

**MINUTES
CITY OF ST. CHARLES, IL
708 MENTAL HEALTH BOARD MEETING
THURSDAY, FEBRUARY 25, 2016**

1. Opening of Meeting

The meeting was convened by Barb Gacic at 5:31 p.m.

2. Roll Call

Members Present: Chair. Barb Gacic, Carla Cumblad, Michael Cohen, Mary Hughes, Ron Silkaitis., Carolyn Waibel and Ron Weddell

Absent: None

Others Present: Tina Nilles and Tracey Conti

Barb: I would like to thank everyone for their input as we determined the two questions that would be relevant to all agencies tonight. I believe the participation and feedback of the Board in the last year's application changes, checklist and format changes for this evenings presentation continue to bring useful updates in our decision making process. I think it's going really well and I thank you all for it.

We do not yet have the minutes for the February 16 meeting so we can waive that.

A couple of housekeeping items: I did a lot of contacting people regarding our questions last week on Operation Snowball. I sent a recap; it's in your packet out on the table. I did not promise any funding what-so-ever. We have a lot of questions that weren't in the application. The last question I had that's not listed is: Who carries their liability insurance? It is the Kane County Regional Educational Office. I'll read it quickly.

My question was: Just to clarify are you an organization program, not an agency?

"Yes. Operation Snowball is a program."

Is it run through the local schools or through a substance abuse program agency?

They are run through the Kane County Regional Education Office.

Is the sponsoring organization a school or non-profit?

It's a non-profit.

Is there volunteer screening for predators, etc.?

All volunteers are fingerprinted and screened through the Regional Education Office. Sergeant Tim Baker is also a director of the program and I believe he is from Batavia.

We questioned the lease.

The lease for meeting space at Kane County Regional Education Office is \$12,000 per year or \$1,000 per month. This seems very high. Could you please explain?

The Kane County Regional Office of Education, where the meetings are held weekly, is space that is actually owned by Batavia Enterprises. Snowball is currently behind in their rent. They have not been paying. Batavia Enterprises is currently not asking them for rent. That's not saying it's been waived. She didn't imply that. She just said they aren't asking for it.

Mary: Are they there full time so that they would need a permanent space like that?

Barb: They are there every Thursday, 52 weeks a year, unless Thanksgiving, Christmas Eve or Christmas falls on a Thursday.

Mary: What are their hours when they have their meetings?

Barb: That's a great question to ask tonight.

Michael: The question you asked them about volunteers, about their background screening. Has that been asked of the other agencies also?

Barb: I have not.

Michael: A lot of these agencies are relying on heavy duty volunteers. To screen somebody does cost money.

Barb: Absolutely.

Mary: But the Regional Office does it for the schools. They're the ones who do the background checks for all school personnel. I wonder if it's donated.

Michael: I don't know, but I know where I am to do it electronically it's \$18.00.

Barb: My next question was: Do you keep detailed revenues and expenses on Excel or QuickBooks. This should be detailed information we're requesting in our application process as we need to be able to answer to the City of St. Charles tax payers.

They keep a checkbook for small items with the Community Foundation of the Fox River Valley. They have an account there. That's how the Community Foundation works. If we were to give

them any money or any larger donation it all goes into that fund. The Community Foundation is actually the one that issues the checks out of that account. There is something there.

What's the process to recruit students and what is the retention rate?

Students are recruited peer to peer and teacher to student. They have almost 100% rate once the students get involved. Some students come weekly and others only come to the retreats. There are 13 schools in the area.

They did list the schools on the website. Snowball is listed at East's activities and organizations. They list North. It was not listed on North's website.

Mary: They have been at North. I'm not sure if they are now.

Michael: Are these 13 schools all St. Charles schools?

Barb: No. It's also Batavia and Geneva. Its 13 schools in the area.

Michael: Are they saying if they get money from us it's only going to be used for St. Charles students?

Barb: Yes and that figure states specifically in their application.

I did remind her that there was no application last year, contrary to what she had put down. If she looked back to 2014 they had used the 501C3 letter from the Community Foundation then. That's when she said Operation Snowball had an account with the Fox Valley Community Foundation.

The first thing I did on Monday was call the Community Foundation and asked them to tell me what their relationship is with Operation Snowball because they submitted a 501C3 letter. I want to know if it's legit. I work at a CPA firm. I see 501C3 letters all the time. This wasn't it. Not for the right agency.

The woman at the Community Foundation said yes, in the context, because large donations go into the checking account that's there. It would be a legitimate use of that 501C3.

Rhonda, who I spoke with at the Community Foundation, said Operation Snowball deposits funds into their account. They in turn pay all invoices at the direction of Operation Snowball. They are essentially the bookkeeper, banker for Operation Snowball, and the agency would produce the financial statement that should have come with the application.

I told Melissa this is some of the information we would be looking for in the application next year. We need specific financial data. These are in your packet. You do have a hard copy of the answers.

Ron S.: As we discussed, it's still an incomplete application. That's agreed upon, correct? According to our own guidelines they are ineligible.

Barb: I wanted to give everybody as much information as possible. I had all of these questions myself. It was easier to have me call and compile the answers. I spoke with Rhonda Soos at the Community Foundation.

Mary: Does the Youth Commission give them any money?

Carolyn: We denied the request. We had talked about it at the last meeting.

Mary: I remember you said there were some questions.

Carolyn: We have given them money in the past. It's been several years. The last few years they have denied their request because they can't get specific information to how it's being used. We can only fund certain things. We can't fund transportation, hotels, etc. If they're taking kids to a location, or paying a rental fee, we can't fund that part. In order for us to fund anything they needed to break it down more specifically and they were not able to do that. We declined.

Barb: It doesn't matter how good an organization is if you're not providing the information that the agencies are requiring. You're going to continue to get denied.

Michael: I think we should consider putting on the application something addressing how these agencies measure the success of their programs. There have been a couple that have hinted that they do satisfaction surveys, but none of them put any results or how often they survey. There was one agency that mentioned they surveyed, I think it might have been the school, they surveyed in October and February. But they didn't go into any detail. For anybody asking for money, a lot is going for program and services that they are doing, most of them aren't including what they use to measure if programs are successful. I think we really need to come up with something that they would have to survey clients. They have to be doing something. We had this conversation last year too.

Barb: You survey your clients on a regular basis?

Michael: We have two positions that are funded through Hanover Township Mental Health Board. I oversee both of them. Even families coming for family therapy do a satisfaction survey twice a year. For the after school open gym program we randomly pick 10 kids and we do a survey. We do a strength and difficulties questionnaire with them. If they're too young, parents fill it out with them. We do that at baseline measure, beginning of the program and at the end of the year. The principals also pick 10 kids and we compare their kids against ours overall. We also look at attendance records for every kid that's there, referrals and discipline data and grades.

The position we fund for somebody who does high school groups, we're not only doing SDQ's with them, we're getting grades, discipline and attendance records. We're also doing a connectivity survey, baseline and at the end.

Barb: You obviously do this totally anonymous.

Michael: We never put names on them.

Barb: This has never been our approach as a St. Charles Board. I don't know whether the board wants to switch to this?

Ron W.: This is a big issue out of the Affordable Care Act. Program evaluation, assessment, outcome evaluation, that's very important these days. You have to justify your programs and services. We haven't asked people beyond how they spend their dollars. Evaluations are reliable and valid. Surveys are very poor in terms of outcome measures. It's good to ask for.

Michael: Depending on what you use. I think at this point we're giving money to people and we have no idea how effective this is.

Barb: I spoke with one agency who had received an application from another 708 Board. They chose not to apply because for the miniscule amount of money they were getting back, it was not worth the quantifying of employee dollars to put together all of the numbers in the evaluation; taking it the step further to quantify down into the numbers to say what it is. This was not the first agency that had said this, not only to me, but to other people. I don't want to cut off any agencies that we've funded for a long time that do very good work.

Michael: I'm not saying that. Part of the mindset is we fund agencies for a very long time, are we doing that because we fund agencies for a very long time, or are there agencies that maybe their programming might not be the best so they don't want to put themselves out there with surveys.

Our after school program, we survey 90 random kids. Everyone had taken that survey, either the kid or the parent because we have a relationship with them. We did this with our tutoring program. They had never surveyed anyone. 90 students with their parents, she was very hesitant to do it because she had never done it before, she thought nobody would do it. Everybody did it. I think in this day and age that doing some type of survey to see if your program is effective just has to happen.

Mary: My guess is most of the agencies are doing something. Agencies have been doing this for a long time. Whatever it is a survey, consumer satisfaction survey, and anybody getting State dollars is getting lots of scrutiny. I don't know that I think this is something we need to tackle in great detail. If you want, we could add something to the questionnaire to see if they are doing it. Maybe the smaller agencies aren't, but I think some of these bigger agencies are.

Carolyn: Anyone submitting to any kind of insurance is doing an evaluation. It won't go through insurance without evaluations quarterly or every other month. I agree with Mary. I think it's something we can add if they have it available. I wouldn't feel comfortable making it a requirement.

Ron S.: On the next application we ask if they do surveys. Then we decide the following year.

Michael: I just think it's a must to see what they're doing and how they're collecting data on people that they are serving.

Carla: Logistically I think there are a couple of limitations to that. For instance, an organization like AID that serves a vast number of people; can parse out this little segment of who and what they serve. They have multiple avenues of service. I'm a person who believes in outcomes, but I think that we really have to think carefully about what we're asking.

Michael: When we do ours, the satisfaction is 95%. We survey this many people, we give them the bare bones of it all.

Carolyn: These larger agencies aren't aggregating it that way. It's case by case because they are doing it for evaluative services. They aren't doing a large survey. Tri-City for instance, they do it case by case, not a survey of all the people.

Michael: They say an evaluation. I'm saying if this agency is seeing a family there could be a satisfaction survey there if they want to fill it out.

Barb: I think in the case of Tri-City Family Services, if you can get in, they've cut down their wait time from 6-8 weeks to about 4. That in itself is a satisfaction because they're meeting the needs. Above and beyond that, I don't know. If we're doing this and are going to ask for this, we need to tell them tonight.

Michael: I don't know if it has to be decided, but I think it's a conversation to have.

Ron S.: We could just ask if they do surveys. If a lot of them do then the information is available.

Carla: We could ask if they have outcome data for the St. Charles residents that they could share with us. I think satisfaction surveys are biased. I don't think we need to suggest a way of evaluation.

Mary: I think that's a good way to phrase it.

Ron S.: Would the organizations manipulate the surveys, give us some and not others, we would never know.

Ron W.: We hope they're being ethical.

Barb: 98% of the agencies that come before us would never take the time to try and manipulate something like that because they don't have the time.

Carla: We're going to read this data and say what about them? Yes, they have made sufficient progress, no they haven't.

Carolyn: I don't think we can make decisions on an evaluative process like that.

Carla: Right. So why are we asking for the information if we're not going to use it as part of the decision making process?

Michael: If I'm asking for money and I can say we have a program and we surveyed all the kids in the program and the satisfactions rate from the kids is 40%, we're doing something wrong.

Barb: Then as an agency you would decide to get rid of the program or modify it.

Michael: What if that program is funded through a place I'm receiving money from and they're questioning what's going on? We're funding you and your success rate is 40%.

Barb: Do you even want to tell them. Maybe you want to modify the program.

Meeting moved to Council Chambers for presentation from the agencies.

Barb: I want to welcome each of our presenters and guests this evening. We've changed the format a bit this year. I know you were all told about the reduction in presentation time so we can get our questions in within your allotted time. In an effort to be sure no presenter has to wait we're going to ask the board's universal questions first. Then you can tell us about the most important things that are happening in your agency. At the end of the presentations I have some handouts for you.

