for residents, align most closely with defined priorities, and are affordable within projected budgets.
- With at least 80% completion by July 1, 2027, develop and execute contracts with agencies whose funding requests are approved, to ensure timely payment and service delivery.

Goal 2.2: Develop annual priorities and decision criteria for Program Year 2029, using a published timeline and incorporating information from the public, funded agency reports, state and federal authorities, and other interested parties.

- By December 9, 2027, a draft of Program Year 2029 allocation priorities will incorporate at least 80% of findings of Planning objectives and tactics above and Evaluation objectives and tactics below.
- A final draft, revised using public, Board, and staff input, will be presented for Board approval at least 7 days prior to publication of a Notification of Funding Availability.
- A Notification of Funding Availability will be published at least 21 days prior to the start date of the period during which agencies may respond to these priorities.
- With 100% completion prior to the application period opening, update online application and registration forms.

STRATEGY: Through existing collaborations, increase the impact of funding.

Goal 2.3: Encourage high-quality person-centered and culturally responsive service planning and delivery for people participating in programs funded by the CCDDB and, through the Intergovernmental Agreement, from the CCMHB.

At least once prior to May 1, 2027:

- Emphasize personal agency in service planning and implementation for all people served.
- Encourage and support conflict free case management for all people served.
- Through cultural and linguistic competence planning, improve outreach and engagement of members of racial, ethnic, or gender minority groups and rural residents. For very young children, reduce disparities in the age of identification of disability/delay so that all children who will benefit from early support have access and opportunity.

At least once prior to November 1, 2027:

- Connect program performance measures and outcomes with those personal outcomes people with I/DD identify in their individual service plans.
- Connect program performance measures and consumer outcomes with preferences as identified by people with I/DD and shared with the Board.

Goal 2.4: Coordinate the integration and alignment of resources for people with I/DD.

At least once prior to May 1, 2027:

- Through approved annual Program Year 2028 funding priorities, allocate funding for a range of programs that empower people who have I/DD, at all ages and stages of life, and improve their access to integrated settings.
- Use the I/DD Special Initiatives Fund to assist Champaign County residents who have I/DD and significant support needs.

Goal 2.5: Continue collaborations with other governmental entities and funders, to maximize the impact and efficiency of allocations.

By the end of 2027, participate in at least 80% of meetings and activities of:

- Problem Solving Courts Steering Committee, Crisis Intervention Team Steering Committee, and similar collaborations, to support diversion from justice system involvement as well as reentry after incarceration, including for people who have I/DD.
- Champaign County Community Coalition and similar, to advance the System of Care principles of youth-guided, family-driven, culturally and linguistically competent, trauma-informed supports, to improve engagement and outcomes for young residents, including those who have I/DD.
- The Local Funders Group, to compare priority categories and allocations and identify strengths, gaps, efficiencies, and overlap.

Purpose #3: Access to Resources

STRATEGY: Increase community awareness of available local resources.

Goal 3.1: Improve resource visibility through accessible, user-friendly information about community supports and services and related resources.

At least once during 2027:

- Explore 'plain language' documents, possibly in partnership with agency providers, and aligned with *plainlanguage.gov* guidance on best practice.
- Partner with Champaign County and other governmental entities on improving web-based information and accessibility of websites.
- Encourage organizations to share current information with 211 information services, at *https://www.unitedwaychampaign.org/211* (community resources), Illinois' BEACON portal, at *https://beacon.illinois.gov/* (children's behavioral health), the disability Resource Expo, at *https://www.disabilityresourceexpo.org/resource-guide/*, and other resource guides relevant to them.

Goal 3.2: Increase the community's support and advocacy for people with I/DD, for their families and supporters, and for provider agencies.

- With 80% completion during 2027, use traditional and social media to promote the disAbility Resource Expo resources and activities, Alliance for Inclusion and Respect, individuals and organizations involved with them, and their "awareness" events and messaging.
- As possible and at least twice during 2027, elevate 'storytelling' efforts of funded programs and testimonials shared by individuals, through public Board meetings.
- By August 1, 2027, develop and post online, ~~online and in board packets,~~ brief information about Program Year 2028 funded programs.
- By October 1 and by December 1, develop and post reports on Program Year 2027 funded programs online and in board packets.

STRATEGY: Ensure that community-based supports and services for people with I/DD are coordinated and accessible.

Goal 3.3: Identify opportunities for providers of similar services to coordinate their efforts and partner for best value to Champaign County residents. Require funded agencies to participate in certain collaborations.

- With 80% completion, attend monthly Mental Health and Developmental Disabilities Agency Council (MHDDAC) meetings and contribute to details on gaps and resources.
- At least once during 2027, encourage service providers to participate in existing collaborations with providers of similar or related services, such as the Transition Planning Committee, SOFFT/LAN, Rantoul Service Providers, Continuum of Providers of Services to the Homeless, Champaign County Community Coalition Goal meetings, YAC Steering Committee, CIT Steering Committee, etc.
- At least once during 2027, and as gaps are clarified, encourage service providers to develop new collaborations with providers of similar or related services.

Goal 3.5: Develop and encourage cross-system and other partnerships which will reduce barriers experienced by people who have I/DD.

By the end of 2027, contribute to at least 80% of meetings or activities of:

- Metropolitan Intergovernmental Council and Champaign County Community Coalition Executive Committee for updates and shared responses to emerging issues.
- Consistent with the Champaign County Community Health Plan assessed priority for Access to Healthcare, identify barriers experienced by people with I/DD and promote access and wellness.

- Consistent with the Health Plan assessed priority for Behavioral Health, support reduced reliance on emergency department care and increased access to behavioral health care for all residents, regardless of ability/disability.
- Consistent with the Health Plan assessed priority for Preventing Violence and the anti-violence goals of other units of local government, support increased conflict resolution skills and other efforts to mitigate the impacts of many types of violence.
- Consistent with the Health Plan assessed priority for Healthy Behaviors, support mentoring relationships through existing or new organizations and across all populations and ages.
- Advocate for the above committees and councils to include full participation by people with I/DD.

Purpose #4: System Advocacy

STRATEGY: Promote improved quality of life for people with I/DD.

Goal 4.1: Advocate for least restrictive, flexible, person-centered, high-quality options.

At least twice during 2027, and through state and national association committees and similar collaborations:

- On behalf of people eligible for but not receiving care through Medicaid-waiver funding, as well as those who are eligible and covered but receiving care that does not meet their needs, advocate for the state to offer flexible options.
- In coordination with people who have I/DD, along with their families and supporters, advocate for workforce development and stabilization.
- Participate in statewide system redesign efforts, including through Engage Illinois.
- Advocate for the allocation of state resources sufficient to meet needs of people returning to home communities from state DD facilities.
- On behalf of and with those who receive Home Based Support, who have been selected from PUNS, who are eligible and enrolled and waiting for PUNS selection, and who are likely eligible but not yet enrolled, encourage the Independent Service Coordination unit and IDHS-DDD to select and process Champaign County residents within six months of selection.
- Elevate suggestions which will further include people with I/DD in all systems.

Goal 4.2: Improve understanding of I/DD through family or peer support organizations, especially those led by people with lived experience.

At least once during 2027:

- Promote groups' efforts to reduce stigma/promote inclusion.
- Co-sponsor events when appropriate.

- Support Cultural and Linguistic Competence and other trainings, to increase outreach and engagement.

Goal 4.3: Maintain involvement with state agencies with an interest in I/DD.

Participate in at least 80% of available meetings during 2027 which involve:

- Illinois Department of Human Services Division of Developmental Disabilities.
- Illinois Department of Healthcare and Family Services.

STRATEGY: Promote inclusion and respect of people with I/DD.

Goal 4.4: Through broad community education efforts, promote inclusion and challenge stigma.

At least once during 2027:

- ~~Host an annual disAbility Resource Expo or similar community event.~~ Host or promote a community event focused on resources.
- Host or promote an event through the Alliance for Inclusion and Respect, sharing partners' anti-stigma messages and supporting artists and entrepreneurs who have disabilities.
- If an appropriate match is identified, partner with student groups or interns on a project with inclusion focus.

Goal 4.5: Support other organizations' community education initiatives.

- At least twice during 2027, participate in other local resource fairs and similar community events. Share the disAbility Resource Expo comprehensive resource directory.
- At least four times during 2027, offer educational opportunities for case managers and other service providers and interested parties, on topics relevant to their work, to enhance their work and meet continuing education requirements.
- At least twice during 2027, promote/advertise other organizations' similar efforts.

Goal 4.6: Amplify the efforts of people with I/DD to participate fully in and improve the community and its resources.

At least once during 2027:

- In public documents and meetings of the Board or with collaborators, emphasize inclusion as a benefit to all members of the community, regardless of ability.
- In allocation priorities and through resulting agency services, encourage efforts to support people with I/DD in meaningful work and non-work experiences in their community, driven by their own interests.
- Engage employers and other community partners, e.g., through promotion of ~~the Leaders in Employing All People (LEAP) training and directory of certified employer~~ relevant trainings and resource information.

Purpose #5: Evaluation

STRATEGY: Learn from utilization and outcome reports submitted by funded programs.

Goal 5.1: Review submitted agency reports for current and prior periods to understand utilization, impacts, and areas for improvement.

At least 80% completion by November 1, 2027:

- Using agency progress and outcome reports from Program Year 2027, identify strengths which may be built on, vulnerabilities which should be addressed. As appropriate, respond to the challenges funded agencies have reported.
- Using individual client demographic and residency as reported by programs funded during Program Year 2026 and Program Year 2027 to determine where outreach and engagement has improved to reach all members of the community who seek services.
- Review CLC progress reports for actions which have improved the engagement of members of racial and ethnic minority groups.

Goal 5.2: To demonstrate transparency in process and accountability for results, and to encourage public input regarding those results, make information accessible to the public.

At least 80% completion by November 1, 2027:

- Prepare and post publicly an aggregate funded program performance outcome report.
- Summarize funded program utilization and related results for publication and feedback from Board members and other interested parties (as in Goal 1.7).

Goal 5.3: Incorporate prior year results into next year plan objectives and funding priorities. *(See above for Purpose #1: Planning.)*

At least 80% completion by November 1, 2027:

- Use Board and public input regarding program results to update allocation priorities and Three-Year Plan one-year objectives/tactics to fill gaps and increase successes.
- Compare Program Year 2027 funded program results with results of planning activities described above and propose changes which will strengthen results of Program Year 2029 allocations.
- Where advocacy, community awareness, or collaborations outside of the scope of agency allocations will strengthen results, propose relevant Three-Year Plan one-year objectives and tactics for 2028.

STRATEGY: Contribute to the community's evaluation capacity.

Goal 5.4: Maximize service provider and Board capacity to evaluate programs and share their results with the public, through a contract between the CCDDB, CCMHB, and UIUC Family Resiliency Center, which continues to April 30, 2027.

- At least ~~nine~~ three times during 2027, consult with Evaluation Capacity Building (ECB) researchers on progress toward increasing agencies' capacity to evaluate and report on program performance and consumer outcomes.
- Prior to 80% of Board meetings during 2027, invite ECB team to provide updates.
- At least three times during 2027, encourage funded and non-funded organizations to use the tools developed by the ECB research team (e.g., through Local Funders Group, MHDDAC, or Champaign County Government.)
- Before July 1, 2027, if a contract for evaluation capacity building has been developed and executed which includes this type of support, identify funded programs to receive intensive support from the ECB.

STRATEGY: Assessment of the Organization

Goal 5.5: Ensure that internal operations support fulfillment of the Board's mission and vision.

- ~~Prior to November 1, 2026, complete an organizational assessment focused on operations, which may redesign the work to prepare for succession, modernization, etc.~~ Implement recommendation(s) from the organizational health assessment completed in September of 2026.
- At least once during 2027, and as Board members identify topics for exploration, staff will maintain a list of 'strategic questions' to prioritize and respond to one topic at a time, as Board meeting time permits.
- At least twice during 2027, communicate with representatives of other Boards established under the Illinois Community Care for Persons with Developmental Disabilities Act about their responses to revised or longstanding provisions in the statute.

This version is a draft; a final version should be approved later in 2026.

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

BRIEFING MEMORANDUM

DATE: September 23, 2026
TO: Members, Champaign County Developmental Disabilities Board (CCDDB)
FROM: Associate Director Kim Bowdry, Executive Director Lynn Canfield
SUBJECT: DRAFT Program Year 2028 Allocation Priorities and Decision Criteria

Statutory Authority:

The Community Care for Persons with Developmental Disabilities Act (https://www.ilga.gov/Legislation/ILCS/Articles?ActID=3834&ChapterID=11) (50 ILCS 835/ Sections 0.05 to14) is the basis for Champaign County Developmental Disabilities Board (CCDDB) policies. Funds shall be allocated within the intent of the controlling act, per the laws of the State of Illinois. CCDDB Funding Requirements and Guidelines (https://ccmhddbrds.org/ords/f?p=189:4::::::) require that the Board annually review decision support criteria and priorities to be used for funding services of value to the community. An approved final version of this memorandum becomes an addendum to Funding Guidelines.

Purpose:

The CCDDB may allocate funds for the Program Year 2028, July 1, 2027 to June 30, 2028, through a process outlined in a publicly available timeline. The first step is review and approval of allocation priorities and decision support criteria the Board will later use to consider proposals for funding. This memorandum details:

- Observations on needs and preferences of people who have Intellectual/Developmental Disabilities (I/DD).
- Impact of state and federal systems and other aspects of the environment.
- Priority categories to be addressed by proposals for funding.
- Best Value Criteria, Minimal Expectations, and Process Considerations.

