

**MEETING MINUTES**  
**ST. CHARLES 708 COMMUNITY MENTAL HEALTH BOARD**  
**THURSDAY, FEBRUARY 28, 2019 – 5:00 P.M./6:00 P.M.**  
**MUNICIPAL BUILDING**  
**2 E. MAIN STREET, ST. CHARLES, IL**  
**COUNCIL COMMITTEE ROOM/COUNCIL CHAMBERS**

**1. Call to Order**

The meeting was called to order by Chair Waibel at 5:11PM

**2. Roll Call**

Present: Waibel, Gacic, Weddell, Silkaitis, Cumblad, Travilla

Absent: Cohen

Additional Present: Recording Secretary Kimberly Abatangelo

**3. Action**

**A. Approval of meeting minutes February 7, 2019**

Motion to approve minutes by Gacic, second by Weddell.

All in favor Aye: 6 No: 0

**4. Chair Report**

**5. Old Business**

**A. Subcommittees**

Chair Waibel discussed subcommittee responsibilities currently in place and asked if any other members of the board had interest, or if any subcommittees identified would benefit from additional support. Brian Travilla stated he'd be interested in working with Barb Gacic on the ACHMAI subcommittee.

Roundtable discussion on size of subcommittees in relation to Open Meetings Act (OMA) rules. Chair Waibel discussed a policy, procedures and ethics subcommittee. Ron Silkaitis stated he was willing to participate in this subcommittee with Carolyn Waibel as well as Brian Travilla. Chair Waibel also proposed a discussion to meet on a regular schedule rather than current methods. Chair Waibel will put this on an agenda for a future meeting discussion.

**B. Questions for Presentations**

Chair Waibel distributed a packet of questions that was put together by agency, relative to review of applications. Roundtable discussion about methods of approach and some specifics, to asking questions of agency speakers. Roundtable discussion asking if any agencies have contacted the board stating they could not attend. Chair Waibel expressed an email was sent stating the meeting was mandatory and offered her cell phone to contact if they were not going to be able to attend. Roundtable discussion about opening statements the board will make, to the agencies before they present.

**C. Rubric Scoring**

**6. New Business**

**7. Future Agenda Items**

**A. ACHMAI**

Waiting on an invoice from ACHMAI, dues are supposed to go up, however it's unknown how much at this time.

**B. Allocations**

**8. The Meeting was moved into Council Chambers for applicant agency presentations.**

**A. 6:00PM AID – Presenter Lore Baker**

Lore Baker introduced herself as a new (Oct 1 2018) CEO for AID and offered some brief, new information about AID and services offered.

Q: Do you do substance abuse treatment?

A: We do some, but it's primarily for people with disabilities

Q: Are you familiar with the application since you're new to the organization?

A: I will answer to the best of my ability

Q: Re priority 1, question 5C, in the area of data you have a number of proposed goals / outcomes, numbers 4-6, can you tell us how those are related to your priority?

A: Yes. The priority is the behavioral health and services recovery program. Those very expensive psychiatric hospitalization services are what we are trying to avoid happening. It's important from within the service they receive care follow up from the nurse to support the person and try to ensure recovery.

Q: On 5B was the goal met, it states the goals were met but does not offer supporting data. Do you have specific data to support this?

A: So, you want the specific percentage numbers?

Q: Yes, just in general this is what we're looking for.

A: Not on me.

Q: Just to interject, more measurable quantitative. There are some ideas there but, more measurable outcomes.

A: Ok, you want us to report on the specifics of what those outcomes were.

**B. 6:10PM Ecker Center - Rick Vanderforest**

Rick Vanderforest briefly discussed the new partnership between Renz and Ecker and the integration of care between their two organizations, and shared expenses for efficiency being the goal.

Q: Page 6 question 5B, excellent data reported, can you comment about what is that last measurement data period is?

A: Generally, when I pull data it refers to the last 6 months.

