



The McLean County Board of Health's Behavioral Health Policy and Funding Committee  
Thursday, May 26, 2022, at 9am  
200 W. Front Street, **RM 324**, Bloomington, Illinois.

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**AGENDA**

1. Call to Order
2. Roll Call
3. Public Participation
4. Action Items **PAGES**
  - A. Approve 3/25/22 Minutes
5. Items for Information **2-17**
  - A. CY22 Quarter One Behavioral Health Program Summary Report
6. Items for Discussion
  - A. Update on McLean County Health Department's (MCHD) Behavioral Health Program Funding from Jackie Dietrich, MCHD Finance Department
  - B. Board of Health's Behavioral Health Grant Presentations Facilitated by Applicants for CY23 Funding
7. Adjournment

**Board of Health's Behavioral Health Program Quarterly Report**

**CY22: Quarter 1: January through March 2022**

**Name of Agency:** Regional Office of Education

**Name of Program:** Embedded School Program

**Contract:** Grant Amount: \$102,000

**Client Eligibility:** 4-22 years of age with a mental health diagnosis; resident within McLean County school district

**Summary of Service(s) Provided:** Provision of outreach therapy individually and in group modalities, when appropriate. Case management and assistance to students and families with locating and accessing resources in the community as needed. Communication with parents and families regarding concerns as well as discussion of strategies to assist with behaviors and emotional health of program participants. The embedded therapist also collaborates with school personnel, including attending IEP meetings on behalf of the student in the program.

**FINANCIAL REPORT:** These quarterly expenditures only reflect expenditures from the Board of Health funding, but some agencies receive funding from other sources to support these programs.

CY22: Quarter One	CY22: Quarter Two	CY22: Quarter Three	CY22: Quarter Four	YTD TOTAL
\$13,009.00				<b>\$13,009.00</b>
12.75%				<b>12.75%</b>

**Statistical Report with all funding sources:**

**Total Number of Participants projected to be served during contract term: 350**

Calendar Year 2022	Unduplicated	Duplicated	Total Served
<b>Quarter One</b>	286 (210 clients from CY21 and 76 clients new in 2022)		286
<b>Quarter Two</b>			
<b>Quarter Three</b>			
<b>Quarter Four</b>			
<b>YTD TOTAL</b>	<b>286</b>		

**Statistical Report: Two Year Comparison**

Calendar Year 2021		Calendar Year 2020	
Quarter One:	225	Quarter One:	140
Quarter Two:	48	Quarter Two:	119
Quarter Three:	84	Quarter Three:	175
Quarter Four:	58	Quarter Four:	111
YTD Total:	<b>415</b>	YTD Total:	<b>545</b>

**SUMMARY REPORT:** This section shall contain highlights, challenges, and accomplishments from the quarter as shared in the report and/or during site visit conversation.

CY22 is the first year as ROE as the contract holder for the embedded school program. Staff from MCCHS and ROE both reported the program continues to thrive and there are not any significant changes as a result of ROE now being the contract holder. There were not any changes in the schools being served from CY21 to CY22. This program continues to expand beyond Board of Health funding as evidenced by MCCHS reporting they have a direct contract with two Unit 5 schools to provide the embedded school program. The demand of this program within the current schools and school districts it's being provided in continues to greatly increase. This is shown by the number of outreach therapists/ counselors to support this program continues to increase (14 to 16 currently needed). This demand is also shown by the need of youth mental health needs continuing to increase. The youth with a mental health diagnosis continue to engage in the program, especially as the outreach therapist/ counselor is easily accessible, part of the school culture, and engaging in this program tends to be normalized within the school counselor (less stigma associated with engaging in therapy/counseling). As a result of an increase in referrals and a demand of the program, there were 44 youth on a wait list at the end of Quarter One. The youth's needs are screened and updated while on the wait list.

**Name of Agency: McLean County Center for Human Services (MCCHS)**

**Name of Program: Mobile Crisis**

**Contract: Grant Amount: \$392,528.64**

**Client Eligibility:** Any individual in McLean County who is in need of immediate resolution of emergent behavioral health issues; except for youth that qualify for SASS services.

**Summary of Service(s) Provided:** Provide 24-hour on-call assessment/intervention to anyone needing crisis services with the goal of stabilization of individuals in crisis so they can remain safe and improve functioning in the least restrictive environment. Provide linkage to other community resources when appropriate. Screen individuals who presented for psychiatric hospitalization at Carle BroMenn or St. Joseph's Regional Medical Center. When clinically necessary, crisis staff facilitate hospitalization and placement. Conduct "follow-up" services for individuals who have received a face-to-face assessment and were not subsequently hospitalized. Follow-up services consist of client status assessments performed after the initial call. These assessments include appraisals of the client's levels of stress, hopelessness, risk, and symptomatology.

**FINANCIAL REPORT:** These quarterly expenditures only reflect expenditures from the Board of Health funding, but some agencies receive funding from other sources to support these programs.