1st presentation – Tracey Dunn, Elderday Center

What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Tracey Dunn: One of the things we are looking to improve upon is bringing additional technology into our therapeutic programming. We are investing in some new initiatives that will bring cutting edge technology to allow for additional cognition exercises to benefit our clients with our therapeutic daily programming.

Additionally, we are bulking up our caregiver services. That will be benefiting St. Charles residents through caregivers. People do not need to be enrolled in the Adult Day Program to receive caregiver support services. We are partnering to provide an early onset support group; which, if you are aware, is not readily available in this area. We are currently working with the Alzheimer's Association and local area volunteers to get that up and running.

We are also providing some additional caregiver education that will be offered throughout the year on topics that might be readily available such as, releasing caregiver stress, maintaining healthy boundaries and helping to make the home a dementia friendly environment as well.

Barb: Last year we asked you how you are prepared for future State cutbacks. Please concisely describe what your future looks like this year as the stalemate continues?

Tracey Dunn: I am pleased to report that our board has done some really strong strategic planning looking forward. That included data collection, analysis and research so we know where to better put our efforts. We have put new initiatives forward for fundraising. We have increased our fundraising efforts. You may know our big fundraiser used to be our wine experience. It was a little more laid back. In 2015 we moved to a gala event and were able to raise additional support.

Along with the new technology we're bringing into the classroom, we're also bringing it into our administrative offices. We are only as good as the resources available to us. We are bringing in new technology and databases that will allow us to maximize our staff hours in terms of fundraising, analysis, research and so forth, to make sure we can continue to sustain the stalemate.

Barb: We appreciate you listing us on the website as one of your partners.

Tracey Dunn: We consider you a valuable member of our team.

Mary: On the report for your income, it seems we are listed as St. Charles Township.

Tracey Dunn: Barb emailed me and I made sure there was a change. It was a typo. I always know who you are, but we have an outside bookkeeper and they inadvertently typed in the wrong area for last years' budget. I personally entered that this year so you will not see that. My apologies.

Barb: You have 5 minutes.

Tracey Dunn: Thank you for the time this evening to speak on behalf of St. Charles older adults and their caregivers. Elderday Center is entering its 26th year, our big milestone this last year was our 25th anniversary. During that time we have provided over 419,000 hours of care since our birth right here in St. Charles. We continue to see St. Charles residents be one of the highest populations in the surrounding area that is receiving services.

As I mentioned earlier, we are bulking up our caregiver support efforts this coming year. You will see additional support groups, such as, the early onset group which we are really pleased to be partnering with some other advocates to get this up and running. We know this is a concern for anybody who wants to know what that experience is. I'd like to recommend the book "Still Alice" or watching the movie to get a feel for what these people might be going through.

Additionally, we are providing more education throughout the community. We will provide topics quarterly that will be events held at our center to reach out to the communities. We are bulking up awareness, our outreach to get the word out about what we're doing. You're going to see a stronger presence. I think it's going to be wonderful to know that your dollars are being maximized to the fullest extent.

As I mentioned we are bringing in that technology. There is so much research and studies out there that are providing some really good qualitative evidence to help benefit older adults.

Ron W.: I noticed in your report that you mentioned there was some increase in cognitive function, about 65% through the program. How do you measure that?

Tracey Dunn: When someone comes to Elderday Center we do a baseline assessment. We're testing where they are with depression rates; we also measure anxiety, we also do a mini-mental that measures where they are cognitively. Every December we do a full scale agency analysis. We retest every current enrollee to measure if they have improved or declined. That shows us whether or not, evidentially, if our program is effective for them. We know we can't improve dementia forever, but by providing that therapeutic activity can spike the brain to fire off neurons in different areas that may have been blocked earlier. Socialization is huge and we know that depression and anxiety rates can decrease based upon their participation.

Ron W.: I think the board is looking forward to the outcomes and how their measured.

Tracey Dunn: That is something we do provide. Our annual report needs to be sent to the publisher. As you know it can take a couple of months sometimes for the books to close. I will make sure you personally receive our findings. We also measure blood pressure, as well. We also look at our discharge patients. How many months can we keep them out of a nursing home. I'm pleased to say, on average, we were able to keep someone out of a nursing home 13.6 months. That equates time with their family; it means more resources available for their care later because of the funding and support that we receive.

2nd presentation – Natasha Clark, Suicide Prevention Services

Natasha Clark: Stephanie Weber is our executive director and normally would be here, but she was stuck traveling from the East Coast and came in late this morning. I do apologize up front. I will do my very best to answer the questions.

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Natasha Clark: We are looking to continually increase our educational programs. That is one area that I've been working extensively with. Our ASIST, which is the Applied Suicide Intervention Skills Training, is a community based program that is not for professionals only. It's for every person from every background. We're looking to continue to expand that and

provide more training. It is a fairly intensive and costly program in that its 2 days and that does take quite a bit of our resources. That's one big area we hope to be able to maximize the use of your dollars.

Barb: Based on the minutes from last year; you don't receive state funding.

Natasha Clark: We do not.

Barb: Have you seen the lack of a state budget impacting your agency and the clients you serve directly or indirectly?

Natasha Clark: We have not ever received state funding. We do rely extensively on our private donations, our fundraising events. Those continue to bring us a substantial and enough of an income for us to continue to provide our program. We're active in looking at new donors, but we're also relying on a steady base and continue to nurture those relationships.

Barb: How do you screen your volunteers?

Natasha Clark: Our volunteers for our hotline, that's the primary source of our volunteers is to staff the hotline, we don't usually use volunteers for other areas. That's the biggest use. We couldn't do the work we do without the generosity of volunteers. The screening process is very extensive. It involves preliminary gathering of paper resources checking background, education, and references, very standard. We have 2 interviews with several staff members present. Throughout the training process there are 3 checkpoints and with every direct hotline shift they have 8 training shifts on the hotline. There is an evaluation every time. It's a continual evaluation process. We have implemented new technology that makes it easier to track some of that. We're pretty proud of our screening process and our continual evaluation of our volunteers.

Mary: I think last year we provided support for you to be able to do the assist training.

Natasha Clark: You did.

Carla: Can you tell us how many people have participated in that training?

Natasha Clark: It was my goal to have a St. Charles exclusive training workshop held here. We tried twice to have it here and there is a third one on the docket now for June. We did not get enough participants. We did get enough registration for us to continue to pursue it, but we ended up taking those registrants and channeling those to some other locations we have. We've seen an increase and doubled the number of assist workshops as a whole from years prior. Many of those have been St. Charles participants. The exact numbers I would say are about 10% of our total at this point. I am still looking to hold an exclusive workshop here in St. Charles.

Carla: If you were unable to provide that training; did you then devote some of those funds to some of the other activities that are in your application? Screening or counseling?

Natasha Clark: They would also go towards volunteer training as well. We need staff hours to cover that training. In addition to ASIST, there are many more hours. Its 80 hours of training before someone can go on the hotline. We do have students from St. Charles schools coming through. That funding would be able to cover the additional training that goes into our volunteer training. I'm glad you asked those questions because that is a big area that we wish to develop. We are constantly looking at evaluating at how the best format is to generate the interest. We know the interest is out there, because all of our other workshops are full.

We purchased new software that is able to give us a lot more information about the training programs and monitoring our hotline work. We're looking to use some of that to evaluate some programs.

Barb: Thank you.

3rd presentation – Kathy Melone, Director of Development, Fox Valley Hand of Hope

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Kathy Melone: A lot. 708 funding has really helped our organization all through its years, but now more than ever. When we were first organized in 1981 it was really as a hospice. We changed our name this year. The reason is because we found that more and more over the years, growing, was mental health funding. People are coming to us who don't have insurance, don't have help for their kids. We do free one-on-one counseling, group support for families, children, and adults, anyone who is struggling over the loss of a loved one.

I was speaking to a group yesterday in St. Charles. Parents from there had rallied together over a loss that their kids were struggling with. It actually came to us due to all the outreach we have been doing in St. Charles. Our youth outreach program is growing by leaps and bounds. Next week we are starting a support group at Bell Graham for kids struggling academically because of a death in their family. This was a group of parents coming to us saying this is a service we do not have access to, and we want you to come based on your reputation in the community. We're really doing a lot of hands on grief work with people in St. Charles and the entire Kane County, helping adults and children who are struggling to cope and live normally and are having a hard time adapting to life after losing someone that's important to them.

Barb: Based on my notes from last year. Though you don't directly receive state funding, has the lack of a state budget impacted your agency and the clients you serve directly or indirectly?

Kathy Melone: Yes, it has impacted us in a couple of different ways. All the organizations out there who are losing their state funding are all kind of going into the same pool. I don't feel like we necessarily lost funders, but I think that in some instances our funding is going down because they are trying to supplement the other pool. Also, people in our community are struggling. We work hand-in-hand with so many different organizations in the area. When we have somebody

come to us, maybe the bread winner of their family has died and all of a sudden they are looking at foreclosure and they are struggling with different things, we're partnering with all these agencies who are struggling too. That's a great thing about the community here; we all kind of band together and help these families. However, when other organizations are struggling, we struggle with them.

Barb: How is your Spanish Program coming?

Kathy Melone: Gangbusters! We aren't working as much in St. Charles, to be honest. Although there is a need in St. Charles, but with some of the more outlying communities with children and adults needing to obtain our services through our Spanish Language program, interpreters are going out continuously to meet with families and we are able to place them with our Hispanic volunteers who are then providing the one-on-one bereavement or hospice services. That's definitely growing.

Barb: Do you test your volunteers for Spanish language or are they just coming to you and your trainers are screening them to make sure they are fluent?

Kathy Melone: Our manager who handles the program is from Mexico and has her degree from Aurora University and is bi-lingual. She can tell if they are fluent. She is the one who does most of the outreach. We have a committee of volunteers who kind of oversees in terms of outreach into the Hispanic community recruiting volunteers, speaking at churches and community groups.

Barb: You have 5 minutes.

Kathy Melone: We've had a really exciting year. A lot has happened to our organization in the past year. We have an incredibly engaged board of directors. We undertook a really intensive strategic planning initiative over the late spring and summer. We put into place a really aggressive and well thought out strategic plan to help us along with our name change. We did it for a number of reasons, but primarily because we were having people say, "Oh, Fox Valley Volunteer Hospice, we didn't know you had paid staff and could do professional things, we didn't know that you were more than a hospice, and our name was limiting us." We are definitely a little bit scared from a funding standpoint because hospice elicits a sense of people and they kind of open their checkbooks a little bit more. What we were doing was confusing a large majority of the community and what our services could reach. What we want to say to people is, we have all these hands, all these volunteers, we have 400 highly trained volunteers, and we're here to offer you hope. Whether you are undergoing a life threatening illness, just lost someone very important to you and you feel like there is no help out there. That's what we are here to give you free of charge.

We have put into place a lot of different goals for ourselves. We've already started reaching people. Our numbers have never been higher, just almost based on this change alone and some of the staffing that we've decided to do and some of the outreach we've been undergoing. That's why our name changed.

We've taken a really hard look at all of our programming. When I started with this organization I thought we were really up-to-date and looking at things, if it's not working, we're cutting it and being innovative. I always felt that way, but I think we have taken it to a higher level because of the funding circumstances that we're facing. We're really trying to do more with less. We've really streamlined our organization due to the strategic planning that was just put into place. We feel like we are really targeting the people who need help and we'll make a bigger impact. Along with that we completely redid all our evaluation procedures. We used a standard format in the past and we really wanted to make sure what we were doing was working. We sat down as a staff, our social workers mostly had to undertake it, but the business side was involved, and we really looked at what questions we were asking people, how can we ask kids questions differently to make sure that at the end of their sessions they have really been helped? That we're really doing what we're saying we're doing.