Q: We are grant funded, so we don't deal a lot with fee for service, however there was a change with Medicaid; have you experienced or are you anticipating changes related to this?

A: The state has said they want a standardized mental health assessment. It is called the IM+CANS. The staff needs to be trained. The time it takes to train the staff, they're gone for a day, we have to retrain all our staff and get it integrated to systems. These are non-billable hours. It takes some time to get people approved for Medicaid. All of the changes coming to fruition create a bureaucratic process and we have to get up to speed. We're facing the head wind, we're facing the challenges but it's a little bumpy.

Q: 7 A,B,C: number of St Charles residents served; there was about a 10% increase in 3 of your 4 priorities, and then a decrease in the PEP program, what I'm looking for in the 7B is what is the rationale for that?

A: We have increased our hours in psychiatry, we still have walk-in. PEP is a site that we've seen about the same or slightly more people, those are people who come to the ER in crisis, so we really can't prep or predict a trend. With the changes in Medicare and Medicaid we're predicting that more people are going to wait until the last minute. We're trying to be more efficient to provide the needs of those we're seeing in PEP. It depends who's in crisis.

Q: There's also other funding issues in section 14, I'm looking at the treatment for more refractory patients, those populations of persons in need of all services

A: There are a lot of people that need services, but when they're in crisis what they want is to get checked in and you're referring to them to services. I think one of the largest things in partnering with Renz, is we're seeing a lot of substance abuse, they're trying to self-medicate mental health issues. We're working with Renz, and the City of Elgin HUD, we're working to be on time to meet that need. We're really trying to become more efficient and provide for the needs of those we're seeing at PEP. That's a roundabout way of saying we're trying to adapt. As far as that number being slightly more people from St Charles, it depends who is in crisis.

C. 6:20PM Lazarus House - Julie Purcell

They've purchased the whole building at 214 Walnut St, and they are in and are in the midst of major renovation.

Q: Page 8 question 5C. I would like to know why the goal is less than the current status?

A: We never know who will be coming in to our shelter, and what their presented need is going to be. Sometimes they have individuals who come in with a need, and they may leave before they've had a chance to meet their need, it impacts the percentage. That was taken into consideration.

Q: What is the length of stay that you're computing these figures?

A: It's based on their need on the day they come in. Also, it's sometimes discovered when they meet with them during their stay.

Q: Speaking to the needs, your shelter talked about 23% shelter increase, from last year to this year. Do you have any reason to attribute the increase in particular?

A: Housing prices are going up, but salaries are not, that may be one factor we're seeing these increases. We always adapt to the needs of the people that we're seeing. That's the nature of who we are.

Q: Will you be increasing in size/bed space?

A: No, we're moving everything into one place so we'll be selling the other buildings, our guests will not have to cross the street for classes.

Julie shared some recent stories about Lazarus house including a young woman staying in shelter giving birth to twins. We've moved her up to transitional living. There's a scoring system that we have to use for that for a continuum of care.

Q: Does everybody that comes to your building have to go through that type of scoring?

A: Yes, within 14 days.

Q: I'm looking at 7B-7C you mention serving St. Charles residents in the last service period, and you're anticipating 130, is that for a 12 month period or a 6 month period?

A: It's for a 12 month period. We've served 92 so far this year, but we plan on serving 130. We're not anticipating a decrease.

Q: What I'm looking for, is can you describe it a little bit more? The difference between what you've served in 7B and what you show in 7C, can you provide a little bit more information?

A: I take the past 3 fiscal years, and I take an average of how many. I look backwards, it's been pretty stable for the last 3 years.

D. 6:35PM Fox Valley Hands of Hope – Greg Weider

We've had a lot of change in the last 18–24 months in terms of staff changes.

We're a staff of 10 and I'm proud to say we've actually expanded the number of folks that we serve. Some is based on more partnerships, and some is based on just responding to need. Financially the organization continues to meet its budget objectives. Programs have grown.

Q: Page 6 5B it states "yes" and "yes" can you expand on that?

