## AGENCY FUNDING HEARING SCHEDULE Thursday - October 1, 2020

- 6:00 LIFE-SPAN
- 6:15 NORTHWEST COMPASS, INC.
- 6:30 PEER SERVICES
- 6:45 TURNING POINT BEHAVIORAL HEALTH CARE CENTER
- 7:00 CHILDREN'S ADVOCACY CENTER
- 7:15 NAMI-CCNS
- 7:30 SEARCH, INC.
- 7:45 NORTH SUBURBAN LEGAL AID CLINIC
- 8:00 LEYDEN FAMILY SERVICE & MENTAL HEALTH CENTER
- 8:15 MARYVILLE'S FAMILY BEHAVIORAL HEALTH CLINIC

YEAR	REQUEST	ALLOCATION	CHANGE IN FUNDING
2014	\$10,000	\$5,000	0%
2015	\$10,000	\$5,500	+10%
2016	\$10,000	\$6,000	+9%
2017	\$10,000	\$7,200	+20%
2018	\$10,000	\$7,520	+4.4%
2019	\$10,000	\$7,900	+5.1%
2020	\$10,000	\$7,160	-9.8%

## Life Span, Inc.

2021 REQUEST	\$10,000
2021 RECOMMENDATION	

### COMMENTS

RETURN SHEET TO BRANKA MACKIC, AGENCY & PROGRAM COORDINATOR

## MAINE TOWNSHIP APPLICATION FOR FUNDING 2021-2022



Agency	Name Lif	e Span		
Address	s701 Lee S	Street, Suite 700,	Des Plaines, IL	60016
Phone _	847-824-0382	Fax _	847-824-5311	Email <u>life-span@life-span.org</u>
Contact	Person <u>Denic</u>	e Wolf Markham	1	Title <u>Executive Director</u>
Grant C	ontact Person _	Amy Fox		Title Deputy Executive Director
Phone _	847-824-0382		Email _	afox@life-span.org

### **Brief Description of Agency**

Founded in 1978 by a coalition of concerned women in the north and northwest suburbs of Cook County, our mission is to empower survivors of domestic and sexual violence to demand safety as a human right. We ensure responsive and appropriate treatment and delivery of services to survivors of abuse. Life Span is a client-centered organization whose aim is to change social attitudes toward domestic violence through accountability, community engagement, and systemic advocacy.

Life Span has a history of success. After 42 years of service, we have a proven track record of bringing holistic transformation to the lives of abused women and children through counseling, legal representation, advocacy, education and crisis intervention. We use what we have learned in assisting our clients to improve the systems that impact domestic violence in our society.

Agency Total Budget <u>\$3,373,921</u> Amount requesting from Maine Township <u>\$10,000</u> (Please provide a copy of your budget.) Agency Fiscal Year (e.g. March 2019-February 2020) <u>July 2020 – June 2021</u>

Total number of <u>all unduplicated clients</u> directly served during your last fiscal year <u>4,975</u>

Total number of <u>unduplicated Maine Township clients</u> directly served during your last fiscal year \_\_\_\_\_315\_\_\_\_\_

If your grant is restricted, what is the total number of unduplicated Maine Township clients directly served during your last fiscal year in the program(s) we fund? <u>N/A</u>

What is the approximate number of Maine Township clients referred to other agencies during your last fiscal year? \_

**110** Note; These clients are referred to other agencies for services that we do not provide, after a thorough assessment of their needs.

Annual salary and title of the five highest paid full-time (if applicable) employees. Salary ranges are not acceptable.

- 1. Denice Wolf Markham, Executive Director \$126,451
- 2. Amy Fox, Deputy Executive Director \$96,130
- 3. Jennifer Greene, Policy Director \$92,000
- 4. Keri McGuire, Director of Legal Services \$84,250
- 5. Laura Valiukenas, Director of Counseling \$70,000

#### 1. Is your agency not for profit? (If so, attach Certificate of Good Standing). $\square$ Yes $\square$ No

- 2. Has your organization been in business for at least one year?  $\square$  Yes  $\square$  No
- 3. Are all your programs, services, activities and facilities provided by your organization available to the residents of Maine Township?  $\boxtimes$  Yes  $\square$  No

## 4. Describe how your organization's services are currently promoted to the residents of Maine Township.

Life Span distributes agency brochures, printed in English, Spanish and Polish, at hospital emergency rooms, police stations, courthouses and other social services agencies. Life Span has a website and a Facebook page that are maintained and updated regularly. We attend local health fairs and conduct community outreach programs.

## 5. Has your organization ever received funding from Maine Township? $\boxtimes$ Yes $\Box$ No If yes, *list all years* and the allocation amount.

FY20 \$7,160, FY19 \$7,900, FY18 \$7,520, FY17 \$7,200 FY16 \$6,000, FY15 \$5,500; FY14 \$5,000, FY13 \$5,000, FY12 \$5,000; FY11 \$5,000; FY10 \$7,000; FY09 \$10,000; FY08 \$10,000; FY07 \$10,000; FY06 \$11,000; FY05 \$12,000; FY04 \$12,000; FY03 \$12,000; FY02 \$12,000; FY 01 \$12,000; FY00 \$13,000; FY99 \$13,000; FY 98 \$13,000; FY 97 \$13,000; FY 96 \$12,500; FY 95 \$12,500; FY 94 \$12,500; FY 93 \$10,000; FY 92 \$10,000; FY 91 \$ 9,500; FY 90 \$8,000; FY 88 \$7,500; FY 87 \$7,500; FY 86 \$7,500; FY 85 \$5,000; FY 84 \$1,000.

## 6. Describe how your organization used the funding received from Maine Township during the previous funding year (if applicable).

Life Span used Maine Township funds to provide counseling, advocacy and legal services to Maine Township residents who were victims of domestic and sexual violence.

## 7. Describe how your organization plans to use the requested funding from Maine Township during the upcoming funding year.

Life Span will use Maine Township funds to provide counseling, advocacy and legal services to Maine Township residents who are victims of domestic and sexual violence.

## 8. How has the COVID-19 pandemic impacted your organization and what changes have you had to implement as a result?

On Friday March 13, 2020, Life Span closed our offices to safeguard employees against the coronavirus. We did not, however, suspend services. Staff began working remotely and offering services to clients in a modified way.

Because some Life Span clients and potential clients were ostensibly confined to their residences, we extended our legal intake hours and days to 9:00 to 5:00, Monday through Friday. Since the state issued the COVID-19 related stay-at-home order, calls for services from victims of domestic violence were alarmingly reduced, initially. This fact may seem improbable at first glance, but when you consider that the victim is in close quarters with her abuser and may not have access or opportunity to seeking help, the decrease becomes self-explanatory. Others may not want to go to court for OPs due to the risk of exposure to COVID-19.

Existing clients, however, exhibited greater need in safe visitation issues. The danger victims face in being in a stay-at-home lockdown with abusers increases over time and is ongoing. The tactic of isolating victims from family and friends is now required by our government, sanctioning abusers' controlling behavior. Also, it follows that abusers in close quarters with victims and children are going to act out more.

If the victim manages to call 911, and the abuser is arrested, what is to ensure that the caller and her children will find safety from the perpetrator? According the Center for American Progress, Cook County Jail has the largest COVID-19 cluster of all jailed populations in the country. They further state that, "At the same time, jurisdictions must do all they can to ensure that more people are not sent to jails and prisons during the pandemic."

Given these realities, Life Span is facing a likelihood that now that the stay-at-home order has been lifted, victims seeking services will overwhelm the help that is available. We are now seeing an influx of clients in need of emergency assistance. Even former clients have contacted us for help, having lost their income streams from the pandemic. These job losses have meant an inability to pay for legal services, inability to pay for 1<sup>st</sup> month's rent to move out from the home they share with the abuser, etc. Area shelters are at capacity due to COVID-19. As such, we have provided emergency financial assistance for rent, mortgages, hotel stays, food and other necessities.

At the start of April, we could obtain Orders of Protection remotely at the Chicago Domestic Violence Courthouse. Gradually, civil court expanded what matters could be pursued. By the end of April, the court allowed most dealings remotely—pre-trials, hearings, etc., so we could move some cases along. What began with just emergency matters progressed to pre-trials if the judge allowed. Now almost all court matters may be held remotely. The numbers for civil legal services in March were largely unaffected because we only had half a month of data related to COVID-19 after closing our offices. There were fewer calls for service in April and early May. The calls for service, however, are now nearly at what they were pre-COVID.

For immigration, we have actually seen a very slight increase in requests. This uptick seems to be because clients are home and have the time to contact us. The majority of immigration clients are already separated from their abuser and so the stay-at-home order impacted them less as far as their ability to reach out for services.

Technologically, for several years Life Span's phone system has been housed online. This method allows staff to use our phone system in real time anywhere to make and receive calls. Our system was already set up for video calls and conference calls. Despite our capabilities, the court largely requires court calls to be handle via Zoom—another online application. As such, we created a Zoom account for staff to use.

Most clients have cellphones and we are able to talk and text with them. We have purchased an inexpensive flip phone for one client who was relying on a borrowed phone. Many clients have access to the Internet and email through their phones. Some clients have laptops or other devices which allow them to send and receive emails We send clients documents regarding their cases and discuss and make changes to the documents with email. In this way we have been able to file new OP cases and family law matters during the shutdown.

## 9. Which of the following best describes the services that your organization will be providing with the funds that you have requested? (Please check all that apply.)

□ Public safety

□ Recreation

- □ Environmental protection
- □ Public transportation
- Health

- Library
- □ Social services for youth
- $\hfill\square$  Social services for the aged
- ☑ **Other (please explain):** Services for victims of domestic violence and their children.

## 10. Describe how your organization meets the eligibility requirements for the requested funding.

Life Span does not charge fees for its services. We accept cases of victims of domestic and/or sexual violence whose case can be litigated in Cook County. Clients must be unable to afford an attorney. The majority of our cases (about 97%), are just above 125% of the federal legal services guidelines. Although we represent clients of low income, we do not have income guidelines.

## 11. Describe any new programs, services, activities or facilities that are currently proposed or contemplated by your organization.

Life Span has recently received funding to implement an expansion of programs and services. Please refer to our answer regarding **Question #30** for further elaboration.

- 12. Do you certify that the funds that you are requesting from Maine Township will be used for your organization's ordinary and necessary maintenance and operating expenses and not for any capital expenditures? ⊠ Yes □ No
- 13. If your organization is providing services for the benefit of Maine Township residents who are persons with a developmental disability, do you certify that said services shall only be provided to such Maine Township residents who are not eligible to participate in any program conducted under Article XIV of the School Code? (Applies only to persons under 22 years of age.) □ Yes □ No ⊠ N/A
- 14. Do you certify that no person shall be excluded from participation in, denied benefits of, or be subjected to discrimination under, any service, facility or activity offered or provided by your organization on the grounds of race, color, national origin, sex, gender identity, age, religion, sexual preference, marital status or disability? ⊠ Yes □ No
- 15. Do you certify that your organization will not expend any of the funds requested from Maine Township, either directly or indirectly, for any partisan political activity, or to further the election or defeat of any candidate for any office, or for lobbying or propaganda purposes designed to support or defeat any legislation, either pending or proposed, before any governmental body? ⊠ Yes □ No
- 16. If requested, do you agree to provide the following to Maine Township? (Please note: You do NOT need to include these items with your application.)
  - A. Quarterly statements or reports setting forth the services rendered and programs provided for Maine Township residents, along with the associated costs to provide such services and programs
  - B. At such times and in such forms as Maine Township may require, any other statements, records, reports, data or information pertaining to matters covered by this application (Information relating to personal, medical and financial data will be

treated as confidential.)

- C. A written report signed by your organization's executive director, or whomever else is deemed to be in charge of your organization's activities, programs, services and facilities, including the following:
  - I. A description of each program, service, activity or facility you provided or offered
  - II. A statement that all such programs, services, activities and facilities are accessible to the disabled within the meaning of the Americans with Disabilities Act and the Rules and Regulations on disabled as promulgated thereunder
  - III. An identification of those programs, services, activities or facilities, which are not accessible to the disabled
  - IV. With respect to those programs, services, activities or facilities identified in response to item 15(C)(III) above, a detailed statement setting forth the specific steps and plans (including timetables for completion) to be taken to achieve accessibility and
  - V. If structural modifications will be required to achieve accessibility, a detailed statement setting forth the modifications required and a timetable for completion

🛛 Yes	🗆 No
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- 17. If you receive any requested funds from Maine Township, do you certify that your organization will maintain general liability insurance coverage in an amount not less than \$1 million, naming Maine Township as a co-party insured, and do you further agree to provide Maine Township with a certified copy of said policy of insurance, along with the declaration sheet, binder and any exclusions related to said policy of insurance? ⊠ Yes □ No
- 18. If you receive any requested funds from Maine Township, do you certify that your organization will indemnify and hold harmless, protect and defend, at its own cost and expense, Maine Township, its property, officers, agents, employees, assigns, successors, transferees, licensees, invitees and/or any other persons or property standing in the interest of Maine Township, from any and all risks, suits, damages, expenses, including without limitation reasonable attorneys' fees and court costs, or claims due to any acts or omissions of your organization? ⊠ Yes □ No
- 19. What is the geographic service area of your organization?

Life Span serves all residents of Cook County, with an emphasis on the north and northwest suburbs

20. Does your organization charge for services?  $\Box$  Yes  $\boxtimes$  No

If yes, does your organization offer a sliding fee scale?

☐ Yes. Attach 14 copies of the sliding fee scale.

### $\boxtimes$ No. Please explain how charges are determined.

Life Span does not charge a fee for any service. We have developed a per diem rate for funding purposes\*

Individual counseling:\$65/hourAdvocacy:\$65/hourGroup counseling:\$45/hourLegal representation\$125/hour

\*Please note: these rates are below market value

21. If your organization does charge fees, would you be willing to wave application, program and other fees on a case by case basis for Maine Township residents whom we refer directly to your organization for assistance? □ Yes □ No ⊠ N/A

### 22. Are volunteers used within your organization?

### $\boxtimes$ Yes. Please indicate how many volunteers you have and how they are utilized.

Life Span's Law Student Coordinator, Senior Attorney Jean Bax, chooses our agency's interns. This selection is based on their interest in public interest law, their experience, whether they have taken trial advocacy courses, and their language skills and cultural competencies. Jean coordinates their work and ensures that each student has the best possible experience at our agency working with clients and learning new skills. Our lawyers rely on students for the immediacy of their research abilities, but that is far from their only focus at our agency. Life Span uses anywhere from four to eight law students a year in all aspects of our practice. Law students learn to interview clients, prepare pleadings, file documents at the courthouse, negotiate with opposing counsel, and, if 711 licensed, may participate in a court hearing. All law student work is conducted under the close supervision of the attorney who represents the client.

This year Life Span is hosting one Masters of Social Work student intern at our Des Plaines' office. She is 40-hour trained and able to work directly with clients under the supervision of our Director of Counseling, Laura Valiukenas.

Life Span's Board of Directors and Associate Board of Directors is comprised of eighteen volunteer members. Their objective is to support the overall mission and activities of Life Span by acting as ambassadors for the agency. Life Span encourages our board members to share resources, time, and talent to provide leadership and raise funds to support our agency and its mission. Our board members will play a critical role in growing Life Span's national presence and engaging the community through fundraising, networking, and outreach.

### □ No. Please give specific reasons for not using volunteers.

### 23. Does your organization provide any bilingual services?

#### $\boxtimes$ Yes. Please indicate languages.

We have a diverse staff, and it is our goal to serve clients in their own language by a staff person who shares elements of the client's culture and/or religion. Life Span offers services in Spanish, Polish, Arabic, Korean, Hindi, Uesu, Czech, Greek and Tagalog, a major language of the Philippines.

We use a telephone relay system to communicate with deaf and hard of hearing clients as well as in-person interpreters. If necessary, we use the Language Line for interpretation services if a staff member does not speak the client's language.

🗆 No

### 24. Does your organization request proof of U.S. citizenship from its clients?

□ Yes. Please describe briefly.

🛛 No

# 24. Does your organization participate in cooperative programs with any other community agencies? (e.g. social service, not-for-profits, municipal agencies, etc.) Please explain. ☑ Yes □ No

Our agency has well-established collaborative relationships with many organizations which provide collateral services to those of our agency. We network with these agencies, attend meetings about issues, practice, and systemic problems in our subject matter areas, and work together to advocate for systems change. As these relationships are long standing, we ensure that they remain on-going by communicating with our colleagues, seeking advice and being available to help with cases, and maintaining reciprocal referral relationships.

Some of the agencies with which we work in this way include Heartland Alliance, Apna Ghar, KAN-WIN, Family Rescue, Chicago Metropolitan Battered Women's Network, Resilience, (formerly known as Rape Victim Advocates), Illinois Attorney General, Cook County State's Attorney, Domestic Violence and Mental Health Policy Initiative, The Bridge, Between Friends, Evanston YWCA, Neapolitan Lighthouse, WINGS, Jewish Vocational Services, Sarah's Inn, Illinois Coalition Against Domestic Violence, and many others.

To help clients access childcare, we work with the Day Care Action Council and the Illinois Network of Child Care Resource and Referral Agencies to obtain referrals to daycare providers. If appropriate, we will refer project clients to Life Span's legal services to secure child support and daycare expenses from the abuser. Housing is a difficult issue for DV victims. If an abuser is in the home, we will refer the client to Life Span's legal services for an order of protection excluding the abuser from the home. Short-term housing needs can be met by DV shelters: WINGS, Greenhouse, the House of the Good Shepherd, Family Rescue, Neapolitan Lighthouse, and Southwest Women Working Together. For transitional and permanent housing, we refer clients to Housing Opportunities for Women and the Chicago Housing Authority. We rely on a number of referrals for housing, particularly Catholic Charities and Lutheran Social Services. Kenneth Young Center is a common referral source to and from for mental health issues

Life Span staff also provides training to those helping professionals who work with victims of domestic violence in an effort to ensure responsive and appropriate delivery of services. Some of our efforts have been in the areas of training police, State's Attorneys, judges, emergency room personnel, social workers and clergy. We also provide advocacy and consultation regarding public and institutional policies that will impact victims of domestic violence. We partner and provide referral services in collaboration with the following agencies: WINGS, Lutheran General Hospital, Circuit Court of Cook County, CEDA Northwest, and Harper College. including substance abuse, as is Lutheran General Hospital.

Life Span staff also provides training to those helping professionals who work with victims of domestic violence in an effort to ensure responsive and appropriate delivery of services. Some of our efforts have been in the areas of training police, State's Attorneys, judges, emergency room personnel, social workers and clergy. We also provide advocacy and consultation regarding public and institutional policies that will impact victims of domestic violence. We partner and provide referral services in collaboration with the following agencies: WINGS, Lutheran General Hospital, Circuit Court of Cook County, CEDA Northwest, and Harper College.

With a Victim of Crime's Act grant in FY18 Life Span created a collaboration with KAN-WIN in Park Ridge. KAN-WIN provides bilingual, bicultural services to victims of Korean descent. Life Span is expanding our legal services to this population with the assistance of the cultural expertise and interpretation services of KAN-WIN.

## 25. Does your organization participate in cooperative programs with any other service organizations? (e.g. Rotary, Kiwanis, Optimist, etc.) Please explain. $\boxtimes$ Yes $\square$ No

Life Span has received funding for a number of years from the Park Ridge Community Fund. We attend their annual committee meetings and give presentations to their members about our services.

## 26. Does your organization participate in cooperative programs with any community businesses? Please explain. ⊠ Yes □ No

Life Span collaborates with Dress for Success to obtain interview and work clothing for our clients. We work with the Women's Program at Harper College which offers a special program for domestic violence victims: Women at College in Community as well as a Women's Program that provides Educational Planning, Job Preparation and Personal Support for low-income single parent, limited English or non-traditional career seekers.

## 27. List all sources of funding or support that your organization currently receives, including the total amount, frequency, duration, and percentage of any such support.