I guess what I want to leave you with is that we are really looking internally to make sure what we're doing is working, and we're really trying to put into place things that are in our external communications to make sure we're reaching the people who need the help, as many people as we can, and we are doing the best we can at evaluating to make sure we are making an impact.

Ron W.: Does Hands of Hope currently operate with Living Well?

Kathy Melone: Yes, as a matter of fact, we have met with Nancy on several occasions and we're working on doing some joint programming together. We've always referred back and forth. They do cancer and we do more, but some things overlap and we're looking at taking advantage of that.

Mary: I see you served 99 St. Charles residents last year and this year you are expecting to serve 150 – 175. Is that because of the more aggressive outreach?

Kathy Melone: This year we were down. The year before we served 110. When I saw 99 I thought that was low because most years it's even higher than 110. We feel like on a general year we should really be serving 120, and now that we're starting some school groups and we've made some more in-roads with the schools, we feel that number is going to go up.

Mary: What is your number of professional staff?

Kathy Melone: We have 7 people on staff and we have 400 volunteers, but that encompasses everything. That encompasses one-on-one volunteer support where you are actually working with the children, sitting with a patient, or sitting with somebody who's had a loss. It also encompasses some of our special event volunteers. If you call the office most of the time it's going to be picked up by a volunteer because we are a small staff. 64 of those volunteers are from the City of St. Charles, which is high percentage. We're right here in Geneva. It's a really intensive training program so it's probably easier for St. Charles and Tri-Cities residents to come to the training.

4th presentation – Karen Hill, Director of Major and Planned Gifts, Living Well

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Karen Hill: I think the biggest thing is our social work staff is a new component. They are the front line folks that are helping with crisis intervention. They augment and support the counselors. There is research that shows that people who get a cancer diagnosis the first initial reaction can put them into crisis mode. Our social work staff, there are 2 at the Cancer Center at Delnor, and they often are called over to Living Well when there is a new participant that comes and clearly shows a crisis mode and they come and de-escalate the situation. With that added we expect to serve an increase in St. Charles residents because we serve more people through that connection of the Cancer Center. They might not know about Living Well.

Barb: Though you don't directly receive state funding, has the lack of a state budget impacted your agency and the clients you serve directly or indirectly?

Karen Hill: We have been so generously blessed with the community for the past 10 years. We've never had government funding, significant state funding or federal funding. The generosity of the community is really what has sustained us. We fortunately haven't had to cut programs. I think where state funding might kind of shift is really the participants. It's not really so much the funding for social service agencies, but certainly the healthcare and people's health insurance; they often don't know where to turn. Again, our social workers are able to help those individuals' access resources in the community, find government programs that they might not be aware of because of a change in their health insurance. It's the government programs and insurance that has changed more so than the state funding.

Barb: Tell us more about what is going on.

Karen Hill: I think many of you know Living Well and know even more than I do. I've only been on staff for about 9 months. I'm so in awe of the community support and of people giving back. I've also been in awe of the importance that our board, Terry Murphy as well as JoAnn Hansen have led it from the beginning and they've always focused on that type of social support and really providing professional counselors. Participants get that free access to licensed clinical professional counselors and our social workers now as well. That is just invaluable to have those professional counselors available to help people get through a cancer diagnosis. We provide up to 16 sessions of free counseling. The other thing I'm always struck by is not only is it the psycho-social support through the individual counseling and the support groups that are critical, but also the other programs we have; the art programs, yoga and nutrition programs that we have, so when someone gets a cancer diagnosis often times they don't know that they even need counseling. They might be in shock. That they are able to come to Living Well and get the support of community, and our counselors, art program, and yoga instructors really get to know the participants and are really able to encourage people to go speak with a counselor or go to a support group. Sometimes people aren't as open to counseling and it really opens a door for them to know it's something we all go through. A cancer diagnosis can throw someone into a

situation that they're not used to, but talking with someone about it can really make their lives so much more manageable. Our support groups and our grief groups, the participants that come back and give back as volunteers because they got support through a support group or when they lost a loved one, or were going through cancer treatments, it's so telling of how important the services are to them. That giving community support, it's such an honor to be a part of working with that.

Mary: There is no insurance reimbursement?

Karen Hill: No. All of our services are free of charge. What is so important, especially with a cancer diagnosis, because it's one of the most expensive treatments, there are studies that show people that have a cancer diagnosis are 2.5 times more likely to declare bankruptcy. Even when people might have insurance they are overwhelmed with bills. To go into Living Well and not have to take out an insurance card, and not have to think about is this going to be billable or not billable, it takes a weight off of their shoulders. It's a true blessing that we're able to provide the services because of the community.

Carolyn: Last year we talked about that you get no direct funding from Cadence even though there is a name affiliation. Now it's Northwestern, sorry. It was just from the building of the facility. Is that still the case? I looked in the budget, but I just wanted to clarify.

Karen Hill: It is the case, however, I think one thing that has changed and I believe it was a couple years ago that this happened, my salary and the other fund raising staff person, we are paid by the hospital foundation. All of our fundraising expenses are paid by the hospital. Most organizations have fundraising expenses and we don't. Every dollar goes into the services that are provided.

Carolyn: So your salaries are covered by Northwestern.

Karen Hill: Not the direct service. Just the fundraising salaries.

Carolyn: All the funds created go straight to Living Well.

Karen Hill: Yes. It goes to Living Well.

5th presentation – Karen Beyer, the Ecker Center for Mental Health

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Karen Beyer: All our services are available to St. Charles. Those include: 24-hour crisis evaluation, grief counseling and referral which we do from the emergency room at Advocate Sherman Hospital so we are always there. We also have a telephone number for people to call. We encourage people to come in though. We have a crisis residential program which is a step

down from hospitalization for people who have psychiatric emergency. We of course have psychiatry. Our psychiatrists are helped by nurses who do a lot of medical case management for the people who are seeing our psychiatrists. We have talk therapy for adults, children, families and couples. I need to indicate to you that some of our services are for adults only. Our crisis residential is and if I don't say they are just for adults, they're for people of all ages.

In addition to our regular talk therapy program we have a therapy program that is run through our crisis residential program. It's called intensive outpatient residential program. These are programs that are usually run by hospitals. It's a day of help, skill building and therapy for people who are really struggling. Maybe they don't need inpatient, maybe they are afraid to come to our crisis residential program because it's an overnight stay. They can come to this program 5 days a week and we are there for 6 full hours. There is a meal and it's very popular and helpful to people who are in psychiatric crisis.

We have case management that is an adult service, we help people find housing, primary care, we watch over them to make sure they are okay. We have a new crisis residential team that can go out to people to their homes if they are having a crisis. We have residential programs where we have staff on site 24 hours a day. We have apartment programs where there is staff on site from morning meds to evening meds. We also have a small amount of money that we can help people with rentals. They have to be connected to our case managers. The case managers are not where they live like the case managers in our apartment buildings are. The case managers that are in the apartment buildings from morning meds to evening meds are literally there. The people that we help with rent come to our case managers.

We do have an office here in St. Charles and our landlord is the Renz Center. We rent with them. We've been together for years and work very closely together. All those services are available to residents.

Barb: Last year we asked you, how you are preparing for future state cutbacks. Please concisely describe what your future looks like for next year as the stalemate continues.

Karen Beyer: We have no problem getting ourselves into mid-July. We can continue as we are. We are now launching a new initiative, which is part of our strategic plan, we own a lot of buildings, we are going to sell some buildings. We are going to sell 2 houses. That will displace 8 people in our 24 hour residential program. We've been working with the State of Illinois and are assured that those people will be able to; with our help of course; find suitable housing of the same kind with other agencies. This kind of a sale is going to generate hundreds of thousands of dollars for us and that's going to really help us move throughout next year. If this stalemate goes on for years, we then have apartment buildings that can be sold. We know we're going to be around.

Those funds that come from the residential programs will be reinvested in outpatient. We feel we really need to be here as much as possible for people in crisis.

Carla: Out of the St. Charles office I know that quite a few of your residential services are north in the Elgin area. What kinds of services come out of the St. Charles office?

Karen Beyer: Therapy for people of all ages.

Carla: And case management?

Karen Beyer: Only as much as our therapists can do. The heavy duty case management occurs in Elgin.

Carla: Do clients come into your facility in order to receive that counseling service in St. Charles?

Karen Beyer: Yes.

Ron S.: I'm reading our packet and it says you are going to serve 8% fewer St. Charles residents and have 8% less service hours. Is that due to you saying we can't serve you or do you expect the need won't be there?

Karen Beyer: It's due more to our inability to be as responsive as we once were, to be honest with you.

Ron S.: If someone comes to you and you can't provide the service you would recommend some other service?

Karen Beyer: Yes.

Karen Beyer: Our biggest challenge has been psychiatry. Since I wrote that grant application some things have happened that actually turned out to be quite good. Not wonderful, but better than before. We have been working with people that we were seeing regularly with our psychiatrists who have low level need for medication and uncomplicated milder depression, things like that. Our psychiatrists have been working with us to create a packet for these people to be taken to their primary care physicians explaining a lot about their therapy, diagnosis, and history of their medications. We're finding in many cases that primary care physicians are willing to take these people on, which has been a help to us. We need to be there for the person who doesn't have money and has a real serious mental illness. I'm not saying that the problem has been solved, but now we have more openings.

What we're doing now is for people who come to our program at Advocate Sherman who look like they really are people in need and others are going to struggle to keep them together, so to speak. We have a few slots to pull them in. We also are pulling people into our psychiatry program who come into the crisis residential program. Thankfully, something that we thought really wouldn't work that well has helped us to be more responsive.

6th presentation – Jerry Skogmo, Executive Director, Renz Addiction Counseling Center

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Jerry Skogmo: Renz isn't going to slow down in spite of some difficulties and state nonsense. We'll continue to be the number one and most comprehensive outpatient treatment center in this area.

We've also been involved in the Kane County Juvenile Drug Court. We'll be one of two juvenile drug court providers in the county. The other being Breaking Free in Aurora. I think we will be looking at trying to be more comprehensive in our services. There are some good indications that we could be getting some seed money for a MAT Program (Medication Assisted Treatment program), which is primarily used for opiate addicts, but there are other medications for alcoholism and some of the other drugs of abuse. It's a medical adjunct therapy for people who could benefit from something like that. It can be very expensive because you have to hire a psychiatrist. We rolled it out in Elgin, but would certainly include St. Charles area residents as well. There is no guarantee we're going to roll that out. The foundations that we have approached have been very optimistic at this point, we'll see in a couple of months.

Barb: That's good to hear. Last year we asked you, how are you preparing for future state cutbacks. Please concisely describe what your future looks like for next year as the stalemate continues.

Jerry Skogmo: Today for the first time in about 6 years I had to move some money from a reserve fund to operating. That gives you a little idea of what's going on. Money is becoming tight. Thank goodness for reserves. Years ago I was asked why does a non-profit need reserves. Precisely for this kind of thing. We're in no danger of closing at all, but we certainly have to watch things for a while. The other thing with the state system. The grant and aid that has characterized government grants in the past agencies is becoming a thing of the past. Probably 10 years ago 90% of state funding was grant and aid. Now it's about half. Because of the Affordable Care Act there are a lot more people on Medicaid, a lot more people on insurance. It's becoming much more of a fee for pay kind of service. That benefits us because we don't have to rely on the state we can bill Medicaid, Medicare or insurance. I think in some ways it's going to be a better system.

