

**ST. CHARLES 708 COMMUNITY MENTAL HEALTH BOARD THURSDAY APRIL 14, 2022 – 5:30 PM
MUNICIPAL BUILDING, COUNCIL CHAMBERS
2 E. MAIN STREET, ST. CHARLES, IL**

Meeting Minutes

1. Call to Order

Chair Travilla called the meeting to order at 5:30 PM

2. Roll Call

Present: Poremba, Silkaitis, Travilla, Waibel, Weddell

Absent: Bryant

3. Approval of Minutes March 24, 2022, Chair Report

Vice Chair Waibel asked if there were any amendments for the March 24th, 2022, meeting minutes.

Motion to approve by Silkaitis second by Poremba

Request for an amendment recommendation by Vice Chair Waibel to remove the phrase stating discussing her term expiration at the end of the year under item 5.

Chair Waibel made a motion to amend the minutes and asked for a second.

Motion to hold approval for meeting minutes until next meeting, pending further discussion, by Silkaitis second by Poremba.

Voice Vote Aye: 4 No: 1

Motion Carries

4. Chair Report

Chair Travilla discussed emails with the city, including Mayor Vitek, discussing that there are three positions to fill on the 708 Mental Health Board. Board member Silkaitis will be setting up a meeting with Mayor Vitek. Chair Travilla reminded the board that there are ten-minute time limits to the presentations this evening and further discussion will occur at the meeting in two weeks.

5. Organization Presentations

Chair Travilla welcomed the speakers.

5:40 The Joshua Tree Community – Amy Singer

The Joshua Tree Community is a program for mildly mentally disabled adults over the age of 22. They are currently operating out of space in the Kane County Cougars facility. They do pay rent in this space currently which is something they did not have while operating out of St. Mark's Church. Their current program structure operates similar to a school curriculum. The ask for this grant from the St. Charles 708 Board is to support purchase of materials.

CW: Can you clarify again where you are now?

AS: We're still there. They told us we could stay. It's just been an amazing opportunity for us. We're doing a special jersey with them in August. They're really great people, and it's a great situation for us.

CW: Are there any special facilities that you have there specifically for your demographic? You have an age group, of adults with conditions, or special needs; do you have anything, do they make accommodations, or is there any special facilities?

AS: We don't need a special facility because we're not; everyone is capable of going to the bathroom, nobody is in a wheelchair. In my group, I have one person with a walker, but he can take an elevator up and down and we have an escape plan if there was a tornado or that type of thing, for the stairs.

CW: In your last couple of minutes what goes on in the course of an afternoon?

AS: Sure, so, really, I teach all day. So, this morning we did painting, with the participants and volunteers and then this afternoon we actually went to Pinstripes to bowl. Every day is different, we volunteer at the Salvation Army once a month. It just started again last month. If we don't go out into the community; what have we done, we've done bocce ball I just rejoined the Morton Arboretum. There's a lot of teaching going on too right now. We're slowly going into the community but I'm not ready yet to leave the area, you know, we're still keeping a close eye on covid.

CW: Do you have a max age?

AS: We don't in fact one of my participants is 61. I have rules, they have to be independent in the bathroom, they have to want to be there, they have to participate in what we're doing, at least on some level and they have to be kind. Everybody says how wonderful and kind our group is, my volunteers love it.

CW: Do you have any certified training?

AS: I have a master's in special education and in curriculum and instruction. I'm a teacher. Once a teacher always a teacher. Anything else? Thank you so much for letting me present today. Do you guys want a brochure?

5:50 St. Charles Police Dept – DC Chuck Pierce

Board Member Alderman Silkaitis recused himself from this presentation.

Deputy Chief Chuck Pierce stated that the funds being sought are for their full-time social worker. The program started in May of 2020 marking this the start of their third year. From the first year to the second year 93 *more* people have been served through this program. 83 of those were St. Charles residents. The other, approximately 10 that were not are family members of, unfortunately, death related incidents. Access to the social worker program is offered to family members as part of this program. 387 residents of St. Charles were served this year through this program. Funding received from this grant will fully go to the salary of the social worker. Any other supplies used are provided by the police department.

BT: I have a question; your page 1 you gave us some higher-level numbers, I'm taking that's not the police department, that's this specific agency or person, correct? On the first page it says number of individuals served by the organization, you wrote approximately 500 and then on the right you wrote approximately 475 and deeper in the application I think you really detailed, you actually served 422, right?

CP: Yeah, so I think that what I'm doing with the 500 is I'm projecting. I believe that's what you're asking me so I'm projecting. With that data, of going up 100 people, and projecting, I would go up to 500.

BT: Ok

CW: In the application, there were actual numbers for '21 and then projections for for '22. I think we need to be, just as a team next year, be more clear as to which number we want up front.

BT: Yes, I thought that's what you meant, and I just want to make sure that's what you meant.

CW: I'm just saying that I think we need this for next year.

CP: So, number 7, describe the projected numbers of residents of St. Charles

KP: When it comes to question number 6, we'd love to see that data in terms of the police department, as opposed to AID.

CP: Noted

KP: But again, I love your data, and really the specific stories that you can speak to. Those are very special. I appreciate you sharing those.

CW: I know this is the third year of full-time.

CP: We're starting the third year.

CW: The third year of full-time and potentially the sixth year, that you've had these services in St. Charles?

CP: Seventh, I believe.

CW: Seventh year, ok and so, being here for all those years of the program, I know that it has brought added value to the city and so I really appreciate that the police department brought it to this commission. It has certainly been a good thing for the city and for what we can do for our citizens.

RW: In providing those social workers, they are provided by AID? Then they will send someone out then?

CP: Yes. They have a 24-hour crisis line. They have a 45 minute, usually less, response time.

6:00 Living Well – Angela McCrum

Ms. McCrum discussed Living Well is a Cancer Support center based in Geneva, providing psycho-social support to cancer patients and their families. While they fall under Northwestern's umbrella, they are 100% dependent on donated dollars, to provide services. Support today, is sought for social workers and counselors. Social workers are at the cancer centers working directly with cancer patients, removing any barriers to care. This can be in the form of a ride, sometimes some things going on at home, food scarcity was especially challenging during the pandemic. They provide crisis management, coping with their diagnosis, for patients as well as any of the caregivers, support groups, as well as family or individual counseling. As of May 2nd, they will be

re-opening their center for in person counselling as well as expanding into a center in Warrentville.

CW: How were your clients/patients doing during Covid? This is a very difficult group to serve when you're not in person. So many of your services in particular, are more than just counseling, they're to help with wellness and to feel better. How did that go during covid while they weren't able to be in person?

AM: Yes, it definitely has been challenging just from the aspect that, none of us were used to using Zoom or Microsoft Teams or whatever format. It makes you think about, it all depends on their age. Some of them don't have the technology. Sometimes people don't have a smartphone or an internet connection at home. I think that's why we're excited that our doors will be able to be open. I will say that all of our programming including the consultation, our fitness and yoga programs, we converted it all into virtual. We've become pros at helping & coaching somebody to get onto Microsoft Teams. It was a lot of patience and encouragement too, because it can be very intimidating to try. Especially if your first time is not successful, then to reach out for help. Our intent was really to empower them to join from where they are. But definitely one thing of benefit for us is, we were able to have a larger geographical reach, because we were doing things virtually. The other thing is when patients aren't feeling 100% or don't have a ride, or the weather is bad, the virtual aspect is beautiful. As we re-open we are going to keep some of our programs virtual. For example, that includes our counseling, our 1:1 or family counseling, the client's going to have the option if they want to come in and see the counselor in person or if they want to do it via telehealth. I think that's one thing we've realized, we thought about it in the past, but I didn't think it was going to be doable for us, but Covid for us, that's been a little bit of a silver lining.