This initial draft is presented to the Board and the public during September. It is based on our understanding of context and best practices, using input from providers, board members, and other interested parties. Feedback to the initial draft will be incorporated into a final version for Board approval later in 2026. Once these expectations are finalized and approved, we will begin the process of accepting requests for funding for Program Year 2028.

Needs and Priorities of Champaign County Residents:

Young Children

The Illinois Birth to Five Council, Region 9 Report, "Early Childhood Needs Assessment: Focus on Mental & Behavioral Health" (https://static1.squarespace.com/static/61ba6b3017614378f01ce468/t/667586f91da3f76c24b5328c/1718978298015/R-MBH_Region9_English.pdf) identifies familiar barriers: stigma; transportation; lack of resource information; and lack of culturally and linguistically diverse providers. Recommendations are: increase awareness of the need for more programs; increase collaboration between programs; partner with county health departments to link people to care; establish navigators to help caregivers understand services, eligibility, and payment; increase educational opportunities, transportation, virtual service options, and awareness of 211; improve support for pregnant people and their families; raise awareness of the need for culturally and linguistically diverse providers, to reach more families with effective care; raise awareness among providers of the need to accept multiple forms of insurance, which would also help reach more families; create accessible resource guides; and increase collaboration on behalf of international students and immigrants.

From their June 2026 report "Changes in Early Childhood" linked here (https://static1.squarespace.com/static/61ba6b3017614378f01ce468/t/6a3c2c0f3bea852ef0879d2b/1782328335686/R_2026MajorChanges_R9.pdf):

- From 2023 to 2025, sixty-six licensed and license-exempt child care programs closed, especially in rural areas. These closures strain the remaining workforce, make it harder for family caregivers to keep their jobs, and deprive children of early learning opportunities, with many aging out of EI before receiving any services or screenings.
- The shortage of mental health services for children continues, but the state of Illinois's launch of BEACON may help people connect to existing resources.
- Workforce pressures and shortages continue.
- Dramatic economic shifts include the loss of hundreds of jobs in health care and insurance. Other negative factors are drought, increased homelessness, fear among asylum seekers and other immigrants, and loss of transportation options.
- Successes noted are: increased awareness and accessibility of early childhood services; increased awareness of professional development information; increased outreach to those with limited access; increased awareness about the need for behavioral health support (for children, families and providers).

Child and Family Connections (CFC) of Central Illinois prepares data for the CFC #16 Local Interagency Council (LIC), which alerted us to trends of concern in 2025. The LIC Coordinator has not shared a recent report at this time.

Youth and Adults

Each year, people who are eligible for services funded by the Illinois Department of Human Services (IDHS) – Division of Developmental Disabilities (DDD) report their unmet services needs through the PUNS database. In early August, Associate Director Bowdry requested from IDHS current PUNS data for Champaign County.

From the July 15, 2026 PUNS report, sorted by County and Selection Detail:

- Champaign County residents are waiting for supports: 297 for Transportation, 277 for Personal Support, 170 for Behavioral Supports, 161 for Occupational Therapy, 161 for Other Individual Supports, 155 for Speech Therapy, 111 for Physical Therapy, 107 for Assistive Technology, 57 for Respite, 41 for Adaptations to Home or Vehicle, and 20 for Intermittent Nursing Services.
- Compared to last year, Other Individual Supports switched rank position with Speech Therapy.
- 227 people (an increase from 217 last year) are waiting for Vocational or Other Structured Activities, with the highest interest in community settings followed closely by work in "a disability setting." Interest in self-employment or earning at home is very low (just 13 people).
- 84 people (an increase from 76 last year) are waiting for out-of-home residential services with less than 24-hour support, and 71 (up from 54 last year and 39 in 2024) are seeking 24-hour residential support.
- Champaign County residents comprise 1.67% (last year 1.69%) of the total PUNS cases and 1.67% (last year 1.77%) of active cases. For comparison, Champaign County is 1.67% of Illinois' total population (2024 estimates.)

Also annually, the Champaign County Regional Planning Commission (CCRPC) asks people with I/DD about their preferences and satisfaction. 107 people responded during Program Year 2026, with these results:

- Fifty-two people answered on their own behalf, thirty-eight were parents/guardians of the person, and twenty-one skipped this question.
- 76% of respondents were receiving case management services, through CCRPC, DSC, Community Choices, PACE, or other (Prairieland, DSCC, DRS, Carle, and Molina).
- 1% have been on the PUNS list less than one year, 17.5% between one and three years, 28.6% between three and five years, and 53.4% longer than five.
- 67% (up from 63.4%) need services within one year.
- As in 2025, over half were not interested in support for volunteering or competitive employment.
- 34% of respondents currently worked or volunteered in the community and identified a variety of workplaces, including Salt and Light, Walmart,

Walgreens, Meijer, Circle K, public libraries, DSC, Sam's Café, Clark Lindsey, Schnucks, and many more.

- The most (to least) popular work/volunteer opportunities were "other" later specified (30), retail (22), public services (14), food service/restaurant (14), working with animals (11), outdoors (11), office (10), the arts (8), service industry (8), recreation (8), education/childcare (6), factory (6), technology services (6), health services (6), writer (4), agriculture (4), automotive (3), trade work (3), and construction (1).
- 53% participated in community groups, through provider agencies as well as Special Olympics, churches, CU Special Recreation, Best Buddies, Penguin Project, Makerspace, Tom Jones Challenger League Baseball, Illinois Neurodiversity Initiative, Night to Shine, Amtryke Support, Girls Scouts, TNT Firecrackers, Adult Teen Group, Audubon Society, and SOIL.
- 40% indicated an interest in participating in CU Special Recreation, 38% in church, 34% in groups or clubs, 31.5% in Best Buddies, 30% in YMCA, 26% in Special Olympics, 16.4% in health and wellness, 16.4% in other (specifying a variety), 13.7% in continuing education, and 9.6% in gardening.
- The most (to least) popular leisure activities were eating out, shopping, going to the movies, parks, zoos/aquariums, swimming, concerts, festivals, theatre/arts/museums, recreation/sports, sporting events, and various other.
- Six people responded there are leisure activities they would like to participate in which are not available, including go on a bus ride, travel, Rage Room, visit art museum, glass blowing, pottery.
- People indicated they would benefit from support for (most to least) financial management, independent/daily living, transportation, medical care, competitive employment, socialization, behavioral therapy, physical/occupational/speech therapy, community day services, respite, and assistive technology.
- Twenty-five people responded that they are on agency waitlists for services (primarily Medicaid-waiver funded) and eighty-two skipped the question.
- 14% (34% in 2025) have waited over 5 years, 38% (24.4% in 2025) 3-5 years, 33% (22% in 2025) 1-3, and 14% (19.5% in 2025) less than 1.
- 25.5% are "somewhat comfortable" navigating the I/DD service system, 8% "not comfortable," and 10% "very comfortable."
- 70% of respondents lived with family, 29.5% lived in their own home with occasional support, and 4.7% lived in their own home with no support.
- 55% prefer to live with family, 40% alone, 12.4% with roommates/housemates, 6.7% in a CILA with their own bedroom, 2% a CILA with a shared bedroom, 1% Intermittent CILA, 1% a Community Living Facility, and 1% a State Operated Developmental Center (SODC).
- Among people who prefer housemates, four chose 1, nine chose 1-2, two chose 2, three chose 3, one chose 4, one chose 5-6, and one chose 5-7.
- People could select multiple preferences for places to live. 50% chose Champaign, 26% Urbana, 23% Champaign County, 13% Savoy, 9%

Mahomet, 9% St. Joseph, 8% outside the County, 5% outside Illinois, 4% Tolono, 3% Rantoul, 3% Philo, 3% Fisher, 2% Dewey, and 1% in each of Bondville, Gifford, Homer, Penfield, Royal, Sadorus, Seymour, Sidney, and Thomasboro. 3% indicated no preference.

During Program Year 2026, 211 people engaged in CCDDB funded programs while waiting for PUNS selection (207 people) or exempted due to prior eligibility (4 more). For comparison, 195 were served in Program Year 2025 and 157 in Program Year 2024, perhaps a positive trend.

Associate Director Bowdry requested and received details from Prairieland Service Coordination, Inc., the ISC agency serving Champaign County, on the number of Champaign County residents selected to apply for funding through PUNS during the March and July 2026 PUNS selection process. The lower total this year may relate to application of stricter eligibility criteria.

- 23 total so far in 2026
- 41 total in 2025
- 45 total in 2024
- 49 total in 2023

We do not have information from the Independent Service Coordination (ISC) unit regarding completed awards in 2023, 2024, or 2025. In addition, without total numbers for the state in each year, it is not clear whether additional advocacy might be needed on behalf of Champaign County residents.

Transportation

Historically, transportation has been the highest identified support need according to PUNS data and the CCRPC Preference Assessment. Lack of transportation is a major barrier across the state and country. As noted above, our community has lost some of its public and rural transportation options, but relatively strong services continue in the metropolitan areas, though greater flexibility would help many people with I/DD.

"Transportation for People with Intellectual and Developmental Disabilities in Home- and Community-Based Services" (https://www.sciencedirect.com/science/article/pii/S1936657424001572) identifies barriers specific to different types of community and points out the many areas of life people would participate in if not for these. The study compares Medicaid HCBS waivers in 44 states and DC to learn how this flexible funding has been used. Thirty states, including Illinois, offer transportation as an embedded and as a separate (stand-alone) benefit. In Illinois, only 0.61% of HCBS participants with I/DD used stand-alone. Louisiana was the only state with a lower share. In waiver definitions across the US, public transportation was the most frequent method, followed by staff

vehicles, taxi, other private transportation, and free rides from friends, family, and neighbors.

This report from the Institute on Disability and Human Development (https://www.dhs.state.il.us/page.aspx?item=146064) proposes solutions to this barrier to employment and independence:

- Travel training and planning, through existing curricula or peer support.
- Technology solutions, such as smartphone apps for individual riders in cities with public transportation options.
- Ridesharing other than paratransit, possibly with a companion, likely to require a smartphone and app.
- Enhanced mobility through a Mobility Manager to facilitate transportation.

Transportation remains as the top support need identified by people enrolled in PUNS. CCDDB funding has had a positive impact locally, through large, multi-support programs at DSC and through specific contracts with Community Choices. According to Program Year 2026 quarterly reports, 3,709 rides and 7,616 service contacts were completed. Rides were for work, leisure, medical/health care, errands, family, and agency events, meetings, and appointments. In addition to transportation for members, agency staff train program participants on options such as MTD, Uber, and Lyft, as well as the use of tools, technologies, and apps associated with making these options safer and more accessible.

Direct Input

During a September 30, 2026 joint study session of the CCDDB and Champaign County Mental Health Board, advocates will offer input on their efforts to build support for the disability community. They may provide other insights into any resources which improve their lives.

> *"People with disabilities need help but can do things on their own too and people should let them do more."*
>
> *- Unknown Advocate (2025)*

Operating Environment:

In addition to responding to needs and priorities of Champaign County residents with I/DD, CCDDB allocations are determined within the constraints and opportunities of the operating environment. Clarity about the federal and state systems helps guide the Board toward impactful allocation decisions. If we understand where these systems are not meeting local needs, the Board's funding priorities might shift to fill new gaps. Where other payers cover services, care is taken to avoid supplanting as well as to advocate for improvements in those larger systems.

We continue to monitor dramatic federal budget and policy changes and proposed changes. Some are likely to compound the barriers already experienced by people with I/DD and their families.

- In 2025, social programs many rely on lost funding or lost the capacity to distribute approved funds.
- Also in 2025, the "One Big Beautiful Bill" or House Resolution 1 (HR1) called for major changes Medicaid, which will be implemented in 2027.
- Some US Department of Education responsibilities are shifting, including to other federal authorities, which may make it difficult to determine who is responsible when services (special education and civil rights) are delayed, rights are violated, or problems arise.
- Based on review of language related to diversity, equity, and inclusion, the Dept of Education cancelled nine disability-related grants and twenty-five programs for special education teacher training, parent resource centers, etc.
- Relatedly, Congress has delayed implementation of the Office of Management and Budget (OMB) proposed revision of Uniform Guidance until December, which gives more time for advocates to weigh in on the impacts. The proposed rule reclassifies uniform guidance as binding regulation instead of policy guidance and gives OMB new authority to terminate grant awards and add requirements. The proposed rule shifts grantmaking responsibilities to federal executive appointees and away from the federal agencies which have overseen their procurement processes. The stated purpose is to ensure alignment with the executive's priorities.
- In June of 2026, the US Department of Justice reversed its earlier interpretation of the Americans with Disabilities Act Olmstead Decision which meant that states should offer services in the most integrated settings. This change precedes a court ruling on the class action suit known as Texas vs. Becerra (now Kennedy) et alia, which several states dropped out of and others strongly opposed. States may now increase reliance on institutional settings rather than offer inclusive, community-based care.
- Effective in September 2026, the US Department of Labor will no longer require federal contractors to employ people with disabilities as at least 7% of the workforce or to collect data on applicants and hires with disabilities.

NACO's report "The Big Shift: An Analysis of the Local Cost of Federal Cuts" (https://www.naco.org/resource/big-shift-analysis-local-cost-federal-cuts) describes how the loss of federal support and new mandates will shift billions of dollars of costs to counties while adding administrative burden. People continue to struggle with rising costs, lack of affordable housing, stagnant wages and job loss, faltering public systems, and more. Most safety net and social services are funded by taxes which, if increased to compensate for the shift, will overburden many taxpayers.