CY22: Quarter One	CY22: Quarter Two	CY22: Quarter Three	CY22: Quarter Four	YTD TOTAL
\$78,970.40				<b>\$78,970.40</b>
20.12%				<b>20.12%</b>

**Total Number of Participants projected to be served during contract term:** 586 BoH (1600 including all funding sources)

**Statistical Report with all funding sources:**

Calendar Year 2022	Unduplicated	Duplicated	Total Served
Quarter One	469 (63 clients from CY21 and 406 clients new in 2022)		469
Quarter Two			
Quarter Three			
Quarter Four			
<b>YTD TOTAL</b>	<b>469</b>		

**Statistical Report: Two Year Comparison**

Calendar Year 2021		Calendar Year 2020	
Quarter One:	457	Quarter One:	460
Quarter Two:	443	Quarter Two:	415
Quarter Three:	385	Quarter Three:	464
Quarter Four:	323	Quarter Four:	473
<b>YTD TOTAL:</b>	<b>1608</b>	<b>YTD TOTAL:</b>	<b>1537</b>

**SUMMARY REPORT:** This section shall contain highlights, challenges, and accomplishments from the quarter as shared in the report and/or during site visit conversation.

Quarter One presented with 1047 calls (824 standard calls and 223 follow-up calls). The disposition of most of the calls are referrals to ongoing mental health services. Referrals to services are based on information the client provides to staff. This can include what type of insurance they may have or funding source. 45.2% of the referrals for ongoing mental health services were to private practice, 36.3% to MCCHS, 8.6% to Chestnut, and the remaining to an assortment of other agencies. The most significant need in this program continues to be the lack of access to inpatient psychiatric facilities. Crisis staff are charged with facilitating a psychiatric hospitalization for clients in need of hospitalization. Finding placement has worsened in recent times due to demand and workforce shortage, resulting in many inpatient units being at capacity. Peer Engagement Specialists, as funded by the state, continue to be integrated into the Crisis Mobile Unit to help deescalate and provide support. This program continues to conduct various educational trainings/ presentations to community members, including Suicide Prevention, Youth MHFA, MHFA, and Mobile Crisis Services.

**Name of Agency: McLean County Center for Human Services (MCCHS)**

**Name of Program: Adult Psychiatric Services**

**Contract: Grant Amount: \$478,550.32**

**Client Eligibility:** Individual 12 years of age and older with a diagnosable mental illness and related functional impairment; income less than 175% below the federal poverty level, and agrees to take medication for diagnoses and symptomatology

**Summary of Service(s) Provided:** Provide psychiatric services that relieve symptoms of mental illness with the ultimate goal of improving an individual's emotional status and functional ability, as well as preventing unnecessary hospitalizations. Specific services include, psychiatric evaluation; psychiatric medication management; treatment plan development, review, and modification; medication administration and distribution (daily, weekly, and bi-weekly, or via long acting injections for those individuals who are very ill, or who are non-adherent); facilitation of medication refills; case management, when appropriate.

**FINANCIAL REPORT:** These quarterly expenditures only reflect expenditures from the Board of Health funding, but some agencies receive funding from other sources to support these programs.

CY22: Quarter One	CY22: Quarter Two	CY22: Quarter Three	CY22: Quarter Four	YTD TOTAL
\$124,086.19				<b>\$124,086.19</b>
25.93%				<b>25.93%</b>

**Total Number of Participants projected to be served during contract term:** 255 BoH (555 including all funding sources)

**Statistical Report with all funding sources:**

Calendar Year 2022	Unduplicated	Duplicated	Total Served
Quarter One	542 (531 clients from CY21 and 9 clients new in 2022)		542
Quarter Two			
Quarter Three			
Quarter Four			
YTD TOTAL	<b>542</b>		

**Statistical Report: Two Year Comparison**

Calendar Year 2021		Calendar Year 2020	
Quarter One:	605	Quarter One:	669
Quarter Two:	5	Quarter Two:	655
Quarter Three:	7	Quarter Three:	638
Quarter Four:	15	Quarter Four:	624
YTD TOTAL:	<b>632</b>	YTD TOTAL:	<b>689</b>

**SUMMARY REPORT:** This section shall contain highlights, challenges, and accomplishments from the quarter as shared in the report and/or during site visit conversation.

During Quarter One, there were 542 total clients served. 275 of the 542 clients served received psychiatric services only. Psychiatric services only are classified as clients who receive services in the psychiatric program, but do not receive additional services from any of MCCHS's other ongoing clinical programs (such as outpatient counseling, residential, or recovery case management). Clients in the age range of 50 to 60 were the highest age group to be served during quarter one. This program is currently being served by two APN's. MCCHS is in the process of interviewing and hiring a third APN to serve the program. There were 29 discharges during Quarter One; for a variety of reasons that included deceased, refused further treatment, moved from service area, dropped out of treatment, and incarcerated. Clients that become stable enough on medications and their PCP is willing to take over their mental health needs does not frequently occur in this program due to the clients being seen having pervasive and severe mental illnesses that are mostly cared for in a psychiatric program. There were not any discharges and/or transitions from the psychiatric program to PCP care.

**Name of Agency:** PATH

**Name of Program:** Crisis/211 Call Center

**Contract:** Grant Amount: \$89,675.15

**Client Eligibility:** Any individual who calls or texts the callline, 24/7.

**Summary of Service(s) Provided:** Provide call center/ crisis hotline services free of charge. Provide linkage to community services, including behavioral health resources. Community members can also connect to crisis services through text, participate in a resource seminar, and/or train as a volunteer to work at the crisis call center.

**FINANCIAL REPORT:** These quarterly expenditures only reflect expenditures from the Board of Health funding, but some agencies receive funding from other sources to support these programs.