CW: Did you mention all about your numbers from a prior year and if they went up or down?

AM: Our social work numbers, I think I included anticipated numbers, overall numbers were not apples to apples.

CW: I was just thinking, pre-covid to during covid.

AM: Our overall numbers have definitely decreased. I wouldn't say significantly, I'd probably say about 15-20% overall. What we have seen, it's been interesting that what we have seen has been a slight decrease, not so much with the social workers, it's with the medical setting needs to happen, those need to occur. What we've seen is with the counselors overall is just a slight decrease. Whether people are uncomfortable, we have whether they'd just rather meet in person, fortunately or unfortunately, we do have patients that are excited to come in person, to come do in person counseling. While the

number of visits decreased, our utilization and hours did not decrease at the same rate. What that meant to me, when I look at the numbers, is that although we had a slight decrease, so like if I'm coming for counseling, I'm coming for multiple sessions. That signifies to me that people are having troubles coping, even more so, with a cancer diagnosis because of what's going on with the pandemic.

CW: I was just curious if the virtual aspect could have potentially increased the usage.

AM: What we did find out is we did have a decreased cancellation rate because of virtual. That's beautiful to me because, it's structure for the counselor. Having idle time, it's not how they want to spend their day.

BT: With your pivot, I totally appreciate where you're at, how did you calculate your projected people in St. Charles you're going to serve?

AM: Just based on what we've seen in the past two years. They're conservative.

BT: Ok

RW: Do you see children and all age ranges for services?

AM: We were doing all age ranges; our counseling has always continued in that aspect. So, we have kids that will be coming onto a phone call to do counseling, but our programs that we have cite things about our dieticians, or we have an art counselor program, that really helped to talk about feelings. They've all been on hold. We did try to do some things via Teams, I think it's because the kids were doing so much Zoom and everything, we just didn't have great attendance. So that's one aspect that we're looking forward to, we're coming back on site with adults first, just because we don't know what's happening with the variants and specifically the immunocompromised population, and hopefully maybe the fall, if things continue the way they are today, hopefully we'll be able to explore bringing kids back on site.

I just want to thank you for your support. I don't know if you're familiar with Nancy Nieto, she retired. I've been fortunate to step into her role. Thank you for the support you've continued to provide us for well over 14 years.

6:10 AID – Lore Baker

Ms. Baker thanked the board for their support. In FY '21 they served approximately 6400 people total across their service area. AID used those funds to support non-billable services such as nursing and the dietician. They served 30 St. Charles residents with

comprehensive nursing support. Nutrition education, skill-building ongoing support for people with disabilities was 15 St. Charles residents. AID is back to request the same type of support for their dietician and registered nurse. They are projecting that 60 St. Charles residents will seek support for dietary education which shows to improve the lifespan of people with developmental disabilities, who die approximately 25 years earlier than other people.

BT: One nuance, question for me, we worked many hours on this application and in trying to get it to you guys, so it's as easy as possible; next year, instead of a photocopy we ask that you utilize the technology of the app. Use the format. It seems like you guys did it, photocopied it, turned it into a PDF and sent it in. From a quality standpoint, it's just not ideal.

LB: So, we didn't use the application?

BT: I think you did but it appears based on the visual quality of the application, someone maybe photocopied it and probably scanned it into a PDF. I know it's picky but, we've made it editable PDF. From a preference standpoint, not to be picky.

LB: That makes sense. I'm not the one who filled it out so I'm not sure.

BT: We worked really hard to make it so it would serve you guys, we've, I'd like to think made it easier, so that's all just that one little comment there.

LB: Okay, I'll let our grant writer know.

BT: Thanks

RS: It says you served 675 St. Charles residents, but yet I'm looking at the totals, on line 7 for each one you show 60 in one and then you show 30 in another so that's 90, but you're showing 675?

LB: I think that 675 is for all our programs and not all of that would be billed to you right, so we can bill Medicaid, and so what we ask from you guys and those specific smaller numbers are an amount that your service dollars pay for that are St. Charles residents and are non-billable. We can't get that money any other way, and so that money goes for support and pay for that, if that makes any sense?

CW: I understand the question. I think in that box, on number 7 we're wanting to know, it should be the same as the number of St. Charles residents who are served.

RS: It should be consistent with all the other applications. Those numbers should equal the number on the front. I understand what you're talking about, I get it now.

LB: That makes sense, and so I would respectfully ask that we think about holding a session for the people that actually write these because I don't write them; but I do try to go back and tell them the things that you say, but I don't always translate in the right way for them, so it might be useful next year to hold another reminder session about how to, about what goes there.

BT: I'll jump in here. We used to do that. It was called a Bidder's Meeting. We saw that there was a decline in population. The application was kind of hard back then. So, we worked really hard to make the application better. I'll just be really candid, if they just read the application, we've really gone through and said, 'if I don't know what I'm doing and I read the application, I should be able to effectively answer it.'

LB: I mean, my grant writer has been doing this application, she's been doing this for us for 16 years, so I can't think that she doesn't have the capacity to do it, so there still has to be some misunderstanding. I'm not arguing, I'm just trying to...

BT: We all want the same result. We're all on the same team, right?

CW: I think next years' board could certainly take it under advisement. We've held a Bidders Meeting every year except for this fiscal year, and then Covid last year. So, they could take it under advisement and maybe try to hold it next year.

LB: Yeah, it's just I call our grant writer as soon as I leave here, and I try to tell her everything as soon as I leave to try to be sure that we improve and do the things that you've asked. So, I have my notes from last year that I was looking at, and I was like oh, we did that better. We better made the ties between the need for nutrition, and the different things that you guys recommended last year. I certainly appreciate the recommendations and we always try to do them; but sometimes I don't think I communicate the exact intent of what you say, just because we all have our different languages about things.

CW: Just to clarify a few points, the priority of the nutrition, did you request that last year as well right?

LB: Yes.

CW: In here you talk about where you've gotten other funding and it says that in your other funding, obviously from some of the other 708 boards and the Inc Board and other community grants, I didn't see here, any mention of any federal funding through the county; have you received that yet?

LB: We have not received that yet.

CW: Can you share with us a little bit about what's happening with that?

LB: and the other funds that we have been awarded along with the other five community mental health centers in Kane County, is only for sign on bonuses and retention payment for staff in Kane County. That is the only thing that we can use that for. What we are asking you for is not related to that. So, they split up that \$4 million dollar pot into 2 pots. \$2 million they split evenly between the six major community mental health centers in the area. They split it between us to do those sign on buckets of payments, for staff that we employ in Kane County, that work with clients on accessing and receiving behavioral health services. The other \$2 million they put out for other mental health providers, for homeless shelters and for food pantries. They could ask for and had a variety of things that they could use their funds for; there was I think about six or eight categories that we did not have the opportunity to ask for. So, there is no overlap for us, in terms of what we're asking for here. We have a signed contract from the chairperson who wrote it, but we don't have any money yet and they haven't even given us a form or information on how we apply to receive that money.

CW: I was wondering if there was any overlap or how that was going to...

LB: There isn't. There is not. I would assume that anyone, obviously it's a good question to ask but I would assume that anyone who is going to apply for any kind of funding here isn't going to try to apply for any double dipping kind of funds.

CW: You're the first one to come up, so you're the first one to get that question. I appreciate you clarifying it very much.

LB: That's fine, actually it's a good question because that money is out there, and it's supposed to go to help people access mental health care. It technically is staff has to work for it.

CW: I appreciate you clarifying it very much, so our group is aware of that and what's going on we don't always have our finger on the pulse of everything.

LB: I don't always understand what is happening either.