People with I/DD tend to rely on these social programs. Loss of support for basic needs, e.g., housing and food, adds to financial stress they already experience. This study on out-of-pocket expenses and unmet needs (https://www.sciencedirect.com/science/article/pii/S1936657425001591) shows that working-age adults with disabilities have additional strain:

- Disability-related expenses were roughly 20% of household income.
- 67% reported an unmet need.
- Those with income below federal poverty level had greater burden from out-of-pocket expenses.
- Hispanic people with disabilities had higher rates of unmet need.

Within the US Department of Health and Human Services (HHS) is the Centers for Medicare and Medicaid Services (CMS). Among many programs administered by CMS are the Medicaid-waivers, per subsection 1915c of the Social Security Act. These create non-institutional care options for the elderly and people with disabilities. Many Illinoisans with I/DD use home and community-based supports paid by "Medicaid waiver" programs available through IDHS-DDD.

Community-based care for people with I/DD is also the purview of the CCDDB. To avoid supplementation and to align with IDHS rules, we track changes in the state and federal systems and whether eligible people have access to these pay sources. In 2027, and in consideration of the DOJ's reversal of the requirement that states offer the option of care in the 'most integrated settings', these changes could be substantial. Last year the Illinois Healthcare and Family Services (HFS), which administers Medicaid, predicted that approximately 330,000 Illinoisians would lose coverage as result of projected federal cuts. Of 3.4 million enrolled in 2024, 44% were children, and 7% were adults with disabilities.

Illinois has been out of compliance with the Ligas Consent Decree, an Americans with Disabilities Act-Olmstead case concerning community-integrated residential settings. An overview of the class action case is provided by the American Civil Liberties Union of Illinois, and annual court monitor and data reports are available on IDHS website. Inadequate reimbursement rates were named as a major cause not only for the state's failure to meet the terms of the settlement but also for its loss of community-based service capacity. With the DOJ's new interpretation of Olmstead, it is unclear how the state will address these barriers in the future.

Illinois is making progress toward some improvements sought by advocates for a very long time. Following findings of very serious maltreatment, the Choate Mental Health and Developmental Center, a large institution in downstate Illinois, is closing all 'DD beds' and transferring many people with I/DD to community settings and a few to other SODCs. The state has been successful in increasing wages for Direct Support Professionals (DSPs). The hourly rate increased by 80 cents per hour as of January 1, 2026, with at least 60% of that increase going to base wages. This was to

be implemented alongside a 35% reduction in CILA DSP hours, a change the state received a great deal of negative public comment about. This year the state approved another DSP wage increase, for sixty cents an hour more, effective January 1, 2027.

Unfortunately, we are seeing changes this year in the criteria for eligibility for PUNS, especially the application of stricter standards than before for people with Autism. This shift will limit their access to Medicaid-waiver services.

To prepare for Medicaid changes which impact people with I/DD and people without I/DD, Illinois is focused on protecting coverage, improving accountability, and expanding community-based supports. This includes:

- Implementation processes and notices for the new Medicaid work requirements, to reduce coverage loss which can be avoided;
- New HealthChoice Illinois managed care organization (MCO) contracts for stronger access and accountability;
- A statewide referral system which will connect Medicaid members, MCOs, providers, and community organizations, including for social-services;
- State Plan Amendment efforts to include Community Health Worker coverage and a potential Medicaid reimbursement pathway for health education, navigation, resource coordination, and screening for health-related social needs;
- Strengthening rural health care access and outcomes through $193.4 million in federal Rural Health Transformation Program funding.

If a service or support responsive to preferences and needs cannot be funded directly, whether due to constraints of the Community Care for Persons with Developmental Disabilities Act, state and federal systems, or workforce shortage, it may be an area for system-level advocacy efforts by the CCDDB and other interested parties. People with I/DD, family members, advocacy groups, allies, and governmental partners have formed a statewide coalition known as Engage Illinois. Through unified advocacy, they continue to advance their 2024North Star Plan. They are currently educating IDHS-DDD on the Supported Living Model, a national best practice which is sustainable, person-centered, and more effective than options currently offered through the State's Medicaid waivers. CCDDB members and staff have been involved with this effort, as its origins, mission, and values align with ours.

Program Year 2028 CCDDB Priorities:

The following continues the Board's commitment to most broad priority categories used in recent allocation cycles, to offer consistency in the face of new or growing challenges. Two categories are merged, and details within each category are updated. Addressing unmet needs and specific barriers experienced by Champaign County residents will continue to be of the highest value.

PRIORITY: Advocacy and Linkage

People with I/DD and their families are ideal champions of service system change. Within this priority category, a program might support people in advocating on their own behalf and finding the best-matched resources. Family or peer advocacy or support groups often rely on unpaid members, making some CCDDB contract requirements more difficult to meet, but small organizations could coordinate to share indirect costs and staff. Another strategy is for a service provider agency to host family and peer groups, especially if their activities may be self-directed. Advocates should lead this work as well as service planning, referral, linkage, and coordination.

A program might pair advocates with CCDDB staff to create "plain language" public documents, such as described in this checklist (https://selfadvocacyinfo.org/wp-content/uploads/2019/08/Plain-Language-Checklist.pdf.) Those involved might access trainings from Self Advocacy Resource and Technical Assistance Center (SARTAC) (https://selfadvocacyinfo.org/resource/plain-language/) or its plain language training for folks with I/DD (https://selfadvocacyinfo.org/wp-content/uploads/2024/08/Earn-Money-By-Doing-Plain-Language-Projects.pptx.pdf). One possible project is a plain language overview or 'primer' of the service and support system the CCDDB evaluates, which would support the Board in accomplishing its Three Year Plan objectives.

People who are eligible but not receiving state Medicaid- waiver (HCBS) funding should have access to benefits and resources, including those benefits and resources available to people who do not have I/DD.

- Conflict-free case management and person-centered planning aligned with Home and Community Based Services standards will identify, understand, and secure those benefits, resources, and services a person chooses.
- Case management or case coordination is guided by a self-directed plan, including for people with complex needs which may be addressed through other service systems such as those focused on aging, physical or behavioral health, grief work, or healing from violence or other trauma.
- Ensure that individuals with I/DD who do not currently rely on many paid supports are able to maintain their trajectory to independence and have a long-term plan beyond the lives of aging family members or other unpaid supporters. This may include assistance with special needs trust, Social Security representative payeeship, banking assistance, guardianship or power of attorney, and similar.

Advocacy and Linkage are fundamental to all priority categories below. The people who participate in programs aligned with any priority should be the focus of the program's activities and the center of their individual service plans.

PRIORITY: Home and Personal Life

People who have I/DD should have housing and home life according to their identified needs and preferences. This includes individualized support for personal success with no other pay source, such as:

- Assistance for finding, securing, and maintaining a home.
- Preparing to live more independently or with different people.
- Given the limitations of current Medicaid waiver options, creative approaches for those who qualify but have not yet been 'selected' to receive these services.
- Assistive equipment, accessibility supports, and training in how to use technology, including electronic devices, apps, virtual meeting platforms, social media, and the internet, and how to ensure online privacy and security.
- Speech or occupational therapy.
- Respite or personal support in the individual's home or setting of their choice.
- Training toward increased self-sufficiency in personal care.
- Strategies to improve physical and mental wellness.

PRIORITY: Work Life

People with I/DD who are interested in working or volunteering in the community may find opportunities through individualized support. Well-matched paid jobs or volunteer work can also increase social connectedness and safety, due to relationships formed at work or even on the way to work. Work should allow them to develop and contribute their talents. Supports should be based on the person's aspirations and abilities and should take place in the most integrated settings. They may include:

- Job development, matching, and coaching in the actual work setting.
- Technology to enhance work performance and reduce on-site coaching.
- Community employment internships, paid by the program rather than the employer, especially for people who would have used traditional day program.
- Support for pursuing and sustaining self-employment or business ownership.
- Transportation assistance.
- Education of employers about the benefits of working with people who have I/DD which then results in work for people with I/DD.

PRIORITY: Community Life

People with I/DD deserve the fullest social and community life they choose. Some might be drawn to 'giving back' to their community, through volunteering for a cause they care about, civic engagement, or joining a group of people with similar interests. Some might enjoy the local recreational and natural resources. Some might define a 'third space' where they belong. To support people in a person-centered, family-driven, and culturally responsive way, a program might offer:

- Social or mentoring opportunities.
- Transportation assistance.
- Information about many types of civic engagement.
- Social and communication skill building, including through technology.
- Connection to resources which are available to community members who do not have I/DD, both in-person and in digital spaces.
- Access to recreation, hobbies, leisure, or worship activities, matched to the person's preferences, both in-person and in digital spaces.

PRIORITY: Strengthening the I/DD Workforce

Agency staff, management, and governance are fundamental to reaching all of the other goals. An applicant requesting funding aligned with another priority will address such issues through its Cultural and Linguistic Competence (CLC) Plan.

Limited community-based service capacity remains a barrier to success and wellness for many people with I/DD and their supporters. A proposal specific to this priority category might propose strategies to recruit and retain a high quality, diverse workforce which should reduce turnover, burnout, and periods of vacancies. To achieve staffing levels which will meet current support needs, a proposal might offer:

- Training or certifications specific to staff roles or the needs of people served, with recognition and payment for completion.
- Sign-on bonuses and periodic retention payments with performance standard.
- Intermittent payments for exceptional performance.
- Group and individual staff membership in trade associations which respect I/DD workforce roles and offer networking and advocacy opportunities.
- Social media and traditional media campaign informing middle school and high school students of the I/DD professions and opportunities.
- Training on technology use and access, which add to direct staff skills, promote greater independence for people with I/DD, and may decrease the need for in-person support. This strategy is described in Best Value Criteria below but could be the focus of a program proposal.

PRIORITY: Collaboration with CCMHB: Young Children and their Families

Providers of services to young children continue to describe increased developmental and social-emotional needs. As pressures on families increase, the trend continues. Many children eligible for state-funded services are not able to use them due to provider shortages. Early identification and treatment can lead to great gains later in life. Services not covered by Early Intervention or under the School Code can be pivotal for young children and their families, including:

- Coordinated, home-based services addressing all areas of development and taking into consideration the qualities and preferences of the family.
- Early identification of delays through consultation with childcare providers, pre-school educators, medical professionals, and other service providers.
- Coaching to strengthen personal and family support networks.
- Maximizing individual and family gifts and capacities, to access community associations, resources, and learning spaces.

Through an intergovernmental agreement with the CCDDB, the Champaign County Mental Health Board (CCMHB) has funded early childhood programs which complement those addressing the behavioral health of children and their families. A notable strength of Champaign County is that providers offering home visits collaborate as a System of Care for children and families. For Program Year 2028, the CCMHB may continue this approach to their commitment to people with I/DD.

Criteria for Best Value:

An application's alignment with a priority category and its treatment of the considerations described in this section will be used as discriminating factors toward final allocation decisions. Our focus is on what constitutes a best value to the community, in the service of those who have I/DD. Some 'best value' considerations may relate directly to priority categories.

Budget and Program Connectedness - What is the Board Buying?

Because these are public funds administered by a public trust fund board, details on what the Board would purchase are at the heart of our work. Each program proposal requires a Budget Narrative describing: all sources of revenue for the organization and those related to the proposed program; the relationship between each anticipated expense and the program; the relationship of direct and indirect staff positions to the proposed program; and additional comments.

Building on the minimal expectation to show that other funding is not available or has been maximized, an applicant should use text space in the Budget Narrative to describe efforts to secure other funding. If the services are billable to other payers, the applicant should attest they will not use CCDDB funds to supplement them. Activities not billable to other payers may be identified for the proposal. While CCDDB funds should not supplant other systems, programs should maximize resources for long-term sustainability. The program's relationship to larger systems may be better understood, including how this program will leverage or serve as match for other resources, also described with Unique Features, below.

Participant Outcomes – Are People's Lives Improved?

A proposal should clarify how the program will benefit the people it serves, especially building on their gifts and preferences. In what ways does the program improve people's lives and how will we know? For each defined outcome, the application will identify a measurable target, timeframe, assessment tool, and process.

Applicants may access publicly available data workshop materials (https://drive.google.com/drive/folders/1iKbPeGDACp2R48xrSfSRh8TEJWt1W6Y8) and short videos or 'microlearnings' (https://familyresiliency.illinois.edu/resources/microlearning-videos), and a logic model toolkit (https://uofi.app.box.com/s/jidv3wz8s5k8k0t9yh2puqvsrfit85ka) which compiles information on measures appropriate to various services and populations. Evaluation capacity building researchers developed the linked materials and offer innovations such as 'storytelling' to communicate the impact of services, especially those with a high degree of individualization. Proposals will also describe how people learn about and access the program and will estimate numbers of people served, service contacts, community service events, and other measure.

Personal Agency - Do People Have a Say in Services?

Proposals should describe how a person contributes to their service plan and should connect program activities to what they identify as important. Meaningful outcomes are developed through a person's involvement. Self-directed planning centers people's communication styles and networks of support, promotes choice, and presumes competence. Each person should have the opportunity to inform and lead their service plan. Plans should be responsive to the individual's preferences, values, and aspirations and should leverage their talents. This may involve building social capital, connections to community for work, play, learning, and more. For context, review The Council on Quality and Leadership capstone "Increasing the Social Capital of People with Disabilities" (https://www.c-q-l.org/resources/newsletters/increasing-the-social-capital-of-people-with-disabilities/?utm_medium=email&utm_campaign=1st%20Email%20-%20Topic%20Resources&utm_content=1st%20Email%20-%20Topic%20Resources+&utm_source=CM%20Email%20Marketing&utm_term=Capstone%20-%20Social%20Capital). Family and community social capital improves outcomes for children and youth, demonstrated in studies discussed in this article (https://pmc.ncbi.nlm.nih.gov/articles/PMC4270040/).

