



**MENTAL HEALTH ADVISORY BOARD**  
**McLean County Health Department**  
**Minutes**  
**200 West Front Street, Bloomington, IL 61701**  
**July 17, 2020**

- I. The virtual meeting was called to order at 9:02am by Cory Tello.
- II. Roll Call: Cory Tello, Dr. Kristine Strauss, Dan Deneen, Mary Campbell, Laurie Wollrab, Trisha Malott, Gaby Bontea, Martha Dittmer, Faye Freeman Smith.
- Absent: Rick Bleichner, Brian Mohr, Sherrin Fitzer
- Staff Members: Amy Hancock, Jeff Paternoster Office Support Specialist II, Julie Sullivan Office Support Specialist II

Cory announced that Diane Wolf will no longer be member as she is busy with her duties as the Assistant Superintendent at District 87. Cory thanked her for her service over the years.

- III. Appearance by Members of the Public: None
- IV. Items for Information
- A. Calendar Year 2019 Summary Report
  - B. Four Funding Focus Areas Approved by Board of Health CY21
- V. Items for Discussion
- A. Discuss edits to make to Request for Proposal (RFP) Template for CY21 RFP

Amy explained the CY19 Summary Report shows data from all the programs served by race, ethnicity and location. Are there populations or groups being underserved, asked Cory, as the members look to approve funding for the next year.

The Four Funding Focus areas for FY2021 was discussed. Last year about 1.4 million dollars was allocated. This year, the budget looks like there is more money for CY21. The Board of Health (BOH) funding that does not include funding set aside for Recovery Courts is \$1,318,365. The money set aside for Recovery Courts is \$212,392. Without budget meetings being held yet, the numbers will be checked for accuracy before the members allocate dollar amounts. Last week the

BOH approved the funding focus areas. The category titles are broad to assist those who may not have sought money before and let groups collaborate with others. Laurie asks about the introductory paragraphs and if words like “new” or “better way” are needed to incorporate efforts “to reach a diverse population of individuals with a particular focus on those who have been traditionally underserved.” This relates to the marketing and navigation goal talked about at previous meetings, per Cory. It is said maybe this could be done under Amy’s program with the health department. It is suggested to also look at how agencies can be more self-sustaining.

The broad descriptions might capture some agencies in the community that are doing good things but wouldn’t naturally fit into the language as the description is explained. For example, Trisha says, some are helping in youth areas, but “they are not necessarily what would be a mental health organization.” Trisha feels the wording in the RFP may come down to interpretation. She suggests making sure to have broad inclusive language like stating “this may include programs that include mental health being incorporated into services for children and other capacities.”

There was discussion about the age of “21” listed in the Adult Services category with the concern that 21 is too high to be identified as an adult. Excluding those 18 and older and those with special needs that may fall in the age group could be better explained for this category, per Cory. Amy adds maybe the age restriction could be left off or in the RFP better explain the ages for the program. Cory notes the members need to find a different way to phrase this in the Adult Services.

Last year’s RFP was provided to the members as an example with the goal to add, adjust and fine tune for sending out this year. Amy will add the timeline for this year with the goal to send it out between August 10 to 15<sup>th</sup>. From the board meetings, the conclusion was to not put funding amounts on the funding focus areas this year. Should contracts be awarded for more than one year has been discussed for the last few years? This would help with how labor intensive the process can be.

It is suggested that more specific language could be added explaining the grading matrix tool and process used to evaluate the applications. The matrix tool helps but is not the “solo deciding factor in the funding process.” Further discussion included the following suggestions; giving more guidance on the RFP to help those applying include the quality of programming like how they are delivering services versus what services they have to offer; simplicity and guidance would help those not familiar with the language or the process of submitting an RFP; hold a virtual meeting for those who want to apply and Amy could answer many questions at once versus calls coming one at a time with agencies joining if they wanted to; and using a FAQ document on the website with the answers to questions posed by those applying.

Amy offers that the RFP seems too open. It seems to be missing “specificity related to what are things that will not qualify an agency for funding.” Adding something like eligibility requirements for funding, evidence-based assessments and tools for treatment were given as examples. The grading matrix tool was explained by Amy who suggested looking at this at the next Behavioral Health Policy and Funding meeting due to discussions from last year that it needed revamped. Kristine feels agencies may want to identify what clinicians are providing services and that they are qualified to do so. What experiences does the agency have to provide the services should also be briefly described in the RFP. The current RFP, in the “Agency Requirements” section, could be better worded to specifically describe what the expectations will be.