CW: So, can I just clarify, so the St. Charles number, is the St. Charles number 675? Or is it the 90?

LB: So, with the funds, it's that smaller number. It is the 90. The higher number is the number of St. Charles residents that we support that we don't use any of your funds for.

CW: Oh, but you do support 675 St. Charles residents?

LB: Yes

CW: Oh ok. That's okay. So that's the real number, and the funds support 90?

LB: Yes

CW: And all of them are St. Charles people?

LB: Yes

6:20 Suicide Prevention Services – Stephanie Weber

Ms. Weber discussed that SPS will be 25 years old next year and the St. Charles 708 Board has supported them from the beginning. Ms. Weber thanks the board for this support. Telehealth has turned out to be a gift. People seek services from this organization often times for feelings of depression not strictly suicide prevention. SPS has delivered presentations to the local schools, out in the community and at health fairs. They will be a participating agency with the National Suicide Prevention Hotline, which is going to 988 service, once that is up and running, slated for later this year. Suicide is up in the country, depression and anxiety is sky high in the kids currently.

CW: The 145 on the front, was that actual '21 or projected? I have 145 and 168. We do an aggregate number at the end, so we total that up, so I'm just trying to figure that out. Do you serve 145 or is it the total 168 that I ended up getting?

SW: I did look at the breakdown and I thought it was 168. Maybe it is 145, again I am not the good numbers person. When I look at this, I see what's 70 people here, 70 people there

CW: Alright, so I got 168, so should we count the 168 when we're doing an aggregate?

SW: I would say so. I'd appreciate that thank you.

CW: Ok, we do report back to the city, the City Council and we like to use as much as we can, accurate numbers.

SW: Like I said the higher the better so, thanks.

RW: The section 6 summary of the funds that were spent this year, that was a good job that was there.

SW: Thank you I will tell her. She will appreciate that. She still was at work when I came over here.

CW: It's just well written. I didn't have that many other notes. We thank you again, for all your hard work.

6:30 Elderday Center – Michael Cobb

Mr. Cobb discussed that Elderday is doing well. They are excited at how they were able to weather the storm of recent years with the help of boards like the 708 Mental Health Board in serving residents of St. Charles and a large part of Kane County. Currently they're serving about 25, residents which Mr. Cobb feels is scratching the surface of the need. They have a goal to serve between 30-35 this year. People are feeling better. People have that need; primary care givers need that support.

RW: Do you still have the nutritionist and the nurse on staff?

MC: We do. We have a nutritionist and a nurse. Of course, we have myself as the Executive Director and a business manager and two others. We want to make sure that the snacks that we provide are well balanced.

RW: So, you're specifically looking for funds for the social worker then?

MC: Primarily yes.

CW: So, you said you have about 25 total right now. This is going to be my thing all night, about what our actual numbers are; you said 8 currently from St. Charles but your projection is 10-12?

MC: Yes, that's correct. That's kind of up from last year, and since we did this in February, I can already see the uptick in calls.

CW: You guys were at 10-12 about 8 years ago when I started with the board here in St. Charles before you closed; I really give you kudos for the hard work you've put in. I know you're doing good work over there. Very impressive.

MC: Thank You

RS: When you do your profit & loss can you make it a little bigger?

MC: yes

KP: I'm understanding in question number 7 that it's your goal to grow in 2022. What do you think will be the best strategies to promote that growth? How will you reach out to people?

MC: Our staff, we're calling our wellbeing & engagement services, those are services that all the members can take advantage of, such as the support groups that are not just for our members but for the families as well. When you come to Elderday you're entitled to the other services that you might need, so we're working on some other funding sources so that we can reach more.

KP: Do you feel that the new members you've gained over the past year are word of mouth?

MC: To this day, word of mouth is probably the best. Local networking.

BT: You have kind of a funky QuickBooks image on here. It looks like maybe it was in landscape, and it went into portrait. What's the QuickBooks, what are we supposed to glean from that?

MC: I'm sorry?

BT: What are we supposed to get from the tips of it being QuickBooks? It's like cut off and I don't know what it represents.

MC: It's probably similar to what Ron shared over there. Probably.

BT: Your P&L I do agree, is very small, but that printed perfectly, so that's ok. On page 13, 14, 15, I just don't know what it is, that's all

CW: Yeah, I saw that. It's like a partial grant. I just wasn't sure if we were supposed to see some of this. I wasn't sure if it was accidentally included.

MC: I apologize for that.

CW: So, these pages were not to us?

BT: 13-15 omit.

MC: I'm not sure how that came out on there.

CW: Do you prepare these; do you author your own application?

MC: Correct

CW: Do you want to share with us any interesting story from Elderday? Anything obviously anonymous.

MC: Sure. We have, we serve members that are also part of a residential home in St. Charles. Those three have been coming together since I started in 2019. Even during the pandemic, they closed longer than anyone else, and it was kind of alarming to them when they got back to ours here for about 6 months, they were challenged, and how we're seeing them, one of the caregivers asked about that. They're doing a great job.

6:40 FVSRA – Alex Engelhardt

Ms. Engelhardt discussed a shift in philosophy to include the social inclusion side. Regular programming will continue but they are also shifting a focus to be inclusive. Regardless, if a child has an actual child in the program, they will provide structured support to all children and support the Park District Staff. Another new initiative is on a project called Sharing Space. This program seeks to make sure that fairs and festivals are able to offer an inclusive space

BT: These funds are to fund, to staff your program, correct?

AE: Most of it is staffing. Each campsite is fitted with their own inclusive recreation kit. Not a full sensory room but supports if it's needed such as a pop-up tent, for some of that private space, they will have kits at each campsite as well.

RW: So, the age range is 6-12 year old?

AE: Correct

RW: And then the population numbers are approximately 300 St. Charles students?

AE: Correct

RW: So, 300 St. Charles students from 6-12 years of age?

AE: Correct, yes.

RW: On the first page it says you've served 101 St. Charles residents?

AE: So here it gets a little confusing, when do I project our number backwards, because we've served about 101, our new initiative is going to support all St. Charles Park District Campers.

CW: We talked about that in the beginning, we need to clarify on the front if we're talking about, is this initiative is going to serve, or how many you served last year.

AE: the front is our staff for who we served last year and that's where it's confusing. If you wanted me to clarify, even the percentage we've never counted park district campers in our FVSRA programs.

CW: Your campers is going to be 350 is that correct?

AE: Correct. That will be served through the initiative.

CW: I don't know that for sure yet, we'll figure that out.

AE: Every time a do a grant we try to say something about our end of it.

CW: We'll get on that for next year. The initiative sounds amazing.

KP: In number 5 you mention that you like to compare the number of the behavior reports to pre-covid statistics; I was just wondering if that's because the enrollment was down during covid, or because the number of behavior reports was increased?

AE: It was down during Covid, with the park district reports we're only able to support at a 6' distance. So, the types of abilities we're able to successfully support without somebody within 6' would be very limited.

KP: Ok thank you for clarifying that.

BT: I think the new playground at Pottawattamie has a new sensory playground. I think it's going to be something that will be really good for the kids.

AE: They have a wheelchair accessible swing, the playground is wheelchair accessible, they have a community teaching board with sign language & how to interact and be able to talk with friends.

BT: Do you think your agency will be able to utilize that if you're at Pottawatomie?

AE: We will. We have a FVSRA specific camp that's our 3-6-year-old camp that's onsite there and they can use that playground and then the pool. The park district camps, I think there are 3 of them in that location so they'll be able to as well.

CW: Do you run any camps at the Sportsplex?

AE: Our adult programs are there.

CW: But none of the camps are there that's just your adult care program?

AE: Correct.