Proposals should describe how people with relevant personal ('lived') experience are contributing to the development and operation of the program itself. How does their knowledge shape the program? Contributing to an organization is one example of civic engagement, which helps people build social capital and experience greater personal agency.

Engaging the Whole Community – Does Everyone Have Access?

Each applicant will design a Cultural and Linguistic Competence Plan, based on National Culturally and Linguistically Appropriate Services Standards. The principal standard is to "Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs." The template form includes various levels of the organization and all of the CLAS standards, so that the agency will fill in action steps and anticipated timeframes for each.

In addition to the agency-wide CLC Plan, each request for program funding is asked to describe strategies specific to the proposed program, especially to improve engagement and outcomes for people from historically under-invested groups, as identified in the 2001 Surgeon General's Report on Mental Health: Culture, Race, and Ethnicity (https://pubmed.ncbi.nlm.nih.gov/20669516/). These community members, rural residents, and people with limited English language proficiency should have all have access to supports and services which meet their needs.

Promoting Inclusion and Reducing Stigma

The CCDDB has an interest in inclusion and community awareness, as well as in challenging negative attitudes and discriminatory practices. Proposals should describe how a program will increase inclusion and social connectedness of the people to be served, linking them with opportunities traditionally difficult to access.

Civic engagement which can build social capital and improve the whole community includes volunteering, informal helping, engaging with neighbors, and attending public meetings. Specific engagement has positive outcomes for individuals and their community. The study, "If I Was the Boss of My Local Government": Perspectives of People with Intellectual Disabilities on Improving Inclusion (https://www.mdpi.com/2071-1050/13/16/9075), finds that safe public amenities, accessible information and communication, and respectful, understanding community members are all needed and that they can be accomplished through direct engagement of people with I/DD in local government.

Stigma is the enemy of these opportunities. It limits individuals' participation, economic self-sufficiency, safety, and confidence. It may also stand in the way of sufficient State and Federal support for community-based services. Stigma especially isolates those who have been excluded due to disability, behavioral health concern, or racial, ethnic, or gender identity. Because some are excluded and cannot easily contribute their gifts, the community is also harmed by stigma.

Programs should increase community inclusion, including in digital spaces. People thrive when they have a sense of belonging and purpose, and they are safer through routine contacts with co-workers, neighbors, and acquaintances through a faith community, recreation center, or social network. Positive community involvement builds empathy and group identity, reduces stress, and even helps to reduce stigma.

Technology Access and Use

Applications should describe virtual service options which will reduce any disruptions of care or impacts of social isolation. Telehealth and remote services can also overcome transportation barriers, save time, and improve access to other resources.

Programs may build on existing successes or reduce the need for in-person staff support by helping people access and use technology and virtual platforms with confidence. This is true for the people served and also for staff providing the services, as it might expand the program's intended impact. As technology evolves, some promising remote supports will also require safety training.

The State of Ohio Department of Developmental Disabilities offers Remote Support (https://dodd.ohio.gov/about-us/resources/tech-first/RemoteSupport) and has partnered with the Ohio State University on this update (https://nisonger.osu.edu/technology-project-3/remote-supports/) regarding available options and results. The UIUC College of Applied Health Sciences McKechnie Family LIFE Home (https://lifehome.ahs.illinois.edu/)conducts research on innovative supports within the home. Agencies could collaborate with such research teams to the advantage of Champaign County residents.

Unique Features

Thanks to the strengths and resources of Champaign County, a program might offer a unique service approach, staff qualifications, or funding mix. Proposals will describe features which will help serve program participants most effectively.

- Approach/Methods/Innovation: cite the recommended, promising, evidence-based, or evidence-informed practice and address fidelity to the model under which services are to be delivered. In the absence of such an established model, describe an innovative approach and how it will be evaluated.
- Staff Credentials: highlight credentials and trainings related to the program.
- Resource Leveraging: describe how the program maximizes other resources, including funding, volunteer or student support, and community collaborations. If CCDDB funds are to meet a match requirement, reference the funder requiring local match and identify the match amount in the application Budget Narrative.

Expectations for Minimal Responsiveness:

Applications which do not meet these expectations will not be considered. Organizations register and apply at http://ccmhddbrds.org, using instructions posted there. Accessible documents and technical assistance are available upon request through CCDDB staff.

1. Applicant is an eligible organization, demonstrated by responses to the Organization Eligibility Questionnaire, completed during initial registration. For applicants previously registered, continued eligibility is determined by compliance with contract terms and Funding Requirements.
2. Applicant is prepared to demonstrate capacity for financial clarity, especially if answering 'no' to a question in the eligibility questionnaire OR if the recent independent audit, financial review, or compilation report had negative findings. Unless provided under CCDDB contract, applicant should submit an independent CPA audit, review, or compilation report regarding the agency's most recently completed fiscal year, or, in the absence of one, an audited balance sheet.
3. All application forms must be complete and submitted by the deadline.
4. Proposed services and supports must relate to I/DD. How will they improve the quality of life for persons with I/DD?
5. Application must include evidence that other funding sources are not available to support the program or have been maximized. Other potential sources of support should be identified and explored. The Payer of Last Resort principle is described in CCDDB Funding Requirements and Guidelines.
6. Application must demonstrate coordination with providers of similar or related services and reference interagency agreements. Optional: describe the interagency referral process, to expand impact, respect client choice, and reduce risk of overservice.

Process Considerations:

The CCDDB uses an online system at https://ccmhddbrds.org for applications for funding. On the public pages of the application site are downloadable documents and webpages describing the Board's goals, objectives, requirements, instructions, and more. Applicants complete a one-time registration before accessing the online forms.

Criteria described in this memorandum are guidance for the Board in assessing proposals for funding but are not the sole considerations in final funding decisions. Other considerations include the judgment of the Board and staff, evidence of the provider's ability to implement the services, soundness of the methodology, and administrative and fiscal capacity of the applicant organization. Final decisions rest with the CCDDB regarding the most effective uses of the fund. Cost and non-cost

factors are used to assess the merits of applications. The CCDDB may also set aside funding to support RFPs with prescriptive specifications to address the priorities.

Caveats and Application Process Requirements

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

- Proposals must be complete, on time, and responsive to application instructions. Late or incomplete applications will be rejected.
- If selected for funding, the contents of an application will be developed into a formal contract. Failure of the applicant to accept these obligations can result in cancellation of the award for contract.
- The CCDDB reserves the right to withdraw or reduce the amount of an award if the application has misrepresented the applicant's ability to perform.
- The CCDDB reserves the right to negotiate final terms of any or all contracts with the selected applicant; any such terms negotiated through this process may be renegotiated or amended to meet the needs of Champaign County.
- The CCDDB reserves the right to require the submission of any revision to the application which results from negotiations.
- The CCDDB reserves the right to contact any individual, agency, or employee listed in the application or who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.
- The CCDDB may exercise its authority to add to the definition of intellectual/developmental disability, including eligibility criteria or a process for individual eligibility determination which varies, in the short term or long term, from those of the Illinois Department of Human Services – Division of Developmental Disabilities. Any action under this authority will be reviewed and approved by the full Board in advance of implementation.

**This is a draft; a final version should be approved later in 2026.*

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CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

DECISION MEMORANDUM

DATE: September 23, 2026
TO: Champaign County Developmental Disabilities Board (CCDDB)
FROM: Lynn Canfield, Executive Director
SUBJECT: Resolving CU Autism Network Program Year 2024

Purpose:

This memorandum offers an overview of the Champaign-Urbana Autism Network (CUAN) Program Year 2024 contract issues. Prior detailed information and board discussions are linked, with summaries provided.

If the agency has not withdrawn its earlier request of the Board, action should be taken on that request, and a Decision Section is included, in the middle of this document, to support that.

In the event the agency withdraws the request or the Board chooses to deny it, subsequent sections of this memorandum are meant to support possible next steps. An update from the Agency is included but does not include information which might change suggestions previously offered by CCDDB staff. Scenarios and related sample motions are offered as a guide for action.

Statutory Authority:

The CCDDB is established and governed by (50 ILCS 835/) The Community Care for Persons with Developmental Disabilities Act. Among responsibilities identified in this Act are compliance with the Local Government Prompt Payment Act, Civil Practice Law, Illinois Department of Human Services rules, and the Illinois Administrative Procedure Act. The latter allows regulatory flexibility appropriate to small businesses and non-profit agencies.

Consistent with these rules, the CCDDB sets Funding Requirements and Guidelines for Allocation of Funds, which include authority to exercise flexibility and approve exceptions to standards. The Board has recognized the important contributions of family support networks, which may lack the administrative capacity to meet all requirements, especially when they are volunteer-run. The Board may vary provisions

where it deems such variances to be in the best interest of the CCDDB and residents of Champaign County.

Special consideration given to the following matter has been consistent with authorities identified above and with the funding allocation priorities and decision support criteria defined and approved for the Program Year 2024.

Contract Requirements and Appeals Process:

From related sections of the Program Year 2024 contracts:

> *"d. If the Provider organization does not comply with the requirement to produce an audit or financial review or compilation as specified by the Board, the Provider shall repay all Board funds allocated for such purpose.*
>
> *e. Penalty: Failure to meet these requirements shall be cause for termination or suspension of CCDDB funding of any current or subsequent contracts between the Board and the Provider.*
>
> *f. The Provider must report to the Board any of its program or financial findings that indicate noncompliance, errors in billing, overpayments, failure to coordinate benefits, and/or other irregularities in the operations of the Provider.*
>
> *g. Where the Provider has not submitted the annual audit or review or compilation report by the due date, the Board shall exercise the right to withhold payments until the annual audit or review or compilation report has been received, reviewed, and accepted.*
>
> *h. At the discretion of the CCDDB, independent audit or financial review or compilation requirements may be waived for special circumstances. The waiver provision shall be specified in the contract."*

From the CCDDB Funding Requirements and Guidelines incorporated in Program Year 2024 contracts, an appeal process is described:

> *"Appeal procedures: The CCDDB Executive Director shall be responsible for implementing and interpreting the provisions pertaining to appeals. The Executive Director may delegate monitoring responsibility to other CCDDB staff…*
>
> *Only decisions by the CCDDB Executive Director of non-compliance by a Provider with provisions of these policies may be appealed to the CCDDB. Such appeals must be made in writing by the Provider.*
>
> *The written formal appeal should include, at minimum: (1) a thorough explanation of what happened to cause the noncompliance; (2) proof of corrective*

action that has been taken, or is underway, to ensure that the root cause has been addressed and will not happen again; and (3) a plan for additional reporting by the agency and possible additional oversight by CCDDB relevant to the noncompliance for the remainder of the contract. The third component may be modified by the CCDDB, possibly incorporating input from CCDDB staff.

CCDDB shall review information from the CCDDB Executive Director and the agency or program in arriving at a decision at the next regularly scheduled meeting following the notification of the agency, or at an intervening special meeting if the Board so chooses. All written materials for consideration should be submitted by the Provider a minimum of eight (8) days prior to the meeting of the Board. The agency shall be afforded the opportunity to discuss the issue with the CCDDB prior to a final decision. Additional information may be required for the CCDDB to arrive at their final decision."

Background:

Staff Action and Agency Response, 2024.

Reports required with CUAN's Program Year 2024 contracts with the CCDDB for "Community Outreach Program" and "CCDDB CUAN Planning Seed Grant" were not submitted by the original deadlines or by the first extended deadline. After this point, CCDDB staff notified the Agency that all payments issued should be returned.

In November 2024, Steve Beckett, on behalf of CUAN, requested an opportunity to demonstrate that funds had been used appropriately so that none should be returned.

See pages 29-32 of the Board Packet linked here (https://champaigncountyil.gov/MHBDDB/agendas/ddb/2024/241120_Meeting/241120_Full_Board_Packet.pdf).

The Board agreed to receive first and second quarter Program Year 2024 reports, setting a deadline of January 8, 2025. Contracts were amended to cease obligations as of December 31, 2023 rather than the original June 30, 2024.

Reports and Agency Responses, 2025.

An update was provided at the Board's January 22, 2025 meeting. This incorporated CCDDB staff analysis of submitted reports and other information from Steve Beckett, his assistant Kristina Forrest, and the CPA who had been contracted to complete the Agency's financial review.

See pages 98-104 of the Board packet linked here (https://champaigncountyil.gov/MHBDDB/agendas/ddb/2025/250122_Meeting/250122_Full_Board_Packet.pdf).

Mr. Beckett and Mrs. Julie Duvall, CUAN's Executive Director, attended the meeting to answer questions and offer additional information. At this time, the Board agreed to accept third and fourth quarter program and financial reports, which might clarify how the six months of payments had been used over the original twelve-month contract period.

At the Board's July 23, 2025 meeting, CCDDB staff offered analysis of these additional reports. Inconsistencies across programs suggested the Agency had not met certain contract requirements, such as for financial record keeping and reporting. One program appeared to have been implemented as contracted for the full year, while the other appeared not to have been implemented. We could not offer an opinion on how much of the funding had been used appropriately without an independent CPA financial review.

See pages 65-73 of the Board packet linked here (https://champaigncountyil.gov/MHBDDB/agendas/ddb/2025/250723_Meeting/250723_Full_Board_Packet.pdf).

While an audit would provide better information, Agency representatives pointed out the significantly higher cost. The Agency had engaged with a CPA firm for this review in December 2024, as well as with an accountant to prepare financial records for the review. The CCDDB chose to wait for this report and the subsequent staff follow-up, which might include a specific conclusion. Board members also requested a conversation with CUAN's Board once the matter was concluded.