Mary: On your chart this year, no treatment for gambling. That doesn't seem to be an ongoing issue in the area?

Jerry Skogmo: We don't do a lot of gambling treatment. I think last year about 22 agency-wide. Mostly in the Elgin area. You're right. The last couple of years there have been no gambling treatment in the City of St. Charles. We do in the larger areas. I don't think gambling problems have decreased. I think there are a lot more options for people. The Affordable Care Act has given some options for people who didn't have it. I don't think some of those providers are qualified to provide that kind of treatment, but if you have license, you can do that. Our

numbers have gone down from about 60, 6 or 7 years ago and it's in the 20's now. We still offer it; we're still the only area non-profit agency that offers impulsive gambling treatment. When there are other options people are going to look at those.

Michael Cohen: You mentioned that you do a client satisfaction survey that's given annually. Can you talk more about that?

Jerry Skogmo: It's relatively simple, about 18 questions that we give any client coming in one week during the year, so we capture everybody. It's not a sampling. It's all the people coming for services that particular week. We look at everything from is the receptionist treating you nicely and respectfully to how difficult was it to access treatment and services to quality of treatment and services, how satisfied are you with your treatment plan, how satisfied are you with your individual or group counseling. We try to cover a little of everything in an 18 point survey. It yields good results. There is a suggestion portion of the survey as well. We use a lot of the suggestions to improve our services.

Barb: You have 4 minutes. I did want to make one suggestion. Next year when you fill this out if you pull the numbers from inside out here. This is how I start my spreadsheet.

Carolyn: I saw a 6-month budget. Was there no year-to-date budget in here, or did I miss it?

Jerry Skogmo: There should be.

Barb: You're on a fiscal year.

Carolyn: That's it. I'm thinking calendar.

Jerry Skogmo: Yes. July 1st – June 30th. The budget is for the fiscal year for the treatment program, but there is also a budget just for the St. Charles office.

Tina: As I said before. I get these sent to me monthly, some quarterly, I take them and I have files for them in my office. If you ever want to see them we can get those for you.

Jerry Skogmo: This is a challenging year. We saw less people this year, 111 people. In years past we've seen upwards of 150 City of St. Charles Residents. Part of that is we've had some unusual turnover this year. It's been a little difficult. When you have turnover it has an effect on client services. Another ramification of the Affordable Care Act is there are more people out there with insurance, therefore more providers. People who work for agencies and are getting \$35,000 - \$40,000 for licensed social workers, their stock has improved quite a bit. We are losing some of those people to private practices and independent practices and hospitals. It's become more challenging for a community based non-profit. I think that's why you're seeing, in our case, a little decrease. People are leaving us for greener pastures, or at least money wise.

We are committed to St. Charles. We would like to provide more adolescent services. We do a lot of adolescent services in Elgin, Carpentersville, the Dundee area, and our Hanover Township

service area, a lot less out here. One reason is we don't have a lot of prevention programming in the St. Charles area. We're only funded by the State of Illinois for prevention program in Elgin, Dundee and Hanover Township. We recognize that we need to do more adolescent services here. We will do so.

Carolyn Waibel: From what you said, if you're not funded to do prevention programming here in St. Charles, is there any possibility you would use any of the St. Charles funding to do prevention programming in St. Charles?

Jerry Skogmo: Let me just add that sometimes we do prevention programming in St. Charles even though we're not funded. I've gone to a couple of the High Schools and done some programs. We've done a lot of HIV prevention programming in this area, but to answer your question, probably not. We wouldn't take money from this pool and put it in prevention, because it's limited treatment.

7th presentation – Liz Eakins, Executive Director, Lazarus House

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Liz Eakins: What is particular is that 145 persons from St. Charles that are suffering from substance abuse, or developmental disabilities that are adults and have no place else to live, they have a home. We are a very comprehensive and caring home for these folks. We are the last place anybody ever wants to end up, in a homeless shelter, but I can tell you that within weeks of people becoming guests of ours they are very grateful and feel very comfortable and at home with the system that is in place, the community that has wrapped their arms around us, and the caring staff and case managers that they all have access to. I have to emphasize every single year that we don't do this alone. I was looking at all the applicants. I would be hard-pressed to name 1 or 2 that we don't partner with in providing or linking services to our guests who are struggling the most. As we have been doing the last several years every one of our adult guests are screened for mental health and substance abuse concerns. About 74% of our adult guests do have one of those disabling conditions that would qualify them for 708 funding.

Renz, Ecker, Tri-City Family Services, everybody, they are great partners of ours. Our case managers within days of having a guest living at Lazarus House have made those phone calls to get further assessments. We do an initial screening. The in-depth assessments are taking place at Renz, Ecker, or Tri-City Family Services. In truth I can't tell you the number of people who have come through our doors that have never been previously diagnosed. We are that opportunity for life to really change. I think that's what we're bringing to the community.

Aside from the folks that stay with us as guests, we have outreach programs and we have 21 households of those who are effected with substance abuse, mental health or developmental disabilities that we have housed independently on their own in apartments in the Tri-Cities, but they were originally from St. Charles. They have the dignity of being able to maintain their

household, but they know they have the partnership of the management staff behind them 100%. We meet with them regularly to make sure that they are being successful in their efforts. We have a very close relationship with all of our landlords in all of these programs. If ever a problem begins we get phone calls and we work very closely to resolve those problems.

We have our soup kitchen for our communities. We have a number of folks that are suffering, especially from mental illness that will come by for lunch and dinner almost every day. We have one gentleman, 15 or 16 years ago I worked at the Salvation Army and I knew him from when I worked there. He's known around town, a very gentle, but very mentally ill individual. He's a patient of Ecker's, but our staff had been noting, in our daily life we have hand written notes that everybody shares, somethings not been right. We have this ability to be a linkage to alerting other that things might be spiraling and he needs a little bit of help. We have a release of information and we were able to talk to his brother. He took note and is making sure that this information is being shared with his psychiatrist. Our deepest desire is that we never lose him as a guest but we don't want anything to fall apart. We're trying to get ahead of the game and make sure he remains safe and be able to join us every day.

Barb: Last year we asked you, how you are preparing for future state cutbacks. Please concisely describe what your future looks like for next year as the stalemate continues.

Liz Eakins: We are extraordinarily fortunate at Lazarus House. Less than 7% of our budget relies on State of Illinois funding that comes through the general revenue stream. We did have a unique struggle up until January. We have federal money that is pass through money that goes through the State of Illinois who is the administrator for these funds. They were sitting on about \$50,000 of these funds that had nothing to do with the State of Illinois. They finally released those funds to us. The 7% of our budget that relies on State of Illinois, part of that is one-time emergency assistance. That is part of our outreach programs which offers rental assistance and utility assistance to prevent people from becoming homeless to begin with. We are not running that program right now. We have it on hold, but ready to do what we need to do when it gets started again. We have enough of a cushion that it's not effecting the services that we provide. We are continuing to do what we do and we do it well.

Mary: Do you still have a social service provider network lunch?

Liz Eakins: We do. We invite all the providers of emergency assistance and churches. We do that every month.

Mary: I think that's so important. Do you get a good turnout?

Liz Eakins: We probably average about 18 people that are there. Just touching base.

Mary: The informal communication is so important. This is a nice way to facilitate that.

Liz Eakins: It's all about relationships. That's the only way any of us get through this.

8th presentation – Jim Otepka, Executive Director, Tri-City Family Services

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Jim Otepka: I know that counseling and psychotherapy to children and adolescents will be the primary cornerstone of service to the residents of St. Charles. We are going to continue to grow in our service delivery to adults. That is often in the form of couple's therapy. We seem to be tracking more and more couples. Relationship therapy customers. I also think that St. Charles will benefit from the infrastructure that we've built to expand our capacity to serve the Latino population. We're very excited about that. It's been a long time working on the culture of our organization so we are culturally sensitive. We've been successful in recruiting some bi-lingual and bi-cultural staff. We've had slow growth, but now it's about establishing ourselves as a reliable, credible and safe place to serve Latino families. We're excited about that.

We look for continued growth in a relatively new specialization. Family based treatment program for eating disorders. I've mentioned this over the past couple of years. It continues to grow. We are getting some incredible outcomes and we look forward to serving more folks from the community.

If we do it right we will be able to offer our services on a sliding scale basis. Also residents of St. Charles can even benefit from our continuing commitment to providing prevention and early intervention programs. The array of them that we offer to residents is also on a very affordable basis across many different areas. In particular, next year we anticipate launching a Chit-Chat program. Some of you may have heard of our Chit-Chat program. It's an all day workshop for 4th, 5th and 6th grade girls. We've been doing it in Geneva and we are partnering with D303 and we're excited about launching a Chit-Chat program here. This year's Chit-Chat program will occur Saturday, we're approaching 250 young ladies and we look forward to the same kind of success in St. Charles.

Barb: I know there is some talk that if this goes well it's going to go nation-wide. Are you helping to structure that program?

Jim Otepka: We've been the administrative agent, orchestrator to Chit-Chat since it started. We contract with Helping Girls Navigate Adolescence, the parent organization. We've done a lot of work administratively to run the program locally. As a matter of fact, Chit-Chat nationally has asked us if they could use the 6 or 7-page addition to our website that deals with Chit-Chat. We haven't decided if we'll try to sell that to them or not. We're going to play a significant role in helping this program go national.

Barb: That's wonderful. I think it's such an incredible program and I'm so glad that you guys have embraced it.

Jim Otepka: We've had great success. Just in terms of the collaboration with the school and the fact that families become more acquainted with us and realize that the mental health services that we provide are accessible.

Barb: Last year we asked you, how you are preparing for future state cutbacks. Please concisely describe what your future looks like for next year as the stalemate continues.

Jim Otepka: I don't think the state knew that this many years ago, but they started weaning us from state funds. At the strongest level we received about \$80,000 - \$90,000 per year from the state and that's gradually eroded over the past 20 years. We lost our last chunk of grant and aid money this year, our Psychiatric Services Grant. We officially have no state grant money coming into the agency. We all could see a bit of a crisis, I believe, if the state government decides to reduce Medicaid reimbursement rates. 40% of our kids are Medicaid eligible. I hope that doesn't happen, otherwise we have learned to live through the years without the support of state grant funds.

Barb: Does anybody have any questions?

Mary: On the donor list, under the donors more than \$5,000. We're listed as the City of St. Charles. We really need to be listed as the City of St. Charles 708 Board, because it is a different taxing structure. We have to account for our dollars as we all do.

Jim Otepka: You sure do. Somebody abbreviated that in our data base I'm sure. Thank you. We'll take care of that.

Michael: I know the amount you're requesting. You're saying \$10,000 for community presentations and workshops. Can you talk about spending \$10,000 on that?

Jim Otepka: Primarily would be staff time. We develop workshops and presentations. It's primarily the development and delivery time across multiple presentations.

Barb: How is the St. Charles office working out for you?

Jim Otepka: It was a good decision. We needed some additional space. St. Charles is the right place because it's our highest demand area. East side was also a good selection. Students from the High School find it convenient within walking distance. It makes it easier for families from St. Charles, particularly if you live on the east side. Those families faced with coming home from work, getting kids together, somehow organizing a meal and then getting to Geneva. Now they are actually having their high school kids walk over and meeting them there. It makes life more manageable for them. We really want to see the use of that office grow.

Barb Gacic: I've almost used up all of your time. I'm sorry.

Jim Otepka: Our new Development Director, Kathleen Houseman was nice enough to stretch her hours today to come and allow me to introduce her to you. I wanted her to meet this fine group. Recognizing that you will probably be seeing her down the road.