CW: How is that going?

AE: We have two program sites there right now. With covid we've been able to bring back a little bit more, so we have one program that's there permanently. And another program that's at Pottawatomie two days a week. And then another one so a secondary one at Sportsplex we're hoping to expand to have one in Batavia, and we have one in Aurora as well.

CW: So, the Sportsplex site has been working well?

AE: It really has, and we own that portion. We rented from the park district with pretty exclusive use.

6:50 Ecker Center – Kim Petit

Ecker has been around for 67 years, merging last year with Renz. Current initiatives involve development of a crisis care program with the goal of helping people who find themselves in emergency rooms but are not always in situations warranting inpatient care. The goal is to solve this gap as well as prevent further escalated situations. The new 988 crisis response number should be available and launch on July 16, 2022.

CW: Last time I think we were on a call they hadn't coordinated the response on how they were going to handle the 988. Is that what was decided amongst Kane County, that the agencies were going to take response?

KP: Actually, this is happening nationwide. So, the 988 number will come down to the state. 988 will come from the FCC to the states and is supposed to launch July 16th

CW: I think last time, they weren't sure who was doing the response.

KP: The state is taking care of that.

CW: Ok so they're running it through the agencies, and so how do they, determine which agency is responding?

KP: It was an application process.

CW: Do you happen to know the other Kane County agencies?

KP: Yes, let's see, I think FSA and AID

CW: Yes, she just mentioned it, I think AID. I think FSA might be too.

KP: It's exciting

CW: It is, and it's a better contract.

KP: It is.

CW: how long is the contract?

KP: We have a contract for two years.

CW: and then another application process?

KP: Yes.

CW: This is exciting stuff.

KP: One other thing I want to mention is that we did qualify for a SAMSA grant. That is to provide services for both non-funded and undocumented individuals. So that was a huge win for the agency, which we will be doing in St. Charles as well.

CW: And these are all the Ecker Center, right? None of these are for substance abuse?

KP: These are for mental health crisis.

CW: Can you share with us a little bit what's been going on with the substance abuse side? The Renz side?

KP: Volume has been down a little bit. We attribute it to mostly Covid and to competition. We plan to bolster that. We have plans in place.

CW: Are you still doing educational programs with school districts?

KP: Those are going well. Those have geared back up since covid. That was really kind of tough to manage.

RW: Do you still have the St. Charles office?

KP: We do

CW: AID filled us in on the ARPA grant. What's that called?

KP: Yes, the American Rescue Plan, and we're using it the same way that AID is, all agencies have agreed to use it the same way.

CW: Just wanted to let everyone know that they will be an ARPA recipient.

RW: In the section for priority funding, you give us an agency wide budget, can you give us like the St. Charles budget? We're looking for how you're going to use the funds here

KP: Oh, okay good to know.

RW: Yeah, so you give us the total agency and that's fine but we're looking for how you're going to use the funds here.

KP: Definitely, ok I did not know that.

CW: Oh, that's right I have a question about your numbers. Number of St. Charles residents served, you have 166 so I don't know if that was last years' numbers. When I go through your programs, I got a total of 225, so I don't know if that was next years' projection?

KP: I think that what we did, yes, yes that's a projection within all crisis response.

CW: okay so what's the 156, or 166?

KP: That's what we actually served.

RS: So, if you could put down previous or the actual numbers?

CW: She did. Oh, you want both of them? On the front page she put actual but on number 7 she put projected.

Kaylyn P: I saw in your application it said there was a 25% increase across your care kids 5-12, would you be able to pinpoint what this Covid era has been most devastating to that?

Kim P. : Yeah, it's really terrible. Those poor children. Isolation, lack of supports, most children at school age receive supports in school, their breakfast, their social work, and that's all taken away. So, we did see a sharp increase on that issue. In 2020 we went from like 173 requests to 525 total requests. Every month it's increasing. For children it was very tough.

Kaylyn P: I have two children in that age range, I see it firsthand, and it's been very tough.

Kim P: Wearing a mask, not being able to see emotions, yeah, it's been very tough.

7:00 BREAK

7:10 Fox Valley Hands of Hope – Jonathan Shively

Mr. Shively discussed they are a low-cost grief support services for ages 5 and up. They are hoping to bring programs into St. Charles schools in the future. Mr. Shively discussed how unaddressed grief can lead to a variety of other issues in an individual's life. He discussed how our society currently seems to be "in a hurry for people to get over their grief." It is estimated that for every life lost at least nine other lives on average are affected by that loss. It is expected that there will be a delayed effect of undealt with loss due to Covid restrictions.

BT: On number 7 it says you anticipate serving 53 clients from St. Charles and that this would result in 9% of our overall clients served with our grief services. It's got a question mark there, is that a question?

JS: I think that was a typo, that question mark there.

BT: I just want to make sure that was the actual data.

JS: That was the actual data.

RW: Number 10 in terms of budget, if this the total for the agency wide, what's the specific breakdown for the \$18,000 you're requesting?

JS: Of the \$18,000, would be applied, about 80% for our clinicians and the cost of our clinical team and their resources. Also, we'd count some of that towards our volunteer training.

RW: ok so for 1 or 2 or 3, or just all of it?

JS: All our clinicians share in the program. It will depend on the services provided to families & children. The third one that you see listed there, is a new staff position that we're hiring which is for a bilingual Spanish speaking person. We try to be responsive to the needs of clients as they're made known to us, and so we've got programs kind of shifting that way as we move forward. We try to get our clients connected with the best resource for their loss. Every client goes through an intake process that helps us determine how we may best serve them.

KP: I see here on your application that one of your goals has been to increase awareness.

JS: Yeah

KP: The 708 Board has paired with the City of St. Charles to share monthly awareness through social media. I noticed on our sign-up sheet you guys didn't have a slot, so I'll connect with you, maybe tomorrow.

JS: Ok

KP: Just to kind of let you know.

JS: Yeah, and we absolutely appreciate that and who does our social media she is here with us today too so thanks for that.

7:20 HorsePower Therapeutic Riding – Carrie Capes

Ms. Capes is the co-founder of HorsePower Therapeutic Riding. They began in Maple Park 8 years ago and have since moved to St. Charles at Honeybridge Ranch. Horses and arena space are leased there as well as smaller animals. The grant for this 708 Board is asking for scholarship support to help those who cannot afford to pay in full. Riders can begin at age 3, the oldest person that has been on a horse thorough this program was 83, blind and with dementia which showed no signs while he was on the horse. The program started approximately 6 years ago in partnering with Naomi's house in Wheaton who are recovering from sex trafficking. Another program called Ranch Connections serves children in foster care.

RS: This is just a general question, on your address what is route 26?

CC: That would be a typo. It is route 25.

CW: As soon as you said it, I google mapped it & now I'm going to go explore it.

CC: There you go. Well, it is private property but anyone who would like to come tour just contact me and I will meet you and give you a tour.

CW: You had mentioned multiple animals, what other animals do your clients have access to?

CC: We have bunnies, ducks, chickens, goats, miniature horses and miniature donkeys. They all live in an area called critter connections. We have a visual picture board so people who are non-verbal, do not have literacy skills, they can still access by the

pictures on the wall. They have images on the animal care and activities, ways you want to enjoy the animals. Yesterday we had a field trip for young adults from a program here in St. Charles. We asked them what they wanted to do, and they wanted to walk goats down the trail. So, they went on a hike on a trail with some goats and it was the cutest thing ever. So those are the animals in Critter Connections and then we utilize 20 horses in the program. We only pay for horse usage fees. I only pay those horse owners when we utilize their horses partnering with them for a lesson. So, I don't pay for farrier, vet, I only pay for the horse, including my own horse's board. I pay to board and then if my horse is utilized, I do receive a check for fees. It's really impossible to have anything leftover for scholarships if you're supporting 20 horses. We're supporting 75-ish in the program.