Follow Up and Agency Responses, 2026.

The independent CPA firm sent a 'letter of disengagement' on January 12, 2026. This letter noted the reason as "limitation in scope of the information needed to completed the engagement" and elected to write-off their unbilled time. This was presented to the CCDDB on January 28, 2026.

See pages 45-48 of the Board packet linked here (https://champaigncountyil.gov/mhbddb/agendas/ddb/2026/260128_Meeting/260128_Full_Board_Packet.pdf).

On February 25, 2026, the Agency formally requested "additional time" for another independent CPA to be engaged in order to complete the review.

See pages 27-32 of the Board packet linked here (https://champaigncountyil.gov/mhbddb/agendas/ddb/2026/260225_Meeting/260225_Full_Board_Packet.pdf).

Without a quorum at the February meeting, the Board could not take action. The Agency representative could not attend the next regular Board meeting.

Update:

Mr. Beckett was not available to speak to the Board in March. The business of Program Year 2027 allocations and community-facing events and information dominated Board and staff time and attention for the next few months, while no new information or specific timeline was available from the organization.

The Board is taking this matter up again in the hope of bringing it to a conclusion. To my email requesting an update, Mr. Beckett replied:

> *"Earlier this year, we provided all the financial records we had for CUAN to CPA Clay Rotherham who was retained and said he would handle this matter to completion.*
>
> *After your emails last month requested a status report, we reached out to him to check on his progress. On Tuesday, he emailed us, apologizing and saying that professional and personal matters had arisen that prevent him from completing the work. He is thus the third CPA who indicated that they would help and then did not.*
>
> *In the meantime, because no CPA prepared or filed any annual state or federal returns, CUAN lost its ability to solicit donations under Illinois law. The organization has no funds. All the work that has been done (for example disability advocacy with the schools) has been voluntary and gratis."*

Mr. Beckett also reminds us that he and Ms. Forrest have provided all of the information requested of them and further notes that their efforts to support CUAN have been gratis, that CUAN still exists as an Illinois non-profit, and that Mrs. Duvall is seeking a CPA to prepare annual tax returns and thus restore the organization's ability to solicit funds and make it viable again.

On August 28, I asked Mr. Beckett, Ms. Forrest, and Mrs. Duvall whether CUAN still requests additional time to complete the financial review.

On September 10, we received the attached letter from Mr. Beckett, indicating a further extension is not requested and that the Agency has no funds or ability to fundraise despite continuing their advocacy work.

Staff Input:

The Appeals process was implemented, but the need for additional information left the situation unresolved for a longer period than expected. The CCDDB Chair instructed staff to estimate an amount owed back, based on available information. The reports submitted on behalf of the agency last year offer some insights,

particularly related to the Community Outreach program. We can offer scenarios but no recommendations, due to:

- Financial nformation reported on behalf of the Agency is not verified by an independent CPA and is missing some details.
- The Board has not directed me to engage in a retroactive contract negotiation with the Agency or to waive certain contract requirements.
    - While the Board approved new deadlines for quarterly reports, it has not approved other exceptions to the requirements associated with these reports or waived the requirement for the independent financial review.
    - While the Board approved early termination of both contracts, it has not authorized changes to the scope of services or budget plans for either.
    - Other requirements were not waived or met: sharing Agency board minutes; reporting personnel changes within 30 days; maintaining records in audit-ready condition; attending Mental Health and Developmental Disabilities Agency Council meetings.
- Using the Appeals process, the Agency opted to communicate with the Board through an attorney although not in relation to a legal action, which would have caused some discussion to occur in closed session. All communications have been reported on or occured during public meetings, possibly impacting others not directly involved.

Possible scenarios include:

1. If no contract requirements are waived, the Board could consider all payments to be owed back per the original contracts.
2. The Board could waive all repayment.
3. If certain requirements were waived, but payments were strictly associated with programs per the Agency's submitted reports, the Board could consider all Planning/Seed program payments to be owed back due to lack of program-specific activity.
4. If certain requirements were waived, inconsistencies across submitted reports not considered, and all payments applied to the Community Outreach program, the Board could consider the difference between total payments issued and total expenses reported to be the unspent amount owed back.

Sample actions are presented below to support the four scenarios, in case any one of these options would help the CCDDB conclude the matter. The first does not involve waiving any further requirements, while the other three do. If the Board does not find that available reports provide a strong enough basis for an option, they might request more information or design another solution.

Sample Scenarios for Next Steps:

The Board would only exercise one of the following Scenarios. They may also choose not to use these and to take different actions than those outlined here.

For Scenario 1, Full Repayment.

Motion to affirm that, due to failure to meet contract requirements, the Agency should return all payments issued for the CU Autism Network Program Year 2024 "CCDDB CUAN Planning Seed Grant" and "Community Outreach Program" contracts, which total $72,168.

_____ Approved
_____ Denied

For Scenario 2, No Repayment.

Motion to waive requirements as described in the CU Autism Network Program Year 2024 "CCDDB CUAN Planning Seed Grant" and "Community Outreach Program" contracts so that the Agency is not obligated to repay any funds received on the contracts.

_____ Approved
_____ Denied

For Scenario 3, Partial Repayment.

First, acknowledge that not all contract requirements have been met.

Motion to waive requirements of the CU Autism Network Program Year 2024 "CCDDB CUAN Planning Seed Grant" and "Community Outreach Program" contracts for: demographic and zip code data reports; maintaining audit-ready records; attending Mental Health and Developmental Disabilities Agency Council meetings; submitting Agency board meeting minutes; and notification of personnel changes.

_____ Approved
_____ Denied

Second, waive the requirement for independent CPA financial review.

Motion to waive the contract requirement for an independent CPA financial review of the Agency's Program Year 2024 and to use the previously submitted self-reports to determine whether funds are owed to the CCDDB.

_____ Approved

_____ Denied

Third, waive the return of payments issued on one of the contracts.

Motion to waive the return of all payments issued for the CUAN Program Year 2024 "Community Outreach Program" contract, for which planned activities appear to have taken place and expenses were incurred.

_____ Approved
_____ Denied

Finally, require the return of payments issued on the other contract.

Motion to affirm that all payments issued for the Program Year 2024 "CCDDB CUAN Planning Seed Grant," which total $32,604, should be repaid.

_____ Approved
_____ Denied

For Scenario 4, Partial Repayment.

First, acknowledge that not all contract requirements have been met.

Motion to waive requirements of the CU Autism Network Program Year 2024 "CCDDB CUAN Planning Seed Grant" and "Community Outreach Program" contracts for: demographic and zip code data reports; maintaining audit-ready records; attending Mental Health and Developmental Disabilities Agency Council meetings; submitting agency board meeting minutes; and notification of personnel changes.

_____ Approved
_____ Denied

Second, waive the requirement for independent CPA financial review.

Motion to waive the contract requirement for an independent CPA financial review of the Agency's Program Year 2024 and to use the previously submitted reports to determine whether funds are owed to the CCDDB.

_____ Approved
_____ Denied

Third, waive the return of payments issued on one of the contracts.

Motion to waive the return of all payments issued for the CUAN Program Year 2024 "Community Outreach Program" contract, for which planned activities appear to have taken place and expenses were incurred.

_____ Approved
_____ Denied

Fourth, waive the return of a portion of those issued on the other contract.

Motion to approve the use of payments issued for the "CCDDB CUAN Planning Seed Grant" contract, for which planned activities did not occur, to support the "Community Outreach Program" contract, for which planned activities appear to have taken place and expenses were incurred.

_____ Approved
_____ Denied

Finally, affirm that the unspent portion of payments issued should be returned.

Motion to affirm that a portion of payments issued to CUAN for Program Year 2024 contracts, $13,139, was not reported as expended for either contract and should therefore be returned.

_____ Approved
_____ Denied

STEVE BECKETT LAW OFFICE, LLC
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September 10, 2026

Champaign County Developmental Disabilities Board
Champaign County Mental Health Board
Attn: Lynn Canfield
via email: lynn@ccmhb.org

Re: CU Autism Network

To Whom It May Concern:

I write on behalf of the CUAN Board to provide an update for the upcoming September 23, 2026 Board Meeting for CCDDB/CCMHB. No request for extension of time for a financial review is being made at this time.

The grant failure caused CUAN's ability to function as a non-profit agency to collapse. While some CUAN individuals are advocating for children affected by autism in school and elsewhere, the organization cannot fund raise, has no funds on hand and currently lacks the ability to restructure.

Very Truly Yours,

J. STEVEN BECKETT

JSB/kmf
pc: CU Autism Network

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

BRIEFING MEMORANDUM

DATE: September 23, 2026
TO: Champaign County Developmental Disabilities Board (CCDDB) and Champaign County Mental Health Board (CCMHB)
FROM: Lynn Canfield, Executive Director
SUBJECT: Updates on Anti-Stigma and Resource Information Activities

Purpose:

Now that our traditional annual events, the anti-stigma film and art show within Roger Ebert's Film Festival and large in-person DisAbility Resource Expos, have become impossible or impractical to continue, many of the people who participated over the years have offered ideas for the future. Some ideas were easy to act on, and others will require more investigation and discussions. This memorandum offers updates on what has been suggested, explored, and in progress.

Progress:

2026 Events

- August 28th – Kim Bowdry, Associate Director for I/DD, and I participated in the "Scott Bennett Family Resource Day" distributing Expo resource books and seeking resource information from organizations there. Chris Wilson and Shandra Summerville also attended and offered feedback. Ms. Bowdry and our social media consultant helped promote it. We might become more involved with planning the Bennett Day event if it aligns with our Expo traditions.

- September 26th – Through the Champaign County Community Coalition Race Relations Group, Ms. Bowdry helped plan and promote the "Black Mental Health and Wellness Conference".

Register using this link (https://forms.cloud.microsoft/pages/responsepage.aspx?id=h9DeulNmC0GGjWInWQw6NigTVmaqlSlPhpHnJ9aKCC9UOEpOQVBLSDlWV1FTNUZBRjRGOVo0WVdDNC4u&route=shorturl)

- October 1st - Angela Yost, Program Coordinator-Developmental Disability Services CCRPC-Community Services, will attend the 2nd Education and Empowerment Event at Middletown Prairie Elementary School (Mahomet-Seymour) and will distribute Expo resource books.

- October 8th and 9th – Shandra Summerville, Cultural and Linguistic Competence Coordinator, and I helped plan the "Beyond Borders: Global Mental Health" conference, which is fully virtual this year. Register using this link (https://publish.illinois.edu/beyondbordersconference/)

- October 10th – with the Alliance for Inclusion and Respect, we will sponsor the documentary "Joybubbles" at the Chambana Film Society's "Doctoberfest" at Savoy 16. Tickets are discounted to one dollar to maximize access. Learn more and buy tickets through the festival site (https://2026doctoberfest.chambanafilmsociety.org/) or the organization's main webpage (https://www.chambanafilmsociety.org/)

- December 2nd – Ms. Summerville will host an information booth in the School of Social Work's community outreach series, distributing the current Resource book with link to updated online directory. For the fall semester, she is working with students on a SOCW 542: Program Evaluation project to learn more about what community members would most value in future anti-stigma or resource information efforts.

Paper Resource Book

Many of our partners in this work, as well as members of the Boards, expressed a strong interest in continuing to make information available through an annually updated paper resource guide. Partners will continue to share them to the people they serve and other interested parties. We can take advantage of the many resource fairs which are held in Champaign County, making the books available to people attending those events. Board members have offered new suggestions for distribution.

Ms. Bowdry sought updates from prior Exhibitors, who will be renamed as Resources, and contacted new organizations which may choose to be listed. Jane Sprandel, CCMHB Chair, and Dianne Husby-Gordon, CCDDB Member helped with some hard-to-reach resources. With this information and consent to include organizations, printed and online directories will be updated. Sponsors are not necessary for the paper version. Our consultant is updating the guide in both formats.

Martin One Source, which has printed the books and related promotional materials for us over many years, is on track to print the 2027 guides by the end of 2026. Later, we could request magnets or postcards which feature a link and QR code linking to the updated online resource directory, but updated books may go far.

Online Tools

Thanks to a contract with a new social media and marketing consultant and materials shared with us by Allison Boot, who did this work for us for several years, we have begun updating the websites and social media associated with Alliance for Inclusion and Respect (AIR) and the DisAbility Resource Expo. Since August 4th, Ms. Bowdry has been collecting updates from 2025 "exhibitors" so that the new consultant can keep the online resource directory accurate. AIR artists and supporters have ideas for improving the AIR website, another project for her.

ADA compliance updates are being completed by ChrispMedia. In case any AIR or Expo website redesign or revision creates the need for further accessibility-related corrections, we will continue to collaborate with ChrispMedia and Falling Leaf Productions, who have worked with us for many years. Falling Leaf's Tim Offenstein is ready to do follow-up reviews for all sites.

Next Steps and Suggestions:

- Expo Steering and Advisory Committee member Joe Pittenger, Transition Specialist/STEP-PECT Program Coordinator of the Rural Champaign County Special Education Cooperative, suggested a mini-expo event, with presentations on specific topics, select exhibitors, and food for participants, at the ihotel or similar. A new venue, which

includes a theater and café spaces, is set to open in downtown Urbana this fall and can be rented for private events.

- For many Steering Committee members, spring events may be more practical than fall. The traditional Expo required CCDDB/CCMHB staff time to support, more difficult in spring. A scaled down event might be more manageable, especially if others were to coordinate. Another advantage in moving to spring events is to avoid competing with many other athletic and community-wide events, particularly on the weekends.

