



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

Champaign County Mental Health Board (CCMHB)

WEDNESDAY, September 23, 2020 at 5:45 p.m.

**This Meeting will be Conducted Remotely at
<https://us02web.zoom.us/j/82490519967>**

1. Call to Order
2. Roll Call
3. Zoom Instructions (**page 3**)
4. Citizen Input/Public Participation
The CCMHB reserves the authority to limit individual public participation to 5 minutes and limit total time to 20 minutes.
5. Approval of Agenda*
6. President's Comments
7. Executive Director's Comments
8. New Business
 - A. UIUC Building Program Evaluation Capacity Report (**pages 4-136**)
Drs. Nicole Allen and Mark Aber will present a report on activities undertaken and engagement with CCMHB funded programs to develop evaluation capacity and performance outcome measurement during PY20. The full report is included in the packet.
 - B. CILA Update and Title Transfer* (**pages 137-138**)
Decision Memorandum on transfer of ownership of CILA properties from CCMHB to CCDDDB and other possible next steps is included in the packet. Action is requested.
 - C. CCMHB Three-Year Plan with Draft FY21 Objectives (**pages 39-148**) *Included in the packet for information and discussion is*

the Three-Year Plan with draft FY21 Objectives. A Briefing Memorandum prefaces the draft Plan.

9. Agency Information

The CCMHB reserves the authority to limit individual public participation to 5 minutes and limit total time to 20 minutes.

10. Old Business

A. Revised CCMHB FY2021 Draft Budgets* (**pages 149-157**)

Decision Memorandum on updated FY2021 CCMHB and CILA draft budgets is included in the packet; action is requested. CCDDDB and background documents are for information only.

B. disAbility Resource Expo Update (**page 158**)

Briefing Memorandum providing an update on the disAbility Resource Expo is included in the packet for information only.

C. Schedules & Allocation Process Timeline (**pages 159-162**)

Updated copies of CCMHB and CCDDDB meeting schedules and CCMHB allocation timeline are included in the packet.

11. CCDDDB Information

12. Approval of CCMHB Minutes* (**pages 163-166**)

Minutes from the July 15, 2020 meeting are included in the packet. Action is requested.

13. Staff Reports

*Written reports from Kim Bowdry (**pages 167-171**), Lynn Canfield (**pages 172-177**), Mark Driscoll (**pages 178-192**), Stephanie Howard-Gallo (**pages 193-194**), Shandra Summerville (**pages 195-200**), and Chris Wilson (**page 201**) are included.*

14. Board to Board Reports

15. Expenditure List* (**pages 202-229**)

Copy of the Expenditure List is included in the packet. Action to accept the list and place on file is requested.

16. Board Announcements

17. Adjournment

***Board action**

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Instructions for participating in Zoom Conference Bridge for CCMHB Meeting September 23, 2020 at 5:45 p.m.

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

Go to Join Zoom Meeting

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

Join with computer audio.

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

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

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

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

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

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*A Final Report on Building Evaluation Capacity for Programs
Funded by the Champaign County Community Mental Health Board (CCMHB) Year 5*

*Markera Jones, M.S.
Chelsea Birchmier, B.A.
Nicole Allen, Ph.D.
Mark Aber, Ph.D.*

Department of Psychology University of Illinois, Urbana-Champaign

August 5, 2020

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A Final Report on Building Evaluation Capacity for Programs Funded by the Champaign County Community Mental Health Board (CCMHB) Year 5

Statement of Purpose:

The aim of this effort is to continue to build evaluation capacity for programs funded by the Champaign County Mental Health Board (CCMHB) and the Champaign County Developmental Disabilities Board (CCDDDB). In Year 5, we propose to continue to implement the recommendations and specific plans identified via Year 1 assessment of current evaluation activities and priorities and to build upon our previous efforts over the last few years. Specifically, we propose the following activities and deliverables.

- 1. Continue to create a learning organization among funded agencies and the CCMHB and the CCDDDB.**
 - a. Prepare new “targeted” agencies to share information at MHDDAC meetings once/year by June, 2020 (as schedules allow). The actual presentation will occur in the July or August following the end of the fiscal year at the MHDDAC meeting.*

In collaboration with the CCMHB and CCDDDB staff, we targeted five programs, three funded by the CCMHB and two by the CCDDDB, for more intensive evaluation capacity building partnership. Five funded programs worked closely with evaluation consultants who were doctoral students supervised by Drs. Aber and Allen. These programs engaged in targeted strategies for building evaluation capacity and received individual support from their consultant throughout the process. The processes and outcomes from these partnerships are explained in detail in Sections II through VI of this report. Each section summarizes the effort engaged with each partner agency.

These relationships were created to foster a culture of learning, first within each program and then across CCMHDDDB-funded agencies as a larger system. Consultants took an intensive approach that emphasized developing a learning organization, or one that is “skilled at creating, acquiring, and transferring knowledge, and at modifying its behavior to reflect new knowledge and insights” (pp. 79; Garvin, 1993). As one example, we hoped to position these target programs as ‘peer experts’ that could then report back and serve as resources to other CCMHB-funded programs. While the targeted programs are not at a point where they would be able to function as independent supports for other agencies building evaluation capacity, their experiences are valuable learning opportunities for their peers. During the Mental Health Agency Council (MHAC) meetings from years two, three, and four, representatives from each of the targeted programs presented to their peers about their experiences building evaluation capacity. Programs briefly shared about challenges they encountered and lessons learned, as well the

general processes they engaged in. This feedback appeared to elicit some excitement among other programs, leading a few to express their desire to participate in this evaluation effort. Much of the research on learning organizations focuses on individual actors (e.g. employees) within an organization (e.g. a specific business). In addition to engaging at the individual and organizational levels, our process also engaged programs and agencies within a larger system (CCMHDDDB). While ongoing effort will further advance these goals, the targeted partnerships begin the process of fostering a culture of i) valuing evaluation, ii) desiring evaluation to be meaningful, and iii) experimenting with evaluation.

2. Continue to support the development of theory of change logic models as a requirement for CCMHB funding

- a. *Offer 4 logic modeling workshops to support funded programs in model development in Fall 2019*
- b. *Schedule and announce logic model training dates with 30 days advance notice*
- c. *Provide follow-up support to targeted agencies who submit a model to the team for review (and to agencies who choose to develop the model using "hours" from the consultation bank)*

We offered four logic model workshops in Fall 2019, but we ultimately held two logic model workshops since everyone who was interested in attending was able to attend on those two dates. They were attended by 6 groups: the Champaign County Regional Planning Commission Community Services, Cunningham Children's Home, Developmental Services Center, East Central Illinois Refugee Mutual Assistance Center, Rosecrance Coordinated Services, and Rosecrance Criminal Justice Program, as well as a member of the CCDDDB. During the meeting all programs engaged in hands-on theory of change logic model creation with the support of an Evaluation Capacity Building team member. All programs in attendance were provided with PowerPoint slides containing their logic models following the workshop. Additionally, we continued working with several programs to further develop their logic models after the workshop.

3. Choose up to five programs for targeted evaluation support in consultation with CCMHB and CCDDDB.

- a. *Work in collaboration with up to five funded programs to develop evaluation plans and support them in the implementation of those plans (e.g., instrument development, data gathering, data reporting)*
 - i. *Three programs would be CCMHB funded*
 - ii. *Two program would be CCDDDB funded*
- b. *The goal would be to guide an evaluation process that can be sustained by the program*



We worked with five programs, three funded by the CCMHB and two by the CCDDDB to target for evaluation capacity building support in year 5. These included: the Community Choices Community Living program, the Crisis Nursery Beyond Blue program, the Developmental Services Center Community Living Program, Head Start Early Childhood Mental Health Assistance Services, and Uniting Pride Center of Champaign County. Individual meetings and customized efforts were provided to each program. Reports that elaborate on the specific activities engaged to build evaluation capacity and to create specific evaluation plans are provided in the following sections II-VI.

4. Provide quarterly follow-up with the eleven previously targeted agencies. This could include:

- a. Reviewing evaluation implementation progress.*
- b. Revising and refining logic models.*
- c. Reviewing gathered data and developing processes to analyze and present data internally and externally.*

We reached out to the eight past targeted programs (from years two and three) in January 2020 to check on evaluation processes and implementation, data use, and measures. We worked with several previous targeted partners including the Community Service Center of Northern Champaign County, DREAM House, GROW, and Rosecrance to add new measures, adapt existing measures, digitize surveys, revise data collection tools, and analyze and interpret data.

5. Continue the Evaluation Consultation Bank with agencies who have not had targeted partnerships.

- a. Offer a bank of consultation hours for use by funded programs*
- b. Funded programs request hours based on specific tasks:*
 - i. Developing an evaluation focus*
 - ii. Completing a logic model*
 - iii. Developing and sustaining evaluation activities (particularly in targeted agencies)*
 - iv. Reporting data*

We received multiple requests for consultation bank support. These included: Cunningham Children's Home, CU Neighborhood Champions/CU Trauma & Resilience Initiative, GROW, MAYC, R.A.C.E.S., and Rosecrance. Across these programs, we worked on developing logic models, identifying and refining outcomes, identifying appropriate measures, creating and refining data collection tools, analyzing data, and applying evaluation findings to program activities.



6. Continue to build a “buffet” of tools

- a. Maintain and expand a Google drive or other web-based repository for measures developed with and/or for funded programs*

The following measures were added to the bank:

- Generalized Self-Efficacy Scale
- Depression Anxiety Stress Scale (DASS)
- Edinburgh Postnatal Depression Scale (EPDS)
- Nurturing Parenting Home Safety Checklist
- Protective Factors Survey, 2nd Edition (PFS-2)

7. Meet with CCMHB and CCDDDB members as requested to provide information on, for example:

- a. The varied uses of evaluation*
- b. Logic modeling process*
- c. CCMHB and CCDDDB goals and priorities with regard to evaluation*
- d. Instantiating evaluation practices for the CCMHB and CCDDDB and the boards' funded programs*

In September 2019, we met with the Mental Health Board to present on and discuss the past year's effort and evaluation more broadly. After summarizing the FY 2019 objectives, activities engaged in with targeted partners and follow-up with past targeted partners, we presented data from a survey completed by past targeted partners. Additionally, a board member of the CCDDDB joined a logic modeling workshop this year.



Community Choices Community Living Program

Program Overview

Community Choices is a human services cooperative and service provider for adults with developmental disabilities. They have three main philosophies: people need people, we are not afraid to try, and success is a shared responsibility. The Community Choices Community Living Program aims to help people build the lives they want to build by providing assistance to people in finding somewhere to live, taking care of their homes, getting from place to place, and having people to support them. By engaging in weekly meetings, they support people in moving out, in acquiring the skills and confidence to maintain their homes, in managing the support they need to make that happen, in building connections, and in achieving their self-determined goals. From September 2019 to July 2020, one consultant from the University of Illinois worked with three primary staff members of Community Choices to build the group's capacity to evaluate and improve their program.

Identifying Goals

The first step in identifying Community Choice's goals was to create a logic model in which we documented the activities that Community Choices engaged in and how they connected to the short- and long- term outcomes they hoped to see. In creating this logic model, several key goals emerged:

1. Update measure used to assess independent living skills to more efficiently group, categorize, and prioritize tasks, to standardize procedure and measurement, and to include a measure of self-efficacy.
2. Assess progress toward people's self-defined goals in four areas: skills, connections, housing, and resources.
3. Develop a form to assess outcomes in skills, resources, connections, and housing in a manner that does not require linear progression and facilitates streamlined tracking across time. This form should also offer guidance for developing plans with members and engaging in yearly evaluation, as well as communicating plans to members and their supports.
4. Create spreadsheets and processes for collecting, storing, and analyzing data from the form.

Executing Goals

1. **Update measure used to assess independent living skills to more efficiently group, categorize, and prioritize tasks, to standardize procedure and measurement, and to include a measure of self-efficacy.**

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One key aim of the Community Choices Community Living Program is to support people in developing and sustaining independent living skills. To assess the outcome of independent living skills, Community Choices currently utilizes a measure called the Independent Living Skills Checklist (ILSC), which assesses people's level of independence (0=unable to complete, 1=requires assistance, and 2=completes independently) in tasks such as doing laundry or planning a meal. However, it is not unusual for a measure to require adaptation to meet an agencies' needs. To use this measurement tool as an indicator of people's living skills, they felt they had to narrow and group disparate tasks into broader groups and categories. This was the first change we made to the measure. For instance, we transferred using a microwave, stove, oven, and toaster into a single group, and included this as well as doing laundry/managing clothes, going grocery shopping/storing food, and other groups of tasks into the broader category of household management. We also added a "considerations" column that provides specific details of what is entailed in a group of tasks; for instance, going grocery shopping/storing food entails keeping lists, putting food away, and checking expiration dates. This helps to standardize the measure so all staff utilizing the ILSC define the steps entailed in a group of tasks in the same way. We also added a column to document whether the person needed or was connected to a resource in that task group.

Community Choices also wanted to add a measure of client's perceived self-efficacy both related to doing certain tasks and in general. To measure self-efficacy in independent living skills specifically, we adapted the efficacy measurement tool we developed in the previous year with Rattle the Stars to ask, for each task group, if the person feels they have the knowledge, skills, and confidence to complete the various tasks in that group. This specific measure of efficacy for independent living skills was important because research has suggested that scales of self-efficacy should be specific to the particular domain you are interested in studying (Bandura, 2006) A general measure of self-efficacy was also important to Community Choice since a central outcome of the program as a whole is for people to increase their sense of agency. To measure this outcome, we selected the General Self-Efficacy Scale, a 10-item scale of self-efficacy with strong reliability and validity (Schwarzer & Jerusalem, 1995).

The full Independent Living Skills Checklist will be administered yearly, with regular check-ins and skill development throughout the year. In outcome reports, only data from each individual's five priority areas, determined in early conversations as the areas people most want and need to work on, will be included.

- 2. Assess progress toward people's self-determined goals in four areas: skills, connections, housing, and resources.**

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A major aspect of Community Choice's program is a people first approach in which staff work with members to set their own self-determined goals. Goals were previously set in three areas: skills, connections, and housing. We added a fourth goal area as well: resources. We added the resource goals area because Community Choices found that resources were often a barrier to achieving goals in other areas, such as skill or housing goals. We set parameters for goals to be SMART: Specific, Measurable, Achievable, Realistic, and Time bound, in addition to being self-determined. Specific goals in skills, resources, and connections will be derived from larger priority areas in each of those three domains. Each year, progress toward the goals set in the previous year will be evaluated, and new goals will be set, or old goals that were not met that remain goals of interest for a person will be re-introduced. An example of a skills goal would be to cook three meals per week. For housing goals, staff were interested in ensuring that the goals were reasonable. For housing, it was decided that a housing plan should be available and housing should be affordable. We chose to use two measures of affordability: rent burden (defined as the percentage of income spent on housing and utilities, with more than 30% signifying rent burden and more than 50% signifying severe rent burden) (Larrimore & Schuetz, 2017) and the person's own assessment of the sustainability of their housing given their budget. For their housing goals to be time-bound, people will set dates by which they planned to move out which will be recorded in their plan. If the person does not move out by that target date, this will trigger an investigation into potential reasons why the person was not able to move out as well as a new move-out plan.

- 3. Develop a form to assess outcomes in skills, resources, connections, and housing in a manner that does not require linear progression and facilitates streamlined tracking across time. This form should also offer guidance for developing plans with members and engaging in yearly evaluation, as well as communicating plans to members and their supports.**

Community Choices previously organized outcomes chronologically by phases, starting with the planning phase, where moving out would allow the person to transition to the moving out phase, where meeting skill-based outcome goals in the moving out phase would allow the person to transition to the reaching out phase, where meeting connection-based outcome goals would allow the person to transition to the consultation phase. This linear progression, however, was not working the way they had hoped, because in actuality the phases did not occur linearly. For instance, reaching out and building connections occurred early on for many people instead of in a later phase; or people would sometime achieve living skills goals before being able to move out. Given these limitations, we decided to move to an evaluation process that assesses progress and goals in the four outcome domains of interest—skills, resources, connection, and housing—simultaneously and yearly. Everything being in one Google form facilitates the streamlined tracking of data, all of which is automatically entered into a single spreadsheet.



While the form was initially envisioned as a yearly evaluation form, it also developed into a document to guide planning and inform practice. Specifically, it provides a more standardized process for staff to engage a person in each of the domains. The form, in addition to evaluating outcomes and goals in each domain, contains sections with guidance on developing goals and plans in each domain.

Finally, the form will serve as a method of communicating and reviewing individual's plans with the individual and with the individual's supports. For example, Community Choices staff envisioned printing out the form, reviewing it with the member, and signing it. An outcome Community Choices strives for is for people's natural supports to develop increased trust in the target individual's growing agency. The form, then, can also be used to communicate the plan staff developed with the person and to communicate the progress made in the course of each year to the person's natural supports.

4. Create spreadsheets and processes for collecting, storing, and analyzing data from the form.

The form, as a Google form, automatically populates data into a spreadsheet. We will add pivot tables that will allow for the measurement of outcomes of interest in this spreadsheet.

Future Directions and Next Steps

1. Community Choices also wanted to set certain benchmarks, which the earlier phase model had aimed to provide, that would allow them to determine at what point a person would have the necessary skills, resources, connections, and housing to move into a consultation status, where no formal services or plan would be in place, and the community life coordinator would be available as needed. To achieve this, we are in the process of developing benchmarks in each of the domains that would serve as cutoffs for consultation status.
2. We are finalizing the spreadsheet that will be used to collect data from the form. Once this is complete, the form will be ready to pilot.
3. Once data from the form is analyzed, it will be used to report to funders, members, and their supports, as well as to strategize how services may be changed or improved based on the data.

References:

Bandura, A. (2006). Guide for constructing self-efficacy scales. In F. Pajares & T. Urdan (Eds.), *Self-efficacy beliefs of adolescents* (Vol. 5, pp. 307-337). Greenwich, CT: Information Age Publishing.

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- Larrimore, J., & Schuetz, J. (2017). Assessing the Severity of Rent Burden on Low-Income Families. *FEDS Notes*. <https://doi.org/10.17016/2380-7172.2111>
- Schwarzer, R., & Jerusalem, M. (1995). Generalized Self-Efficacy scale. In J. Weinman, S. Wright, & M. Johnston, *Measures in health psychology: A user's portfolio. Causal and control beliefs* (pp. 35-37). Windsor, UK: NFER-NELSON.

Appendix Items:

- Section II A: Community Choices Logic model
Section II B: Community Choices Independent Living Skills Checklist
Section II C: Community Choices General Efficacy Scale
Section II D: Community Choices Form

Crisis Nursery Beyond Blue Program

Program Overview

The Crisis Nursery Beyond Blue Program provides support with no judgment for parents at risk of perinatal or postpartum depression. They offer free services including emergency childcare or respite care, parent support and parent-child interaction groups, home visiting, crisis counseling, and an evidence-based curriculum for the prevention of postpartum depression. Through these activities, they aim to create sustained social support for parents, to build a parent-child relationship so children can be self-sufficient and stable, and to keep children and families safe. Parents with postpartum and perinatal depression (PPD) often experience a lack of support and resources, making it difficult to build a strong parent-child bond during a critical period of development and putting families at risk for high stress and unsafe environments for children. Parents experiencing postpartum and perinatal depression also face high levels of stigma, which is why providing judgment-free support, building connections among people experiencing similar struggles, and emphasizing that asking for help is a sign of strength is so critical to this intervention. From September 2019 to July 2020, one consultant from the University of Illinois worked with three primary staff members of Crisis Nursery to build the program's capacity to evaluate and improve their program.

Identifying Goals

The first step in identifying Crisis Nursery's goals was to create a logic model in which we documented the activities Crisis Nursery engaged in and how they connected to the short- and long-term outcomes they hoped to see. Using the logic model, five key goals emerged:

1. Utilize existing measures in new ways to assess outcomes including strengthened parent-child interaction, reduced PPD-related stress, and strengthened relationships and communication with natural and formal supports.
2. Assess parents' progress toward goals indicating improved awareness of children's developmental stages and milestones and children's cues and improved identification of environmental and situational risks. Create spreadsheets and processes for collecting, storing, and analyzing data from these new measurement tools.
3. Create a survey that allows for the identification of barriers to participation, particularly for rural residents in Champaign County. Use survey results to determine next steps, such as establishing partnerships with transportation supports and with new rural community agencies.
4. Assess the outcome of children's safety in respite care in situations of high risk.

5. Evaluate the implementation process and efficacy of the Mothers & Babies curriculum as perceived by the staff that teach the course and the clients who engage in it.

Executing Goals

After developing the logic model, the first step in creating a comprehensive evaluation plan was to match shorter-term outcomes with indicators that would suggest the shorter-term outcomes had been achieved. For each outcome and indicator, potential data collection methods and sources of information were discussed, as well as the advantages and disadvantages of these different methods. Once data collection tools were selected, we developed plans for collecting, storing, and analyzing the data.

- 1. Utilize existing measures in new ways to assess outcomes including strengthened parent-child interaction, reduced PPD-related stress, and strengthened relationships and communication with natural and formal supports.**

For several outcomes of interest identified via logic modeling, Crisis Nursery had existing measurement tools they were already using for programmatic purposes that they now also plan to use for evaluation and tracking outcomes across time. For the outcome of strengthened parent-child interaction, Crisis Nursery plans to adapt the PICCOLO, a 15-minute observational tool (Roggman et al., 2013). However, rather than only doing the observation at a single time as they previously did, they will use it to assess for increased warmth in interaction in observable behaviors pre-intervention and post-intervention. Similarly, the outcome of strengthened relationships and communication with natural and formal supports will be assessed using a measurement tool, the Protective Factors Survey, 2nd Edition (PFS-2), that will now be administered pre-engagement and 4-5 months later. We selected 8 items from the PFS-2 to serve as indicators of the outcome strengthened relationships and communication with natural and formal supports, such as “I have people who believe in me” and “I feel like staff here understand me” (FRIENDS National Center for Community-Based Child Abuse Prevention, 2018). Finally, scores on the Edinburgh Postnatal Depression Scale (EPDS), which is collected quarterly, will now be used as an indicator of reduced PPD-related stress (Cox, Holden, & Sagovsky, 1987). Data from all of these measures will be included in the Filemaker database to be analyzed for outcome reporting. They will also be used to guide intervention.

- 2. Assess parents’ progress toward goals indicating improved awareness of children’s developmental stages and milestones and children’s cues and improved identification of environmental and situational risks. Create**

spreadsheets and processes for collecting, storing, and analyzing data from these new measurement tools.

To assess parents' progress toward goals indicating improved awareness of children's developmental stages and milestones and children's cues, we will be adapting a measure from another Crisis Nursery program, Baby Talk, used to evaluate progress toward goals. Currently, Crisis Nursery works with parents in Beyond Blue to set goals for developmental milestones and parent-child interaction in their Family Goal Plans. The measurement tool from Baby Talk identifies the goal, the steps made toward the goal by the parent and by the family specialist staff, the target completion date for the goal, the progress (on a scale of 0 to 4) that was made by the target completion date, and the date the goal was accomplished.

Crisis Nursery was also interested in assessing improved identification of environmental and situational risks. They wanted a measurement tool that would both guide conversations with families about household safety and risks and evaluate the effectiveness of these conversations in reducing these risks and increasing safety. To do so, we created a measure that pulled items from a Home Safety Checklist developed by Nurturing Parenting (2009) and the Illinois Department of Child and Family Services Home Safety Checklist (2015), along with novel items developed by Crisis Nursery staff. This checklist will be completed every quarter with the aim of a higher percentage of "yeses" on safety items after 6 months.

To collect and analyze data from these new measurement tools, we created a spreadsheet where data will be stored as tables from which outcome reports can be made.

3. Create a survey that allows for the identification of barriers to participation, particularly for rural residents in Champaign County. Use survey results to determine next steps, such as establishing partnerships with transportation supports and with new rural community agencies.

One of the first goals Crisis Nursery was interested in working on was to increase engagement with rural families, as they had not met their goals for rural engagement in the prior year. We decided that the first step in working toward this goal would be to create a survey that would allow Crisis Nursery to identify barriers to participation. Two surveys were created: one for people who are referred to Crisis Nursery but decline to engage with services and one for people who engage in home visiting services but decline to engage with in-house services such as support groups, parent-child interaction groups, or respite care. We developed items for the survey from several sources. The first source was a focus group conducted at the ARCH National Respite and Crisis Care Networking Conference, which responded to the question, "What barriers exist for families trying to access respite care?" (Dougherty et al., 2002). We included some of the major barriers that were brought up in the focus group in our survey, such as stigma, lack of trust, and location. We also pulled items from a review of transportation surveys by Syed

et al. (2013) such as lack of reliable or safe transportation, lack of gas money, and lack of accessible public transportation. Finally, we added items developed internally such as “I have work” or “I don’t have childcare.”

Data from this survey will be collected and analyzed via the spreadsheet we created, described under goal two, where data will be stored as tables from which outcome reports can be made. The data from the survey will then be used to guide the next steps Crisis Nursery takes. If transportation is indeed a major barrier, as hypothesized, then a next activity would be to identify potential transportation supports through collaboration with existing resources.

Along with identifying and addressing barriers to participation for people who are referred or who engage in home visiting services, Crisis Nursery is also planning agency presentations and outreach events aimed at establishing partnerships with new rural community agencies with the hope of increasing referrals.

4. Assess the outcome of children’s safety in respite care in situations of high risk.

Crisis Nursery was interested in investigating how respite care helps keep children safe in situations of high risk. We decided to frame this outcome as preventative, and looked to measure the hypothetical risks that one’s child or children might have faced had respite care not been available. To assess this, we adapted items from a survey from the ARCH National Respite Network and Resource Center, the ARCH Evaluation Form CR1, for Post Crisis Respite. The 14-item survey we developed includes items such as “If respite care had not been available... I would have left my child unattended”; “...I would have missed work, class, a job interview, or another important obligation”; and “I would have my child with someone that I did not feel comfortable with as a caregiver,” rated on a scale from 1 (highly unlikely) to 7 (highly likely). This data will be added onto the existing brief ARCH Survey that Crisis Nursery currently utilizes, to be administered yearly and entered into the Filemaker database for storage and outcome reporting.

5. Evaluate the implementation process and efficacy of the Mothers & Babies curriculum as perceived by course instructors and the clients who engage in it.

The curriculum that is used during Crisis Nursery home visits, the Mothers & Babies program, is an evidence-based intervention for postpartum depression that is informed by cognitive behavioral therapy and attachment theory (for a review of research on Mothers & Babies, see *MB Intervention Effectiveness*, 2020). Given that it is an evidence-based program, Crisis Nursery wanted to assess fidelity to the program, processes involved in implementing the program and providers’ perceived self-efficacy in doing so. To do this, we created a Google form to be completed by service providers after the completion of the Mothers & Babies program. The Google form contains a survey provided by the Mothers & Babies website, the Service Provider

Post-Implementation Survey, as well as an additional question about how much material they covered from the Mothers & Babies curriculum. Crisis Nursery also wanted to look into whether clients who engaged in the Mothers & Babies programs used the skills they learned from the program, such as keeping track of their mood or engaging in pleasant activities. This 12-item survey, the Mothers and Babies Skills Utilization Survey, provided by the Mothers & Babies website, asks how often participants used the skills and tools they learned from the course, how helpful they found using them, and how much they enjoyed using them. This survey was also made into a Google Form, and we added a question to gauge participants' overall satisfaction with the course. Data from both of these surveys will be stored in Google Sheets and will be automatically generated from the survey.

Future Directions and Next Steps

1. Implement the data collection as described above.
2. Analyze data from the Barriers to Participation Survey once it is complete in order to determine next steps to reducing these barriers.

References:

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Appendix Items:

Section III A: Crisis Nursery Logic model

Section III B: Crisis Nursery Home Visitor Safety Checklist

Section III C: Crisis Nursery Barriers to Participation Survey

Section III D: Crisis Nursery Alternatives to Care Survey

Section III E: Crisis Nursery Mothers & Babies Surveys

Section III F: Crisis Nursery Service Provider Post Implementation Survey

Developmental Services Center (DSC) Community Living Program

Program Overview:

The Developmental Services Center (DSC) is an organization that offers people with disabilities opportunities to live independent and fulfilling lives in Champaign and Ford counties. DSC's Community Living Program provides support for independent living both on DSC's own residential campus and in residences in the surrounding community. The individuals they serve are adults with intellectual or developmental disabilities (IDD) living in apartments and requiring assistance. Seven Community Living Specialists (CLS) serve as case managers for about ten individuals each, for whom the CLS provide one-on-one support with independent living, medical support, financial support, and a variety of other activities. The Community Living Program also strives to get their IDD individuals involved in the community through group activities. From September 2019 to July 2020, one consultant from the University of Illinois worked with two primary staff members of DSC to build the Community Living Program's capacity to evaluate and improve their program.

Identifying Goals:

The first step in identifying DSC's goals was to create a logic model that demonstrated the connections between the program's desired long-term outcomes, short-term outcomes, and activities they engage in. This process allowed three key goals to emerge:

1. Collect useful data that speaks to the CLS's role and shows progress on goals.
2. Identify data collection/activities which can be dropped to reduce workload.
3. Create new opportunities for leisure/recreation.

Executing Goals:

- 1. Collect useful data that speaks to the CLS's role and shows progress on individual goals.**

While every program in DSC collects data, has an evaluation program, and develops goals for their individuals, the Community Living Program specifically wanted to improve their ability to use their data to show meaningful outcomes and change. CLSs are very involved with their individuals, yet their roles in the change process often get lost when data are reported and shared with others. This is largely due to the nature of the data they collected. For example, each time a CLS makes contact with a client, they completed a contact note or T-log entry, in which they

describe the activities and details about the visit or support they provided. However, the note-taking was unsystematic and allowed for CLSs to record notes in different ways. To analyze this data, one would need to do a qualitative analysis or re-interpret and aggregate narrative-style notes into a cohesive narrative, time consuming process.

Additionally, a significant number of individuals' personal goals are created when their Independent Service Coordinator (ISC), a different case manager, develops their individual service plans. This means that a CLS typically was not involved in developing independent living goals for their clients, and since some clients did not have independent living goals, there were limitations in data tracking and reporting in this area.

To address some of these challenges and many others, DSC has begun to transition to using *Therap*, a comprehensive, web-based application that provides solutions for planning, documentation, reporting, and communication for organizations that support people with IDD. We have learned that *Therap* promises easier tracking of clients' progress on goals and it will allow them to utilize a more structured T-log from which data about CLS contact with clients can more easily be aggregated. We have redesigned a draft of the updated T-log, which hopefully will be implemented into *Therap* once DSC is fully transitioned. Another benefit of *Therap* is the ability for CLS staff to develop and track individuals' goals that are specifically related to independent living concerns.

In addition, we worked together to redesign the C-U Independence Monthly Housekeeping and Safety Inspection form. As one of the intended outcomes for clients is to independently maintain a safe living environment, this improved form will allow CLSs to keep track of each client's housekeeping skills and their needs in their apartments. This form will also be uploaded into *Therap* for easy access to and recording of clients' inspections. Reports generated from this data will better be able to show clients' progress and/or challenges with independent living.

2. Identify data collection/activities which can be dropped to reduce workload.

As mentioned previously, DSC is currently in-transition to a new and improved data management system—*Therap*. With *Therap*, many of the challenges the Community Living Program staff have had with data collection and data synthesis will likely be resolved. For one, *Therap* is completely web-based and can be accessed from any computer or mobile device for easier recording of data. This reduces the inconveniences of using paper forms and filing. Data collection will likely be more manageable, and the digital forms will likely make aggregation of data (for example, T-log data) less time-consuming than it has been when the data was recorded in note form. Overall, DSC staff expect data collection and record-keeping to be more streamlined, especially because of a reduction in the need to communicate through multiple channels to share and access information.

3. Create new opportunities for leisure and recreation.

One goal that has been consistent over the years has been to provide clients with more options for social recreation in the community. Because of the unprecedented COVID-19 pandemic, it has been unsafe to enact new excursions/outings for clients this year. This has created a new focus on utilizing technology to foster connection with others. Some platforms they are utilizing as tools for connection are Zoom, FaceTime, and Google classrooms. Another focus has been on educating individuals on personal safety and protocols in preparation for resuming normal social activities.

Next Steps and Future Directions:

1. Implement the evaluation plan described above.
2. Begin data collection.
3. Use data to inform program improvement.

Appendix Items:

Section IV A: DSC Logic Model

Section IV B: DSC C-U Housekeeping and Safety Inspection Form

Head Start Early Childhood Mental Health Assistance Services

Program Overview:

Early Childhood Mental Health Services at Champaign County Head Start provides social-emotional support and learning for teachers, students, and parents. Social Skills and Prevention Coaches (SSPCs) support teachers by using practice-based coaching to strengthen teachers' capacity to aid in their students' social-emotional development. They also provide one-on-one and group interventions in order to address individual social-emotional challenges and to foster emotional intelligence and resilience in all students. Using a trauma-informed lens in both staff training and teaching, the program aims to increase Kindergarten socioemotional readiness and promote resiliency in students' future educational experiences, their families and their relationships. From September 2019 to July 2020, one consultant worked with two primary staff members to build Early Childhood Mental Health Assistance Services' capacity to evaluate and improve their program.

Identifying Goals:

The first step in identifying Head Start's goals was to create a logic model that demonstrated the connections between the program's desired long-term outcomes, short-term outcomes, and activities they engage in. This process allowed three key goals to emerge:

1. Identify clear objectives and goals of the program.
2. Collect data that demonstrates what the program achieves.
3. Focus on how to engage families and assess engagement.

Executing Goals:

- 1. Identify clear objectives and goals of the program.**

From the beginning of our partnership, Head Start wanted help clarifying and articulating the objectives and goals of Early Childhood Mental Health Assistance Services in order to better evaluate the program. The process of developing the program's logic model allowed for a shift in how they conceptualized what they do and the "why" behind it. As demonstrated in the final logic model, it became clear that progress toward the goal of supporting children's social-emotional development is driven by adults' capacity to support children and child-adult

relationships. This conceptualization of the program is in line with the program's coaching and teaching strategies.

2. Collect data that demonstrates what the program achieves.

One of the goals of Head Start's Early Childhood Mental Health Assistance Services is to increase adults' capacity to support children's social-emotional development. Increased capacity would be demonstrated by knowledge of trauma and the stress-response system, increased self-efficacy, improved physical and emotional health, and increased mindful skills. We collaborated to create a Mindful Teaching Capacity Assessment that measures these outcomes, which will be administered to teachers bi-annually. This assessment was developed using empirically validated measures. To measure increased knowledge of trauma and the stress-response system, we have created a brief pre- and post-test on content learned during the New Teacher Orientation trainings.