CY22: Quarter One	CY22: Quarter Two	CY22: Quarter Three	CY22: Quarter Four	YTD TOTAL
\$23,240.03				<b>\$23,240.03</b>
25.92%				<b>25.92%</b>

**Total Number of Participants projected to be served during contract term:** 10,000 to 12,000 calls

**Statistical Report with all funding sources:**

Calendar Year 2022	Unduplicated/Total
Quarter One	2581
Quarter Two	
Quarter Three	
Quarter Four	
<b>YTD TOTAL</b>	<b>2581</b>

**Statistical Report: Two Year Comparison**

Calendar Year 2021		Calendar Year 2020	
Quarter One:	3164	Quarter One:	2538
Quarter Two:	2499	Quarter Two:	2452
Quarter Three:	2886	Quarter Three:	2941
Quarter Four:	2987	Quarter Four:	2887
<b>YTD TOTAL:</b>	<b>11,536</b>	<b>YTD TOTAL:</b>	<b>10,638</b>

**SUMMARY REPORT:** This section shall contain highlights, challenges, and accomplishments from the quarter as shared in the report and/or during site visit conversation.

The call center model will be changing, effective July 1, in that the 211 line will no longer be a "blended" information and referral/crisis model. Previously, suicide-related calls would be handled on either the 211 or the National Suicide Prevention Lifeline (988 3-digit phone number beginning in July 2022). 211 Call Center Specialists will continue to be trained to handle and de-escalate crisis calls while offering emotional support on either line, but after de-escalation has occurred on the 211 line, when appropriate, suicide-related calls will be warm transferred to the 988 line, where fully professionalized staff will safety plan and assist in those situations. 211 will continue to serve as its role as information and referral for human services, offering active support to callers who are in need, and connecting them with resources, including behavioral health resources as needed. PATH reported they believe one reason they were chosen to receive the 988 grant is because of their accreditation to upkeep their 211 database for half the state geographically. They are able to use the same database to log calls for either 988 or 211, and they can harness the same resources. Staff will be cross trained on both 988 and 211. PATH is also continuing to move toward a paid staff model. In part due to COVID, staffing of volunteers has been difficult since PATH lost so many volunteers at once, despite the ability for volunteers to work remotely. Fewer volunteers are also enrolling and completing the training program. As a result, during the first quarter of 2022, PATH has had the fewest total volunteers (not trainees) that the agency has had in years. The benefit of paid staff, with the supplemental support of volunteers, will be to improve service delivery, including lower abandon rates, lower wait times, and higher service level.

**Name of Agency: McLean County Court Services**

**Name of Program: Problem Solving Courts**

**Contract: Grant Amount: \$209,200**

Chestnut Health Systems (CHS): \$177,320

Center for Youth and Family Solutions (CYFS): \$24,200

McLean County Center for Human Services (MCCHS): \$7680

**Client Eligibility:** Accepted as a client in either McLean County Drug Court or Recovery Court

**Summary of Service(s) Provided:** Individual and outpatient substance use and/or mental health counseling, peer support services through the use of recovery coaches, case management, staffing during weekly meetings, and Moral Reconciliation Therapy (MRT) for clients that score high on criminal thinking.

**FINANCIAL REPORT:** These quarterly expenditures only reflect expenditures from the Board of Health funding, but some agencies receive funding from other sources to support these programs.

**Chestnut Health Systems (CHS)**

CY22: Quarter One	CY22: Quarter Two	CY22: Quarter Three	CY22: Quarter Four	YTD TOTAL
\$19,268.77				\$19,268.77
10.87%				10.87%

**Center for Youth and Family Solutions (CYFS)**

CY22: Quarter One	CY22: Quarter Two	CY22: Quarter Three	CY22: Quarter Four	YTD TOTAL
\$5,785.46				\$5,785.46
23.91%				23.91%

**McLean County Center for Human Services**

CY22: Quarter One	CY22: Quarter Two	CY22: Quarter Three	CY22: Quarter Four	YTD TOTAL
\$2,020.00				\$2,020.00
26.30%				26.30%

**Total Number of Participants projected to be served during contract term:** 70

**Statistical Report with all funding sources:**

Calendar Year 2022	Unduplicated	Duplicated	Total Served
Quarter One	60 (51 clients from CY21 and 9 clients new in 2022)		60
Quarter Two			
Quarter Three			
Quarter Four			
YTD TOTAL	60		

**Statistical Report: Two Year Comparison**

Calendar Year 2021		Calendar Year 2020	
Quarter One:	60	Quarter One:	68
Quarter Two:	8	Quarter Two:	61
Quarter Three:	7	Quarter Three:	54
Quarter Four:	5	Quarter Four:	51
YTD TOTAL:	80	YTD TOTAL:	85

**SUMMARY REPORT:** This section shall contain highlights, challenges, and accomplishments from the quarter as shared in the report and/or during site visit conversation.