CW: So, is the grant fee just for the horses or for the whole program?

CC: No, the grant is for scholarships. If the grant was funded in its entirety for what we ask it would fund three months of our scholarship programming at the average rate for what we have right now. That is what the ask is for. Those scholarships are determined by; people fill out a participant application, so we know all about their disability needs. They fill out a scholarship application and we use tax returns, and it includes letters from educators and therapists. We really do verify, do you have a disability, and do you have a financial need because our donors are not that interested in helping people that might not really need the help. All of that is being clarified. No one comes for free. We believe that everyone should have some skin in the game. It really adds to your experience that you are bringing something to the table.

CW: Did I miss the year you began?

CC: 2012.

RW: With so many special needs students, how did that come about, or did that just come organically?

CC: Therapeutic riding dates back to ancient Roman times when warriors were in battle, the faster they'd get back on horses the faster they became well. That's because horseback riding utilizes all of you, it's cognitive, it's emotional, very visible use of gross motor, balance all of those things. The purpose of therapeutic riding dates back centuries. However, our board, we have a 12-person board and a lot of people do have children with special needs. A lot of the disability world, in my opinion really turns on those families who are invested in creating a better world for their children. HorsePower it's not just when you come for your lesson, those that pay for a lesson can come on any of our other lesson days for free and they can come to our critter connections area, or they can become volunteers. We have students who are volunteers

we have volunteers who sometimes take lessons. We have parents who also sit on the board. It's a beautiful tapestry of people serving one another. Not everyone who is on the board has a child with special needs, however I do love that. The farrier is committed, he loves our mission. When you feel you're an expert in something you can get out of bed, with I have a purpose, I have a meaning, this is my thing. I have given trophies to people in their 30's and they've never had a trophy in their lives. When you know the purpose of your job, and really mastering a sport of any kind, really changes who you are, and it gives a lot of dignity.

CW: Do you have anyone that has clinical experience?

CC: Our staff is comprised of past therapeutic riding instructors. We do not employ social workers; we do not employ therapists. We do not use the term equine therapy. We offer therapeutic riding lessons and equine assisted learning.

CW: Can you identify PATH for me?

CC: Sure, Professional Association of Therapeutic Horsemanship. We're a national organization that credentials and trains therapeutic riding instructors. All of my staff also have degrees in other areas as well. We have educators.

CW: But not clinicians, right?

CC: Correct

7:30 Easterseals – Theresa Forthofer

Grant coordinator Lisa discussed Easter Seals DuPage and Fox Valley. A primary goal is to identify children with developmental disabilities so that when they enter school, they are ready to learn. Primary core services include, physical therapy, occupational therapy, behavioral therapy, family inclusive childcare, assistive technology, as well as specialty clinics. The support sought from the 708 Board is for their family services program, which is a pediatric mental health services program offering internal wrap around services. The program for which they are seeking funding is approved by the American Academy of Pediatrics. There is a waitlist demand for their program, currently there are 69 people on the waitlist despite no marketing done for this program.

KP: I saw in number 4 there was a 20% increase in request for mental health services, was that in the last year?

Lisa: Yes, and it's currently up to 45%. We've grown from two mental healthcare staff to six in the last eight months.

KP: What about the covid pandemic has been impacting these individuals the most?

Lisa: The impact that Covid has had on our patients is about isolation. It's hard to diagnose someone without in person. Easter Seals national conducted a study, and the cry for help has grown very loud.

Theresa Forthofer interjected and discussed that the Ages and Stages questionnaire, as well as a social & emotional questionnaire is available online in both Spanish and English.

RW: I recall you were working on a capital project to buy your building, were you able to accomplish that?

TF: We did. Just before Covid.

KP: I just checked the calendar and you guys are actually scheduled for May, so we'll connect before then.

Lisa: ok great thank you

7:40 Community Crisis Center – Maureen Manning

Community Crisis Center was founded in 1975 in Elgin by a group of local women as a grassroots effort to provide support for women to have a place to go in cases of domestic violence. They work with women who are victims, child victims who witness situations, as well as perpetrators. The hotline and shelter are available 24/7. The telehealth option was found to decrease barriers in attending counseling services and has proven to be very effective.

CW: I have a question on numbers. You talked about on the front in '21 you had 44 St. Charles residents across all programs; and that you projected, I think it was 26. Do you really expect it to decrease or am I getting those numbers wrong?

MM: I am not sure. It's always difficult to predict, especially because of the decrease in Covid, we kind of wanted to keep that minimized number. What we found was that people were calling the hotline, and people wanted help with orders of protection, but they didn't want to come to the shelter. So, the counseling numbers were lowered. So, in terms of number of people served, a lot depends on arrests, prosecutions, it's really hard to predict that.

CW: Ok so, but the number that you had in '21 was 44? That's what you have on the front.

MM: Oh, then that wasn't true. That might have been across all programs.

CW: Yeah, but it still served in crisis.

KP: I remember last year, she was explaining to us that while calls for domestic violence were up, there was a disconnect in people seeking services. Are you still experiencing that?

MM: People are reluctant to seek services. People are still number one, still weary of the virus. Often times a woman that will come into the shelter, but she will not bring her children. She leaves the children with grandma, auntie, neighbor, anybody. People are still very much afraid. And people are afraid that with the economy that after 8 weeks in shelter, which you know it seems like a long time, that it takes when we say 8 weeks but it's not a long time. We have rental assistance in our economic crisis program. We can write pretty big checks for rent. However, the availability rate for housing in Kane County right now is less than 5%. So even though there's money available for rent, you can't find an apartment or a landlord to give you a lease. This is making people very reluctant to leave. So, they'll stay home and say, get me the order of protection & let me stay in my own house. Where it goes from here. We've seen this roller coaster before so, it's hard to know.

7:50 CASA Kane County – Gloria Kelley

Ms. Kelley discussed CASA as a nucleus in the county as a court appointed organization. For the first time in 34 years probate court was put on hold as the caseload continues to rise. The cases and associated complications are getting much worse. 25 full time employees plus 240 part time volunteers have to go through the same training processes.

BT: Your expenses have grown massively; everything is so expensive now, or you're just trying to be a little bit more realistic to your need? I'll just ask you, big time increase, if you could just distill it down? I know you've said you have astronomical, is it your expenses have just grown massively?

GK: Yeah, my biggest need is just being able to hire the qualified individuals that we need. So, I went from five supervisors to nine plus a director of that supervision. We've grown from two full-time attorneys to three attorneys. Our cases and their complications are getting much worse. Out of 25 full time staff we have 240 CASA Volunteers, which are like part-time employees. They have to go through the same steps as a full-time employee does. So, it's not just 'oh come on in welcome to CASA' it's an extraordinary role. They have to be guided through the judiciary process, they have to be supervised, they have to make sure that their CASA visits done. They have to consult with our supervisors and attorneys. It has progressively gotten worse, not

better. Our judiciary because we are a true partner, in the abuse and neglect process, just like the public defender and just like the State's Attorney's office, we're there. So, if we're there and we get no funding, which is part of the reason why our funding request is 400% more than it has been in the past. We're just trying to keep up with the demands of what we're seeing, and also trying to get the help and support of our team, our CASA Volunteers and our staff. We've also invested some resources in a company called Puralink that takes a 24-hour call because they need mental health services as well; my team does. They see what everybody else doesn't want to talk about and see and have to deal with on a daily basis of what's happening. We're part of a movement of almost 1000, so we have very high-quality standards that we have to adhere to. The standard is 1 supervisor to 30 CASA Volunteers to 70-80 children. We were doing that for a while, and it was hard. We were seeing a turnover in CASA Volunteers, because we're all dealing with the same thing. Professional and personal reasons. They had to quit because of the need to attend to family, so that is the main thing, Brian. We are trying to keep up with the demand and burn out of my team, because if I'm going to keep that ratio up, one supervisor to 30 volunteers to 70 kids, now we're finally getting there, we have that. I had to have that balance so that it's not a trickle-down effect with my entire team so they can do the oversight. The oversight on what we have, I mean we're talking safety concerns, we're talking visits for children, not being done. There has to be that oversight. I will share one quick story, real short with you, we recently found out that a child was living in a DCFS office for a week. A week! My attorney brought me into that and told me 'I can't even tell you, what I'm about to say to you.' But because of what we've built, she was able to advocate, in talking to the court and judge because of the information we fed them, she said 'this isn't acceptable you have 24 hours to turn this around.' If it wasn't for our program, this would not have happened. So, we are truly those eyes and ears in a private to a public sector. So that is why, we're just trying to keep up with that greater need, then with the compliance and oversight needed.