Funding Source	Amount	Frequency & Duration	Percentage
Maine Township	\$7,160	Annual/12 mos.	<1%
Foundations	\$302,000	Annual/12 mos.	9%
Private Donors	\$46,911	Varies	1%
Federal	\$1,876,335	Annual/12 mos.	56%
State	\$650,200	Annual/12 mos.	20%
Municipalities	\$78,000	Annual/12 mos.	2.3%
Other Townships	\$44,300	Annual/12 mos.	<1%
Other (list all) Lawyers Trust			
Fund	\$363,175	Annual/12 mos.	11%
United Way		Annual/12 mos.	
Total	\$3,373,921		100%

# 28. What type of fund-raising efforts has your organization had this year? Please list event names and specify the REVENUE and COSTS for fundraiser(s) and what program(s) the money was raised for.

Life Span held our second annual "Light to Life" gala in FY20. We honored author and host of "Sound Opinions" syndicated on radio station WBEZ, Jim DeRogatis. Mr. DeRogatis wrote "Soulless: The Case Against R. Kelly," after 19 years of investigating singer Robert Kelly's crimes against girls and young women. His work—believing victims, and seeking to hold perpetrators accountable—mirrors our efforts here at Life Span. The event grossed \$36,980 and netted \$23,812. Over 125 guests were in attendance.

### 29. What fundraising efforts are planned for next year?

In FY21, we cancelled our fall fundraiser, because of the social distancing restrictions necessitated by COVID-19. We are challenging our board of directors to help raise funds through a virtual challenge event this fall. While we don't expect this effort's revenue to reach the FY20 event revenue, we also expect very minimal Outside of events, we are doing more digital fundraising, utilizing e-appeals, a better path to donating on our website, and driving social media traffic to our newly revamped website. Finally, we are adding Google analytics this year, enabling us to see how visitors are navigating our site, so that we may better focus on both acquiring donors and clients.

# 30. Please explain any changes that have occurred in your organization in the past year (i.e. new program(s), expansion or deletion of program(s), personnel, administration, major purchases or facility, etc.).

Throughout FY19, we saw an increase in referrals from court personnel, prosecutors and law enforcement for human trafficking services, as these survivors are likely to have experienced domestic violence. We do not know, however, how many of these survivors exist in Cook County, because statistics are kept for "johns" and pimps, but not for the victims of these relationships and crimes.

In FY20, with the addition of funding from the Illinois Department of Human Services, we expanded our advocacy services to victims of human trafficking who are also victims of domestic violence. Victims who have experienced human trafficking need a variety of trauma informed services to obtain safety and exit the life of human trafficking. These include crisis intervention, education on dynamics of human trafficking, safety planning, access to referrals and an explanation of legal rights and remedies. The advocate will concentrate on IDVA advocacy. These services include accompanying clients to police stations to file charges.

Those who have experienced human trafficking need a variety of trauma informed services to obtain safety and exit the life of human trafficking. These include crisis intervention, education on dynamics of human trafficking, safety planning, access to referrals and an explanation of legal rights and remedies. Because of the expertise that this project calls for, Life Span has added a counselor/advocate to our staff who is experienced in providing supportive services to human trafficking victims.

The counselor/advocate will explain rights and remedies under the Illinois Domestic Violence Act (IDVA), power and control, problem solving, and how to obtain an Order of Protection against the pimp/abuser, considering the special safety needs of this population. The counselor/advocate may accompany the survivor to court to provide IDVA advocacy. We anticipate significant resistance from the justice system to addressing the needs of these survivors. Victim blaming is not a thing of the past for any victim, and for those engaged in prostitution, forced or not, the blame from prosecutors and judges will likely be immense.

The counselor/advocate will work with Life Span attorneys to put forward the best cases for order of protection for these clients and will provide ongoing emotional support and court accompaniment during the arduous court process. We expect victims to need significant ongoing encouragement to stay engaged in this process to completion.

#### 31. Please provide numerical breakdown of all staff member positions.

1.	Administration & Administrative Support	2
2.	Management of Service Providers	4
3.	Direct Service Providers	34

### 32. Number of certified staff members All

### 33. What kinds of certifications are required for your service providers?

Illinois law requires that individuals providing direct services to victims of domestic violence receive 40-hours of training from a domestic violence agency. All staff are certified. In addition, 4 staff have received the highest domestic violence certification in Illinois—that of, Certified Domestic Violence Professional (ICDVP).

### 34. Number of licensed staff members <u>15</u>

#### 35. What kind of licensing is required for your service providers?

All attorneys are required to be licensed to practice law in the state of Illinois. We require that all counselors have a bachelor or master's degree in psychology, social work or a related field, as well as experience working with domestic violence victims.

#### 36. Please list all accreditations your organization has earned.

Life Span staff and the agency maintain two optional certifications and accreditations. Five Life Span staff have Illinois Domestic Violence Professionals Certifications and Life Span is an accredited ICDVP training facility.

## 37. How would your organization be affected if it received a reduction in Township funding or if there was a complete elimination of Township funding?

Township has contributed on average, at least \$7,000 to Life Span for the last ten years. While we are extremely grateful for Maine Township's continued support, we believe it is notable that Life Span provides more hours of service to Maine Township residents than any of the other 4 townships that fund our agency.

Our relationship with Maine Township is strongest in that Life Span's suburban office is located in the Township. More of our clients live in Maine Township than any other township, and we perform more outreach and trainings and technical assistance to individuals and organizations in the Township than any of the other four townships from whom we receive funds. A reduction in funding would compromise the direct services we are able to provide to Township residents.

A complete elimination of Township funding would be detrimental to Life Span and families we serve. We rely on Township funds to support the salaries of counselors, advocates and attorneys who provide direct services to Township residents. Without Maine Township support, we could lose the substantial federal, state and private grants we have been able to secure using Township funds to meet match requirements. Finally, Life Span's tremendous growth in size and scope of services within the Des Plaines community since our inception 42 years ago, has been possible because of the support and concern of local residents, community groups and government.

I hereby certify that I am authorized to execute this application on behalf of the organization listed below and that the statements contained herein are true and accurate.

Life Name of Applicant Organization \_\_\_\_\_ By Amy C Authorized Representative Amy C. Fox Printed Name Dir. Title Den. Evec 8 Date

SUBSCRIBED and SWORN to before me this 28 day of August, 2020. OFFICIAL SEAL Notary Enky (. Smith ERIKA C SMITH NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires May 10, 2023

Life Span	FY21
	Agency Budget
EXPENSES	
Salaries	\$2,284,027
Fringe	\$475,604
Consultants	\$52,000
Accounting and Audit	\$25,000
Payroll Processing Fees	\$6,700
Occupancy	\$248,290
Utilities	\$4,100
Insurance	\$40,000
Supplies	\$13,000
Program Supplies	\$2,000
Client Litigation costs	\$20,000
Travel	\$20,000
Direct Client Assistance	\$56,900
Furn. & Equip. Maint. & Purch.	\$40,000
Communications	\$16,000
Postage	\$10,100
Printing	\$7,500
Depreciation	\$6,200
Staff Development & Meetings	\$10,000
Subscriptions & Dues	\$33,000
Special Events	\$2,000
Misc.	\$1,500
EXPENSE TOTAL	\$3,373,921
REVENUE	FY21 Budget
Government Funding	FIZI Duuget
Chic. Dept. Family & Sup Servs./CDBG	\$66,000
City of Des Plaines	and the second
Illinois Attorney General	\$3,750
Illinois Attorney General-Immigration	\$23,000 \$23,000
Illinois Attorney GeneralMarried Families	and a subscription of the
ICADV Underserved	\$80,450 \$66,747
ICADV/VOCA Adult	
ICJIA/VOCA Civil Legal Services	\$567,886 \$956,800
ICJIA MDT SA	\$956,800
ICJIA MDT DV	
IDHS	\$50,506
	\$523,750
Office of Violence Against Women-LAV	\$200,000
Village of Arlington Heights	\$4,500
Village of Schaumburg	\$3,750
Townships	620.000
Elk Grove	\$20,000
Maine	\$10,000

Northfield	\$4,500
Schaumburg	\$7,500
Wheeling	\$15,300
Government TOTAL	\$2,661,835
Private Funding/Foundations	
Alphawood Foundation	\$17,500
Bruce Foundation	\$5 <i>,</i> 000
Chicago Bar Foundation	\$17,50
Chicago Foundation for Women	\$15,00
Community Memorial Foundation	\$25,00
Crown Family Philanthropies	\$50,00
Gasser Foundation	\$6,00
Illinois Equal Justice	\$25,00
Illinois Bar Foundation	\$5,00
Mary Lou Downs Foundation	\$10,00
Major League Baseball	\$50,00
Anonymous Corp	\$6,00
Northern Trust	\$10,00
Polk Bros Foundation	\$60,00
Foundations TOTAL	\$302,00
Private Funding/Other	
Individual Contributions	\$15,00
Lawyers Trust Fund	\$350,00
Additional Corps and Fdnts	\$3,51
Board Fundraising & Giving	\$20,00
United Way	\$13,175
Park Ridge Community Fund	\$1,800
Fee for Service	\$4,500
Interest Income	<sup>~</sup> \$2,10
Other Private Funding TOTAL	\$410,08
REVENUE TOTAL	\$3,373,92
surplus/deficit	\$

YEAR	REQUEST	ALLOCATION	<b>CHANGE IN FUNDING</b>
2014	\$12,000	\$9,000	+5.9%
2015	\$12,000	\$9,000	0%
2016	\$15,000	\$9,000	0%
2017	\$9,000	\$7,200	-20%
2018	\$7,200	\$6,160	-14.4%
2019	n/a	Missed Deadline	n/a
2020	\$8,500	\$2,900	-72% (2018)

## Northwest Compass, Inc. (formerly CEDA Northwest)

2021 REQUEST	\$10,000
2021 RECOMMENDATION	

### COMMENTS

RETURN SHEET TO BRANKA MACKIC, AGENCY & PROGRAM COORDINATOR

## MAINE TOWNSHIP APPLICATION FOR FUNDING 2021-2022



### Agency Name: Northwest Compass Inc.

Address: 1300 W. Northwest Hwy., Mount Prospect, IL 60056

Phone: 847-392-2344

Phone 847-305-2764

Fax: 847-305-3972

Email:

Contact Person: Sonia Ivanov

Title: Executive Director

Grant Contact Person: Sonia Ivanov

Email: sivanov@northwestcompass.org

### Brief Description of Agency:

Northwest Compass is a 501 (C) 3 nonprofit organization that has provided various programs to the moderateand low-income populations in the Northwest suburbs of Chicago in Cook County for more than 30 years. Its mission has been to enhance the community by providing emergency services, education, and empowerment which foster personal responsibility for those that are vulnerable or in crisis.

Northwest Compass (NWC) provides comprehensive solution-focused case management, brief crisis intervention, counseling and assistance to people experiencing housing instability or homelessness by connecting them to housing options, resources, and various supportive services. The programs strive to positively impact the lives of our clients in three major categories – Stabilization, Empowerment and Housing. These include access to our in-house food pantry, linkage to mainstream benefits, career coaching and job readiness assistance, money management, life skills, legal assistance and more. The Housing Program consists of Transitional Living program, Permanent Supportive Housing Program, Youth Demonstration Housing Program, housing counseling and homelessness diversion and prevention, and immediate short-term assistance to prevent individuals and families at risk of becoming homeless for the first time or to assist them to exit homelessness.

Northwest Compass is the Lead Agency in the North as a partner in the Coordinated Entry Initiative in the Suburban Cook County area and the only one Walk -In Center in our area who is experiencing homeless or housing instability. As a lead agency in the region, we provide the most comprehensive individual housing counseling, navigation, assistance, and education for a clientele experiencing homelessness or housing crisis.

Most of the programs include assessment, wrap around services and care coordination in order to provide the needed assistance and support, so people can make better informed choices and build a foundation toward creating a stable and sustainable future.

Agency Total Budget: <u>\$2,574,351</u> Amount requesting from Maine Township: \$10,000 (Please provide a copy of your budget.) Agency Fiscal Year (e.g. March 2019-February 2020): July 1<sup>st</sup> 2020 – June 30<sup>th</sup> 2021

Total number of <u>all unduplicated clients</u> directly served during your last fiscal year <u>3744</u>

Total number of <u>unduplicated Maine Township clients</u> directly served during your last fiscal year <u>\_563</u>

If your grant is restricted, what is the total number of unduplicated Maine Township clients directly served during your last fiscal year in the program(s) we fund? <u>NA</u>

What is the approximate number of Maine Township clients referred to other agencies during your last fiscal year? \_\_\_\_\_12\_\_\_

Annual salary and title of the five highest paid full-time (if applicable) employees. Salary ranges are not acceptable.

- 1. Executive Director: <u>\$67,500</u>
- 2. Housing Program Manager: <u>\$ 42,840</u>
- 3. Accountant: <u>\$43,493</u>
- 4. Case Manager: <u>\$36,067</u>
- 5. Case Manager: <u>\$36,067</u>
- 1. Is your agency not for profit? (If so, attach Certificate of Good Standing).  $\square$  Yes  $\square$  No
- 2. Has your organization been in business for at least one year?  $\square$  Yes  $\square$  No
- 3. Are all your programs, services, activities, and facilities provided by your organization available to the residents of Maine Township?  $\boxtimes$  Yes  $\square$  No
- 4. Describe how your organization's services are currently promoted to the residents of Maine Township.
- 5. Northwest Compass communicates on a monthly basis with the local school district, libraries, AHAND members, etc. to make sure the community is aware of all of the available services we provide, and how to contact us when needed. In addition, Northwest Compass publicizes funding from Maine Township on its website, on social media sites such as Facebook, and Linked In, and through public service announcements and press releases.

All our programs are open and utilized by Maine Township residents. Our programs are promoted through placing flyers/brochures at the Maine Township office but also other organizations as well. We frequently attend tabling events and promote our services where Maine Township residents may attend. We also communicate with other organizations that operate in Maine Township, therefore receiving referrals from them.

6. Has your organization ever received funding from Maine Township? ⊠ Yes □ No If yes, *list all years* and the allocation amount.

Grant Period 03/01/14-02/28/15 = \$9,000 Grant Period 03/01/15-02/28/16 = \$9,000 Grant Period 03/01/16-02/28/17 = \$9,000 Grant Period 03/01/17-02/28/18 = \$7,200 Grant Period 03/01/18-02/28/19 = \$6,160 Grant Period 03/01/19-02/28/20 = \$2,900

## 7. Describe how your organization used the funding received from Maine Township during the previous funding year (if applicable).

We served Maine Township residents who have been experiencing personal economic and housing crisis and provided solution focused case management, housing counseling and limited financial assistance, connection to main stream benefits and supportive services. Program staff have provided follow-up services with clients to assure their current housing situation and well-being needs continue to be met.0

8. Describe how your organization plans to use the requested funding from Maine Township during the upcoming funding year.

The requested funds will be allocated to provide \$5,000 for Helping Hands and \$5,000 for HYPE (Helping Youth on the Path to Empowerment) and homeless prevention. The Helping Hands program covers life's needs of those people for whom there are no other programs available, or they do not qualify for those existing programs. HYPE addresses life's challenges for youth in the age bracket of 18-24 years old who are unstably housed and facing an uncertain future.

## 9. How has the COVID-19 pandemic impacted your organization and what changes have you had to implement as a result?

The COVID-19 pandemic has impacted our organization greatly. We are seeing a greater volume of people receiving our services. More people have been coming to our office and contacting us for our food pantry and housing services. With many people laid off and having a reduced income, many are struggling to pay their rent and/or mortgage.

As a result of COVID-19 we adapted how we conduct our business to keep our service participants and staff safe. We use plexiglass dividers between the service participants and staff when conducting in-person applications. We promote the use of masks and have hand sanitizers in convenient locations. We adapted our food pantry services to be as touch free as possible.

## 10. Which of the following best describes the services that your organization will be providing with the funds that you have requested? (Please check all that apply.)

- □ Public safety
- □ Environmental protection
- □ Public transportation

- Recreation
  Library
- $\boxtimes$  Social services for youth

Health

- $\boxtimes$  Social services for the aged
- Other (please explain): housing programs and crisis counseling

## 11. Describe how your organization meets the eligibility requirements for the requested funding.

All residents of Maine Township who are experiencing homelessness or crises in housing qualify for our Housing Program of counseling services. In order to be eligible for services in the Housing Program, participants must reside within the boundaries of Maine Township, fulfill the low-income guidelines used by CDBG, and be in danger of being evicted, in a housing crises or homeless (as defined by HUD).

12. Describe any new programs, services, activities, or facilities that are currently proposed or contemplated by your organization.

NWC is the Lead agency and a Walk-In Center for the Coordinated Entry in the North Region of Cook County for the Alliance to End Homelessness. NWC is actively involved with other service providers, local businesses, and landlords coordinating housing resources and support, and various stabilization services to help clients actively find solutions.

The organization has been increasing its focus on issues such as youth (HYPE),

and veteran homelessness, seeking additional sources of funding and network partnerships for innovative solutions. We have been working closely with local school districts and we strive to support HB261.HYPE focuses its efforts in Maine Township residents age group 18 to 24, for whom there are limited or no safety-net services. HYPE is providing access to storage lockers, food and basic necessity. linkage services to and benefits. as well as educational opportunity exploration services, career coaching, job readiness and linkage to employment, money management, legal services, life skills, housing counseling and navigation, connection to other housing options and rent assistance if available.

- 13. Do you certify that the funds that you are requesting from Maine Township will be used for your organization's ordinary and necessary maintenance and operating expenses and not for any capital expenditures?  $\boxtimes$  Yes  $\square$  No
- 14. If your organization is providing services for the benefit of Maine Township residents who are persons with a developmental disability, do you certify that said services shall only be provided to such Maine Township residents who are not eligible to participate in any program conducted under Article XIV of the School Code? (Applies only to persons under 22 years of age.) ⊠ Yes □ No
- 15. Do you certify that no person shall be excluded from participation in, denied benefits of, or be subjected to discrimination under, any service, facility or activity offered or provided by your organization on the grounds of race, color, national origin, sex, gender identity, age, religion, sexual preference, marital status or disability? ⊠ Yes □ No
- 16. Do you certify that your organization will not expend any of the funds requested from Maine Township, either directly or indirectly, for any partisan political activity, or to further the election or defeat of any candidate for any office, or for lobbying or propaganda purposes designed to support or defeat any legislation, either pending or proposed, before any governmental body? ⊠ Yes □ No
- 17. If requested, do you agree to provide the following to Maine Township? (Please note: You do NOT need to include these items with your application.)
  - A. Quarterly statements or reports setting forth the services rendered and programs provided for Maine Township residents, along with the associated costs to provide such services and programs
  - B. At such times and in such forms as Maine Township may require, any other statements, records, reports, data or information pertaining to matters covered by this application (Information relating to personal, medical and financial data will

be treated as confidential.)

- C. A written report signed by your organization's executive director, or whomever else is deemed to be in charge of your organization's activities, programs, services and facilities, including the following:
  - I. A description of each program, service, activity or facility you provided or offered
  - II. A statement that all such programs, services, activities and facilities are accessible to the disabled within the meaning of the Americans with Disabilities Act and the Rules and Regulations on disabled as promulgated thereunder
  - III. An identification of those programs, services, activities or facilities, which are not accessible to the disabled
  - IV. With respect to those programs, services, activities or facilities identified in response to item 15(C)(III) above, a detailed statement setting forth the specific steps and plans (including timetables for completion) to be taken to achieve accessibility and
  - V. If structural modifications will be required to achieve accessibility, a detailed statement setting forth the modifications required and a timetable for completion

🛛 Yes 🛛 No

- 18. If you receive any requested funds from Maine Township, do you certify that your organization will maintain general liability insurance coverage in an amount not less than \$1 million, naming Maine Township as a co-party insured, and do you further agree to provide Maine Township with a certified copy of said policy of insurance, along with the declaration sheet, binder and any exclusions related to said policy of insurance?
  - 🛛 Yes 🛛 No
- 19. If you receive any requested funds from Maine Township, do you certify that your organization will indemnify and hold harmless, protect and defend, at its own cost and expense, Maine Township, its property, officers, agents, employees, assigns, successors, transferees, licensees, invitees and/or any other persons or property standing in the interest of Maine Township, from any and all risks, suits, damages, expenses, including without limitation reasonable attorneys' fees and court costs, or claims due to any acts or omissions of your organization? ⊠ Yes □ No
- 20. What is the geographic service area of your organization?