3. Focus on how to engage families and assess engagement.

Head Start also wanted to find ways to engage parents and families in their efforts with the children, and to measure family engagement. Head Start administers an annual Family Interest Survey that asks caregivers about the child's social-emotional wellbeing, educational skills, health, and family support provided by the program. We revised this survey to allow for a wider range in possible responses and to ask more targeted questions about family engagement in learning.

Additionally, the COVID-19 pandemic caused a shift in the program's engagement with families, as children were now learning from their home environments. Utilizing interventions over video chat and over platforms such as Facebook has allowed for more teacher-family collaboration and has sparked new ideas for how to increase/maintain family engagement in the future.

Next Steps and Future Directions:

1. Implement the evaluation plan described above.
2. Begin data collection.
3. Use data to inform program improvement.

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Appendix Items:

Section V A: Head Start Logic Model

Section V B: Head Start Mindful Teaching Capacity Assessment

Section V C: Head Start Annual Family Interest Survey

Uniting Pride Center of Champaign County

Program Overview:

The Uniting Pride Center is an organization whose mission is to create a Champaign County where all who identify as gender and/or sexual minorities can live full, healthy, and vibrant lives. The Youth and Families Division of Uniting Pride is specifically focused on empowering LGBTQ+ youth, their families, and adults who work with youth in professional settings to build community with and better support LGBTQ+ youth. Uniting Pride hosts support groups for youth and parents, community social events, workshops for professional settings such as churches and schools, and connect others to LGBTQ+ resources.

Identifying Goals:

The first step in identifying Uniting Pride's goals was to create a logic model that demonstrated the connections between the program's desired long-term outcomes, short-term outcomes, and activities they engage in. This process allowed two key goals to emerge:

1. Reduce the burden of data collection on youth.
2. Increase capability to track and measure program effectiveness over time.

Executing Goals:

1. **Reduce the burden of data collection on youth.**

Before working with the Evaluation Capacity Building team, Uniting Pride gave quarterly mental health surveys to youth. They used the Depression Anxiety Stress Scale (DASS), a self-report instrument designed to measure the three related negative emotional states of depression, anxiety and stress. After completing the logic model, it became clear that while increased mental health and wellbeing is a longer-term outcome they hope their youth will achieve, *youth empowerment* was the outcome they wanted to directly impact and measure.

We collaborated to develop a bi-annual Talk It Up Youth Group survey which contains a battery of evidence-based measures of sense of belonging, self-worth, self-efficacy, and social support, which together we conceptualized as youth empowerment measures. The survey was created

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using Google Forms, and takes about 15 minutes to complete. The survey also provides an opportunity for youth to provide feedback about the program itself.

2. Increase capability to track and measure program effectiveness over time.

With the new youth group survey, Uniting Pride will be able to track individuals' responses using the built-in features of Google Forms and Google Sheets. They will also be able to aggregate this data in order to report on the impact of their youth group on youth empowerment over time.

Another of Uniting Pride's short-term outcomes is to increase adults' knowledge and practical skills in supporting LGBTQ+ youth. Uniting Pride wanted to be able to show how effective their professional workshops were in achieving this outcome for adults. We collaborated to create pre- and post- assessments for workshop participants to demonstrate their knowledge and skills on the subject matter before and after engaging in the workshop. This will allow Uniting Pride to measure the impact of their educational workshops, as well as uncover gaps in understanding or in teaching that can help them improve this aspect of their programming.

Next Steps and Future Directions:

1. Implement the evaluation plan described above.
2. Begin data collection.
3. Use data to inform program improvement.

Appendix Items:

Section VI A: Uniting Pride Center Logic Model

Section VI B: Uniting Pride Center Youth Survey

Section VI C: Uniting Pride Center Education Workshop Pre/Post Tests

Appendices

Section II Appendix A: Community Choices Logic model

Section II Appendix B: Community Choices Independent Living Skills Checklist

Section II Appendix C: Community Choices Form

Section III Appendix A: Crisis Nursery Logic model

Section III Appendix B: Crisis Nursery Safety Checklist

Section III Appendix C: Crisis Nursery Barriers to Participation Survey

Section III Appendix D: Crisis Nursery Alternatives to Care Survey

Section III Appendix E: Crisis Nursery Mothers & Babies Surveys

Section III Appendix F: Crisis Nursery Service Provider Post Implementation Survey

Section IV Appendix A: DSC Logic Model

Section IV Appendix B: DSC Housekeeping and Safety Inspection Form

Section V Appendix A: Head Start Logic Model

Section V Appendix B: Head Start Mindful Teaching Capacity Assessment Section V

Appendix C: Head Start Family Interest Survey

Section VI Appendix A: Uniting Pride Center Logic Model

Section VI Appendix B: Uniting Pride Center Youth Survey

Section VI Appendix C: Uniting Pride Center Education Workshop Pre/Post Tests

Activities

Shorter-term Outcomes

Longer-term Outcomes

Weekly face to face meetings at person's home or in the community:

Support with housing
 • Working with people to develop move-out plan

Support with resource access, such as benefits and transportation.

Support with skills
 • Identifying the skills people need and want to build

Support with connections
 • Circles of Support to identify current supports and areas for growth

Communicating with families and natural supports

People have a housing plan that is realistic and satisfactory

People set goals for identified independent living skills and resources

People set goals for connections

People move out

People meet resource goals

People meet goals for identified skills

People meet connection goals

People increase their sense of agency

People's natural supports increase trust in individual's growing agency

People are satisfied with their housing and have the skills, resources, and connections to sustain it.

People maintain housing over a sustained period

People have the skills to self-direct their ongoing supports and problem solve

Natural supports maximized to the greatest extent possible

People have rich and fulfilling lives (self-defined)

NAME: _____

DATE: _____

Independent Living Skills Checklist

Please fill out the Skill Level column based on the type of support the individual requires to complete each task:

2 = *Completes independently*: task can be completed from beginning to end with little to no assistance.

1 = *Requires assistance*: completes the task with verbal prompting (V) and/or physical guidance (P).

0 = *Unable to complete*: cannot complete this task with or without support.

NA = *Task not applicable*: A person is connected to a resource that fulfills their need making it unnecessary to complete the task independently (e.g., a person is unable to prepare a meal but lives in a supportive living facility that prepares all of their meals).

For the Knowledge, Skills, and Confidence columns, read the items as statements to the person and ask them to answer yes or no. For example, "Please answer yes or no to the following statements: 'I have the knowledge to plan a meal.' 'I have the skills to plan a meal.' 'I have the confidence to plan a meal.'" For the Resource column, write Y if the person is connected to a resource to assist with a task and N if the person is not connected to a resource.

INDEPENDENT LIVING

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Task	Considerations:	Skill Level 0=unable to complete; 1=requires assistance; 2=completes independently N/A=task not applicable	I have the knowledge to... (Y/N)	I have the skills to...(Y/N)	I have the confidence to...(Y/N)	Connected to resource? (Y/N)	Explanation if needed (and what resource the person was connected to, if relevant).	Priority? (Y/N)
HOUSEHOLD MANAGEMENT								
Do Laundry/Manage Clothes								
Goes Grocery Shopping + Stores food	keeps lists, puts food away, checks expiration,							
Plans Meals	Chooses foods and ensures they are available							
Uses Microwave, Stove, Oven, Toaster	safety!							
Follows a Recipe	Understands measurement, and recipe steps							

Cleans the House	Kitchen, dishes, bathroom, bedroom, linens, sweeping, mopping, etc.							
Uses appropriate cleaning products	storage, matching product to the job, safe mixing, etc							
Replaces/Repairs basic household items as necessary	Light bulbs, plunges toilet, hangs a picture, etc							
COMMUNICATION AND SCHEDULING								
Independently Wakes up								
Schedule, keep, and be on time to appointments								
Use a calendar, alarms or other scheduling strategy								
Communicate using phone, email, and mail								
Be familiar with my immediate neighborhood								
SELF-DETERMINATION and CITIZENSHIP								
Vote								
Carry identification								
Access appropriate coping skills								
Make decisions based on own personal interests and preferences								
TRANSPORTATION								
Coordinates transportation as needed								

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Use the bus on known routes								
Troubleshoot bus routes								
Use Uber, Lift								
Walks and interacts with traffic safely								
Drives a car								
Is a responsible car owner								
HEALTH AND RELATIONSHIPS								
Exercise regularly								
Use medication safely and independently								
Make and implement safety plan for emergencies								
Engage in regular hygiene activities								
Go to the doctor if needed								
Communicate pain/illness								
Have health insurance								
Engage in healthy and safe relationships								
Maintain appropriate boundaries								
ID and Pursue interests, hobbies, and skills								
FINANCES								
Maintain a budget for expenses								
Manage a bank account								
Use cash, checks, debit, and credit cards safely and effectively								
Manage and pay bills on time								

1. How would you say the individual learns best?
2. How does the individual react to conflict?
3. Is the individual a leader or a follower?
4. Does the individual voice complaints or concerns?
5. How does the individual react to free time or time on his/her own?
6. How does the individual respond to praise?
7. How does the individual respond to criticism?
8. How well does the individual function in a group?

ll
ll

Is there anything else that you think is important for us to know about the individual?

General Self Efficacy Scale

Read the following instructions to the person: "I'm going to read you some statements. For each statement please respond how true that statement is for you—not at all true, somewhat true, or very true."

	0. Not at all true	1. Somewhat true	2. Very true
1. I can always manage to solve difficult problems if I try hard enough.			
2. If someone opposes me, I can find the means and ways to get what I want.			
3. It is easy for me to stick to my aims and accomplish my goals.			
4. I am confident that I could deal efficiently with unexpected events.			
5. Thanks to my resourcefulness, I know how to handle unforeseen situations.			
6. I can solve most problems if I invest the necessary effort.			
7. I can remain calm when facing difficulties because I can rely on my coping abilities.			
8. When I am confronted with a problem, I can usually find several solutions.			
9. If I am in trouble, I can usually think of a solution.			
10. I can usually handle whatever comes my way.			

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Community Choices Sample Form

1. Person's last name

2. Person's first name

3. FY

Mark only one oval.

2020-21

2021-22

2022-23

2023-24

4. Date of survey

Example: January 7, 2019

POM

For each prioritized POM outcome, write 0 if the outcome is not present and 1 if the outcome is present. For support for each prioritized POM outcome, write 0 if support for the outcome is not present and 1 if support for the outcome is present.

5. OUTCOME 1: You are safe.

Mark only one oval.

1

0

6. SUPPORT for OUTCOME 1: You are safe.

Mark only one oval.

1

0

7. OUTCOME 5: You exercise rights.

Mark only one oval.

1

0

8. SUPPORT for OUTCOME 5: You exercise rights.

Mark only one oval.

1

0

9. OUTCOME 8: You use their environments.

Mark only one oval.

1

0

10. SUPPORT for OUTCOME 8: You use their environments.

Mark only one oval.

1

0

11. OUTCOME 9: You live in integrated environments.

Mark only one oval.

1

0

12. SUPPORT for OUTCOME 9: You live in integrated environments.

Mark only one oval.

1

0

13. OUTCOME 10: You interact with other members of the community.

Mark only one oval.

1

0

14. SUPPORT for OUTCOME 10: You interact with other members of the community.

Mark only one oval.

1

0

15. OUTCOME 11: you participate in life in the community

Mark only one oval.

1

0

16. SUPPORT for OUTCOME 11: you participate in life in the community

Mark only one oval.

1

0

17. OUTCOME 16: You perform different social roles.

Mark only one oval.

1

0

18. SUPPORT for OUTCOME 16: You perform different social roles.

Mark only one oval.

1

0

19. OUTCOME 17: You choose where and with whom you live.

Mark only one oval.

1

0

20. SUPPORT for OUTCOME 17: You choose where and with whom you live.

Mark only one oval.

1

0

21. OUTCOME 20: You choose personal goals.

Mark only one oval.

1

0

22. SUPPORT for OUTCOME 20: You choose personal goals.

Mark only one oval.

1

0

23. OUTCOME 21: You realize personal goals.

Mark only one oval.

1

0

24. SUPPORT for OUTCOME 21: You realize personal goals.

Mark only one oval.

1

0

25. Please provide any notes on the POM scores.

Skills

Skill priority areas are the broader domains on which the person needs or wants to focus skill development (e.g., cooking).

26. Please list the (up to) 5 priority areas (numbered) that you will be working on with the person below.

27. What is priority area 1?

28. For priority area 1, please provide the following information:

Note: Independence level is on a scale from 0 to 2, while knowledge, skills, and confidence are on a scale from 0 to 1.

Mark only one oval per row.

	0	1	2	N/A
Independence level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29. Does the person need to be connected to any resources to achieve independence, knowledge, skills and confidence in priority area 1?
 (Please list resources below).

30. What is priority area 2?

31. For priority area 2, please provide the following information:

Note: Independence level is on a scale from 0 to 2, while knowledge, skills, and confidence are on a scale from 0 to 1.

Mark only one oval per row.

	0	1	2	N/A
Independence level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

32. Does the person need to be connected to any resources to achieve independence, knowledge, skills and confidence in priority area 2?

(Please list resources below).

33. What is priority area 3?

34. For priority area 3, please provide the following information:

Note: Independence level is on a scale from 0 to 2, while knowledge, skills, and confidence are on a scale from 0 to 1.

Mark only one oval per row.

	0	1	2	N/A
Independence level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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35. Does the person need to be connected to any resources to achieve independence, knowledge, skills and confidence in priority area 3?
 (Please list resources below).

36. What is priority area 4?

37. For priority area 4, please provide the following information:

Note: Independence level is on a scale from 0 to 2, while knowledge, skills, and confidence are on a scale from 0 to 1.

Mark only one oval per row.

	0	1	2	N/A
Independence level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

38. Does the person need to be connected to any resources to achieve independence, knowledge, skills and confidence in priority area 4?
(Please list resources below).

39. What is priority area 5?

40. For priority area 5, please provide the following information:

Note: Independence level is on a scale from 0 to 2, while knowledge, skills, and confidence are on a scale from 0 to 1.

Mark only one oval per row.

	0	1	2	N/A
Independence level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

41. Does the person need to be connected to any resources to achieve independence, knowledge, skills and confidence in priority area 5?

(Please list resources below).

42. How many skill priority areas does this person have?

Mark only one oval.

- 0
- 1
- 2
- 3
- 4
- 5

43. What was the person's score on the GSE (General Self-Efficacy Scale)?

Add total sum of responses across all 10 items.

44. Does the person have self-determined skill goals in their ISP yet?

Mark only one oval.

- Yes
- No Skip to question 61

Evaluating Skill Goals

Skill goals are individualized, specific goals within domain areas (e.g., cook 3 healthy meals per week)

45. Please list skill goals set last year (numbered):

46. What was skill goal 1?

47. Was skill goal 1 achieved this year?

1=yes, 0=no

Mark only one oval.

1

0

48. Please provide any notes on skill goal 1 and why/how you think it was achieved or not achieved.

49. What was skill goal 2?

50. Was skill goal 2 achieved this year?

1=yes, 0=no

Mark only one oval.

1

0

51. Please provide any notes on skill goal 2 and why/how you think it was achieved or not achieved.

52. What was skill goal 3?

53. Was skill goal 3 achieved this year?

1=yes, 0=no

Mark only one oval.

1

0

54. Please provide any notes on skill goal 3 and why/how you think it was achieved or not achieved.

55. What was skill goal 4?

56. Was skill goal 4 achieved this year?

1=yes, 0=no

Mark only one oval.

1

0

57. Please provide any notes on skill goal 4 and why/how you think it was achieved or not achieved.

58. How many skill goals did the person have?

Mark only one oval.

- 0
- 1
- 2
- 3
- 4

59. Please provide any examples of accomplishments beyond deliverables (e.g., individual achievements in self-advocacy)

60. Do you want to set new goals for next year at this time for this person?

Mark only one oval.

- Yes
- No *Skip to question 69*

**Developing
Skill Goals**

Using the skill priority areas and the conversation with the person around resources, work toward developing 3-4 skill-related goals. Skill goals are individualized, specific goals within skill domain areas (e.g., cook 3 healthy meals per week). Goals should be SMART: Specific, Measurable, Achievable, Realistic, and Time bound.

61. Skill Goal 1:

62. What needs to happen to achieve skill goal 1 by next year?

63. Skill Goal 2:

64. What needs to happen to achieve skill goal 2 by next year?

65. Skill Goal 3:

66. What needs to happen to achieve skill goal 3 by next year?

67. Skill Goal 4:

68. What needs to happen to achieve skill goal 4 by next year?

Resources

Resource priority areas are the broader domains in which the person needs or wants resources (e.g., healthcare).

69. Please list the (up to) 5 priority resources (numbered) that you will be working on with the person below.

70. What is resource 1?

71. For resource 1, please provide the following information:

Note: Independence level is on a scale from 0 to 2, while knowledge, skills, and confidence are on a scale from 0 to 1.

Mark only one oval per row.

	0	1	2	N/A
Independence level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

72. What is resource 2?

73. For resource 2, please provide the following information:

Note: Independence level is on a scale from 0 to 2, while knowledge, skills, and confidence are on a scale from 0 to 1.

Mark only one oval per row.

	0	1	2	N/A
Independence level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

74. What is resource 3?

75. For resource 3, please provide the following information:

Note: Independence level is on a scale from 0 to 2, while knowledge, skills, and confidence are on a scale from 0 to 1.

Mark only one oval per row.

	0	1	2	N/A
Independence level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

76. What is resource 4?

77. For resource 4, please provide the following information:

Note: Independence level is on a scale from 0 to 2, while knowledge, skills, and confidence are on a scale from 0 to 1.

Mark only one oval per row.

	0	1	2	N/A
Independence level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

78. What is resource area 5?

79. For resource 5, please provide the following information:

Note: Independence level is on a scale from 0 to 2, while knowledge, skills, and confidence are on a scale from 0 to 1.

Mark only one oval per row.

	0	1	2	N/A
Independence level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

80. How many resource priority areas does the person have?

Mark only one oval.

0

1

2

3

4

5

81. Does the person have self-determined resource goals in their ISP yet?

Mark only one oval.

Yes

No Skip to question 61

Evaluating Resource Goals (or evaluating resource connection)

Resource goals are individualized, specific goals within resource domain areas (e.g., set up and utilize prescription assistance from Champaign County Healthcare Consumers every month).

82. Please list resource goals set last year (numbered):

83. What was resource goal 1?

55

84. Was resource goal 1 achieved this year?

1=yes, 0=no

Mark only one oval.

1

0

85. Please provide any notes on resource goal 1 and why/how you think it was achieved or not achieved.

86. What was resource goal 2?

87. Was resource goal 2 achieved this year?

1=yes, 0=no

Mark only one oval.

1

0

88. Please provide any notes on resource goal 2 and why/how you think it was achieved or not achieved.

89. What was resource goal 3?

90. Was resource goal 3 achieved this year?

1=yes, 0=no

Mark only one oval.

1

0

91. Please provide any notes on resource goal 3 and why/how you think it was achieved or not achieved.

92. What was resource goal 4?

93. Was resource goal 4 achieved this year?

1=yes, 0=no

Mark only one oval.

1

0

94. Please provide any notes on resource goal 4 and why/how you think it was achieved or not achieved.

95. How many resource goals did the person have?

Mark only one oval.

0

1

2

3

4

96. In the past year, what resources was the person connected to?

97. In the past year, how many resources was the person connected to?

98. Were there any unexpected challenges that arose?

99. Do you want to set new resource goals for next year at this time for this person?

Mark only one oval.

Yes

No Skip to question 108

Developing
Resource
Goals (or
assessing
resource
needs)

Using the resource priority areas and the conversation with the person around resources, work toward developing 3-4 skill-related goals. Resource goals are individualized, specific goals within resource domain areas (e.g., set up and utilize prescription assistance from Champaign County Healthcare Consumers every month).

100. Resource Goal 1:

101. What needs to happen to achieve resource goal 1 by next year?

102. Resource Goal 2:

103. What needs to happen to achieve resource goal 2 by next year?

104. Resource Goal 3:

105. What needs to happen to achieve resource goal 3 by next year?

106. Resource Goal 4:

107. What needs to happen to achieve resource goal 4 by next year?

Connections

108. The person is connected to at least one...

Mark only one oval.

- Person
- Group
- Place
- None

61

109. Does the person currently have connection goals in their ISP?

Mark only one oval.

Yes

No Skip to question 118

Evaluating Connection Goals

110. Connection Goal 1:

111. Was connection goal 1 achieved this year?

1=yes, 0=no

Mark only one oval.

1

0

112. Please provide any notes on connection goal 1 and why/how you think it was achieved or not achieved.

113. Connection Goal 2:

62

114. Was connection goal 2 achieved this year?

1=yes, 0=no

Mark only one oval.

1

0

115. Please provide any notes on connection goal 2 and why/how you think it was achieved or not achieved.

116. How many connection goals did the person have?

Mark only one oval.

0

1

2

117. Do you want to set new goals for next year at this time for this person?

Mark only one oval.

Yes

No *Skip to question 123*

**Developing
Connection
Goals**

Using your discussion about what the person likes, Circles of Support, and POMs to set 2 connection goals with the person for the next year.

63

118. Please include notes from your discussion of what the person likes/where they want to make connections?

119. Connection Goal 1:

120. What needs to happen to achieve connection goal 1 by next year?

121. Connection Goal 2:

122. What needs to happen to achieve connection goal 2 by next year?

123. What is the person's current housing situation?

Mark only one oval.

- Lives with parent(s) or caregiver(s)
- Lives with friend(s)
- Lives alone
- Homeless or unstable housing
- Other

124. How satisfied is the person with their current housing?

Mark only one oval.

	1	2	3	4	
Very unsatisfied	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very satisfied

125. Please provide additional details about the person's current housing situation and their satisfaction with the situation (why they are/are not satisfied).

126. Does this person have a move-out plan in their ISP?

Mark only one oval.

- Yes Skip to question 127
- No Skip to question 134

65

Evaluating Move-Out Plan

127. By what date did the person plan to move out?

Example: January 7, 2019

128. By what date did the person actually move out?

Leave blank and provide notes below if the person has not moved out yet.

Example: January 7, 2019

129. Please provide any notes on the person's move-out plan and date:

130. How long has the person had their current lease?

Mark only one oval.

- Less than 6 months
- 6 months - 1 year
- More than 1 year
- N/A

66

131. Does the person feel that their current housing is sustainable given their budget?

Budgeting: ask the person how much they earn per month (including benefits, help from parents, etc.), calculate costs per month including housing plan, then calculate the amount leftover; ask the person if that is enough and if it will work for them.

Mark only one oval.

- Yes
- No
- Not Sure

132. What percentage of the person's income (including benefits) goes toward housing and utilities costs?

Mark only one oval.

- Less than 30%
- 30-50%
- More than 50%
- N/A

133. Does the person want/need to make a new move-out plan?

Mark only one oval.

- Yes
- No *Skip to question 141*

Developing a Move-Out Plan

67

134. What is the person looking for in a house ideally?

135. What housing situation does the person want?

Mark only one oval.

- Live with parent(s) or caregiver(s)
- Live with friend(s)
- Live alone
- Other

136. Is the person's housing plan affordable?

Budgeting: ask the person how much they earn per month (including benefits, help from parents, etc.), calculate costs per month including housing plan, then calculate the amount leftover; ask the person if that is enough and if it will work for them.

Mark only one oval.

- Yes
- No

137. Is the person's housing plan available?

Mark only one oval.

- Yes
- No

138. How satisfied is the person with the housing plan?

Mark only one oval.

- Very unsatisfied
- Somewhat unsatisfied
- Somewhat satisfied
- Very satisfied

139. By what date does the person hope to move out?

Example: January 7, 2019

140. Please provide additional details about the person's housing plan and their satisfaction with the plan (why they are or aren't satisfied).

Housing Sustainability

141. Do you want to evaluate the person's housing sustainability at this time?

Mark only one oval.

- Yes
- No

Housing Sustainability Evaluation

142. How long has the person had their current lease?

Mark only one oval.

- Less than 6 months
- 6 months - 1 year
- More than 1 year

143. The person has the personal outcomes in priority areas (skills, resources, connections, and housing) needed to sustain housing.

Did the sum of the person's POM score in the priority areas increase from the previous year to now?

Mark only one oval.

- Yes
- No

144. The person can complete the living skills needed to sustain housing.

What is the person's independence score as a percent of the total score? (go to column...)

Mark only one oval.

- Less than 25%
- 25-50%
- 51-75%
- More than 75%

145. The person has the knowledge of living skills to sustain housing.

In what percent of skill priority areas does the person have a knowledge score of 1? (go to column...)

Mark only one oval.

- Less than 25%
- 25-50%
- 51-75%
- More than 75%

146. The person has the living skills to sustain housing.

In what percent of skill priority areas does the person have a skills score of 1? (go to column...)

Mark only one oval.

- Less than 25%
- 25-50%
- 51-75%
- More than 75%

147. The person has the confidence in living skills to sustain housing.

In what percent of skill priority areas does the person have a confidence score of 1? (go to column...)

Mark only one oval.

- Less than 25%
- 25-50%
- 51-75%
- More than 75%

148. The person has the self-efficacy to sustain housing.

The sum of the person's GSE score is...(go to column...)

Mark only one oval.

0-4

5-9

10-14

15+

149. The person has met the skills goals they need to sustain housing.

What percent of skill goals did the person meet in the last year? (go to column...)

Mark only one oval.

Less than 25%

25-50%

51-75%

More than 75%

150. The person has met the resource goals they need to sustain housing.

What percent of resource goals did the person meet in the last year? (go to column...)

Mark only one oval.

Less than 25%

25-50%

51-75%

More than 75%

151. The person has met the connection goals they need to sustain housing.

What percent of resource goals did the person meet in the last year? (go to column...)

Mark only one oval.

- Less than 25%
- 25-50%
- 51-75%
- More than 75%

152. The person has the connections they need to sustain housing.

Is the person connected to at least one person, group, or place? (go to column...)

Mark only one oval.

- Yes
- No

153. The person's has the budget to sustain housing.

Mark only one oval.

- The person spends more than 30% of income on housing and does not feel their budget is sustainable.
- The person spends more than 30% of income on housing but feels their budget is sustainable.
- The person spends less than than 30% of income on housing but does not feel their budget is sustainable.
- The person spends less than than 30% of income on housing and feels their budget is sustainable.

154. The person is satisfied with their current housing.

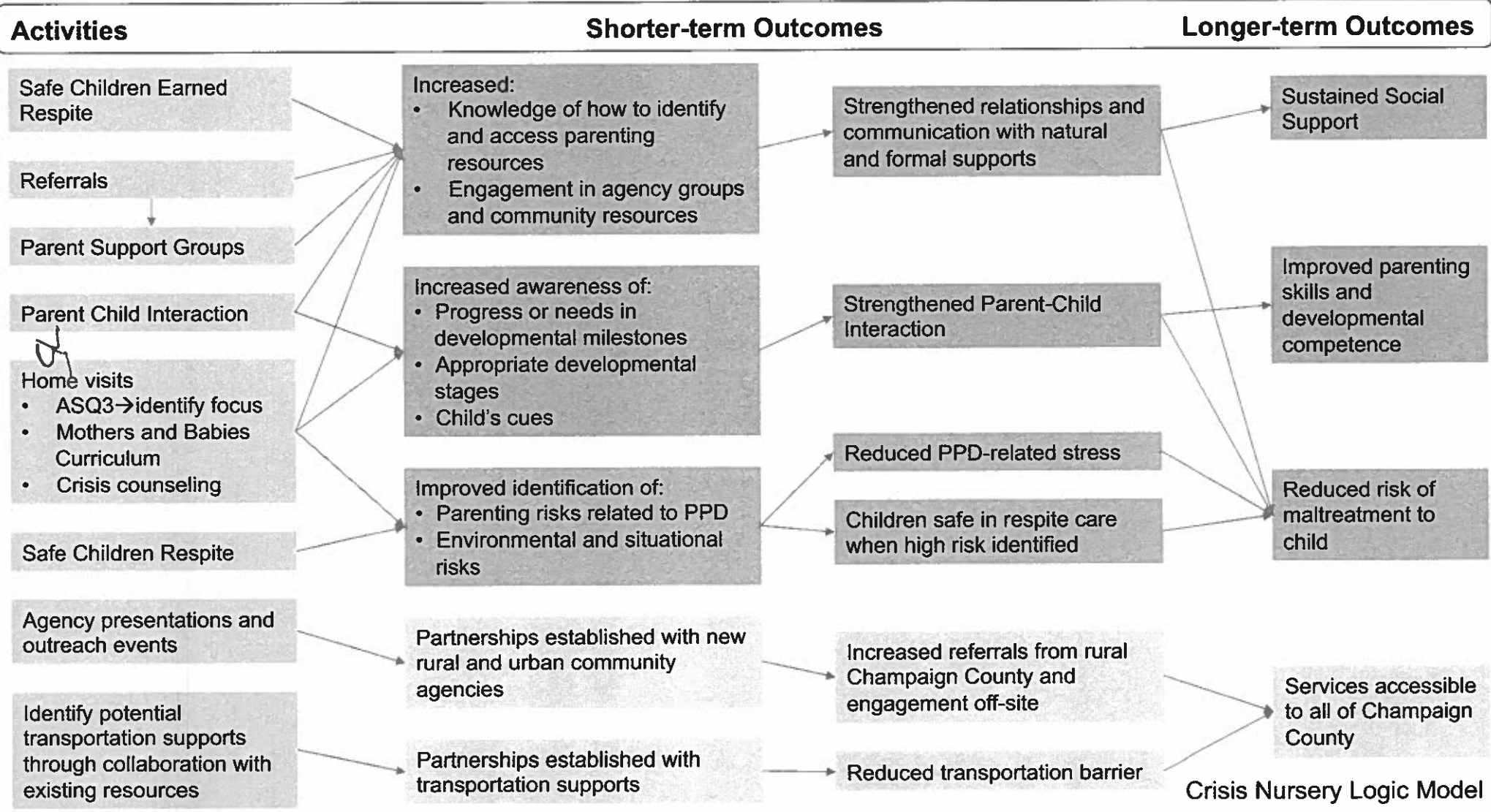
Mark only one oval.

- Very unsatisfied
- Somewhat unsatisfied
- Somewhat satisfied
- Very satisfied

155. Please include any notes on the person's housing sustainability.

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Google Forms



Crisis Nursery Home Visitor Safety Checklist

Use this checklist at or around your third visit with a family and then check in biweekly to highlight any items on the checklist that were incomplete and remind them to follow-up. Go through the checklist and enter number of yeses and nos into the evaluation spreadsheet quarterly.

The following checklist is designed to ensure your house is safe enough for your child to play in with only minimal risk of injury. Take some time now to go over this checklist, room by room, to make your house safe for your child. Make it a habit to recheck your house at least once a month.

All Rooms

	Yes	No
1. Put electric outlet covers on all unused outlets.		
2. Put a gate across all stairways, top and bottom, until child can handle stairs.		
3. Remove or pad sharp corners on furniture and appliances.		
4. Remove throw rugs on tiled floors.		
5. Keep all plants out of baby's reach.		

Kitchen

	Yes	No
6. Put all cleaning supplies on a top shelf out of children's reach.		
7. Install safety locks on all kitchen cabinets below waist level. You may want to keep one cabinet with pots, pans, and unbreakable bowls unlocked for child's exploration.		
8. Turn pot handles toward back of stove when cooking. Use the back burners on stove for cooking.		
9. Take knobs off gas range when not in use.		
10. Have a secure cover for the garbage can.		
11. Install safety locks on kitchen drawers with knives and other sharp utensils.		
12. Keep all breakable bowls out the cabinets with pots and pans.		
13. Remove throw rugs from the kitchen floors.		

Basement, Garage, and Attic (Skip if they don't have a basement, garage, or attic)

	Yes	No
14. Throw away all old plants you're not using. Store paint thinners, paint, stains, on a high shelf.		
15. Store all tools in a locked tool chest or shelved out of reach.		
16. Lock all doors securely.		
17. Keep all garden tools, lawn mowers, snow blowers out of reach of young children.		
18. Keep keys to electric machines safely out of reach.		
19. Take doors off old refrigerators and freezers.		
20. Store pesticides and fertilizers on high shelves out of reach of children.		

FIRE & BURNS

	Yes	No
21. The home has a working smoke detector near the family's sleeping areas.		
22. The family has a fire escape plan that they practice so that they can react quickly in case of a fire.		
23. The family's hot water does not come out of the faucet at scalding temperatures.		
24. Electrical appliances (e.g., hair dryers and irons) are kept out of the reach of younger children.		

SLEEPING

	Yes	No
25. The infant sleeps alone in a crib or bassinette.		
26. The infant does not sleep with toys, stuffed animals or pillows.		
27. The infant is placed on his or her back to sleep.		

CHOKING

Food such as hot dogs, hard candy, grapes, popcorn and nuts are common culprits in choking deaths. Small toys, tiny rubber balls, too small pacifiers, and bits of balloons are common non-food choking hazards. Children are also at risk for becoming entangled in clothing hood ties, cords that control window blinds, toys strung across cribs, and strings used to attach pacifiers to clothing. As a general rule, any toy that can fit in a toilet paper roll is a choking hazard.

	Yes	No
28. Plastic bags, pins, buttons, coins, balloons, sharp or breakable items are kept out of the reach of the children.		
29. Younger children only play with toys that are too large to swallow, unbreakable and without sharp edges or points.		

DROWNING

A young child can drown in as little as one inch of water. More than half of the drowning victims under the age of one drown in the bathtub during a brief lapse of supervision by the child's parent or caregiver. A child will lose consciousness within two minutes following submersion. Children must always be supervised when they are near water.

	Yes	No
30. Infants and toddlers are never left alone when near a bath, pool, bucket or toilet.		
31. Baby pools are drained when not in use.		
32. Children are always supervised when they are near water.		

FALLS

	Yes	No

33. Infants and toddlers are never left alone on changing tables, countertops, etc.		
34. Furniture that infants and younger children can climb or crawl on is not place near windows.		
35. Appropriate safety gate used.		

POISON

	Yes	No
36. Cleaning products, pesticides, and liquor are kept out of the reach of children.		
37. Over the counter and prescription medicines are kept out of the reach of children.		

VIOLENCE

	Yes	No
38. The parent/caregiver knows never to shake a baby.		
39. Firearms and ammunition stored in the home are kept in separate locked locations.		
40. <i>Shaken Baby Syndrome Pamphlet</i>		
41. <i>Fussy Baby Warm Line</i>		

SUPERVISION

A parent's/caregiver's supervision is the most important factor in keeping children safe from injury. Review the following questions with the parent/caregiver.