BT: You have a pretty aggressive labor spend?

GK: yes

CW: I have to say to watch your numbers currently year after year. It's disheartening but it's really (indiscernible) what your team has been able to take on. They're a very hardworking group.

GK: I'm telling you the heart and soul of this program. If I just get to speak on behalf of them, they're the true ambassadors and difference-makers in this program.

RW: In terms of your profit & loss statement grants, are you receiving funding from the Kane County, or State of Illinois judicial systems?

GK: Kane County riverboat system funds. We received like \$67,000 last year. And we all did, from like the agencies, we've all gotten like 30-40% less.

CW: I know you didn't have the Gala because of covid, so did that obviously affect your...?

GK: No, it didn't. We did actually; we had to become very creative though in the way we did the galas.

CW: Oh, you did? There was a question about the grant that I think was a deficit last year.

GK: Yes, it was. So, what they ended up doing it was a \$500,000 grant they had provided to us for years, so you think we're going to have it again, and they not only ripped it out of ourselves, but like they just decided to give 7 new CASA programs.

CW: So, did that also affect?

GK: Huge! We were trying to build for the next three years, and you know we're thinking we're going to have it, and then we're kind of going back to square one.

8:00 Tri-City Health – Kim Lamansky

Ms. Lamansky discussed that last year was the 20th anniversary celebration. There are now two buildings with a building donated to them last year and a state grant funded construction project. This has allowed them to see more patients and offer more services. They now have two nurse practitioners. The care coordinator is now able to do more follow up as was needed. There is a recent partnership with Lighthouse Recovery sharing some of the interns from Aurora University. Ms. Lamansky states there is no way they can do what they do without the support of this community.

CW: In number 7 you said 303 St. Charles citizens, that's projected for next year, correct? You're looking at being pretty flat, maybe down a little bit?

KL: That's correct. Well actually though, the patient load is going up. Approximately 16.5% is St. Charles patients overall, but the 303 is, just what was it last year?

CW: 331

KL: Yeah, so it's really for us, we talk about the individuals a lot, but I think that a number that has to be factored in, is the number of visits, because most of our patients come at a minimum, 3 to 4 times a year. That's really where you see the impact. They don't come once a year. This is ongoing, and it has to be because we can't medicate or

do anything without seeing them multiple times in a year. So, the number itself is lower, but the visits is where it's – I know this is projecting but the second building, we're already like 12% over where we thought we'd be for this time this year.

CW: So, what might be interesting for us as data geeks, is in 8 next year, if you want to parenthesize somewhere, last years' visits? I mean we don't ask for it that way, but if you want to do a comparison, or like put it in the summary somewhere?

KL: You got it. I can do that. I can tell you that our actual visits are way up.

BT: And that might provide context

CW: Yeah, that might be interesting. I mean your funding request is the same, but we do like with your agency in particular because it's not so traditional.

8:10 NAMI – Sara Gray

Lauren represented the NAMI presentation in place of Sara Gray who is ill. Discussing current programs to include connections support group, family support group, a support group for black and indigenous experiencing mental health issues, and a support group for ending the stigma surrounding mental health offered both in English and in Spanish. Two new initiatives are being offered specifically to support the Spanish speaking community, as well as one specifically offered to support the black community. NAMI currently has 2 staff members, 15 volunteers and 5 interns largely from Aurora University graduate program. NAMI KDK is hopeful to put in place, two new program coordinator positions for their Latin X program, as well as a program coordinator for the Black community programs specifically.

BT: We are a stickler on detail. I see Sara signed; Sara looks like she was the author of this, correct?

Lauren: Yes, she does all of the financials for us.

BT: Got it. There's a box to the left "responsible administrator" I would imagine that would be Sara again. So, if tomorrow I get an application emailed into the city with a signature in that left hand box, I'd be really happy.

Lauren: okay

BT: Ok? Because we require signatures in both those boxes. Even though she did sign, she was the author, we do want to make sure that left hand box is signed, and it's sent in. That could be sent in tomorrow by close of business.

Lauren: Perfect.

BT: Thank you very much and number 2, under box 10 priority one, it says describe how the core funds will be used. It looks like, I think Sara \$5000 and three coordinators?

Lauren: Yes, that is our ask. We are completely reliant on grants to get paid for our salaries, and we are looking for the two new program coordinator positions so we could expand our services.

BT: Ok, got it. Thank you I just wanted to understand that.

RW: What does the acronym BIPOC stand for?

Lauren: Black Indigenous People of Color

CW: What priorities are the salaries under?

BT: Priority one, well actually I think priority two has 12...

CW: I guess I'm wondering which one, because you're talking about programs, support groups, community presentations, but I want to know which priority are you allocating the salaries? Does that make sense?

BT: Which one, yeah so, it looks like priority one, it's \$5000 per person. Priority two is \$1250 per person, priority three is the same.

CW: So, none of these priorities you're using the finances for supplies?

Lauren: We don't, with our groups all of our services are virtually and all of them are free, so we aren't really using supplies. So, what we need is more people supporting us in salaried positions so that we can give our services.

CW: Ok so this is all salaries? We're very familiar with NAMI, you guys have been around for a long time, and we've been supporting and helping for a while. There used to be handouts and materials you used to disburse/distribute.

Lauren: Not at the current moment because of Covid, our hope is that things will start opening up, and we will be able to transition back into in person. We've definitely had to adjust our asks because of our current climate.

CW: Got it, and so all of your director coordinator positions, clinical credentials?

Lauren: No, everyone who works at our facility either has a mental health condition of some sort or is a family member or caregiver of someone with a mental health condition. We only require they have a bachelor's degree.

CW: Liz is not there still?

Lauren: She's on the board.

CW: Oh, she's on the board, okay. Your ask in the past was like \$5000, does anybody have that? Oh \$7600, so it's just the staff members that have changed that dramatically?

Lauren: Yes, so as far as Laura and I go, we are exactly a year of being on staff, anything done in the past would have been different staff members.

CW: I gotcha. Can I ask you to clarify the Aurora University intern program? What does being an intern in the situation have to do, because Kim just mentioned it too, that's very interesting.

Lauren: I think they're a really heavy social work program. What they have is an internship database, I know for internships specifically they have to consider three internships with one general and two specifics for the field they'd like to be in. So, for their general internship they don't have to be supervised by anyone with social work credentials. They can just come and get their experience in the field, so Aurora University sets us up with their students and it's very beneficial.

CW: It's a great opportunity for the organizations as well as the students. I just wanted to know more about it.

KP: You said that your community presentations take place in libraries, schools, does D303 utilize Ending the Silence?