- Ms. Summerville is checking into the new Teen Summit event planned for our community. If there are ways to promote or support it, this could help reach a new and important audience.

- Longtime AIR supporter Dr. Eric Pierson, UIUC alum and Professor of Communication and Co-Director of Film Studies at UC San Diego, asked to be included in future events, since he visits Champaign County but could also participate remotely. We hope he will be a zoom panelist at the October film screening event.

- Through social media, we can promote similar efforts, even in other communities, as we did when EP!C, a DD service provider in Peoria, sponsored a September 6 film screening "Born That Way" at Gummfest.

- AJ Zwettler, DSC Director of Employment Services, would host annual AIR art shows at The Crow at 110, in lieu of Ebertfest. Nancy Carter, NAMI Champaign and longtime art supporter, agreed about this option.

- AIR member, Sarah Conley Odenkirk of Art Converge, is interested in developing venues for art shows, including a permanent one, provided the artists are comfortable with that. A permanent storefront would require some level of staffing we are not currently able to provide, but what if?

- Jane Sprandel, CCMHB President, explored reviving a strategy that had been successful, in which AIR artists display their work at a dedicated wall of a restaurant or bar or café. Ideally they could sell the pieces right there.

- Stephanie Howard-Gallo, Operations and Compliance Coordinator, has taken the lead in art shows and sales. She shared details of the Champaign Market, which runs through the end of Oct. from 3-6 p.m. on Tuesdays. The application fee is $15. With weekly fee of $25, if the application is accepted. The seasonal fee is $525. We would need our own tent, table, chairs, signage, etc. They also require that sales are reported to them. Most AIR artists would probably be more ready for a show like this than for some of the other options, but staffing support would be required for coordination, set up and tear down, payment, and reporting.

- To understand what AIR artists are ready to do and would value, Ms. Howard-Gallo contacted them. Four indicated willingness to try any of the suggested approaches, and others did not reply. Patti Hand of Sunflower Studios CU, would assess each physical store location and whether a commission would be expected of artists; Patti's items tend to be smaller and are also sold online. Patti again offered to help organize and promote AIR activities, to photograph other artists' inventory, to teach them about Instagram and online sales, and to advise on AIR website artist pages, e.g., add a link to artists' own online stores and use new photographs.

A Special Request:

Board and staff members, AIR and Expo partners, and interested community members can support any or all of these planned activities in important ways:

- Share the 2026 event details and registration links with your networks.

- Follow the Expo and AIR social media pages and repost items of interest, whether spreading the word about events or increasing engagement with the positive messaging which has resumed at:

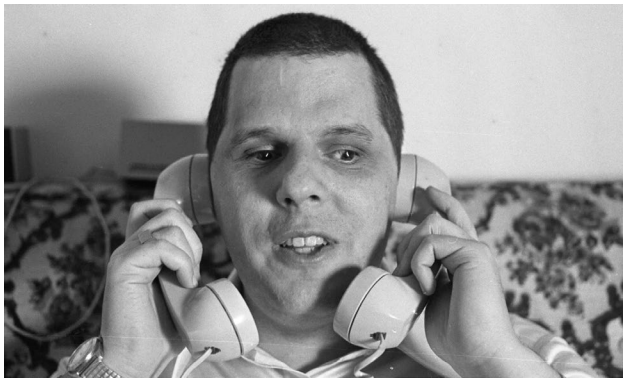
    - https://www.facebook.com/allianceforAIR

    - https://www.instagram.com/allianceforinclusionandrespect/

    - https://www.facebook.com/disabilityresourceexpo.org

    - https://www.instagram.com/disabilityresource/

- Share the link to the online directory portion of the Expo website and let us know if people are finding it useful or want further improvements after the updates have been completed (end of 2026).
    - https://www.disabilityresourceexpo.org/resource-guide/
- Attend events as possible. Bring friends and neighbors!



- *A still shot from "Joybubbles"*

Program Year 2026 4th Quarter Program Service Reports for I/DD programs funded by the Champaign County Developmental Disabilities Board and Champaign County Mental Health Board

Prepared by: Kim Bowdry, Associate Director for Intellectual and Developmental Disabilities

Utilization Category Definitions used in this document:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
Other, as defined in individual program contract

CCRPC - Community Services - Community Life Short Term Assistance Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	NTPCs	TPCs
1st Quarter	3 CSEs	1 SC	17 NTPCs	2 TPCs
2nd Quarter	2 CSEs	0 SCs	1 NTPCs	1 TPCs
3rd Quarter	1 CSE	1 SCs	2 NTPCs	2 TPCs
4th Quarter	**2 CSE**	**0 SCs**	**18 NTPCs**	**0 TPCs**
Total	8 CSEs	2 SCs	38 NTPCs	5 TPCs
Annual Target	*8 CSEs*	*25 SCs*	*88 NTPCs*	*44 TPCs*
Percent Met	100%	8%	43%	11%

Agency Comments:

RPC's Community Life Short-Term Assistance Program received 19 new applications for PY26 Quarter 4. Highlights from last quarter include:

1. The CLSTA program short-term coach wrapped up planning with a couple on planning their requested trip to Indianapolis. The couple traveled to Indianapolis this quarter, where they enjoyed attending the Indy 500. They also took part in other various events at the Speedway over the weekend, including visiting the Motor Speedway Museum. The couple also enjoyed visiting the Indianapolis Zoo where they watched the dolphin show and took part in an Elephant Care Adventure!

2. The CLSTA program paid for a CUSR trip to the Wisconsin Dells for an individual.

3. The CLSTA program paid for an individual to participate in an overnight trip to Kentucky with his church where they visited the Creation Museum and the Ark Encounter.

4. The CLSTA program assisted with paying for an individual that lives outside of the Champaign-Urbana city limits to take part in ten activities with CUSR including a camp out and a one-day trip to Raging Waves.

5. The CLSTA program assisted an individual and her support person with obtaining memberships to the YMCA. The individual also is receiving nutrition classes and personal training at their request.

6. The CLSTA program was able to purchase a MacBook of individual's choice to assist them in staying connected with community resources and events.

7. The CLSTA program was able to purchase a full-sized bed and new bedding set for an individual living in a CILA.

8. The CLSTA program worked closely with DSC staff to provide funding for Camp New Hope to 15 individuals living in their CILAs.

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
Other, as defined in individual program contract

CCRPC - Community Services – Decision Support Person Centered Planning Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	NTPCs	TPCs
1st Quarter	3 CSEs	51 SCs	5 NTPCs	95 TPCs
2nd Quarter	18 CSEs	38 SCs	16 NTPCs	5 TPCs
3rd Quarter	1 CSEs	138 SCs	16 NTPCs	2 TPCs
4th Quarter	**3 CSEs**	**68 SCs**	**4 NTPCs**	**4 TPCs**
Total	25 CSEs	295 SCs	41 NTPCs	106 TPCs
Annual Target	*25 CSEs*	*100 SCs*	*30 NTPCs*	*120 TPCs*
Percent Met	100%	295%	137%	88%

Agency Comments:

In PY26 Quarter 4, RPC's Developmental Disability Services Team attended three outreach events. These events included an evening event at Unit 4's Young Adult Program, a Juneteenth event at Douglas Park, and a Juneteenth event on Philo Road. RPC staff spoke with a total of 68 people at these events about available services through RPC. Staff continue to provide families with information on PUNS and contact information for Prairieland Service Coordination, Inc. as needed.

RPC's PCP Case Management program had three new referrals in PY26 Quarter 4. One referral was received in April and two in June. A Discovery & Personal plan has been implemented for the first referral. The case manager has also worked with the person to develop a one-page profile summary that highlights the most important information from the plan as identified by the person. The other two referrals have been contacted and are in various stages of the planning process.

RPC's Transition Consultant attended 4 IEP's in PY26 Quarter 4. We had a mix of referrals from Champaign and Urbana school districts this quarter. RPC's Dual Diagnosis program worked with 9 individuals in PY26 Quarter 4, with one additional person's services on hold due to physical health reasons.

CCRPC - Head Start-Early Head Start – Early Childhood Mental Health Svs Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	NTPCs	TPCs	Other
1st Quarter	2 CSEs	284.5 SCs	77 NTPCs	60 TPCs	1 Other
2nd Quarter	2 CSEs	383.25 SCs	39 NTPCs	30 TPCs	2 Other
3rd Quarter	6 CSEs	513 SCs	51 NTPCs	29 TPCs	3 Other
4th Quarter	**1 CSEs**	**445 SCs**	**25 NTPCs**	**17 TPCs**	**12 Other**
Total	10 CSEs	1625.75 SCs	192 NTPCs	136 TPCs	18 Other
Annual Target	*5 CSEs*	*3000 SCs*	*380 NTPCs*	*100 TPCs*	*12 Other*
Percent Met	220%	54%	51%	136%	150%

Agency Comments:

No Comments provided by the agency.

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
Other, as defined in individual program contract (Psycho-educational workshops, trainings, professional development efforts with staff and parents)

CU Early – CU Early Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	NTPCs	TPCs
1st Quarter	3 CSEs	81 SCs	2 NTPCs	20 TPCs
2nd Quarter	2 CSEs	128 SCs	0 NTPCs	1 TPCs
3rd Quarter	4 CSEs	117 SCs	2 NTPCs	1 TPCs
4th Quarter	**3 CSEs**	**107 SCs**	**1 NTPCs**	**2 TPCs**
Total	12 CSEs	433 SCs	5 NTPCs	24 TPCs
Annual Target	*4 CSEs*	*464 SCs*	*5 NTPCs*	*20 TPCs*
Percent Met	300%	93%	100%	120%

Agency Comments:

The CU Early program coordinator attended 3 Community events this quarter. They included the Early Intervention Parent Support group, Don Moyer Boys and Girls Club Parent Academy and the Urbana School District Board meeting where I presented information to the board regarding CU Early.
During this quarter, the CU Early Spanish speaking home visitor completed 1 referral to Early Intervention.
During this quarter the CU Early Spanish speaking home visitor completed 105 home visits and 6 parent child playgroups.
During this quarter the CU Early home visitor enrolled 2 new children. In addition, CU Early started an immigrant parent support group in collaboration with the New American Welcome Center. These meetings were held at Urbana Early Childhood School twice this quarter. Dinner was provided as well as childcare. Parents stated this was a great opportunity for them to connect with one another.

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients

Community Choices – Customized Employment Program Year 2026 Third Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	TPCs	Other
1st Quarter	4 CSEs	617 SCs	41 TPCs	883 Other
2nd Quarter	2 CSEs	606 SCs	3 TPCs	935 Other
3rd Quarter	1 CSEs	527 SCs	4 TPCs	799 Other
4th Quarter	**3 CSEs**	**476 SCs**	**2 TPCs**	**752 Other**
Total	10 CSEs	2226 SCs	48 TPCs	3369 Other
Annual Target	*4 CSEs*	*2000 SCs*	*50 TPCs*	*3020 Other*
Percent Met	250%	111%	100%	112%

Agency Comments:

CSEs: Transition Planning Committee Student Retreat Presentation on 4/17/26, Juneteenth Celebration and Resource Fair on 6/19, and Jettie Rhodes Day on 6/27
SSC - 476 Claims submitted via the online system
Other = Direct Hours - 752 Direct Hours submitted via the online system

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
Other = Direct Service Hours

Community Choices – Inclusive Community Support Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	NTPCs	TPCs	Other
1st Quarter	4 CSEs	458 SCs	15 NTPCs	26 TPCs	606 Other
2nd Quarter	2 CSEs	423 SCs	0 NTPCs	1 TPCs	567 Other
3rd Quarter	1 CSEs	532 SCs	24 NTPCs	4 TPCs	707 Other
4th Quarter	**3 CSEs**	**596 SCs**	**4 NTPCs**	**2 TPCs**	**744 Other**
Total	10 CSEs	2009 SCs	43 NTPCs	33 TPCs	2624 Other
Annual Target	*4 CSEs*	*2113 SCs*	*28 NTPCs*	*30 TPCs*	*2023 Other*
Percent Met	250%	95%	154%	110%	130%

Agency Comments:

CSEs: Transition Planning Committee Student Retreat Presentation on 4/17/26, Juneteenth Celebration and Resource Fair on 6/19, and Jettie Rhodes Day on 6/27
# of service contacts in Q4: 596 (160 for NTPCs and 436 were also reported for TPCs via the online system)
# of new NTPCs in Q4: 4 (2 NTPCs for Personal Dev. Classes, 2 NTPCS for Family Workshops)
# of new TPCs in Q4: 2
Other: Direct Hours in Q4: 744 (173 Direct hours for Personal Dev. Classes & Workshops for NTPCs & 571 total hours of claims also reported via the online system.