A: With our goals and outcomes, we have a process for the initial intake, and then at the end to determine our results. What we didn't show in the application are those numbers, but we can do that. I heard from the other presenters you are looking for that information.

Q: Page 6 question 5; section A and B and C all go together; the data should sort of match.

A: Ok

Q: On the cover page, it says number of St Charles residents served, I don't understand what that is.

A: Are you looking at that 422 number? We didn't break it down enough and I didn't catch that until today. One of the new things we do at Fox Valley hands of

hope, is a new program provided at the Juvenile Justice Center. We provide loss and grief work for people who are incarcerated. So our total service number is that 422, but they're technically not St Charles, they're temporary residents of St Charles so we did not include that in the numbers in the meat and potatoes of it. The bereavement programs, we actually served 198 St Charles residents in our bereavement program. The others were at the juvenile justice center.

Q: Regarding 10A the majority of funds from St Charles will be used for the adult and youth bereavement, a small portion of it went to "conmingo" is that a different program?

A: Yes, conmingo is a program within a program that's the Spanish interpretation of our program. It's confusing because those service numbers are also wrapped into the bigger number.

Q: Right, because last year, the funds you were requesting were for bereavement, so we just want to make sure those funds are being used for that.

A: Yes, it's for bereavement it's within that.

Q: So, you have a new grant writer for this year?

A: Yes – introduced Claire.

E. 6:45PM Tri-City Family Services - Laura Poss

Discussed changes in the state and effects it will have for Medicaid patients and the services Tri-City provides. The care coordination between agencies would increase significantly. They're seeing many more St Charles residents with expanded mental health services hours, hiring of more part time employees, and negotiations with their landlord for more space, which they were given for free.

Q: Where are those integrative health homes being proposed to exist?

A: Two in Elgin and two in the southern portion of the county.

Q: Have they been selected and funded?

A: They've been selected and approved, they have put it on pause, and now there's a task force assigned to it.

Q: I was just looking at your hours 8A-C, this is page 12 of the application; there was a significant increase in number in services hours, you're projecting another increase, this is for clinical staff; without the clinical staff, were those people getting services elsewhere?

A: They could have been, or they could have been on our waitlist. Sometimes when people are on a waitlist, they will go other places.

Q: With your expansion into the St Charles area, and expanding your offices, have you expanded your immediate services more?

A: We've added a couple of groups; groups for boys, project self-compassion. We're trying to serve more youth through our counseling agency. We're responding to the needs of the schools.

Laura shared that over the last two fiscal years they've seen a 33% increase in the number of individuals served in the City of St Charles, and a 30% increase in the number of hours provided. They've been able to move more people off a waitlist.

Q: Back to strategic planning, is there any “Plan B” you’re projecting for the Medicaid situation?

A: Partnerships are very crucial. We’ve all worked together successfully for many years, but now it’s going to be imperative. We are increasing psychiatric services, gearing ourselves up without any money on the front end to serve potentially a larger population and more adults. We used to see more children.

Q: For your priority that requested \$17,000 are they all for St Charles’ kids?

A: No. St Charles kids go to all the groups, but they’re not for all St Charles kids. I should rephrase that, the percentage of \$17,000 is only for City of St Charles residents. So, the \$17,000 is for City of St Charles residents, but all the kids go to all the groups.

F. 6:55PM CASA Kane County – Vicky Shaw

We collaborate with DCFS, so when a child is removed from their home, we are appointed their guardian. Our CASA’s have one case, whereas DCFS has many, currently they have one case worker for the entire Kane county. In essence we’re serving as case workers. Currently CASA has 6 supervisors, we previously had 5, and one staff attorney, the attorney is a new addition. We used to have a public defender that was provided through the county, but that went away because of funding. We have our own, but it’s really helping the kids because she works directly for us. We’re currently serving less kids, DCFS is trying to service kids while leaving them in their home through their Intact Program. When the children are in the home, we are not involved. The kids are still needing the services, but not getting the services they would have but we feel those numbers are going to get back on track because those kids should have been removed from some bad situations. This was across the county.