Northwest Suburban Cook County-The service area includes the following townships: Maine, Palatine, Elk Grove, Wheeling, Hanover, Barrington, and Schaumburg

21. Does your organization charge for services?  $\Box$  Yes  $\boxtimes$  No

If yes, does your organization offer a sliding fee scale?

 $\Box$  Yes. Attach 14 copies of the sliding fee scale.

 $\Box$  No. Please explain how charges are determined.

- 22. If your organization does charge fees, would you be willing to wave application, program and other fees on a case by case basis for Maine Township residents whom we refer directly to your organization for assistance? ⊠ Yes □ No
- 23. Are volunteers used within your organization?

⊠ Yes. Please indicate how many volunteers you have and how they are utilized.

Northwest Compass has implemented a staffing plan that incorporates an approach utilizing a combination of skill-based volunteers, and interns to accomplish administrative tasks in support of staff. We have seen our vision become a reality where volunteers have used their passion, skills, and knowledge to be a seamless extension of our portfolio of services and become advocates of our mission. For fiscal year 2020 (07-01-2019 to 06-30-2020) Northwest Compass has used a total of 6,121 volunteer hours, and a total of 4,215 intern hours, contributing an estimated value of \$206,720 towards achieving our goals.

 $\Box$  No. Please give specific reasons for not using volunteers.

### 24. Does your organization provide any bilingual services?

Yes. Please indicate languages. Spanish, Romanian

🗆 No

25. Does your organization request proof of U.S. citizenship from its clients?

 $\Box$  Yes. Please describe briefly.

🛛 No

24. Does your organization participate in cooperative programs with any other community agencies? (e.g. social service, not-for-profits, municipal agencies, etc.) Please explain.
 ☑ Yes □ No

Northwest Compass is an active participant in AHAND, representing all housing agency providers in Northern Cook County and the North Region of the Alliance to End Homelessness in suburban Cook County. As a part of the Alliance's efforts to respond to HUD's requirements for greater collaboration to end homelessness, Northwest Compass is the lead agency in the North Region in an initiative of the Alliance called Coordinated Entry. In this capacity, Northwest Compass is working with all social services, and other providers in the Northern Suburbs of Cook County.

25. Does your organization participate in cooperative programs with any other service organizations? (e.g. Rotary, Kiwanis, Optimist, etc.) Please explain. ⊠ Yes □ No Northwest Compass is the Lead agency and a Walk-In Center in the North Region of Suburban Cook County and work with clients referred to us from each of the four access points, including Call Center (phone/internet); Street Outreach, emergency shelters, and the walk-In Center.

In addition, we also receive referrals from our own network of other social service providers, and those crisis response system entities including police departments and hospital emergency rooms. Staff maintains frequent communications with the liaisons for homeless

students in the local school districts, social worker in local hospitals and police departments, and the staff of health and human service departments of local municipalities, advising them of our housing and supportive services being available regardless of race, color, origin, religion, sex, age, familiar status, and disability. The staff attends various fairs and meetings to disseminate information about available programs and services for the homeless population.

- 26. Does your organization participate in cooperative programs with any community businesses? Please explain. ⊠ Yes □ No Northwest Compass works closely with several area banks that assist clients with housing education, budgeting, and financial counseling. We also coordinate and participate with area businesses to conduct projects such as food drives, landscaping, painting projects, and continuing education for staff and volunteers. In addition, Northwest Compass works with local schools, and libraries to coordinate seminars and/or workshops to further the effort to establish a stable housing environment.
- 27. List all sources of funding or support that your organization currently receives, including the total amount, frequency, duration, and percentage of any such support.

Funding Source	Amount	Frequency & Duration	Percentage
Maine Township	\$2,900	•	% .11
Foundations	\$150,000		% 5.83
Private Donors	\$48,000		% 1.86
Federal	\$807,537		% 31.37
State	\$489,373		% 19.01
Municipalities	\$50,000		% 1.94
Other Townships	\$40,000		% 1.55
Other (list all)	986,541	United Way, UP, BCBS, CV	% 38.32
Total	2,574,351		100%

- 28. What type of fund-raising efforts has your organization had this year? Please list event names and specify the REVENUE and COSTS for fundraiser(s) and what program(s) the money was raised for.
  - Bi-Annual Appeal
  - 3<sup>rd</sup> Party Fundraising
  - Due to the COVID-19 all of our fundraising events have cancelled

### 29. What fundraising efforts are planned for next year?

Northwest Compass is actively seeking additional funding and support to increase revenue, extend outreach services as well as raising awareness within the community. NWC is in the process of revitalizing our marketing and fundraising profile for FY 2021.

- 30. Please explain any changes that have occurred in your organization in the past year (i.e. new program(s), expansion or deletion of program(s), personnel, administration, major purchases, or facility, etc.).
  - Board Member turn-over
  - o Expansion of homelessness prevention/diversion
  - Eliminated the CEO position
  - Expansion of HYPE program
  - Expansion of Program Activities Just Housing Initiative, Census, Community Convener Project, Youth Housing Demonstration Project, and more
- 31. Please provide numerical breakdown of all staff member positions.

1.	Administration & Administrative Support	2	
2.	Management of Service Providers	1	
3.	Direct Service Providers	7	

- 32. Number of certified staff members \_\_\_\_\_
- 33. What kinds of certifications are required for your service providers? None
- 34. Number of licensed staff members \_\_\_\_1
- 35. What kind of licensing is required for your service providers? None
- 36. Please list all accreditations your organization has earned.
- 37. How would your organization be affected if it received a reduction in Township funding or if there was a complete elimination of Township funding?

Our capacity to serve Maine Township residents would be limited. Small amount of financial assistance through Helping Hands funds can have a huge impact on the client stability. With this type of funding, Northwest Compass addresses the gap in services and prevents an escalation in crisis.

I hereby certify that I am authorized to execute this application on behalf of the organization listed below and that the statements contained herein are true and accurate.

Name of Applicant Organization:

Northwest Compass Inc.

Us By:

Authorized Representative

**Printed Name** 

Sonia Ivanov

Title

**Executive Director** 

Date

08/27/2020

Anna Klimkon

Subscribed and sworn to before me

tints 16 day of at Arlington Heights, County of Cook, State of Illinois.

Mary Notary Public DIC Notary Public, State of Illinois Commission Expires Nov. 26,2020

<u>20</u>	21 Budget	والارتباط فاستعادهم والمناف المتعادي والعرار المنافع مالم ورداني	n - ana ana ana amin'ny
FS Year 7	/1/20 6/30/21	an a	
		FS 2021 Budget	
[1] The second secon			
venue Townships	$\left\  g_{1,0} - g$	\$ 48,000	2%
Wheeling Township	30,000	<b>T</b> .	1.1.2 %1 1999001 3.44
Maine Township	5,000	2. We have a set of the set of	a and a second dear
Elk Grove Township	5,000	ang	
Palatine Township	5,000	a constant a succession and a succession of a	
Schaumburg Township	3,000	TABLE IN THE ADDRESS OF THE PARTY AND	
Municipalities	and the second	174,034	7%
Village of Schaumburg	9,775		
Village of Palatine	2,500		n ar cae cre re
Village of Arlington Heights	4,000		an el ener
City of Des Plaines - HHS	4,209		
City of Des Plaines	14,900		
Village of Mount Prospect	14,250		
Municipalities - Cares		124,400	5%
City of Des Plaines	44,400		
Village of Mount Prospect	40,000		
Village of Schaumburg	40,000		
United Way		65,809	3%
United Way	25,000		
United Way - Extention	7,175		
United Way - EFSP	15,634	a a serie and a series of a	1
United Way - Cares	18,000		
Rents Apartments		45,000	2%
Jefferson	30,000		
PSH Tenants	15,000		
YHDP	20,000	20,000	1%
Ceda Rent Income		15,400	1%
Unrestricted Contributions	react and the second	35,548	1%
Senator's Grant	enered er en er	50,000	2%
The second of the second secon		1,541,160	60%
Government/Federal Grants	147,634		دلوب ال ال ا
Jefferson HUD	164,780		1
PSH HUD	495,123	· · · ·	2
YHDP - TH/RRH	80,300		:
YHDP - SN	76,500		
Coordinated Entry	45,000		
IDHS COA	5,000		
IDHS CM - Reimbursement			
ESG IL	50,343		
ESG Cook County	37,450		
ESG Cares Act	439,030	1	

Grants-Foundations/Private Fundraising	200,000 35,000	\$	35,000	1%
In-Kind Donations (Food Connection)	55,000	\$	220,000	9%
		\$	2,574,351	100%
PENSES		. agent a s		
Client Program & Service		\$	536,769	47%
Contract Wages and Benefits			17,920	2%
Direct Client Support			40,002	4%
Office Expense			6,264	1%
Professional Services			1,059	0%
Equipment Purchases			699	0%
Equipment Expense			2,333	0%
Food Distributed (non cash value)			193,473	17%
Occupancy Costs			198,810	17%
Mortgage Interest			3,807	0%
Miscellaneous	2 5 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		10,836	1%
Senator Grant			50,000	4%
Fundraising			2 5 10 10 10 10 10 10 10 10 10 10 10 10 10	
Adminstrative			76,825	7%
		1 <u>1</u>		
Total Expenses		\$	1,138,797	100%
NET SURPLUS (DEFICIT)	, , , , , , , , , , , , , , , , , , ,	\$	1,435,554	
Other Sources (Uses ) of Funds		 1		
Add Back Depreciation Expense ADD Back IN-KINd RevenE/Expenses			96,526 (17,855)	
Mortage Payments			(12,000)	
IDHA Payments			TBD	
the second se			н н н 1 1	
INCREASE/(DECREASE) IN CASH		\$	1,502,225	

YEAR	REQUEST	ALLOCATION	CHANGE IN FUNDING
2014	\$5,000	\$2,500	+25%
2015	\$5,000	\$3,000	+20%
2016	\$35,000	\$6,000	+100%
2017	\$15,000	\$7,600	+26.7%
2018	\$15,000	\$7,840	+3.2%
2019	\$15,000	\$9,500	+21.2%
2020	\$15,000	\$9,440	-0.6%

## PEER Services, Inc.

2021 REQUEST	\$15,000
2021 RECOMMENDATION	

### COMMENTS

RETURN SHEET TO BRANKA MACKIC, AGENCY & PROGRAM COORDINATOR

## MAINE TOWNSHIP APPLICATION FOR FUNDING 2021-2022



Agency NamePEER Services, Inc	
Address906 Davis Street, Evanston, IL 60201	
Phone _(847) 492-1778 Fax(847) 492-0320 Emailmmcdonnell@peerservices	s.org
Contact PersonMaureen McDonnellTitleExecutive Director	
Grant Contact PersonMaureen McDonnellTitleExecutive Director	
Phone(847) 492-1778 Email mmcdonnell@peerservices.org	

## Brief Description of Agency

PEER Services has been providing substance abuse prevention, early intervention and treatment services to residents of northern Cook County since 1975. We are licensed to provide substance abuse treatment by the Illinois Department of Human Services Division of Alcoholism and Substance Abuse. We are also accredited by the Joint Commission.

Services include substance use disorder treatment for teens, young adults, working parents and older adults; intensive outpatient treatment for adults; assessment, early intervention, DUI risk education, prevention services for local schools and communities, and drug testing services.

Agency Total Budget \_\$1,858,700\_\_ Amount requesting from Maine Township \_\$15,000\_\_\_\_ (Please provide a copy of your budget.) Agency Fiscal Year (e.g. March 2018-February 2019) \_\_\_July 2020 – June 2021\_\_\_\_

Total number of <u>all unduplicated clients</u> directly served during your last fiscal year \_778\_\_

Total number of <u>unduplicated Maine Township clients</u> directly served during your last fiscal year \_121\_\_\_\_

If your grant is restricted, what is the total number of unduplicated Maine Township clients directly served during your last fiscal year in the program(s) we fund? <u>\_\_n/a</u>\_\_\_\_

What is the approximate number of Maine Township clients referred to other agencies during your last fiscal year? \_\_\_\_14\_\_\_\_

Annual salary and title of the five highest paid full-time (if applicable) employees. Salary ranges are not acceptable.

- 1. Executive Director \$123,000
- 2. Nursing Supervisor \$79,500
- 3. Clinical Director \$76,500
- 4. Program Coordinator \$57,700
- 5. Development Director \$56,500

- 1. Is your agency not for profit? (If so, attach Certificate of Good Standing). 🛛 Yes 🗌 No
- 2. Has your organization been in business for at least one year?  $\square$  Yes  $\square$  No
- 3. Are all your programs, services, activities and facilities provided by your organization available to the residents of Maine Township?  $\Box$  Yes  $\boxtimes$  No
- 4. Describe how your organization's services are currently promoted to the residents of Maine Township.

We receive referrals from courts, health care providers and agencies including but not limited to Maine Township, Park Ridge Court, Maine East High School, TASC, DCFS Skokie Court, Skokie Behavioral Health, Cook County Court, and the Secretary of State's Driving Under the Influence (DUI) program. Additionally, a portion of our clients are self-referred, hearing about us through resource fairs, through our website, or through previous clients.

## 5. Has your organization ever received funding from Maine Township? ⊠ Yes □ No If yes, *list all years* and the allocation amount.

For the period of 3/1/04 - 2/28/05 in the amount of \$2,000. For the period of 3/1/05 - 2/28/06 in the amount of \$2,500. For the period of 3/1/06 - 2/28/07 in the amount of \$4,000. For the period of 3/1/08 - 2/28/09 in the amount of \$1,000. For the period of 3/1/09 - 2/28/10 in the amount of \$1,000. For the period of 3/1/10 - 2/28/11 in the amount of \$1,000. For the period of 3/1/11 - 2/28/12 in the amount of \$2,000. For the period of 3/1/12 - 2/29/13 in the amount of \$2,000. For the period of 3/1/13 - 2/28/14 in the amount of \$2,000. For the period of 3/1/14 - 2/28/15 in the amount of \$2,500. For the period of 3/1/15 - 2/28/16 in the amount of \$3,000. For the period of 3/1/16 - 2/28/17 in the amount of \$6,000. For the period of 3/1/17 - 2/28/18 in the amount of \$7,600. For the period of 3/1/18 - 2/28/19 in the amount of \$7,840. For the period of 3/1/19 - 2/28/20 in the amount of \$9,500. For the period of 3/1/20 – 2/28/21 in the amount of \$9,500 with an additional \$944 in spring.

## 6. Describe how your organization used the funding received from Maine Township during the previous funding year (if applicable).

Funding from Maine Township was used to cover the costs of care for low-income Maine Township youth and adults who need substance abuse treatment services. PEER Services places a priority on serving individuals who otherwise would not be able to afford treatment due to being uninsured or underinsured. Funds help offset the unreimbursed costs of providing high-quality treatment to Maine Township residents, which includes clinical supervision, psychiatric consultation, and case management. In FY20, more than 50% of costs were unreimbursed for Maine Township clients.

## 7. Describe how your organization plans to use the requested funding from Maine Township during the upcoming funding year.

In FY20, we served 121 Maine Township clients, down from 185 in FY 19. This is due to the sudden stop of referrals from the schools and the courts during the stay-at-home order. Our overall client services were down 28% in FY20.

As the nation continues to grapple with the COVID-19 pandemic and the economic crisis, substance use and mental distress are increasing dramatically. Unfortunately, deaths due to drug overdose and suicide are increasing as well. For this reason, services like those PEER provides are not only critical but require immediate expansion. As a result, we believe we will continue to serve more Maine Township residents. Additionally, medical costs continue to outpace general inflation rates, leaving more individuals uninsured or unable to pay for their deductibles. Our sliding scale fees allow many people who would not otherwise be able, to afford life-saving treatment and prevention services.

## 8. How has the COVID-19 pandemic impacted your organization and what changes have you had to implement as a result?

PEER Services remained open throughout this pandemic. As Maine Township and surrounding communities are seeing doubling of drug overdoses since March, we are grateful we have been able to continue to support the community during this challenging time. In order to protect our clients and our staff from COVID-19:

- We transitioned our outpatient substance abuse counseling and DUI services completely to telehealth.
- We added open recovery support groups through telehealth.
- We added parent support groups through telehealth.
- We moved our substance abuse prevention services online.
- Our medication-assisted treatment (MAT) program remained open in person throughout the pandemic, with modified hours and safety precautions in place.

We are facing increased costs for hand sanitizer, masks and cleaning products. If any clients or staff who enter the facility are found to be COVID-19 positive, we will also have to pay for deep cleaning of the entire facility, which we had to do once this spring at \$2,500.

Due to greatly increased financial pressure, we made the difficult decision to close our office in Glenview. Our services to clients in Maine Township and surrounding communities will continue via telehealth during this pandemic. When it is time to see clients in person again, we will look to co-locate with other human service providers to meet the communities' needs.

COVID-19 also laid bare the necessity of modernizing our financial systems so that we can manage through the next shutdown. Our systems were largely paper-based, requiring onsite data entry and management which did not support business continuity. We are in the process of moving these systems fully online and have hired an accounting firm that will manage our financials.

- 9. Which of the following best describes the services that your organization will be providing with the funds that you have requested? (Please check all that apply.)
  - □ Public safety
  - □ Environmental protection

- Recreation
- □ Library

- Public transportation
- ⊠ Health
- □ Other (please explain):

Social services for the aged

Social services for youth

10. Describe how your organization meets the eligibility requirements for the requested funding.

In accordance with Maine Township eligibility criteria for agency program funding, PEER Services:

(1) is a 501(c)(3) organization in operation since 1975

(2) provides direct substance abuse services to Maine Township residents

(3) has an EHR infrastructure and board-approved policies/procedures in place to ensure accountability and performance to our clients and funders

(4) meets Maine Township's identified funding priorities of: substance abuse, economicallychallenged families, mental health, youth, and seniors. We are the safety net substance abuse treatment and prevention provider for Maine Township residents of all ages.

## 11. Describe any new programs, services, activities or facilities that are currently proposed or contemplated by your organization.

PEER Services is committed to expansion of our already extensive services on the North Shore, providing services in Evanston, Wilmette, and Glenview. To that end, we are meeting with Maine Township and other school districts to discuss added substance abuse prevention and early intervention services for their students. We also support development of the North Shore prevention coalition which is in formation now across New Trier Township.

We are also strengthening referral relationships with local hospitals and first responders who come across many cases of intoxication and overdose. With a grant from the Evanston Community Foundation, we recently completed a pilot program to reach people appearing in local hospital emergency departments after overdose. Our staff engaged patients and their family members in life-saving steps towards recovery during their hospital visit. We look forward to valuable insight from this pilot program so that we can develop continuing services in this hospital and expand the practice to other hospitals in our service area.