Community Choices – Self-Determination Support Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	NTPCs	Other
1st Quarter	4 CSEs	1172 SCs	220 NTPCs	782 Other
2nd Quarter	2 CSEs	1178 SCs	28 NTPCs	800 Other
3rd Quarter	1 CSEs	809 SCs	12 NTPCs	869.5 Other
4th Quarter	**3 CSEs**	**718 SCs**	**3 NTPCs**	**839 Other**
Total	10 CSEs	3877 SCs	263 NTPCs	3290.5 Other
Annual Target	*4 CSEs*	*3723 SCs*	*245 NTPCs*	*2421 Other*
Percent Met	250%	104%	107%	136%

Agency Comments:

CSEs: Transition Planning Committee Student Retreat Presentation on 4/17/26, Juneteenth Celebration and Resource Fair on 6/19, and Jettie Rhodes Day on 6/27
# of service contacts in Q4: 718 (630 + 88 SCs from Q3 that were not included previously)
# of new NTPCs in Q4: 3 (1 members with I/DD & 2 people without I/DD).
0 TPCs
Other: 839 Direct hours in Q4

Community Choices – Staff Recruitment and Retention Program Year 2026
Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	NTPCs	Other
1st Quarter	1 CSEs	18 NTPCs	21 Other
2nd Quarter	1 CSEs	1 NTPCs	27 Other
3rd Quarter	0 CSEs	0 NTPCs	25 Other
4th Quarter	**1 CSEs**	**1 NTPCs**	**38 Other**
Total	3 CSEs	20 NTPCs	111 Other
Annual Target	*3 CSEs*	*18 NTPCs*	*132 Other*
Percent Met	100%	111%	84%

Agency Comments:

CSEs: 1 Jobs posted during Q4 and included information about sign-on bonuses
NTPCs:
Q1 - 17 Staff members continuing from FY25, 1 new staff hired in FY26 Q1
Q2 - 1 new staff hired in Q2 - 1 staff left due to personal health issues
Q3 - Fully Staffed, no hires or employee departures - no new NTPCs
Q4 - 1 new staff hired in Q4 - They replaced a staff person who left to take a higher paying job in field she had previously worked
Other: 38 total Bonuses Paid

1 New Hire Bonuses
17 Retention Bonuses
15 Acknowledgement Bonuses
5 Leadership Bonuses Paid - Projects included - CLC Committee Chair/Coordination, Creation of Departmental Explanation Videos (x2), and online file management/migration 3 Acknowledgement Bonuses
4 Leadership Bonuses Paid - Projects included - CLC Committee Chair/Coordination, Partnership Agreement Management, Marketing/Outreach Videos created (employment, coop clubs, and coop structure)

Utilization Category Definitions:
CSE = Community Services Events
NTPC = Staff receiving retention or new hire bonuses
Other = Quarterly Retention and/or Sign-on Bonuses

Community Choices – Transportation Support Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	NTPCs	Other
1st Quarter	4 CSEs	1596 SCs	58 NTPCs	705 Other
2nd Quarter	2 CSEs	1742 SCs	3 NTPCs	698.5 Other
3rd Quarter	1 CSEs	1742 SCs	5 NTPCs	909 Other
4th Quarter	**4 CSEs**	**1958 SCs**	**3 NTPCs**	**1806.5 Other**
Total	11 CSEs	7611 SCs	69 NTPCs	4119 Other
Annual Target	*4 CSEs*	*6816 SCs*	*65 NTPCs*	*2640 Other*
Percent Met	275%	112%	106%	156%

Agency Comments:

CSEs: Transition Planning Committee Student Retreat Presentation on 4/17/26, Presentation at the Arc Conference on 4/30, Juneteenth Celebration and Resource Fair on 6/19, and Jettie Rhodes Day on 6/27
# of service contacts in Q4: 1958
# of new NTPCS in Q4: 3
# of TPCs: 0
Other: 1806.5 Direct hours in Q4

Gave 979 rides in Q4: Work/Volunteer - 432, Leisure/Education - 210, Family - 0, Medical/Health - 93, CC Social Opps - 142, CC appointment - 57, Errands – 40.

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
Other = Hours of rides + hours scheduling/coordinating + hours training and support

DSC – Clinical Services Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	NTPCs	TPCs
1st Quarter	0 CSEs	5 SCs	2 NTPCs	66 TPCs
2nd Quarter	1 CSEs	8 SCs	1 NTPCs	5 TPCs
3rd Quarter	0 CSEs	5 SCs	2 NTPCs	3 TPCs
4th Quarter	**1 CSEs**	**4 SCs**	**1 NTPCs**	**3 TPCs**
Total	2 CSEs	22 SCs	6 NTPCs	77 TPCs
Annual Target	*2 CSEs*	*10 SCs*	*5 NTPCs*	*65 TPCs*
Percent Met	100%	220%	118%	120%

Agency Comments:

Community Service Events: Services provided through the Clinical Services program were discussed at the TPC Transition Planning Event.

Service/Screening Contacts: Four individuals were screened for clinical services.

Individual Info: Two people received psychological evaluations and two people had occupational therapy assessments.

Update on DSP Support Specialist: Worked with 27 different DSC staff members this quarter. Tasks included:

- Provided staff trainings on new software for creating visual supports and also trained on behavioral supports
- Discussed and modeled with staff appropriate behavioral interventions
- Attended multiple team meetings
- Developed behavior support and positive support strategies
- Provided guidance to staff on documenting monthly notes and creating ongoing supports
- Collaborated with the SLP and OT on various projects
- Communicated with families and individual support teams
- Coordinated with SST for intake and initial supports for an individual
- Coordinated with Health Advocates regarding individual-specific support needs.

Occupational Therapy Update: Services provided this quarter included several wheelchair modifications/repairs, daily living skill evaluation for a resident with balance and mobility issues, progression of exercise programs, and staff training on safe transfers with a new individual in the CDS program.

Extra Reporting Time: A total of 2 hours were dedicated to billing, reporting, and discussions regarding Clinical Services.

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients

DSC – Community Employment Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	TPCs
1st Quarter	0 CSEs	2 SCs	82 TPCs
2nd Quarter	1 CSEs	3 SCs	3 TPCs
3rd Quarter	0 CSEs	8 SCs	8 TPCs
4th Quarter	**2 CSEs**	**1 SCs**	**1 TPCs**
Total	3 CSEs	14 SCs	94 TPCs
Annual Target	*4 CSEs*	*10 SCs*	*88 TPCs*
Percent Met	75%	140%	107%

Agency Comments:

Individuals in Community Employment demonstrated initiative, adaptability, and progress toward their employment goals this quarter. Through continued support and advocacy, one individual secured employment in a pharmacy setting and received on-site coaching in this specialized environment. Two individuals whose school-based employment paused during the summer proactively secured alternative seasonal positions, allowing them to maintain steady income during the summer.

Individuals also benefited from strengthened community partnerships and expanded learning opportunities. Participants built skills through career exploration and entrepreneurship classes, with career-focused instruction supporting resume development, interview preparation, and exposure to workplace environments. Entrepreneurship participants prepared for an upcoming art fair by creating and marketing custom products, gaining hands-on experience in production, sales, and self-employment skills.

DSC – Community First Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	NTPCs	TPCs
1st Quarter	0 CSEs	4 SCs	105 NTPCs	50 TPCs
2nd Quarter	1 CSEs	4 SCs	10 NTPCs	4 TPCs
3rd Quarter	0 CSEs	2 SCs	2 NTPCs	1 TPCs
4th Quarter	**1 CSEs**	**4 SCs**	**3 NTPCs**	**4 TPCs**
Total	2 CSEs	14 SCs	120 NTPCs	59 TPCs
Annual Target	*4 CSEs*	*10 SCs*	*45 NTPCs*	*45 TPCs*
Percent Met	50%	140%	267%	131%

Agency Comments:

This quarter, individuals participated in a wide range of enriching community activities that supported exploration, connection, and engagement. Highlights included Unity in the Community and the Juneteenth Parade, as well as visits to the Abraham Lincoln Museum, Skelton Park, Oakwood Public Library, the Museum of the Grand Prairie, and Big Things Small Town in Casey, Illinois. Participants also enjoyed exhibitions at the Giertz Gallery at Parkland College, Krannert Art Museum, and Spurlock Museum, while continuing regular visits to the Urbana Free Library, Douglass Branch Library, Urbana Health and Wellness, YMCA, Leonhard Recreation Center, Martens Center, and Old Orchard Bowling and Mini Golf.

A highlight of the quarter was a hands-on visit to the Carroll Fire Department. Participants toured the facility, learned about emergency response services, and practiced using some of the equipment firefighters rely on to help keep the community safe. This experience helped participants better understand the role of first responders while providing an engaging, interactive learning opportunity in a community setting.

Participants also attended the University of Illinois Ag Drone Show, where individuals observed a variety of drones in action and learned about their capabilities and real-world applications. Comic Con was another tremendous success, with 12 individuals traveling to Indianapolis for a full-day adventure centered on their shared interests in anime and popular culture. Participants enjoyed meeting costumed characters, exploring interactive exhibits, and connecting with fellow fans, creating lasting memories through a shared passion.

Volunteerism remained an important part of the quarter as participants gave back to the community through both one-time and ongoing service opportunities. Individuals volunteered for a day with the H.O.Y.C.E. Center in Rantoul and continued regular service with EIFB, the IDEA Store, Mahomet Public Library, PACA, Salt and Light, and Solidarity Gardens.

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients

DSC – Community Living Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	TPCs
1st Quarter	0 CSEs	2 SCs	72 TPCs
2nd Quarter	1 CSEs	1 SCs	0 TPCs
3rd Quarter	0 CSEs	3 SCs	0 TPCs
4th Quarter	**2 CSEs**	**2 SCs**	**2 TPCs**
Total	3 CSEs	8 SCs	74 TPCs
Annual Target	*2 CSEs*	*6 SCs*	*78 TPCs*
Percent Met	150%	133%	95%

Agency Comments:

During the fourth quarter, services remained person-centered and occurred both in the community and in individuals' apartments. Staff continued to provide education and hands-on training in the use of technology to support independent living, as well as assist with budgeting, meal preparation, medication management, and scheduling/attending appointments.

The program experienced staffing changes during this quarter. Despite these changes, individuals continued to receive scheduled services without significant interruption. Two new individuals were enrolled in the Community Living Program. Staff focused on completing assessments, developing individualized ongoing supports, and assisting the new participants with becoming familiar with available services while continuing to provide ongoing supports to existing individuals.

Participants collaborated with CLP staff to plan and attend a variety of events that encourage social engagement and community participation. Activities included attending the indoor Flea Market at Lincoln Square Mall and listening to Jazz in the Park. A planned outdoor community concert was canceled in June due to stormy weather; however, the group adjusted on the fly and individuals decided to go to Monical's Pizza, allowing them time to still socialize with each other and enjoy a leisurely dinner.

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
Other, as defined in individual program contract

DSC – Connections Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	NTPCs	TPCs
1st Quarter	0 CSEs	21 NTPCs	29 TPCs
2nd Quarter	2 CSEs	4 NTPCs	2 TPCs
3rd Quarter	1 CSEs	5 NTPCs	5 TPCs
4th Quarter	**3 CSEs**	**1 NTPCs**	**2 TPCs**
Total	6 CSEs	31 NTPCs	38 TPCs
Annual Target	*5 CSEs*	*12 NTPCs*	*25 TPCs*
Percent Met	120%	258%	152%

Agency Comments:

During the fourth quarter, Connections created several opportunities for individuals and community artists to participate in local art events, including the Boneyard Arts Festival. This year's exhibition featured artwork from program participants and local community artists, highlighting a wide range of artistic mediums and creative expression. Community response was strong and resulted in new partnerships and meaningful connections. Crow artists also showcased their work at the final Ebertfest Art Show. Participants transformed their ideas into unique works of art and shared their creativity with the public.

The Crow continued its community outreach through participation in Tolono Fun Days. This annual event provided an opportunity to highlight the variety of products and creations available at the Crow and share information about DSC programs and services with the public. Staff and artists engaged with community members, connected with local organizations, and increased awareness of the program. The event also highlighted inclusion, community connection, and the talents and creativity of participating artists.

DSC – Employment First Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs
1st Quarter	3 CSEs
2nd Quarter	6 CSEs
3rd Quarter	9 CSEs
4th Quarter	**4 CSEs**
Total	22 CSEs
Annual Target	*25 CSEs*
Percent Met	88%

Agency Comments:

LEAP/FLS Trainings

- Urbana Park District Aquatics Team, 61801: Completed Frontline Staff training in person on 5/15/2026. There were 13 managers in attendance.
- Urbana Park District Camp Staff, 61801: Completed Frontline Staff training in person on 5/20/2026. There were 34 summer camp supervisors in attendance.
- Kyle's Corner, 61874: The owner of the restaurant completed the LEAP training in person on 6/2/2026.

- Hyatt Place CU, 61820: The Assistant General Manager completed the LEAP training virtually on 6/30/2026.

Employed by LEAP Trained Business:
One person secured employment by a LEAP trained business. Parkland College hired 1 part-time worker in janitorial services.

Program Development:

- The LEAP and FLS trainings were presented to a group of self-advocates from DSC and Community Choices to solicit input regarding the presentation.
- Attended the following networking events: Champaign County Chamber of Commerce- Women Elevating Women Resource Group; Champaign County Chamber of Commerce- Chamber First Friday Coffee; Master Networks Meeting; Ribbon Cutting Ceremony for a Champaign Carwash; Executive Club of Champaign County Luncheon.
- 76 businesses were approached about the LEAP/Frontline Staff training and the DDIE directory.
- A quarterly "News Flash" email was sent out to businesses that have been LEAP and FLS trained. It included a Disability Inclusion Readiness Self-Assessment, guidelines on interviewing, and an opportunity to sign up for Frontline Staff training. This quarterly email directs recipients back to the Champaign County Directory Disability-Inclusive Employers (DDIE) website. DDIE Website Updates (https://leapdirectory-cu.org/resources)
- In the 4/1/2026 - 6/30/2026 timeframe, according to Google Analytics, there were 35 page views and 27 new users.

Utilization Category Definitions:
CSE = Community Services Events = the number of LEAP and front-line staff trainings conducted.