Q: Page 4 1C. There’s nothing in box 1C and nothing marked in any of the check boxes.

A: The program is the same, I guess we should have checked the first one?

Q: Who did CASA send to the bidder’s conference?

A: Amy was there.

Q: 4B on page 6, it said more dates were added and I looked at the updated training attachment, but I couldn’t tell which ones were more. How many dates were added and how many volunteers were trained?

A: Oh, I have that, do you want us to follow up with that?

Statement was made by the board: “The application is a learning process, but we are also trying to give feedback as we evolve our process. I’m just speaking generally to the whole room. We have to ask agencies to be accountable for their outcomes. We’re being evaluated by other 708 Boards on our process and its implementation.

BREAK 7:05-7:10

- G. 7:10PM Renz Addiction Counseling – Jerry Skogmo and Jim Brunetti  
Jerry introduced new addition to their team; clinical director Jim Brunetti. The opioid epidemic is alive and well unfortunately, across the country. They report 67 fatal overdoses in Kane County last year. Renz has started administrating Narcan and is hoping to expand on that. Jim Brunetti spoke about Narcan administration program and the SMART program Renz offers.

Q: Page 19, 3B What happened last year? Did you receive funds for this program from us?

A: No. It was not funded last year.

Q: In 3A page 5 it says these services are offered in your Elgin office. How do St Charles residents get these services if they don't have transportation to your Elgin office?

A: Sometimes we pay for transportation if we can, or sometimes we can provide it in St Charles. We're not able to duplicate everything we offer in Elgin in St Charles.

Q: Are you going outside and doing training to organizations like schools?

A: Yes, anyone who contacts me, I'll get them on my schedule.

- H. 7:25PM Easter Seals DuPage & Fox Valley – Erik Johnson  
Shared how they're creating a comprehensive program in serving children with Autism and Autism Spectrum, as current numbers show 1 in 59 children diagnosed. Their second strategic goal is how can they broaden their reach with early interventions. While this is a deficit funding initiative, they've found that early intervention identifies needs and provides better outcomes.

Q: Do you take Medicaid? Are you having current or anticipated with the independent service coordination?

A: Yes; and not that I'm aware of but it sounds like something I should double check or look into.

Q: Page 8 5A, B, C there's nothing in B. In C are these proposed or what are these?

A: A, B and C are all in C and I realized that two speakers ago. If you'll notice the short-term outcome is what we propose, if the goal is met, it's typically the last row of the bulleted section.

Q: So then if you're looking at C, I don't know what your proposed goals are?

A: They would be the same. We do not change our outcome goals year to year.

Q: I see that you serve annually 3200, how many for St Charles specifically? Page 9, 7B and 2C.

A: I'm on the cover page. I see where I don't mention it my apology. It should show in 7B as well?

Q: So my question is, is it 1214 families in St Charles?

A: No, last year we served 42 in St Charles.

Q: 7c on page 9 says we anticipated 35-45 in St Charles

A: That's the anticipated upcoming year. It's been pretty consistent with history.

Q: When you were talking about your strategic goals; how are you accessing and identifying those patients?

A: We do this in 2 ways; one is our historical referral services, and we also look at what is the need through children and family connections and ask are we missing something.

I. 7:35PM Community Crisis Center – Gretchen Vapnar

The crisis center sees 40-60 walk ins everyday varying from homelessness, domestic violence, sexual assault. Gretchen remarked that they're seeing a change including many women with serious health conditions including things like ovarian cancer. Currently they have 17 interns working in the center. In the last month they've given out 5000 diapers, since diapers cannot be purchased with food stamps. They also give out toilet paper as they saw people taking toilet paper from their restrooms. They gave out 1000 coats last season.

Q: The number of walk ins this year, that has obviously increased from last year?