Lauren: Not that I have heard in the past; the only place that I have heard in St. Charles to have the End the Silence program recently was the St. Charles public library, and St. Charles rotary club.

CW: I am going to interject, they used to, so I don't know where they are but before covid they used to. I'm not sure where they're at with Covid, but pre-covid they used to utilize SPS, Suicide Prevention Services for this particular topic, but I have no idea what happened when they went virtually.

Lauren: Yes. So, when I came into the role schools weren't accepting them in person, and they weren't accepting them virtually. It's definitely our goal to get back into the schools. I just did an Ending the Silence program today at West Aurora High School, so St. Charles is definitely on the list.

BT: Just remember application tomorrow.

Lauren: Absolutely

8:20 Lazarus House -Sue King

Ms. King discussed impacts from Covid that persist. As a communal living environment, they have had to decrease their capacity. Individuals who have been using services have been staying longer. What used to be a two-month stay is now double. Mental health issues have increased significantly. Staffing, like so many agencies is a pain point for Lazarus house.

BT: What is the highlighted green?

SK: I'm not sure what happened there.

RW: Number 7 describe or project the number of St. Charles residents expected to be served; about 61%, or 59 people, does that mean mental health or substance abuse?

SK: Yes, substance abuse, alcohol abuse, any sort of mental health disorder. Sometimes it's self-proclaimed, so it may not be diagnosed, but anything of that sort.

RW: So, would you work with a Renz or an Ecker on that?

SK: We work with anyone in the community that will happen to provide services, we have a wonderful partnership with many of these agencies. We are able to refer our guests out to agencies. We do have specific requirements for housing at Lazarus House, individuals have to have a community connection. We serve portions of Kane County. Elgin has a PADS program, Aurora area has Hesus House. It has to be a connection to the central Kane or Western rural Kane County. Sometimes we can't accept individuals based on that. So, if sometimes they are missing that connectivity piece, a lot of times we are able to work with other agencies to barter for lack of a better term.

CW: The number 104, I'm going through all the numbers, that number is the first 8 months, so you actually served more than 104?

SK: So, you're looking at the total number of St. Charles individuals?

CW: I'm just trying to get a total fiscal year

SK: That's the current fiscal year

CW: So, would last year fiscal be 70 then?

SK: 104 was for St. Charles that was FY '21. For FY '22 right now we have a total of...

CW: OK I'm missing something, that's fine ignore me. I'll look at it later.

SK: Call me if you have questions, it's fine!

CW: Oh, wait I do have one more question, can you come back one second? I can't remember did Lazarus get ARPA funding or no? American Rescue funding?

SK: Yes, the Cares program?

CW: Yes, I mean you haven't gotten it yet but

SK: Right

8:30 DayOne Pact – Dan Dahlke

Mr. Dahlke discussed the program seeking funding is the Child and Family Care Program. The program serves infants and toddlers birth to age three, with developmental disabilities and delays. DayOne Pact has served over 3000 children every year. Demand has skyrocketed this year. Through use of good support received last year, most of the technology gaps have been solved. It was anticipated at the time of the application, that they would be serving 175 infants and toddlers from St. Charles. The current actual estimate is closer to 200. They've hired four new people and current needs are related to staffing.

KP: I read an article that nationwide they're seeing a 40% increase in speech delays in kindergarten. Is that kind of what you're seeing as well?

DD: We're seeing a lot of speech delays, a lot of parents coming in. That's part of what I talked about before, a lot of kids coming for services. We're seeing more and more parents advocating and a lot of times that is with speech.

KP: Do you think that's due to masking in the schools?

DD: It could be, could be relative to social skills. You know we're birth to three, so I don't

know how many are really masking that age, the kids that we serve aren't eligible for the vaccine, so I don't know. We have some that definitely want their children masked, and others that don't want them masked so it's challenging.

RW: How's the PUNS list looking statewide?

DD: It is still a long and difficult - we actually don't have that contract anymore that serves those on the PUNS list. I've tried to find an answer about that because I get it so often.

CW: Aren't you eligible for the grant for that, for that contract again?

DD: We are, yeah and I'm trying to, our board is actually going through some changes.

CW: That's some of your plans is to reapply? I think it went to a different person, that contract for like 5 years.

DD: Yeah, it was 2019 so it's coming up. I don't want to say it for absolute, but I think it's coming up.

CW: Was it 5 years or 4 years?

DD: I think it might be 4 years.

CW: Yeah, I know it's coming up.

DD: Yeah

CW: It goes fast.

DD: Yeah, it does.

CW: I'm trying to reconcile numbers tonight, you had said the Geneva division, had the 197 St. Charles residents and then on the front it says 175, so I'm just wondering if it's...

DD: So, on the front page that's what we've seen typically.

CW: is 197 the actual?

DD: Yea so that's more see what I would call the actual number. That final number will be dependent on what the intakes will be.

CW: Yes, I'm sure, just from what they're seeing in the early childhood programs, the uptick there, I would expect your numbers to be up.

8:40 Lighthouse Recovery – Marty Keifer & Nate

Lighthouse Foundation provides funding for indigent care in individuals lacking the funding to paying for basic care in seeking treatment. Often times individuals come out of the Kane County Justice Facility and are lacking funds for that continuum of care. Goals are to reduce recidivism, homelessness, and overdose and death. The Forum of Fentanyl is a program which will be offered at the Arcada theater. Fentanyl is the major threat currently. Fentanyl is used to cut a drug supply to stretch it out. Fentanyl is extremely lethal and easy to overdose.

CW: I have a question about Narcan distribution. There is a community question about parental access for community distribution. Where can the parents get Narcan? Can they go to Kane County?

MK: Yes, they should be able to. Lighthouse recovery is another location, and we can provide the Narcan training.

CW: So, should they contact your office?

MK: Yes, they can definitely call our office.

RW: I have a financial question. I saw you have an annual carryover of almost \$12000 is that something you're able to use then, for the springtime.

MK: Yes, that carryover is going to be applied to our Q1 2022. I'm also trying to do some work so that we can get our grants that we do receive sort of on the same schedule. So, the previous grant is going to go Q2 of 2021 through Q1 of 2022. So those numbers are going to be actual. That is not, I didn't have Q1 at the time of that.

BT: So, you're going to quote your fiscal year to support the grant allocation?

MK: Yes, so the calculation would be my projection for this year was based on the first 3 quarters of '21; but we also didn't see quite as much of an increase between '20 and '21 as I thought we were going to.

CW: I had a question on number 5. You gave examples of the efforts and outcomes, presumably you're working in conjunction with recidivism, you're working with Kane County Sherriff's office, with the homelessness you're working with Lazarus, do you have access to any quantifiable data with those partnerships, that you could provide next year?

MK: Yes, I could do that! I could tell you very briefly, so the main one as far as individuals coming out of the jail from the time services started that we provided inside the jail; overdose rates/deaths, our numbers went down 90%. Some internal ones that we have; detainee on detainee assault went down 60%.

BT: Super, super data.

CW: That is what they're looking for next year.

BT: Kay do you work with Lighthouse on their social media aspect?

KP: I will double check to see if they're on the schedule.

BT: Kay is working with the city on getting information about your program, or your facility or anything you'd want to share, to go to possibly St. Charles social media.

MK: Okay!

KP: I don't see you on the list for sign up, so I will connect with you sometime in the next week.

MK: Excellent

CW: Do you guys have questions about 11 and 12? Show your math was requested of you. I was asked to communicate that with you. It was asked to show your math, it was not my question.