- 12. Do you certify that the funds that you are requesting from Maine Township will be used for your organization's ordinary and necessary maintenance and operating expenses and not for any capital expenditures? ⊠ Yes □ No
- 13. If your organization is providing services for the benefit of Maine Township residents who are persons with a developmental disability, do you certify that said services shall only be provided to such Maine Township residents who are not eligible to participate in any program conducted under Article XIV of the School Code? (Applies only to persons under 22 years of age.) ⊠ Yes □ No

- 14. Do you certify that no person shall be excluded from participation in, denied benefits of, or be subjected to discrimination under, any service, facility or activity offered or provided by your organization on the grounds of race, color, national origin, sex, gender identity, age, religion, sexual preference, marital status or disability? ⊠ Yes □ No
- 15. Do you certify that your organization will not expend any of the funds requested from Maine Township, either directly or indirectly, for any partisan political activity, or to further the election or defeat of any candidate for any office, or for lobbying or propaganda purposes designed to support or defeat any legislation, either pending or proposed, before any governmental body? ⊠ Yes □ No
- 16. If requested, do you agree to provide the following to Maine Township? (Please note: You do NOT need to include these items with your application.)
  - A. Quarterly statements or reports setting forth the services rendered and programs provided for Maine Township residents, along with the associated costs to provide such services and programs
  - B. At such times and in such forms as Maine Township may require, any other statements, records, reports, data or information pertaining to matters covered by this application (Information relating to personal, medical and financial data will be treated as confidential.)
  - C. A written report signed by your organization's executive director, or whomever else is deemed to be in charge of your organization's activities, programs, services and facilities, including the following:
    - I. A description of each program, service, activity or facility you provided or offered
    - II. A statement that all such programs, services, activities and facilities are accessible to the disabled within the meaning of the Americans with Disabilities Act and the Rules and Regulations on disabled as promulgated thereunder
    - III. An identification of those programs, services, activities or facilities, which are not accessible to the disabled
    - IV. With respect to those programs, services, activities or facilities identified in response to item 15(C)(III) above, a detailed statement setting forth the specific steps and plans (including timetables for completion) to be taken to achieve accessibility and
    - V. If structural modifications will be required to achieve accessibility, a detailed statement setting forth the modifications required and a timetable for completion

🛛 Yes 🗌 No

5

- 17. If you receive any requested funds from Maine Township, do you certify that your organization will maintain general liability insurance coverage in an amount not less than \$1 million, naming Maine Township as a co-party insured, and do you further agree to provide Maine Township with a certified copy of said policy of insurance, along with the declaration sheet, binder and any exclusions related to said policy of insurance? ⊠ Yes □ No
- 18. If you receive any requested funds from Maine Township, do you certify that your organization will indemnify and hold harmless, protect and defend, at its own cost and expense, Maine Township, its property, officers, agents, employees, assigns, successors, transferees, licensees, invitees and/or any other persons or property standing in the interest of Maine Township, from any and all risks, suits, damages, expenses, including without limitation reasonable attorneys' fees and court costs, or claims due to any acts or omissions of your organization? ⊠ Yes □ No

### 19. What is the geographic service area of your organization?

PEER Services provides substance abuse assessment, education, early intervention and treatment services to individuals and families in northern Cook County and the northern neighborhoods of Chicago. While we do not have a specific catchment area, most of our clients live in Northern Cook County. We work to make services as accessible as possible.

### 20. Does your organization charge for services? $\square$ Yes $\square$ No

If yes, does your organization offer a sliding fee scale?

 $\boxtimes$  Yes. Attach 14 copies of the sliding fee scale.

□ No. Please explain how charges are determined.

21. If your organization does charge fees, would you be willing to wave application, program and other fees on a case by case basis for Maine Township residents whom we refer directly to your organization for assistance? ⊠ Yes □ No

### 22. Are volunteers used within your organization?

### $\boxtimes$ Yes. Please indicate how many volunteers you have and how they are utilized.

Last year, we used approximately 50 volunteers in a variety of ways, including fundraising, special projects, technical assistance such as marketing, mailings, clerical help and cleanup projects. We train interns and use them to assist in direct services including intake, assessment, individual and group counseling.

## □ No. Please give specific reasons for not using volunteers.

### 23. Does your organization provide any bilingual services?

### ⊠ Yes. Please indicate languages.

We have staff members that are bilingual/bicultural in Spanish. Additionally, we have a linkage agreement for social service interpreters in a broad range of languages through Heartland Alliance.

🗆 No

24. Does your organization request proof of U.S. citizenship from its clients?

□ Yes. Please describe briefly.

🛛 No

24. Does your organization participate in cooperative programs with any other community agencies? (e.g. social service, not-for-profits, municipal agencies, etc.) Please explain. ⊠ Yes □ No

PEER Services believes that collaborations are cost-effective tools for building on the strengths of multiple organizations to help individuals and families. This is why we are involved in collaborative projects with schools, law enforcement, hospitals and other social service agencies and community coalitions. We have a collaborative youth early intervention program, dual diagnosis treatment program and school outreach program. We also are part of several local networks and coalitions, including the Resilient Skokie project, Evanston Cradle to Career, the Empowering Evanston Collective, and several substance abuse prevention coalitions across the area. We staff and serve as fiscal agent for the Glenview Northbrook Coalition for Youth (GNCY). We provided parent presentations and educational training through the GNCY about adolescent prescription drug misuse, how to talk to kids about not using drugs/alcohol, adolescent binge drinking, and vaping/e-cigarettes. We work with schools/communities looking to expand their prevention coalitions and funding by assisting them in building coalitions and seeking federal funding. At the present time, we are working on this with the North Shore Substance Abuse Prevention Coalition (New Trier Township) and a group of concerned agencies in Niles Township that are focusing on increasing prevention resources for high school students in Niles Township.

## 25. Does your organization participate in cooperative programs with any other service organizations? (e.g. Rotary, Kiwanis, Optimist, etc.) Please explain. ⊠ Yes □ No

The Women's Club of Evanston and the Northend Mother's Club provided contributions recently and the Rotary, Kiwanis and Optimist Clubs have done so in the past.

## 26. Does your organization participate in cooperative programs with any community businesses? Please explain. ⊠ Yes □ No

We provide education on identifying fake IDs and safe serving training (BASSET) to liquor sales businesses including convenience stores, bars and restaurants. We provide education on avoiding driving under the influence to Driver's Education schools. We encourage businesses to join community substance abuse prevention coalitions.

We also provide drug-testing services for some local businesses. In the past, we provided speakers for employee brown bag lunches on topics such as raising drug-free kids, stress management and developing resilient families in uncertain times. We also received direct referrals from Human Resource Directors and Employee Assistance Programs (EAPs). There have been times when employers have allowed an employee to keep his/her job based on a commitment to completing our treatment program. We are interested in expanding this work in Maine Township.

27. List all sources of funding or support that your organization currently receives, including the total amount, frequency, duration, and percentage of any such support.

Funding Source	Amount	Frequency & Duration	Percentage	
Maine Township	9,500	Every 3 months	0.51%	
Foundations	82,000	Primarily annual grants	4.41%	
Private Donors	66,500	Primarily annual contributions	3.58%	
Federal	25,000	Per service reimbursement	1.35%	
State	1,198,990	Per service/monthly grants	64.51%	
Municipalities	96,800	Once/twice per year	5.21%	
Other Townships	159,010	Quarterly	8.55%	
Other (list all)				
United Way	11,000	Quarterly	0.59%	
Insurance*	116,400	Per service reimbursement	6.26%	
Client Fees	93,000	Per service payment 5.0		
Interest, etc.	500	Varies 0.03%		
Total	\$1,858,700		100%	

28. What type of fund-raising efforts has your organization had this year? Please list event names and specify the REVENUE and COSTS for fundraiser(s) and what program(s) the money was raised for.

	REVENUE	COSTS	Purpose
Annual Appeal	\$9,125	\$250	Unfunded operating support & treatment scholarships
Step Up for Recovery	\$40,300	\$4,258	Unfunded operating support & treatment scholarships

### 29. What fundraising efforts are planned for next year?

Recognizing that increased fundraising is essential to meeting our organizational goals, our Board of Directors continues to work hard on fundraising directly. We sustained our increased our goals (FY20) in each area including our yearly fundraising event, Step Up for Recovery, and our Annual Appeal.

The Evanston Community Foundation invited PEER Services to join its "capacity building" project in non-profit fundraising, called "Building the Future". PEER participates in the collaborative learning and consulting projects. If we are successful in raising 10 gifts of \$1,000 or more, we will earn a match of \$10,000. Our Building the Future initiative launches in October.
- 30. Please explain any changes that have occurred in your organization in the past year (i.e. new program(s), expansion or deletion of program(s), personnel, administration, major purchases or facility, etc.).
  - Due to COVID-19, our outpatient counseling and prevention services are provided via telehealth.
  - In August 2020, we closed our Glenview office due to COVID-19 financial pressure. We will continue to serve the community via telehealth. When it is time to serve people in person again, we hope to co-locate with other human service agencies so we can continue to serve Maine Township residents and surrounding communities.

#### 31. Please provide numerical breakdown of all staff member positions.

1. Administration & Administrative Support	3
2. Management of Service Providers	3
3. Direct Service Providers	18.5

32. Number of certified staff members \_\_14\_\_\_

#### 33. What kinds of certifications are required for your service providers?

According to the state regulations which govern drug treatment programs, all treatment director service staff must be licensed by the State Department of Professional Regulations or certified as addiction counselors by the Illinois Alcohol and Other Drug Abuse Professional Certification Association within two years of employment.

34. Number of licensed staff members \_\_10\_\_\_\_

#### 35. What kind of licensing is required for your service providers?

Our physician, nurses, social workers and professional counselors must all be licensed by the Illinois Department of Professional Regulation in their profession's scope of work.

#### 36. Please list all accreditations your organization has earned.

PEER Services is licensed to provide substance abuse treatment by The Illinois Department of Human Services Office of Alcoholism and Substance Abuse. We are a certified Medicaid provider. We are also accredited by The Joint Commission.

# 37. How would your organization be affected if it received a reduction in Township funding or if there was a complete elimination of Township funding?

We may have to reduce staff hours and may have to put Maine Township clients on a waiting list. We would be forced to limit or even eliminate our sliding scale services to clients.

I hereby certify that I am authorized to execute this application on behalf of the organization listed below and that the statements contained herein are true and accurate.

Name of Applicant Organization _	PEER Services Inc.
	Mauren McDonnell
	Its Authorized Representative
Pi	inted Name Maureen MCDannell
	tle Executive Director
Da	ate 8/27/2020



PEER Senvices, Inc.

8 or more	7	6	G	4	ω	2	1	Number of Dependents	Income \$24,980	Annual \$ 0-	
5 5	5	5	5 10	10 10	10 15	10 15	15 20		33,820	\$24,980-	
5	5 10	5 10	) 15	20	5 20	5 25	30	Shade	42,660	\$33,820-	Le
5	10	15	20	25	30	35	40	d Areas Shov	51,500	\$42,660-	Level 1 INDIVIDUAL Outpatient Treatment (Adult and Adolescent) Treatment Scholarship Guidelines FY 2020
10	10	15	20	25	35	40	50	w Family Inc	60,340	\$51,500-	VIDUAL Outpatient Treatment (Adult and , Treatment Scholarship Guidelines FY 2020
10	10	15	20	30	40	50	60	come Eligibi	69, 180	\$60, 340 -	nolarship Gu
20	30	40	50	60	70	80	90	lity Criteria	78,020	\$69,180 - \$78,020	ment (Adult uidelines FY
20	40	50	60	70	08	06	100	Contract Re	86,860	\$78,020 -	t and Adoles 2020
30	40	50	60	70	80	06	100	eimbursed (I	\$100,000	\$86,860 -	scent)
								Shaded Areas Show Family Income Eligibility Criteria Contract Reimbursed (Non-Medicaid)	120,000	\$100,001-	
70 1	80 1	90 1	100 1	100 1	120 1	120 1	120 1	ď	140,000	\$120,001-	
100 140	100 140	120 140	120 140	140 140	140 140	140 140	140 140		180,000	\$140,001-	

1 Hour Individual Therapy = \$140.00

eatment Scholarship Guidelines	Adult IOP Group Fee Schedule
Guidelines FY 2020	Fee Schedule

100	70	50	45	35	30	25	20	20	15	5 15	15	8 or more
160	08	70	60	45	35	30	25	25	20	5 15	15	7
200	100	80	70	60	45	35	25	25	20	5 15	15	6
240	120	100	80	70	60	40	30	30	25	20	20	л
270	160	120	100	08	70	45	35	35	25	20	20	4
325	200	160	120	100	08	60	40	40	30	5 25	25	з
325	240	200	160	120	100	70	45	45	35	5 25	25	2
325	280	240	200	160	120	80	60	50	40	30	30	1
			-Medicaid)	<b>Reimbursed (Non-Medicaid)</b>		Shaded Areas Show Family Income Eligibility Criteria Contract	e Eligibility	mily Incom	as Show Fa	Shaded Are		Dependents
												Number of
180,000	140,000		\$100,000 120,000	86,860	78,020	69, 180	60,340	51,500	42,660	33,820	\$24,980	Income
\$140,001-	\$120,001-	\$86,860 - \$100,001- \$120,001-\$140,001-	\$86,860 -		\$69,180 - \$78,020 -	\$60, 340 -	\$51,500-	\$42,660-	\$33,820-	\$24,980-	-0 \$	Annual
				0	nes FY 202	Treatment Scholarship Guidelines FY 2020	าent Schola	Treatn				

3 Hour Group Session = \$325

# ASSESSMENT SLIDING SCALE FEE SCHEDULE Treatment Scholarship Guidelines FY 2020

Annual	÷0-	\$24,980-	\$33,820-	\$42,660-	\$51,500-	\$60, 340 -	\$69,180 -	-02-	78,020 - \$86,860 - \$100,001- \$120,001-\$140,001-	\$100,001-	\$120,001-		\$180,001 &
Income	\$24,980	33,820	42,660	51,500	60,340	69, 180	78,020	86,860	\$100,000 120,000		140,000	180,000	Above
Number of													
Dependents		Shaded Are	as Show Fa	mily Incom	e Eligibility	Shaded Areas Show Family Income Eligibility Criteria Contract Reimbu	tract Reimb		rsed (Non-Medicaid)				
1	25	35	50	60	95	95	5 95	120	150	195	195	195	195
2	25	35	50	60	95	95	5 95	120	150	195	195	195	195
З	25	25	40	60	95	50	5 95	120	150	195	195	195	195
4	25	25	35	50	95	95	5 95	120	150	195	195	195	195
л	25	25	30	50	60	95	5 95	95	120	195	195	195	195
6	25	25	30	40	50	60	) 75	95	120	195	195	195	195
7	25	25	30	30	40	50	) 75	95	120	195	195	195	195
8 or more	25	25	25	25	35	40	) 50	50	120	195	195	195	195

Alcohol and Drug Assessment including Toxicology \$195.00

			Treat	ment Schol	Treatment Scholarship Guidelines FY 2020	elines FY 20	020			
Annual	\$ O-	\$24,980-	\$33,820-	\$42,660-	\$51,500-	\$60, 340 -	\$60, 340 - \$69,180 - \$78,020 -	\$78,020 -	\$86,860 -	\$100,001-
Income	\$24,980	33,820	42,660	51,500	60,340	69, 180	78,020	86,860	\$100,000	120,000
Number of										
Dependents		Shaded Ai	eas Show F	amily Incor	ne Eligibilit	y Criteria Co	ontract Rei	mbursed (N	Shaded Areas Show Family Income Eligibility Criteria Contract Reimbursed (Non-Medicaid)	
Þ	J		10	20	25	5 25	30	45	45	
2	л	л	10	20	20	) 25	30	45	45	
З	5	5	5	10	20	30	30	45	45	
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л	л	5	л		5	5 10	25	30	0 45	
6	5	5	2	5	5 5	5	25	25	45	
7	5	5	5		5 5	5	15	20	45	
8 or more	5	5	5		5 5	5	10	10	10	

# Aftercare Group Fee Schedule Treatment Scholarship Guidelines FY 2020

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Income	\$24,980	33,820	42,660	51,500	60,340	69, 180	78,020	86,860	\$100,000 120,000		140,000 180,000 & Above	180,000	& Above
Number of													
Dependents		Shaded Are	as Show Fa	mily Incom	e Eligibility	Shaded Areas Show Family Income Eligibility Criteria Contract Reimbursed (Non-Medicaid)	tract Reimh	oursed (Non	-Medicaid)				
1	15	20	25	30	) 35	40	0 45	50	50	50	50	60	75
2	15	15	20	) 25	30	35	5 40	45	45	50	50	60	75
З	15	15	20	25	5 25	30	0 35	40	40	50	50	60	75
4	10	15	15	20	20	25	5 30	35	35	50	50	60	75
сл	01	10	15	15	5 15	20	0 25	30	30	50	50	60	75
6	10	10	10	15	5 15	15	5 20	25	25	50	50	60	75
7	10	10	10	10	01 10	10	0 15	20	20	25	50	60	75
8 or more	10	10	10	10	10	10	0 15	15	15	25	50	60	75

90 Minute Group Session = \$75.00

#### PEER SERVICES ANNUAL BUDGET

Budget Approved 8/11/20

with adjustments made in meeting Base Case

		FY21
EXPENSES	ACCT #	PROJECTED
SALARIES	1	1,067,445
HLTH & LIFE INS	11	118,197
UNEMPLOYMENT	12	18,000
FICA	13	80,058
WORKER'S COMP	14	4,000
CLIN. CONSULT	21	25,000
MED CONSULT	22	19,200
PROG CONSULT	23	80,000
SUBCONTRACT-BILLING VENDOR	24	28,500
ACCT/AUDIT/LEGAL	25	72,900
ACC VAC & FICA	29	0
D10- PERSONNEL SUBTOTAL		1,513,300
OFFICE SUPPLIES	31	7,815
MEDICAL SUPPLIES	32	39,110
PROGRAM SUPPLIES	33	5,256
PREMISE SUPPLIES	34	6,639
D22- CONSUMABLE SUPPLIES		58,819
INS-PROPERTY	41	10,224
ELECTRICITY/GAS	42	9,500
BUILDING MAINT	43	31,000
SECURITY SYSTEM	44	6,000
EQUIP REPAIR/MAINT	45	4,500
D30 - OCCUPANCY		61,224
LOCAL TRAVEL	51	1,500
CLIENT TRAVEL	53	0
D35 - TRAVEL		1,500
OFFICE FURNISHINGS	61	350
EQUIP PURCHASES	62	5,000
EDUCATION EQUIP PUR	63	0
D49 - EQUIP PURCHASE	(<\$500)	5,350
EQUIPMENT RENTAL	71	15,000
RENT	72	30,000
PARKING RENTAL	73	1,500
D55 - LEASE/RENT		46,500
D61 - DEPRECIATION	75	16,500
D66 - INTEREST/BANK CH/CC	77	5,500
LAB FEES	80	0
TELEPHONE	81	30,000
CONF/MEETINGS HELD	82	0
SUBS & PUBS	83	1,500

POSTAGE	84	1,500
OUTSIDE PRINTING	85	2,500
FEES	86	15,500
DUES	87	500
INS - D & O	88	4,000
INS - GENERAL LIAB	90	3,269
PERSONNEL RECRUITMENT	91	750
BOARD/STAFF TRAIN & DEV	92	6,500
CONF/MEET ATTENDED	93	500
OUTREACH/ADVERTISING	95	11,000
BAD DEBTS EXPENSE	97	0
SPECIAL EVENTS EXPENSE	98	5,000
OTHER MISCELLANEOUS	99	20,000
D80 - MISCELLANEOUS		102,519

SUBTOTAL EXPENSE

1,811,212

#### PEER SERVICES BUDGET

#### FY 21

#### Approved 8/11/20

REVENUE	ACCT #	
IDHS-METHADONE	400	196,000
IDHS-COMP PREVENTION	401	211,663
IDHS-HIV COUNS & TEST	402	-
IDHS-OPIOD-STR OMT	403	_
IDHS-GLOBAL	404	189,626
IDHS-DASA/DCFS	405	23,378
IDHS-DASA/DFI	406	-
EVANSTON MENTAL HTLH	411	76,800
NORTH/NORTHWEST U/W	413	11,510
VILLAGE OF SKOKIE-ADOL TX	416	5,000
VILLAGE OF SKOKIE-CDBG	418	5,000
EVAN TOWN HIGH SCHOOL	419	10,000
NILES H S DIST 219	420	-
NS SPEC EDUC DIST INCOME	421	_
NORTHFIELD TOWNSHIP	423	18,000
NEW TRIER TOWNSHIP	424	105,000
MANAGED CARE ORG (MCO)	430	631,957
ALLOW DOUBTFUL ACCTS	430A	-
MAINE TOWNSHIP	431	9,500
EVAN TOWN SCHOOL DIST 65	433	-
NILES TOWNSHIP GOV'T	435	15,000
GLENBROOK HIGH SCHOOL	436	34,927
MAINE TOWNSHIP HIGH SCH	438	-
IDOT-PREVENTION	439	3,000
MEDICAID FEES	440	68,454
CLIENT FEES	441	87,813
OTHER THIRD PARTIES	442	-
ALLOW DOUBTFUL ACCTS	442A	-
CLIENT DUI SERVICES	445	6,072
MEDICARE	446	-
ALLOW DOUBTFUL ACCTS	446A	-
CORP, FND GRANTS	451	82,000
INDIVIDUAL CONTRIBUTIONS	452	34,500
SPECIAL EVENTS INCOME	461	32,000
INTEREST	484	500
MISCELLANEOUS	499	1,000
TOTAL REVENUE		1,858,700
LESS EXPENSE		1,811,212
NET		47,488

YEAR	REQUEST	ALLOCATION	CHANGE IN FUNDING
2014			
2015	n/a	\$66,604	New Agency
2016	n/a	Did Not Apply	n/a
2017	\$75,000	\$47,000	-29.4%
2018	\$75,000	\$47,200	+0.4%
2019	\$50,000	\$44,000	-6.8%
2020	\$50,000	\$39,600	-10.5%

#### Turning Point Behavioral Health Care Center

2021 REQUEST	\$50,000
2021 RECOMMENDATION	

#### COMMENTS

RETURN SHEET TO BRANKA MACKIC, AGENCY & PROGRAM COORDINATOR

#### MAINE TOWNSHIP APPLICATION FOR FUNDING 2021-2022



Agency Name	Turning	Point	<b>Behavioral</b>	Health	Care	Center
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Address 8324 Skokie Boulevard, Skokie, IL 60077	
Phone <u>(847)933-0051</u> Fax <u>(847)933-0057</u>	Email <u>araney@tpoint.org</u>
Contact Person <u>Ann Fisher Raney</u>	Title Chief Executive Officer
Grant Contact Person <u>Jennifer Sultz</u>	Title Development Director
Phone <u>(847)933-0051 x591</u> Ema	ilJsultz@tpoint.org

Brief Description of Agency Turning Point Behavioral Health Care Center is a non-profit outpatient mental health center serving children and adults since 1969. Our mission is to provide solid support, when you need it most. In fiscal year 2020, Turning Point served 1,287 individuals, approximately 90% of whom were low income. Services include individual and group therapy, case management, crisis services, psychosocial rehabilitation, a residential living program and The Living Room, our walk-in psychiatric respite program. The agency has been awarded highest ratings by The Commission on Accreditation of Rehabilitation Facilities and was a recipient of the 2017 Excellence in Mental Health Award from the Illinois Association for Behavioral Health and the 2015 Impact Award for Excellence in Behavioral Healthcare Management from the National Council for Behavioral Health.