A: Yes, but it's hard to count. Some get missed, because they only come in and want shampoo or deodorant.

Q: Do you take volunteers from high schools?

A: Yes, we'd prefer they come as a group and maybe clean up the toy room as they can't provide direct service. We do have a group that comes and brings dinner once a month.

Q: With the total increase in walk ins, have you seen an increase in residents from St Charles?

A: We predict that we will see 155-175 residents from St Charles within the year. We work very closely with Lazarus house and Hesed house.

Q: Your supplemental data section 7 and how it was broken down was well written. That's a compliment.

A: "We're data crazy. If you ask us who came in today, I can give you percentages by town, language, I can give you all of that".

J. 7:45PM Fox Valley Special Recreation – Carolyn Nagle

Carolyn announced she's retiring as of April 30<sup>th</sup> of this year. They are seeing a lot of kids who are enrolled in the Park District programs. They are working to train the park district staff so those kids can remain in those programs when possible. They also offer 5 adult day programs, and 3 day break programs. They opened a sensory room the first part of February after about 5 years of planning.

Q: Where is the sensory room?

A: It's at the Vaughan center.

Q: Page 6 5B you walk us through about some staff training that appears was highly successful. Should the outcome met be more about the client?

A: Ok, the involvement the staff have with the kids has been successful. I understand what you're saying though.

Q: So, if you look at this priority, we would kind of imagine that the outcomes would be about the kids, so it's a little confusing matching the priority to the outcomes.

A: I should have probably separated those out. It didn't make it very clear there.

Q: In your next one on 5C I just don't know how those are going to be evaluated. You could see how we can't tell.

A: So, in the training of the staff, am I answering about the child that did not need to be removed, or suspended from the program? If 20 kids were in the program and 18 remained in the program, would that be the outcome?

Q: Page 7; 7A, B, C I don't see the number of St Charles residents. You see 80 are being served, but you're anticipating 40?

A: Well we serve more than the city of St Charles, 80 was the total number we served. 40 was the number of City of St Charles.

Q: Can I clarify? Is it not 80, should it be 40?

A: No, we serve 80 but the number for the program for the City of St Charles is 40.

K. 8:00PM Suicide Prevention Services – Stephanie Weber

Stephanie shared that the organization is 20 years old this year and thanked the board for funding. Focus this year is a lot on kids and adolescents. The scope of what they are doing is broadening in all directions, and the number of suicides is rising. Stephanie shared a story of a 14-year-old girl, and an experience on Snapchat that saved another adolescent from suicide. Stephanie further went on to describe the elderly, and loneliness and phone calls they receive. More walk-ins this year are also cited. Stephanie states their programs are growing.

Q: How do you determine specifically a St Charles caller for the hotline?

A: We ask. If it's not someone actively suicidal, we have an array of questions we ask during the call.

Q: We're specifically funding from a certain boundary in St Charles so you're not able to tell those boundaries?

A: No, we're not.

Q: Page 6 question 6A, the projected number of individuals is 53% of the population, the priority is education, so 53% is served by education? I'm trying to follow the logic. So, are 53% of your activities in education?

A: Yes, 800 people roughly. It does seem large, but yes.

Q: Page 7, 8C in all the other C's that you're projecting service hours, you have a formula, I'm not sure how to interpret this paragraph.

A: It varies on the training and presentation.

Q: Another thing would be 9B page 8. You had a staffing change and that would have been a good place to articulate that.

A: Ok

Five minute break.

L. 8:10PM Tri-City Health Partnership – Kim Lamansky

Kim shared that an objective she has is to expand on their current location by pushing the front of the house out. Typically, they do not accept patients who have Medicaid or insurance, but with the expansion they are going to take some from Lazarus house who are on Medicaid.

Q: Comment, the application was well put together and offered what the board wants to seek. It was asked, who is their grand writer?

A: Kim shared she wrote the grant application, and two years ago for St Charles 708 Board was the first grant she'd written.