9th presentation – Rene Boehm, Teacher, Wredling Middle School

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Rene Boehm: That's a hard question. This presentation kind of intimidates me because I don't know necessarily how to answer that. I went to my 5th funeral this year of a former student. The immediate benefit of what we do outside the classroom, all the extra hours we put in, is sometimes a band aid. Give them hope for a week, a month, a year, keep them alive sometimes, day-to-day a very tremulous time in adolescence. Beyond that is the hope to create a sense of purpose, a sense of ability, that goes beyond that one moment to find some positive outlets, relationships and conversations that they can build a genuine sense of self and who they are outside of whatever their circumstances are that have told them otherwise.

Because we're a 1200 – 1300 population and we're a microcosm of the City, everything we can do to reach students who are at risk, and that's a broad net, and to mentor them and give them one-on-one individual positive attention in a very purposeful manor; we hope this continues and translates into years to come and into positive citizenship and positive contributions and friendships, families and into the community.

Mary: Have Judge Hall and Judge Boles come to talk to you?

Renee Boehm: They were just there Wednesday morning. We try to look at the things that are creating more turmoil in this time and at this age, and the instantaneous, no thought, throwing comments, pictures. We see a direct relationship between that and other at risk behaviors and factors and the consequences that come later. We have asked the judges to come back. The kids were absolutely somber. That is very rare that a whole class comes back from a presentation quietly, respectful of what's been said and done. At the end of the presentation they did show some of the things that happen to students who have been bullied, been on the other receiving end, made a mistake and put something out there they can't retract and it's been very helpful.

Barb: I was really glad to see in your application that you took the board's suggestion from last year and submitted an application with the Greater St. Charles Education Association. I don't know if they gave you funding, but you're out there trying. We appreciate that extra additional effort.

Mary: They'll make their evaluations in March or April. They let you know fairly quickly.

Renee Boehm: I'm excited about that prospect too. That allows another avenue to reach another branch of students not being reached.

Mary: A number of years ago, more than 20 at this point, when this board first started giving money to the Middle Schools the program that Bob Lindell and Ron Freed had developed; some of the focus was on suspension rates. They showed that the children who were involved in mentoring or tech programs had fewer suspension rates. Are you seeing anything like that?

Renee Boehm: Right now the trend is state wide and locally, and I completely agree with it, we suspend much less. Not necessarily that the students are in trouble, but we want them in school. To kick kids out of school when they are in at-risk behaviors and say take a week at home unsupervised, maybe that will help, is absurd. It's hard because at this point we're trying to keep the kids in school and to still get the education that they need to have to change those behaviors. Because a lot of times those troubled students are part of our Suicide Referral Group at some point. We have seen an increase of referrals, and kids' conversing about it has doubled, but a decrease in attempts and success. We still see the acting out quite a bit, but they're conversing about it more. They are going to adults more. I'm hoping that pays off in some way and they feel they can express themselves and talk about what their troubles are. The suspension thing is hard to put a finger on because we've reduced it so much.

Michael: On the first page you're asking for \$3,000.00, and then it's listed as \$3,200.00. Is it \$3,000.00 or \$3,200.00?

Renee Boehm: It's \$3,200.00. I must have made an error. The reason that seems so weird and specific with that \$200.00 is because our programs change every year. For example, I have a student in a class this year. This is an advance, gifted student and she's very troubled. She's been self-harming. The only thing that can reach her, she's lost a parent and has had a violent past, is discussing things through books. She wanted to start a book club. These things come up every year and the money funds it. When I try to balance everything out I saw that our cross categorical group of students with the way I saw our programs and what the teachers and students were asking for. I saw that the funding to those students with learning and physical disabilities was going down. In order to keep everything the same the \$1,200.00 would do that.

Carolyn: You are the last remaining school that is doing this program with such success. I wanted to thank you for your persistence.

Renee Boehm: I appreciate that. I just love them.

10th presentation – Chief Jim Keegan, City of St. Charles Police Department

Barb: We had some insight from you previously, but if you could answer the question we're asking everyone:

What particular in your application will benefit the St. Charles residents with the 708 funding?

Chief Keegan: I think we've all been through insurance issues from time-to-time. What you see in continuity of care. This is what the social worker idea is for the City of St. Charles. We

want to give our residents, business owners and visitors continuity of care. Right now there are some things that are slipping through the cracks. I think the idea of a police social worker, and the program that I'm initiating will help that continuity to make sure that when folks are in need of outside of police services you can point them in the right direction and we follow through.

Right now there is a gap and that gap has us dealing with the same folks over and over because they aren't pointed in the right direction or the follow-up isn't there. That's really what I hope to bring to the residents, continuity of services and care for those that need it.

Barb: I'm going to open this up to the rest of the board for questions.

Mary: You're asking us for \$15,000; the total to pay the social worker is going to be \$30,000, is the other \$15,000 coming from your budget?

Chief Keegan: Correct. I arrived in St. Charles about 18 months ago and brought the initiative of AID to the forefront. It's about a \$15,000 contract for just the on-call services like I previously talked about. I'm looking to expand that now to have some office hours and the continuity that I talked about. It would be a 50/50 match.

Carla: The social worker is going to be on-call like AID is right now. They are going to provide that service in addition to some case management, social work, guidance for families or individuals. Is this social work position in addition to your contract to your contract with AID now?

Chief Keegan: What we're currently doing, which is that on-call component, if something happens in an emergency or there is a referral, it is farmed out through a dispatch center and it's given to a myriad of social workers. What the person in the station is going to do a few days a week is forge relationships with staff, all the entities that are funded here and a lot of the other social service groups in St. Charles and that continuity that I talked about, be that follow through. They will make sure there is a liaison with the staff, to the social service groups that serve us and to the residents.

Mary: If there is a call at midnight, this social worker is not going to be on call. Is someone going to be on call?

Chief Keegan: We will still have 24/7 coverage like we currently do. Will the person that we contract out be the one called? I don't know how AID is going to set that up. I don't think so. I think the office hours I'm looking for, a lot of the things we call the social worker on now may not need immediate intervention, but there needs to be a follow-up. With that person having office hours we're going to have the same person working behind the scene on those follow-up cases. That's really where the gap is right now.

Michael: Has there been any thought for the social worker position of somebody being bilingual?

Chief Keegan: I would love the person to have bilingual skills. That would be an added asset if we could acquire that skill. I have brought on 3 bilingual officers since I arrived, and we have just hired on 2 civilian staff members that are bilingual. That service is there. I had the benefit of working with a bilingual social worker for many years. It is an asset. I would only hope for that.

Barb: Do you have anything you want to add to what you have told us up until now?

Chief Keegan: Twenty-four years of being a policeman, 19 years of being a supervisor, one of the things I'm most proud of in my career is bringing social work into police work. I provided everybody with a few articles from the Daily Herald. We talked about CIT and some of the things that we've done within the St. Charles Police Department. I really feel strongly about this. I mentioned this before, but I think it's worth saying again. People who call 911, or need police services, or fire services sometimes aren't victims of crime. They don't need the police per say, they just need help. Our job, if we can't help them, is to point them in the right direction if we can. That's what the social worker position is going to do for us.

Barb: You just heard Renee's presentation from Wredling Middle School. Do you currently or do you see any interaction with them on a positive basis like Judge Hall and Judge Boles have done? Is there any interaction there that we can see for the community?

Chief Keegan: Specifically with Wredling, or with the other groups?

Barb: The schools in general.

Chief Keegan: We have a good foundation now with our Too Good for Drugs program at the elementary level. We have school liaisons' full time at both high schools. Anytime we can get into the school system, all be it with a social worker, another liaison. That social worker that's going to be inside the police department working with our staff is also going to be responsible for bridging those gaps with the Crisis Center, Wredling Middle School, Tri-City Family, they're the piece that's going to make sure if we can't help them or the school district can't help, we will find somebody within our group that can.

Mary: That's the important things, the case coordination and coordination between the agencies. I think a social worker could facilitate.

Chief Keegan: That's one of the key components I'm looking for is to be that liaison. Everybody should be working together.

Carolyn: For instance there was a group of teens arrested for vandalism. In that case would that be something your social worker would coordinate with the schools even more potentially than they have been because they haven't been present or would that not be relevant?

Chief Keegan: It would be. The school district tells us when there are issues we need to be concerned with and vice versa. For instance, behind the scenes with the vandalism case, that boy

or girl might need services. Maybe it's a direct result of problems inside the home, substance abuse, suicidal tendencies, etc. That social worker can coordinate services with school psychologist and they can get together, work with the family to provide services.

11th presentation – Carolyn Nagel, Fox Valley Recreation Association

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Carolyn Nagel: The request we're making is to serve children and adults, mostly children, those who are coming to us on a new basis. Our service is going to do more of the assessment to determine what their needs are. Of course our children and adults that we serve have any type of disability and are of all ages. We're looking to support them, determine what their needs are, how we might support them in involvement with Park District programs, our programs, or referring them to another agency if that need is there. The average coordinator does the assessment with them. We're doing this with the new people coming into our program and we're also providing the same type of assessment and intake service for those children who are enrolling in the St. Charles Park District programs. The park district will call us to help provide the accommodation that may be necessary to make it a successful experience for the child and the other children in the program as well. We're seeing kids with bi-polar, intellectual challenges, and physical disabilities. When we go in and do the assessment we're better prepared to adapt the program for them, instruct the Park District staff to work with them and at times work with the other kids and do a kind-of disability sensitivity.

The other element we do is involvement with the IEP process. We've been working very closely with Mid Valley Special Education. A lot of the kids are leaving the school and we're working with them to help with the IEP process to make recommendations with the types of services, day services we do on our own, or we do in coordination with AID, or other programs that might be out there in the community for their adult child to move on to the next step in their life. We also do that with the younger children who have IEP. We often get invited by the families to come in and share with the school system what the child has been doing and the recreation and social aspect of their life. There is a lot of coordination with the adult case management, young adults, older adults, as well as the children in all the schools and anyone from a young age who may be involved in a Park District program.

Carolyn: You were talking about 26 people served in the City of St. Charles. I was trying to find a correlation of if that is 100% mental health disability. Is there a way to break out the mental health disability? Are you 100% coverage there?

Carolyn Nagel: I can go back and look in the records, but most of our population either has an intellectual challenge or a secondary bi-polar disability, emotional disturbance or anxiety. I don't know the numbers off the top of my head.

Carolyn: The general percentage, you're saying the majority.

Carolyn Nagel: A very small low incident population that we serve across the board through our entire district is the physically challenged, visually challenged and hearing impairment. Everything else is primarily intellectually challenged and mental health.

Carolyn: That would be interesting for next year.

Mary: Most of your referrals come from where?

Carolyn Nagel: They come from the school. Parents will find us; they may read about us in the different brochures that we put out. The Park District, friends, parents, social workers, teachers, and different agencies will refer them.

Ron W.: Are you aware of any plans to change the age from aging out from 22 to 18? I heard some discussion with the State budget.

Carolyn Nagel: I'm not aware.

Barb: Do you currently get State funding?

Carolyn Nagel: No. Well, very, very, little. It would come if one of our children was receiving funds from the Department of Children and Family Services and they would pay for a summer day camp program. We have cases that have not been paid. That's a very small amount.

Carla: I know you help individual students with behavioral problems and the way a lot of students present before they are diagnosed with a mental health issue when they have behavior problems. Could you describe a little bit about that support you provide?