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This program continues to provide programming via contractual service agreements with Chestnut Health Services to provide substance use disorder services, Center for Youth and Family Solutions (CYFS) to provide MRT therapy, and McLean County Center for Human Services (MCCHS) to provide staffing support during Recovery Court staffings and court hearings. Chestnut continues to report very significant program staff shortages. The impact of these staff shortages has created a significant waiting list for clients to be assessed and enter Drug Court and/or Recovery Court. This can be further highlighted by Chestnut only expending 10% of providing funding by the end of Quarter One; and the goal is to expend 25% by the end of Quarter One. Problem Solving Court's staff reported there are many individuals in and out of jail that are on a waiting list to be assessed for Problem Solving Courts. Chestnut currently provides these assessments. As a result of the ongoing staff shortage crisis and the numerous individuals not yet able to enter Problem Solving Courts, the grantee has been encouraged to look at options to ensure the funding allocated to Court Services is expended and clients are being served. All of this was discussed during a meeting with Court Services staff and there will be more to come forth regarding options. CYFS reported they are now fully staffed and will start increasing the number of clients to receive MRT. The possibility of a hybrid option to increase client accessibility may continue to be an option in providing individual and group sessions. MCCHS continues to provide appropriate and updated feedback during court staffings and hearings.

**Name of Agency: Project Oz**

**Name of Program: Youth Substance Use Prevention Education**

**Contract: Grant Amount: \$100,470.00**

**Client Eligibility:** 5th - 8th Grade Students attending one of the following schools: Bloomington Junior High School, Chiddix Junior High School, Ridgeview Elementary and Junior High Schools, LeRoy Elementary School, and Lexington Elementary and Junior High Schools

**Summary of Service(s) Provided:** Provide classroom-based substance use prevention education to 5th - 8th grade students utilizing the evidence-based curriculum, Too Good for Drugs (TGFD). TGFD will empower teens to meet the challenges of junior high school life by addressing complex emotions and situations and work toward the reduction or elimination of youth substance use. Substances addressed include illegal drugs, alcohol, tobacco, and misuse of over-the-counter prescription drugs, including opioids. Interactive lessons will build protective factors and foster confidence and resistance to the substance use by focusing on goal setting, decision-making, bonding with others, having respect for self and others, managing emotions, effective communication, healthy social interactions, and developing personal and interpersonal skills to resist peer pressure.

**FINANCIAL REPORT:** These quarterly expenditures only reflect expenditures from the Board of Health funding, but some agencies receive funding from other sources to support these programs.

CY22: Quarter One	CY22: Quarter Two	CY22: Quarter Three	CY22: Quarter Four	YTD TOTAL
\$23,249.88				<b>\$23,249.88</b>
23.14%				<b>23.14%</b>

**Total Number of Participants projected to be served during contract term:** 958

**Statistical Report with ONLY BoH Funding**

Calendar Year 2022	Unduplicated/Total
Quarter One	159
Quarter Two	
Quarter Three	
Quarter Four	
YTD TOTAL	159

**Statistical Report: Two Year Comparison**

Calendar Year 2021		Calendar Year 2020	
Quarter One:	416	Quarter One:	459
Quarter Two:	219	Quarter Two:	0
Quarter Three:	267	Quarter Three:	267
Quarter Four:	267	Quarter Four:	267
YTD TOTAL:	<b>635</b>	YTD TOTAL:	993

**SUMMARY REPORT:** This section shall contain highlights, challenges, and accomplishments from the quarter as shared in the report and/or during site visit conversation.

This program continues to expand as evidenced by the Department of Human Services (DHS) adding an additional prevention specialist to serve 4th grade students, in addition to continue to serving 5th through 8th grade students. This program is currently provided in McLean County public schools; however, there is ongoing, expressed interest from Metcalf staff for their students to also receive this program. Accommodating the scheduling needs and presentation format (either in-person, virtual, or a hybrid option) continues to be one of the biggest challenges in providing this service. Limited staff ability to teach certain courses at each grade level as new staff get trained also presented as a significant challenge during Quarter One. Project Oz reported it takes several months to train new staff through a process of independent studying, lesson overview meetings, observation, co-teaching, and then finally independent teaching.



**Name of Agency: Project Oz**

**Name of Program: NAMI: Ending the Silence (ETS)**

**Contract: Grant Amount: \$71,526.24**

**Client Eligibility:** Provide to 2240 JR High and High School students; delivered to all students at one grade level in JR High and one grade level in High School. Offered to students attending McLean County public school.

**Summary of Service(s) Provided:** NAMI: ETS is a school-based youth suicide prevention and mental health education program that reduces stigma and increases help-seeking behavior. The program is designed by the National Alliance on Mental Illness (NAMI); program is provided in coordination with Project Oz and NAMI Mid-Central Illinois. This evidence-based program shall teach young people how to recognize early signs of mental illness, practice coping strategies, assist peers and access resources.

**FINANCIAL REPORT:** These quarterly expenditures only reflect expenditures from the Board of Health funding, but some agencies receive funding from other sources to support these programs.

CY22: Quarter One	CY22: Quarter Two	CY22: Quarter Three	CY22: Quarter Four	YTD TOTAL
\$18,000.86				<b>\$18,000.86</b>
25.17%				<b>25.17%</b>

**Total Number of Participants projected to be served during contract term:** 2240

**Statistical Report with ONLY BoH Funding**

Calendar Year 2022	Unduplicated/Total
Quarter One	1075
Quarter Two	
Quarter Three	
Quarter Four	
YTD TOTAL	1075

**Statistical Report: Two Year Comparison**

Calendar Year 2021		Calendar Year 2020	
Quarter One:	1385	Quarter One:	1149
Quarter Two:	395	Quarter Two:	0
Quarter Three:	421	Quarter Three:	311
Quarter Four:	1116	Quarter Four:	1288
YTD TOTAL:	<b>3317</b>	YTD TOTAL:	2748

**SUMMARY REPORT:** This section shall contain highlights, challenges, and accomplishments from the quarter as shared in the report and/or during site visit conversation.