The answers to these questions should be YES.

- Does this person want to watch my children?
- Will I have an opportunity to watch this person with my children before I leave?
- Is this person good with children my child's age?
- Has this person done a good job caring for other children that I know?
- Will my children be cared for in a place that is safe?
- Does this person know that a baby should never be shaken?
- Is this person the appropriate age to watch my children?

The answers to these questions should be NO.

- Will this person become angry if my children bother him or her?
- If this person is angry with me for leaving, will he or she take her anger out on my children?
- Does this person have a history of violence that makes him or her a danger to my children?
- Has this person had children removed from his or her custody because he or she was unable to care for them?

	Yes	No
42. Children are left with an appropriate caregiver when the parent/caregiver is not home.		

AUTOMOBILES

Illinois law requires children under the age of eight to be in car or booster seats when riding in a car.

	Yes	No
43. Young children are never left unattended in an automobile.		

EMERGENCY TELEPHONE NUMBERS

Help the family prepare a list of emergency telephone numbers that include their doctor or clinic, the nearest emergency room, poison control (1- 800-222-1222). Post the list by the telephone or another easily accessible location if the family does not have telephone.

PETS

	Yes	No
44. Pet food is securely stored and cannot be accessed by children.		

For people who are not interested in participating in Crisis Nursery services at all:

We're really interested in understanding the reasons why people aren't able or choose not to participate in Crisis Nursery. Would you be able to take a moment with me to answer a quick survey? Your responses will be confidential. I'm going to list several potential barriers to attendance. Respond yes if an item is a barrier to your attendance and respond no if it is not a barrier to you.

I am unable to attend Crisis Nursery because...(Yes or No)

1. I don't have time.
2. I have work.
3. I don't have childcare.
4. I'm not comfortable meeting in my home. [I don't want someone in my home]
 - a. [Follow-up: If yes, would you be more comfortable meeting outside of your home?]
 - b. [Follow-up: If yes, do you have transportation?]
5. I don't trust Crisis Nursery.
 - a. [Follow-up: If yes, would you be willing to provide more details on what makes you feel that you don't trust Crisis Nursery?]
 - b. [Follow-up: If yes, how could Crisis Nursery be more trustworthy to you?]
6. Crisis Nursery is not a fit for my needs.
 - a. [Follow-up: If yes, would you be willing to provide more details on how Crisis Nursery is not a fit for your needs?]
 - b. [If yes, how might Crisis Nursery better address your needs?]
7. I'm uncomfortable with social settings.
8. Other (please specify)

For people who use home visiting services but do not use respite or attend groups.

We're really interested in understanding the reasons why people aren't able or choose not to participate in Crisis Nursery groups or respite. Would you be able to take a moment with me to answer a quick survey? Your responses will be confidential. I'm going to list several potential barriers to attendance. Respond yes if an item is a barrier to your attendance and respond no if it is not a barrier to you.

I am unable to come to Crisis Nursery for groups or respite because...(Yes or No)

1. I don't have transportation.
2. I don't have safe and/or reliable transportation.
 - a. [Follow-up: If yes, can you tell me a little bit more about your concerns with transportation?]
3. I don't have gas money.
4. Public transportation is not accessible to me.
5. The location is inconvenient.
 - a. [If yes to 1,2, 3, 4, or 5, would you be more able to attend if Crisis Nursery found a way to provide you transportation?]
6. I don't have time.
7. I have work.
8. I don't have childcare.

9. I don't know enough about Crisis Nursery groups.
 - a. [If yes, would you like me to send more information about Crisis Nursery groups, including a virtual tour?]
10. I don't know enough about Crisis Nursery respite care.
 - a. [If yes, would you like me to send more information about Crisis Nursery respite care, including a virtual tour?]
11. I don't feel comfortable sharing about myself in a group setting.
 - a. [If yes, how might Crisis Nursery make you feel more comfortable?]
12. I don't feel comfortable leaving my child with someone in respite care.
 - a. [How might Crisis Nursery make you feel more comfortable bringing your child to respite care?]
13. Crisis Nursery groups are not a fit for my needs.
 - a. [If yes, would you be willing to provide more details on how Crisis Nursery groups are not a fit for your needs?]
 - b. [If yes, how might Crisis Nursery better address your needs?]
14. Crisis Nursery respite care is not a fit for my needs.
 - a. [If yes, would you be willing to provide more details on how Crisis Nursery respite care is not a fit for your needs?]
 - b. [If yes, how might Crisis Nursery better address your needs?]
15. Other (please specify)

Enter data into the evaluation spreadsheet.

Crisis Nursery Alternatives to Respite Care Survey

Administer once per fiscal year to all clients who use respite care. Enter into Filemaker database.

Please respond to the following questions on scale of 1 to 7.

1=Highly Unlikely, 2=Quite Unlikely, 3=Somewhat Unlikely, 4=Not Sure, 5=Somewhat Likely, 6=Quite Likely, 7=Highly Likely

If respite care had not been available...

	1	2	3	4	5	6	7
I would have left my child unattended.							
I would have my child with someone that I did not feel comfortable with as a caregiver.							
I would have kept my child with me in an environment where they might have been exposed to danger.							
I would have kept my child with me in situations that were not appropriate for children.							
I would have missed work, class, a job interview, or another important obligation.							
I would have delayed attending to medical needs.							
I would have kept my child with me during an emotional crisis.							
I would have gone without sleep for more than 24 hours.							
I would have been in a state where I was unable to attend to my child's immediate needs.							
I would have left my child in the care of another child (age of caregiving child: _____).							
I would have requested a foster care placement.							
Other (please specify): _____							
I don't know what I would have done.							
I would prefer not to answer.							

Crisis Nursery Mothers & Babies Skills Utilization Questionnaire

The purpose of this questionnaire is to get a better understanding of the different ways women use the tools that they learned from the Mothers and Babies Course. This survey should be administered upon completion of the Mothers and Babies Course.

1. 1a) Over the past month, how often have you kept track of your mood?

Mark only one oval.

- Every day
 Most of the days
 Half of the days
 A few times
 Not at all

2. 1b) How helpful was it for you to keep track of your mood?

Mark only one oval.

- Not helpful at all
 Somewhat helpful
 Very helpful

3. 1c) How much did you enjoy keeping track of your mood?

Mark only one oval.

- Not enjoyable at all
 Somewhat enjoyable
 Very enjoyable

4. 2a) Over the past month, how often have you engaged in pleasant activities?

Mark only one oval.

- Every day
- Most of the days
- Half of the days
- A few times
- Not at all

5. 2b) How helpful was it for you to do pleasant activities?

Mark only one oval.

- Not helpful at all
- Somewhat helpful
- Very helpful

6. 2c) How much did you enjoy doing pleasant activities?

Mark only one oval.

- Not enjoyable at all
- Somewhat enjoyable
- Very enjoyable

7. 3a) Over the past month, how often have you overcome obstacles to doing pleasant activities?

Mark only one oval.

- Every day
 Most of the days
 Half of the days
 A few times
 Not at all

8. 3b) How helpful was it for you to overcome obstacles to doing pleasant activities?

Mark only one oval.

- Not helpful at all
 Somewhat helpful
 Very helpful

9. 3c) How much did you enjoy overcoming obstacles to doing pleasant activities?

Mark only one oval.

- Not enjoyable at all
 Somewhat enjoyable
 Very enjoyable

85

10. 4a) Over the past month, how often have you played with your baby?

Mark only one oval.

- Every day
- Most of the days
- Half of the days
- A few times
- Not at all

11. 4b) How helpful was it for you to play with your baby?

Mark only one oval.

- Not helpful at all
- Somewhat helpful
- Very helpful

12. 4c) How much did you enjoy playing with your baby?

Mark only one oval.

- Not enjoyable at all
- Somewhat enjoyable
- Very enjoyable

13. 5a) Over the past month, how often have you used thought interruption to reduce harmful thoughts?

Mark only one oval.

- Every day
- Most of the days
- Half of the days
- A few times
- Not at all

14. 5b) How helpful was it for you to use thought interruption?

Mark only one oval.

- Not helpful at all
- Somewhat helpful
- Very helpful

15. 5c) How much did you enjoy using thought interruption?

Mark only one oval.

- Not enjoyable at all
- Somewhat enjoyable
- Very enjoyable

16. 6a) Over the past month, how often have you used worry time to reduce harmful thoughts?

Mark only one oval.

- Every day
- Most of the days
- Half of the days
- A few times
- Not at all

17. 6b) How helpful was it for you to use worry time?

Mark only one oval.

- Not helpful at all
- Somewhat helpful
- Very helpful

18. 6c) How much did you enjoy using worry time?

Mark only one oval.

- Not enjoyable at all
- Somewhat enjoyable
- Very enjoyable

19. 7a) Over the past month, how often have you used time projection to imagine a better time in the future?

Mark only one oval.

- Every day
- Most of the days
- Half of the days
- A few times
- Not at all

20. 7b) How helpful was it for you to use time projection?

Mark only one oval.

- Not helpful at all
- Somewhat helpful
- Very helpful

21. 7c) How much did you enjoy using time projection?

Mark only one oval.

- Not enjoyable at all
- Somewhat enjoyable
- Very enjoyable

22. 8a) Over the past month, how often have you used self-instruction to give yourself helpful directions?

Mark only one oval.

- Every day
 Most of the days
 Half of the days
 A few times
 Not at all

23. 8b) How helpful was it for you to use self-instruction?

Mark only one oval.

- Not helpful at all
 Somewhat helpful
 Very helpful

24. 8c) How much did you enjoy using self-instruction?

Mark only one oval.

- Not enjoyable at all
 Somewhat enjoyable
 Very enjoyable

25. 9a) Over the past month, how often have you had positive contact with others?

Mark only one oval.

- Every day
- Most of the days
- Half of the days
- A few times
- Not at all

26. 9b) How helpful was it for you to have positive contact with others?

Mark only one oval.

- Not helpful at all
- Somewhat helpful
- Very helpful

27. 9c) How much did you enjoy having positive contact with others?

Mark only one oval.

- Not enjoyable at all
- Somewhat enjoyable
- Very enjoyable

28. 10a) Over the past month, how often have you talked to or contacted someone who has been a positive support to you and your baby?

Mark only one oval.

- Every day
- Most of the days
- Half of the days
- A few times
- Not at all

29. 10b) How helpful was it for you to contact someone who has been a positive support?

Mark only one oval.

- Not helpful at all
- Somewhat helpful
- Very helpful

30. 10c) How much did you enjoy contacting someone who has been a positive support?

Mark only one oval.

- Not enjoyable at all
- Somewhat enjoyable
- Very enjoyable

31. 11a) Over the past month, have you met a new person or persons who can provide support for you and your baby?

Mark only one oval.

- 1-2 people
 3-4 people
 5 or more people
 Not at all

32. 11b) How helpful was it for you to meet a new person who can provide support?

Mark only one oval.

- Not helpful at all
 Somewhat helpful
 Very helpful

33. 11c) How much did you enjoy meeting a new person who can provide support?

Mark only one oval.

- Not enjoyable at all
 Somewhat enjoyable
 Very enjoyable

34. 12a) Over the past month, how often have you made a request to someone, using assertive communication?

Mark only one oval.

- Every day
- Most of the days
- Half of the days
- A few times
- Not at all

35. 12b) How helpful was it for you to make a request to someone, using assertive communication?

Mark only one oval.

- Not helpful at all
- Somewhat helpful
- Very helpful

36. 12c) How much did you enjoy making a request to someone, using assertive communication?

Mark only one oval.

- Not enjoyable at all
- Somewhat enjoyable
- Very enjoyable

37. How satisfied were you overall with the Mothers and Babies Course?

Mark only one oval.

	1	2	3	4	5	
Not at all satisfied	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very satisfied

38. Do you have any comments, questions, or feedback you would like to share?

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Google Forms

Crisis Nursery Service Provider Post-Implementation Survey

Please fill out this information after finishing all Mothers and Babies sessions or after ending with client(s) (around 6 months after implementation).

1. 1. Program Name

2. 2. What format was delivered to your client?

Mark only one oval.

One-on-one

Group

3. 2a. How many clients did you deliver the 1-on-1 format?

4. 2b. How many groups did you deliver?

5. 3. On average, how many sessions did you deliver to your client(s) or group(s)?

9/6

6. 4. How often did your client(s) complete the personal projects?

Mark only one oval.

- Never
- Rarely
- Sometimes
- Fairly Often
- Very Often

7. 5. How engaged was your client(s) in the topics covered?

Mark only one oval.

- Never Engaged
- Rarely Engaged
- Somewhat Engaged
- Fairly Engaged
- Very Engaged

8. 6. How well do you think your client(s) understood the topics covered?

Mark only one oval.

- Never Understood
- Rarely Understood
- Somewhat Understood
- Fairly Understood
- Very Understood

9. 7. Did you feel that any modules were particularly challenging for your client(s) to understand? Check all that apply.

Check all that apply.

- Pleasant Activities
- Thoughts
- Contact with others

10. 7a. Please explain:

11. 8. How effective do you believe you were in explaining the MB material to your client(s)?

Mark only one oval.

- Not very effective
- Somewhat Effective
- Very Effective

12. 9. Did you refer any clients who received Mothers and Babies to additional mental health services—either within our outside your agency?

Mark only one oval.

- Yes
- No

13. 10. Were there any challenges with covering the material in any of the MB session?
Please Explain

14. 11. Were there any successes with covering the material in any of the MB session?
Please Explain

15. 12. Were you able to cover all the material in the MB curriculum?

Mark only one oval.

Yes

No

16. 12a. If no, please check all the sessions which you did not fully cover:

Check all that apply.

- Session 1- Introduction to the Mothers and Babies Program
- Session 2- Pleasant Activities Help Make a Healthy Reality for My Baby and Me
- Session 3- Thoughts and My Mood
- Session 4- Fighting Harmful Thoughts and Increasing Helpful Thoughts
- Session 5- Contact with Others
- Session 6- Interpersonal Relationships and My Mood & Graduation

17. Do you have any comments, questions, or feedback you would like to share?

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Google Forms

100

Activities



Shorter-term Outcomes



Longer-term Outcomes

101

Management
 • Financial
 • Medical/MH
 • Food

Transportation

Job coaching with local employers

Coaching/Mentoring

Education and Skill-Building Workshops

Apt. Inspections

24/7 Crisis Mgmt

Social outings

Community First

Engagement with resources
 • LIHEAP, etc
 • Mental health services

Sustainable employment

Independent Living Skills
 • Medical Mgm't
 • Finances
 • Hygiene/Grooming
 • Transportation
 • Decision-making
 • Problem-solving
 • Interpersonal
 • Time management

Maintain safe living environment

Strong relationships/Safe social circle

Affordable, Stable Housing

Live Independently

Improved Quality of Life

Improved Safety



Inspector: _____

Date: ___/___/___

Quarter: _____

**C-U Independence
Monthly Housekeeping and Safety Inspection**

Scoring			
Kitchen	Not satisfactory (0)	Satisfactory (1)	Excellent (2)
Dishes done	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trash out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Counters clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stove/oven clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fridge clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subtotal = _____/6			
Living Room	Not satisfactory (0)	Satisfactory (1)	Excellent (2)
Carpet vacuumed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clutter minimal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dusted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subtotal = _____/3			
Bathroom	Not satisfactory (0)	Satisfactory (1)	Excellent (2)
Floor clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sink clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tub/Shower clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Toilet clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mirror clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subtotal = _____/5			
Bedroom / Bed area	Not satisfactory (0)	Satisfactory (1)	Excellent (2)
Carpet vacuumed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clutter minimal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subtotal = _____/2			
Bedroom #2 (if applicable)	Not satisfactory (0)	Satisfactory (1)	Excellent (2)
Carpet vacuumed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clutter minimal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subtotal = _____/2			
Safety	Not satisfactory (0)	Satisfactory (1)	
Pest/Rodents check	<input type="checkbox"/>	<input type="checkbox"/>	
Smoke detectors	<input type="checkbox"/>	<input type="checkbox"/>	
Electrical hazards	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate Heating/AC	<input type="checkbox"/>	<input type="checkbox"/>	
Working Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>	
Functioning Stove	<input type="checkbox"/>	<input type="checkbox"/>	

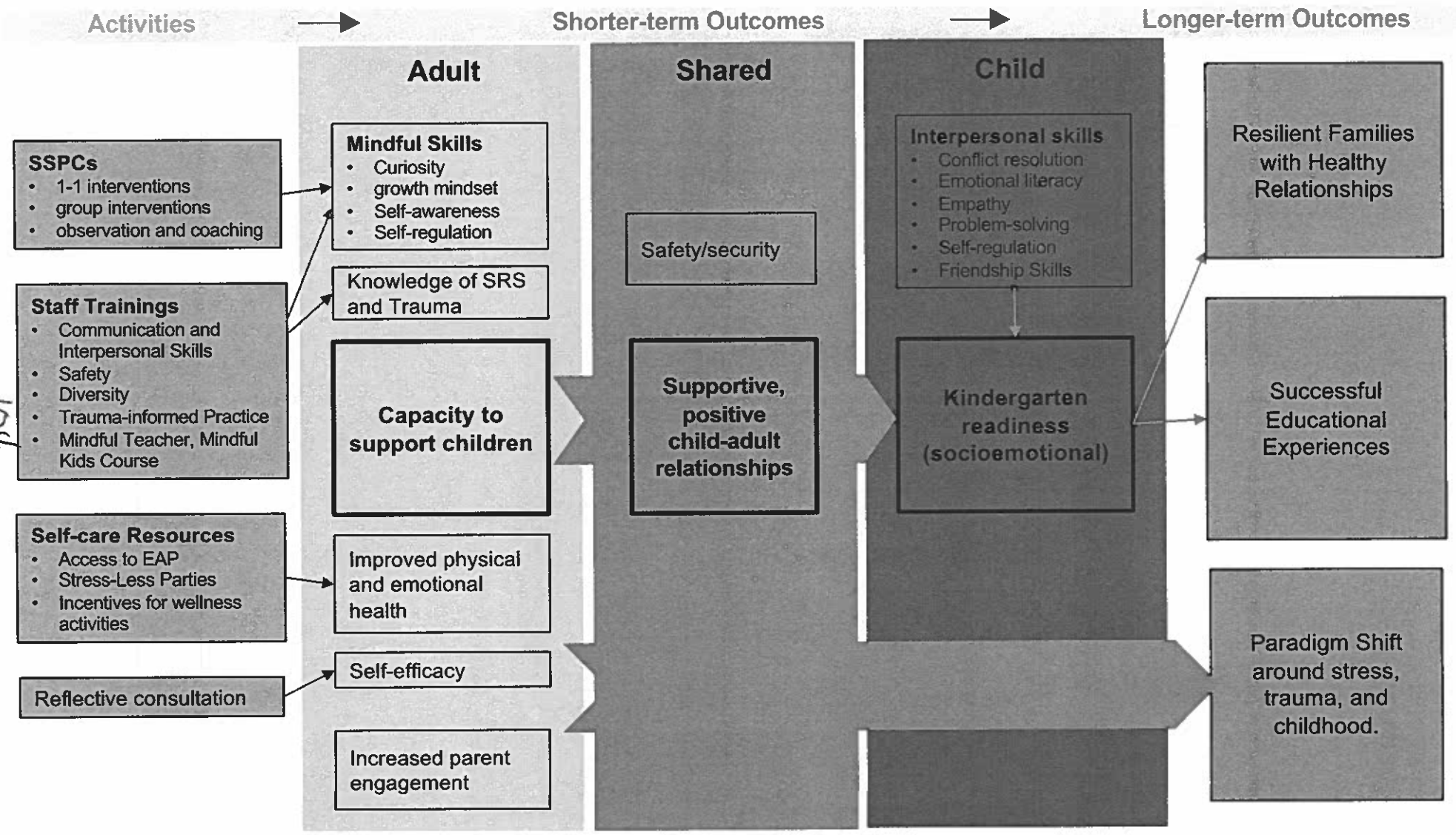
102

Inspector: _____

Date: ___ / ___ / ___

Quarter: _____

	Subtotal = _____/6		
Overall Score	Studio/1 bed	2 bed	Passed? (80% or higher)
	/ 22	/ 24	Yes/No
Work order	Needed	Completed	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notes			
Follow-up? (see prev. month)	Needed	Completed	Not completed
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Demographics

ID

What is your position?

- Teacher
 SSPC

How many years have you worked in this position? If it is your first year, please enter '0'.

SE

For the following questions, rate how true each statement is in the context of teaching and intervening with children at your job.

Click to write the question text

	Not at all true	Hardly true	Moderately true	Exactly true
I can always manage to solve difficult problems if I try hard enough	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If someone opposes me, I can find the means and ways to get what I want.

It is easy for me to stick to my aims and accomplish my goals

I am confident that I could deal efficiently with unexpected events.

Thanks to my resourcefulness, I know how to handle unforeseen situations.

I can solve most problems if I invest the necessary effort.

I can remain calm when facing difficulties because I can rely on my coping abilities.

When I am confronted with a problem, I can usually find several solutions.

If I am in trouble, I can usually think of a solution

I can usually handle whatever comes my way.

sa

Take a moment to reflect on how you have been over the past year. For each statement, rate how often they have been true.

Over the past year, how often have these statements been true?

100

	Never	Sometimes	About half the time	Most of the time	Almost always
I "observe" myself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have insight into myself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I look at why people act the way they do	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have learnt about myself and how I see the world	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am continuing to work on and develop myself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I focus on ways of amending my behaviour that would be useful	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel generally positive about self-awareness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I reassess my own and others' responsibilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I'm aware of my abilities and limitations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am reflective	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am realistic about myself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Over the past year, how often have these statements been true?

About half Most of Almost

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	Never	Sometimes	the time	the time	always
I have a good self-image	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel on the whole very comfortable with the way I am	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have fun	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am consistent in different situations or with different people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have compassion and acceptance for others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I interact well with colleagues or peers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understand myself well	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am confident	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I stop and think before judging	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understand my emotions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am objective	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

sa2

Over the past year, how often have these statements been true?

Never Sometimes About half the time Most of the time Almost always

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I see my work life as something I have power to affect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can "take a step back" from situations to understand them better	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am content with my work situation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I think about how my personality fits with my work role	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understand how I work within a team	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have changed the way I work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I take control of my work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I recognize the stress and worry in my current work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I think about how as colleagues or peers we interact with each other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Over the past year, how often have these statements been true?

	Never	Sometimes	About half the time	Most of the time	Almost always
I feel vulnerable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel exposed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I find making changes is difficult and scary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel guilty for criticizing others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel my emotions deeply	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I find it scary to try something new or step out of what I know.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have had to revisit difficult past experiences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

qol

When you teach and coach people you have direct contact with their lives. As you may have found, your compassion for those you teach and coach can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative. Consider each of the following questions about you and your current work situation.

Please the option that honestly reflects how frequently you experienced these things in the last 6 months.

	Never	Rarely	Sometimes	Often	Very Often
I am happy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I believe I can make a difference through my work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
As a result of my [helping], I have intrusive, frightening thoughts. I feel "bogged down" by the system.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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My work makes me feel satisfied.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am the person I always wanted to be.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I find it difficult to separate my personal life from my life as a [helper].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have thoughts that I am a "success" as a [helper].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Never	Rarely	Sometimes	Often	Very Often
I get satisfaction from being able to [help] people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am proud of what I can do to [help].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Because of my [helping], I have felt "on edge" about various things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel connected to others.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am a very caring person.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am happy that I chose to do this work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am pleased with how I am able to keep up with [helping] techniques and protocols.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Never	Rarely	Sometimes	Often	Very Often
I am not as productive at work because I am losing sleep over traumatic experiences of a person I[help].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I like my work as a [helper].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

111

I jump or am startled by unexpected sounds.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am preoccupied with more than one person I [help].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have beliefs that sustain me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel depressed because of the traumatic experiences of the people I [help].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel invigorated after working with those I [help].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Never	Rarely	Sometimes	Often	Very Often
I have happy thoughts and feelings about those I [help] and how I could help them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel as though I am experiencing the trauma of someone I have [helped].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can't recall important parts of my work with trauma victims.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I avoid certain activities or situations because they remind me of frightening experiences of the people I [help].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel worn out because of my work as a [helper].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I think that I might have been affected by the traumatic stress of those I [help]. I feel trapped by my job as a [helper].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel overwhelmed because my case [work] load seems endless.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Annual Family Interest Survey

Our goal is to provide a program that you, your child, and family will find rewarding, useful and enjoyable.

Parents we would love to hear from you. Please take a few minutes to provide some feedback in order to improve our program.

My child attends: *(check as many as applicable)*

Savoy Champaign Urbana Rantoul West Champaign Home Based Family Child Care

A. Social & Emotional Well - Being

1. My child is learning to interact and problem solve.

Strongly disagree Disagree Neutral Agree Strongly agree
1-----2-----3-----4-----5

2. My child has a good connection with their teacher.

Strongly disagree Disagree Neutral Agree Strongly agree
1-----2-----3-----4-----5

3. My child feels comfortable and safe in the classroom.

Strongly disagree Disagree Neutral Agree Strongly agree
1-----2-----3-----4-----5

4. My child is learning self-control and calming skills.

Strongly disagree Disagree Neutral Agree Strongly agree
1-----2-----3-----4-----5

B. Educational Skills (such as counting, measuring, reading, writing, the alphabet, words, and stories)

5. My child has grown in his/her educational skills.

Strongly disagree Disagree Neutral Agree Strongly agree
1-----2-----3-----4-----5

6. My child's love for reading has grown.

Strongly disagree 1-----2-----3-----4-----5	Disagree	Neutral	Agree	Strongly agree
7. I enjoy helping with my child's educational goals.				
Strongly disagree 1-----2-----3-----4-----5	Disagree	Neutral	Agree	Strongly agree

C. Healthy Eating Habits and Dental Care

8. Health screenings results have been explained to me (<i>vision, hearing, dental</i>)				
Strongly disagree 1-----2-----3-----4-----5	Disagree	Neutral	Agree	Strongly agree
9. The staff keeps me updated about my child's physical health and well-being.				
Strongly disagree 1-----2-----3-----4-----5	Disagree	Neutral	Agree	Strongly agree
10. My child's meals are nutritious, and I have access to the menu.				
Strongly disagree 1-----2-----3-----4-----5	Disagree	Neutral	Agree	Strongly agree

D. Healthy and Safe Environment

11. I feel my child is safe in your care.				
Strongly disagree 1-----2-----3-----4-----5	Disagree	Neutral	Agree	Strongly agree
12. I feel welcome in my child's classroom.				
Strongly disagree 1-----2-----3-----4-----5	Disagree	Neutral	Agree	Strongly agree
13. The classroom is clean, and equipment and toys are appropriate and safe.				
Strongly disagree 1-----2-----3-----4-----5	Disagree	Neutral	Agree	Strongly agree
14. My child plays, runs and climbs daily.				
Strongly disagree 1-----2-----3-----4-----5	Disagree	Neutral	Agree	Strongly agree

E. Family Support Services

15. My Family Advocate/Home Visitor/Mentor has helped us set family goals.

Strongly disagree Disagree Neutral Agree Strongly agree
 1-----2-----3-----4-----5

16. Staff shares positive comments about my child.

Strongly disagree Disagree Neutral Agree Strongly agree
 1-----2-----3-----4-----5

17. Staff encourages parents/guardians to participate in the program.

Strongly disagree Disagree Neutral Agree Strongly agree
 1-----2-----3-----4-----5

18. I have been informed about the Policy Council and how to join.

Strongly disagree Disagree Neutral Agree Strongly agree
 1-----2-----3-----4-----5

19. I sense my family's culture is valued and respected by EHS/HS staff.

Strongly disagree Disagree Neutral Agree Strongly agree
 1-----2-----3-----4-----5

20. The staff listens to my concerns and works to meet my family's needs.

Strongly disagree Disagree Neutral Agree Strongly agree
 1-----2-----3-----4-----5

21. Staff has talked with me about stress and how to find support.

Strongly disagree Disagree Neutral Agree Strongly agree
 1-----2-----3-----4-----5

22. Staff shares affordable family events with me.

Strongly disagree Disagree Neutral Agree Strongly agree
 1-----2-----3-----4-----5

23. My family has transportation to get my child to and from school.

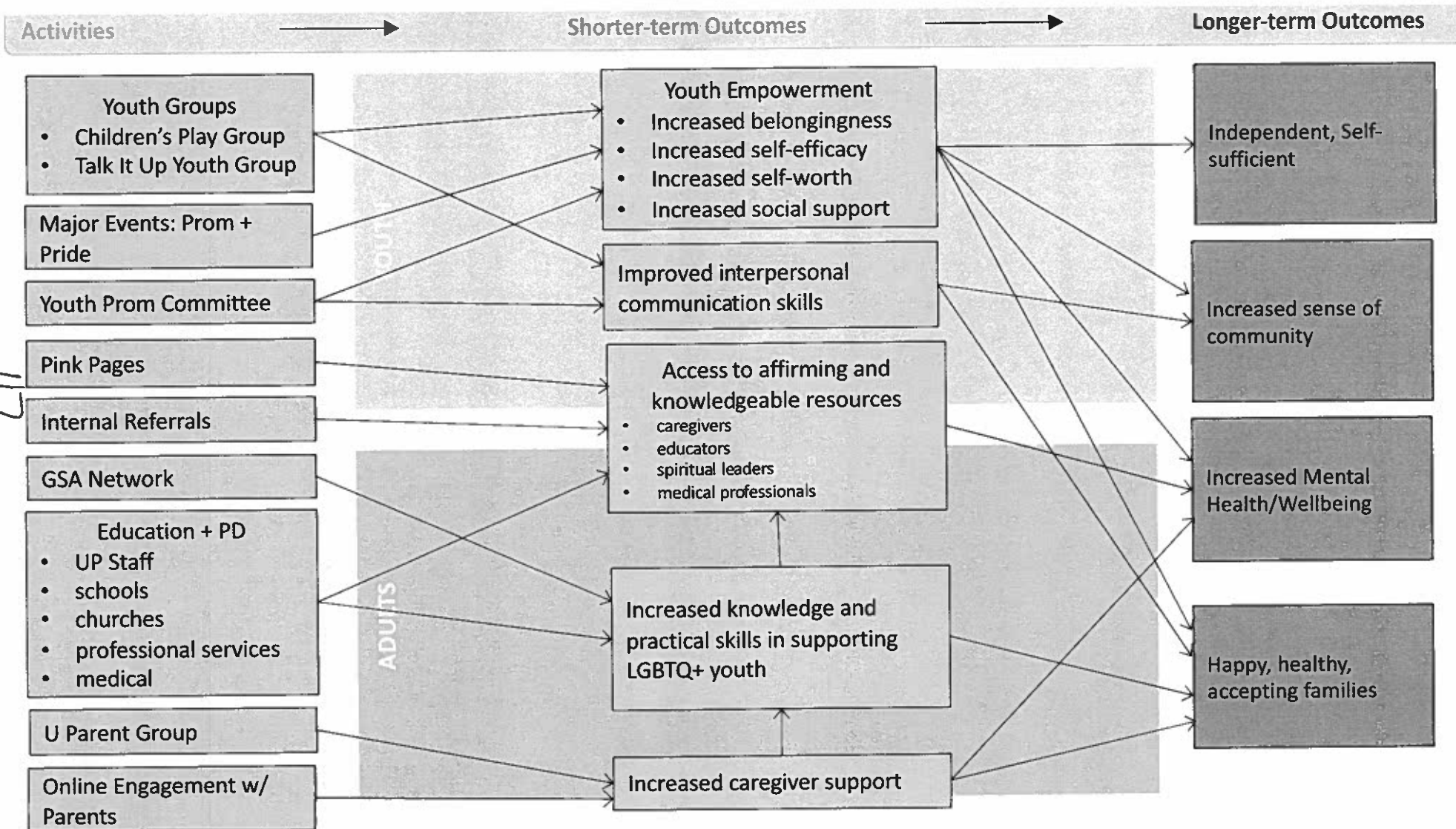
Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1-----	-----2-----	-----3-----	-----4-----	-----5
24. Overall, I am happy with my child's experience with this program.				
Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1-----	-----2-----	-----3-----	-----4-----	-----5
25. Overall, I am satisfied with the amount of contact and engagement I have had with staff.				

F. Additional feedback

We are always looking for new and better ways to involve you in your child's learning and to engage with parents and families. Do you have any suggestions for improvement?

Thank you for your time!

If you have any comments or suggestions, please write them below.



Uniting Pride Youth Survey

Thanks for piloting our survey! Please check what time it is or start a timer, then answer the questions to the best of your ability. We will not be using any of your answers this time, right now we're curious to see how taking this survey feels, if the questions make sense, and how long it takes you to do this.

1. Case Number (First three letters of your last name, First three letters of your first name. Harry Potter would be POTHAR)

2. Are you a new member, or returning member?

New Member

Returning Member

Section
I

For the following questions, please rate your honest response on a scale of 1 (Not at all) to 5 (A great deal)
There are no right or wrong answers.

3. How much do you feel that an LGBTQ+ community exists?

1 2 3 4 5

Not at all A great deal

4. How often do you feel...

	Not at all	2	3	4	A great deal
that you are a member of the LGBTQ+ community?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
like you belong in the LGBTQ+ community?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
a part of the LGBTQ+ community?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. How much do ...

	Not at all	2	3	4	A great deal
you feel able to influence the actions, thoughts, and feelings of other LGBTQ+ people?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
other LGBTQ+ people influence your thoughts and actions ?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
you feel your opinion matters to other LGBTQ+ people ?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
the opinions of other LGBTQ+ people matter to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. In general, how...

(For these questions, please consider all the LGBTQ people you have met in many places, including where you live and work.)

	Not at all	2	3	4	A great deal
friendly do you feel members of the LGBTQ+ community are to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
friendly are you to other members of the LGBTQ+ community?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
well do LGBTQ+ people get along?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. What settings or group of people give you a sense of belonging?

For each of the following, rate how much you feel you belong on the 5-point scale. If it does not apply to you, mark N/A.

	N/A	Not at all	2	3	4	A great deal
My home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My extended family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My religious institution (e.g., church, mosque, etc)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My extra-curricular groups AT school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My extra-curricular groups OUTSIDE of school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In my town	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In public	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
At work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In youth group	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the GSA	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. If there were an LGBTQ+ space in your next step, would you use it?