Q: So, you're projecting 350 from 333, I would say that's an incremental increase but you're expanding, would you say that could be even higher?

A: It could. I hate to over-guess.

Q: The increase we're seeing from last year to this year, did we see that from 2017-2018?

A: Yes

Q: what's the threshold between acute and chronic patients?

A: Last year it was 53%, chronic is people who come in 3x or more who have diabetes. Although, it can be kind of hard to track what they're coming in for, diabetes care or mental health.

M. 8:25PM YWCA Metropolitan Chicago – Marianne Pokorny

Marianne shared a list of services offered advising that page 6 has some data. They serve all of the Chicago metropolitan area. They're focusing on some early intervention programs stating that mental health issues start very young, 3 and 4 years old. They serve over 200,000 clients per year across all services.

Q: Can you tell me where Two Rivers Head Start is located?

A: I can get you the address, it is in St Charles.

Q: It is? I thought it was in Elgin?

A: They have several sites. The one I'm referring to, that I've written in the amount, they gave me the number that are from St Charles.

Q: The 34 projected kids?

A: Yes. This is probably one of their smaller sites, but it is in St Charles.

Q: It shows you're initially requesting \$31,742 as we go in a little deeper it shows the amount requested is \$31,857 then it goes to \$31,287. What would be the number ideally you guys are seeking from us?

A:

Q: Of the 34 kids, how many of those would be living within the City of St Charles?

A: That was the number in the zip code.

Q: You can't go by the zip code there is a 5-ward map we can get you.

Q: What percentage of these kids are from impoverished families?

A: They all are.

Q: One concern, in looking at your proposal you had very specific timelines, but being new you may not know our process, our funding is a drawn-out process. We

make our recommendations to the city finance department and it's presented, and our budget is approved by them. Half of the funds that are allocated to each agency are dispersed in August and the next in November because it follows real estate. What happens, are you going to start the program if you don't know if you're getting the money until August?

A: We can alter this, but this is ideal. This is the same type of thing we used in Bloomingdale. This would just need to be in increments to work.

Presenter #14 Nami KDK did not attend or present.

N. 8:45PM Lighthouse Recovery – Nathan Lanthrum

The organization is relatively new, they described they've been running an outpatient substance abuse program in St Charles for approximately 3 years. They state that a fair portion of their clientele have no insurance, but they offer services to everyone. They work with Lazarus house, and have been contacted by the Sherriff's department recently to work with them as well. Currently they're experiencing a lot of requests for services exceeding what they are able to handle for their size. They're here to ask for assistance to be able to help serve more people. They have 1 doctor currently, an ER physician from Delnor. Currently they are operating with write offs in the range of 30% of their total clientele which are approximately \$131,000 - \$150,000.

Q: I see on here you've applied to other organizations for funds?

A: Yes, we applied for a Northwestern Memorial grant. Unfortunately, we're waiting to hear an answer for that.

Q: Do you have a board of directors?

A: There are 2 separate entities. We have Lighthouse Recovery and Lighthouse Foundation. We do have one for Lighthouse Foundation, which is the agency we're requesting funding.

Q: Where is your income statement broken down? You're asking for \$24,000 but here you show a net income of \$5000.

A: I included Lighthouse Recovery. Lighthouse Foundation is very new.

Q: So, your income last year was \$13,000?

A: Yes, for Lighthouse Foundation. That was all private donations.

Q: On page 5 it says funds budget for a particular client, but not used, will not be redirected into any other general fund.

A: Those funds will be used for these St Charles residents, and not used in any general fund.

Q: Would you create a line item on your financial sheet?

A: Yes, we can set that aside and apply those.

O. 9:00PM Day One Pact – Steve Boisse

Day One Pact reports they lost their contract with the state of IL for IDD/NOFO. On the positive site they did get NOFO for early intervention renewed for 3 years.

That's been the most significant change. They are now looking to right-size their organization including their two properties, one in Lisle, one in Geneva.