At this time, the most significant area of need for this program is the need to increase capacity for this program through the addition of a second staff person. This program is currently coordinated and delivered by one staff person, who completes all tasks (including all coordination, all service delivery, all evaluation, and all reporting) required to provide this program at all 20 standard, public middle schools and high schools in McLean County. Project Oz reported they initially estimated that one staff person would be sufficient, but they now recognize that they did not fully account for the level of work that is involved in delivering a program with such a large scope, and that their original plans underestimated the amount of time that is required to accomplish all tasks related to this program. The current workload is unrealistic and unsustainable for the one staff person. One of the most important components of this program is the ability for a participating student to request mental health support for themselves or a peer. During Quarter One, 140 students (approximately 17% of students who completed evaluations with referral components) requested support and were connected with school resources as a direct result of presentations. The program staff member also provided additional support for multiple students who reached out directly to her seeking further assistance. Among the students who requested support, 20 students (approximately 14% of students who requested support) shared that they were experiencing mental health emergencies, such as suicide attempts, suicidal thoughts, or self-harm, or shared that they were concerned that a peer was experiencing a mental health emergency. School counselors prioritized checking in with these students first in order to ensure that they received support as soon as possible.

**Name of Agency: The Baby Fold**

**Name of Program: Healthy Start**

**Contract: Grant Amount: \$78,795.46**

**Client Eligibility:** 30 (parent/caregiver and infant/child); McLean County high risk expectant and parenting families; enrolled up to the age of 3 months and family can be served until the child is 5 years of age; families are screened for eligibility prior to enrollment using a screening tool that identifies risk factors such as history of mental illness and/or substance use, cognitive challenges, intimate partner violence, history of poor birth outcomes, poverty, legal challenges, and prior child abuse and/or neglect.

**Summary of Service(s) Provided:** Provide a voluntary, free home visiting service that shall provide education and support to families prenatally and minimally through a child's 5th Birthday. Home visiting services are provided through the use of evidenced-based assessment tools and curriculum. Assessment tools such as the Protective Factors Survey, Ages and Stages Questionnaire, and Edinburgh Post-Partum Depression Scale are used to identify areas of need for both parents and children on an ongoing basis. Home visits shall be offered weekly for the 1st year and may continue up to 5 years, with the length and frequency determined by the needs of the family. During home visits, Family Support Specialists shall model positive parenting skills and provide information on child growth, development, and safety. Staff will actively link participant with community services if a participant screens positive for any of the identified risk factors during screen. Families will quickly be linked to mental health services, early intervention, and community support groups.

**FINANCIAL REPORT:** These quarterly expenditures only reflect expenditures from the Board of Health funding, but some agencies receive funding from other sources to support these programs.

CY22: Quarter One	CY22: Quarter Two	CY22: Quarter Three	CY22: Quarter Four	YTD TOTAL
\$22,514.80				<b>\$22,514.80</b>
28.57%				<b>28.57%</b>

**Total Number of Participants projected to be served during contract term:** 30

**Statistical Report with ONLY BoH Funding**

Calendar Year 2022	Unduplicated	Duplicated	Total Served
Quarter One	18 (15 clients from CY21 and 3 clients new in 2022)		18
Quarter Two			
Quarter Three			
Quarter Four			
YTD TOTAL	<b>18</b>		

**Statistical Report: Two Year Comparison**

Calendar Year 2021		Calendar Year 2020	
Quarter One:	21	Quarter One:	32
Quarter Two:	0	Quarter Two:	33
Quarter Three:	16	Quarter Three:	31
Quarter Four:	3	Quarter Four:	29
YTD TOTAL:	<b>40</b>	YTD TOTAL:	<b>37</b>

**SUMMARY REPORT:** This section shall contain highlights, challenges, and accomplishments from the quarter as shared in the report and/or during site visit conversation.

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During Quarter One, the program continued to navigate the best way to provide services based on family needs. The COVID-19 pandemic continued to impact service delivery by some families requesting and able to receive in-person home visits and some families requesting and needing to receive virtual home visits. Many of the families are ready to gather and resume "normal" life while others remain very cautious. Balancing the needs, expectations, and preferences has required creativity and flexibility. Groups (both virtual and in-person) were offered to families as well. This served to offer a variety of opportunities for individual support between the workers and families, but also for families to learn and build connections with each other. Program staff reported three significant areas of remaining need for service improvement, (1) housing needs as traditional landlords are not renewing client leases and are subsequently flipping housing for higher rents; (2) employee retention as the past two years have

**Name of Agency: Regional Office of Education**

**Name of Program: Embedded School Program**

**Objective #1:** Enhance collaborative relationships among the treatment provider, school, and McLean County Health Department that increase the accessibility of behavioral health treatment for children/adolescents with a mental health disorder.

**Outcome #1.1:** 100% of individuals referred (self-referral or other referral source) will be not be excluded from mental health counseling based on their ability to provide insurance.