Agency Total Budget <u>\$3,724,857.</u> Amount requesting from Maine Township <u>\$50,000.</u> (Please provide a copy of your budget.) Agency Fiscal Year (e.g. March 2019-February 2020) <u>July 1, 2021 – June 30, 2022</u>

Total number of all unduplicated clients directly served during your last fiscal year \_\_\_\_\_1287

Total number of <u>unduplicated Maine Township clients</u> directly served during your last fiscal year <u>113</u>

If your grant is restricted, what is the total number of unduplicated Maine Township clients directly served during your last fiscal year in the program(s) we fund? <u>N/A – no restrictions</u>

What is the approximate number of Maine Township clients referred to other agencies during your last fiscal year? \_\_\_\_\_\_ approximately 30\_\_\_\_\_\_

Annual salary and title of the five highest paid full-time (if applicable) employees. Salary ranges are not acceptable.

- 1. Chief Executive Officer: \$166,000.
- 2. Chief Operating Officer: \$108,000.
- 3. Chief Clinical Officer: \$86,251.
- 4. Compliance Officer: \$74,079.
- 5. Human Resources Director; Development Director: \$61,200.

- 3. Are all your programs, services, activities and facilities provided by your organization available to the residents of Maine Township? X Yes □ No
- 4. Describe how your organization's services are currently promoted to the residents of Maine Township. In addition to direct mailings, e-newsletters and social media, Turning Point participates in community networking collaborations, and in a variety of events and information sharing opportunities including Maine Township's Agency Day and other area health fairs.

2020-2021: \$43,560. 2019-2020: \$44,000. 2018-2019: \$47,200. 2017-2018: \$47,000. 2015-2016: \$66,604.

- 6. Describe how your organization used the funding received from Maine Township during the previous funding year (if applicable). Funds were used to support mental health care services provided to Maine Township residents including those enrolled in the Maine Township General Assistance program. Those services include individual and group therapy, case management, crisis services, psychiatry and PSR group participation. Turning Point's fee for service billing covers approximately 60% of what it costs to deliver services and grants such as this allow us to bridge that gap as well as provide services to individuals in need of care who are unable to pay and who apply for support through our Tickets to Recovery program.
- Describe how your organization plans to use the requested funding from Maine 7. Township during the upcoming funding year. Funding will be used to provide services to Maine Township residents including those enrolled in the Maine Township General Assistance program and any new clients entering services through our Open Access program. Services that we provide to residents of the Township include individual and group therapy, case management, psychiatry and PSR group participation. Clients and non-clients alike can also access our crisis services and our free and walk-in psychiatric respite program. The Living Room & Resource Center at Turning Point. The revenue that Turning Point receives through billing does not cover the full cost of services. It is therefore essential that we receive support to bridge that gap so that individuals and families in need of care, including those who are unable to pay and apply for subsidized care, have access to the support and services that they require. For clients who find that they need to apply for subsidized care, our Tickets to Recovery structure is available. Applications are reviewed and staff creates a sliding scale plan for each client in need. When a client's financial situation changes, some clients choose to repay part of the financial assistance so that the returned funds can be applied to another client in need, thus allowing clients the option to give back to the community and "pay it forward" while fostering a culture of generosity and individual empowerment.
- 8. How has the COVID-19 pandemic impacted your organization and what changes have you had to implement as a result? During the COVID-19 crisis, Turning Point has continued to provide care and support for its clients and community. Determined to continue serving our

many clients who rely on Turning Point as a critical daily lifeline, we have approached our new circumstances with creativity and adaptability. Though our facility is temporarily closed, as an essential service we have shifted over to remote therapy sessions and crisis support, doing all that we can to maintain a robust continuity of care for our clients. The Living Room is now open remotely during its regular hours for free crisis support and even our expansive therapeutic groups program, a mainstay for our clients with severe or chronic mental illness, has creatively shifted many of its groups to a telehealth format. We have reached out to offer assistance to our local emergency responders and other colleague organizations and Turning Point is also participating as a proud partner of the Illinois Call4Calm Text Line Service. The shift to telehealth has involved and will continue to involve substantial new unforeseen expenses as computer equipment and systems must be upgraded. While those expenses mount, we have had to postpone our FY20 annual fundraiser to FY21, shifting it to a virtual format. We continue to seek out additional funding to help us adapt to these new circumstances brought on by COVID-19.

- 9. Which of the following best describes the services that your organization will be providing with the funds that you have requested? (Please check all that apply.)
  - □ Public safety
  - Environmental protection
  - □ Public transportation
  - X Health
  - □ Other (please explain):

- □ Recreation
- Library
- □ Social services for youth
- □ Social services for the aged
- 10. Describe how your organization meets the eligibility requirements for the requested funding. Turning Point is eligible for funding from Maine Township under the mental health funding priority, as well as serving seniors, youth, and economically challenged families and being compliant with the other requirements of being a 501(c)3, being in operation for a minimum of one year, providing direct services to Maine Township residents, and having appropriate infrastructure in place to ensure accountability and performance.
- 11. Describe any new programs, services, activities or facilities that are currently proposed or contemplated by your organization. Our agency's areas of greatest change this year will be focused on our careful reopening for on-site services when that is safe and advisable, and on the ongoing shift to telehealth services, which we anticipate continuing even beyond the point at which our facility reopens for in-person care. With such a wide variety of services and programs provided at Turning Point, the process of transitioning to virtual formats has been and will continue to be a challenge but we are very pleased that we have been able to continue providing care throughout this crisis for our clients and community.
- 12. Do you certify that the funds that you are requesting from Maine Township will be used for your organization's ordinary and necessary maintenance and operating expenses and not for any capital expenditures? X Yes □ No
- 13. If your organization is providing services for the benefit of Maine Township residents who are persons with a developmental disability, do you certify that said services shall only be provided to such Maine Township residents who are not eligible to participate in any program conducted under Article XIV of the School Code? (Applies only to persons under 22 years of age.) X Yes □ No

- 14. Do you certify that no person shall be excluded from participation in, denied benefits of, or be subjected to discrimination under, any service, facility or activity offered or provided by your organization on the grounds of race, color, national origin, sex, gender identity, age, religion, sexual preference, marital status or disability? X Yes □ No
- 15. Do you certify that your organization will not expend any of the funds requested from Maine Township, either directly or indirectly, for any partisan political activity, or to further the election or defeat of any candidate for any office, or for lobbying or propaganda purposes designed to support or defeat any legislation, either pending or proposed, before any governmental body? X Yes □ No
- 16. If requested, do you agree to provide the following to Maine Township? (Please note: You do NOT need to include these items with your application.)
  - A. Quarterly statements or reports setting forth the services rendered and programs provided for Maine Township residents, along with the associated costs to provide such services and programs
  - B. At such times and in such forms as Maine Township may require, any other statements, records, reports, data or information pertaining to matters covered by this application (Information relating to personal, medical and financial data will be treated as confidential.)
  - C. A written report signed by your organization's executive director, or whomever else is deemed to be in charge of your organization's activities, programs, services and facilities, including the following:
    - I. A description of each program, service, activity or facility you provided or offered
    - II. A statement that all such programs, services, activities and facilities are accessible to the disabled within the meaning of the Americans with Disabilities Act and the Rules and Regulations on disabled as promulgated thereunder
    - III. An identification of those programs, services, activities or facilities, which are not accessible to the disabled
    - IV. With respect to those programs, services, activities or facilities identified in response to item 15(C)(III) above, a detailed statement setting forth the specific steps and plans (including timetables for completion) to be taken to achieve accessibility and
    - V. If structural modifications will be required to achieve accessibility, a detailed statement setting forth the modifications required and a timetable for completion

X Yes 🗆 No

17. If you receive any requested funds from Maine Township, do you certify that your organization will maintain general liability insurance coverage in an amount not less

than \$1 million, naming Maine Township as a co-party insured, and do you further agree to provide Maine Township with a certified copy of said policy of insurance, along with the declaration sheet, binder and any exclusions related to said policy of insurance? X Yes  $\Box$  No

18. If you receive any requested funds from Maine Township, do you certify that your organization will indemnify and hold harmless, protect and defend, at its own cost and expense, Maine Township, its property, officers, agents, employees, assigns, successors, transferees, licensees, invitees and/or any other persons or property standing in the interest of Maine Township, from any and all risks, suits, damages, expenses, including without limitation reasonable attorneys' fees and court costs, or claims due to any acts or omissions of your organization? X Yes □ No

What is the geographic service area of your organization? Turning Point serves clients from approximately 45 communities throughout the Chicago metropolitan area, many of whom live in Skokie, Chicago, Evanston, Des Plaines, Morton Grove, Niles, Park Ridge, Lincolnwood and Glenview.

If yes, does your organization offer a sliding fee scale?

X Yes. Attach 14 copies of the sliding fee scale.

- □ No. Please explain how charges are determined.
- 20. If your organization does charge fees, would you be willing to wave application, program and other fees on a case by case basis for Maine Township residents whom we refer directly to your organization for assistance? X Yes □ No
- 21. Are volunteers used within your organization?

X Yes. Please indicate how many volunteers you have and how they are utilized.

Approximately 20 volunteers donate their time to the agency each year. Activities include assisting with fundraising efforts and events, clerical and office tasks, and helping to represent the agency at community events.

□ No. Please give specific reasons for not using volunteers.

22. Does your organization provide any bilingual services?

□ Yes. Please indicate languages.

X No

23. Does your organization request proof of U.S. citizenship from its clients?

□ Yes. Please describe briefly.

X No

24. Does your organization participate in cooperative programs with any other community agencies? (e.g. social service, not-for-profits, municipal agencies, etc.) Please explain. X Yes □ No

Turning Point maintains cooperative relationships, including referrals, programming, consultation and networking with Niles Township Interagency Network, Center for Contextual

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Change, Institute of Therapy through the Arts, Metropolitan Family Services, Josselyn Center, NAMI Cook County North Suburban, Apna Ghar, Skokie Health Department, LAN, Impact Behavioral Health Partners, Skokie Hospital Community Advisory Committee, Skokie Cares, Niles Township Youth Coalition, Trilogy, PEER Services, Skokie Public Library, and more.

- 26. Does your organization participate in cooperative programs with any community businesses? Please explain. X Yes D No Turning Point has a relationship with the local Panera which, when we are operating on-site, contributes baked goods for our clients on a weekly basis. Many area businesses also consistently contribute to our annual auction and partner with us for special events.
- 27. List all sources of funding or support that your organization currently receives, including the total amount, frequency, duration, and percentage of any such support.

<b>Funding Source</b>	Amount	Frequency & Duration	Percentage
Maine Township	43,560.	Annual grant, monthly payments	1.2%
Foundations	16,200.	Grants with one payment for the year	0.5%
Private Donors	175,376.	Includes private grants each with one payment for the year, annual benefit revenue, annual appeal and general donations	4.9%
Federal	0.	N/A	0%
State	907,543.	Annual grants, monthly payments	25.3%
Municipalities	57,800.	Includes 2 grants with draws throughout the year	1.6%
Other Townships	134,600.	Includes 2 grants each with one payment for the year	3.8%
Other (list all)	2,246,145.	Includes fee for service revenue, rep payee client reimbursements, monthly interest & dividends, gains & losses on investments, & rental income, as well as occasional Academy revenue through the year	62.7%
Total	\$3,581,224.		100%

28. What type of fund-raising efforts has your organization had this year? Please list event names and specify the REVENUE and COSTS for fundraiser(s) and what program(s) the money was raised for.

Our two primary fundraising efforts typically include our year-end annual appeal mailing, and our June benefit. This year, due to COVID-19, the June benefit for FY20 was cancelled. In its

place, we launched a mid-year donation appeal. Our annual appeal and mid-year appeal brought in \$65,742.18 in FY20, costing approximately \$4,614. We pursued grant opportunities throughout the year. Funds support various agency programs providing supportive, life-saving and compassionate care for our clients, approximately 90% of whom are low income.

#### 29. What fundraising efforts are planned for next year?

We will be hosting a virtual benefit event on December 3, 2020 within the FY21 fiscal year. As we look ahead to the 2021 calendar year, we are hoping that we can return to in-person fundraising events but we will adapt as needed. Typically, our key fundraising activities include a summer benefit and year-end donation appeal. We continuously submit grant proposals to a variety of funders, we continue to engage our Board in fundraising plans, and we recruit for our Young Professional Friends group in order to enlarge our donor community and supplement our fundraising efforts.

# 30. Please explain any changes that have occurred in your organization in the past year (i.e. new program(s), expansion or deletion of program(s), personnel, administration, major purchases or facility, etc.).

In our 50<sup>th</sup> anniversary, Turning Point's Open Access program continued to welcome new clients through a streamlined intake system that allows for walk-in same day access to care. The Living Room & Resource Center at Turning Point, our walk-in crisis center, free of charge to adult clients and non-clients alike, achieved a 99% success rate last year in deflecting guests away from visits to emergency rooms. We welcomed to our staff Chief Operating Officer Kelly Schuler, and to our Board of Directors new member Maya Devakiamma. Within the Turning Point Academy, we featured professional development seminars in trauma, vicarious trauma, suicide assessment and intervention strategies, and medical cannabis and mental health. Turning Point hosted its 19<sup>th</sup> Annual Town Hall Meeting at Skokie Public Library featuring a panel of elected officials and local experts discussing the impact of the political and economic climate on mental health services. Turning Point continued its work with the Village of Skokie's Clean Green Skokie initiative, hosting community clean-up and recycling days.

#### 1. Please provide numerical breakdown of all staff member positions.

1.	Administration & Administrative Support	14
2.	Management of Service Providers	7
3.	Direct Service Providers	29

#### 32. Number of certified staff members \_\_\_\_\_35\_\_\_

#### 33. What kinds of certifications are required for your service providers?

Therapists must have master's degrees or be studying towards master's degrees in order to provide treatment for Medicaid recipients or self-pay clients. Recovery Support Specialists and Case Managers must have bachelor's degrees.

#### 34. Number of licensed staff members <u>12</u>

#### 35. What kind of licensing is required for your service providers?

Medical staff must be MD, DO or APN. Therapists must have a clinical license (LCPC, LCSW, LMFT, PsyD) in order to provide services to clients with private insurance, or under U.S. Probation Office, or to provide clinical supervision to other clinical staff or students. Medicare requires therapists to be licensed as either LCSW or PsyD.

#### 36. Please list all accreditations your organization has earned.

Commission on Accreditation of Rehabilitation Facilities (CARF).

37. How would your organization be affected if it received a reduction in Township funding or if there was a complete elimination of Township funding? We very much value and appreciate the support that we have received from Maine Township. While we would make every effort to maintain our services to Maine Township clients, a reduction or elimination in funding may require us to consider proportionately reducing or restricting new services to incoming clients.

I hereby certify that I am authorized to execute this application on behalf of the organization listed below and that the statements contained herein are true and accurate.

Name of Applicant Organization <u>Turning Point Behavioral Health Care Center</u>

By Its Authorized Representative Printed Name Ann Fisher Raney Title Chief Executive Officer Date

SUBSCRIBED and SWORN to before me this <u>25</u> day of <u>August</u>, 20<u>20</u>. Notary <u>Rayna Trayanova</u>



# FOR INTERNAL USE ONLY

# FEE SHARE CHART SLIDING SCALE /



Please note that if proof of incom

Evaluation         Final Fragment         Fragmance         Fragmance         Fragmance         Anthese         Dividese         Out           (60 minutes)         \$180         \$180         \$150         \$160         ps           \$\$ \$180         \$\$ \$180         \$\$ \$150         \$\$ \$160         ps           \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$	Client	Counseling-   Initial Perchialtric   Annual Bendeitatian	Initial Psychiatric	Annual Beachistic			
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up - \$16 per hour	Adult Medicaid Clients will have a
	40.30 COPAY PER VISIT WITH & PSYChiatrist
	Full Fee will apply to clients who
	choose to forgo their insurance benefits
2018 MEDICARE MAXIMUM RATES	
WITH A SUPPLEMENTAL INSURANCE POLICY, FEES ARE BASED ON THE COORDINATION OF REMIETED	ATTON DE RENEETTE
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COUNSELING	ASSESSMENT	GROUP COUNSELING
\$26	\$27.39-\$40.15	
EVALUATION	PSYCHIATRIC TREATMENT	

Currently, Medicare Maximum Rates are based on a 80/20 split. Rates above are an estimate and are subject to change without notice. Final coinsurance amounts are determined based on Medicare explanation of benefits and accounts are adjusted accordingly and deductibles.



Solid support. When you need it most.

#### Turning Point Behavioral Health Care Center Organization Budget FY2021

INCOME	FY21 Budget	Notes
Contributions Unrestricted	96,576.	See Appendix 1
Benefit Event Revenue	95,000.	
Grants Governmental	1,143,503.	See Appendix 2
Client & Insurance Fees	2,032,235.	
Residential Client Income	101,685.	
TP Academy	4,450.	
TOTAL INCOME	3,473,449.	
EXPENSES		
Salaries & Consultants	2 949 400	
General & Administrative	2,818,400. 177,315.	
Occupancy		
Technology	79,580.	
Marketing	113,465.	
Program Supplies & Expenses	4,085.	
Residential Client Expenses	<u>33,620.</u> 181,800.	
Fundraising/Events	5,000.	
TP Academy Expenses	2,010.	
TOTAL EXPENSES	3,415,275.	
NET ORDINARY INCOME	58,174.	
OTHER INCOME		
Rental Income	72,775.	
Other Income	35,000.	
TOTAL OTHER INCOME	107,775.	
OTHER EXPENSES	1	
Interest	84,625.	
Depreciation	216,457.	
Other Expenses	8,500.	
TOTAL OTHER EXPENSES	309,582.	
NET OTHER INCOME	(201,807.)	
NET BLOOME		
NET INCOME	(143,633.)	,

#### Appendix 1 – Income budgeted from Grants and Contributions:

Annual Appeal Revenue:	\$50,376.
Skokie Community Foundation:	\$5,000.
PERT Foundation:	\$5,000.
Morton Grove Foundation:	\$3,000.
Park Ridge Community Fund:	\$1,800.
Rotary Club of Skokie Valley Foundation:	\$1,000.
Wilmette Rotary Club Foundation:	\$400.
Other contributions:	\$30,000.