MK: Ok

8:50 Tri-City Family Services – Laura Poss

Ms. Poss discussed where their organization stands relative to the pandemic. Per National study by the Kaiser Family Foundation, impact of Covid and its effect on mental health has been widespread and substantial. Four out of 10 adults in the U.S. reported symptoms of anxiety or depression. This is a 400% increase from the previous year. Children are also seeing increased mental health issues, according to Physicians for Human Rights, Emergency Department visits are at a 30% increase for children between 12 and 17 and 24% for younger children. In collaboration with the St. Charles school district, they are also reporting increased stress. Tri-City is also seeing drastic increases for people that are seeking treatment for eating disorder program. That has tripled in size in the past two years. Tri-City Family Services continues to be a leader in mental health services in the community. Support from this board allows Tri-City to continue to provide the sliding fee schedule for continued access. Tri-City has been able to

distribute children's books to 185 preschoolers to help them understand their feelings. This year an additional 311 books are due to be distributed at the Fox Ridge Early Childhood Center. Tri-City is seeking to hire more staff this year due to increased demand but like so many agencies seeking qualified therapists hiring is challenging.

CW: Have you resumed programs like Chick Chat and all of those?

LP: Yes, the social emotional ones that I was talking about, we do them from fourth grade through eighth grade, they changed the name, it's called Trek the Next Step. They're still on Zoom.

CW: Oh, so those haven't been able to be in person?

LP: We try really hard to get them in person, sometimes it depends on who our core partnership is with, as to whether or not they're allowing in person.

CW: But places like school districts are still virtual?

LP: Yes

LP: Michelle is working very diligently to get back in person. The thing is we try to get these age groups in over Zoom, it's just real difficult, everyone is kind of Zoomed out, but as far as those groups go, it's very interactive. Chick chat is one of those things where you know you do yoga together, so Michelle is trying. It's just trying to do yoga, with a teenager, over Zoom, it's a little tricky, but yes, the programs are up and running.

RW: your section 6 you mention last year you had 71 clients in emotional wellness for 965 service hours. And you're projecting this year 14,800 for 630 residents? How is that increase, what is the account for that?

LP: I'm sorry what number were you on?

RW: It says for emotional wellness you indicated projected 630 St. Charles residents to be served this year for 14,800 service hours; and last year in your section 6 you said there were 71 residents served for 965 hours.

BT: What's the big increase in the hours and the people?

Gentleman in the gallery answered: We're hoping that with the opening of the schools, in the past it's been hard we haven't been able to give in person presentations, we're hoping now as things can open up, we're going to be able to do more of those community presentations where we're going to have a bigger group...

RW: So, this would be like large groups of people?

LP: Yes. in the past, we've been able to go down to the schools, the high schools and the middle schools, and do like wellness fairs. All of that stuff in the past two years was suspended, so this year we anticipate in talking to the schools that they'll be having those events again, and that they'll be inviting us again and that's how we reach that many students. That was a good question. Sorry I couldn't find the page.

CW: I have a question about the number of residents served. In the history of your organization, 2400 people served then you've had like 17 and the numbers have slowly come down a little bit. I think the numbers, people were staying longer, but this year, I think because you're virtual, it's so different, you have 406. So, when we do an aggregate number that we present to the St. Charles City Council, yours is usually a huge chunk of it. So, the more I looked in here, and you had 379 for numbers for your first priority, and 636 for, it's number 7, and then 636 for your second priority, neither of those numbers are 406. So now I'm really confused as to what the number is.

LP: I see the number 379 on number 7...

CW: On your second priority number 7

Gentleman answered: So, it is 630, it will be 630 plus...

CW: Plus 379? Instead of the 406? So, on the front cover, where it says number of St. Charles residents, served by the organization, it says 406. So, I mean do you just want me to add those two? It's no big deal, I'm just trying to figure out what it is.

LP: Yeah, if you could yeah.

CW: Okay so 379 plus 636 is 1015, that sounds more normal to me than 406.

LP: Thank you for catching that.

CW: Yes, definitely because to have you guys under 1000 is unusual.

LP: One thing I will say, thank you for catching that, number two is one of the things that we discovered through the pandemic is that it's very tricky, even if you're a very good family therapist, which all our people are, when you're using Zoom as much as we anticipate we're going to continue to use it's very good for a lot of families. If you're a working parent, your job or your transportation is an issue, maybe if you don't have gas to get to the agency; I think it's brought up something, we had, it was a soft rule that we enforced with people which is that when you bring your child or adolescent we want you to stay in the building because part of what Tri-City that makes it go so well is that

the parent is involved in the therapy. In the interest of the teenager, we want the parent to walk out the door knowing what they're working on and how they can help. What Zoom has done, that sometimes is a negative is that we cannot get parents to get on that Zoom call. So, some of our numbers that may be different next year, because you simply can't make a parent get on Zoom. I get it they're busy, sometimes they'll put their young kids right in front of the camera, and we'll have to call them up and say could you be on the next Zoom call? I think that's another thing we're struggling with as an agency that has really nothing to do with the funding, as much as it does with our philosophy. We really want to get those people in there because when you serve a kid, you serve their parent too.

CW: Right and it would make sense that your numbers might trend down, slowly, but your hours of service would trend up I'm presuming, and it's reflected in here, so I would just say as you turn these in year to year, you might just want to proof it and make sure that's what you're saying.

LP: Yes! That's what's happening and you'll see in the number of hours projected for next year, we're projecting way more.

CW: And that makes sense to your point of you're spending more time.

RW: One helpful tip on section 6 page 17, describing the expenses that were allocated for the priority 1&2 the budget on number 10 on page 6 & 12, you gave us the agency budget; so, it should probably be under section 6 next year, would be great. You're looking for like \$200,000 for that priority, so your budget would be for emotional wellness would be like a \$96,000 budget.

Gentleman answered: Oh, okay I see that.

LP: That's my money guy.

CW: Just so you know we're not asking these questions or pointing out these as issues, just so you know. I don't know if they're used to us.

LP: No this is good; this is very helpful. Anything you can give us we're grateful to be able to give you anything that you need.

CW: Even though we're very familiar with you we're going to tell you what we've told the others, we appreciate you know, your staff all of them.

LP: I'm going to bring that back to the staff, they will appreciate that! Hardly any of them have left for better jobs or better pay they've really stuck with us. Thank you!

Presentation portion of the meeting ended at 9:05 PM.

Chair Travilla advised the board that the questions they asked were very good and he appreciated them. He's already emailed Sharon to be expecting the NAMI application signed. Alderman Silkaitis expressed that he was not in full agreement with that, the does not believe we should be letting someone change an application. Round table discussion that the application was signed, just missing in one place.

Vice Chair Waibel discussed that according to Robert's Rules the amendment discussion from earlier today, could have been made to the meeting minutes today, however respectfully she acknowledges that a review of what was said for purposes of amending the draft of meeting minutes. The comment is expressed to inform new people on the board. Chair Travilla expressed that it will be reviewed next time and that it's on record that Vice Chair Waibel was not in agreement.

6. Adjourn

Chair Travilla asked for a motion to adjourn the meeting.

Motion by Waibel second by Poremba.

Voice Vote Aye: 5 No: 0

Meeting adjourned at 9:11 PM

ADA Compliance

Any individual with a disability requesting a reasonable accommodation in order to participate in a public meeting Should contact the ADA Coordinator, Jennifer McMahon, at least 48 hours in advance to the scheduled meeting. The ADA Coordinator can be reached in person at 2 East Main Street, St. Charles, IL, via telephone at (630) 377 4446 or 800 526 0844 (TDD), or via e-mail at jmcmahon@stcharlesil.gov. Every effort will be made to allow for meeting participation. Notices of this meeting were posted consistent with the requirements of 5 ILCS 120/1 et seq. (Open Meetings Act).