**Results** Q1 100% Q2 Q3 Q4

**Outcome #1.2:** Upon receipt of a referral, staff will attempt contact within two business days of 90% of individuals referred (self-referral or other referral source)

**Results** Q1 92.5% Q2 Q3 Q4

**Outcome #1.3:** There will be a minimum of one scheduled meeting once per quarter between a school representative, a representative of the mental health agency, and a representative of the McLean County Health Department in order to discuss quarterly reporting and other topics related to the success of the

**Results** Q1 Met Q2 Q3 Q4

**Objective #2:** By accessing program services, the potential negative impacts of mental illness of individuals served shall be reduced.

**Outcome #2.1:** 95% of individuals involved in mental health counseling will assist in developing an individualized treatment plan to meet their personal goals and growth. This measure excludes individuals who do not complete the intake process.

**Results** Q1 100% Q2 Q3 Q4

**Outcome #2.2:** 60% of individuals will maintain or make progress in their overall functional status as evidenced by the use of an evidenced based assessment tool

**Results** Q1 72.80% Q2 Q3 Q4

**Outcome #2.3 (Unit 5 and Olympia School District):** 65% of individuals involved in the program will experience a decrease in behavioral disruptions in the school environment as compared to the previous quarter (as defined and tracked by school personnel)

**Results** Q1 81.25% Q2 Q3 Q4

**Results Q1 Narrative:** The data collected is from Kingsley JR High, Olympia School District, Fox Creek Elementary, and Parkside JR High

**Outcome #2.3 (D87):** In April 2022, mySAEBRS data will show a decrease in students in the high- risk and some-risk categories for general behavior.

**Results** Q1 83.60%

**Results Q1 Narrative:** Of the 55 students utilizing CHS services for embedded schools who also had fall and spring mySAEBRS scores for comparison, 83.6% of the students reported improvement or remaining the same. 60 students did not have comparison scores to accurately identify regression or improvement; however, anecdotally District 87 reports overall improvement in students utilizing CHS services.

**Name of Agency: McLean County Center for Human Services (MCCHS)**

**Name of Program: Mobile Crisis**

**Objective #1:** Ensure timely access to crisis intervention services for those in need

**Outcome #1.1:** 95% of crisis calls will receive a preliminary response within 15 minutes. Preliminary response shall be defined as how quickly the crisis team responds to the request for intervention.

**Results** Q1 100% Q2 Q3 Q4

**Outcome #1.2:** 90% of face-to-face assessments will be initiated within 90 minutes of an identified or potential crisis.

**Results** Q1 96.9% Q2 Q3 Q4

**Outcome #1.3:** 90% of the time, the crisis team will attempt follow-up services within 24 hours of the original call. This measure does not apply to standard calls that resulted in the client entering /returning to an inpatient or detention facility (e.g. hospital, nursing home, group home, jail, etc.) nor does it apply to calls that were conducted exclusively via phone contact. Other exclusions include the agency not having any means of contact as a result of the participant not having a working phone or not providing an accurate

phone number; out of county residents; and/ or individuals who have another crisis prior to follow-up. The goals of the follow up call include helping provide emotional support to that individual, education on the importance of seeking professional help prior to being in a crisis, and provide referral/linkage to appropriate ongoing mental health services and/or other services that may help avert future crisis. There may be the need for more future follow up calls; depending on the individual's intensity of needs.

**Results**   **Q1**   97.8%                      **Q2**                      **Q3**                      **Q4**

**Objective #2:** Utilize remedial measures/ resources to restore pre-crisis level of functioning.

**Outcome #2.1:** 80% of crisis calls will not result in a psychiatric hospitalization for the individuals served.

**Results**   **Q1**   83.6%                      **Q2**                      **Q3**                      **Q4**

**Outcome#2.2:** 99% of all individuals assessed by the mobile crisis team will remain safe and alive for the 24-hour period following the intervention.

**Results**   **Q1**   99%                      **Q2**                      **Q3**                      **Q4**

**Outcome#2.3:** 70% of individuals served will not be involved in more than three standard calls per quarter. This measure excludes incidences where the initial call ended in a disposition of "pending placement" and a second call took place (normally within 48 hours) in order to complete the placement process if necessary. The intent of this outcome is to measure recidivism.

**Results**   **Q1**   96.8%                      **Q2**                      **Q3**                      **Q4**

**Name of Agency: McLean County Center for Human Services (MCCHS)**

**Name of Program: Adult Psychiatric Services**

**Objective #1:** Promote access to psychiatric services and psychotropic medication to residents of McLean County.

**Outcome #1.1:** During Calendar Year 2021, the program will secure at least \$370,000 in free medication (via pharmaceutical assistance programs) for individuals without income or without the means to secure the prescribed medication.

**Results**   **Q1**   \$103,866                      **Q2**                      **Q3**                      **Q4**

**Objective #2:** By accessing program services/medication, the potential negative impacts of mental illness for individuals served shall be reduced.

**Outcome #2.1:** 80% of individuals seen in the program for at least six contiguous months will maintain or increase their level of functional ability.

**Results**   **Q1**   90.2%                      **Q2**                      **Q3**                      **Q4**

**Outcome #2.2:** 85% of individuals who have received psychiatric services for at least six continuous months have not required hospitalization by MCCHS Crisis Team during the quarter.