Q: May I ask who replaced your agency?

A: Service Inc of Will County will be taking over July 1<sup>st</sup>.

Q: How long is the contract with Service Inc do you know?

A: It is for 3 years, renewable a year at a time.

Q: How is this affecting you?

A: It means we're losing about 47% of our revenue. I'll be going part time, we're making drastic cuts. We'll contract out human resources.

Q: Is that why on the front cover we're missing some of the numbers?

A: That must have been an oversight, I'm so sorry.

Q: It's in 7B; 177.

A: Oh okay. I'm sorry about that it's been a crazy few weeks. I don't have a copy on me, but I talked with him about the numbers, the numbers haven't gone up tremendously nor declined. We're seeing in the whole Kane Kendall area sort of a status quo with the numbers.

Q: Also, the budget, the last page it lists the child and family for Geneva, should it be for St Charles?

A: Yeah that's just a designator for our CF. Oh sorry, I see what you're saying.

Q: Yeah for 10C we're looking for a budget just for St Charles

A: You want a pull-out budget just for St Charles. Ok

P. 9:10PM Elderday – Liz Wiggins

Liz shared that Elderday did not have a good year financially. As of January 1, they changed scheduling and billing to make staffing more efficient. They're asking clients to pay in advance. They're working with Waubensee Small Business Center who is helping them with their strategic plan and marketing. Testing has increased from annually to quarterly to better monitor and change the program to better help meet needs. The building is also a struggle. The lease is up in May 2020 and they're looking at different properties.

Q: Do you have the application in front of you?

A: I do.

Q: You said that with the loss of some of your grants, was any of that due to personnel changes over the last couple of years?

A: Well, the one we lost the "Hundred Women Who Care" that was \$10,000. While I don't deny that all the change has upset the apple cart, three directors in three years, is hard. I don't have anything to indicate that it was a reason for the loss of grants though. No, it was more of a shifting of I'm seeing people ask for help later for their seniors, so their length of stay is shorter, and they're coming in a little sicker.

Liz shared that she focused her grant on social services. She feels their healthcare staff is what sets them apart from day care services.

Q: The only comment I would have is if you'd look through at all the Cs, like 2C, all the Cs all the way through; it's indicated that modifications are needed but none are described.

A: Ok so the modifications that I described tonight like more frequent testing? Our purpose hasn't really changed.

Q: You've marked on your application that you want to modify your application from last year.

A: I think the reason that I did that is because I didn't have an electronic copy from last year so since I was changing the verbiage, I thought I had to say it was modified.

Q: So, is 2A different from what it was from last year?

A: I didn't have a copy from last year.

Q: You're asking \$17,500 for a social worker position. It says in section four we struggle to maintain; why don't you just ask for more money?

A: Part time social worker, yes. We don't want to be greedy.

Q: Yes, but duct taped pipes? Obviously, we don't want to get grandiose but if you feel like things are getting that tight, I'm feeling the tightness here, this money might just be a band-aid because I think you want to get a master's level social worker correct?

A: Well we had one, and she resigned last week. That was our first week without her. I have a social services designee who's there right now for 15 hours a week, but I would like someone there every day.

Q: Liz do you feel like the cost break down of what you charge clients, is that information sheet available to the prospective clients when they come in; so they know up front what it would cost for a short day or a long day program?

A: Yes, and we just did re-do our bifold brochure. We've broken it down very specifically our short day is five hours, our long day is 8:30-5:30. \$85 and \$125, and we also have it very clearly written that we need 24 hours to cancel or you will be charged for that day.

Q: So, is there a short-day minimum per week?

A: Yes, a two short day minimum. A 10-hour minimum per week.

## 9. **Adjourn**

Chair Waibel asked for motion to adjourn at 9:25PM.

Motion to adjourn by Carla Cumblad second by Brian Travilla.

Aye: 6 No: 0

Meeting adjourned.

*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](mailto: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).