Carolyn Nagel: We see that often times in the Park District Inclusion Programs that the child may not be officially diagnosed, but we're seeing some acting out and some behaviors that are not making their experience in the Park District setting successful. If we wouldn't come in and help redesign the program and offer companion help and training, technically they could be ousted out of the Park District program. ADA doesn't allow that unless we come in and take as many different steps as we possibly can to make that situation better for all. We have had to have those meetings unfortunately, but we always have the opportunity that if they can show improvement due to different treatment and therapies they can come later on back into the program. A lot of the younger kids present challenges that parents have either not had them assessed at an early 2 -3 year age and they have not gotten into the school setting yet. The comment from the Park District staff would be they have some really bad behaviors; they must have some type of disability. There might just be some behavior challenges that need to be addressed more seriously, but we still would go in and facilitate that opportunity to go in and work with the Park District Staff to be able to help and make it successful. Maybe suggest to the parent that they might want to consider having their child assessed to see if there might be some challenges there that have not been formally recognized yet.

Barb: You have 3 more minutes if you have anything else you would like to share.

Carolyn Nagel: I think often times our programs are looked at as fun. Being a therapeutic recreation specialist the ultimate goal is for them to be fun. There is so much happening with the developmental access, we can teach the kids, and we can work with them. Often times we'll see the things they may do in the classroom to get them into trouble and they will be very cooperative in working with us because they are having fun in the recreation setting. They're working on cognitive skills. Our summer day camp continues the skills that they are learning in the school year, but again in a fun way, through games, arts activities and so forth. Then as we move into the adult population we work with Lynne and our Stars program through AID. We continue on with the life cycle. Some of our adults are 50 and over and are in the aging group right now. We're working on some of the challenges that presents with the appropriate age and life skills that they need to have as far as interaction and socialization. Ultimately, to prevent some of the mental health issues that could impact them in the aging process and other life crisis that may come in their way. We work very closely with the schools and the Association for Individual Development, Day One, many of the agencies that are here with me tonight. We get to do the fun part of it. Thank you for your support over the years. You have a tough job.

12th presentation – Lynn O'Shea, Association for Individual Development (AID)

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Lynn O'Shea: Our greatest resource for the City of St. Charles is housing for people with developmental disabilities. That's where our longest waiting lists are, and it really is a resource that without people with developmental disabilities, as their parents age or pass away, would have no place to live. We become their family. I believe the city residents who have children with disabilities count on having that as a backup when they are no longer able to care for their children. That is probably the biggest single resource or benefit that St. Charles residents get from AID. A close second would be the vocational programs we operate. We are able to place a large amount of individuals through the department of rehabilitation services each year into a new job. Not only do they get out and experience real life, they bring in a real paycheck. We have work programs too. Without these services that AID provides for people with developmental disabilities they wouldn't have an alternative place to go and some would be on the streets.

Barb: How are you preparing for future State cutbacks? Please tell us concisely what your future looks like for the next year as the stalemate continues.

Lynn O'Shea: We faced a little over \$1M dollars in grant eliminations this past year. We were offered renewal contracts for psychiatric services and some of our crisis services. We were offered new contracts for another million, that's the last million we have and there are no more state grants. That supports our Respite program for the developmentally disabled and our housing services for people with serious mental illness. We are continuing to operate this program. We are concerned that we may never get paid for them and are looking at what we may need to do going into next year if it becomes apparent that there is no intention to pay on

those contracts. We want to believe that the rumors we're hearing in Springfield are true. That after the election and after the general assembly is sworn into place by January there will be a budget. We believe our reserves are sufficient to continue operating with the additional million dollars in programs. We will come close to exhausting our reserves next calendar year. If the State does come through sooner than that we'll all be very happy, if it's later than that we'll have to take action about closing some of our housing programs. We are working very closely with the homeless shelters both here in St. Charles and the numbers there are escalating. Our concern is that's where many of our people will end up if continued cuts are made. We are actually providing services in the shelters.

Barb: Lynn you have 5 minutes.

Lynn O'Shea: There are 100 individuals with developmental disabilities actively seeking services, and 173 that are on the wait list. The need is still there. We can't take more. In fact our hands are tied unless the State is able to provide additional funding. This is not a cheap service. Families can't pay for it on their own, for the most part, we do have a couple of private pay families, but it's beyond most families resources. Once a child turns 22 we would like to be able to find a way to help that individual get support and services. Our struggle right now is how do we balance declining resources with increasing demand? That's always been an issue, but I can't remember a time when it was as serious as it is now. I do want to believe that we need to just wait this out and once everyone is re-elected they will come to their senses and solve this problem. We do have a wonderful relationship with the police department, but as the police officer mentioned, really what we are paid for is our crisis intervention 24/7. It's really to help the police with the victims, not necessarily do the social work. We really enjoy that relationship. Out of all of the services we provide I can't think of one I would want to pick and say we can't do that anymore. We are very close to being placed in that position. I want to thank you for the support you continue to give us. We believe we will be here next year talking to you again.

Mary: Are your group homes in St. Charles still operating?

Lynn O'Shea: They are. And the good news is that our Medicaid money is flowing because of consent decrees. Most everyone that we serve on the developmental disability side is covered by consent decree. So that's good. Thank you very much.

13th presentation – Steve Boisse, DayOne Network

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Steve Boisse: We are going to continue to provide the same services that you've helped us provide over the past few years; service coordination to individuals of all ages, newborn babies through senior citizens, who have either intellectual or developmental disabilities. We have a State that provides a somewhat convoluted system of services to people, and I believe that the service coordination we offer is a great value to St. Charles. It helps navigate and determine

what programs and services people are eligible for, and discover what programs are out there. Beyond that we stay on as an advocate in the life of that individual for as long as they are eligible for those programs. An additional benefit that DayOne offers is that our services don't end at a certain age. If a family comes to us when they have a child born with developmental disabilities; we will stay with them until they move out of the county or until they pass away. We have customers that have been with us for as much as thirty years. It's a real long-term relationship, helping that person get the services that they're satisfied with, and to change services too. Just because you start services doesn't mean that's always going to be the ongoing best service for you.

Barb: How are you preparing for future State cutbacks? Please tell us concisely what your future looks like for the next year as the stalemate continues. I did see in your packet that you are merging with PACT. I'm assuming that is to benefit both agencies; combining employees and services. Can you elaborate?

Steve Boisse: I was the executive director of PACT, I've been with them since 1991. When I discovered in January of last year that the current executive director of DayOne Network was leaving; I reached out to the board of DayOne Network and said to them that "we're facing the perfect storm here in Illinois." "We have to prepare ourselves anyway we can to reduce cost, maximize staff and get ready for things." Over the past 10 months the boards met and engaged in a very extensive research analysis of merger. We almost did this in 1995, but the problem was 2 executive directors. By only having 1 executive director it made things much simpler. On December 17 the two boards signed a memorandum of understanding agreeing to the merger. Grants will continue separate through this fiscal year because it's easier with State grants. We have changed our name to DayOne PACT as of July 1st, we will be serving all 3 counties providing the same services, but eliminating 1 executive director. Eliminating duplication in overhead cost, purchasing, leases, we think we're going to be able to save a fair amount of money. We bring resources from PACT that DayOne didn't have in terms of human resource management and development activities. It allows us to put more money into services coordinators, which is the direct service that we do for families. That's how we prepared, and I think we're ahead of the curve. I think we're in pretty good shape.

Ron W.: I notice in your packet you said that the DHSDD didn't select any individuals from the Pons waitlist last year.

Steve Boisse: No, they did not. That was because they weren't up to speed on the number of people who had to be selected under the terms of the lawsuit. We recently found out 2 weeks ago that there is going to be another selection made in early March. That will mean approximately sixty more people from the Kane/Kendall area will be selected and about another 100 from the DuPage area. Statewide it's going to be about eight hundred.

Ron W.: Is that a random selection?

Steve Boisse: It's a semi-random selection. No children will be selected from the list. That's been unfortunately true over the last few selections. Families with young children continue to wait for services until they have an emergency.

Mary: How many clinical staff do you have?

Steve Boisse: About 100 in the merger, service coordinators, people doing direct work with our customers.

Mary: These are not volunteers?

Steve Boisse: No. It may be more like 105, to be exact.

Mary: These would be people who would meet with the family, discuss the needs of the family member, and then plan with them.

Steve Boisse: They would evaluate their needs and eligibility for services, identify potential service providers, link them up to those services, and continue to provide advocacy to ensure the ongoing satisfaction with the services. It's long-term.

Mary: Would these be MSWL Social Workers?

Steve Boisse: BSW, BA, and MSW.

Ron S.: We were talking about the State of Illinois, but did you ever give us a number of how much the reduction was? How much less you will be getting less this year?

Steve Boisse: Because most of our services are covered under court decrees we did go three months without payments. When the lawsuit was filed to force the State to pay then we received our full funding. It's been kind of challenging.

Carla: Is it Medicaid funded or is it grants?

Steve Boisse: It's both fee for service and grant. Our ISA program is fee for service, but all the other programs are grant funded. Early intervention does have a federal funding component. It's passed through the State so we do not directly receive any federal funds.

Carla: It's federal funding. They flow it through to you, and you receive the funding.

Steve Boisse: Yes, and depending on the amount, we may have to change our audit, but for our purposes it's all State funded.

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Gretchen Vapnar: Primarily, our forty years of experience working with domestic violence victims, sexual assault survivors and perpetrators of domestic violence. Mostly, our 8,760 hours of availability of our crisis line every year. On that line crisis calls are responded to by paid professional staff 24/7. In our shelter, what I think we're best known for, right now there are 39 people, 7 from St. Charles. I would like to mention as well, our wonderful partnerships with many of the agencies in St. Charles. We do an education group at Lazarus House every week and our partnership couldn't be stronger.

Barb: How are you preparing for future State cutbacks? Please tell us concisely what your future looks like for the next year as the stalemate continues.

Gretchen Vapnar: Our future looks good. We know about crisis and we know how to handle them. We remember very well the 2008/2009 experience we had, and we've been ready for over a year. For instance, we are good at housekeeping and managing a household for forty women and children in a 28,00 sq. ft. building, and an old building at that. We're also good at encouraging groups like yours and other local groups to help us. We are asking people more and more to help with dinner, and after school snacks. I find if we are very clear in what we need, people are very clear in what they are going to get. We also continue to fundraise in any way we can, and we have not replaced two staff members.

We had some good news. We found out in Springfield last week that there is a good possibility that there will be additional Federal money. The allotments have been approved, we don't know how long it will take to get here, but we're being encouraged to write grants for several thousand dollars which will increase our legal advocacy, counseling and children's services. We had a meeting this morning to see what we need to do and what our hope is for the future. I believe we have been very fortunate, due to some legislation passed; money for domestic violence services has been flowing. It's not flowing well, but it's getting to us eventually. That's been very helpful. The federal money has been coming as well. We have not received money for our homeless services, and we have not received money for our sexual assault services. We believe that we can hold out. The problem that we have is when say they can cut a program. I'm a little envious of that. We don't know what's going to be next on the phone or coming through the door. We can't answer that person with "we don't do that anymore." It's unusual. We're like the emergency room at a hospital; we have to be prepared. We can cutback, have people wait longer, but it's very difficult for us to say we don't do sexual assault services anymore when we're called to meet someone at the hospital who has been assaulted. We have not only our own commitment, but we have the obvious, when you're in emergency service you have to be ready to respond. That's our dilemma.

Barb: I don't remember the exact article, but there was an article in the Daily Herald that featured a particular woman who had gone through your program. It was fantastic.

Gretchen Vapnar: I've been there forty years. I will say that we and some of the agencies that have come here tonight are unusually challenged by the fact that we don't have the services necessary for the people that are staying with us. When we are living with people who cannot get a psychiatric evaluation or their medication the risk is great. We're not able to diagnose in that way, but we are good observers and we have to be careful.