Yes

No

9. Explain your answer:

Section II

10. In times of crisis or distress, I have at least one adult that I can speak to.

Yes

No

11. How many adults could you go to for support in times of crisis or distress?

12. In times of crisis or distress, I have at least one peer or friend that I can speak to.

Yes

No

13. How many peers could you go to for support in times of crisis or distress?

14. Rate how much you agree or disagree with each statement below.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
I feel comfortable disclosing my identity to others.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My family really tries to help me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I get the emotional help and support I need from my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My friends really try to help me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can count on my friends when things go wrong.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is a special person in my life who cares about my feelings.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Section III

15. Below is a list of statements dealing with your general feelings about yourself. Please indicate how strongly you agree or disagree with each statement.

	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
On the whole, I am satisfied with myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
At times I think I am no good at all.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I have a number of good qualities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am able to do things as well as most other people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel I do not have much to be proud of.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I certainly feel useless at times.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I'm a person of worth, at least on an equal plane with others.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I wish I could have more respect for myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
All in all, I am inclined to feel that I am a failure.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I take a positive attitude toward myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Section IV

16. Rate how true each statement is on the scale from 1 (Not at all true) to 5 (Exactly true).

	Not at all true	Hardly true	Moderately true	Very true	Exactly true
I can always manage to solve difficult problems if I try hard enough	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If someone opposes me, I can find the means and ways to get what I want.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It is easy for me to stick to my aims and accomplish my goals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am confident that I could deal efficiently with unexpected events.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Thanks to my resourcefulness, I know how to handle unforeseen situations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can solve most problems if I invest the necessary effort.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can remain calm when facing difficulties because I can rely on my coping abilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I am confronted with a problem, I can usually find several solutions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If I am in trouble, I can usually think of a solution	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can usually handle whatever comes my way.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Section V

Youth Group Feedback

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17. What was your favorite activity or discussion in Youth Group?

18. What was your least favorite activity or discussion in Youth Group?

19. Have you made any new friends from group?

Yes

No

20. We want to make sure group is inclusive and accessible for people of all identities. Are there any discussions or topics that are important to you that were not addressed in group?

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21. Do you have any suggestions for how to improve group?

22. Final thoughts or comments you want the adults in group to know?

Feedback on the Survey!

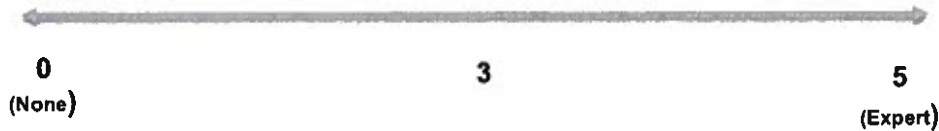
Stop your timer or check the time now

23. How long did it take you to do this survey?

24. Did any sections or questions not make sense?

**Uniting Pride
Educational Workshop
Pre-test**

Rate your current level of knowledge or awareness of LGBTQ populations on a scale from 0 (none) to 5 (expert)



In what type of setting will you incorporate the skills learned from this workshop?

(Check all that apply)

- Educational
- Religious
- Medical
- Mental health
- Home
- Corporate
- Social services

In what zip code do you provide these services? _____

How would you rate the social climate for LGBTQ individuals (and their families) within your organization?

- Hostile
- Tolerant
- Supportive
- Please explain your rating:

Thinking about the residential community you serve overall, how would you rate the social climate for LGBTQ individuals (and their families)?

- Hostile
- Tolerant
- Supportive

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Please explain your rating:

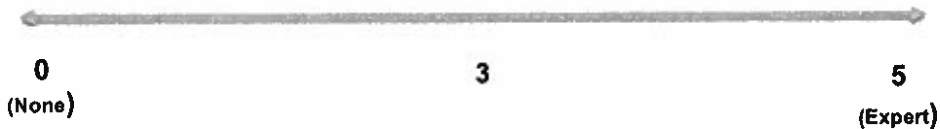
Have you attended a Uniting Pride training or workshop in the past? Yes/No

Are you completing this workshop as a work requirement? Yes/No

What other questions do you have before starting this training? _____

**Uniting Pride
Educational Workshop
Post-test**

Now that you have participated in the workshop, please rate your current level of knowledge or awareness of LGBTQ populations on a scale from 0 (none) to 5 (expert)



Please rate your level of confidence for each of the following:

For each of the following statements, mark the column that best indicates the level of agreement.

I feel confident in my ability to:	Strongly Agree (5)	Somewhat Agree	Neither Agree or Disagree	Somewhat Disagree	Strongly Disagree (0)
Use the appropriate terminology regarding LGBTQ identities					
Access and connect others to resources for LGBTQ+ people					

UI Program Evaluation Team
CCMHB Targeted Programs by Agency/Program year

PY2021 CCDDDB Eligible Agencies

CU Autism Network

PO Box 17024, Urbana, IL 61803

(412) 953-8434

President: Julie Palermo (jpalermo.cuan@gmail.com)

Community Choices

44 E. Main St., Ste. 419, Champaign, IL 61820

(217) 621-1090

Executive Director: Rebecca Obuchowski (becca.communitychoices@gmail.com)

C-U Able

2101 Laurel Park Place, Champaign, IL 61822

(815) 354-2263

President: Meredith Barnes (meredithpbarnes@yahoo.com)

Developmental Services Center (DSC)

1304 W. Bradley Ave. Champaign, IL 61822

(217) 356-9176

Executive Director: Danielle Matthews (dmatthews@dsc-illinois.org)

Down Syndrome Network (DSN)

PO Box 1143 Champaign, IL 61824

(217) 766-1044

President: Connie Hilson (chilson@champaigndsn.org) (president@champaigndsn.org)

Individual Advocacy Group, Inc.

1289 Windham Parkway

Romeoville, IL 60446

630-759-0201

Executive Director: Dr. Charlene Bennett (cbennett@individualadvocacygroup.com)

Persons Assuming Control of their Environment (PACE)

1317 E. Florida Ave., Urbana, IL 61801

344-5433 TTY: 344-5024

Executive Director: Nancy McClellan-Hickey (nmch@pacecil.org)

Regional Planning Commission (RPC)/Headstart

Brookens Administrative Building

1776 E. Washington St., Urbana, IL 61802

328-3313

Early Childhood Division Director: Brandi Granse (bgranse@ccrpc.org)

Italicized Agencies also have CCMHB funded program

UI Program Evaluation Team
CCMHB Targeted Programs by Agency/Program year

PY17

Community Choices – Connect program

44 E. Main St., Ste. 419, Champaign, IL 61820

621-1090

Executive Director: Rebecca Obuchowski becca.communitychoices@gmail.com

Rosecrance – Criminal Justice program

2302 Moreland Boulevard., Champaign, IL 61822

398-8080 or 373-2431

Executive Director: Chris Gleason cgleason@rosecrance.org

Clinical Director: Juli Kartel jkartel@rosecrance.org

Family Services – Senior Counseling & Advocacy program

405 S. State St., Champaign, IL 61820

352-0099 or 352-5100

Executive Director: Sheryl Bautch sbautch@familyservicecc.org

Senior Resource Center Director: Rosanna McLain rmmclain@familyservicecc.org

Promise Healthcare - Wellness & Justice program

819 Bloomington Rd., Champaign, IL 61820

356-1558

Executive Director: Nancy Greenwalt ngreenwalt@promisehealth.org

PY18

CCRPC - Youth Assessment Center/MHB program

1776 E. Washington St., Urbana, IL 61802

328-3313

Human Services Director: Lisa Benson lbenson@ccrpc.org

Courage Connection – Courage Connection program

508 E. Church St., Champaign 61820

352-7151

Contact: Michael Ujcich mujcich@courageconnection.org

DREAAM House – DREAAM program

POB 11 Champaign, IL 61824

548-4346 or 560-2194

Executive Director: Tracy Dace tracy@dreaaam.org

GROW in Illinois – Peer Support program

POB 3667, Champaign IL 61826

352-6989

President: Chris Stohr (cstohr28@gmail.com)

PY19

Community Service Center of Northern Champaign County - Resource Connection program

520 E. Wabash, Rantoul, IL 61866

893-1530

Executive Director: Andy Kulczycki (evergreen3069@yahoo.com)

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UI Program Evaluation Team
CCMHB Targeted Programs by Agency/Program year

CUAP - TRUCE program

201 W Springfield Ave # 702, Champaign, IL 61820
359-0998

Director: Patricia Avery
patricavery@gmail.com

Rattle the Stars - Youth Suicide Prevention Education program

4002 Tallgrass Dr. Champaign, IL 61822
372-4479

ED: Kim Bryan (kbryan2@illinois.edu)

PY20 - CCMHB

Champaign County Head Start/Early Head Start – Early Childhood Mental Health Services program

Brookens Administrative Building
1776 E. Washington St., Urbana, IL 61802
328-3313

Early Childhood Division Director: Brandi Granse (bgranse@ccrpc.org)

Crisis Nursery (CN) – Beyond Blue Champaign County program

1309 W. Hill St., Urbana, IL 61801
337-2731

Executive Director: Stephanie Record
(srecord@crisisnursery.net)

Uniting in Pride Center (The UP Center) – Children, Youth, & Families program

YMCA Building 1001 S. Wright St. Champaign 61821
Contact: William Blanchard, Board President
board@unitingpride.org
550-4248

PY20 – CCDDDB

Community Choices – Community Living program

44 E. Main St., Ste. 419, Champaign, IL 61820
621-1090

Executive Director: Rebecca Obuchowski becca.communitychoices@gmail.com

Developmental Services Center (DSC) – Apartment Services program

1304 W. Bradley Ave. Champaign, IL 61822
356-9176

ED: Danielle Matthews (dmatthews@dsc-illinois.org)

UI Program Evaluation Team
CCMHB Targeted Programs by Agency/Program year

PY2021 CCMHB Eligible Agencies (no prior Targeted Program)

Champaign County Christian Health Center
POB 5005 Champaign, IL 61825
766-6425
ED: Crystal Hogue ccchcdirector@outlook.com

Champaign County Health Care Consumers
44 E. Main St., Champaign 61820
352-6533
ED: Claudia Lenhoff (claudia@shout.net)

Children's Advocacy Center (CAC)
201 W. Kenyon Rd., Champaign, IL 61820
384-1266 or 778-6448
ED: Kari May (kmay@co.champaign.il.us)

Cunningham Children's Home (CCH)
1301 N.Cunningham Ave.
Urbana, IL 61802
367-3728
Director: Pat Ege
pege@cunninghamhome.org

Don Moyer Boys & Girls Club (DMBGC)
201 E. Park St. POB 1396 Champaign 61824-1396
355-5437
Executive Director: Sam Banks
sbanks@dmbgc-cu.org

FirstFollowers
Bethel A.M.E. Church
401 E. Park Street, Champaign, IL 61820 or
POB 8923 Champaign, IL 61826
FirstFollowersCU@gmail.com
Director: Marlon Mitchell
marlonmitchell@sbcglobal.net

Mahomet Area Youth Club (MAYC)
700 W. Main St., Mahomet, IL 61853
590-2860
Executive Director: Sara Balgoyen
sara@mahometyouth.org

NAMI
POB 3552 Champaign, IL 61826
Contact: Nancy Carter
Nancycarter93@sbcglobal.net

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UI Program Evaluation Team
CCMHB Targeted Programs by Agency/Program year

RACES

301 S. Vine St, Ste. 211 Urbana, IL 61801

344-6298

Director: Adelaide Aime

aime@cu-races.org

Refugee Assistance Center (RAC)

201 W. Kenyon Rd., Suite 4D, Champaign 61820

344-8455

Director: Lisa Wilson (ecirmac@hotmail.com)

Urbana Neighborhood Connections Center (UNCC)

1401 E Main St, Urbana, IL 61801

954-1749

Director: Janice Mitchell

janice@urbanaconnectionscenter.org

UI Program Evaluation Team
CCMHB Targeted Programs by Agency/Program year

PY2021 CCDDDB Eligible Agencies

CU Autism Network

PO Box 17024, Urbana, IL 61803

(412) 953-8434

President: Julie Palermo (jpalamo.cuan@gmail.com)

Community Choices

44 E. Main St., Ste. 419, Champaign, IL 61820

(217) 621-1090

Executive Director: Rebecca Obuchowski (becca.communitychoices@gmail.com)

C-U Able

2101 Laurel Park Place, Champaign, IL 61822

(815) 354-2263

President: Meredith Barnes (meredithpbarnes@yahoo.com)

Developmental Services Center (DSC)

1304 W. Bradley Ave. Champaign, IL 61822

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Executive Director: Danielle Matthews (dmatthews@dsc-illinois.org)

Down Syndrome Network (DSN)

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(217) 766-1044

President: Connie Hilson (chilson@champaigndsn.org) (president@champaigndsn.org)

Individual Advocacy Group, Inc.

1289 Windham Parkway

Romeoville, IL 60446

630-759-0201

Executive Director: Dr. Charlene Bennett (cbennett@individualadvocacygroup.com)

Persons Assuming Control of their Environment (PACE)

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344-5433 TTY: 344-5024

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Regional Planning Commission (RPC)/Headstart

Brookens Administrative Building

1776 E. Washington St., Urbana, IL 61802

328-3313

Early Childhood Division Director: Brandi Granse (bgranse@ccrpc.org)

Italicized Agencies also have CCMHB funded program

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8.B.



DECISION MEMORANDUM

DATE: September 23, 2020
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Lynn Canfield, Executive Director
SUBJECT: CILA Update and Title Transfers

Background:

During 2014, the Ligas Consent Decree compelled Illinois to decrease its reliance on segregated, institutional care, and a “Rebalancing” initiative offered people with Intellectual/Developmental Disabilities the opportunity to move out of large institutions into smaller, community-based settings, including CILAs (Community Integrated Living Arrangements). This created financial incentives for CILA providers to serve people moving from those larger settings. A major concern then, and now, was insufficient provider capacity.

In this context and in response to unmet local need, the CCDDDB and CCMHB collaborated on the development of additional CILA housing. Request for Proposals #2014-001 “Community Integrated Living Arrangement Services for the County of Champaign” was issued on May 22, 2014, to purchase homes suitable for up to four individuals each and to identify a provider who would serve people who: originated from the County but now lived far away; were living with their families in Champaign County and waiting for a local placement; or could be brought through the rebalancing effort with additional funding to increase revenue for the good of the whole. Individual Advocacy Group (IAG) was selected as the provider, and two houses were purchased and brought into compliance with State Rules governing CILA use. The additional time and expense associated with these improvements precluded the purchase of subsequent houses. Since then, IAG has provided services to residents of the homes, with Joel Ward Homes as property manager. IAG also serves County residents in privately owned homes, offering day program and traditional, host home, and family CILA services. The scale of operations is small enough to be difficult to sustain at the state’s Medicaid Waiver rates, and potential solutions have not taken hold. 2020 lease terms include reduced rent to stabilize operations on behalf of the residents currently served, but IAG has committed only through the end of January 2021. COVID-19 deepened the threats to I/DD services across the state and country, and this summer, the local homes lost a valuable staff member to gun violence.

Update:

Attorneys Dan Walsh, representing the Champaign County Mental Health Board (CCMHB), and Barbara Mann, for the Champaign County Developmental Disabilities Board (CCDDDB), have met with me to discuss statutory and practical considerations of the CILA Facilities project. Among several issues, they agree that a revision to the Community Mental Health Act changed

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the CCMHB's authority to own facilities for provision of services, whereas the Community Care for Persons with Developmental Disabilities Act clearly identifies such authority for the CCDDDB. The amended Intergovernmental Agreement between the Boards describes equal cost-sharing and decision authority over the project, so that transfer of the titles is the only recommended change to this arrangement. We have reviewed the lease agreements and other contracts, for insurance and for property management. Given the uncertainty of the future of CILA services, the attorneys offered suggestions for possible next steps, including model RFPs if a new provider is needed.

Request for Board Action:

If each Board agrees, the attorneys will complete transfer of titles on the two properties currently used as CILA homes, from the Champaign County Mental Health Board to the Champaign County Developmental Disabilities Board.

If authorized, and once the transfers are completed, related agreements for services should be revised to name the CCDDDB as owner. In addition, a lower rental amount may be negotiated if IAG agrees to perform some maintenance tasks, lowering property management costs.

In the event IAG elects not to enter into lease agreements in 2021, the Boards may choose to sell the properties or to issue a new Request for Proposals, to identify a similar provider to continue offering CILA services in these houses. Because the RFP process takes some time, staff would prepare relevant documents and timeline upon direction from the Boards.

Budget Impact: neutral.

Decision Section:

Motion to authorize transfer of title for each property from the CCMHB to the CCDDDB as described above, pending approval by the CCDDDB.

- Approved _____
- Denied _____
- Modified _____
- More information is requested _____

Motion to authorize the CCDDDB/CCMHB Executive Director to revise the related agreements as described above, pending similar action by the CCDDDB.

- Approved _____
- Denied _____
- Modified _____
- More information is requested _____

Motion to authorize the CCDDDB/CCMHB Executive Director and staff to prepare a Request for Proposals to continue the CILA Facilities project, pending similar direction from the CCDDDB.

- Approved _____
- Denied _____
- Modified _____
- More information is requested _____

J.C.



BRIEFING MEMORANDUM

DATE: September 23, 2020
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Mark Driscoll
SUBJECT: FY 2019 – 2021 Three Year Plan with FY2021 Objectives (DRAFT)

Background: The coming year, 2021, will be the third year of the current Champaign County Mental Health Board three-year plan. Accompanying the initial release of that plan in 2018 was a community needs assessment incorporating results from an online survey with pertinent information gleaned from multiple local, state, and federal sources. Additional information on emerging issues is shared over the course of the year and term of the plan. This can be as presentations during meetings or study sessions, research or other professional articles, materials prepared by staff, or public or agency comment.

Beyond these Board specific activities is the involvement of CCMHB/DDB Executive Director Lynn Canfield in the Regional Vermilion-Champaign Executive Committee, a group of representatives from health and behavioral health sectors which have similar requirements to complete community needs assessments and three-year plans. A primary outcome of this work will be the completion of the 2020 Community Health Needs Assessment, more commonly referred to as the CUPHD I-PLAN. Preliminary results of the community survey completed by residents and stakeholders for Champaign County were discussed at a stakeholders meeting in late August. Participants were then asked to prioritize the top five concerns identified by survey respondents (community survey and stakeholder survey). The ranking exercise yielded essentially the same results as three years ago: Behavioral Health (mental health and substance use); Violence (gun violence plus the addition of domestic violence and child abuse), and healthy living (obesity). The final 2020 Community Health Needs Assessment will be available in time to inform development of the next three year plan.

Draft Plan: The Plan with proposed Objectives for FY2021 reflects continued commitment to existing goals and objectives with minor changes proposed. Proposed objectives sustain support for a breadth of services geographically and demographically diverse and that those services be culturally competent. Recognizes the values embodied in the principles of system of care exemplified by the work of the Champaign Community Coalition. Continues to build on criminal justice and mental health initiatives. Maintains the collaboration with the Champaign County Developmental Disabilities Board for integrated planning and coordination of services to persons with intellectual /developmental disabilities. At the same time, the Plan is intended to be responsive to emerging issues.

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Covid-19 has brought forth change in how we live, interact, and serve our communities to an extent one would find hard to imagine just one year ago. The pandemic has demonstrated the value of telehealth and virtual access to services and the opportunities those approaches present while also highlighting challenges associated with accommodating such access. Such technological challenges for providers and consumers alike can be quality of internet service and available bandwidth, appropriate hardware and software, or simply understanding how to effectively use it. The pandemic has also had a disproportionate impact on underserved populations. It therefore seems appropriate to add new objectives to the plan related to the pandemic. Other salient issues and initiatives of the day are reflected in other proposed new objectives.

A copy of the draft Plan is attached. Proposed changes are identified in the following ways. Any new objective or added language under consideration is italicized and underlined. Those objectives or other language proposed to be struck from the plan are lined out.

Next Steps: Following release of the draft Plan to the Board, the document will be disseminated for comment. Staff has reviewed the draft document and will hold further discussions including comments received, prior to preparing the final draft for presentation to the Board.

The updated Three Year Plan will be presented for approval at the November 18, 2020 Board meeting.

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DRAFT – CCMHB September 23, 2020

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
THREE-YEAR PLAN
FOR**

**FISCAL YEARS 2019 - 2021
(1/1/19 – 12/31/2021)**

**WITH
ONE YEAR OBJECTIVES
FOR**

**FISCAL YEAR 2021
(1/1/21 – 12/31/21)**

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CHAMPAIGN COUNTY MENTAL HEALTH BOARD

WHEREAS, the Champaign County Mental Health Board has been established under Illinois Revised Statutes (405 ILCS – 20/Section 0.1 et. seq.) in order to "construct, repair, operate, maintain and regulate community mental health facilities to provide mental health services as defined by the local community mental health board, including services for, persons with a developmental disability or substance use disorder, for residents thereof and/or to contract therefor..."

WHEREAS, the Champaign County Mental Health Board is required by the Community Mental Health Act to prepare a one- and three-year plan for a program of community mental health services and facilities;

THEREFORE, the Champaign County Mental Health Board does hereby adopt the following Mission Statement and Statement of Purposes to guide the development of the mental health plan for Champaign County:

MISSION STATEMENT

The mission of the CCMHB is the promotion of a local system of services for the prevention and treatment of mental or emotional, intellectual or developmental, and substance use disorders, in accordance with the assessed priorities of the citizens of Champaign County.

STATEMENT OF PURPOSES

1. To plan, coordinate, evaluate and allocate funds for the comprehensive local system of mental health, intellectual and developmental disabilities, and substance use disorder services for Champaign County.
2. To promote family-friendly community support networks for the at-risk, underserved and general populations of Champaign County.
3. To increase support for the local system of services from public and private sources.
4. To further develop the systematic exchange of information about local services and needs between the public/private service systems and the CCMHB.

In order to accomplish these purposes, the Champaign County Mental Health Board must collaborate with the public and private sectors in providing the resources necessary for the effective functioning of the community mental health system.

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SYSTEMS OF CARE

Goal #1: Support a continuum of services to improve the quality of life experienced by individuals with mental or emotional disorders, substance use disorders, or intellectual and/or developmental disabilities and their families residing in Champaign County.

Objective #1: Expand use of evidence-informed, evidence-based, best practice, recommended, and promising practice models appropriate to the presenting need in an effort to improve outcomes for individuals across the lifespan and for their families and supporters. (Allocation Priority/Criteria Objective)

Objective #2: Promote wellness for people with mental illnesses, substance use disorders, or intellectual and/or developmental disabilities to prevent and reduce early mortality, through support services including access to services addressing basic needs, enrollment in benefit plans and coordinated access to primary care. (Allocation Priority/Criteria Objective)

Objective #3: Support development or expansion of residential and employment supports for persons with behavioral health diagnosis not covered under expansion of Medicaid or the Affordable Care Act. (Allocation Priority/Criteria Objective)

Objective #4: Support broad based community efforts to prevent opiate overdoses and expand treatment options. (Allocation Priority/Criteria Objective)

Objective #5: Build resiliency and support recovery e.g. Peer Supports, outside of a clinical setting. (Allocation Priority/Criteria Objective)

Objective #6: Build evaluation capacity of contracted providers utilizing expertise of evaluators from the Department of Psychology at the University of Illinois to further positive outcomes of those engaging in funded services. (Policy Objective)

Objective #7: Increase providers understanding of the value of setting internal goals for advancing program performance outcome evaluation. (Policy Objective)

Objective #8: Support targeted efforts for workforce recruitment and retention initiatives, such as scholarships, loan repayment, and assistance with professional licensure fees, with level of assistance linked to length of service commitment. (Allocation Priority/Criteria Objective)

Objective #9: Enable providers to implement flexible responses to operations during the COVID-19 pandemic, such as supporting telehealth or other virtual service options, to maintain access and engagement with clients and community. (Collaboration/Coordination Objective)

Goal #2: Sustain commitment to addressing health disparities experienced by underrepresented and diverse marginalized populations.

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Objective #1: Support culturally responsive and family driven support networks for underrepresented populations, underserved populations, and general populations of Champaign County. (Allocation Priority/Criteria Objective)

Objective #2: Provide technical assistance in support of continuous improvement of cultural and linguistic competence plans to meet the needs of the population served. (Collaboration/Coordination Objective)

Objective #3: Encourage providers and other community-based organizations to allocate resources to provide training, seek technical assistance, provide language access and communication assistance, and pursue other professional development activities for staff and governing or advisory boards to advance cultural and linguistic competence. (Allocation Priority/Criteria Objective)

~~Objective #4: Use the Culturally and Linguistically Appropriate Services Standards (CLAS) as a blueprint to strengthen funded agencies' Cultural and Linguistic Competence. (Policy Objective)~~

Objective #5: Where families and communities are disproportionately impacted by incarceration, encourage the development of social networks and improved access to resources. (Policy Objective)

Objective #6: Address the needs of residents of rural areas and encourage greater engagement by community-based organizations. (Policy Objective)

Objective #7: Review data on the impact of COVID-19 on Champaign County residents with particular attention to underserved populations and promote provider response to mitigate the adverse impact, as resources allow. (Collaboration/Coordination Objective)

Goal #3: Improve consumer access to and engagement in services.

~~Objective #1: Encourage development of collaborative agreements between providers to increase or maintain access and coordination of services for consumers throughout Champaign County. (Collaboration/Coordination Objective)~~

Objective #2: Participate in various coordinating councils whose missions align with the needs of the populations of interest to the Board with the intent of strengthening coordination between providers in the delivery of services. (Collaboration/Coordination Objective)

Objective #3: Explore at the Board level potential for collaboration on issues of mutual interest with the C-U Public Health District and the Champaign County Board of Health. (Collaboration/Coordination Objective)

Objective #4: Engage with CUPHD, United Way, Carle Foundation Hospital, and OSF in the collaborative planning process for the next Community Health Improvement Plan. (Collaboration/Coordination Objective)

Objective #5: Increase awareness of community services and access to information on when, where, and how to apply for services. (Collaboration/Coordination Objective)

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Objective #6: Explore feasibility of co-locating services in neighborhood community centers to reach underserved and underrepresented populations, including rural areas. (Collaboration/Coordination Objective)

Goal #4: Continue the collaborative working relationship with the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDDB).

Objective #1: Coordinate integration, alignment, and allocation of resources with the CCDDDB to ensure the efficacious use of resources within the intellectual/developmental disability (I/DD) service and support continuum. (Allocation Priority/Criteria Objective)

Objective #2: Assess alternative service strategies that empower people with I/DD and increase access to integrated settings as exemplified by the collaborative approach to the Employment First Act. (Policy Objective)

Objective #3: With the CCDDDB, continue financial commitment to community-based housing for people with I/DD from Champaign County and as part of that sustained commitment, review the Community Integrated Living Arrangement (CILA) fund and recommend any changes. (Allocation Priority/Criteria Objective)

Objective #4: Collaborate with the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability on promoting inclusion and respect for people with I/DD. (Collaboration/Coordination Objective)

MULTI-AGENCY INVOLVED YOUTH AND FAMILIES

Goal #5: Building on progress achieved through the six Year Cooperative Agreement between the Federal Substance Abuse and Mental Health Services Administration (SAMHSA), the Illinois Department of Human Services (IDHS), and the Champaign County Mental Health Board (CCMHB), sustain the SAMHSA/IDHS system of care model.

Objective #1: Support the efforts of the Champaign Community Coalition and other system of care initiatives. (Collaboration/Coordination Objective)

Objective #2: Sustain support of Champaign County family-run organizations that incorporate family-driven and youth-guided principles in use of peer support specialists, and other peer-to-peer supports to assist multi-system involved youth and their families (Allocation Priority/Criteria Objective)

Objective #3: Assess the impact of community violence on the children and youth whose families and neighborhoods are most impacted and where indicated, encourage the development of appropriate supports as prevention and early intervention strategies. (Policy Objective)

Objective #4: Promote and support those targeted interventions that specifically address historical trauma experienced by African American and other minority youth disproportionately impacted in multiple systems. (Allocation Priority/Criteria Objective)

Objective #5: Sustain commitment to building systems that are trauma-informed, justice informed, family-driven, youth-guided, and culturally responsive. (Policy Objective)

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Objective #6: Recognizing alignment with the work of the Community Coalition, Support the goals and objectives of the Illinois Criminal Justice Information Authority "Illinois HEALS (Helping Everyone Access Linked Systems) Action Plan" and support broad based efforts to secure funding as available through Illinois HEALS. (Collaboration/Coordination Objective)

Objective #7: Review research on racial trauma as a mental health issue and develop an appropriate response. (Policy Objective)

CRIMINAL JUSTICE AND MENTAL HEALTH SYSTEM COLLABORATION

Goal #6: Divert from the criminal justice system, as appropriate, persons with behavioral health needs or intellectual/developmental disabilities.

Objective #1: Continue involvement in the Crisis Intervention Team Steering Committee in support of increased collaboration between law enforcement and crisis service providers on implementing mobile crisis response in the community. (Collaboration/Coordination Objective)

Objective #2: Sustain efforts to engage persons with behavioral health diagnoses re-entering the community from jail or prison or with recent involvement with the criminal justice system, in treatment and other support services such as the Champaign County Problem Solving Court and reentry services. (Allocation Priority/Criteria Objective)

Objective #3: Support integrated planning and service coordination for adults involved in the criminal justice system through participation in the Champaign County Reentry Council or similar body to address needs identified in the Sequential Intercept Map gaps analysis. (Collaboration/Coordination Objective)

Objective #4: Through the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD), in its partnership with the National Association of Counties (NACo), use and promote technical assistance and support through collaborative and mentorship opportunities aimed at improving outcomes for those with behavioral health needs and justice system involvement. (Collaboration/Coordination Objective)

Goal #7: In conjunction with the Champaign County Sheriff's Office and other community stakeholders, pursue a continuum of services as an alternative to incarceration and/or overutilization of local Emergency Departments for persons with behavioral health needs or developmental disabilities.

Objective #1: Support initiatives providing housing and employment supports for persons with a mental illness, substance use disorder, and/or intellectual and developmental disabilities through the Champaign County Continuum of Care or other local collaboration. (Allocation Priority/Criteria Objective)

Objective #2: Identify options for developing jail diversion services to provide behavioral health assessments, crisis stabilization and detoxification from alcohol and/or other substances as may be necessary to serve Champaign County. (Collaboration/Coordination Objective)

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Objective #3: Support the "One Door" initiative or similar service design for mobile crisis response, assessment, referral, and post-crisis support and engagement. (Allocation Priority/Criteria Objective, Collaboration/Coordination Objective)

Goal #8: Support interventions for youth who have juvenile justice system involvement to reduce contact with law enforcement or prevent deeper penetration into the system.

~~Objective #1: Support planning process to select and implement a model with proven effectiveness engaging youth and families. (Allocation Priority/Criteria Objective)~~

Objective #2: Through participation on the Youth Assessment Center Advisory Board, advocate for community and education-based interventions contributing to positive youth development and decision-making. (Collaboration/Coordination Objective)

Objective #3: Through participation and engagement in the Champaign Community Coalition and other community focused initiatives, promote and encourage multi-system collaborative approaches for prevention and reduction of youth violence. (Collaboration/Coordination Objective)

Objective #4: Utilize the principles from "Models for Change" to reduce the disproportionate minority contact with law-enforcement and involvement with the juvenile justice system. (Policy Objective)

COMMUNITY ENGAGEMENT & ADVOCACY

Goal #9: Address the need for acceptance, inclusion and respect associated with a person's or family members' mental illness, substance use disorder, intellectual and/or developmental disability through broad based community education efforts to increase community acceptance and positive self-image.

Objective #1: Continue support for and involvement in efforts to promote inclusion and challenge stigma and discrimination, such as the disABILITY Resource Expo: Reaching Out for Answers, Ebertfest, National Children's Mental Health Awareness Day, and other related community education events. (Collaboration/Coordination Objective)

Objective #2: Promote substance use disorder prevention initiatives as a community education tool targeting youth and young adults. (Collaboration/Coordination Objective)

Objective #3: Participate in behavioral health community education initiatives, such as National Depression Screening Day, to encourage individuals to be screened and seek further assistance where indicated. (Collaboration/Coordination Objective)

Objective #4: Encourage and support efforts to more fully integrate people with behavioral health disorders and/or intellectual and/or developmental disabilities into community life in Champaign County. (Allocation Priority/Criteria Objective)

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Objective #5: Support Mental Health First Aid for Adults and Youth to encourage community members to provide first responder support for people that may be experiencing signs and symptoms of a crisis. (Collaboration/Coordination Objective)

Objective #6: Support development of web-based resources to make information on community services more accessible and user-friendly.

Goal #10: Engage with other local, state, and federal stakeholders on emerging issues.

Objective #1: Monitor implementation of State Plan amendments, 1115 waiver pilot projects, and Managed Care by the State of Illinois, and advocate through active participation in the Association of Community Mental Health Authorities of Illinois (ACMHAI) and other statewide associations and advocacy groups. (Collaboration/Coordination Objective)

Objective #2: Track state implementation of class action suit settlements involving persons with intellectual and/or developmental disabilities or mental illness, e.g. Ligas Consent Decree and Williams Consent Decree, and advocate for the allocation of state resources sufficient to meet needs of clients returning to home communities or seeking fuller integration in their communities. (Policy Objective)

Objective #3: Maintain active participation in the National Association of County Behavioral Health and Developmental Disability Directors (NACHBDD), National Association of Counties (NACo), and like-minded national organizations, to understand trends, best practices, and innovations and to advocate at the federal level. (Collaboration/Coordination Objective)

Objective #4: Monitor State actions to implement terms of the NB vs Norwood Consent Decree to improve access and treatment to children and youth for community based mental health and behavioral health care under the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) provisions of the Medicaid Act. (Policy Objective)

Objective #5: Advocate at the state and federal level on the issue of behavioral health and intellectual and developmental disability workforce shortages. (Policy Objective)

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10.A.



DECISION MEMORANDUM

DATE: September 23, 2020
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Lynn Canfield, Executive Director
SUBJECT: FY2021 Champaign County CCMHB and CILA Budget Submissions

Overview:

This memorandum presents revised budget information for the Champaign County Mental Health Board (CCMHB), Champaign County Developmental Disabilities Board (CCDDB), and CILA Facilities Funds for County Fiscal Year 2021 (January 1 through December 31, 2021), for approval by the Board.

The Boards each approved initial drafts at their July meetings. The present drafts incorporate advice and information from the County Executive and Deputy Director of Finance, with newer revenue and cost estimates, and were submitted for information to the Champaign County Board for August 25 budget hearing. Final budgets will be presented during their appropriations process in November.