DSC – Family Development Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	TPCs
1st Quarter	5 CSEs	51 SCs	954 TPCs
2nd Quarter	4 CSEs	49 SCs	65 TPCs
3rd Quarter	2 CSEs	53 SCs	66 TPCs
4th Quarter	**1 CSEs**	**47 SCs**	**89 TPCs**
Total	12CSEs	200 SCs	1174 TPCs
Annual Target	*15 CSEs*	*200 SCs*	*655 TPCs*
Percent Met	80%	100%	179%

Agency Comments:

DSC continued its collaboration with TAP to provide seasonal play groups, while also offering Developmental Therapy play groups two days per week to support children and families through consistent, developmentally focused opportunities.

DSC also partnered with Champaign County HVC, Birth to Five, and CCRS to offer developmental screenings at Soccer Planet play group and connect families with additional community resources.

Six staff members attended the annual Connecting the Dots conference on April 29, 2026, participating in workshop sessions focused on practical tools, hands-on learning, and strategies to better support diverse families.

On June 10, 2026, a DSC staff member volunteered at the United Way diaper drive hosted by WCIA 3, supporting community efforts to meet basic needs for local families.

Three families chose not to share personal or identifying information with the CCDDB/MHB; therefore, they were not included in the screening or treatment plan client counts.

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
Other, as defined in individual program contract

DSC – Individual and Family Support Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	NTPCs	TPCs
1st Quarter	0 CSEs	4 SCs	26 NTPCs	38 TPCs
2nd Quarter	1 CSEs	1 SCs	4 NTPCs	1 TPCs
3rd Quarter	2 CSEs	1 SCs	2 NTPCs	1 TPCs
4th Quarter	**2 CSEs**	**0 SCs**	**2 NTPCs**	**1 TPCs**
Total	5 CSEs	6 SCs	34 NTPCs	40 TPCs
Annual Target	*3 CSEs*	*8 SCs*	*20 NTPCs*	*40 TPCs*
Percent Met	167%	75%	170%	100%

Agency Comments:

Current Respite participants continue to use services for necessary breaks from caregiving responsibilities. Many families used their allotted hours for personal support workers, while others accessed local camps and community activities funded through specific assistance resources.

Twenty-three advocates participated in a variety of activities and events this quarter. Activities included advocacy group meetings where participants explored disability rights history, the Olmstead Act, community accessibility, and strategies for contacting local and state legislators. In May, five advocates traveled to Springfield to participate in “They Deserve More Action Day” where they heard from representatives about DSP wages and met in a small group with Senator Chapin Rose.

Advocates also participated in educational sessions focused on building and maintaining healthy relationships. Lessons addressed relationship rights and responsibilities and included discussion of family, friendship, romantic, online, and in-person relationships.

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
Other, as defined in individual program contract

DSC – Service Coordination Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	TPCs
1st Quarter	0 CSEs	8 SCs	271 TPCs
2nd Quarter	1 CSEs	4 SCs	4 TPCs
3rd Quarter	3 CSEs	3 SCs	3 TPCs
4th Quarter	**2 CSEs**	**6 SCs**	**6 TPCs**
Total	6 CSEs	21 SCs	284 TPCs
Annual Target	*4 CSEs*	*20 SCs*	*275 TPCs*
Percent Met	150%	105%	103%

Agency Comments:

Case Management continued to use a team approach to ensure people were safe, had food, medical support, and any additional resources needed. Some of the specific services offered this past quarter included:

- A strong partnership between CM and CCRPC continued to support families through the PUNS enrollment process by assisting with required documentation and family letters to ensure timely enrollment.
- Individuals and families selected from PUNS received support with connections to their ISC and guidance through the steps necessary to obtain waiver services.

- Several graduating students and their families received assistance with the transition to adult services, including education and support to help them envision and plan for meaningful adult day activities and services.
- Ongoing support was provided to an individual experiencing significant family-related challenges, including coordination, problem-solving, and help navigating concerns that could have resulted in legal ramifications.
- Diligent advocacy, coordination, and follow-up helped an individual work toward restoring Social Security benefits.
- Staff remained actively engaged in understanding evolving SNAP benefit eligibility and calculation changes, helping individuals and families navigate concerns related to benefits being discontinued or varying from month to month.
- Close collaboration with individuals and families helped address Medicaid eligibility concerns through advocacy, guidance, and connections to appropriate resources to help restore Medicaid coverage when benefits were discontinued.

Community Service Events included discussion about Services Coordination with different community members at The Roadmap to Success TPC transition event and at the Young Adult Program open house.

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
Other, as defined in individual program contract

DSC – Workforce Retention and Development Program Year 2026 Fourth Quarter Program Activity Report

Quarterly Data:

Utilization Categories	CSE	Other
1st Quarter	1 CSE	0 Other
2nd Quarter	0 CSEs	142 Other
3rd Quarter	0 CSEs	0 Other
4th Quarter	**0 CSEs**	**132 Other**
Total	1 CSE	274 Other
Annual Target	*2 CSEs*	*160 Other*
Percent Met	50%	171%

Agency Comments:

132 employees received the workforce retention bonus during this quarter.
Two employees attended NADSP Frontline Supervisor training.

Utilization Category Definitions:
Other = Number of staff receiving bonuses

PACE – Consumer Control in Personal Support Fourth Quarter Program Year 2026 Program Activity Report

Quarterly Data:

Utilization Categories	CSEs	SCs	NTPCs	Other
1st Quarter	9 CSEs	61 SCs	24 NTPCs	2 Other
2nd Quarter	7 CSEs	38 SCs	5 NTPCs	1 Other
3rd Quarter	11 CSEs	24 SCs	7 NTPCs	3 Other
4th Quarter	**12 CSEs**	**85 SCs**	**5 NTPCs**	**3 Other**
Total	39 CSEs	208 SCs	41 NTPCs	9 Other
Annual Target	*20 CSEs*	*250SCs*	*30 NTPCs*	*9 Other*
Percent Met	195%	83%	137%	100%

Agency Comments:

PACE continues to offer in-person orientations and one-on-one appointments at the PACE office during this quarter to recruit PSWs. PACE continues to engage in outreach activities, job postings, and community events to recruit PSWs.

PACE staff participated in the following community events this quarter:

- Monthly Evaluation Technical Assistance with University of Illinois Family Resiliency Center
- Monthly Evaluation Working Group meeting with Family Resiliency Center
- PACE's Deaf Awareness event at LSM

- Two days of ARC Conference
- CCMHDDAC Meeting - JUNE at CH. Library + FRC workshop
- MS Support Group presentation
- Catholic Charities Presentation

PACE also continues to reach out and attempt to collaborate with the University of Illinois School of Social Work, Family Resilience Center, Envision Unlimited, and parent groups at Community Choices, IRC, NAMI, and DSC.

There were no TPCs this quarter, as the individuals being served through this funding are those seeking employment as PSWs, and there is no vocational program available for consumers with I/DD. However, ongoing collaboration is taking place with DRS, IRC, Community Choices, DSC, and the DRS vocational program. These organizations are referring individuals with I/DD and their families to PACE to hire an oriented PSW from the registry through this funding.

PACE continues to offer quarterly PSW advisories to provide additional opportunities for consumers and PSWs to connect and discuss PSW program topics. The PSW advisory was held on Tuesday June 30, 2026.

PACE has sent 4 sets of referrals this quarter. PACE had 3 Successful PSW matches this quarter.

Utilization Category Definitions:
CSE = Community Services Events
SC = Service Contact or Screening Contacts
NTPC = Non-Treatment Plan Clients
Other = Successful PSW Matches

Program Year 2026 Service Data for I/DD programs funded by the Champaign County Developmental Disabilities Board and Champaign County Mental Health Board

Prepared by: Kim Bowdry, Associate Director for Intellectual and Developmental Disabilities

CCRPC – Community Services – Community Life Short Term Assistance - $232,033 – IDDSI Program Year 2026 Claims Data

49 people were served for a total of 383 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	31	32
Closed/Discharged Client(s)	Not Applicable	12	13
On Behalf of Person Served (NTPC)	Off Site	9	20
On Behalf of Person Served (NTPC)	On Site	31	161
With Person Served (NTPC)	Off Site	9	10
With Person Served (NTPC)	On Site	6	10
On Behalf of Person Served (TPC)	Off Site	9	61
On Behalf of Person Served (TPC)	On Site	14	42
With Person Served (TPC)	Off Site	12	31
With Person Served (TPC)	On Site	2	3

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

CCRPC – Community Services – Decision Support PCP - $425,042 Program Year 2026 Claims Data

110 people were served for a total of 4,868 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	22	24
Closed/Discharged Client(s)	Not Applicable	8	9
On Behalf of Person Served (TPC)	Off Site	108	567
On Behalf of Person Served (TPC)	On Site	104	2,573
With Person Served (TPC)	Off Site	110	582
With Person Served (TPC)	On Site	97	1,113

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

CCRPC – Head Start/Early Head Start – Early Childhood Mental Health Svs - $216,800 Program Year 2026 Claims Data

85 people were served for a total of 682 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	47	49
With Person Served (TPC)	Off Site	4	4
With Person Served (TPC)	On Site	81	629

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

Community Choices – Customized Employment - $256,000 Program Year 2026 Claims Data

52 people were served for a total of 3,396 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	11	11
Closed/Discharged Client(s)	Not Applicable	14	15
On Behalf of Person Served (TPC)	Off Site	34	1,283
On Behalf of Person Served (TPC)	On Site	39	801
With Person Served (TPC)	Off Site	43	808
With Person Served (TPC)	On Site	41	478

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

Community Choices – Inclusive Community Support - $233,000 Program Year 2026 Claims Data

32 people were served for a total of 2,193 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	7	7
Closed/Discharged Client(s)	Not Applicable	5	5
On Behalf of Person Served (TPC)	Off Site	23	270
On Behalf of Person Served (TPC)	On Site	31	480
With Person Served (TPC)	Off Site	27	1,187
With Person Served (TPC)	On Site	20	242

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

DSC – Clinical Services – $263,000 – Program Year 2026 Claims Data

73 people were served for a total of 1,583 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	19	19
Closed/Discharged Client(s)	Not Applicable	19	19
Coordination of Mental Health Services	On Site	39	494
On Behalf of Person Served (TPC)	On Site	60	335
With Person Served (TPC)	Off Site	11	178
With Person Served (TPC)	On Site	56	538

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

DSC – Community Employment – $523,000 – Program Year 2026 Claims Data

81 people were served for a total of 9,919 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	13	13
Closed/Discharged Client(s)	Not Applicable	9	9
On Behalf of Person Served (TPC)	Off Site	41	180
On Behalf of Person Served (TPC)	On Site	68	3,594
With Person Served (TPC)	Off Site	76	5,131
With Person Served (TPC)	On Site	60	992

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

DSC – Community First – $990,000 – Program Year 2026 Claims Data

60 people were served for a total of 38,540 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	11	11
Closed/Discharged Client(s)	Not Applicable	10	10
On Behalf of Person Served (TPC)	Off Site	32	590
On Behalf of Person Served (TPC)	On Site	59	5,952
With Person Served (TPC)	Off Site	56	18,820
With Person Served (TPC)	On Site	58	13,159

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

DSC – Community Living – $628,000 – Program Year 2026 Claims Data

74 people were served for a total of 15,034 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	4	4
Closed/Discharged Client(s)	Not Applicable	5	5
On Behalf of Person Served (TPC)	Off Site	72	3,890
On Behalf of Person Served (TPC)	On Site	74	5,641
With Person Served (TPC)	Off Site	49	3,581
With Person Served (TPC)	On Site	45	1,913

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

DSC – Connections – $122,000 – Program Year 2026 Claims Data

35 people were served for a total of 2,053 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	9	9
Closed/Discharged Client(s)	Not Applicable	3	3
With Person Served (TPC)	Off Site	34	2,041

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

DSC – Family Development – CCMHB – $702,000 – Program Year 2026 Claims Data

519 people were served for a total of 9,057 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	293	293
Closed/Discharged Client(s)	Not Applicable	95	97
On Behalf of Person Served (TPC)	On Site	258	8,572
With Person Served (TPC)	Off Site	89	95

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

DSC – Individual and Family Support – $320,000 – Program Year 2026 Claims Data

77 people were served for a total of 11,898 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	6	6
Closed/Discharged Client(s)	Not Applicable	6	6
Coordination of IDS (Staff Hour)	On Site	46	489
On Behalf of Person Served (NTPC)	On Site	6	7
With Person Served (NTPC)	Off Site	30	305
With Person Served (NTPC)	On Site	28	268
On Behalf of Person Served (TPC)	Off Site	6	13
On Behalf of Person Served (TPC)	On Site	28	270
With Person Served (TPC)	Off Site	34	10,495
With Person Served (TPC)	On Site	9	39

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

DSC – Service Coordination – $500,000 – Program Year 2026 Claims Data

259 people were served for a total of 9,484 hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
New Client(s)	Not Applicable	21	61
Closed/Discharged Client(s)	Not Applicable	23	23
On Behalf of Person Served (TPC)	Off Site	15	26
On Behalf of Person Served (TPC)	On Site	243	8,368
With Person Served (TPC)	Off Site	37	235
With Person Served (TPC)	On Site	99	771

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home

PACE – Consumer Control in Personal Support – $45,972 – Program Year 2026 Claims Data

24 PSWs registered, 9 Successful PSW matches, and 942 total program hours

Service Type	Place of Service	Participants per Service Activity	Hours of Service
PSW Registry Completion	On Site	24	24
Program Promotion	Off Site	Not Applicable (Staff Activities)	123
Reporting/Planning Time	On Site	Not Applicable (Staff Activities)	786
Successful Match	On Site	9	10

Definitions:

NTPC = Non-Treatment Plan Clients
TPC = Treatment Plan Clients
On Site = Agency Office/Facility
Off Site = Community location or client's home