#### Appendix 2 – Income budgeted from Governmental Grants:

DHS Division of Mental Health Grants:	\$907,543.
Cook County CDBG Grant:	\$27,000.
Village of Skokie CDBG Grant:	\$30,800.
Niles Township:	\$130,000.
Maine Township:	\$43,560.
Northfield Township:	\$4,600.

YEAR	REQUEST	ALLOCATION	CHANGE IN FUNDING
2014	\$3,000	\$2,500	0%
2015	\$4,000	\$2,500	0%
2016	\$3,500	\$3,000	+20%
2017	\$4,000	\$3,200	+6.7%
2018	\$4,500	\$3,960	+23.8%
2019	\$4,500	\$3,940	-0.6%
2020	\$5,000	\$4,050	+2.8%

### Children's Advocacy Center

2021 REQUEST	\$5,000
2021 RECOMMENDATION	

#### COMMENTS

#### RETURN SHEET TO BRANKA MACKIC, AGENCY & PROGRAM COORDINATOR

#### MAINE TOWNSHIP APPLICATION FOR FUNDING 2021-2022



Agency Name: Children's Advocacy Center of North and Northwest Cook County

Address: 640 Illinois Boulevard, Hoffman Estates, IL 60169

Phone: (847) 885-0100	Fax: (847) 885-0187	Email: info@cachelps.org
Contact Person: Mark P	arr	Title: Executive Director
Grant Contact Person: I	Mark Parr	Title: Executive Director
Phone: (847) 885-0100 x	226	Email: mparr@cachelps.org

**Brief Description of Agency:** The Children's Advocacy Center (CAC) was established in 1989 to provide direct services for child victims of sexual abuse, severe physical abuse or other crimes and their non-offending family members. The CAC reduces trauma, provides support and helps victims to heal from their abuse by coordinating the multidisciplinary abuse investigation; providing expert child interviews; crisis intervention; court advocacy; case management and referral services; and offering evidence-based, trauma-informed therapy and support groups for children and parents.

Agency Total Budget:\$1,749,960Amount requesting from Maine Township: \$5,000(Please provide a copy of your budget.)

Agency Fiscal Year (e.g. March 2019-February 2020): July 2020 - June 2021

Total number of all unduplicated clients directly served during your last fiscal year: 1,145

Total number of <u>unduplicated Maine Township clients</u> directly served during your last fiscal year: <u>96</u>

If your grant is restricted, what is the total number of unduplicated Maine Township clients directly served during your last fiscal year in the program(s) we fund? <u>86</u>

What is the approximate number of Maine Township clients referred to other agencies during your last fiscal year?  $\underline{22}$ 

Annual salary and title of the five highest paid full-time (if applicable) employees. Salary ranges are not acceptable.

- 1. Executive Director, \$100,000
- 2. Assistant Director, \$77,445
- 3. Director of Development, \$75,000
- 4. Director of Forensic and Advocacy Services, \$62,000

#### 5. Director of Communications, \$56,650

- 1. Is your agency not for profit? (If so, attach Certificate of Good Standing). 🛛 Yes 🗌 No
- 2. Has your organization been in business for at least one year? X Yes I No
- 3. Are all your programs, services, activities and facilities provided by your organization available to the residents of Maine Township? ⊠ Yes □ No
- 4. Describe how your organization's services are currently promoted to the residents of Maine Township.

Most agency clients are referred to the Children's Advocacy Center by local law enforcement agencies or by the Department of Children and Family Services following a child's disclosure of abuse. In addition, the CAC works closely with medical and mental health service providers and with schools to help ensure that children and families are linked with the Children's Advocacy Center.

5. Has your organization ever received funding from Maine Township?  $\square$  Yes  $\square$  No If yes, <u>list all years</u> and the allocation amount.

2005-2006, \$1,200; 2006-2007, \$2,000; 2007-2008, \$3,000; 2008-2009, \$2,000; 2009-2010, \$2,000, 2010-2011, \$2,500; 2011-2012, \$2,500; 2012-2013, \$2,000; 2013-2014, \$2,500; 2014-2015, \$2,500; 2015-2016, \$2,500; 2016-2017, \$3,000; 2017-2018, \$3,200; 2018-2019, \$3,960; 2019-2020, \$3,940; 2020-2021, \$4,060.

# 6. Describe how your organization used the funding received from Maine Township during the previous funding year (if applicable).

The Children's Advocacy Center used the funding received from Maine Township to support the agency's Bilingual Forensic Interviewer and Therapist providing services for children and families living in Maine Township. In total, 86 children and adults from Maine Township received 841.5 hours of service through the agency's CASI and Family Support Services Programs in FY2020.

# 7. Describe how your organization plans to use the requested funding from Maine Township during the upcoming funding year.

Funds provided by Maine Township will be allocated for salaries and program supplies associated with the provision of direct services for abused children, and their non-offending family members, living in Maine Township. Specifically, the funds will support the Forensic Interviewer and Therapist positions in the CASI and Family Support Services Programs.

# 8. How has the COVID-19 pandemic impacted your organization and what changes have you had to implement as a result?

The Children's Advocacy Center (CAC) experienced a significant decrease in referrals for CASI Program Services following Governor Pritzker's "stay at home order" in March.

Month	New Referrals	<b>On-Going Clients Served</b>	Total CASI Clients Served
January 2020	47	250	297
February 2020	36	275	311
March 2020	42	258	300
April 2020	14	276	290
May 2020	6	246	252
June 2020	25	233	258

As the chart shows, referrals dropped to a low of 6 children in the month of May, as children remained out of school and away from teachers, counselors and other mandated child abuse reporters and police were limiting investigations of non-emergency reports. We began to see the number of referrals increase in June and this continued in July.

All therapy services offered through the Family Support Services Program and Safe from the Start continued through telehealth. In August, we began to offer a limited number of face-to-face therapy sessions for CAC clients who were not benefitting from the telehealth approach. All essential employees in the CASI Program are working in teams on designated days to limit the number of employees in the main facility and any exposure between teams (for example, Team A, made up of an interviewer, an Advocates and our Intake Coordinator are in the building every Monday and Tuesday and alternating Fridays. Team B, made up of the ED, an interviewer, and 2 Advocates are in the building on Wednesday and Thursday and the alternating Friday). All interviews are being done with the interviewer and child wearing masks and maintaining social distance. Post-interview meetings with non-offending parents are limited. The CAC has also purchased three plexiglass screens to provide another safety barrier when appropriate. The CAC staff have been following state guidelines for cleaning surfaces after every client appointment and toys and other materials have been removed from the waiting areas.

- 9. Which of the following best describes the services that your organization will be providing with the funds that you have requested? (Please check all that apply.)
  - □ Public safety
  - Environmental protection
  - Public transportation
  - Health
  - □ Other (please explain):

- □ Recreation
- □ Library
- Social services for youth
- □ Social services for the aged

# 10. Describe how your organization meets the eligibility requirements for the requested funding.

The Children's Advocacy Center is a not-for-profit organization that meets eligibility requirements by offering immediate and on-going services for child victims of abuse and their non-offending family members. The CAC responds to the immediate crisis of the child's disclosure of abuse by coordinating the multidisciplinary investigation, providing expert child interviews, offering crisis intervention, linking the family with resources for medical evaluations and other needed services, and assisting the family in developing a plan for the safety of the child. After the completion of the investigation, the CAC offers trauma-informed therapy services to help the child and her/his family heal from their abuse experience and provides advocacy with the criminal justice system while the matter is being prosecuted. Families may continue to receive services from the CAC for as long as necessary, and all services are provided for children and families free of charge. The CAC is the only agency in the area offering the services provided through the Coordination, Advocacy and Sensitive Interviewing Program (CASI).

## 11. Describe any new programs, services, activities or facilities that are currently proposed or contemplated by your organization.

The Children's Advocacy Center is not proposing any new programs or services at this time.

- 12. Do you certify that the funds that you are requesting from Maine Township will be used for your organization's ordinary and necessary maintenance and operating expenses and not for any capital expenditures? ⊠ Yes □ No
- 13. If your organization is providing services for the benefit of Maine Township residents who are persons with a developmental disability, do you certify that said services shall only be provided to such Maine Township residents who are not eligible to participate in any program conducted under Article XIV of the School Code? (Applies only to persons under 22 years of age.) □ Yes □ No
- 14. Do you certify that no person shall be excluded from participation in, denied benefits of, or be subjected to discrimination under, any service, facility or activity offered or provided by your organization on the grounds of race, color, national origin, sex, gender identity, age, religion, sexual preference, marital status or disability? ⊠ Yes □ No
- 15. Do you certify that your organization will not expend any of the funds requested from Maine Township, either directly or indirectly, for any partisan political activity, or to further the election or defeat of any candidate for any office, or for lobbying or propaganda purposes designed to support or defeat any legislation, either pending or proposed, before any governmental body? ⊠ Yes □ No
- 16. If requested, do you agree to provide the following to Maine Township? (Please note: You do NOT need to include these items with your application.)
  - A. Quarterly statements or reports setting forth the services rendered and programs provided for Maine Township residents, along with the associated costs to provide such services and programs
  - B. At such times and in such forms as Maine Township may require, any other statements, records, reports, data or information pertaining to matters covered by this application (Information relating to personal, medical and financial data will be treated as confidential.)
  - C. A written report signed by your organization's executive director, or whomever else is deemed to be in charge of your organization's activities, programs, services and facilities, including the following:

- I. A description of each program, service, activity or facility you provided or offered
- II. A statement that all such programs, services, activities and facilities are accessible to the disabled within the meaning of the Americans with Disabilities Act and the Rules and Regulations on disabled as promulgated thereunder
- III. An identification of those programs, services, activities or facilities, which are not accessible to the disabled
- IV. With respect to those programs, services, activities or facilities identified in response to item 15(C)(III) above, a detailed statement setting forth the specific steps and plans (including timetables for completion) to be taken to achieve accessibility and
- V. If structural modifications will be required to achieve accessibility, a detailed statement setting forth the modifications required and a timetable for completion

⊠ Yes □ No

- 17. If you receive any requested funds from Maine Township, do you certify that your organization will maintain general liability insurance coverage in an amount not less than \$1 million, naming Maine Township as a co-party insured, and do you further agree to provide Maine Township with a certified copy of said policy of insurance, along with the declaration sheet, binder and any exclusions related to said policy of insurance? ⊠ Yes □ No
- 18. If you receive any requested funds from Maine Township, do you certify that your organization will indemnify and hold harmless, protect and defend, at its own cost and expense, Maine Township, its property, officers, agents, employees, assigns, successors, transferees, licensees, invitees and/or any other persons or property standing in the interest of Maine Township, from any and all risks, suits, damages, expenses, including without limitation reasonable attorneys' fees and court costs, or claims due to any acts or omissions of your organization? ⊠ Yes □ No
- 19. What is the geographic service area of your organization?

The Children's Advocacy Center serves children and families in 38 communities in north and northwest suburban Cook County.

20. Does your organization charge for services?  $\Box$  Yes  $\boxtimes$  No

If yes, does your organization offer a sliding fee scale?

□ Yes. Attach 14 copies of the sliding fee scale.

□ No. Please explain how charges are determined.

21. If your organization does charge fees, would you be willing to wave application, program and other fees on a case by case basis for Maine Township residents whom we refer directly to your organization for assistance? □ Yes □ No

#### 22. Are volunteers used within your organization?

#### $\boxtimes$ Yes. Please indicate how many volunteers you have and how they are utilized.

The Children's Advocacy Center has three program volunteers and seventeen special event volunteers. Program volunteers include master's level social work students who provide direct services for agency clients under the supervision of program staff members; facility and reception volunteers, and administrative volunteers, who assist with data entry and analysis.

□ No. Please give specific reasons for not using volunteers.

#### 23. Does your organization provide any bilingual services?

⊠ Yes. Please indicate languages.

Spanish

🗆 No

- 24. Does your organization request proof of U.S. citizenship from its clients?
  - $\Box$  Yes. Please describe briefly.

🛛 No

24. Does your organization participate in cooperative programs with any other community agencies? (e.g. social service, not-for-profits, municipal agencies, etc.) Please explain. ⊠ Yes □ No

The Coordination, Advocacy and Sensitive Interviewing Program (CASI) is a multidisciplinary collaboration between the Children's Advocacy Center, local law enforcement agencies, DCFS, the Office of the Cook County State's Attorney, Advocate Children's Hospital, and local mental health service providers.

The CAC is the lead agency for the Safe from the Start Program, a community-based program designed to help young children (birth through age 5) exposed to violence, and their families. More than 25 agencies and organizations, including domestic violence programs, the local rape crisis center, police, public health, mental health programs, Head Start and early childhood education programs, and others are coalition partners in this collaborative project.

In 2017, the CAC began a Trauma-Informed Consultation Group for local therapists providing treatment services for children and adolescents, and their families. This Peer Consultation Group meets on a quarterly basis. In addition, the CAC continued providing Body Safety and Child Sexual Abuse Prevention sessions for children, parents and staff members at the Early Childhood Developmental Enrichment Center (ECDEC) in Palatine, Illinois. The sessions were postponed in the spring due to the coronavirus pandemic.

# 25. Does your organization participate in cooperative programs with any other service organizations? (e.g. Rotary, Kiwanis, Optimist, etc.) Please explain. 🖾 Yes 🗌 No

The CAC has partnerships with the Schaumburg AM Rotary Club and the Schaumburg-Hoffman

Estates Rotary Club. In addition, the CAC has received support in the past from the Palatine Jaycees, Woodfield Area Children's Organization and the Kiwanis Club of Streamwood. These service organizations have assisted the CAC during special events and provided support for free therapy services for child survivors of abuse or family violence.

- 26. Does your organization participate in cooperative programs with any community businesses? Please explain. ⊠ Yes □ No
- 27. List all sources of funding or support that your organization currently receives, including the total amount, frequency, duration, and percentage of any such support.

Funding Source	Amount	Frequency & Duration	Percentage
Maine Township	\$4,060	Annual	.25%
Foundations	\$175,000	Annual	10%
<b>Private Donors</b>	\$410,829	Annual	23.5%
Federal			
State	\$775,031	Annual	44.25%
Municipalities	\$42,765	Annual	2.45%
<b>Other Townships</b>	\$118,440	Annual	6.75%
Other: United	\$223,835	Annual	12.8%
Way, Cook			
County, Fees and			
Fines,			
Community			
Groups			
Total	\$1,749,960		100%

28. What type of fund-raising efforts has your organization had this year? Please list event names and specify the REVENUE and COSTS for fundraiser(s) and what program(s) the money was raised for.

Event	Revenue	Costs	Programs
Golf Outing	\$22,922.85	\$9,989.35	CASI, FSS, SFTS
Casino Night	\$32,539.53	\$17,569.90	CASI, FSS, SFTS
Annual Appeal	\$51,191.69	\$5,126.06	CASI, FSS, SFTS
Gala (cancelled)	\$38,000	\$1,195.58	CASI, FSS, SFTS
5K Run/Walk (virtual)	\$18,947.23	\$2,089.39	CASI, FSS, SFTS

#### 29. What fundraising efforts are planned for next year?

The Children's Advocacy Center is planning a Summer Wine and Dine event on August 22, 2020, a virtual golf outing in September, and the Fall Annual Appeal. The agency is tentatively planning to hold a Gala in April or May of 2021 and the 5K Run/Walk in June of 2021.

30. Please explain any changes that have occurred in your organization in the past year (i.e. new program(s), expansion or deletion of program(s), personnel, administration, major purchases or facility, etc.)

The CAC expanded the Safe from the Start Program to provide therapy services for young children exposed to violence, and their families, living in communities in north suburban Cook County. Cara Liace, LCSW, was hired to offer these services at the agency's Evanston office location.

#### 31. Please provide numerical breakdown of all staff member positions.

1.	Administration & Administrative Support	<u>4.5 FTE</u>
2.	Management of Service Providers	<u>1.75 FTE</u>
3.	Direct Service Providers	17 FTE

- 32. Number of certified staff members: 1
- What kinds of certifications are required for your service providers?Certified Fund Raising Executive (CFRE)
- 34. Number of licensed staff members: 10

#### 35. What kind of licensing is required for your service providers?

Licensed Social Worker (LSW) Licensed Clinical Social Worker (LCSW) Licensed Professional Counselor (LPC) Licensed Clinical Professional Counselor (LCPC)

#### 36. Please list all accreditations your organization has earned.

The CAC is fully accredited by the National Children's Alliance (NCA).

# 37. How would your organization be affected if it received a reduction in Township funding or if there was a complete elimination of Township funding?

Any reduction in Maine Township funding may have a negative impact on agency staff positions, and ultimately, may lead to reduction in services or increased waiting lists for follow-up therapy services for abused children, and their families, living in the Township. The Children's Advocacy Center relies on support from the Townships and Municipalities it serves. Township funds provide part of the required match dollars for state grants and this support allows the CAC to provide the level of service that child victims of abuse, and their families, need and deserve.

I hereby certify that I am authorized to execute this application on behalf of the organization listed below and that the statements contained herein are true and accurate.

Name of Applicant Organization: Children's Advocacy Center of North and Northwest Cook County

By Its Authorized Representative

Printed Name: Mark Parr

Title: Executive Director

Date: August 20, 2020

SUBSCRIBED and SWORN to before me this 20th day of August \_, 20 20 \_. Notary

YVONNE C DAVIS Official Seal Notary Public - State of Illinois My Commission Expires Sep 9, 2022

#### CHILDREN'S ADVOCACY CENTER PROPOSED AGENCY BUDGET FY2021

#### Income

#### Expenses

income	
State DCFS VOCA	\$315,008
ICJIA	\$323,523 \$121,500
Attorney General (VCVA)	\$ 15,000
State	\$775,031
Cook County	\$100,000
Foundations	
Help For Children	\$ 25,000
Hendrickson Foundation	\$ 20,000
Village Treasure House	\$ 6,000
Blowitz-Ridgeway Found.	\$ 15,000
Grant Healthcare Foundation	
Zurich	\$ 7,500
COS Foundation	\$ 15,000
Fischer Charitable Trust	\$ 15,000
Chicago Bulls Charities	\$ 5,000
Northwest Community	\$ 10,000
Other Foundations	\$ 41,500
Foundations	\$175,000
Fundraising Events	\$220,600
Township	\$122,500
Township United Way	\$122,500 \$ 18,696
-	
United Way	\$ 18,696
United Way General Donations	\$ 18,696 \$101,759
United Way General Donations Major Gifts	\$ 18,696 \$101,759 \$ 88,470
United Way General Donations Major Gifts Municipal	<ul> <li>\$ 18,696</li> <li>\$101,759</li> <li>\$ 88,470</li> <li>\$ 42,765</li> <li>\$ 35,000</li> </ul>
United Way General Donations Major Gifts Municipal Cook County CDBG	<ul> <li>\$ 18,696</li> <li>\$101,759</li> <li>\$ 88,470</li> <li>\$ 42,765</li> <li>\$ 35,000</li> </ul>
United Way General Donations Major Gifts Municipal Cook County CDBG Community Organizations	<ul> <li>\$ 18,696</li> <li>\$101,759</li> <li>\$ 88,470</li> <li>\$ 42,765</li> <li>\$ 35,000</li> <li>\$ 2,000</li> </ul>

$\sim$ 1 1		4	
Salaries		\$1	,253,552
Benefits		\$	222,749
Occupancy/R	ent	\$	48,117
Fundraising		\$	101,952
Telephone		\$	18,524
Supplies		\$	8,030
Staff Travel		\$	6,000
Client Travel		\$	5,430
Medical Clini	с	\$	200
Consultant/Co	ontract	\$	17,747
Conferences/	Fraining	\$	5,250
Equipment	*	\$	2,500
Insurance		\$	9,505
Accounting/A	udit	\$	13,500
Maintenance		\$	5,358
Printing		\$	700
Payroll		\$	2,025
Dues/Member	rships	\$	2,745
Legal Fees	-	\$	6,366
Postage		\$	1,100
Program Supp	olies	\$	10,500
Publications		\$	250
Record Storag	ze	\$	960
Conference L	-	\$	2,400
Miscellaneou		\$	4,500
		Ŧ	.,

Total

YEAR	REQUEST	ALLOCATION	CHANGE IN FUNDING
2014	\$2,500	0	4 <sup>th</sup> Request
2015	\$2,500	\$1,000	New Agency
2016	\$10,000	\$1,500	+50%
2017	\$7,500	\$2,100	+40%
2018	\$6,000	\$2,420	+15.2%
2019	\$6,000	\$4,520	+60.5%
2020	\$7,000	\$4,220	-6.9%

NAMI CCNS – National Alliance on Mental Illness-Cook County North Suburban

2021 REQUEST	\$6,000
2021 RECOMMENDATION	

#### COMMENTS

-			

RETURN SHEET TO BRANKA MACKIC, AGENCY & PROGRAM COORDINATOR

#### MAINE TOWNSHIP APPLICATION FOR FUNDING 2021-2022



Agency Name NAMI CCNS (National Alliance on Mental Illness Cook County North Suburban)

Address 8324 Skokie Blvd, Skokie, IL 60077

Phone 847-716-2252 Fax 847-716-2253 Email nekman@namiccns.org

Contact Person <u>Nathaniel Ekman</u> Title Executive Director

Grant Contact Person <u>Anne Kroemer Hoffman</u> Title <u>Grant Writer</u>

Phone office 847-716-2252; cell 773-469-9001 Email anne.kroemer@namiccns.org

Brief Description of Agency \_\_\_\_\_ The mission of NAMI Cook County North Suburban is to give help and hope

to individuals who have mental health conditions and those who love and care for them. NAMI CCNS

provides peer support to individuals living with mental illness; teaches family and loved ones how to

appropriately support and advocate for someone with mental illness; and works to end the stigma of mental illness through public education and advocacy.