Attached are revised proposed 2021 CCMHB, CCDDB, and CILA Fund Budgets, with background details including comparisons of proposed 2021, 2020, and actual revenues and expenditures for fiscal years 2014 through 2019. The Intergovernmental Agreement between the CCMHB and CCDDB defines cost sharing and CILA ownership, among other arrangements. The CILA Fund Budget is under joint authority of the Boards.

Highlights of All Draft Versions:

- Projected 2021 property tax revenue based on a lower 2020 amount than originally budgeted, due to return of reserved hospital revenue amounts (both boards).
- Miscellaneous revenue includes excess revenue returned by agencies (both boards).
- Fund balances contain small amounts to be paid in relation to the hospital tax ruling, but these amounts are no longer reserved (most have been returned during 2020).
- Office rental and computer services expenditures adjusted to conform with practices of the County Auditor's Office.
- Majority of Expo Coordinator contracts are charged to Expo expense line, with a small portion in Professional Services or Public Relations for special projects. Prior to 2020, these had been charged to Professional Services, and Expo revenues and expenses were combined with other revenue and Public Relations costs, respectively (CCMHB budget).

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- Both Boards participate with United Way to purchase 211 service and in the UIUC Evaluation Capacity Project, shared as other costs, 57.85%/42.15% (CCMHB budget).
- CCMHB does not transfer an amount to the CILA fund in 2021, due to having paid off the mortgage; CCDDDB continues to transfer \$50,000 per year (CILA budget).
- No mortgage principal or interest expense (CILA budget).
- CILA budget based on projected actual 2020 expenditures.

Revisions to July 15 Budget Drafts:

- 2021 property tax revenues based on 4.38% (MHB and DDB) growth over 2020. (Earlier budgets were based on 3.8% increase for MHB and 3.3% for DDB.)
- Increases in Contributions & Grants (MHB and DDB).
- Addition of cost of ERP system for 2021 (to be far lower in future years) and decreases in other costs to offset this expense (MHB).
- Recalculation of staff insurance costs and other benefits (MHB).
- Recalculation of CCDDDB share of total administrative costs, resulting from these adjustments (MHB and DDB).
- In background information, adjustments of 2020 projected actual revenues and expenditures (note: a deficit budget was planned, so that fund balance included an amount for use in the event of unfavorable finding).
- Also in background information, further detail using the new information.

Decision Section:

Motion to approve the attached 2021 CCMHB Budget, with anticipated revenues and expenditures of \$5,847,991.

- Approved
- Denied
- Modified
- Additional Information Needed

Motion to approve the attached 2021 CILA Fund Budget, with anticipated revenues and expenditures of \$72,000. Payment to this fund is consistent with the terms of the Intergovernmental Agreement between the CCDDDB and CCMHB, and full approval is contingent on CCDDDB action.

- Approved
- Denied
- Modified
- Additional Information Needed

Draft 2021 CCMHB Budget

LINE ITEM	BUDGETED REVENUE	
311.24	Property Taxes, Current	\$5,304,695
313.24	Back Property Taxes	\$1,000
314.10	Mobile Home Tax	\$4,000
315.10	Payment in Lieu of Taxes	\$3,000
336.23	CCDDDB Revenue	\$404,296
361.10	Investment Interest	\$33,000
363.10	Gifts & Donations	\$3,000
363.12	Expo Revenue	\$15,000
369.90	Other Miscellaneous Revenue	\$80,000
TOTAL REVENUE		\$5,847,991

LINE ITEM	BUDGETED EXPENDITURES	
511.02	Appointed Official	\$103,625
511.03	Regular FTE	\$333,461
511.05	Temporary Salaries & Wages	\$5,040
511.09	Overtime Wages	\$1,000
513.01	FICA	\$33,900
513.02	IMRF	\$30,443
513.04	W-Comp	\$2,908
513.05	Unemployment	\$1,398
513.06	Health/Life Insurance	\$68,658
513.20	Employee Development/Recognition	\$200
Personnel Total		\$580,633
522.01	Printing	\$700
522.02	Office Supplies	\$4,200
522.03	Books/Periodicals	\$4,000
522.04	Copier Supplies	\$1,000
522.06	Postage/UPS/Fed Ex	\$700
522.44	Equipment Under \$5000	\$7,000
Commodities Total		\$17,600
533.01	Audit & Accounting Services	\$10,000
533.07	Professional Services	\$140,000
533.12	Travel	\$1,500
533.18	Non-employee training	\$10,000
533.20	Insurance	\$19,000
533.29	Computer Services	\$8,000
533.33	Telephone	\$1,000
533.42	Equipment Maintenance	\$500
533.50	Office Rental	\$24,000
533.51	Equipment Rental	\$800
533.70	Legal Notices/Ads	\$200
533.72	Department Operating	\$300
533.84	Business Meals/Expense	\$150
533.85	Photocopy Services	\$4,000
533.89	Public Relations	\$13,000
533.92	Contributions & Grants	\$4,882,008
533.93	Dues & Licenses	\$20,000
533.95	Conferences/Training	\$8,000
533.98	disAbility Resource Expo	\$48,000
534.37	Finance Charges/Bank Fees	\$30
534.70	Brookens Repair	\$100
Services Total		\$5,190,588
571.08	Interfund Transfer, CCDDDB (Share of Expo and some of Other Misc Rev, loan in 2019)	\$6,800
571.11	Interfund Transfer, CILA Fund	-
571.14	Interfund Transfer, to CARF for ERP	\$52,370
Interfund Transfers TOTAL		\$59,170
TOTAL EXPENSES*		\$5,847,991

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Draft 2021 CCDDB Budget

LINE ITEM	BUDGETED REVENUE	
311.19	Property Taxes, Current	\$4,353,483
313.19	Back Property Taxes	\$2,000
314.10	Mobile Home Tax	\$3,000
315.10	Payment in Lieu of Taxes	\$2,000
361.10	Investment Interest	\$11,000
371.90	Interfund Transfer (Expo and some Other Misc Rev) from MH Fund	\$6,800
369.90	Other Miscellaneous Revenue	\$8,000
TOTAL REVENUE		\$4,386,283

LINE ITEM	BUDGETED EXPENDITURES	
533.07	Professional Services (42.15% of an adjusted set of CCMHB Admin Expenses)	\$404,296
533.92	Contributions & Grants	\$3,931,987
571.11	Interfund Transfer, GILA Fund	\$50,000
TOTAL EXPENSES		\$4,386,283

Draft 2021 CILA Fund Budget

LINE ITEM	BUDGETED REVENUE	
361.10	Investment Interest	\$4,000
371.54	From CCDDDB 108	\$50,000
371.90	From CCMHB Fund 090	-
362.15	Rents	\$18,000
	TOTAL REVENUE	\$72,000

LINE ITEM	BUDGETED EXPENDITURES	
522.44	Equipment Less than \$5,000 (includes a designated gift for the benefit of one individual, accessed at family request, with balance \$12,035.14 as of August 17, 2020)	\$24,600
533.07	Professional Services (property management)	\$8,000
533.20	Insurance	\$2,400
533.28	Utilities	\$964
534.36	CILA Project Building Repair/Maintenance	\$14,000
534.37	Finance Charges (bank fees per statement)	\$36
534.58	Landscaping Service/Maintenance	\$8,000
544.22	Building Improvements	\$14,000
	TOTAL EXPENSES	\$72,000

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Background for 2021 CCMHB Budget, with 2020 Adjusted Budget and Earlier Actuals

2021 BUDGETED REVENUE		2020 ADJUSTED BUDGET	2019 ACTUAL	2018 ACTUAL	2017 ACTUAL	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Property Taxes, Current	\$5,304,695	\$4,868,953	\$4,813,598	\$4,611,577	\$4,415,651	\$4,246,055	\$4,161,439	\$4,037,720
Back Property Taxes	\$1,000	\$1,000	\$6,489	\$494	\$2,731	\$2,486	\$2,861	\$1,612
Mobile Home Tax	\$4,000	\$4,000	\$4,062	\$3,909	\$3,766	\$3,903	\$3,995	\$3,861
Payment in Lieu of Taxes	\$3,000	\$3,000	\$2,604	\$3,406	\$3,201	\$2,970	\$2,869	\$2,859
CCDDB Revenue	\$404,296	\$370,852	\$409,175	\$310,783	\$287,697	\$377,695	\$330,637	\$337,536
Investment Interest	\$33,000	\$33,000	\$45,950	\$41,818	\$18,473	\$3,493	\$1,385	\$1,015
Gift & Donations	\$3,000	\$2,900	\$4,706					
Expo Revenue (were combined)	\$15,000	\$13,405	\$14,275	\$21,613	\$5,225	\$18,822	\$26,221	\$28,192
Other Miscellaneous Revenue	\$80,000	\$50,000	\$129,028	\$29,955	\$117,195	\$21,340	\$67,599	\$85,719
TOTAL REVENUE	\$5,847,991	\$5,347,110	\$5,429,887	\$5,023,555	\$4,853,939	\$4,676,764	\$4,597,006	\$4,498,514

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2021 BUDGETED EXPENDITURES (SEE PAGE 5 FOR DETAILS)		2020 ADJUSTED BUDGET	2019 ACTUAL	2018 ACTUAL	2017 ACTUAL	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Personnel	\$580,633	\$568,409	\$519,678	\$522,073	\$449,220 (understaffed)	\$577,548	\$502,890	\$532,909
Commodities	\$17,600	\$19,000	\$11,147	\$10,049	\$6,263	\$7,998	\$11,237	\$9,282
Services (not Contrib & Grants)	\$308,580	\$312,430	\$286,385	\$404,059	\$432,828	\$410,157	\$382,870	\$375,735
Contributions & Grants	\$4,882,008	\$4,625,463	\$3,993,283	\$3,648,188	\$3,593,418	\$3,428,015	\$3,335,718	\$3,673,966
Interfund Expenditures	\$59,170	\$6,500	\$406,505	\$56,779	\$57,288	\$60,673	\$0	\$0
Interest on Tax Case		\$1,648						
TOTAL EXPENSES	\$5,847,991	\$5,533,450	\$5,216,998	\$4,641,148	\$4,089,797	\$4,484,391	\$4,232,715	\$4,591,892

Additional Information about Expenses (Proposed 2021 versus Adjusted Budget 2020)

Personnel 2021 v 2020

PERSONNEL	2021	2020
Appointed Official	\$103,625	\$103,625
Regular FTE	\$333,461	\$326,512
Temporary Wage/Sal	\$5,040	\$5,040
Overtime Wages	\$1,000	\$1,000
FICA	\$33,900	\$33,368
IMRF	\$30,443	\$31,885
W-Comp	\$2,908	\$2,815
Unemployment	\$1,398	\$1,864
Health/Life Insurance	\$68,658	\$62,000
Employee Dev/Rec	\$200	\$300
	\$580,633	\$568,409

Commodities 2021 v 2020

COMMODITIES	2021	2020
Printing	\$700	\$1,000
Office Supplies	\$4,200	\$4,100
Books/Periodicals	\$4,000	\$4,100
Copier Supplies	\$1,000	\$1,000
Postage/UPS/Fed Ex	\$700	\$800
Equipment Under \$5000	\$7,000	\$8,000
	\$17,600	\$19,000

Services (not Contributions and Grants)

SERVICES	2021	2020
Audit & Accounting	\$10,000	\$10,000
Professional Services*	\$140,000	\$140,000
Travel	\$1,500	\$800
Non-employee conference**	\$10,000	\$4,000
Insurance	\$19,000	\$19,000
Computer Services	\$8,000	\$6,000
Telephone	\$1,000	\$1,000
Equipment Maintenance	\$500	\$500
Office Rental	\$24,000	\$23,000
Equipment Rental	\$800	\$400
Legal Notices/Ads	\$200	\$300
Department Operating	\$300	\$400
Business Meals/Expense	\$150	\$0
Photocopy Services	\$4,000	\$4,000
Public Relations***	\$13,000	\$20,000
Dues/Licenses	\$20,000	\$20,000
Conferences/Training	\$8,000	\$5,000
disAbility Resource Expo***	\$48,000	\$58,000
Finance Charges/Bank Fees	\$30	\$30
Brookens Repair	\$100	\$0
	\$308,580	\$312,430

Interfund Expenditures 2021 v 2020

INTERFUND TRANSFERS	2021	2020
CCDDB Share of Expo and some of MHB Misc Revenue	\$6,800	\$6,500
Payment to CILA Fund	\$0	\$0
Transfer to CARF for ERP	\$52,370	
Interest on Tax Case		\$1,648
	\$59,170	\$8,148

***Professional Services:**

- legal counsel, website maintenance, human resource services, shredding, graphic design, language access services, accessible document creation, website ADA consultant, independent audit reviews and other CPA consultation, independent reviews of applications, 211/ Path through United Way, UIUC Evaluation Project.
- Previously included Expo Coordinators, but now the cost of these contracts is split with Expo.

****Non Employee Conferences/Trainings**

- Continues Mental Health First Aid trainings and monthly trainings for service providers, with expenses for presenters, materials, refreshments, promotion, supplies. This category also includes expenses related to board members attending conferences and trainings.

*****Public Relations (Community Awareness) and disAbility Resource Expo:**

- Ebertfest (2021 event paid in 2020, not shared with CCDDB), community education/awareness, some consultant support.
- Expo line was added mid-year 2018 to capture 2019 expenses; consultant time is charged here (could be under Professional Services.)

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Additional Information about Services

Approval of 2021 Budgets does not obligate the Boards to all expenditures described: most consultant/service contracts are developed by Executive Director with Board officers and, for larger amounts or unusual circumstances, full board review and approval; estimates are based on previous years.

SERVICES	2021	2020
Professional Services*	\$140,000 Approximately \$80,198 UI Evaluation, including CCDDDB. \$21,330 to United Way for 211/Path. \$500 human resources services (AAIM). \$3,000 IT services (BPC). \$1,000 Ed McManus. \$1,500 website accessibility testing (Falling Leaf). \$15,000 online application/reporting systems (EMK). \$2000 maintenance of Expo, AIR, and resource guide. Also includes: language access and other accessible document production; graphic design; shredding services; independent reviewers; CPA consultant/reviews; legal counsel. (Expo/Special Projects consultant costs are split between this line, Public Relations, and disABILITY Resource Expo, per project.)	\$140,000 \$78,792 (PY20 amount) UI Evaluation shared with CCDDDB. Approx \$18,066 United Way for 211/Path (increased mid-year). \$500 human resources (AAIM). \$3,000 IT services (BPC). \$1,500 website accessibility testing (Falling Leaf). \$1,000 Ed McManus Consulting. \$14,000 online application/reporting systems (EMK). \$1800 maintenance of Expo and AIR sites + possible new resource directory. Also includes: graphic design; shredding services; independent reviewer; CPA consult; legal counsel. (Expo/Special Projects consultant costs are no longer charged to this line but instead split between Public Relations and Expo, according to projects and subject to change.)
Public Relations***	\$13,000 PAID IN 2020 -\$15,000 Ebertfest film sponsorship, offset by Alliance member dues and other contributions of \$3k-\$5k/year. \$2,000 estimated for other community events. \$2,000 anti-stigma art show(s) and promotion, including Market in the Square and possible Farmers Market. \$2,000 sponsorships of other events. 25% of one Expo Coordinator may be charged to this line for work on non-Expo events and other special projects.	\$20,000 \$20,000 Ebertfest film sponsorship, offset by Alliance member dues and other contributions of \$3k-\$5k/year. Could also include amounts for for other community events, anti-stigma art show(s) and promotion, including Market in the Square, sponsorships of other anti-stigma/community awareness events.
disability Resource Expo***	\$48,000 Support for the 2020 and 2021 Expo events, including venue, supplies, food, interpreters, advertising, t-shirts, storage space, etc. Majority of Expo Coordinators' contracts are here. Expo costs are offset by exhibitor fees and contributions from sponsors.	\$58,000 Expenses associated with 2020 Expo event and with 2021 Expo but paid in 2020. Coordinator time associated with Expo and related activities charged here rather than to Pro Svcs (in 2018). Expo costs are offset by exhibitor fees and contributions from sponsors (\$14k in 2018.)
CCMHB Contributions & Grants	\$4,882,008 Estimated CCMHB payments to agencies from January 1 to June 30, 2021, as authorized in May 2020, plus 1/2 of estimated FY21 annual allocation amount, with agency contract maximums to be authorized by July 1, 2021. (includes an amount equal to anticipated hospital property tax revenue = \$x)	\$4,625,463 Actual CCMHB payments to agencies from January 1 to June 30, 2020, as authorized in May 2019, plus payments authorized in May 2020, to be made from June through December 2020.
CCDDDB Contributions & Grants	\$3,931,987 Estimated CCDDDB payments to agencies from January 1 to June 30, 2021, as authorized in May 2020, plus 1/2 of estimated FY21 annual allocation amount, with agency contract maximums to be authorized by July 1, 2021. (includes an amount equal to anticipated hospital property tax revenue = \$x)	\$3,762,511 Actual CCDDDB payments to agencies from January 1 to June 30, 2020, as authorized in May 2019, plus payments authorized in May 2020, to be made from June through December 2020.
Dues/Licenses	\$20,000 \$950 national trade association (NACBHDD), \$16,000 state trade association (ACMHAJ), and smaller amounts Human Services Council, Arc of Illinois, any new membership, e.g., CBHA, NCBH, NADD, or similar.	\$20,000 \$950 national trade association (NACBHDD), \$3,000 AAIM (paid every three years), \$16,000 state trade association (ACMHAJ), and smaller amounts for Human Services Council, Arc of Illinois, possible new memberships, e.g., CBHA, NCBH, NADD, or similar.
Conferences/Training	\$8,000 \$1000 registration for NACo and NACBHDD Legislative and Policy Conferences (may be offset by ACMHAJ). \$350 for NACo Annual Meeting. Costs of travel (plus lodging and food) for staff for NACBHDD and NACo meetings. Costs of travel (plus lodging and food) for staff for ACMHAJ meetings. Costs of one other conference/training for staff members, Federation of Families, Arc of IL, NADD, or similar. Kaleidoscope, Inc. training and certification.	\$5,000 \$1000 registration for NACo and NACBHDD Legislative and Policy Conferences (may be offset by ACMHAJ). \$350 for NACo Annual Meeting. Costs of travel (plus lodging and food) for staff for NACBHDD and NACo meetings. Costs of travel (plus lodging and food) for staff for ACMHAJ meetings. Costs of one other conference/training for staff members, Federation of Families, Arc of IL, NADD or similar. MHFA trainer certification.
Non-Employee Conferences / Trainings**	\$10,000 Registration, costs of travel, lodging, and food for board members to attend National or State Association meetings and other conferences or trainings of interest. Also charged here are the costs associated with Mental Health First Aid trainings and trainings for non-employees (e.g., case managers, other service providers, stakeholders), which can include presenters, rental, refreshments, materials, promotion. Unknown whether in person or virtual, or impact on cost.	\$4,000 Registration, costs of travel, lodging, and food for board members to attend National or State Association meetings and other conferences or trainings of interest. Also charged here are the costs associated with Mental Health First Aid trainings and trainings for non-employees (e.g., case managers, other service providers, stakeholders), which can include presenters, rental, refreshments, materials, promotion. While travel is unlikely in 2020, virtual MHFA and CM trainings are considered.
Unexpected	Unknown fate of large gatherings (Expo, Ebertfest, conferences, trainings). Possible telework expenses or change in office. Budget transfers if: offices move to a different location or are modified; legal expenses are greater; etc. Budget amendment if employee retirement/resignation. Boards' fund balances are lowest in May, at which point there should be enough for 6 months operating + remaining tax liability (small) + share (57.85%/42.15%) of accrued staff benefits. If first tax distribution does not occur by June, fund balance may be used.	Unknown fate of large gatherings (Expo, Ebertfest, conferences, trainings). Possible telework expenses or change in office. Budget transfers in the event: staff offices move to a different location or current offices modified; legal expenses are greater; etc. Boards' fund balances at their lowest point (May) should each include: 6 months of operating budget, hospital tax liabilities, other reserved, share (57.85%/42.15%) of accrued staff benefits. Liabilities associated with hospital tax revenue = \$430,716.29 MHB and \$359,363.81 DDB, some paid during 2020.

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Calculation of the CCDDDB Administrative Share ("Professional Services")

Adjustments:	2021	2020
CCMHB Contributions & Grants	\$4,882,008	\$4,625,463
UI Evaluation Capacity Project	-	-
Ebertfest anti-stigma film and events	-	20000
Payment to CILA fund	-	-
CCDDDB Share of Donations & Misc Rev	6800	6500
MHB Interest on Tax Case	-	1648
Adjustments Total:	\$4,888,808	\$4,663,611
CCMHB Total Expenditures:	\$5,847,991	\$5,533,460
Total Expenditures less Adjustments:	\$959,183	\$879,839

	2021 CCDDDB Share	2020 CCDDDB Share
Total Expenditures less Adjustments	\$959,183	\$879,839
Adjusted Expenditures x 42.15%	\$404,296	\$370,852
Monthly Total for CCDDDB Admin	\$33,691	\$30,904

At the end of the Fiscal Year, actual expenses are updated, some revenues (e.g., Expo) are shared, and adjustments are made to the CCDDDB current year share.

Background for 2021 CCDDDB Budget, with 2020 Adjusted Budget and Earlier Actuals

2021 BUDGETED REVENUES	2020 ADJ BUDGET	2019 ACTUAL	2018 ACTUAL	2017 ACTUAL	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Property Taxes, Current	\$4,353,483	\$3,994,287	\$3,982,668	\$3,846,413	\$3,684,009	\$3,595,174	\$3,501,362
Back Property Taxes	\$2,000	\$2,000	\$5,369	\$411	\$2,278	\$2,105	\$1,398
Mobile Home Tax	\$3,000	\$3,000	\$3,361	\$3,261	\$3,142	\$3,305	\$3,348
Payment in Lieu of Taxes	\$2,000	\$2,000	\$2,154	\$2,841	\$2,671	\$2,515	\$2,479
Investment Interest	\$11,000	\$11,000	\$27,098	\$24,062	\$10,883	\$2,318	\$812
Gifts & Donations (transfer from MHB)	\$6,800	\$6,500	\$106,505	\$6,779	\$7,288	\$10,673	\$0
Other Miscellaneous Revenue	\$8,000	\$9,600	\$8,955	\$6,408	\$14,432	\$0	\$11,825
TOTAL REVENUE	\$4,386,283	\$4,028,387	\$4,136,110	\$3,890,175	\$3,724,703	\$3,616,091	\$3,521,224

2021 BUDGETED EXPENDITURES	2020 ADJ BUDGET	2019 ACTUAL	2018 ACTUAL	2017 ACTUAL	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Professional Services (42.15% of some CCMHB expenses, as above)	\$404,296	\$370,852	\$309,175	\$310,783	\$287,697 (understaffed)	\$379,405	\$330,637
Contributions & Grants	\$3,931,987	\$3,762,511	\$3,445,272	\$3,250,768	\$3,287,911	\$3,206,389	\$3,224,172
Interfund Transfer, CILA Fund	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$0
Interfund Transfer, MH Fund (Repayment of loan)			\$100,000				
Interest on Tax Case		\$1,363					
TOTAL EXPENSES	\$4,386,283	\$4,184,726	\$3,904,447	\$3,611,551	\$3,337,911	\$3,635,794	\$3,449,759

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10.B.



BRIEFING MEMORANDUM

DATE: September 23, 2020
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Kim Bowdry, Associate Director for I/DD
SUBJECT: Update on the 2020 Disability Resource Expo

Background:

On March 12, 2020 the decision was made to cancel the March 28 Expo. The Steering Committee met virtually to discuss the possibility of rescheduling. After coordination with the Vineyard, Best Expo, and other events in Champaign County, the Expo was rescheduled for October 10, 2020. In August, the October 10, 2020 in-person disABILITY Resource Expo was postponed and a series of virtual events have been planned.

Updates:

After a survey of the disABILITY Resource Expo Steering Committee and follow-up conversations, a series of four monthly workshops have been planned in place of the 2020 in-person disABILITY Resource Expo. These virtual events, "Third Thursday Resource Round-ups" will feature a given group(s) of exhibitors and will include an overview of all featured exhibitors, followed by exhibitor breakout sessions, and ending with a presentation from a featured exhibitor. These virtual events will be held from 3-4:30pm.

Dates/Topics are as follows:

- October 15, 2020: Healthcare & Equipment
- November 19, 2020: Self-Help/Support Groups & Vocational/Residential/Recreation Services
- January 21, 2021: Advocacy, Legal & Service Organizations
- February 18, 2021: Education Services & Services for Young Children.

The 2020 Expo Resource Book has been printed and is being distributed to exhibitors and throughout the community. The disABILITY Resource Expo website has been updated to include the 2020 disABILITY Resource Expo Book and a series of promotional videos, developed by UIUC students during the summer, will be added to the disABILITY Resource Expo website and will become part of online/social media exhibitor features ahead of the Third Thursday Resource Round-up events.

Finally, the 2021 disABILITY Resource Expo has been scheduled for Saturday, October 16, 2021 at The Vineyard Church.

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10.C.



CCMHB 2020-2021 Meeting Schedule

**First Wednesday after the third Monday of each month at 5:45 p.m.
Lyle Shields Room, Brookens Administrative Center
1776 E. Washington St., Urbana, IL (unless noted otherwise)**

July 15, 2020 – Zoom meeting (off cycle) at

<https://us02web.zoom.us/j/87945354242>

September 23, 2020

September 30, 2020 – study session (tentative, ending by 6:30PM)

October 21, 2020

October 28, 2020 – study session

November 18, 2020

December 16, 2020 (tentative)

January 20, 2021

January 27, 2021- study session

February 17, 2021

February 24, 2021- study session

March 17, 2021

March 24, 2021- study session (tentative)

April 21, 2021

April 28, 2021- study session

May 12, 2021- study session

May 19, 2021

June 23, 2021

July 21, 2021

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

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**CHAMPAIGN COUNTY
DEVELOPMENTAL
DISABILITIES BOARD**

**CHAMPAIGN COUNTY
MENTAL HEALTH BOARD**

CCDDB 2020-2021 Meeting Schedule

Board Meetings

9:00AM except where noted

Brookens Administrative Building

1776 East Washington Street, Urbana, IL

September 23, 2020 – Lyle Shields Room

October 21, 2020 – *Location TBD*

November 18, 2020 – *Location TBD*

December 16, 2020 – Lyle Shields Room – *tentative*

January 20, 2021 – Lyle Shields Room

February 17, 2021 – Lyle Shields Room

March 17, 2021 – Lyle Shields Room

April 21, 2021 – Lyle Shields Room

May 19, 2021 – Lyle Shields Room

June 23, 2021 – Lyle Shields Room

July 21, 2021 – Lyle Shields Room

This schedule is subject to change due to unforeseen circumstances.

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

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DRAFT July 2020 to December 2021 Meeting Schedule with Subject and Allocation Timeline, moving into PY2022 Process

The schedule provides dates and subject matter of meetings of the Champaign County Mental Health Board through June 2021. The subjects are not exclusive to any given meeting, as other matters requiring Board review or action may also be addressed or may replace the subject listed. Study sessions may be scheduled with potential dates listed; topics will be based on issues raised at meetings, brought by staff, or in conjunction with the Champaign County Developmental Disabilities Board. Included are tentative dates for steps in the funding allocation process for Program Year 2022 (July 1, 2021 – June 30, 2022) and deadlines related to PY2021 agency contracts. **2020-2021 meetings are scheduled to begin at 5:45PM; these may be confirmed by contacting Board staff.**

- | | |
|----------|---|
| 7/15/20 | Regular Board Meeting, Zoom online (off cycle)
Approve FY2021 Draft Budgets |
| 8/28/20 | <i>Agency PY2020 4th Quarter Reports, CLCP Progress Reports, and Annual Performance Measures reports due</i> |
| 09/23/20 | Regular Board Meeting |
| 09/30/20 | Study Session (tentative, end by 6:30PM) |
| 10/21/20 | Regular Board Meeting
Draft Three Year Plan 2019-2021 with 2021 Objectives
Release Draft Program Year 2022 Allocation Criteria |
| 10/28/20 | Study Session (tentative) |
| 10/28/20 | <i>Agency Independent Audits, Reviews, or Compilations Due</i> |
| 10/30/20 | <i>Agency PY2021 First Quarter Reports Due</i> |
| 11/18/20 | Regular Board Meeting
Approve Three Year Plan with FY2021 Objectives
Allocation Decision Support – PY22 Allocation Criteria |
| 12/11/20 | <i>Public Notice to be published on or before this date, giving at least 21-day notice of application period.</i> |
| 12/16/20 | Regular Board Meeting (tentative) |
| 01/04/21 | <i>Online System opens for Agency Registration and Applications for PY2022</i> |
| 1/20/21 | Regular Board Meeting: Election of Officers |
| 1/27/21 | Study Session: Mid-Year Program Presentations |

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1/29/21 *Agency PY21 2nd Q Reports and CLC Progress Reports due*

2/12/21 *Agency deadline for submission of applications for PY2022 funding. Online system will not accept forms after 4:30PM.*

2/16/21 *List of Requests for PY2022 Funding assembled*

2/17/21 **Regular Board Meeting**
Discussion of Board Members' Review of Proposals;
Mid-year updates on new agency programs

2/24/21 **Study Session: Mid-Year Program Presentations**

3/17/21 **Regular Board Meeting**
FY2020 Annual Report
(includes performance data from agencies for PY20)

3/24/21 **Study Session (tentative)**

4/14/21 *Program summaries released to Board, copies posted online with CCMHB April 21, 2021 meeting agenda*

4/21/21 **Regular Board Meeting**
Program Summaries Review and Discussion

4/28/21 **Study Session**
Program Summaries Review and Discussion

4/30/21 *Agency PY2021 3rd Quarter Reports due*

5/5/21 *Allocation recommendations released to Board, copies posted online with CCMHB meeting agenda*

5/12/21 **Study Session: Allocation Recommendations**

5/19/21 **Regular Board Meeting:**
Allocation Decisions; Authorize Contracts for PY2022

6/23/21 **Regular Board Meeting**

6/23/21 *PY2022 Contracts Completed*

7/21/21 **Regular Board Meeting**

8/27/21 *Agency PY2021 4th Q Reports, CLC Progress Reports, and Annual Performance Measure Reports due*

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**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
BOARD MEETING**

Minutes—July 15, 2020

This Meeting Was Held Remotely.

5:45 p.m.

DRAFT

- MEMBERS PRESENT:** Susan Fowler, Thom Moore, Joseph Omo-Osagie, Elaine Palencia, Kyle Patterson, Julian Rappaport, Jane Sprandel, Jon Paul Youakim
- MEMBERS EXCUSED:** Kathleen Wirth-Couch
- STAFF PRESENT:** Kim Bowdry, Lynn Canfield, Mark Driscoll, Stephanie Howard-Gallo, Shandra Summerville, Chris Wilson
- OTHERS PRESENT:** Nicole Sikora, DSC; Alison Meaner, NAMI; Adelaide Aime, RACES; Shea Ward, Promise Healthcare; Laura Lindsey, Courage Connection

CALL TO ORDER:

Mr. Kyle Patterson (Vice-President) called the meeting to order at 5:52 p.m. (President Omo-Osagie arrived at 6:11 p.m.)

ROLL CALL:

Roll call was taken and a quorum was present.

CITIZEN INPUT / PUBLIC PARTICIPATION:

None.

DRAFT

APPROVAL OF AGENDA:

The agenda was in the packet for review. There was a request from Ms. Sprandel to add a discussion regarding the Expo to the agenda. The agenda, with the addition of an Expo discussion, was approved.

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PRESIDENT’S COMMENTS:

None.

EXECUTIVE DIRECTOR’S COMMENTS:

Ms. Canfield reviewed the agenda.

NEW BUSINESS:

MHFA Training Update:

A Briefing Memorandum on Mental Health First Aid Trainings and activities was included in the Board packet. Ms. Summerville provided additional information to the memo and answered Board questions.

Contract Amendment Report:

A Briefing Memorandum on contract amendments was included in the packet. The document was informational only.

RACES Counseling Contract:

A Decision Memorandum on RACES request to substitute another source of funds to fully fund the new therapist position was included in the Board packet. Adelaide Aime was available for questions.

MOTION: Dr. Fowler moved to approve RACES request to substitute VOCA funds for the Illinois Attorney General funds as the balance of funds necessary to establish the therapist position. Dr. Youakim seconded the motion. A roll call vote was taken and the motion passed unanimously.

AGENCY INFORMATION:

None.

OLD BUSINESS:

disABILITY Expo Update:

Ms. Sprandel provided an update on the Expo Steering Committee meeting held yesterday. The in-person Expo has been canceled this year. A virtual Expo has been explored and discussed. However, there are many concerns. Ms. Sprandel reviewed the concerns with Board members. There was an extensive Board discussion. The Expo Steering Committee will continue to meet.

CCMHB FY2021 Draft Budget:

A Decision Memorandum and FY2021 CCMHB and CILA Draft Budgets were included in the Board packet.

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MOTION: Dr. Moore moved to approve the presented 2021 CCMHB Budget, with anticipated revenues and expenditures of \$5,799,576. Ms. Palencia seconded. A roll call vote was taken and the motion was unanimously approved.

MOTION: Dr. Rappaport moved to approve the presented 2021 CILA Fund Budget, with anticipated revenues and expenditures of \$72,000. Payment to this fund is consistent with the terms of the Intergovernmental Agreement between the CCDDDB and CCMHB. Ms. Palencia seconded the motion. A roll call vote was taken and the motion passed unanimously.

UIUC Evaluation Capacity Proposal:

A Decision Memorandum with UIUC Evaluation Capacity Proposal was included in the Board packet.

MOTION: Dr. Moore moved to approve participation in the University of Illinois Capacity Building Evaluation: Year 6 Proposal, at a cost of \$80,198 to the CCMHB, contingent upon approval of the proposal and contract amount of \$33,803 by the CCDDDB. Dr. Rappaport seconded the motion. A roll call vote was taken and the motion passed unanimously.

2-1-1 Information and Referral:

A Decision Memorandum was included in the Board packet. The memo requests renewal of the CCDDDB and CCMHB involvement with the United Way of Champaign County in support of 211 information and referral call service. A copy of the new contract was included in the Board packet.

MOTION: Dr. Rappaport moved to authorize the Executive Director to enter into an updated Memorandum of Understanding with the United Way of Champaign County for 211 service. Dr. Fowler seconded the motion. A roll call vote was taken and the motion passed unanimously.

MOTION: Mr. Omo-Osagie moved to approve the annual total cost of \$21,330 to be shared with the CCMHB as described and subject to future adjustment per the terms of the new Memorandum of Understanding. Dr. Youakim seconded the motion. A roll call vote was taken and the motion passed unanimously.