**Results**   **Q1**   99.0%                      **Q2**                      **Q3**                      **Q4**

**Name of Agency: PATH**

**Name of Program: Crisis/211 Call Center**

**Objective 1: Provide access to help to improve and save lives.**

**Outcome 1.1:** 90% of suicide calls will positively correlate with the level of lethality recorded with the call resolution.

**Results**   **Q1**   98.0%                      **Q2**                      **Q3**                      **Q4**

**Outcome 1.2:** 4,000 annual linkages to appropriate behavioral health services

**Results**   **Q1**   801                      **Q2**                      **Q3**                      **Q4**

**Outcome 1.3:** Availability of the service will meet national standards  
Abandoned call rates below 9%:

**Results**   **Q1**   16.7%                      **Q2**                      **Q3**                      **Q4**

Average wait time for callers fewer than 90 seconds:

**Results**   **Q1**   66 seconds                      **Q2**                      **Q3**                      **Q4**

Average service level of 80% (calls answered within 90 seconds):

**Results**   **Q1**   73.88%                      **Q2**                      **Q3**                      **Q4**

**Objective 2:** Engage and educate community volunteers.

**Outcome 2.1:** Train a minimum of 50 new volunteers per year, among the three training classes.

**Results** Q1 NA \* Q2 Q3 Q4

\*The first training class of 2022 started on February 9 and is scheduled to conclude on April 13. The class started with 30 trainees, and 24 remain as of the end of March.

**Outcome 2.2:** Maintain an average retention rate of 80% for new trainees throughout the three training classes each year.

**Results** Q1 80% \* Q2 Q3 Q4

\*This retention rate is reflective of the first training class that started during Quarter One and ends in Quarter Two.

**Outcome 2.3:** Volunteers will annually contribute at least 8,000 total service hours to the call center program.

**Results** Q1 2850 Q2 Q3 Q4

**Objective 3:** Offer call center services in different modalities.

**Outcome 3.1:** Handle at least 10,000 total annual calls from McLean County.

**Results** Q1 2581 Q2 Q3 Q4

**Outcome 3.2:** Handle at least 500 total texts during the year.

**Results** Q1 65 Q2 Q3 Q4

**Outcome 3.3:** Receive at least 8,000 annual visitors to our website.

**Results** Q1 1837 \* Q2 Q3 Q4

\*PATH Inc. had 1837 total website visitors during January 2022. Unfortunately, February and March data is unavailable after an update to our website occurring on January 31st. The issue has been resolved, and data can be expected for the upcoming months/quarters.

**Outcome 3.4:** Sell at least 50 hard copy resource directories to McLean County residents and professionals.

**Results** Q1 5 Q2 Q3 Q4

**Name of Agency: McLean County Court Services**

**Name of Program: Problem Solving Courts**

**Objective 1:** Decrease alcohol and drug use among Drug Court participants, as measured by random drug screens and drug use admission from the participant.

**Outcome 1.1:** 50% of the participants will not relapse as evidenced by providing negative urine screen results and/or admission.

**Results** Q1 85% Q2 Q3 Q4

**Objective 2:** Participants enrolled in the Drug Court, or Recovery Court will demonstrate their ability to make progress in their substance use disorder and/or mental health treatment; as measured by their retention rate, compliance, and progress in their assigned Problem-Solving Court.

**Outcome 2.1:** There will be an 85% retention rate in Drug Court and in Recovery Court.

**Results** Q1 92% Q2 Q3 Q4

**Outcome 2.2:** 50% of the participants will show overall compliance in Drug Court and Recovery Court as evidenced by not receiving any sanctions from the court.

**Results** Q1 48% Q2 Q3 Q4

**Outcome 2.3:** 85% of the participants will not have a Petition to Revoke Probation filed by the State's Attorney's Office.

**Results** Q1 90% Q2 Q3 Q4

**Outcome 2.4:** 15% of the participants will experience at least one Phase Promotion.

**Results** Q1 7% Q2 Q3 Q4

**Objective 3:** Drug Court and/or Recovery Court participants will have a decrease in the rate of new arrests and new convictions while in the program and up to one year of post-program participation; as measured by

arrest and conviction information from local databases.

**Outcome 3.1:** 70% of referred participants will successfully complete MRT.

**Results** Q1 33%\* Q2 Q3 Q4

\*There were 3 discharges; one successful and two unsuccessful (incarceration and/or relapse)

**Outcome 3.2:** 70% of participants who successfully complete the MRT program will not recidivate up to one year after being successfully discharged from MRT, as measured by arrest and conviction information from local databases.

**Results** Q1 100% Q2 Q3 Q4

**Outcome 3.3:** 70% of participants will not recidivate while in the Drug Court and/or Recovery Court program and up to one year of post program participation; as measured by arrest and conviction information from local databases.

**Results** Q1 76.5% Q2 Q3 Q4

**Name of Agency: Project Oz**

**Name of Program: Youth Substance Use Prevention Education**

**Objective 1:** Deliver a curriculum that allows development of social and emotional skills in making healthy choices, building positive friendships, developing self-efficacy, communicating effectively, resisting peer pressure, and other skills to increase protective factors against substance use.

**Outcome 1.1:** Individuals participating in Too Good for Drugs lessons will increase their knowledge regarding the impact of substance use, protective factors, and development of prosocial skills, as evidenced by using a pre and post-test. The average increase in knowledge shall be measured by an increase of 2.0 or higher from pretest to post test scores.