Agency Total Budget \_\$409,060Amount requesting from Maine Township \_\$6,000(Please provide a copy of your budget.)Agency Fiscal Year (e.g. March 2019-February 2020)July 1 2020 to July 30 2021

Total number of <u>all unduplicated clients</u> directly served during your last fiscal year <u>8,862 in direct programming</u>, <u>plus 70,100 through our website</u>, fundraising events and Facebook Live

Total number of <u>unduplicated Maine Township clients</u> directly served during your last fiscal year <u>1,363</u>, plus an additional 10,785 through our website, FB Live and fundraisers

If your grant is restricted, what is the total number of unduplicated Maine Township clients directly served during your last fiscal year in the program(s) we fund? \_\_\_\_\_\_

What is the approximate number of Maine Township clients referred to other agencies during your last fiscal year? \_\_\_\_\_\_n/a\_\_\_\_\_

Annual salary and title of the five highest paid full-time (if applicable) employees. Salary ranges are not acceptable. *PLEASE NOTE: all of our employees below are part-time* @24 hours/wk

- 1. Nathaniel Ekman, Executive Director, \$55,000
- 2. Christine Somervill, Director of Programs, \$35,000
- 3. Jill Silver Topolski, Director of Development, \$38,500
- 4. Rena Thompson, Director of Finance & Administration, \$32,500
- 5. Charles to be a star batter of the particular be

1. Is your agency not for profit? (If so, attach Certificate of Good Standing). Xes INO

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- 2. Has your organization been in business for at least one year?  $\square$  Yes  $\square$  No
- 3. Are all your programs, services, activities and facilities provided by your organization available to the residents of Maine Township? ⊠ Yes □ No
- 4. Describe how your organization's services are currently promoted to the residents of Maine Township. We post flyers in multiple community organizations -- libraries, community centers, hospitals and businesses. We also use our website and social media to promote our programs. We receive referrals

businesses. We also use our website and social media to promote our programs. We receive referrals from numerous medical facilities and community resources, and we reach out through our email lists (over 6,300 names at present). Our programming is also publicized through word-of-mouth from current and past participants and their families and friends.

- 5. Has your organization ever received funding from Maine Township? ⊠ Yes □ No If yes, <u>list all years</u> and the allocation amount. 2015: \$1,000 ~ 2016: \$1,500 ~ 2017: \$2,100 ~ 2018: \$2,100 ~ 2019: \$4,520 ~ 2020: \$4,220
- Describe how your organization used the funding received from Maine Township during the previous funding year (if applicable).

This past fiscal year, which just ended June 30, we delivered over 11,000 direct hours of service to 1,363 unduplicated Maine Township residents. We anticipate continued significant increases in mental health needs this year because of the devastating effects of COVID-19 and its various dimensions – financial losses, economic fallout, uncertainty, social isolation, fear of infection, etc. – as well as our current social unrest. Experts are predicting a substantial mental health fallout as a result of the terrible events of 2020. According to the most recent U.S. Census population data, we can assume that Maine South has almost 22k residents who are living with a mental illness, of which around 2,500 are children/teenagers. Countless other residents love and care for someone suffering from mental illness. Without NAMI CCNS, more people with mental illness would experience discrimination, never reach their potential, and end up living on the streets, in prison or in other institutions, or taking their own lives.

7. Describe how your organization plans to use the requested funding from Maine Township during the upcoming funding year.

Our programming is more urgently needed than ever. The COVID-19 pandemic has relentlessly tested the limits of our mental health care system. Just when the pandemic seemed to be momentarily abating, with states gradually reopening, resurgences of the virus are striking even as the country is reckoning with another public health crisis—that of racism and social unrest. With widespread social isolation, increasing unemployment and unprecedented levels of stress, we are witnessing an impending mental health crisis. Doctors are seeing more and more patients with worsening mental health issues. They are also seeing patients who haven't experienced mental health issues before COVID-19 but are now seeking help for anxiety and depression because of social isolation and economic/financial fears.

A recent analysis by Meadows Mental Health Policy Institute examined previous recessions vis-à-vis suicide and drug overdose rates around those times. According to national data from 2007 to 2010, the suicide rate went up by 1.6 percentage points for each percentage point that unemployment rose. Their analysis shows the economic impact of COVID-19 could result in an additional 40,000 deaths by suicide and drug overdoses.

Long-term social distancing means that feelings of isolation can become overwhelming and exacerbate depression and other mental health disorders and increase the risk of suicide. Added to this, of course, are the loss of income that many of us are experiencing, the worry about loved ones, and forced togetherness with family members who are going through their own struggles during this time. The mental health and substance abuse fallout from the pandemic is expected to be substantial and long-lasting.

# 8. How has the COVID-19 pandemic impacted your organization and what changes have you had to implement as a result?

One of our proudest achievements in the recent past is how quickly we were able to act and change our program delivery methodology during the COVID-19 pandemic. We collaborated as a team, working intently so we could successfully and quickly pivot when COVID-19 began to spread and the Stay-at-
- Home order was put into place. We were able to place many of our support groups online -- and accessible on a virtual basis --within only a week of the official lockdown. All of our programming was subsequently switched to remote formats and available to everyone online, even equine therapy, and accessible to anyone. Even those with no access to a computer can dial in via telephone. As mentioned earlier, we are seeing an increase in participation in almost all of our virtual groups, and we've also added new programming to meet COVID-1-specific needs.
- We are also proud of how many programs we are able to deliver to our catchment area and through current virtual options beyond. We listen closely to what people need and quickly adapt or develop programming to meet those needs.

To meet the burgeoning needs that have arisen due to the pandemic, we developed and launched new mental health support programs, including

- NAMI Chats, which connects callers to a supportive peer who talks to them about their needs and situations, then offers specialized resources and support systems, and
- NAMI Frontline, a (currently virtual) support group for healthcare workers that utilizes multiple techniques like equine-assisted therapy to help relieve the mental health crisis involving front line workers. Unfortunately, even as we have expanded our programming, we are seeing substantial decreases in our income, because we were forced to cancel our in-person Gala and replace it with a virtual one. We will need to do the same for our Fall Walk/Run because of the persisting pandemic. The losses from not being able to hold those events as originally planned, plus the need for technology investments while the staff is working on remote bases, mean that we have been forced to plan a deficit budget.
- 9. Which of the following best describes the services that your organization will be providing with the funds that you have requested? (Please check all that apply.)
  - □ Public safety
  - □ Environmental protection
  - □ Public transportation
  - Health
  - Other (please explain): Mental Health
- 10. Describe how your organization meets the eligibility requirements for the requested funding. NAMI CCNS is a 501(c)3 organization in operation for almost 25 years and in direct service to Maine Township residents. We have a stable and well-operating organizational infrastructure in place to ensure accountability, transparence and excellent performance for clients and funders. We meet Maine Township's funding priority of mental health, which is especially crucial during this pandemic since residents' mental health are particularly vulnerable during these uncertain times.
- 11. Describe any new programs, services, activities or facilities that are currently proposed or contemplated by your organization.

Once we can all return to in-person programming, we plan to continue our remote options as well; this will be in addition to our in-person groups. As mentioned above, we launched two new programs early this summer: NAMI Frontline, a support group for healthcare workers, and NAMI Chats, a line that connects people to of-the-moment resources and supportive services. These have both been popular, and we will continue them as long as they are needed.

- 12. Do you certify that the funds that you are requesting from Maine Township will be used for your organization's ordinary and necessary maintenance and operating expenses and not for any capital expenditures? ⊠ Yes □ No
- 13. If your organization is providing services for the benefit of Maine Township residents who are persons with a developmental disability, do you certify that said services shall only be provided to such Maine Township residents who are not eligible to participate in any program conducted under Article XIV of the School Code? (Applies only to persons under 22 years of age.) 🖂 Yes

- □ Recreation
- □ Library
- Social services for youth
- Social services for the aged

- 14. Do you certify that no person shall be excluded from participation in, denied benefits of, or be subjected to discrimination under, any service, facility or activity offered or provided by your organization on the grounds of race, color, national origin, sex, gender identity, age, religion, sexual preference, marital status or disability? ⊠ Yes □ No
- 15. Do you certify that your organization will not expend any of the funds requested from Maine Township, either directly or indirectly, for any partisan political activity, or to further the election or defeat of any candidate for any office, or for lobbying or propaganda purposes designed to support or defeat any legislation, either pending or proposed, before any governmental body? ⊠ Yes □ No
- If requested, do you agree to provide the following to Maine Township? (Please note: You do NOT need to include these items with your application.)
  - A. Quarterly statements or reports setting forth the services rendered and programs provided for Maine Township residents, along with the associated costs to provide such services and programs
  - B. At such times and in such forms as Maine Township may require, any other statements, records, reports, data or information pertaining to matters covered by this application (Information relating to personal, medical and financial data will be treated as confidential.)
  - C. A written report signed by your organization's executive director, or whomever else is deemed to be in charge of your organization's activities, programs, services and facilities, including the following:
    - I. A description of each program, service, activity or facility you provided or offered
    - II. A statement that all such programs, services, activities and facilities are accessible to the disabled within the meaning of the Americans with Disabilities Act and the Rules and Regulations on disabled as promulgated thereunder
    - III. An identification of those programs, services, activities or facilities, which are not accessible to the disabled
    - IV. With respect to those programs, services, activities or facilities identified in response to item 15(C)(III) above, a detailed statement setting forth the specific steps and plans (including timetables for completion) to be taken to achieve accessibility and
    - V. If structural modifications will be required to achieve accessibility, a detailed statement setting forth the modifications required and a timetable for completion

⊠ Yes □ No

- 17. If you receive any requested funds from Maine Township, do you certify that your organization will maintain general liability insurance coverage in an amount not less than \$1 million, naming Maine Township as a co-party insured, and do you further agree to provide Maine Township with a certified copy of said policy of insurance, along with the declaration sheet, binder and any exclusions related to said policy of insurance? ⊠ Yes □ No
- 18. If you receive any requested funds from Maine Township, do you certify that your organization will indemnify and hold harmless, protect and defend, at its own cost and expense, Maine Township, its property, officers, agents, employees, assigns, successors, transferees, licensees, invitees and/or any other persons or property standing in the interest of Maine Township, from any and all risks, suits, damages, expenses, including without limitation reasonable attorneys'

fees and court costs, or claims due to any acts or omissions of your organization? X Yes A

19. What is the geographic service area of your organization? Our catchment area comprises 17 communities in north suburban Cook County: Maine, New Trier, Niles and Northfield Townships, plus the City of Evanston. Moreover, many individuals in other communities participate in NAMI CCNS programs since all of our programming is now offered in remote formats as well, accessible to anyone with a computer or even a phone.

#### 20. Does your organization charge for services? $\Box$ Yes $\boxtimes$ No

If yes, does your organization offer a sliding fee scale?

□ Yes. Attach 14 copies of the sliding fee scale.

□ No. Please explain how charges are determined.

21. If your organization does charge fees, would you be willing to wave application, program and other fees on a case by case basis for Maine Township residents whom we refer directly to your organization for assistance? 

Yes No Not applicable

#### 22. Are volunteers used within your organization?

### ☑ Yes. Please indicate how many volunteers you have and how they are utilized.

We are fortunate to have over 80 trained and certified volunteers who facilitate family and individual support groups, teach family education classes, speak at public programs and otherwise help us deliver our programming. All teachers, facilitators and public speakers must have 'lived' experience with serious mental illness in their families or personally, and all are required to complete comprehensive training and receive certification through NAMI Illinois. These two factors make them especially effective in their work. Moreover, having such dedicated volunteers allows us to reach so many program participants. We are also governed by a Board of Directors comprised of 20 volunteers who actively promote and support our work.

□ No. Please give specific reasons for not using volunteers.

#### 23. Does your organization provide any bilingual services?

Yes. Please indicate languages. We do offer a Spanish-language group, but this is presently on hiatus.

□ No

#### 24. Does your organization request proof of U.S. citizenship from its clients?

#### □ Yes. Please describe briefly.

No Anyone who needs our services is welcome to participate.

- 24. Does your organization participate in cooperative programs with any other community agencies? (e.g. social service, not-for-profits, municipal agencies, etc.) Please explain. ⊠ Yes □ No YES! We are pleased to collaborate with 18 hospitals and clinical services, 14 community mental health organizations and 22 community-based organizations in our catchment area. We are happy to provide a comprehensive list.
- 25. Does your organization participate in cooperative programs with any other service organizations? (e.g. Rotary, Kiwanis, Optimist, etc.) Please explain. If Yes INO NAMI CCNS is a member of the Wilmette Rotary Club and the Park Ridge Chamber of Commerce. We receive or have received funding from the Women's Clubs in Northbrook, Glenview and Evanston. We also receive funding from the Park Ridge Community Fund.

## 26. Does your organization participate in cooperative programs with any community businesses? Please explain. ⊠ Yes □ No

Community businesses in Maine Township are very generous in providing auction items and sponsorships for our past annual Walk/Run and Spring Gala.

27. List all sources of funding or support that your organization currently receives, including the total amount, frequency, duration, and percentage of any such support.

Funding Source	Amount	Frequency & Duration	Percentage
Maine Township	4,220	Annual application process	1%
Foundations	56,300	Annual application process	14%
Private Donors	15,150	Individual donations	4%
Federal	0		
State	0	2.4 <sub>1</sub>	
Municipalities	20,000	Annual application process	5%
Other Townships	20,000	Annual application process	5%
Other (list all)*	273,800	Year-round events	71%
Total INV emenicen			100%

\* Other includes our three fundraising events plus corporate support

28. What type of fund-raising efforts has your organization had this year? Please list event names and specify the REVENUE and COSTS for fundraiser(s) and what program(s) the money was raised for.

NAMI CCNS typically runs three fundraising events per year: a Spring Gala, an Annual Appeal, and a Walk/Run in the fall. The 2020 virtual Gala brought in revenue of \$77,510, compared to revenue of \$115,000 in 2019. Expenses were \$5,360, although \$2,000 of that was spent on invitations for the original in-person event.

#### 29. What fundraising efforts are planned for next year?

This October 2020, we will have our Walk/Run, but it will be on a virtual basis. We will enroll individuals and teams of walkers/runners, per usual, but they will complete their walk, run, swim, bike, etc. on their own, sharing their progress on social media. This is traditionally our most lucrative event, but we have lowered our financial expectations vis-à-vis revenue from the Walk/Run since we know a virtual event will not be as successful as an actual in-person one.

30. Please explain any changes that have occurred in your organization in the past year (i.e. new program(s), expansion or deletion of program(s), personnel, administration, major purchases or facility, etc.).

This spring, we experienced the unexpected and tragic passing of our long-time Director of Development, Susan Ockerlund. She was an integral member of the NAMI CCNS family and extremely devoted to her work, and she is terribly missed. We recently hired a new Director of Development, Jill Silver Topolski, and she started her position in early August.

COVID-19 has had a devastating effect on our communities' collective mental health, and we expect to see the consequences of this fallout for many months to come. We are seeing increases in almost all of our programming as a result. Accordingly, we are not planning on cutting any programming in the future; quite the opposite. We plan to complement our in-person programming, once it can resume, with multiple virtual groups, since our virtual programming has become so popular – and so broadly needed.

31. Please provide numerical breakdown of all staff member positions.

1.	Administration & Administrative Support	8	_
	Management of Service Providers	2	-
3.	Direct Service Providers	80+	

#### 32. Number of certified staff members \_\_\_\_\_2

### 33. What kinds of certifications are required for your service providers?

Our Executive Director and Connections Peer Support Coordinator are certified and trained by NAMI. Our Director of Programming, Dr. Christine Somervill, has a BA in Psychology, an MA in Counseling Psychology and a PhD in Higher Education and an Educational Management Certificate from Harvard University. She is also certified as a Mental Health First Aid instructor.

#### 34. Number of licensed staff members 0

#### 35. What kind of licensing is required for your service providers?

NAMI programs do not require professional licensure by the State or other governmental entity.

#### 36. Please list all accreditations your organization has earned.

NAMI CCNS is a local affiliate by the National Alliance of Mental Illness. NAMI was re-affiliated in 2016.

37. How would your organization be affected if it received a reduction in Township funding or if there was a complete elimination of Township funding?

Our request of 6,000 represents around 10% of the overall cost of FY2020/21 program expenses we've budgeted for Maine Township residents. If our funding from Maine Township were reduced, it would hinder our ability to meet the mental health needs of Township residents, which improves the quality of life for those thousands of people who live (or have a loved one with) mental health disorders in Maine Township. Mental health is especially precarious during this uncertain time, with many more people reporting mental health disorders. Of note is that pre-pandemic, our Family Education classes in Maine Township had waiting lists, and our support groups in Maine Township were in high demand.

We thank you most kindly for considering our request. We value Maine Township as an important partner and we are honored and grateful for MT's past support.

I hereby certify that I am authorized to execute this application on behalf of the organization listed below and that the statements contained herein are true and accurate.

Name of Applicant Organization	NAMI CCNS
	Mariel 9. Chman Its Authorized Representative
Printed Nam	e <u>Nathaniel Ekman</u>
Title	Executive Director
Date	August 11, 2020
SUBSCRIBED and SWORN to before me this <u>11</u> day of <u>Augus</u> , 20 <u>,</u>	<u>20</u> .
Notary Rayna Trayanov	RAYNA TRAYANOVA Official Seal Notary Public - State of Illinois My Commission Expires Feb 4, 2024

and a second	II CCNS FY21 Operating Budget	N-1		
Income				
Public Support				
	Foundations, Trusts & NonProfit Grants	\$	56,300	14
	Government Grants (local)	\$	40,000	10
	Corporation Support	\$	8,700	2
	Individual Giving (includes in kind)	\$	15,150	2
Fundraising Events				
	Fall Walk/Run	\$	112,000	29
	Annual Appeal	\$	45,500	12
	Community Based Fundraisers	\$	5,000	į
	Spring Gala	\$	102,500	20
Other Income				
	Program Revenue	\$	1,200	(
	Membership Dues	\$	5,000	1
	Interest	\$	150	
		\$	391,500	100
Expenses				
Program	Devre WAN and	<b></b>	100 501	
	Payroll/Wages	\$	129,504	
	Payroll/Taxes	\$	10,752	
	Program Delivery	\$	121,542	
		\$	261,798	
Administrative Overhead	Pavroll/Wages	\$	42.494	
	Payroll/Taxes	\$	3,528	
	General Operations	φ \$	39,881	
	General Operations	ф \$	85,903	
		φ	03,903	
Fundraising Events		\$	30,353	~
	Payroll/Taxes	\$	2,520	
	Other Fundraising	\$	28,487	
		\$	61,359	
		\$	409,060	

#### NAMI CCNS Current Funders

Northshore University Health System	\$35,000
Evanston Community Foundation RRF	\$21,000
New Trier Township	\$20,000
Healthcare Foundation of Highland Park	\$10,000
Kenilworth Community Fund	\$ 7,500
Niles Township	\$ 7,000
Dr. Scholl Foundation	\$ 5,000
Andrew & Alice Fischer Charitable Trust	\$ 5,000
Maine Township	\$ 4,220
City of Des Plaines	\$ 3,225
West Deerfield Township	\$ 3,000
McGraw Foundation	\$ 2,500
Northfield Township	\$ 2,000
Park Ridge Community Fund	\$ 1,900
Northbrook Women's Club	\$ 1,000

Please note that we also received a PPP Loan in the amount of \$33,000 under the aegis of the CARES Act.