Anti-Stigma Film Virtual Event 2020:

A Briefing Memorandum with an update on possible 2020 and 2021 anti-stigma activities was included in the packet for information only.

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Schedules & Allocation Process Timeline:

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

CCDDDB Information:

The CCDDDB met earlier in the day. The CCDDDB meeting had similar agenda items as the CCMHB.

Approval of CCMHB Minutes

Minutes from June 17, 2020 meeting were included in the Board packet.

MOTION: Mr. Omo-Osagie moved to approved the CCMHB minutes from June 17, 2020 as presented. Dr. Rappaport seconded the motion. A roll call vote was taken and the motion passed unanimously.

Staff Reports

Written staff reports from Kim Bowdry, Mark Driscoll, Stephanie Howard-Gallo, and Shandra Summerville were included in the Board packet.

Board to Board Reports:

Dr. Rappaport attended a CIT meeting.

Expenditure List:

A copy of the Expenditure List was included in the packet.

MOTION: Dr. Fowler moved to accept the Expenditure List as presented. Dr. Moore seconded the motion. A roll call vote was taken ad the motion passed unanimously.

Board Announcements:

None.

ADJOURNMENT:

The meeting adjourned at 7:10 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDDB Staff

*Minutes are in draft form and subject to CCMHB approval



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Kim Bowdry, Associate Director for Intellectual & Developmental Disabilities Staff Report – September 2020

CCDDDB: PY20 4th Quarter reports were reviewed. Included in this board packet is a full year of data from the agencies using the online claims system. Additional time was spent working with CCDDDB funded agencies related to the new claims for the Online Claims System and other program related questions. A few agencies requested extensions for their 4th Quarter Reports. All reports were in at the time of this writing.

CCDDDB Mini-Grant: Additional Mini-Grant purchases have been made over the past few months. In addition to making purchases, Tax Exempt Status often must be arranged with local stores/vendors. This is sometimes a quick process but occasionally may take a few days turnaround time. In some instances, items are out of stock, so I have made regular calls to local stores to determine if the items are in stock for the Mini-Grant recipients. A few families have chosen to forego the remainder of their allocated funds due to circumstances related to the pandemic. Please see the Mini-Grant Update in the packet for further details.

Learning Opportunities: After a cancellation of Spring Sessions due to the pandemic, the regular monthly workshops started again in August. In August, Karen Simms presented, “Strategies for Self-Care during Covid-19 and Social and Cultural Uncertainty.” Kim Bryan, Rattle the Stars, is scheduled to present “RTS/C – Responding to Suicide with Compassion” on September 24, 2020.

I am working with Kayla DeCant, RACES, to schedule a two-part presentation in October and November on Sexuality and Protection from Sexual Exploitation for people with I/DD.

MHDDAC: I created Zoom links and participated in the monthly meetings of the MHDDAC.

NACBHDD: I participated in monthly I/DD committee calls. I attended the virtual NACBHDD Summer Board Meeting, held July 20-22, 2020.

ACMHAI: I participated in the ACMHAI I/DD committee calls. I also created a Doodle Poll to poll the members of the I/DD committee to find a new common time for the committee calls. I also represented ACMHAI on a Zoom Meeting with the Illinois Council on Developmental Disabilities (ICDD) and Trade Associations. The meeting was the ICDD 5 Year Input Session. It was a very small group and had representation from IARF, Institute on Public Policy for People with Disabilities, McManus Consulting, and ICDD. Important talking points included PUNS and PUNS outreach, flexibility in the CILA model of 24-hour CILA or Intermittent CILA (15 hours/week), Personal Needs Allowance, and the continuance of the DSP shortage and the effect the DSP shortage has on people served. I participated in the ACMHAI Summer Training and Business Meeting, both held virtually.

Disability Resource Expo: I participated in Expo Steering Committee meetings. I used Google Forms to create registration pages for the upcoming Third Thursday Resource Round-Up events.

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I also scheduled Zoom meetings for the Expo Coordinators to begin taping interviews with Exhibitors for the upcoming Third Thursday Resource Round-up Events.

I participated in Zoom meetings with the Expo Consultants and U of I Students who worked on behalf of the Expo to create short videos. I participated in a meeting with U of I Community Learning Lab staff. These efforts will continue during the Fall Semester with a new set of U of I Students.

Other activities: I participated in over 30 webinars and multiple Facebook lunchtime chats.

I also participated in multiple Zoom meetings with the United Way, Cunningham Township, the CCMHB, Path, Anita Chan, and other students from UIUC regarding the 2-1-1 PATH website. I also participated in presentations by the Community Data Clinic.

I participated in meetings of the Community Coalition Race Relations Subcommittee and in the monthly Community Coalition meetings.

In July, I watched the CCMHB Sponsored Ebertfest documentary, "A Most Beautiful Thing," viewed the Q&A with the filmmaker, and I viewed the Community Conversation.

I participated in a meeting with the U of I Evaluation Capacity team. The team is working to identify targeted programs that they will work with during PY21.

I participated in the September meeting of the Human Services Council and the September meeting of the Transition Planning Committee.

Prioritization of Urgency of Needs for Services (PUNS) Summary Reports: 1,247 PUNS selection letters were mailed out by the Illinois Department of Human Services Division of Developmental Disabilities (IDHS-DDD) in August 2019. 33 PUNS Selection letters were mailed to people in Champaign County. **25 of 33** people have received an award letter Home-Based Support Services (HBS). **One** person has been awarded CILA funding. **Two** people are working to determine if Family CILA or HBS is the best fit for them. **Two** people want CILA with a specific provider, in a specific region. The remaining **two** people have requested Adult HBS, the ISC is awaiting documents required to proceed with packet submission to IDHS-DDD. **One** person moved out of the area.

In July 2020, **23** people from Champaign County received a PUNS selection letter. **One** person has been awarded Adult Home-Based Support Services and **one** person has had a CILA Funding Request submitted to DHS and is currently awaiting an award letter.

Updated "PUNS Summary by County and Selection Detail for Champaign County" and the "Division of Developmental Disabilities Prioritization of Urgency of Needs for Services (PUNS) Summary of Total and Active PUNS by Zip Code" reports are attached. IDHS posted updated versions on September 8, 2020. These documents detail the number of Champaign County residents enrolled in the PUNS database.

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

September 08, 2020

County: Champaign

Reason for PUNS or PUNS Update	943
New	28
Annual Update	323
Change of Category (Seeking Service or Planning for Services)	13
Change of Service Needs (more or less) - unchanged category (Seeking Service or Planning for Services)	12
Person is fully served or is not requesting any supports within the next five (5) years	246
Moved to another state, close PUNS	24
Person withdraws, close PUNS	27
Deceased	18
Individual Stayed in ICF/DD	1
Individual Moved to ICF/DD	2
Individual Determined Clinically Ineligible	7
Unable to locate	56
Submitted in error	1
Other, close PUNS	185
CHANGE OF CATEGORY (Seeking Service or Planning for Services)	406
PLANNING FOR SERVICES	140
EXISTING SUPPORTS AND SERVICES	371
Respite Supports (24 Hour)	10
Respite Supports (<24 hour)	15
Behavioral Supports (includes behavioral intervention, therapy and counseling)	149
Physical Therapy	46
Occupational Therapy	99
Speech Therapy	123
Education	174
Assistive Technology	52
Homemaker/Chore Services	5
Adaptions to Home or Vehicle	4
Personal Support under a Home-Based Program, Which Could Be Funded By Developmental Disabilities, Division of Rehabilitation Services or Department on Aging (can include habilitation, personal care, respite, retirement supports, budgeting, etc.)	36
Medical Equipment/Supplies	33
Nursing Services in the Home, Provided Intermittently	7
Other Individual Supports	169
TRANSPORTATION	386
Transportation (include trip/mileage reimbursement)	99
Other Transportation Service	263
Senior Adult Day Services	1
Developmental Training	81
Regular Work/Sheltered Employment	62
Supported Employment	80
Vocational and Educational Programs Funded By the Division of Rehabilitation Services	57
Other Day Supports (e.g. volunteering, community experience)	21
RESIDENTIAL SUPPORTS	76
Community Integrated Living Arrangement (CILA)/Family	3
Community Integrated Living Arrangement (CILA)/Intermittent	4
Community Integrated Living Arrangement (CILA)/Host Family	1
Community Integrated Living Arrangement (CILA)/24 Hour	31
Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 16 or Fewer People	1
Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 17 or More People	2
Skilled Nursing Facility/Pediatrics (SNF/PED)	5
Supported Living Arrangement	7

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

September 08, 2020

Community Living Facility	1
Shelter Care/Board Home	1
Nursing Home	1
Children's Residential Services	4
Child Care Institutions (Including Residential Schools)	7
Other Residential Support (including homeless shelters)	10
SUPPORTS NEEDED	380
Personal Support (includes habilitation, personal care and intermittent respite services)	336
Respite Supports (24 hours or greater)	19
Behavioral Supports (includes behavioral intervention, therapy and counseling)	146
Physical Therapy	46
Occupational Therapy	73
Speech Therapy	89
Assistive Technology	50
Adaptations to Home or Vehicle	20
Nursing Services in the Home, Provided Intermittently	5
Other Individual Supports	78
TRANSPORTATION NEEDED	339
Transportation (include trip/mileage reimbursement)	277
Other Transportation Service	313
VOCATIONAL OR OTHER STRUCTURED ACTIVITIES	259
Support to work at home (e.g., self employment or earning at home)	5
Support to work in the community	230
Support to engage in work/activities in a disability setting	87
Attendance at activity center for seniors	1
RESIDENTIAL SUPPORTS NEEDED	107
Out-of-home residential services with less than 24-hour supports	57
Out-of-home residential services with 24-hour supports	57
Total PUNS:	57,079

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

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**Division of Developmental Disabilities Prioritization of Urgency of Needs for Services (PUNS)
Summary of Total and Active PUNS by Zip Code
Updated 09/08/20**

Zip Code	Active PUNS	Total PUNS
60949 Ludlow	1	3
61801 Urbana	30	83
61802 Urbana	55	123
61815 Bondville (PO Box)	1	1
61816 Broadlands	1	3
61820 Champaign	45	93
61821 Champaign	74	189
61822 Champaign	52	104
61826 Champaign	0	1
61840 Dewey	0	2
61843 Fisher	7	12
61845 Foosland	1	1
61847 Gifford	0	1
61849 Homer	0	5
61851 Ivesdale	1	2
61852 Longview	1	1
61853 Mahomet	30	70
61859 Ogden	4	13
61862 Penfield	1	2
61863 Pesotum	0	2
61864 Philo	3	11
61866 Rantoul	27	86
61871 Royal (PO Box)	--	-- no data
61872 Sadorus	2	2
61873 St. Joseph	13	26
61874 Savoy	8	17
61875 Seymour	2	3
61877 Sidney	4	10
61878 Thomasboro	0	2
61880 Tolono	6	26
Total	369	894

Zip Code	Active PUNS	Total PUNS
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http://www.dhs.state.il.us/OneNetLibrary/27897/documents/DD%20Reports/PUNS/PUNS_Sum_by_Zip-Code.pdf

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Executive Director's Report – Lynn Canfield, September 23, 2020

Background - Strategic Plan Goals:

Champaign County Mental Health Board Current Three-Year Plan Goals

1. Support a **continuum of services** to improve the quality of life experienced by individuals with mental or emotional disorders, substance use disorders, or intellectual and/or developmental disabilities and their families residing in Champaign County.
2. Sustain commitment to addressing health disparities experienced by **underrepresented and diverse populations**.
3. Improve **consumer access to and engagement** in services.
4. Continue the collaborative working relationship with the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDB).
5. Building on progress achieved through the six Year Cooperative Agreement between the Federal Substance Abuse and Mental Health Services Administration (SAMHSA), the Illinois Department of Human Services (IDHS), and the Champaign County Mental Health Board (CCMHB), **sustain the SAMHSA/IDHS system of care model**.
6. **Divert from the criminal justice system**, as appropriate, persons with behavioral health needs or intellectual/developmental disabilities.
7. In conjunction with the Champaign County Sheriff's Office and other community stakeholders pursue a continuum of services as an **alternative to incarceration and/or overutilization of local Emergency Departments** for persons with behavioral health needs or developmental disabilities.
8. Support **interventions for youth** who have juvenile justice system involvement to reduce contact with law enforcement or prevent deeper penetration into the system.
9. Address the need for **acceptance, inclusion, and respect** associated with a person's or family member's mental illness, substance use disorder, intellectual and/or developmental disability through broad based community education efforts to increase community acceptance and positive self-image.
10. Engage with other local, state, and federal stakeholders on **emerging issues**.

Champaign County Developmental Disabilities Board Current Three-Year Plan Goals

1. Support a **continuum of services** to meet the needs of people with intellectual and/or developmental disabilities (I/DD), along with their families, residing in Champaign County.
2. Sustain the commitment to improving outcomes for members of **underrepresented and underserved populations**.
3. Improve **access to and engagement in services** through increased coordination among providers, community stakeholders, people with I/DD, their families, and other key supporters.
4. Encourage high-quality **person-centered planning** and follow-through for people served by funding from the CCDDB and, through the Intergovernmental Agreement, from the CCMHB.
5. Continue the collaborative working relationship with the Champaign County Mental Health Board (CCMHB).
6. Identify children at-risk of developmental delay or disability, and support **early intervention services and family supports**.
7. Support **access to services and programs** for youth and adults with I/DD, with a preference for evidence-based practices to increase positive outcomes.
8. Promote **inclusion and respect** of people with I/DD, through broad based community education efforts.
9. Stay abreast of **emerging issues** affecting service and support systems and access to services, and be proactive through concerted **advocacy efforts**.

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Activities of Staff and Board Members:

To support CCMHB goals 1-8 and CCDDDB goals 1-7, the allocation and monitoring of agency contracts is a primary focus for all. In the Board budgets, agency service contracts appear as Contributions & Grants, the largest expenditure lines. Also important, but a very small share of total costs, are non-agency activities supporting individuals, families, agencies, systems, and community. These are associated with Personnel, Professional Services, Expo, Public Relations, and Non-Employee Training costs, some through independent contractors, and some in partnership with other organizations: United Way and 211/PATH; Alliance for Inclusion and Respect; disABILITY Resource Expo; Mental Health First Aid; Provider Workshops; UIUC Community Learning Lab, Community Data Clinic, and Evaluation Capacity Project; and other collaborations referenced in staff reports.

Anti-Stigma and Community Awareness:

(MHB goals 1, 3, 4, and 9 and DDB goals 1, 3, 5, and 8)

211 offers call-based and online resource information. United Way of Champaign County, the CCMHB, and the CCDDDB co-fund this service, aligned with United Way and 211 standards. I completed training in order to be named as a Collaborating Investigator in ongoing research by the UIUC Community Data Clinic faculty and students. For several months, the focus has been on enhancement of the online resource directory used by PATH's 211 team, for potential use by other supporters and people seeking resources. Nearly all of the features developed by CDC students were recently incorporated into the website used by PATH. Our staff and other local funders and stakeholders are also involved in these projects toward a comprehensive, interactive web-based resource directory and related innovations. Many viewed a demonstration of the Aunt Bertha closed-loop product, which is being considered by the State of Illinois and is in use by the Oak Park Township Community Mental Health Board. Other discussions have explored neighborhood information hubs and kiosks, closed Facebook group resource information sharing (e.g., CU Able), and the self-help support network coordinated by Family Service. The Community Data Clinic team have met with providers to discuss the project and learn about the crisis line and other hotlines. *(Additional details are in reports from other staff members.)*

Alliance for Inclusion and Respect (AIR) has focused on anti-stigma films, events, and marketing. Building on exposure through Ebertfest, we developed year-round anti-stigma messaging, support for artists and entrepreneurs, and promotion of member organizations. Throughout 2019, Stephanie Howard-Gallo coordinated with International Galleries to feature a new artist each month. In November and December, we hosted a booth at the weekly indoor Market IN the Square, for use by various AIR entrepreneurs. Most activities are on hold during 2020. Two virtual mini-Ebertfest events were held this summer; the first related to early childhood, featuring the 2019 documentary "No Small Matter" for online viewing; the second was sponsored by AIR, with online screening of the 2020 documentary "A Most Beautiful Thing" followed by online Q&A event and community discussion, each with filmmakers, festival guests, and local experts. A website and facebook, twitter, and Instagram pages are managed by an AIR author. UIUC LAS 122 students will create additional social media content for AIR this fall.

disABILITY Resource Expo *(see Briefing Memorandum by Kim Bowdry)*. In addition to planning four virtual events, the Expo team is connecting exhibitors to students who will edit brief informational videos to enhance the Expo website; accessibility and language access in these innovations are also being explored.

CCMHB/CCDDDB CILA:

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(MHB goal 4 and DDB goals 1 and 5)

The CCMHB paid off the mortgage loan in 2019; the CCDDDB continues annual contributions to the CILA fund; an intergovernmental agreement will guide budgeting and future decisions. *(An update and potential Board actions are described in a memorandum in this packet.)*

Support for Agency Programs:

(MHB goals 1, 3, 5, 7, and 8 and DDB goals 1, 2, 3, and 7)

Cultural and Linguistic Competence training and technical assistance are offered by Shandra Summerville. Local providers have an advantage as Illinois Department of Human Services also requires CLC Plans. The CCMHB/CCDDDB template features National Culturally and Linguistically Appropriate Services Standards.

Independent Contractors: EMK offers technical support for agency users of our online application and reporting system; John Brusveen, CPA, reviews agency audits, offers support to agencies, and suggests improvements in accountability and financial management; CrispMedia maintains the AIR and Expo websites, will host short videos on the sites, and will provide IT for the virtual Expo 'resource round-up' series.

Mental Health First Aid: With certifications in Adult, Youth, and Public Safety MHFA, Shandra Summerville offers trainings (priority to agencies, board members, and public officials) and coordinates with other trainers in the region who intend to cover all interested groups and areas. The focus on rural communities continues. A possible partnership with the Regional Office of Education would support Teen MHFA, a training for teenagers conducted by young adult trainers, in local schools or after school programs.

Monthly Provider Trainings, coordinated by Kim Bowdry, are free of charge and offer CEUs. When conducted in person, these supported networking across agencies and service sectors; for now the virtual format is safest and has allowed increased attendance. Topics this year include: Bookkeeping 101; Strategies for Self-Care during COVID-19 and Social and Cultural Uncertainty; Responding to Suicide with Compassion; and Sexuality and Protection from Sexual Exploitation of People with I/DD. Attendees have requested a presentation on racial microaggressions. While the primary audience is case managers from funded programs, school social workers, family advocates, and other providers also attend.

UIUC Evaluation Capacity Project *(see full report in this Board packet).* Researchers consult with agencies with funded programs through 'theory of change' logic model workshops, consultation bank, intensive support to pilot programs, and follow up with prior pilots.

Other collaborations, described in staff reports or board to board reports, include the Champaign County Transition Planning Committee, Continuum of Service Providers to the Homeless, Champaign County Community Coalition, Champaign County Reentry Council, Coalition Race Relations Subcommittee, Human Services Council, the New American Welcome Center, CUPHD I-Plan Behavioral Health Committee, etc.

Executive Director Activities:

In addition to administrative activities, I participate in various meetings, events, and partnerships related to the strategic plans of the Boards.

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Intergovernmental/Interagency Collaborations:

(MHB goals 1, 4, 9, and 10 and DDB goals 1, 5, 8, and 9)

Champaign County Department Heads: with the County Executive and her staff, this monthly meeting touches on budgets, staff benefits and policies, Enterprise Resource Planning (ERP) development, supervision, and facilities.

Mental Health and Developmental Disabilities Agency Council: monthly meeting of agency representatives, not all funded by the CCMHB/CCDDDB, with agency activities, state budget and federal/state system news, special topics, and announcements.

Metropolitan Intergovernmental Council: quarterly meeting of governmental units, with topics of interest and updates from members; the September meeting featured “UC2B Octennial Update” presented by Michael K. Smeltzer.

Regional Champaign-Vermilion Executive Committee: bimonthly conference call with representatives of public and private entities developing a community needs assessment and strategic plan. Because the CU Public Health District I-Plan has identified behavioral health as a high priority for four cycles, this partnership is efficient; CUPHD has an interest in the needs of people with I/DD and other disabilities as well. A coordinator reports on assessment activities and coordinates meetings, surveys, and collection of data. Our focus has been on the direct and indirect impacts of COVID, how to continue supporting the region-wide MHFA trainings, and issues with state funding for crisis response.

UIUC School of Social Work Community Learning Lab: building on this summer’s success with the new WeCU project (short videos of Expo exhibitors), fall projects include two Social Work classes focused on producing more videos, along with two individual students from the summer who have volunteered to help with Expo projects. Kim Bowdry and I will supervise these students, with input from Expo consultants. Other student projects are: Social Work students studying the new Grand Challenge, to eradicate racism, with Shandra Summerville supervising; LAS students developing social media content for AIR, with Stephanie Howard-Gallo supervising; and a Stats class exploring data visualization of 11 years of comparable demographic and residency reports from MHB-funded programs.

Partnerships related to Underrepresented Populations and/or Justice System:

(MHB goals 1, 2, 5, 6, 7, 8, and 10 and DDB goals 1, 2, 3, and 7)

Champaign Community Coalition: monthly Goal Team meetings; discussions with stakeholders, especially regarding trauma-informed system work and the planning of interventions meant to decrease community violence and mitigate harm.

Crisis Intervention Team Steering Committee: bimonthly meetings of representatives of local law enforcement agencies, EMS, hospital, behavioral health, providers serving the homeless and those at risk, advocacy groups, and other stakeholders to promote CIT and related trainings, to review data analyzed by City of Urbana, and to share updates and announcements.

Illinois Connected Communities: in support of the funded project led by the Housing Authority of Champaign County, monthly meetings of the steering committee, connection to technical assistance, and quarterly meetings with other communities also funded for these planning

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projects. The project offers customized consulting and active learning to complete the strategic planning, telling our communities' stories, and a post-project survey. Barriers related to the 'digital divide' were amplified by COVID 19 disruptions, e.g., need to transform from reliance on community hotspots to access at home. 2,000 Unit 4 district students are not enrolled this school year. (This project follows from the earlier 2020 series of Illinois Broadband webinars hosted by the Extension Service, in that we may move toward solutions.)

One Door Project Planning: a weekly virtual meeting of providers, law enforcement, hospital administrators, government officials, and citizens to pursue a central location for triage, peer supports, crisis stabilization, and coordinated response. Peer supporters continue to work toward state-certification, somewhat more convenient now that the trainings are virtual. In addition to this effort, a regional group of funders and providers have reached out to lawmakers and state association for help in restoring adequate state funding for crisis services, which would make the coordinated response more affordable locally. Leon Evans, formerly of Bexar County, TX and now with Three Bears Consulting, has reviewed the materials and joined a meeting to offer some encouragement and suggestions.

Youth Assessment Center Advisory Committee: quarterly meetings of representatives of law enforcement, Court Services, State's Attorney, service providers, and school districts for discussion of the program, review of referral and service data, and roundtable updates. Because Cunningham Children's Home now offers Families Stronger Together, this group may have a role in the creation of a Youth Behavioral Health Coordinating Council, if one is needed.

State and National Associations and Advocacy:

(MHB goal 10 and DDB goal 9)

(more detailed notes on the following meetings are available, if you have an interest)

Association of Community Mental Health Authorities of Illinois (ACMHAI): conference calls of Executive, Legislative, Medicaid/Managed Care, I/DD, and Ad Hoc (hiring) Committee. Members support each other with discussion of issues such as: property taxes; local government consolidation; impact of state budget and regulations; agency contracts; board/staff policies; legal opinions; budget processes; community awareness; auditing practices (we expect new thorns related to agencies accessing Paycheck Protection Program loans and COVID relief funds). Our legislative liaison, Government Strategy Associates, reports on: Medicaid and rates; minimum wage and direct support professional wage increases; anticipated revenue related to cannabis; Mental Health First Aid in schools; proposed legislation. Quarterly membership meetings are now held virtually; committees have hosted webinars (Children's Behavioral Health, I/DD) and shared links to other webinars of interest.

National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD): access to a great deal of information on research, legislative activity, innovations, and more. Monthly I/DD committee calls feature presentations from other organizations and roundtable discussions of state budgets, compliance with federal rules, workforce, corrective action plans, consent decrees, and more. I co-chair monthly calls of the Behavioral Health committee, now merged with Justice Committee; our pilot project to test various outcomes is on hold as we manage COVID-related systems change, but the quarterly webinar series on various states' Medicaid programs continues. I also serve as the Association board's secretary, attending Executive Committee meetings with a focus on planning the membership meetings and events. The 2021 Legislative & Policy Conference will be held virtually.

Virtual Summer Meeting:

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“Counties Respond to COVID-19: New Practices, New Problems, and Innovative Solutions”

SAMHSA Response, Field Point of View, County Accommodations and Outlook, Human Resources and Recruitment/Retention and Staff Stress

“Role of Community Mental Health and Managed Care in the Behavioral Health System, Today and in the Post-COVID-19 Era”

National Point of View, Field Point of View, Panel Discussion

Virtual Annual I/DD Summit:

Panel discussion on COVID-19 impacts on individuals with I/DD, providers, and the larger system, and on the future of I/DD services as we move into next phases of COVID-19. Panelists spoke to the experience of DSPs, of providers in Ohio, of counties, of individuals and families, of state DD programs and the changing federal policies, and the need to adapt and sustain amidst change.

National Association of Counties (NACO): monthly Health Steering Committee calls; quarterly meetings of the Healthy Counties Advisory Board; quarterly Stepping Up Innovator County calls and Roundtable; and Data Driven Justice Initiative webinars.

Virtual Summer Meetings:

“Townhall”

Legislative update, pressing issues, #WeAreCounties campaign, proposed revisions to bylaws, officer candidate forum.

“Annual Business Meeting”

Annual report and collective accomplishments; reports of the voting credentials and nominating committees; nomination, endorsements, and election of officers; adoption of bylaws; announcement of new board of directors and presidential appointments; updates and resources from partner organizations; Legislative & Policy Conference in February.

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Mark Driscoll

Associate Director for Mental Health & Substance Abuse Services

Staff Report – September 23, 2020 Board Meeting

Summary of Activity

CCMHB Three Year Plan with Draft PY21 Objectives: The FY 2019 – 2021 Three Year Plan with draft FY2021 Objectives is included in the packet. A Briefing Memorandum accompanies the Plan. At this time, the majority of the PY20 objectives are to be carried forward into PY21. Some new objectives are proposed along with some revisions or technical corrections to existing objectives. The document is a draft. Additional revisions may be made based on input from the Board, stakeholders, and other interested parties. A final version will be presented to the Board at the November meeting.

Program Evaluation Collaboration: The PY21 CCMHB contract with the University to support the work of the Program Evaluation Team, approved by the Board at the July meeting, has been issued. The template for the consulting contract was updated late last year. Because of changes have been made to the contract language, the University review process is more involved than usual and taking a little bit longer to execute the contract.

You will find in the Board packet a copy of the Program Evaluation Team PY20 Final Report. A formal presentation will be made at the meeting. The report includes an overview of activity undertaken by the team as well as detailed descriptions with supporting documents on the work with the targeted programs. Each of the five targeted programs (3 CCMHB and 2 CCDDDB) presented to their peers at the Mental Health Developmental Disabilities Agency Council virtual meeting in August. The solicitation and selection of targeted programs for PY21 is currently underway.

PY20 Fourth Quarter Reports: The PY20 Fourth Quarter and the Year-End Performance Outcome Reports (PORs) were due the last Friday of August. A handful of agencies requested extensions of one week to one month to file the complete set of report forms. Those reports submitted by the deadline are being reviewed for completeness and reported activity posted to an excel spreadsheet used to track the data. The PORs will be compiled and posted to the public page/welcome page of the online system later this month. As necessary, agencies will be contacted regarding any missing forms, data, or questions about reported activity.

Criminal Justice - Mental Health: Lynn and I are attending weekly planning meetings on the “One Door” Crisis Response System. The proposed model was presented to the Urbana City Council August 17th. The CIT Steering Committee was briefed in July and received the full presentation in September. A copy of the presentation is attached.

The One Door system builds off of past community and stakeholder discussions. The need and desire for such a facility and approach for serving those experiencing a mental health crisis is well documented. Possibly the first documented recommendation for such an approach can be found in the Institute for Law and Policy Planning Champaign County Criminal Justice System Assessment: Final Report issued September 2013, that also incorporated recommendations from the Champaign County Community Justice Task Force. Subsequent to that report, other public hearings, the Leon Evans consultation and resulting work groups, and the federally funded

Justice and Mental Health Collaboration Program – Planning Grant Final Report, September 2017, have been consistent in reaffirming support for the approach embodied in the One Door proposal.

The Reentry Council continues to meet monthly. The most recent meeting included a presentation by Life Links, the community mental health center in Mattoon. Agency updates included an announcement about the Circuit Clerks upcoming expungement and records sealing event that will be held virtually this year.

Other Activity:

- I as well as other members of the CCMHB/DDB team and community stakeholders have been meeting regularly with UIUC Community Data Clinic on development of a web based interactive resource directory. In addition to participating in discussions on format and content, I have been involved in organizing meetings between the clinic and the Self Help Center and then with local crisis/hotlines. The meetings facilitate an exchange of information on current operations of the various community resources and the work of the clinic on the directory.
- Continued participation in various meetings including the Mental Health Developmental Disabilities Agencies Council, the United Way Community Impact Committee, the Council of Service Providers to the Homeless, and the Rantoul Service Providers Group.
- Viewed a number of webinars on wide range of topics. The most recent was through the SAMHSA GAINS Center on CIT-ECHO program in Albuquerque New Mexico. For more information go to www.goCIT.org
- The Cunningham Children's Home Families Stronger Together is re-convening the parent model planning committee later this month to update stakeholders on progress implementing the program including referral and engagement, community training event, and Juvenile Justice Council.



onedoor
to serve our community

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Champaign County
Law Enforcement



Nationwide

Law Enforcement and Individuals in Crisis

One in four officer-involved shootings kills an individual with a mental illness (Fuller, Lamb, Biasotti, and Snook, 2016)

Twenty-five percent of individuals with a mental illness have been arrested at some point in their lifetime (Livingston, 2016)

One in ten individuals' pathway to mental health treatment involved the police (Livingston, 2016)

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Current Local Crisis Response System

Crisis Team

- Crisis Line
- Hospital/Jail Crisis Assessment
- Consultation with law enforcement

Triage Stabilization

- OSF Hospital
- Carle Hospital
- County Jail
- Resolve at Scene

Residential Crisis

- Requirements
- Evaluation
 - Relocation
 - Voluntary Participation

Jail Diversion

- CU at Home
- Transportation
 - Street Outreach
 - The Phoenix Available M-F; 12-5

Shelter

- Men's Shelter
- Women's Shelter

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Tier 2 Vulnerability V

Stable

- Steady income/pays rent/possible homeowner
- Involved in groups/other support connections, strong support system
- No MI/SA issues and able to be managed if present
- Future-oriented thinking present
- Independent living skills present

At Risk

- Less stable income (paycheck to paycheck)
- Paying rent but not always on time
- Moderate support system (few strong supports)
- Managing any MI/SA issues, possibly involved in specific programming
- Can only focus on a couple of weeks in the future due to income status
- Money management and independent living skills begin to decline

Volatile

- Living paycheck to paycheck/no assurance of ongoing- long term employment
- Little to no strong support system
- Connections with housing programs such as PSH or IH
- Involved in MI/SA programming, lacking full engagement
- Lacking self-sufficiency
- Making poor choices due to need for income
- Sporadic involvement with police

Tier 1 Vulnerability V

Imminent

- Possible income, no address of their own
- Most likely couch surfing to avoid a bad living situation
- Moderate MI/SA issues going untreated
- Unable to receive treatment at resources due to lack of compliance
- Possibly receiving an SSI/SSDI check
- Frequent interaction with police for petty crimes (theft, trespassing, possession of controlled substance, etc.)

Dire

- No housing of their own
- Only income due to SSI/SSDI check or panhandling
- Not involved in any housing programs due to bans or other offenses
- Couch surfing from one bad situation to another
- Severe MI/SA issues going untreated
- Only supports are living on the streets
- Severe lack of trust is present, survival skills take over
- Daily/weekly interaction with law enforcement for crimes ranging from trespassing, aggressive panhandling, possession of controlled substance, etc.
- In need of lots of engagement/large amounts of time and energy to rebuild trust & functional relationships

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Champaign County

Law Enforcement and Individuals in Crisis

	2017*	2018	2019	2020**
Contacts	1580	2146	2067	852
Super-Utilizers, contacts***	406	641	596	200
Petitions	578	768	765	338
Arrests	108	130	148	45

* Data from April 2017 through December 2017 only

** Data current through July 28, 2020

*** Super-Utilizer: Individual with 5 or more CIT contacts since 2017

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One Door Crisis Response System - Mission

- An open, single door solution, offering the opportunity to be recognized, evaluated, stabilized, engaged with, and treated with dignity and respect
- Provides services to members of our community involved in an active crisis and is a resource for our most vulnerable citizens
- Enhances, but does not replace, current resources while decreasing law enforcement contact
- Strengthens collaboration between our community stakeholders, service providers, and local law enforcement agencies

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One Door Crisis Response System - Goals

DIVERSION An alternative to arrest and/or emergency room admissions

OPTIONS Solutions for dealing with individuals in crisis who do not meet criteria for arrest or involuntary admission

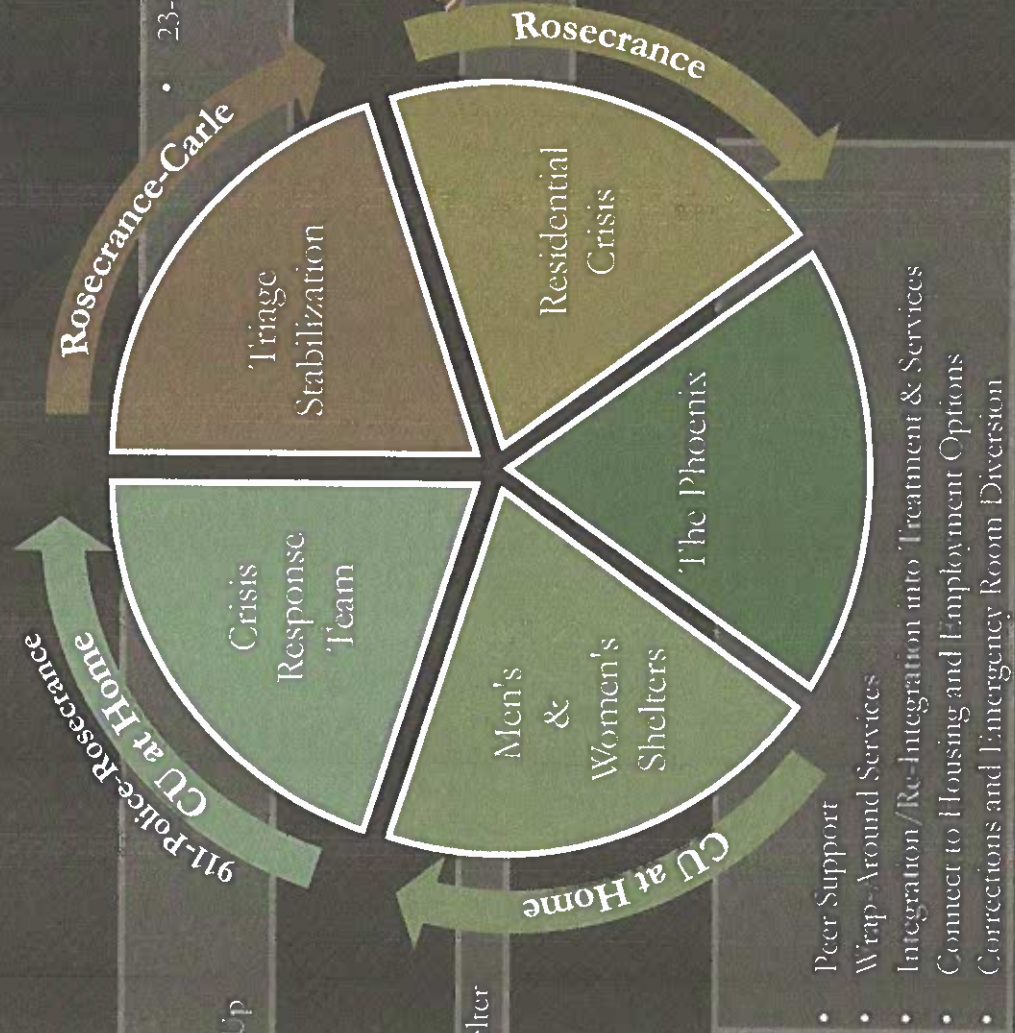
CASE MANAGEMENT Permits a proactive approach to address our community's most vulnerable consumers.