**Results** Q1 4.00 Q2 Q3 Q4

**Outcome 1.2:** 90% of the time, the curriculum will be delivered in a manner that meets fidelity guidelines as a means of maintaining the curriculum at an evidence-based level. This shall be measured

**Results** Q1 100% Q2 Q3 Q4

**Outcome 1.3:** 80% of students will be able to write a prosocial choice they can make instead of the use of substance use or being involved in activities that substance use is involved. This can be a written option on the pre-test and post-test provided.

**Results** Q1 90% Q2 Q3 Q4

**Objective 2:** Caregivers of program participants will be provided with information to help them communicate with their child about substance use and the importance of not using substances, as well as information on how to request further resources.

**Outcome 2.1:** At least 90% of caregivers will be provided with a handout on ways to communicate with their children about the importance of not using substances and making prosocial choices. This will be measured by the number of parent letters shared with students at the start of each course.

**Results** Q1 100% Q2 Q3 Q4

**Outcome 2.2:** At least 90% of caregivers will be provided with information on how to request further resources, if needed. This information can be provided on the same handout referenced in outcome.

**Results** Q1 100% Q2 Q3 Q4

**Name of Agency: Project Oz**

**Name of Program: NAMI: Ending the Silence**

**Objective 1:** Provide an evidence-based curriculum that provides information on youth mental health, reduces stigma related to mental health challenges, encourages help-seeking, and reduces youth suicide.

**Outcome 1.1:** 95% of the time the curriculum will be utilized in a manner that meets fidelity guidelines as a means of maintaining the curriculum at an evidence-based level.

**Results** Q1 100% Q2 Q3 Q4

**Outcome 1.2:** 85% of the individuals receiving the curriculum will be able to identify basic knowledge on youth mental health as evidenced by a program evaluation questionnaire.



<b>Results</b>	<b>Q1</b>	95%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Outcome 1.3:** 85% of individuals receiving the curriculum will be able to identify the early warning signs of mental illness and youth suicide as evidenced by a program evaluation questionnaire.

<b>Results</b>	<b>Q1</b>	91%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Outcome 1.4:** 95% of program participants will have the opportunity to request help for themselves or express concern for a peer who may be experiencing mental health challenges and be provided with appropriate referral to a school counselor.

<b>Results</b>	<b>Q1</b>	100%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Objective 2:** Caregivers of program participants will be provided with information to help them communicate with their child about mental health. This will include information about the importance of youth mental health, as well as how to recognize and respond to youth mental health challenges, and how to request further resources if needed.

**Outcome 2.1:** 95% of caregivers will be provided with a handout(s) with information about the importance of youth mental health, as well as how to recognize and respond to youth mental health challenges.

<b>Results</b>	<b>Q1</b>	100%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Outcome 2.2:** 95% of caregivers will be provided with information on how to request further resources if needed. This information can be provided on the same handout identified in Outcome 2.1.

<b>Results</b>	<b>Q1</b>	100%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Name of Agency: The Baby Fold**  
**Name of Program: Healthy Start**

**Objective 1:** Promote healthy child development through the relationship between caregiver and child.

**Outcome 1.1:** 95% of children in this program shall be screened for developmental delays within 90 days of being in the program. The Ages and Stages Questionnaire or another developmental screening tool shall be utilized.

<b>Results</b>	<b>Q1</b>	50% *	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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\*2 of the 4 children received a developmental screening, within the parameters identified above. One child did not complete the screening because the person caring for the child was not the primary caregiver. One child did not complete the screening due to being transitioned in the program

**Outcome 1.2:** 95% of children that have a developmental delay that is indicated by the developmental screening tool utilized shall be appropriately referred to services to assist with the delay.

<b>Results</b>	<b>Q1</b>	100%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Outcome 1.3:** 95% of caregivers that have a child in this program that has a developmental delay and/or behavioral health challenges, as indicated by the developmental screening tool or other assessment tool, shall be provided with education on the impact of that specific developmental delay and/or behavioral health challenge on their child's development, appropriate approaches and strategies to address concern, and role in parental-child relationship.

<b>Results</b>	<b>Q1</b>	100%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Outcome 1.4:** 95% of caregivers shall be provided education on how to promote child learning, academic achievement success, and other protective factors.

<b>Results</b>	<b>Q1</b>	100%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Objective 2:** Promote and increase caregivers' mental health status.

**Outcome 2.1:** 90% of caregivers shall report feeling supported by their Family Support Specialist

<b>Results</b>	<b>Q1</b>	100%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Outcome 2.2:** 90% of caregivers that disclose mental health and/or substance use shall be referred and linked to appropriate community services

<b>Results</b>	<b>Q1</b>	100%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Outcome 2.3:** 90% of caregivers in this program shall develop goals that will promote healthy child-parental relationships and/or improved mental health functioning

<b>Results</b>	<b>Q1</b>	100%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Outcome 2.4:** 90% of caregivers will be provided with linkages that promotes a healthy, stable and safe home environment; including, but not limited to linkage for improving job skills, domestic violence support groups, etc.

<b>Results</b>	<b>Q1</b>	100%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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**Outcome 2.5:** 90% of caregivers will be screened for post-partum depression utilizing the Edinburgh Postnatal Depression Screening (EPDS)

<b>Results</b>	<b>Q1</b>	100%	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>
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