Mary: Did you hear the presentation by the Police Chief? They are looking to have a part-time police social worker here in town.

Gretchen Vapnar: That would be wonderful. We have a social work department in Elgin, and in the Carpentersville area as well. We work very close with them, particularly with domestic violence and sexual assault cases, youth as well. Our kids need a lot and we try to get them connected. It's nice for them to have law enforcement role models. .

Barb: That may be one more area where you will want to connect with the Chief.

Gretchen Vapnar: We're already in the Police Department. That's where we handle our counseling appointments. They know us pretty well.

15th presentation – Eric Johnson, Easter Seals DuPage/Fox Valley

Barb: What particular in your application is it that will benefit St. Charles residents with the 708 funding for this coming year?

Eric Johnson: Easter Seals of DuPage and Fox Valley is one of the leading providers of pediatric rehabilitative therapy and services in the Midwest. We bring to the St. Charles community a two-prong approach to benefit children and families. Two-prong as we have an expertise of therapy and services that is unparalleled in the region. We have an amazing 63 therapists and 20 para-therapists between the 3 sites that provide services. The wonderful thing about that is its interactive mentor modeled. While one therapist may be solely based out of our Villa Park site they provide support and a team approach to all therapists. Actually, when you get one therapist you're almost getting 63, supported by a philosophy of continuous quality programs which is led by our therapy team. We are so fortunate, as you are probably all aware, we are not competitive at a pay rate as a public institution, hospital or school would be. The average tenure among our therapy team is over 19 years. One of the reasons they are so passionate about who they are, and what they do for the children we serve, is that our team is constantly working on how to bring better, higher quality services to meet the evolving needs of the kids we serve. Between the therapy expertise and the Breath services we offer; many of our competitors offer simply pediatric therapy, which is highly needed, we compliment that with clinics as well as additional services, including family support. It really offers those we serve a breath of services that address their comprehensive needs.

Barb: How are you preparing for future State cutbacks? Please tell us concisely what your future looks like for the next year as the stalemate continues, and how these agencies issues are impacting your agency?

Eric Johnson: We are in a somewhat unique and fortunate place in that we are not highly dependent on public funding for the services we provide. That's not to say it's not part of our financial model. I listen to some of our colleague organizations and I'm very empathetic and I feel fortunate that our model also includes a growing degree of private fundraising income, as well as insurance reimbursement that pays for pediatric therapists. We have a really balanced portfolio. Our Board is very strategic, and our current strategic plan has a business focus to continue to expand that financial foundation so that we're never solely dependent on any of those funding areas. Within that balance is how we grow our program model so that the organization continues to grow and evolve to compliment that lack of dependency. What program areas do we need to look at so we continue to be a vital organization, but also have a balanced income portfolio. The other 2 areas we're looking at are: 1. how do we collaborate effectively throughout the organization with pediatric rehabilitative therapy as well as insurance reimbursement. They are two paradigms that are shifting quickly, partially due to the Affordable Care Act, but not solely. The medical world, where a large share of the referrals for service come to Easter Seals, is rapidly changing. The experts we've talked to over the last 24-months have also said that in the very near foreseeable future, there will be 3 or 4 hospital systems in the greater Chicagoland area, if not Illinois. We recognize early and we're still trying to build the system of how do we work complementary with those hospitals so they don't become our competitor, but our referral base. You may be aware that we have a new but growing relationship with the University of Chicago Hospital System. We launched a Medical Diagnostic Clinic in March that brings a medical diagnosis model too hard to diagnose children birth to age 3. Over time it will grow to beyond the 3rd birthday, but that's where we are currently. Within 2 months that was on an 8-month wait list. We've quadrupled the number of appointments we have available through that clinic.

Mary: Where is that clinic located?

Eric Johnson: Currently, it's in our Villa Park location. The next two steps would be: the University of Chicago is interested in growing the partnership to include additional areas outside of just medical diagnostic. We're talking about a genetics clinic and neuro psych clinic. In that planning process the question is, how do we bring that our other locations? That would probably be beyond the next two steps, but it's under consideration. The University of Chicago is also recognizing the change in the landscape of the hospital system. They are trying to grow their presence outside of the Hyde Park and Chicago community into the greater west suburban area. We feel it's really a mutually beneficial partnership. It's a concise example of how we're really trying to work with hospital systems.

Carolyn: University of Chicago is referring to you the 0 - 3 and you're doing the therapy in the Villa Park office?

Eric Johnson: No, University of Chicago has a lead developmental pediatrician who leads a multi-disciplinary clinic. Children, especially in early intervention, are diagnosed typically for therapy. That doesn't mean they have a diagnosis. It means there is an issue that their pediatrician has prescribed therapy to address that issue.

Carolyn: You are one of the providers for the EI referrals.

Eric Johnson: We can be a provider, but the point of the clinic is to give a medical diagnosis when they're not responding at all in therapy, and a comprehensive multi-disciplinary plan that would address the medical diagnosis of that child. We don't require they participate in our EI Therapy just as long as they have had therapy and are not responding. Those are the two criteria currently.

There was a third point as to how we're addressing the stalemate in Illinois. We are in an interesting position with early intervention services. Currently, we are very lucky that those have not been cut, and because of the federal legislation they continue to be paid for at the current rate. April is going to be a telling point because the State budget is going to run out of money very soon, and we don't know what the next step is. Again, our Board, and our leadership team are looking at how to insulate ourselves, so those who are currently within that system are not at risk. We're really building different sources of private funding, and changing our financial model while we're in the quiet phase. I feel comfortable sharing with you that we are in a small campaign to fully own our building. We leased half of it and own the other half. We are successfully 55% through the campaign which allows us to pay for that half. Now we're raising the maintenance portion of that campaign. That's the third way we are really addressing and safeguarding ourselves for the future.

16th presentation – Melissa Byrne, Greater Fox River Valley Operation Snowball

Barb: Are you one of the teachers with Snowball?

Tracey Stewart: I am a teacher at St. Charles East High School and my husband has been an adult volunteer for 10 years. Through family we've been involved for a number of years.

Barb: I don't know how much Melissa shared with you?

Tracey Stewart: She said you've given her the opportunity to answer a number of questions. I have the information. If there are any further questions or if there is anything you would like answered I am certainly able to do that.

Barb: We did talk about Melissa's answers beforehand.

Tracey Stewart: I would like to speak to the question you've asked people before me about how it would benefit St. Charles. As a teacher in the high schools I would like to address the prevention that Operation Snowball focuses on. They focus primarily on suicide, drug and alcohol prevention. I'm sure everyone is aware of the epidemic of drug use that's becoming an

issue with high school students. We see that as a real opportunity to prevent the use of drugs and alcohol, and give students an opportunity to make sound choices and be leaders. As the name implies, the snowball effect, if I make a good decision and encourage you to do the same that has a positive effect, which is a snowball, if you will. The funding we are requesting is to allow students to attend events that they would not otherwise be able to afford. Those would be the students most at risk or who would most benefit from being able to attend events. That's the biggest factor we would like to be of consideration.

Barb: Can you elaborate a little bit on how you get the kids to join your club? I did look on the website and at East it was listed as a club organization, but I couldn't find it on North's website.

Tracey Stewart: It is dependent on the adult volunteers. It's really important, that snowball effect, that the adult volunteers have the ability to connect with the students. That's done through the weekly meetings at the high school level, and then again at the Kane County ROE, which is where they all are now. The way the kids are retained is through those personal connections. The ability to open up to the kids, show vulnerability and share their stories. A lot of the adult volunteers were members of Snowball in their high school years. It's been around for many, many years. Having the ability to share their stories and express the need for the club, and the positive impact it's had on their lives is really what keeps the kids coming back. A way the students become familiar with the program is simply through the connection the adults make with them.

Mary: Who is the targeted student in this program? Is it a student who's at risk, or is one who is considered to go out and set an example?

Tracey Stewart: Both. For every event they have an adult volunteer teamed with a teen director. Those two are given a small group. The participants can be role models, but can also be students identified as at risk. They are invited and encouraged to go the weekend events to see the positivity, and what the potential positive outcome is of making good decisions. There are a lot of students who have been through rehab who go to Snowball and share that experience. That they did make positive decisions and this is where they are now. Really, the target audience is every student, because as their mission says, they believe that everybody has the ability to make a positive decision, it's just having somebody there to help them along the way.

Barb: Do you see a mix of students?

Tracey Stewart: Absolutely. It's not one click. It's not one group of students. It's a safe place for every student to be.

Barb: I did impress to Melissa that we do need real financial statements. Make sure of that when you come back next year. If you need help I'm sure one of the accounting teachers or the Community Foundation could help you. We need specifics. We need it broken down per person. We're asking for profit and loss, revenue and expenses.

Tracey Stewart: Okay. They do get other grant funds. I know that was indicated in the budget statement, but it was very general.

Barb: If you get funding from us or any other agency, we like to see it broken out. When we went through last year's application process, we told each agency specifically we need it to say St. Charles 708 Mental Health Board, because we need to answer to our tax payers as to where they are getting the funding.

Carolyn: Can you break down an example of an event?

Tracey Stewart: Friday morning they all meet at a central location, and this is a mix of schools all around the Fox Valley Region. Right now it's about thirty-five students from East and North, it's not an organized club at North but we do have some students. Sixteen from East are going to the event next week. On the first day they have a kick-off ceremony and talk about what the expectations of the event are. When they get there they have an opening session and often invite speakers, maybe past participants or drug prevention speakers. They try and not have repetitive speakers because a lot of students go on multiple events. They break out into small groups and that's where the adult volunteer and teen director will do small group activities or might talk about peer pressures, some positive ways to work through them, some things outside of school that might be pressuring them. They always have a social worker on staff so if anything does come up they have someone there immediately to address any issues. They always follow-up with the social worker at the school so that they are made aware that the student may be one to watch. They would then come back to large group and have an activity, do affirmations, and then have meals. They are encouraged to break out of their groups for meals. Saturday, speaker, small group activity, and Sunday the parents are invited to come out for the final session with the keynote speaker. The parents have an opportunity to meet with the adult volunteers, teen directors and they have a closing session, a meal, then they go home.

Barb: Where is this typically held?

Tracey Stewart: Lorado Taft.

Carolyn: Just to reiterate your request of funds. I couldn't quite figure it out. It says \$10,000 and its \$150 per kid, 20 kids, and the math wasn't equating.

Michael: Because it's \$300 per kid to go.

Tracey Stewart: It's \$150 per event, \$300 for the year.

Michael: That's what this money would be used for, specifically just that?

Tracey Stewart: Yes, and they have to order t-shirts for the event and supplies for training. I'm sure that was all encompassing. Sending students as well as providing materials.

Barb: Give me an idea of who else you approach for funding.

Tracey Stewart: The Geneva Board has also been approached, independent funding, the Sheriff's Office, independent benefactors and fundraising.

Carla: If you take sixteen students multiplied by 300, that's \$4,800, just to pay for these sixteen students if they went to both events.

Tracey Stewart: Yes, that's just this event. I know the last event they had twenty-six. It's not necessarily the same group. It's open to every student every time. This event it's sixteen, last event I think it was in the twenties. I'm not sure if that was estimation.

Carolyn: One last clarifying point for you for next year; you said there was thirty-five people from St. Charles city limits, that's east and north, are they city limit teens? Was that the total number, do you know the differentiation?

Tracey Stewart: I don't know the differentiation.

Carolyn: That would be helpful for us. They have to be within city limits.

Barb: Because it's the City of St. Charles taxpayers that this funding comes from so therefore it has to be specific.

Discussion was had regarding the schedule and to include a 5 – 10 minute break next year.