EDUCATION Regular interaction between social services, law enforcement, consumers, and other stakeholders provides a platform for all to learn and grow together.

ADVOCACY A direct approach is made on specific issues to facilitate civic engagement and collective action

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The Other Side of the Door



- 30 Minute (max) Response
- On-Scene Assessment
- Contact Review and Follow-Up

- No Ban – Adult – Damp Shelter

- 23-hour Stabilization for Active Crisis
- 24/7 Walk-In Services
- Living Room Model

- Access to Out-Patient Provider
- Crisis Respite

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What is the cost

- Capital Budget
 - Current \$720,000
 - Additional \$500,00 to \$800,000

- Training Budget
 - Current \$0.00
 - Additional \$55,00

- Recurring Program Budget
 - Current \$915,000
 - Additional \$1,292 million

- New Financial Commitment Required Year One: \$1.847 million to \$2.147 million

- New Financial Commitment Required Year Two and Beyond: \$1.292 million

- **Total Financial Commitment Required Year Two and Beyond: \$2.207 million**

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Questions

Where will the facility be located?

70 E Washington St, Champaign

Will the facility be open 24 hours a day?

The One Door will never close

Can the general public access the facility?

Yes, anyone in crisis may come to the door. A citizen does not need to be brought to the facility by law enforcement.

Will CU at Home's current services still be available?

Yes, a separate door will grant direct access to The Phoenix, shelters and other services

When will One Door open for business?

70 E. Washington needs physical enhancements. An architect working on plans and a contractor will begin work soon. Anticipate completion by early 20

Is One Door a program?

No. One Door is convenient care for a non-medical crisis. The individual in crisis will be offered stabilization and a referral to the appropriate specialist for treatment.

Will the crisis team respond county-wide when One Door opens?

A pilot program will begin with the Urbana Police Department. When all partners are comfortable, the team will expand county-wide. Expect the pilot to last 3 to 6 months.

Will One Door be a secured facility?

No. With one exception, entering the facility will be voluntary. The crisis team will analyze anyone entering the facility on a Petition of Involuntary Admission. If the individual is to be held on the petition, the team will arrange for alternative placement.

Thank You

Lt. Joel R. Sanders
Urbana Police Department
217-384-2320
sanderjr@urbanaininois.us

Cunningham Families Stronger Together (FST) Program Report
For the CCMHB September 23, 2020

Our Families Stronger Together (FST) program started delivering services through this new trauma-informed, culturally sensitive, family engagement program in March 2020. This report reflects our diligent implementation efforts over the past five months.

STAFF AND SERVICES- At the beginning of July 2020, we became and continue to be fully staffed with three Therapists, one Family Support Specialist, one 0.5 Coordinator and a 0.5 Master's level Associate Director. We continue to welcome referrals. Since the onset of COVID-19 protocol our staff continues to work remotely. Services for clients have been provided through telehealth sessions using both phone and Zoom. Following COVID-19 protocols, we occasionally need to see clients face-to-face to deliver a gift card for basics needs or to complete time sensitive paperwork. Throughout this COVID-19 crisis, we have continued to provide wellness checks, including questions directly related to the physical health of our clients and their families. Of the fourteen clients provided services, eleven identified as Black, two as Multi-Racial and one as Hispanic.

TRAINING- All staff have completed the 16-hour online Attachment, Regulation and Competency (ARC) treatment framework training. Due to COVID-19 precautions, the 2 day in-person ARC training with Dr. Margaret Blaustein that was to be offered to the Juvenile Justice Community in Champaign County, has been postponed until a safe way to provide this training to the maximum number of participants can be coordinated.

OTHER- The Logic Model and Indicator Worksheet have been completed after a workshop with the assistance of Dr. Nicole Allen's team at the University of Illinois. The ARC Skills Acquisition Assessment Tool was completed with the support of our ARC consultant, Dr. Rachel Liebman. Our team has begun to plan to take full advantage of the electronic reporting options of Strengths and Difficulties Questionnaire (SDQ) outcomes in order to facilitate improved communication with our clients, their families, and our community partners. The SDQ electronic reporting offers a visual representation of results of each administered SDQ, as well as of the progress of each client over time. We obtained approval of our grant application for the FY21 fiscal year. We are continuing to collaborate with community partners to explore the formation of a juvenile justice council in Champaign County.

REFERRAL EFFORTS- The Associate Director of our FST program has been in contact with our key stakeholders to invite referrals, including from the Youth Assessment Center, the Juvenile Probation and Court Services - JCAI and Adjudicated minors, the Juvenile Detention Center, the State's Attorney and Public Defender's office. We have been welcoming referrals for adjudicated minors since July 1, 2020. The program has received and successfully opened 9 referrals from the Youth Assessment Center, 2 referrals from the Public Defender's office, and 2 from the Juvenile Detention Center.

Our FST team has worked collaboratively with our community partners to help connect our families to resources in the community specific to their needs. Services have ranged from helping to meet emergency housing needs for a family, identifying symptoms of and linking a young person to a free federally funded early intervention program for those who are presenting with intensive mental health needs, and referring several to longer term outpatient counseling services. Our FST team continues to actively recruit and collaborate with both natural and professional supports in the life of our clients, to help to increase both the strength and number of the relationships with supportive adults, as well as to increase the protective factors experienced by each family.

Stephanie Howard-Gallo

Operations and Compliance Coordinator Staff Report – September 2020 Board Meeting

SUMMARY OF ACTIVITY:

Audits:

As previously reported, Promise Healthcare (CCMHB funded) did not submit an audit for 2018 by their extended due date of September 30, 2019. Payments continue to be withheld. Audits/Financial Reviews for 2019 are again due on October 30, 2020. Several of the agencies have asked for an extension.

Certificates of Liability Insurance:

Certificates of Liability Insurance were requested from each agency with a due date of September 1st. A reminder was sent the last day of July.

Fourth Quarter Reporting:

4th Quarter financial and program reports for all funded programs were due August 28th at the close of business. Performance Outcome Measures are due at the 4th Quarter of each funding year, as well. Many of the agencies requested an extension of time to complete the reporting. As of this writing, no letters of non-compliance have been sent and no payments have been withheld. Board members can access these reports using the online system. Staff can also provide paper copies of the reports for you, if requested.

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

A Facebook page promotes AIR's mission, members, artists, events, and news articles of interest. I am one of the administrators of the page. Due to Covid-19, we have put a "hold" on art shows at the Market IN the Square and International Galleries.

We had a zoom meeting with the AIR artists and supports on September 14th in order to discuss plans/concerns for the coming year.

Lynn and I will be working with University of Illinois LAS 122 and allowing these honors students to complete social media content on behalf of Alliance for Inclusion and Respect. Social media content that will be included in the final project will be received in November or December.

The social media package will include:

- At least 1 video/photo montage
- 3 posts from influential people who have had an impact on the population
- 2 posts explaining the history of your organization
- 2 posts explaining social issues that are connected to the organization
- 3 posts about your mission
- 3 engaging social media surveys
- 3 posts about your target population
- Multiple posts about an "awareness month" that coincides with your agency
- 3 posts highlighting a staff member or volunteer
- 1 post highlighting your administrative support person/people
- 1 post highlighting your Executive Director
- 3 interactive posts asking a question/requesting a response/picture

Contracts:

All contracts have been fully executed at this point.

Trainings:

I will attend a training on September 16 and 17 on "Employment Law Updates" at the request of Lynn Canfield.

FOIA/OMA Certification:

As the Open Meeting Act (OMA) Designee and the Freedom of Information Act (FOIA) Officer for the CCMHB/CCDDB, I must successfully complete training on an annual basis. I completed the 2020 trainings and submitted my certificates to Lynn Canfield on September 2, 2020.

Other:

- Preparing meeting materials for CCMHB/CCDDB regular meetings and study sessions/presentations.
- Composing minutes from the meetings.
- Attending meetings and study sessions for the CCDDB/CCMHB.
- Virtually attended Community Coalition meetings.
- Virtually attended Expo meetings.

2020 September Staff Report- Shandra Summerville Cultural and Linguistic Competence Coordinator

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

CLC Plan 4th Quarterly Reports:

CLC Plan 4th Quarter Reports were due August 28th. Several of the Agencies asked for an extension. All the 4th Quarter CLC Plan reports have been submitted and uploaded to the system except for two agencies. I will review all the plans and provide feedback additional support to agencies that did not complete the minimum requirements.

Cultural Competence Training/Support

Champaign County Head Start- September 2, 2020- Virtual CLC Learning Opportunity

Champaign County Head Start has committed to an Organizational Cultural Competence Process. This process has started with an Organizational Assessment and will take place over the next program year. I will be providing support, training, and technical assistance during this process and will keep you updated.

Don Moyer Boys and Girls Club: September 3, 2020- CLC Training for Program St

Children's Advocacy Center- CLC Plan 4th Quarter Report Support

NAMI- Illinois- CLC Plan 4th Quarter Report Support

Mahomet Area Youth Club- Schedule on-line CLC Training for members of their board of directors.

Regional Planning Commission- September 16, 2020 CLC Training for their Cultural Competence Committee.

CLC Coordinator Direct Service Activities

Mental Health First Aid-

I am completing the virtual training and blended learning option. I will start setting dates for Mental Health First Aid Training in October of 2020. These training will be conducted with the updated curriculum and virtual options.

'Families Stronger Together' (FST), a new Family Program by Cunningham Children's Home

I reviewed the updates from Cunningham Children's Home about the Families Stronger Together Program. We will have a stakeholder meeting on Tuesday, September 22, 2020.

2020 September Staff Report- Shandra Summerville Cultural and Linguistic Competence Coordinator

Training and Webinars:

- Avoiding COVID-19 Burnout: Self-Care and Resiliency for Public Health Leaders- September 11, 2020
- Addressing the Growing Rate of Suicide in the Black Community- September 30, 2020
- ADA 25 Advancing Leadership Training Series-
- Trauma-Informed Care 101: Basics of Trauma and the TIC Framework
- Challenges and Opportunities Achieving Educational Equity during COVID-19
- Exploring the Intersectionality of Peer Support
- and Person-Centered Planning Across Disability

ACMAHI-

I attended the ACHMHA meeting on August 13th & 14th. Kristine Herman, Bureau Chief for Behavioral Health at HFS spoke to the association about the implementation of Systems of Care in Illinois.

Children's Behavioral Health Committee- I worked with the committee members to create a statewide resource guide for families. I provided content from National Federation of Families, and the Illinois Youth and Family Peer Support Alliance and other resources from Rosecrance. I attended the committee meeting on August 27, 2020.

CU- Trauma and Resilience Initiative:

I participated in the in the Faith Based Violence Interrupter Workgroup to look at a Violence Interrupter Model for the community. This workgroup was formed out of the Community Violence Interrupter Committee. There was a consensus that community would use of the TenPoint Plan. Four churches have agreed to partner and host training in their congregations about this model.

-Based on The Boston TenPoint Coalition (BTPC), which reported a 79% reduction in violent crime in the 1990s; was adopted by Indianapolis TenPoint Coalition.

- The mission stated by the Indianapolis TenPoint Coalition is to reduce violence and homicide through direct engagement, the promotion of education, and the fostering of employment opportunities.

- As an organization that is rooted in faith, promotes the notion of faith leadership going beyond the congregation to serve the broader community.

- Provides ongoing training for individual churches along with a systematic program in leadership development to create, maintain and sustain community mobilization.

<https://btpc.org/>

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2020 September Staff Report- Shandra Summerville

Cultural and Linguistic Competence Coordinator

Anti-Stigma Activities/Community Collaborations and Partnerships

211: I attended Improving Champaign County 211 Service Provision. This is a project with the Institute of Communications Community Data Clinic through the University of Illinois Urbana-Champaign. I participated on the calls with other CCMHB/DDB staff members as we provided input about ways to make 211- more user friendly.

Research affiliate, Community Data Clinic

AIR- Alliance for Inclusion and Respect: On July 27-29 The EbertFest premiered the AIR sponsored film "A Most Beautiful Thing". Chaz Ebert, Mary Mazzio, Arshay Cooper, Eric Pierson, Tracy Dace, Joseph Omo-Osagie participated in the film Q &A virtually. On August 1, 2020 AIR hosted a community conversation to continue to talk about building resilient communities and the importance of story telling is a pathway to healing from historical trauma. 45 people registered for the ZOOM call and we streamed the conversation live on Facebook. To see the community conversation, please go the AIR Facebook Page.

C-HEARTS African American Story Telling Project: I am continuing to meet with C-Hearts and there from this Campus and Community collaboration there is a partnership that is created with DREAMM and The Well Experience called the ASPIRE Program. The Ambitions and Stories of young People Inspiring Resilience and Engagement (ASPIRE) connectedness program. The objectives of the ASPIRE program are to facilitate Black youth's exploration of their strengths and resilience, foster socio-cultural connectedness, and encourage youth to imagine a future filled with unlimited possibilities. The ASPIRE program will incorporate storytelling activities (e.g., vision-boarding, identity wheel) that encourage youth educational aspirations and a sense of belonging. I will serve as a community partner and provide cultural competence training for volunteers that will be working with the youth in this program.

Human Services Council- I attended the Human Services Council Meeting in August. This was the first meeting since March. I attended with other CCHMB/DDB Staff and we provided an update about the Disability Expo.

Community Learning Lab School of Social Work-UIUC CLL has assigned two BSW Students to a project that will look ways to support CCMHB/DDB on our work to eradicate racism as part of the Grand Challenge.

Grand Challenge Explained:

"Over the next 10 years, researchers, practitioners and policymakers will be encouraged to engage in a variety of activities that will advance the Eradicating Racism GC and ignite related achievements. These efforts will:

2020 September Staff Report- Shandra Summerville

Cultural and Linguistic Competence Coordinator

- Focus on evidence-based and practice-based research that cultivates innovation to improve the conditions of daily life of people impacted by racism and facilitates systemic change on the individual, organization, community and societal levels.
- Advance community empowerment and advocacy for eradicating racism and white supremacy through solutions that create sustainable changes.
- Foster the development of an anti-racist social work workforce that promotes access to resources and opportunities and encompasses transdisciplinary collaboration.
- Promote teaching and learning within social work education programs that examines structural inequalities and white privilege, and their impact on individual and group outcomes.
- Develop a policy agenda for eradicating racism and white supremacy from institutions and organizations, where structural racism is evident and causes the most damage."

Source: New Grand Challenges Initiative Aims to Eradicate Racism

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

As the conversation about Racism as a public health issue continues, I want to make sure that we continue to look at the foundational work that has been done and begin looking at specific elements of the foundational documents that were used by the CCMHB/DDB to make decisions about Cultural and Linguistic Competence. I have also included other articles and resources for you to review.

MENTAL HEALTH: Culture, Race, and Ethnicity

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

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

Pages: 36-37: Culturally Competent Services

Pages: 37-39- Racism, Discrimination, and Mental Health

Pages: 39-40- Poverty, Marginal Neighborhoods and Community Violence

National CLAS Standards Fact Sheet

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

News Articles

Including Racism in a Trauma History: A Clinician's Reflections

<https://www.psychiatrytimes.com/view/including-racism-trauma-history-clinicians-reflections>

2020 September Staff Report- Shandra Summerville Cultural and Linguistic Competence Coordinator

Staff Meeting Rituals that Build Trust and Community

[https://ggie.berkeley.edu/practice/staff-meeting-rituals-that-build-trust-and-community/?utm_source=Greater+Good+Science+Center&utm_campaign=c243bffdbd-ED NEWSLETTER AUG 2020&utm_medium=email&utm_term=0_5ae73e326e-c243bffdbd-73891019#tab_2](https://ggie.berkeley.edu/practice/staff-meeting-rituals-that-build-trust-and-community/?utm_source=Greater+Good+Science+Center&utm_campaign=c243bffdbd-ED%20NEWSLETTER%20AUG%202020&utm_medium=email&utm_term=0_5ae73e326e-c243bffdbd-73891019#tab_2)

Black Children Wait Longer For Autism Diagnosis

<https://www.disabilityscoop.com/2020/08/25/black-children-wait-longer-autism-diagnosis/28811/>

Here is a comprehensive report on racial disparities or inequality. Other than health care, this report is not related to our work. The article highlights the conditions that contribute to the stress, and anxieties experienced by African Americans. It should paint the over picture of Black life. From health care to education, how systemic racism affects Black Americans.

The Race Gap Between Black and White

Read in Reuters: <https://apple.news/ADHsEFKRXQtmpKI42AQbDOA>

'Racial Inequality May Be As Deadly As COVID-19,' Analysis Finds

<https://www.npr.org/sections/health-shots/2020/08/27/906002043/racial-inequality-may-be-as-deadly-as-covid-19-analysis-finds>

Overcome your bias blind spots to better help patients

<https://www.medicaleconomics.com/view/overcome-your-bias-blind-spots-to-better-help-patients>

Previous Articles from July

Seven Ways Funders Can Support Racial Justice

<https://movementstrategy.org/seven-ways-funders-can-support-racial-justice/>

Healing America: A Funder's Commitment to Racial Equity

<https://bjn9t2lhlni2dhd5hvym7llj-wpengine.netdna-ssl.com/wp-content/uploads/2016/12/RP-Summer10-Christopher.pdf>

Helping Children Thrive: Early Childhood Development & ACEs (Infographic Provided)

<https://www.nihcm.org/categories/helping-children-thrive-early-childhood-development-aces>

ECONOMIC & SOCIAL INEQUITIES

RACISM & INJUSTICE

COMMUNITY VIOLENCE

HOUSING INSECURITY

FOOD INSECURITY

POVERTY

In 2018, 1 in 6 children lived in poverty



On average, 2x the poverty line is needed to meet basic needs

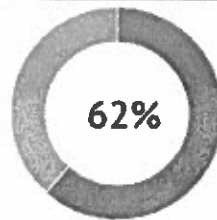
Families below this threshold are considered low income

41% of children lived in low-income households

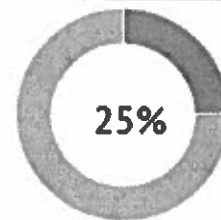


Adverse childhood experiences (ACEs) also include:
abuse, neglect & household dysfunction

A recent study found
that of US adults:



reported at least 1 of
these ACEs



reported 3 or more of
these ACEs

Higher numbers of ACEs were more likely to be reported by:

| Black | multiracial | less than a high school education | lower income |

ACEs can lead to toxic stress, which impacts health

Toxic stress explains how experiencing adversity can lead to poor lifelong health—excessive activation of the stress response system can damage multiple developing biological systems.

Studies have linked childhood adversity & toxic stress to increased health risks:



Heart Disease



Obesity



Depression



Stroke



Diabetes



Suicide Attempts



Cancer



STDs



Substance Use

How to Support Child Development

WHY INVEST IN EARLY CHILDHOOD?

Reducing childhood adversity can reduce health care costs, improves economic productivity,
lowers crime rates & supports educational achievement

Invest in Early Care &

Champaign County Mental Health Board
 FY20 Revenues and Expenditures as of 06/30/20

Revenue	Q2	YTD	Budget	% of Budget
Property Tax Distributions	\$ 261,723	\$ 261,723	\$ 5,247,310	4.99%
From Developmental Disabilities Board	\$ 98,991	\$ 197,982	\$ 395,970	50.00%
Gifts & Donations	\$ (170)	\$ 16,305	\$ 20,000	81.53%
Other Misc Revenue	\$ -	\$ 4,562	\$ 83,000	5.50%
TOTAL	\$ 360,544	\$ 480,571	\$ 5,746,280	8.36%

Expenditure	Q2	YTD	Budget	% of Budget
Personnel	\$ 129,237	\$ 248,329	\$ 588,351	42.21%
Commodities	\$ 1,295	\$ 2,673	\$ 19,000	14.07%
Contributions & Grants	\$ 1,087,860	\$ 2,110,968	\$ 4,783,849	44.13%
Professional Fees	\$ 48,362	\$ 84,231	\$ 140,000	60.16%
Other Services	\$ 13,133	\$ 56,708	\$ 215,080	26.37%
TOTAL	\$ 1,279,885	\$ 2,502,909	\$ 5,746,280	43.56%

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Champaign County Developmental Disability Board
 FY20 Revenues and Expenditures as of 06/30/20

Revenue	Q2	YTD	Budget	% of Budget
Property Tax Distributions	\$ 213,397	\$ 213,397	\$ 4,341,905	4.91%
From Mental Health Board	\$ -	\$ -	\$ 8,000	0.00%
Other Misc Revenue	\$ 9,524	\$ 12,032	\$ 24,000	50.13%
TOTAL	\$ 222,921	\$ 225,429	\$ 4,373,905	5.15%

Expenditure	Q2	YTD	Budget	% of Budget
Contributions & Grants	\$ 759,722	\$ 1,686,491	\$ 3,927,935	42.94%
Professional Fees	\$ 98,991	\$ 197,982	\$ 395,970	50.00%
Transfer to CILA Fund	\$ -	\$ 50,000	\$ 50,000	100.00%
TOTAL	\$ 858,713	\$ 1,934,473	\$ 4,373,905	44.23%

CHAMPAIGN COUNTY

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VENDOR NO	VENDOR NAME	TRN DTE	B N CD	TR TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 090 MENTAL HEALTH											
*** DEPT NO. 000 BALANCE SHEET											
74813	TUTOR DOCTOR	7/09/20	06 VR	53- 212		609334	7/10/20	090-000-172.00-00	REVENUES	DIS EXP RFD 51179/9	300.00
										VENDOR TOTAL	300.00 *
										BALANCE SHEET TOTAL	300.00 *
*** DEPT NO. 053 MENTAL HEALTH BOARD											
12	CHAMPAIGN COUNTY TREASURER	POSTAGE REIMBURSEMNT									
202		6/08/20	06 VR	53- 173		608491	6/12/20	090-053-522.06-00	POSTAGE, UPS, FED EXPRESSMENT HLTH PSTG MAY		121.41
		7/09/20	06 VR	53- 208		609156	7/10/20	090-053-522.06-00	POSTAGE, UPS, FED EXPRESSMENT HLTH PSTG JAN		183.89
		7/09/20	06 VR	53- 208		609156	7/10/20	090-053-522.06-00	POSTAGE, UPS, FED EXPRESSMENT HLTH PSTG FEB		119.42
		7/09/20	06 VR	53- 208		609156	7/10/20	090-053-522.06-00	POSTAGE, UPS, FED EXPRESSMENT HLTH PSTG MAR		189.10
										VENDOR TOTAL	613.82 *
25	CHAMPAIGN COUNTY TREASURER	RENT-GENERAL CORP									
		7/09/20	06 VR	53- 211		609158	7/10/20	090-053-533.50-00	FACILITY/OFFICE RENTALS	APR OFFICE RENT	1,883.72
		7/09/20	06 VR	53- 211		609158	7/10/20	090-053-533.50-00	FACILITY/OFFICE RENTALS	MAY OFFICE RENT	1,883.72
		7/09/20	06 VR	53- 211		609158	7/10/20	090-053-533.50-00	FACILITY/OFFICE RENTALS	JUN OFFICE RENT	1,883.72
		7/09/20	06 VR	53- 211		609158	7/10/20	090-053-533.50-00	FACILITY/OFFICE RENTALS	JUL OFFICE RENT	1,883.72
										VENDOR TOTAL	7,534.88 *
41	CHAMPAIGN COUNTY TREASURER	HEALTH INSUR FND 620									
		7/01/20	02 VR	620- 88		609159	7/10/20	090-053-513.06-00	EMPLOYEE HEALTH/LIFE INS	APR-JUN FSA ADMIN	24.00
		7/01/20	02 VR	620- 89		609159	7/10/20	090-053-513.06-00	EMPLOYEE HEALTH/LIFE INS	JUN HI, LI & ADMIN	3,951.15
										VENDOR TOTAL	3,975.15 *
88	CHAMPAIGN COUNTY TREASURER	I.M.R.F. FUND 088									
		6/11/20	03 VR	88- 20		608494	6/12/20	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 6/5 PR	1,148.05
		6/23/20	02 VR	88- 22		608872	6/30/20	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 6/19 PR	1,148.05

15

VENDOR TOTAL

2,296.10 *

203

NR 188- 41

608502 6/12/20 090-053-513.01-00 SOCIAL SECURITY-EMPLOYER FICA 6/5 PR

1,201.44

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VENDOR NO	VENDOR NAME	TRN DTE	B N CD	TR TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 090 MENTAL HEALTH											
		6/23/20	02 VR	188- 44		608878	6/30/20	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER FICA	6/19 PR	1,201.45
										VENDOR TOTAL	2,402.89 *
5780	BP COMPUTER SERVICES										
		7/06/20	02 VR	53- 233		609188	7/10/20	090-053-533.07-00	PROFESSIONAL SERVICES	3RD QTR COMPUTER SV	750.00
										VENDOR TOTAL	750.00 *
8799	BOOT BOOKS										
		6/18/20	06 VR	53- 206		608700	6/19/20	090-053-533.98-00	DISABILITY EXPO	INV 004 6/17	2,250.00
										VENDOR TOTAL	2,250.00 *
15127	CHAMPAIGN COUNTY CHRISTIAN HEALTH CENTER										
		6/08/20	01 VR	53- 176		608532	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY MENTAL HLTH CAR	1,083.00
		6/08/20	01 VR	53- 176		608532	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN MENTAL HLTH CAR	1,087.00
		7/06/20	02 VR	53- 214		609207	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL MENTAL HLTH CAR	1,083.00
										VENDOR TOTAL	3,253.00 *
15184	CHAMPAIGN COUNTY HEALTH CARE CONSUMERS SUITE 208										
		6/08/20	01 VR	53- 177		608534	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY CHW OUTRCH/BENF	4,941.00
		6/08/20	01 VR	53- 177		608534	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY JUSTICE INVOLVE	4,564.00
		6/08/20	01 VR	53- 177		608534	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN CHW OUTRCH/BENF	4,949.00
		6/08/20	01 VR	53- 177		608534	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN JUSTICE INVOLVE	4,571.00
		7/06/20	02 VR	53- 215		609208	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL CHW OUTRCH/BENF	6,496.00
		7/06/20	02 VR	53- 215		609208	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL JUSTICE INVOLVE	6,261.00
										VENDOR TOTAL	31,782.00 *
16930	CHRISP MEDIA, LLC										
		7/06/20	02 VR	53- 234		609213	7/10/20	090-053-533.07-00	PROFESSIONAL SERVICES	1ST QTR PROF FEE	234.00
		7/06/20	02 VR	53- 234		609213	7/10/20	090-053-533.07-00	PROFESSIONAL SERVICES	2ND QTR PROF FEE	234.00
		7/06/20	02 VR	53- 234		609213	7/10/20	090-053-533.07-00	PROFESSIONAL SERVICES	3RD QTR PROF FEE	234.00
										VENDOR TOTAL	702.00 *

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VENDOR NO	VENDOR NAME	TRN DTE	B N CD	TR TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 090 MENTAL HEALTH											
17048	THE CINCINNATI INSURANCE COMPANY										
		7/07/20	01 VR	53- 207		609215	7/10/20	090-053-533.20-00	INSURANCE	AC 1000528156 6/11	1,042.50
		7/07/20	01 VR	53- 207		609215	7/10/20	090-053-533.20-00	INSURANCE	AC 1000528287 5/20	3,125.00
		7/07/20	01 VR	53- 207		609215	7/10/20	090-053-533.20-00	INSURANCE	AC 1000528292 6/9	2,698.00
		7/07/20	01 VR	53- 207		609215	7/10/20	090-053-533.20-00	INSURANCE	AC 1000528145 6/11	925.00
										VENDOR TOTAL	7,790.50 *
18230	COMMUNITY SERVICE CENTER OF NORTHERN CHAMPAIGN COUNTY										
		6/08/20	01 VR	53- 181		608544	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY RESOURCE CONNEC	5,633.00
		6/08/20	01 VR	53- 181		608544	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN RESOURCE CONNEC	5,633.00
		7/06/20	02 VR	53- 218		609221	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL RESOURCE CONNEC	5,633.00
										VENDOR TOTAL	16,899.00 *
18430	CONSOLIDATED COMMUNICATIONS										
		6/26/20	01 VR	28- 53		608922	6/30/20	090-053-533.33-00	TELEPHONE SERVICE	21738437760 6/1	28.98
										VENDOR TOTAL	28.98 *
19260	COURAGE CONNECTION										
		6/08/20	01 VR	53- 182		608551	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY COURAGE CONNECT	10,740.00
		6/08/20	01 VR	53- 182		608551	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN COURAGE CONNECT	10,749.00
										VENDOR TOTAL	21,489.00 *
19346	CRISIS NURSERY										
		6/08/20	01 VR	53- 183		608552	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY BEYOND BLUE	6,250.00
		6/08/20	01 VR	53- 183		608552	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN BEYOND BLUE	6,250.00
		7/06/20	02 VR	53- 219		609227	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL BEYOND BLUE	6,250.00
										VENDOR TOTAL	18,750.00 *
20271	CUNNINGHAM CHILDREN'S HOME										
		6/08/20	01 VR	53- 184		608553	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY ECHO HOUSING/EM	7,981.00
		6/08/20	01 VR	53- 184		608553	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY PARENTING MODEL	23,412.00
		6/08/20	01 VR	53- 184		608553	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN ECHO HOUSING/EM	7,982.00

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*** FUND NO. 090 MENTAL HEALTH												
		6/08/20	01 VR	53-	184		608553	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUNE PARENTING MODE	23,423.00
		7/09/20	08 VR	53-	236		609230	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL ECHO HOUSING/EM	8,467.00
		7/09/20	08 VR	53-	236		609230	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL FAMILIES STRONG	26,111.00
											VENDOR TOTAL	97,376.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF								CHAMPAIGN COUNTY INC			
		6/08/20	01 VR	53-	185		608556	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY FAM DEV CENTER	48,262.00
		6/08/20	01 VR	53-	185		608556	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN FAM DEV CENTER	48,266.00
		7/06/20	02 VR	53-	220		609232	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL FAM DEV CENTER	49,710.00
											VENDOR TOTAL	146,238.00 *
22730	DON MOYER BOYS & GIRLS CLUB											
		6/08/20	01 VR	53-	186		608557	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY CU CHANGE	8,627.00
		6/08/20	01 VR	53-	186		608557	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY CU NGHBRHD CHAM	16,289.00
		6/08/20	01 VR	53-	186		608557	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY YOUTH/FAMILY SV	13,333.00
		6/08/20	01 VR	53-	186		608557	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN CU CHANGE	8,629.00
		6/08/20	01 VR	53-	186		608557	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN CY NGHBRHD CHAM	16,290.00
		6/08/20	01 VR	53-	186		608557	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN YOUTH/FAMILY SV	13,337.00
		6/08/20	01 VR	53-	186		608557	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SUMMER INIT COALITN	42,800.00
											VENDOR TOTAL	119,305.00 *
22870	DREAAM HOUSE											
		6/08/20	01 VR	53-	187		608559	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY DREAAM	6,666.00
		6/08/20	01 VR	53-	187		608559	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN DREAAM	6,674.00
											VENDOR TOTAL	13,340.00 *
24095	EMK CONSULTING LLC											
		6/11/20	05 VR	53-	203		608561	6/12/20	090-053-533.07-00	PROFESSIONAL SERVICES	INV 399 6/8	1,894.00
											VENDOR TOTAL	1,894.00 *
24215	EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR SUITE 4D											
		6/08/20	01 VR	53-	188		608562	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY FAM SUP/STRENGT	4,703.00