Further suggestions included the importance of defining the expectations so if needed they can demonstrate how they will reach certain populations. Will they create a program within a program or offer mobile services or offer services at a satellite location? Looking at next year will COVID still be addressed and should it be included in the RFP? If providing services across the county, the rural areas may have tougher situations with technology, finances, and infrastructure so partnering with towns and others could help. Do agencies need to show contingency plans if the need for shelter in place occurs again? The awards could be based on agencies having those plans in place. It is hoped that the RFP process has agencies looking at nontraditional or innovative approaches to solving the problem.

Specialty Courts (SC) is discussed as one with historical funding background with a long-term commitment by the County Board and the 533 Board for Specialty Courts being funded continuously. It is asked that if this is not a competitive bid situation, maybe the money just be given to the Specialty Court groups. Then, other groups helping individuals after incarceration, not picked for a Specialty Court program, could apply with an RFP. It is added that other cities have successfully provided supportive services for small not-for-profits in the grant process which may assist those in this community without a lot of experience apply for an RFP. Laurie suggests the need to clarify what the agreement currently is for SC. Cory agrees a definitive explanation is needed. It would be welcomed by the members to create a better process to issue the SC money. If one group always gets it, let it be allocated to that group and have other money available to be awarded to other agencies. If it is not the BH controlling the money it is suggested to talk to the Health Committee of the County Board. It seems this allocation is more of a grant not a request for funds so it would help to clear this up. The members agree more clarity is needed. If SC is modified would there still be a category four that addresses the issue of mental health of people being released from jail and prison and what would that be called it is asked. It is suggested the Adult Services category could meet the needs of what some members are asking about for the smaller agencies not able to apply under the SC category. Dan replies in the chat box "we are lucky to avoid an increase in Drug Court mental health contribution and should try to cut it back although prioritizing persons in the criminal system." He could not use his microphone and was not able to provide further discussion.

Cory asks about the innovation issue and the distinction of the two-cent sales tax and the 553 money. Trisha explains her interpretation of the 553 money is that it "does not prohibit or prevent innovation." She adds that "as an advisory board we have the discretion to identify whether that is something we want to encourage in the RFP or not." She adds her understanding of the "553 dollars has never been that it cannot fund something innovative," where there is more of a difference with the shared sales tax. It is added that it might be about how the programs are delivered and the board should be fine asking for that.

As discussed so far, Cory lists out that innovation; collaborative; clearly defined disparities and clearly defined plans for delivery of services in multiple ways have been suggested for the RFP.

Returning to the multi-year topic in the RFPs, Amy offers there is support to offer automatic renewal, possible automatic renewal or multi-year contracts and asks if that is okay with the members. It was suggested from "legal" last year to put multi-year in the RFP and to be transparent from the beginning. It would be in the contract if it could be or not be automatically renewed. This would help reduce time spent renewing an agency like the Crisis Hotline that is

renewed each year, or the Embedded School Project that may not be sustainable after “just one year.” The language would be reviewed by legal. This would be an option in the contract but not an obligation or commitment. The members agree this should be pursued. Perhaps it could be based on performance and continued availability of resources.

VI. Items for Action

A. Approval of Board Meeting Minutes 2/7/2020

Laurie motions to approve the minutes. Trisha seconds the motion. All approve. Motion carried.

B. Approval of Joint Meeting Minutes with Behavioral Health Policy and Funding Committee 6/4/2020

Laurie motions to approve the minutes. Trisha seconds the motion. All approve. Motion carried.

C. MHAB By-Law’s Updates to be Approved

Laurie motion to table this topic to the next meeting and Trisha seconded the motion. All approve. Motion carried.

D. MHAB Recommendation to BOH on prior allocation of \$50,000

Cory requested input on two functions; marketing; and the function of helping agencies being sustainable. Regarding creating a function on how to market to underserved populations, are there concerns about not providing services that are culturally competent or other and how to be successful in this marketing function? Gaby suggested advertising on the city buses. Faye suggested targeting organizations who have as their mission something helping mental health as a part of their mission or services area because they are committed to doing that. Examples include Greek organizations and Heartland Community College. Other ideas included the new veterans’ facility, gas stations, churches, coffee shops, bulletin boards, food banks, MCLP, DUI places, Western Avenue Community Center, St Mary’s church, small community VFWs and American Legions. Job Partnerships could also help with resources. It is added to use multiple language resources. More ideas included the international programs at the universities, rural fire departments and libraries. Regarding the function of helping agencies become more sustainable, Cory asks for ideas to promote and coach sustainability. Trisha suggests staff from HFS to give guidance to agencies about billing for Medicaid services. Illinois Wesleyan has the Action Resource Center that brings together all the players for collaborating resources which is free. Mary will get the details to Cory.

VII. Other Business and Communication

Cory suggests future meetings allow for a two-hour time span.

VIII. Adjournment

Laurie motions to adjourn and Trisha seconded the motion. All approve. Motion carried. The meeting ended at 10:58 am.