Funding

Barb: How do we want to proceed? Last week we talked about starting everyone at last year's levels and then figuring out the few extra dollars we have.

Motion by Hughes, seconded by Waibel to discuss delegating same funds as last year as a starting point.

Voice Vote: Ayes: Unanimous; Nays: None. Chrmn. Gacic did not vote as Chair. **Motion Carried.**

Michael: Is that where we are? The bottom number, \$520,000.

Carolyn: Did you find out about the reserves. I forgot what you said.

Barb: If we dip into the reserves, it is speculative, we don't know if they will be there and we could end up running a negative for next year.

Mary: What number are we using, \$520,000?

Carolyn: \$520,000 is without the reserves, right?

Barb: Right.

Mary: How much is in the reserves?

Barb: \$8,000. But Chris said they are seeing a higher amount of people winning their tax appeals. This is why it's such a speculative number. That's why it can't be guaranteed.

Carolyn: If we don't utilize it will it roll over for next year?

Barb: Yes.

Carolyn: We could leave it and see what's left.

Ron W.: The recommendation is not to touch it.

Barb: This is my third year now and I would say I would be more comfortable not touching it. If we took \$500-\$700 of it, which would bring us up to \$521,000, but I think that would be as far as I would be comfortable based on the email.

Mary: Under normal circumstances I would not want to keep \$8,000. I would want to use at least half of it, but this seems to be a little risky.

Barb: Only because Chris said more and more people are appealing their taxes and winning.

Michael: Do we still need to fill out the two that are missing. Is it Fox River Valley Operation Snowball and the St. Charles PD that are missing?

Barb: Yes.

Ron S.: We should talk about those two first.

Ron W.: I would like to see giving the police the full \$15,000.

Round table discussion on how to proceed with the meeting and voting structure.

Barb: We have \$19,000 to spend. I just added \$15,000 to the police department.

Mary: We put in the \$15,000 for the police department and that leaves us \$3,970.

Michael: The only open box up there is Operation Snowball. Do we have to give them anything tonight based on they didn't have their budget?

Ron S.: I would have trouble giving them money. They didn't have a complete packet. If we start that trend we're going down the wrong path. Not that I don't want to give them money, but it's not complete.

Carolyn: Wredling requested \$3,200 and we're giving them \$3,000?

Barb: We're only funding what they got last year. The recap was \$3,000; the actual application was \$3,200. Up until last year we didn't have the recap sheet.

Carolyn: The concern with Snowball is what I asked her about. There are thirty-five people, but we still don't know how many of those people are St. Charles residents. There are too many intangibles. I like the program, it's a good program. It's the same problem that the Youth Commission had; there are too many intangibles for us to make a decision.

Michael: I'm with Ron S., it's an incomplete application. They have ideas on how to get a completed one for next year.

Ron S.: Why did we not give them money last year?

Barb: They didn't come last year. They came 2 years ago.

Ron S.: They requested \$5,000. Why didn't we give it to them?

Carolyn: We were on a major decrease that year. We gave a lot of people zero.

Barb: We had an over \$60,000 reduction in what we had to give that year.

Barb: We are going to put zero for Operation Snowball, everyone agrees.

Carolyn: It's hard to make decisions when you don't know who's getting the services.

Ron S.: We have a responsibility to the taxpayers. They want to make sure the money is in St. Charles. To me it's not a minor thing. They can't tell us if the money is going to somebody in West Chicago.

Ron W.: There is an alternative. I was on the Board from 1996 – 2007 and one of the situations we dealt with was a mid-year funding. If we had reserve funds available in October/November we could have a meeting and allocate \$500 or \$1000 out of reserves.

Michael: You're talking for Snowball.

Carolyn: We could ask them to get more documentation in.

Barb: By that time Chris would know real numbers and we would know if we have a reserve at that point.

Ron S.: But do you want to start that as a normal thing?

Ron W.: This is an unusual circumstance.

Ron S.: I know. But somebody could say we did it for them, why can't you do it for us. I just want to be careful.

Barb: We did it a few years ago on an executive decision because Renz needed money for a grant they needed. It was huge money, but they could only do it if they tapped into St. Charles money. It's not a regular thing.

Ron S.: Just as long as we're aware of the potential.

Tina: I have to say in the fourteen years I've been doing this, this will be our third time, if we do it. We've actually had a couple agencies come mid-term to ask about it, and we just say to come forward at the annual meeting. We have a choice of making that decision.

Ron S.: So, we are going to give them a second chance to fill out the application.

Mary: Ron may be right. We can wait until next year. We've given them some guidelines.

Ron W.: They wouldn't see the funding until November, 2017.

Barb: That's the thing. It would be a year from now.

Ron S.: In the Youth Commission when you denied them. Did you tell them why?

Carolyn: Yes.

Ron S.: That's what's bothering me. They didn't learn from that to fill out this application.

Carolyn: Yes.

Ron S.: They had a second chance.

Carolyn: I'm not sure it was the same person. I'm presuming. They were given direction as well.

Mary: If we don't fund them anything. We still have \$4,000, which we don't have to spend. I would prefer to spend it.

Carolyn: Should I go into my annual Wredling speech.

Mary: I'd vote for them.

Carla: I would not. I feel a similar way with Operation Snowball and Wredling. I'm not sure what we're funding. When I know we have social service agencies who are struggling to meet the needs of people with really serious issues; I feel like it's not specific enough. Which kids are really coming, are we getting the ones who really need help. I feel like the agencies that are

really identifying people who really need that help; I feel that the helping network needs to be supported.

Barb: They are asking for \$3,200, maybe we could give them \$2,600 of the \$3,200. \$600 of the \$1,200 they are asking for.

Michael: I get confused when I read their applications. She got up and said they are using their money for a book club. In their application they aren't itemizing things they are using the money for. It's very general.

Mary: Didn't they have broken down costs?

Michael: It's vague. I'm all for Wredling. I'm all for Snowball. It's what I do for a living, prevention. There were some that listed where they were spending the money, and were itemized, for others it's general. I hear her talk about the book club. What's the amount in that? That would be very helpful.

Carolyn: She said it was \$150.

Michael: For Snowball. I'm talking Wredling.

Mary: I was chilled when Gretchen was talking about the numbers in the crisis center. I think we could make a case for so many of these agencies.

Michael: We have few thousand dollars left. Do we just leave it?

Mary: I would hate to do that. As long as we don't dip into the reserves; I don't think we should sit on any of this money.

Barb: Community Crisis asked for \$15,000 they got \$13,000 last year.

Mary: Another way to look at it is, agencies that are really hurting because of the State situation.

Barb: They were able to cut their sexual assault program from \$182 to \$112 last year. They dropped \$70 an hour.

Carla: Didn't she say that they didn't get the grants for sexual assault and they were doing that anyway.

Michael: \$4,000, what can we do? Ron S., said to give \$2,000 to the Crisis Center?

Ron W.: The first four agencies, TriCity Family Services, AID, Ecker, Renz they provide the bulk of the services for the clients of St. Charles. If we give them \$500 each, that's \$2,000.

Mary: What about \$2,000 each to the agencies that provide the most basic service and are in the greatest need, The Crisis Center and Lazarus House? These are providing homes, counseling, meals, etc.

Ron S.: Lazarus house is very important. They are in town, they serve St. Charles. That's their guideline, to serve St. Charles residents.

Mary: What was your suggestion Ron?

Ron W.: To the top 4, \$500 each, add Lazarus House with another \$500, that's \$2,500 and if you want to revisit Wredling or the Community Crisis Center, \$500. That's \$3,000.

Michael: Here is my issue with giving more to TriCity Family Services. They broke down the use of their money as \$150,000 for counseling, \$40,000 for emotional wellness, and I have a hard time that they are spending \$10,000 of our money to do presentations and workshops. I couldn't believe that they budget that much for staff to go out and do presentations on the topics that they've listed.

Ron S.: If they are using staff, it's staff time, which means they are getting paid regardless.

Michael: Exactly.

Carla: If you have counselors who are going out to do training, on the days that they are going out to train they are not seeing clients. They are not generating revenue. They are not technically being paid. Those clients are how they are paid. On days they go out to train they have to look for other revenues to be able to pay them on those days. That's how I interpret it.

Mary: I think that's true.

Michael: Instead of doing the \$500. I'd like to do Lazarus House because she was the first one that came in and instead of talking about programs she talked about the relationship.

Carla: I would say that Liz is totally committed to collaboration with others as well.

Barb: I think if you look at any of the first 5 plus Community Crisis. They all collaborate on a continuing basis.

Barb: Any that are a class A, I added \$500.00.

Ron W.: Fox Valley Special Recreation. I looked at their budget they got \$364,000 from the City of St. Charles Park District last year. I can't see giving them any more money.

Carolyn: They have a lot of money.

Barb: Do you want me to take it off?

Ron W.: Yes, please.

Ron S.: I have one question about Ecker Center. Something she mentioned and was in her report. They are serving 8% less St. Charles Residents due to budget cuts, yet we're giving them more money.

Carolyn: I agree.

Barb: Yes, but they serve the most serious of the serious that we deal with. They are the ones that have the most psychiatric patients. If anybody needs money it's people who are on the far end of the spectrum.

Ron S.: You're correct, except that it's St. Charles money.

Ron W.: I think longitudinally that wouldn't hold up. I think that 8% is just a one-time phenomenon; I don't think it will occur next year.

Carolyn: AID is the only agency that has no contingency plan for their no state funding. That is incredibly concerning that they are just waiting on us to help them out. I'm not saying to decrease or increase them. I just wanted to bring up that point.

Ron W.: ElderDay Center. They serve 7 St. Charles residents and got \$14,000 last year. I don't see giving them another \$500.

Michael: What we have to focus on is what they say they are using the money towards. If they are using it for counseling, then it has to go to counseling, not to something else.

Barb: When they say they are doing counseling, they have a certified Art Director and a certified Music Therapist that comes in, they are doing things.

Michael: Are they saying they are using the money for an Art Director?

Barb: To do the therapy. Every half hour they change therapy, their entire day program is continuous therapy to keep them engaged.

Michael: I want to make sure that whatever we are giving them money for they are using specifically for that purpose.

Carla: I feel the same way about Easter Seals. Everybody knows that Easter Seals is unbelievable in terms of the wide array of therapy, but the only thing that interested me about their application is family therapy. Because families with kids who have significant disabilities, they divorce, they can't hold that family together. That's the only thing that interested me having to do with mental health. I feel the same way. People do lots of wonderful things, but what is the money being targeted for as far as mental health assistance?

Barb: That's what their continuous program is on an hourly/half hourly basis, mental health. They are trying to keep senior citizens stimulated. I went to visit during Halloween. Staff was all dressed up. They were talking about the Wizard of Oz and asking questions designed to stimulate these 70 and 80 year old people. That's the good of the program; it's totally mental health. It's to keep people in their homes and out of the nursing homes.

Barb: Take \$500 from TriCity and give it to the Community Crisis Center and take \$500 from Ecker and give it to Lazarus House.

Michael: If we are all good with this. Thank you to Barb for an excellent job facilitating, keeping us on track, professionalism, leadership, you did an outstanding job.

Motion by Cumblad, seconded by Wedell to approve final allocation of funds from the St. Charles 708 Mental Health Board.

Roll Call Vote: Ayes: Hughes, Cumblad, Weddell

Nay: 0 Absent: 0 Abstain: Silkaitis

Motion Carried

Motion by Hughes, seconded by Wedell, to adjourn meeting

Voice Vote: Ayes: Unanimous; Nays: None. Chrmn. Gacic did not vote as Chair.

Motion Carried.