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*** FUND NO. 090 MENTAL HEALTH											
		6/08/20	01 VR	53- 188		608562	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN FAM SUP/STRENGT	4,707.00
		7/06/20	02 VR	53- 223		609238	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL FAM SUP/STRENGT	4,703.00
										VENDOR TOTAL	14,113.00 *
26000	FAMILY SERVICE OF CHAMPAIGN COUNTY								GRANTS		
		6/08/20	01 VR	53- 189		608564	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY COUNSELING	2,500.00
		6/08/20	01 VR	53- 189		608564	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY SELF HELP CENTE	2,369.00
		6/08/20	01 VR	53- 189		608564	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY SENIOR CNSL/ADV	13,529.00
		6/08/20	01 VR	53- 189		608564	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN COUNSELING	2,500.00
		6/08/20	01 VR	53- 189		608564	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN SELF HELP CENTE	2,371.00
		6/08/20	01 VR	53- 189		608564	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN SENIOR CNSL/ADV	13,531.00
		7/06/20	02 VR	53- 224		609242	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL COUNSELING	2,500.00
		7/06/20	02 VR	53- 224		609242	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL SELF HELP CENTE	2,410.00
		7/06/20	02 VR	53- 224		609242	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL SENIOR CNSL/ADV	13,529.00
										VENDOR TOTAL	55,239.00 *
26760	FIRST FOLLOWERS								401 EAST PARK STREET		
		6/08/20	01 VR	53- 190		608567	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY PEER MNTR REENT	7,916.00
		6/08/20	01 VR	53- 190		608567	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN PEER MNTR REENT	7,924.00
										VENDOR TOTAL	15,840.00 *
27970	FREDERICK & HAGLE										
		6/11/20	05 VR	53- 202		608569	6/12/20	090-053-533.07-00	PROFESSIONAL SERVICES	4HR 5/7-28	880.00
										VENDOR TOTAL	880.00 *
30550	GROW IN ILLINOIS										
		6/08/20	01 VR	53- 191		608572	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY PEER SUPPORT	6,436.00
		6/08/20	01 VR	53- 191		608572	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN PEER SUPPORT	6,443.00
		7/06/20	02 VR	53- 226		609250	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL PEER SUPPORT	6,436.00
										VENDOR TOTAL	19,315.00 *
35050	I3 BROADBAND - CU										

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6/08/20 01 VR 53- 171

608578 6/12/20 090-053-533.29-00 COMPUTER/INF TCH SERVICESINV 18610031 6/4

144.95

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*** FUND NO. 090 MENTAL HEALTH											
		7/09/20	08 VR	53- 235		609258	7/10/20	090-053-533.29-00	COMPUTER/INF TCH SERVICES	INV 18802951 7/4	144.95
										VENDOR TOTAL	289.90 *
44570	MAHOMET AREA YOUTH CLUB										
		6/08/20	01 VR	53- 192		608598	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY BLAST	1,250.00
		6/08/20	01 VR	53- 192		608598	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY MEMBERS MATTER	1,500.00
		6/08/20	01 VR	53- 192		608598	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN BLAST	1,250.00
		6/08/20	01 VR	53- 192		608598	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN MEMBERS MATTER	1,500.00
										VENDOR TOTAL	5,500.00 *
47690	MINUTEMAN PRESS								SUITE B		
		6/08/20	01 VR	53- 170		608603	6/12/20	090-053-533.98-00	DISABILITY EXPO	INV 58973 3/3	118.13
										VENDOR TOTAL	118.13 *
49870	NATIONAL ALLIANCE ON MENTAL ILLNESS										
		6/08/20	01 VR	53- 193		608605	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY NAMI CHAMPAIGN	833.00
		6/08/20	01 VR	53- 193		608605	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN NAMI CHAMPAIGN	837.00
										VENDOR TOTAL	1,670.00 *
50715	NATIONAL COUNCIL FOR BEHAVIORAL HEALTH								STE 400		
		6/08/20	01 VR	53- 108	4176	608606	6/12/20	090-053-533.18-00	NON-EMPLOYEE TRAINING, SEMIN	INV 100043928 3/11	1,795.20
										VENDOR TOTAL	1,795.20 *
54650	PEPSI COLA CHAMPAIGN-URBANA BOTTLING										
		6/08/20	01 VR	53- 174		608610	6/12/20	090-053-522.02-00	OFFICE SUPPLIES	INV 81104902 6/1	13.12
										VENDOR TOTAL	13.12 *
58118	QUILL CORPORATION (MH)								ACCOUNT QL8197518		
		6/08/20	05 VR	53- 165		608614	6/12/20	090-053-522.02-00	OFFICE SUPPLIES	INV 6842289 5/11	78.99
		6/08/20	05 VR	53- 165		608614	6/12/20	090-053-522.02-00	OFFICE SUPPLIES	INV 6823523 5/11	22.29
		6/08/20	05 VR	53- 165		608614	6/12/20	090-053-522.02-00	OFFICE SUPPLIES	INV 6933547 5/14	55.76
		6/08/20	05 VR	53- 165		608614	6/12/20	090-053-522.02-00	OFFICE SUPPLIES	INV 6945941 5/14	106.96

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*** FUND NO. 090 MENTAL HEALTH												
		6/08/20	05 VR	53-	165		608614	6/12/20	090-053-522.02-00	OFFICE SUPPLIES	INV 7030270 5/19	37.22
		6/08/20	05 VR	53-	165		608614	6/12/20	090-053-533.93-00	DUES AND LICENSES	INV 7222661 5/27	99.00
		6/11/20	05 VR	53-	204		608614	6/12/20	090-053-522.02-00	OFFICE SUPPLIES	INV 7458987 6/3	334.55
		6/11/20	05 VR	53-	204		608614	6/12/20	090-053-522.04-00	COPIER SUPPLIES	INV 7458987 6/3	156.39
										VENDOR TOTAL		891.16 *
59434	RAPE, ADVOCACY, COUNSELING & EDUC SRVCS SUITE 211											
		6/08/20	01 VR	53-	195		608615	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY SEX VIOL PREV/E	5,893.00
		6/08/20	01 VR	53-	195		608615	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN SEX VIOL PREV/E	5,899.00
		7/06/20	02 VR	53-	228		609307	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL SEX VIOL PREV/E	5,250.00
										VENDOR TOTAL		17,042.00 *
59472	RATTLE THE STARS											
		6/08/20	01 VR	53-	196		608616	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY YTH SUIC PREV/E	4,583.00
		6/08/20	01 VR	53-	196		608616	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN YTH SUIC PREV/E	4,587.00
		7/06/20	02 VR	53-	229		609308	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL YTH SUIC PREV/E	7,208.00
										VENDOR TOTAL		16,378.00 *
61780	ROSECRANCE, INC.											
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY CRIMNL JUSTC PS	25,362.00
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY CRIS/ACSS/BENF	16,996.00
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY FRESH START	6,609.00
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY PREVENTION SVCS	5,000.00
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY RECOVERY HOME	16,666.00
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY SPECIALTY COURT	16,916.00
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN CRIMNL JUSTC PS	25,368.00
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN CRIS/ACSS/BENF	17,004.00
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN FRESH START	6,611.00
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN PREVENTION SVCS	5,000.00
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN RECOVERY HOME	16,674.00
		6/08/20	02 VR	53-	197		608622	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN SPECIALTY COURT	16,924.00
		7/06/20	02 VR	53-	230		609312	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL CRIMNL JUSTC PS	25,362.00

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*** FUND NO. 090 MENTAL HEALTH												
		7/06/20	02	VR	53-	230	609312	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL CRIS/ACSS/BENF	16,996.00
		7/06/20	02	VR	53-	230	609312	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL FRESH START	6,609.00
		7/06/20	02	VR	53-	230	609312	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL PREVENTION SVCS	5,000.00
		7/06/20	02	VR	53-	230	609312	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL RECOVERY HOME	16,666.00
		7/06/20	02	VR	53-	230	609312	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL SPECIALTY COURT	16,916.00
											VENDOR TOTAL	262,679.00 *
76609	UNITED WAY OF CHAMPAIGN COUNTY											
		6/08/20	02	VR	53-	201	608633	6/12/20	090-053-533.07-00	PROFESSIONAL SERVICES	4TH QTR 211 PATH SV	4,518.00
											VENDOR TOTAL	4,518.00 *
76867	UNIV OF IL SPONSORED PROG & RESEARCH ADM											
		6/08/20	02	VR	53-	200	608634	6/12/20	090-053-533.07-00	PROFESSIONAL SERVICES	MAY MHB20-039 CONSL	6,566.00
		6/08/20	02	VR	53-	200	608634	6/12/20	090-053-533.07-00	PROFESSIONAL SERVICES	JUN MHB20-039 CONSL	6,566.00
											VENDOR TOTAL	13,132.00 *
77280	UP CENTER OF CHAMPAIGN COUNTY											
		6/08/20	02	VR	53-	198	608636	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY CHLD/YTH/FAM PR	2,647.00
		6/08/20	02	VR	53-	198	608636	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN CHLD/YTH/FAM PR	2,651.00
		7/06/20	02	VR	53-	231	609337	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL CHLD/YTH/FAM PR	2,647.00
											VENDOR TOTAL	7,945.00 *
78120	URBANA NEIGHBORHOOD CONNECTION CENTER											
		6/08/20	02	VR	53-	199	608638	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY COMM STUDY CNTR	2,125.00
		6/08/20	02	VR	53-	199	608638	6/12/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN COMM STUDY CNTR	2,125.00
		7/06/20	02	VR	53-	232	609340	7/10/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL COMM STUDY CNTR	2,125.00
											VENDOR TOTAL	6,375.00 *
78888	VISA CARDMEMBER SERVICE - MENTAL HEALTH AC#4798510049573930											
		6/18/20	06	VR	53-	205	608830	6/19/20	090-053-522.02-00	OFFICE SUPPLIES	3930 TARGET 5/21	69.05
		6/18/20	06	VR	53-	205	608830	6/19/20	090-053-533.29-00	COMPUTER/INF TCH SERVICES	3930 ZOOM.US 6/8	299.80
											VENDOR TOTAL	368.85 *

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*** FUND NO. 090 MENTAL HEALTH												
81610	XEROX CORPORATION	6/08/20	03 VR	53-	172		608654	6/12/20	090-053-533.85-00	PHOTOCOPY SERVICES	INV 230254787 6/1	285.89
											VENDOR TOTAL	285.89 *
602880	BRESSNER, BARBARA J.	7/06/20	02 VR	53-	210		609371	7/10/20	090-053-533.07-00	PROFESSIONAL SERVICES	3RD QTR PROF FEE	7,031.25
											VENDOR TOTAL	7,031.25 *
630360	MAYER, JAMES	7/06/20	02 VR	53-	209		609390	7/10/20	090-053-533.07-00	PROFESSIONAL SERVICES	3RD QTR PROF FEE	2,718.75
											VENDOR TOTAL	2,718.75 *
										MENTAL HEALTH BOARD	DEPARTMENT TOTAL	1,093,570.11 *
										MENTAL HEALTH	FUND TOTAL	1,093,870.11 *

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*** FUND NO. 090 MENTAL HEALTH												
*** DEPT NO. 053 MENTAL HEALTH BOARD												
12	CHAMPAIGN COUNTY TREASURER									POSTAGE REIMBURSEMNT		
		8/06/20	05 VR	53-	270		610050	8/07/20	090-053-522.06-00	POSTAGE, UPS, FED EXPRESSMNT HLTH PSTG JUN		189.10
		8/06/20	05 VR	53-	270		610050	8/07/20	090-053-522.06-00	POSTAGE, UPS, FED EXPRESSMNT HLTH PSTG JUL		114.60
										VENDOR TOTAL		303.70 *
25	CHAMPAIGN COUNTY TREASURER									RENT-GENERAL CORP		
		7/30/20	07 VR	53-	268		609741	7/31/20	090-053-533.50-00	FACILITY/OFFICE RENTALS	AUG OFFICE RENT	1,883.72
										VENDOR TOTAL		1,883.72 *
41	CHAMPAIGN COUNTY TREASURER									HEALTH INSUR FND 620		
		7/30/20	05 VR	620-	104		609742	7/31/20	090-053-513.06-00	EMPLOYEE HEALTH/LIFE INS	JUL HI, LI & ADMIN	3,951.15
										VENDOR TOTAL		3,951.15 *
88	CHAMPAIGN COUNTY TREASURER									I.M.R.F. FUND 088		
		7/14/20	03 VR	88-	23		609422	7/17/20	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 7/2 PR	1,148.05
		7/27/20	04 VR	88-	26		609744	7/31/20	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 7/17 PR	1,148.05
		8/06/20	04 VR	88-	31		610054	8/07/20	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 7/31 PR	1,202.36
										VENDOR TOTAL		3,498.46 *
104	CHAMPAIGN COUNTY TREASURER									HEAD START FUND 104		
		7/30/20	07 VR	53-	249		609746	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG EARLY CHILDHD M	17,492.00
		7/30/20	07 VR	53-	249		609746	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG SOC/EMOT DEV SV	8,301.00
										VENDOR TOTAL		25,793.00 *
161	CHAMPAIGN COUNTY TREASURER									REG PLAN COMM FND075		
		7/30/20	07 VR	53-	250		609748	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG HOMELESS COORD	4,325.00
		7/30/20	07 VR	53-	250		609748	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG JUSTICE SYS DIV	6,275.00
		7/30/20	07 VR	53-	250		609748	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG YOUTH ASSMT CTR	6,362.00
										VENDOR TOTAL		16,962.00 *

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*** FUND NO. 090 MENTAL HEALTH												
179	CHAMPAIGN COUNTY TREASURER	7/30/20	07 VR	53-	246		609751	7/31/20	090-053-533.92-00	CHLD ADVC CTR FND679 CONTRIBUTIONS & GRANTS	AUG CAC VENDOR TOTAL	4,396.00 4,396.00 *
188	CHAMPAIGN COUNTY TREASURER	7/14/20	03 VR	188-	47		609430	7/17/20	090-053-513.01-00	SOCIAL SECUR FUND188 SOCIAL SECURITY-EMPLOYER FICA 7/2 PR	FICA 7/2 PR	1,201.45
		7/27/20	04 VR	188-	50		609752	7/31/20	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER FICA 7/17 PR	FICA 7/17 PR	1,201.45
		8/06/20	04 VR	188-	54		610060	8/07/20	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER FICA 7/31 PR	FICA 7/31 PR	1,258.29
											VENDOR TOTAL	3,661.19 *
193	CHAMPAIGN COUNTY COLLECTOR	7/29/20	01 VR	53-	242		609753	7/31/20	090-053-582.09-00	INTEREST ON TAX CASE	CARLE INT 090 VENDOR TOTAL	1,647.53 1,647.53 *
544	AAIM EMPLOYERS ASSOCIATION	7/16/20	02 VR	53-	237		609433	7/17/20	090-053-533.93-00	DUES AND LICENSES	INV 00010785 5/21 VENDOR TOTAL	1,040.00 1,040.00 *
15127	CHAMPAIGN COUNTY CHRISTIAN HEALTH CENTER	7/29/20	02 VR	53-	247		609784	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG MENTAL HLTH CAR VENDOR TOTAL	1,083.00 1,083.00 *
15184	CHAMPAIGN COUNTY HEALTH CARE CONSUMERS SUITE 208	7/29/20	02 VR	53-	248		609785	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG CHW OUTRCH/BENF	6,496.00
		7/29/20	02 VR	53-	248		609785	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG JUSTICE INVOLVE	6,261.00
											VENDOR TOTAL	12,757.00 *
15400	CHAMPAIGN MULTIMEDIA GRP-MHB 99226307 DBA NEWS GAZETTE	7/27/20	02 VR	53-	240		609792	7/31/20	090-053-533.98-00	DISABILITY EXPO	AD 753427 3/16 VENDOR TOTAL	60.00 60.00 *
18230	COMMUNITY SERVICE CENTER OF NORTHERN CHAMPAIGN COUNTY											

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7/29/20 02 VR 53- 251

609797 7/31/20 090-053-533.92-00 CONTRIBUTIONS & GRANTS

AUG RESOURCE CONNEC

5,633.00

VENDOR TOTAL

5,633.00 *

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*** FUND NO. 090 MENTAL HEALTH											
18430	CONSOLIDATED COMMUNICATIONS	7/21/20	01 VR	28- 61		609646	7/24/20	090-053-533.33-00	TELEPHONE SERVICE	21738437760 7/1	29.46
										VENDOR TOTAL	29.46 *
19346	CRISIS NURSERY	7/29/20	02 VR	53- 252		609804	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG BEYOND BLUE	6,250.00
										VENDOR TOTAL	6,250.00 *
20271	CUNNINGHAM CHILDREN'S HOME	7/29/20	02 VR	53- 253		609805	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG ECHO HOUSING/EM	8,467.00
		7/29/20	02 VR	53- 253		609805	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG FAMILIES STRONG	26,111.00
										VENDOR TOTAL	34,578.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF	7/29/20	02 VR	53- 254		609809	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG FAM DEV CENTER	49,710.00
	CHAMPAIGN COUNTY INC									VENDOR TOTAL	49,710.00 *
22730	DON MOYER BOYS & GIRLS CLUB	7/20/20	01 VR	53- 221		609654	7/24/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL CU CHANGE	8,333.00
		7/20/20	01 VR	53- 221		609654	7/24/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL CU NGHBRHD CHAM	9,182.00
		7/20/20	01 VR	53- 221		609654	7/24/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL YOUTH/FAMILY SV	13,333.00
		7/20/20	01 VR	53- 221		609654	7/24/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SUMMER INIT COALITN	64,200.00
		7/29/20	02 VR	53- 255		609810	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG CU CHANGE	8,333.00
		7/29/20	02 VR	53- 255		609810	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG CU NGHBRHD CHAM	9,182.00
		7/29/20	02 VR	53- 255		609810	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG YOUTH/FAMILY SV	13,333.00
										VENDOR TOTAL	125,896.00 *
22870	DREAAM HOUSE	7/29/20	02 VR	53- 256		609812	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG DREAAM	6,666.00
		7/29/20	05 VR	53- 222		609812	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL DREAAM	6,666.00
										VENDOR TOTAL	13,332.00 *

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*** FUND NO. 090 MENTAL HEALTH												
24095	EMK CONSULTING LLC											
		7/29/20	05 VR	53-	243		609814	7/31/20	090-053-533.07-00	PROFESSIONAL SERVICES	INV 411 7/26	745.00
		8/06/20	05 VR	53-	269		610109	8/07/20	090-053-533.07-00	PROFESSIONAL SERVICES	INV 412 8/3	455.00
										VENDOR TOTAL		1,200.00 *
24215	EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR SUITE 4D											
		7/29/20	02 VR	53-	257		609815	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG FAM SUP/STRENGT	4,703.00
										VENDOR TOTAL		4,703.00 *
26000	FAMILY SERVICE OF CHAMPAIGN COUNTY									GRANTS		
		7/29/20	02 VR	53-	258		609819	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG COUNSELING	2,500.00
		7/29/20	02 VR	53-	258		609819	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG SELF HELP CENTE	2,410.00
		7/29/20	02 VR	53-	258		609819	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG SENIOR CNSL/ADV	13,529.00
										VENDOR TOTAL		18,439.00 *
26760	FIRST FOLLOWERS									401 EAST PARK STREET		
		7/20/20	01 VR	53-	225		609662	7/24/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL FIRST STEP HOUS	3,300.00
		7/20/20	01 VR	53-	225		609662	7/24/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL PEER MNTR REENT	7,916.00
		7/29/20	02 VR	53-	259		609822	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG FIRST STEP HOUS	3,300.00
		7/29/20	02 VR	53-	259		609822	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG PEER MNTR REENT	7,916.00
										VENDOR TOTAL		22,432.00 *
30550	GROW IN ILLINOIS											
		7/29/20	02 VR	53-	260		609835	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG PEER SUPPORT	6,436.00
										VENDOR TOTAL		6,436.00 *
35050	I3 BROADBAND - CU											
		8/06/20	05 VR	53-	271		610133	8/07/20	090-053-533.29-00	COMPUTER/INF TCH SERVICES	INV 18999291 8/4	144.95
										VENDOR TOTAL		144.95 *
44570	MAHOMET AREA YOUTH CLUB											
		7/29/20	02 VR	53-	227		609865	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL BLAST	1,250.00

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*** FUND NO. 090 MENTAL HEALTH												
		7/29/20	02 VR	53-	227		609865	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL MEMBERS MATTER	1,500.00
		7/29/20	02 VR	53-	261		609865	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG BLAST	1,250.00
		7/29/20	02 VR	53-	261		609865	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG MEMBERS MATTER	1,500.00
											VENDOR TOTAL	5,500.00 *
49870	NATIONAL ALLIANCE ON MENTAL ILLNESS											
		7/29/20	02 VR	53-	245		609875	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL NAMI	833.00
		7/29/20	02 VR	53-	262		609875	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG NAMI	833.00
											VENDOR TOTAL	1,666.00 *
54650	PEPSI COLA CHAMPAIGN-URBANA BOTTLING											
		7/27/20	02 VR	53-	241		609879	7/31/20	090-053-522.02-00	OFFICE SUPPLIES	INV 81105057 6/15	.56
											VENDOR TOTAL	.56 *
58118	QUILL CORPORATION (MH)								ACCOUNT QL8197518			
		7/16/20	06 VR	53-	238		609538	7/17/20	090-053-522.02-00	OFFICE SUPPLIES	INV 8181589 6/30	37.03
		7/16/20	06 VR	53-	238		609538	7/17/20	090-053-522.02-00	OFFICE SUPPLIES	INV 8164613 6/29	134.57
											VENDOR TOTAL	171.60 *
59434	RAPE, ADVOCACY, COUNSELING & EDUC SRVCS SUITE 211											
		7/29/20	02 VR	53-	263		609887	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG SEX VIOL PREV/E	5,250.00
											VENDOR TOTAL	5,250.00 *
59472	RATTLE THE STARS											
		7/29/20	05 VR	53-	264		609888	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG YTH SUIC PREV/E	7,208.00
											VENDOR TOTAL	7,208.00 *
61780	ROSECRANCE, INC.											
		7/29/20	05 VR	53-	265		609895	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG CRIMNL JUSTC PS	25,362.00
		7/29/20	05 VR	53-	265		609895	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG CRIS/ACCSS/BENF	16,996.00
		7/29/20	05 VR	53-	265		609895	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG FRESH START	6,609.00
		7/29/20	05 VR	53-	265		609895	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG PREVENTION SVCS	5,000.00

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*** FUND NO. 090 MENTAL HEALTH												
		7/29/20	05 VR	53-	265		609895	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG RECOVERY HOME	16,666.00
		7/29/20	05 VR	53-	265		609895	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG SPECIALTY COURT	16,916.00
											VENDOR TOTAL	87,549.00 *
76916	UNIVERSITY OF IL FOUNDATION-EBERTFEST							119 GREGORY, MC462				
		7/29/20	05 VR	53-	244		5024	7/31/20	090-053-533.89-00	PUBLIC RELATIONS	EBRTFEST SPON ONLIN	5,000.00
											VENDOR TOTAL	5,000.00 *
77280	UP CENTER OF CHAMPAIGN COUNTY											
		7/29/20	05 VR	53-	266		609916	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG CHLD/YTH/FAM PR	2,647.00
											VENDOR TOTAL	2,647.00 *
78120	URBANA NEIGHBORHOOD CONNECTION CENTER											
		7/29/20	05 VR	53-	267		609920	7/31/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG COMM STUDY CNTR	2,125.00
											VENDOR TOTAL	2,125.00 *
78888	VISA CARDMEMBER SERVICE - MENTAL HEALTH								AC#4798510049573930			
		7/27/20	02 VR	53-	239		609934	7/31/20	090-053-522.02-00	OFFICE SUPPLIES	3930 TARGET 6/30	4.06-
		7/27/20	02 VR	53-	239		609934	7/31/20	090-053-522.02-00	OFFICE SUPPLIES	3930 AMAZON 6/28	10.38
		7/27/20	02 VR	53-	239		609934	7/31/20	090-053-533.18-00	NON-EMPLOYEE TRAINING, SEM	3930 MHFA 6/24	150.00
		7/27/20	02 VR	53-	239		609934	7/31/20	090-053-522.02-00	OFFICE SUPPLIES	3930 AMAZON 6/27	162.10
											VENDOR TOTAL	318.42 *
										MENTAL HEALTH BOARD	DEPARTMENT TOTAL	483,255.74 *
										MENTAL HEALTH	FUND TOTAL	483,255.74 *

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*** FUND NO. 090 MENTAL HEALTH											
*** DEPT NO. 053 MENTAL HEALTH BOARD											
25	CHAMPAIGN COUNTY TREASURER	9/02/20	02 VR	53- 297		610791	9/09/20	090-053-533.50-00	RENT-GENERAL CORP FACILITY/OFFICE RENTALS	SEP OFFICE RENT VENDOR TOTAL	1,883.72 1,883.72 *
41	CHAMPAIGN COUNTY TREASURER	9/08/20	02 VR	620- 122		610792	9/09/20	090-053-513.06-00	HEALTH INSUR FND 620 EMPLOYEE HEALTH/LIFE INS	AUG HI, LI & ADMIN VENDOR TOTAL	3,951.15 3,951.15 *
88	CHAMPAIGN COUNTY TREASURER	8/20/20	04 VR	88- 32		610469	8/21/20	090-053-513.02-00	I.M.R.F. FUND 088 IMRF - EMPLOYER COST	IMRF 8/14 PR	1,148.05
		9/02/20	03 VR	88- 34		610795	9/09/20	090-053-513.02-00	IMRF - EMPLOYER COST	FICA 8/28 PR VENDOR TOTAL	1,148.05 2,296.10 *
104	CHAMPAIGN COUNTY TREASURER	9/02/20	02 VR	53- 277		610797	9/09/20	090-053-533.92-00	HEAD START FUND 104 CONTRIBUTIONS & GRANTS	SEP EARLY CHILDDHD M	17,492.00
		9/02/20	02 VR	53- 277		610797	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP SOC/EMOT DEV SV VENDOR TOTAL	8,301.00 25,793.00 *
161	CHAMPAIGN COUNTY TREASURER	9/02/20	02 VR	53- 278		610800	9/09/20	090-053-533.92-00	REG PLAN COMM FND075 CONTRIBUTIONS & GRANTS	SEP HOMELESS COORD	4,325.00
		9/02/20	02 VR	53- 278		610800	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP JUSTICE SYS DIV	6,275.00
		9/02/20	02 VR	53- 278		610800	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP YOUTH ASSMT CTR VENDOR TOTAL	6,362.00 16,962.00 *
176	CHAMPAIGN COUNTY TREASURER	8/13/20	01 VR	119- 42		610274	8/14/20	090-053-513.04-00	SELF-FUND INS FND476 WORKERS' COMPENSATION INSW/C	7/2,7/17,7/31 P	315.81
		9/08/20	02 VR	119- 47		610802	9/09/20	090-053-513.04-00	WORKERS' COMPENSATION INSW/C	8/14. 8/28 PR VENDOR TOTAL	210.54 526.35 *
179	CHAMPAIGN COUNTY TREASURER								CHLD ADVC CTR FND679		

9/02/20 02 VR 53- 274

610804 9/09/20 090-053-533.92-00 CONTRIBUTIONS & GRANTS

SEP CAC

4,396.00

VENDOR TOTAL

4,396.00 *

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*** FUND NO. 090 MENTAL HEALTH												
188	CHAMPAIGN COUNTY TREASURER								SOCIAL SECUR FUND188			
		8/20/20	04 VR	188-	57		610474	8/21/20	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER FICA	8/14 PR	1,201.46
		9/02/20	03 VR	188-	60		610805	9/09/20	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER IMRF	8/28 PR	1,201.45
											VENDOR TOTAL	2,402.91 *
15127	CHAMPAIGN COUNTY CHRISTIAN HEALTH CENTER											
		9/01/20	02 VR	53-	275		610836	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP MENTAL HLTH CAR	1,083.00
											VENDOR TOTAL	1,083.00 *
15184	CHAMPAIGN COUNTY HEALTH CARE CONSUMERS SUITE 208											
		9/01/20	02 VR	53-	276		610837	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP CHW OUTRCH/BENF	6,496.00
		9/01/20	02 VR	53-	276		610837	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP JUSTICE INVOLVE	6,261.00
											VENDOR TOTAL	12,757.00 *
18230	COMMUNITY SERVICE CENTER OF NORTHERN CHAMPAIGN COUNTY											
		9/01/20	02 VR	53-	279		610849	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP RESOURCE CONNEC	5,633.00
											VENDOR TOTAL	5,633.00 *
18430	CONSOLIDATED COMMUNICATIONS											
		8/26/20	01 VR	28-	73		610623	8/31/20	090-053-533.33-00	TELEPHONE SERVICE	21738437760 8/1	29.81
											VENDOR TOTAL	29.81 *
19260	COURAGE CONNECTION											
		9/01/20	02 VR	53-	280		610854	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL COURAGE CONNECT	10,583.00
		9/01/20	02 VR	53-	280		610854	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG COURAGE CONNECT	10,583.00
		9/01/20	02 VR	53-	280		610854	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP COURAGE CONNECT	10,583.00
											VENDOR TOTAL	31,749.00 *
19346	CRISIS NURSERY											
		9/01/20	02 VR	53-	281		610857	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP BEYOND BLUE	6,250.00
											VENDOR TOTAL	6,250.00 *

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VENDOR NO	VENDOR NAME	TRN DTE	B N CD	TRNS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 090 MENTAL HEALTH											
20271	CUNNINGHAM CHILDREN'S HOME										
		9/01/20	02 VR	53- 282		610858	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP ECHO HOUSING/EM	8,467.00
		9/01/20	02 VR	53- 282		610858	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP FAMILIES STRONG	26,111.00
										VENDOR TOTAL	34,578.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF CHAMPAIGN COUNTY INC										
		9/01/20	02 VR	53- 283		610862	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP FAM DEV CENTER	49,710.00
										VENDOR TOTAL	49,710.00 *
22730	DON MOYER BOYS & GIRLS CLUB										
		9/01/20	02 VR	53- 284		610863	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP CU CHANGE	8,333.00
		9/01/20	02 VR	53- 284		610863	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP CU NGHBRHD CHAM	9,182.00
		9/01/20	02 VR	53- 284		610863	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP YOUTH/FAMILY SV	13,333.00
										VENDOR TOTAL	30,848.00 *
22870	DREAAM HOUSE										
		9/01/20	02 VR	53- 285		610866	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP DREAAM	6,666.00
										VENDOR TOTAL	6,666.00 *
24215	EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR SUITE 4D										
		9/01/20	02 VR	53- 286		610869	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP FAM SUP/STRENGT	4,703.00
										VENDOR TOTAL	4,703.00 *
26000	FAMILY SERVICE OF CHAMPAIGN COUNTY GRANTS										
		9/01/20	02 VR	53- 287		610875	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP COUNSELING	2,500.00
		9/01/20	02 VR	53- 287		610875	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP SELF HELP CENTE	2,410.00
		9/01/20	02 VR	53- 287		610875	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP SENIOR CNSL/ADV	13,529.00
										VENDOR TOTAL	18,439.00 *
26760	FIRST FOLLOWERS 401 EAST PARK STREET										
		9/01/20	02 VR	53- 288		610879	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP FIRST STEP HOUS	3,300.00
		9/01/20	02 VR	53- 288		610879	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP PEER MNTR REENT	7,916.00

VENDOR TOTAL

11,216.00 *

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VENDOR NO	VENDOR NAME	TRN DTE	B N CD	TR TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 090 MENTAL HEALTH											
30550	GROW IN ILLINOIS	9/01/20	02 VR	53- 289		610883	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP PEER SUPPORT	6,436.00
										VENDOR TOTAL	6,436.00 *
44570	MAHOMET AREA YOUTH CLUB	9/01/20	02 VR	53- 290		610912	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP BLAST	1,250.00
		9/01/20	02 VR	53- 290		610912	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP MEMBERS MATTER	1,500.00
										VENDOR TOTAL	2,750.00 *
45436	MARTIN ONE SOURCE	9/02/20	02 VR	53- 299		5117	9/09/20	090-053-533.98-00	DISABILITY EXPO	INV 406646 8/28	1,114.17
										VENDOR TOTAL	1,114.17 *
47325	MERIDIAN K CONSULTING & COUNSELING	9/02/20	02 VR	53- 298		610914	9/09/20	090-053-533.18-00	NON-EMPLOYEE TRAINING, SEMIN	INV CCMHB/DD02 8/27	240.00
										VENDOR TOTAL	240.00 *
49870	NATIONAL ALLIANCE ON MENTAL ILLNESS	9/01/20	02 VR	53- 291		610917	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP NAMI	833.00
										VENDOR TOTAL	833.00 *
58118	QUILL CORPORATION (MH)	8/25/20	02 VR	53- 273		610690	8/31/20	090-053-522.02-00	OFFICE SUPPLIES	INV 9391689 8/10	16.08
		8/25/20	02 VR	53- 273		610690	8/31/20	090-053-522.02-00	OFFICE SUPPLIES	INV 9640047 8/17	133.55
										VENDOR TOTAL	149.63 *
59434	RAPE, ADVOCACY, COUNSELING & EDUC SRVCS	9/01/20	02 VR	53- 292		610933	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP SEX VIOL PREV/E	5,250.00
										VENDOR TOTAL	5,250.00 *
59472	RATTLE THE STARS	9/01/20	02 VR	53- 293		610934	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP YTH SUIC PREV/E	7,208.00

VENDOR TOTAL

7,208.00 *

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VENDOR NO	VENDOR NAME	TRN DTE	B N CD	TR	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 090 MENTAL HEALTH												
61780	ROSECRANCE, INC.											
		9/01/20	02	VR	53-	294	610943	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP CRIMNL JUSTC PS	25,362.00
		9/01/20	02	VR	53-	294	610943	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP CRIS/ACCSS/BENF	16,996.00
		9/01/20	02	VR	53-	294	610943	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP FRESH START	6,609.00
		9/01/20	02	VR	53-	294	610943	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP PREVENTION SVCS	5,000.00
		9/01/20	02	VR	53-	294	610943	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP RECOVERY HOME	16,666.00
		9/01/20	02	VR	53-	294	610943	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP SPECIALTY COURT	16,916.00
											VENDOR TOTAL	87,549.00 *
77280	UP CENTER OF CHAMPAIGN COUNTY											
		9/01/20	02	VR	53-	295	610959	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP CHLD/YTH/FAM PR	2,647.00
											VENDOR TOTAL	2,647.00 *
78120	URBANA NEIGHBORHOOD CONNECTION CENTER											
		9/01/20	02	VR	53-	296	610962	9/09/20	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP COMM STUDY CNTR	2,125.00
											VENDOR TOTAL	2,125.00 *
78888	VISA CARDMEMBER SERVICE - MENTAL HEALTH AC#4798510049573930											
		8/26/20	01	VR	53-	272	610737	8/31/20	090-053-533.29-00	COMPUTER/INF TCH SERVICES3930	ZOOM 7/31	209.86
											VENDOR TOTAL	209.86 *
										MENTAL HEALTH BOARD	DEPARTMENT TOTAL	388,384.70 *
										MENTAL HEALTH	FUND TOTAL	388,384.70 *

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