We also run an Annual Appeal and have two large fundraising events: a Spring Gala and a Fall Walk/Run. Due to COVID-19, our Spring Gala was virtual; our Walk/Run will probably need to be virtual as well.

YEAR	REQUEST	ALLOCATION	CHANGE IN FUNDING
2014			
2015			
2016			
2017	\$2,500	\$2,000	New Agency
2018	\$2,500	\$2,100	+4.9%
2019	\$2,500	\$1,400	-40%
2020	N/A	Did Not Apply	N/A

2021 REQUEST	\$2,500
2021 RECOMMENDATION	

#### COMMENTS

RETURN SHEET TO BRANKA MACKIC, AGENCY & PROGRAM COORDINATOR

### MAINE TOWNSHIP APPLICATION FOR FUNDING 2021-2022



Agency Name: Search, Inc.

Address: 1925 N Clybourn Ave, Chicago, IL 60614

Phone: 773-305-5000Fax: 773-305-0739Email: glipscomb@search-inc.orContact Person: Grace LipscombTitle: Communications and Development AssGrant Contact Person: Same as aboveTitle: Same as abovePhone: 773-305-5000 x21Email: glipscomb@search-inc.org		-		
Grant Contact Person: Same as above Title: Same as above	Phone: 773-305-5000	:: 773-305-0739 Email: glipscomb@se	arch-inc.org	
	Contact Person: Grace Lipscom	Title: Communications and Develop	ment Assistant	
<b>Bhonse</b> 772 305 5000 x21 <b>Fmail:</b> dlipscomb@search-inc.org	Grant Contact Person: Same as	ove <b>Title:</b> Same as above	Title: Same as above	
Phone. 775-500-5000 x21 Email: gipteenis@eearch.intensig	<b>Phone:</b> 773-305-5000 x21	Email: glipscomb@search-inc.org		

#### Brief Description of Agency

The mission of Search, Inc. (Search) is to empower persons with intellectual and developmental disabilities to achieve their full potential, accept a valued role in their community, and lead rich, rewarding lives. We provide high-quality, person-centered services including supported living arrangements, adult learning programs and career services, as well as medical, behavioral, and therapeutic services. Our vision is to create a world where people with intellectual and developmental disabilities live, learn, work and play together as equals in the community. Our programs serve more than 500 individuals and their families annually at locations stretching from the southwest side of Chicago to the northern suburbs of Waukegan and Mount Prospect.

Agency Total Budget:\$18,666,227Amount requesting from Maine Township:\$2,500(Please provide a copy of your budget.)Agency Fiscal Year (e.g. March 2019-February 2020):July 1, 2020 to June 30, 2021

Total number of <u>all unduplicated clients</u> directly served during your last fiscal year: <u>522</u>

Total number of <u>unduplicated Maine Township clients</u> directly served during your last fiscal year: <u>6</u>

If your grant is restricted, what is the total number of unduplicated Maine Township clients directly served during your last fiscal year in the program(s) we fund?  $\underline{6}$ 

What is the approximate number of Maine Township clients referred to other agencies during your last fiscal year?  $\underline{0}$ 

Annual salary and title of the five highest paid full-time (if applicable) employees. Salary ranges are not acceptable.

- 1. Chief Executive Officer \$130,000
- 2. Director of Supported Living & Clinical Services \$78,322
- 3. Engineering Manager \$76,440
- 4. Director of Adult Learning & Career Services \$73,172
- 5. Warehouse Manager \$73,080
- 1. Is your agency not for profit? (If so, attach Certificate of Good Standing).  $\square$  Yes  $\square$  No
- 2. Has your organization been in business for at least one year?  $\square$  Yes  $\square$  No

### 3. Are all your programs, services, activities and facilities provided by your organization available to the residents of Maine Township? $\boxtimes$ Yes $\square$ No

Search provides services to adults with disabilities. Only individuals with a verified intellectual or developmental disability are eligible to participate in our services but geographic location is not considered. All services are available to eligible residents in Maine Township.

### 4. Describe how your organization's services are currently promoted to the residents of Maine Township.

Search is listed in the Maine Township Agency Directory. We have also participated in Maine Township's Agency Day in past years.

### 5. Has your organization ever received funding from Maine Township? $\boxtimes$ Yes $\Box$ No If yes, *list all years* and the allocation amount.

Yes, Search received funding from Maine Township from 2017-2020. Thank you for your support!

2019-2020: \$1,400 2018 - 2019: \$2,100 2017 - 2018: \$2,000

### 6. Describe how your organization used the funding received from Maine Township during the previous funding year (if applicable).

At the core of Search, we focus on empowering the individuals we serve to participate fully in their community and live a fun, active, and socially connected life. Spending time in the community is an important part of everyday life. Spending time in the community is an important part of everyday life. This time is especially important for people with disabilities, many of whom are more socially isolated than their peers. Search strives to provide opportunities for the people we serve to enjoy all that the local community has to offer.

During this past year, we have had outings and activities for our individuals. Search averages 10 outings per month for each house. Common activities include dancing, walking, shopping, swimming, horseback riding, exercise, sightseeing and social get-togethers. Some of the most common destinations are coffee shops, farmer's markets, banks, churches, forest preserves, drugstores, malls and summer concerts in the park. Most of these outings patronize local businesses, which means the money was invested directly back into the Maine Township community.

We were able to continue with these outings until March when COVID-19 precautions were set in place. From then on, until the end of our fiscal year, we transitioned to a robust schedule of virtual experiences. Our virtual experiences brought people around the country and world to gain knowledge of other cultures, experience museums and cultural institutions and participate in the fine arts.

## 7. Describe how your organization plans to use the requested funding from Maine Township during the upcoming funding year.

If awarded, this funding would help our staff optimize the virtual community experiences for our individuals in their homes. During this unprecedented time, our individuals' safety and wellbeing are the priority. In particular, individuals served by Search are vulnerable to COVID-19, with more than 40% of our residents considered elderly and over 70% of our residents having coexisting medical conditions. During this time, we are still venturing outdoors for neighborhood walks and socially-distanced backyard gatherings, but the core of community life right now lies in virtual experiences. Search has equipped each home with a Facebook Portal device and Google Chromebook so our residents can still see their friends, stay connected to family and participate in the virtual experiences of their choosing.

Should restrictions be lifted and COVID-19 is no longer a safety threat, we would reinstate a fully community-integrated schedule of activities and experiences. Our priority still remains to maintain quality relationships, community integration, and social involvement for all of the people served at Search.

Any assistance Maine Township could provide would greatly improve the quality of life for the six men living in Search's Oriole House and allow us to fully support virtual programming for these residents.

## 8. How has the COVID-19 pandemic impacted your organization and what changes have you had to implement as a result?

Like many businesses and organizations, Search's model of service delivery has had to shift greatly due to COVID-19. The health and wellbeing of the people we serve is Search's first priority. In March 2020, Search implemented immediate measures in order to ensure the safety of those we serve during the COVID-19 pandemic, including the following:

• Instituted sheltering in place for all 29 homes, minimizing community contact and decreasing unnecessary risk for 175 residents.

• Quarantined seven Search sites with COVID-19 outbreaks over the past six months, with a total of 45 staff and residents impacted.

• Shifted to alternative, extended shift staffing model in order to reduce shift changes and potential exposure, and incurring increased expenses for direct service staff.

• Purchased personal protective equipment and groceries, seeking 5 days of food and 30 days of PPE supplies for each home.

• With a mandate from the Illinois Department of Human Services, indefinitely suspended adult learning and career services programs for more than 200 participants.

### 9. Which of the following best describes the services that your organization will be providing with the funds that you have requested? (Please check all that apply.)

- □ Public safety
- □ Environmental protection
- □ Public transportation
- Health
- □ Other (please explain):

- $\boxtimes$  Recreation
- □ Library
- □ Social services for youth
- □ Social services for the aged

### 10. Describe how your organization meets the eligibility requirements for the requested funding.

Search is eligible for funding as per the criteria listed on the Maine Township website. The eligibility requirements for agency funding are:

- be a 501(c)(3) non-profit organization in operation for a minimum of one fiscal year
- provide direct services to Maine Township residents
- have appropriate non-profit infrastructure in place that ensures accountability and performance to its clients and funders
- meet one or more of Maine Township's identified funding priorities including mental health, substance abuse, domestic violence, developmental disabilities, seniors, youth, and economically challenged families

Search, Inc. is a 501(c)(3) non-profit organization that has operated for more than 50 years. Our agency provides supported living services to six (6) Maine Township residents each year.

Search has appropriate infrastructure and oversight in place to ensure accountability and performance to our clients and funders. Our Board of Directors plays an essential role in providing oversight of all programmatic and financial decisions at Search, Inc. Each year, our finances are audited by an accounting firm, Miller, Cooper & Co, that ensures compliance with best financial practices. Due to sound management, the financial health and stability of the organization remain strong.

Finally, Search serves individuals with intellectual and developmental disabilities, one of the funding priorities of Maine Township.

# 11. Describe any new programs, services, activities or facilities that are currently proposed or contemplated by your organization.

The majority of our programming has shifted virtual which has resulted in day programming and visual arts (which Search calls Visibility Arts) online for our individuals. We are also proposing video trainings from our Disability Awareness Players of JJ's List to offer virtual trainings and expand our reach nationwide.

Other than moving our programming virtually, there are no new initiatives at this time due to the COVID-19 pandemic.

12. Do you certify that the funds that you are requesting from Maine Township will be used for your organization's ordinary and necessary maintenance and operating expenses and not for any capital expenditures? ⊠ Yes □ No

Yes, we certify that the funds requested from Maine Township will be used for necessary operating expenses and not for any capital expenditures.

- 13. If your organization is providing services for the benefit of Maine Township residents who are persons with a developmental disability, do you certify that said services shall only be provided to such Maine Township residents who are not eligible to participate in any program conducted under Article XIV of the School Code? (Applies only to persons under 22 years of age.) ⊠ Yes □ No
- 14. Do you certify that no person shall be excluded from participation in, denied benefits of, or be subjected to discrimination under, any service, facility or activity offered or provided by your organization on the grounds of race, color, national origin, sex, gender identity, age, religion, sexual preference, marital status or disability? 🛛 Yes 🗌 No

Search provides services to adults aged 18 and older with a diagnosis of an intellectual or developmental disability. Within our service parameters, we certify that no person will be denied services or be subjected to discrimination of any kind, including on the grounds of race, color, national origin, sex, gender identity, age, religion, sexual preference, marital status or disability.

15. Do you certify that your organization will not expend any of the funds requested from Maine Township, either directly or indirectly, for any partisan political activity, or to further the election or defeat of any candidate for any office, or for lobbying or propaganda purposes designed to support or defeat any legislation, either pending or proposed, before any governmental body? ⊠ Yes □ No

Search certifies that it will not use any funding from Maine Township for any partisan political activity, to further the election or defeat of any candidate, or for lobbying purposes designed to support or defeat any legislation.

16. If requested, do you agree to provide the following to Maine Township? (Please note: You do NOT need to include these items with your application.)

A. Quarterly statements or reports setting forth the services rendered and programs

provided for Maine Township residents, along with the associated costs to provide such services and programs

Yes, we will provide this information if requested.

B. At such times and in such forms as Maine Township may require, any other statements, records, reports, data or information pertaining to matters covered by this application (Information relating to personal, medical and financial data will be treated as confidential.)

Yes, we will provide this information if requested.

- C. A written report signed by your organization's executive director, or whomever else is deemed to be in charge of your organization's activities, programs, services and facilities, including the following:
  - I. A description of each program, service, activity or facility you provided or offered

Yes, we will provide this information if requested.

II. A statement that all such programs, services, activities and facilities are accessible to the disabled within the meaning of the Americans with Disabilities Act and the Rules and Regulations on disabled as promulgated thereunder

Yes, we will provide this information if requested.

III. An identification of those programs, services, activities or facilities, which are not accessible to the disabled

Yes, we will provide this information if requested.

IV. With respect to those programs, services, activities or facilities identified in response to item 15(C)(III) above, a detailed statement setting forth the specific steps and plans (including timetables for completion) to be taken to achieve accessibility and

Yes, we will provide this information if requested.

V. If structural modifications will be required to achieve accessibility, a detailed statement setting forth the modifications required and a timetable for completion

Yes, we will provide this information if requested.

 $\boxtimes$  Yes  $\square$  No

17. If you receive any requested funds from Maine Township, do you certify that your organization will maintain general liability insurance coverage in an amount not less than \$1 million, naming Maine Township as a co-party insured, and do you further agree to provide Maine Township with a certified copy of said policy of insurance, along with the declaration sheet, binder and any exclusions related to said policy of insurance? ⊠ Yes □ No 18. If you receive any requested funds from Maine Township, do you certify that your organization will indemnify and hold harmless, protect and defend, at its own cost and expense, Maine Township, its property, officers, agents, employees, assigns, successors, transferees, licensees, invitees and/or any other persons or property standing in the interest of Maine Township, from any and all risks, suits, damages, expenses, including without limitation reasonable attorneys' fees and court costs, or claims due to any acts or omissions of your organization?  $\boxtimes$  Yes  $\square$  No

Yes, we certify that Search will indemnify and hold harmless, protect and defend Maine Township from any and all risks, suits, damages, expenses, or claims due to any acts or omissions of Search, Inc.

### 19. What is the geographic service area of your organization?

Search provides services at 35 locations in the greater Chicago area. Areas served include Mt. Prospect, Des Plaines, Skokie, Evanston, Morton Grove and the City of Chicago.

Search's Planet Access Company, a social enterprise and warehouse, and our Career Services program are based in Maine Township. The organization also operates one residential home, our Oriole House, in Maine Township.

#### 20. Does your organization charge for services? $\square$ Yes $\square$ No

#### If yes, does your organization offer a sliding fee scale?

#### $\boxtimes$ Yes. Attach 14 copies of the sliding fee scale.

#### $\Box$ No. Please explain how charges are determined.

Search's charges are determined by rates set by the State of Illinois. The vast majority (98%) of individuals served by Search are funded through Medicaid waiver services. The State of Illinois reimburses Search for services provided to individuals through the Medicaid waiver program.

There are a small number of individuals who privately pay Search for our Adult Learning Program (ALP). Reduced rates are available to private pay customers based on the federal poverty guidelines.

# 21. If your organization does charge fees, would you be willing to wave application, program and other fees on a case by case basis for Maine Township residents whom we refer directly to your organization for assistance? ⊠ Yes □ No

In accordance to our sliding fee scale policy and procedure, if a family falls into 100% of poverty or below, there is no service charge for Adult Learning Program services.

You can see the full breakdown on our sliding fee scale policy attachment.

#### 22. Are volunteers used within your organization?

### $\boxtimes$ Yes. Please indicate how many volunteers you have and how they are utilized.

We have had volunteers in the past in areas of governance, special events, direct

service, and administrative support. However, due to COVID, we do not currently have any volunteers at Search, Inc.

#### □ No. Please give specific reasons for not using volunteers.

#### 23. Does your organization provide any bilingual services?

#### ⊠ Yes. Please indicate languages.

Search provides services primarily in English, but we also teach sign language in our Adult Learning Program. Sign language is a very important tool in supporting individuals with hearing or speech impairments to communicate with staff and peers.

Aside from English and sign language, no other languages are formally taught in Search's programs. However, any individuals who wish to enter our programs are considered on a case-by-case basis. If someone does not speak English we make every effort to accommodate them, including pairing them with bilingual staff. The most common language used in addition to English is Spanish.

🗆 No

#### 24. Does your organization request proof of U.S. citizenship from its clients?

#### $\boxtimes$ Yes. Please describe briefly.

Search requires all of our clients to provide a Social Security card to enroll in our programs. Social Security cards are only provided to U.S. citizens.

# 24. Does your organization participate in cooperative programs with any other community agencies? (e.g. social service, not-for-profits, municipal agencies, etc.) Please explain. ☑ Yes □ No

Search is a founding affiliate of Keystone Alliance, an organization created in 2009 through a unique partnership between Search and Glenkirk. Keystone Alliance provides administrative oversight and services, including accounting and IT. This partnership has allowed Search and Glenkirk to collaborate in important ways including sharing best practices and generating administrative efficiencies.

Through our Community Life program, Search has also built relationships with other non-profit partners. Community Life offers participants enrolled in our Adult Learning Program daily volunteer opportunities with a variety of non-profit partners, including:

- Habitat for Humanity
- Twice As Nice Mother and Child
- Tree House Humane Society
- Wagner Farm
- Feed My Starving Children
- Cook County Forest Preserves
- Red Door Animal Shelter
- Bernie's Books
- Wheeling Food Pantry

• Pat Crowley H.O.M.E

In past years, 150 Search participants have volunteered at these nonprofits and performed valuable work such as stocking food pantry donations, performing facilities and landscaping maintenance, and cleaning up trash in forest preserves and beaches, among many other tasks.

In addition to the relationships listed above, Search has also partnered with the Northwest Suburban Special Education Organization (NSSEO) and the Northern Suburban Special Education District (NSSED) to offer job training to high school students with disabilities through our Career Services program in Maine Township.

# 25. Does your organization participate in cooperative programs with any other service organizations? (e.g. Rotary, Kiwanis, Optimist, etc.) Please explain. 🛛 Yes 🗌 No

In the past, Search has partnered with the Evanston Lighthouse Rotary Club (ELRC) through our social enterprise, JJ's List. In July 2017, the Evanston Rotary Club's annual fundraiser, "Taste of Evanston", benefitted Search's No Boundaries program, along with two other nonprofits. We are currently shifting these offerings to virtual formats pending funding and resources due to COVID-19.

Additionally, Search has previously received funding from the Service Club of Chicago for the Visibility Arts program. Specifically, the Service Club funded an electronic "Smart Board". The Smart Board has greatly enhanced the education experience offered by Visibility Arts and is now an essential part of our program.

## 26. Does your organization participate in cooperative programs with any community businesses? Please explain. ⊠ Yes □ No

Before COVID-19, Search was actively pursuing partnerships with local businesses with the goal of growing competitive employment opportunities for the people we serve. As part of this past effort, we have established a fruitful relationship with the Des Plaines Chamber of Commerce and its member businesses.

Search also provides over 25 Disability Awareness Trainings to businesses annually. The trainings instruct organizations on disability-aware customer service and employment practices. In the past year, prior to March 2020, trainings were held at Harper College, the Northeastern Illinois Public Safety Training Academy, the Art Institute of Chicago, and more.

## 25. List all sources of funding or support that your organization currently receives, including the total amount, frequency, duration, and percentage of any such support.

Search, Inc. receives the majority of its annual funding from the State of Illinois Department of Human Services and Department of Health & Family Services as reimbursement for services provided to individuals with intellectual and developmental disabilities (I/DD).

Search's projected sources of Support and Revenues for Fiscal Year 2021 (7/1/20 – 6/30/21) are as follows:

SUPPORT AND REVENUES		EXPLANATION
ILLINOIS DEPT OF HUMAN	13,844,353	Reimbursement for services
SERVICES		provided to individuals with I/DD
ILLINOIS DEPT OF HEALTH &	406,992	Reimbursement for services
FAMILY SERVICES		provided to individuals with I/DD
FEDERAL GRANTS	40,000	Community Development Block
		Grant (CDBG) funds from the
	,	Villages of Skokie and Mount
		Prospect to be used towards
		capital improvement projects at
		Search's Supported Living
		residences
CLIENT/FAMILY THIRD PARTY	1,806,212	Social security funds ("Room &
		Board") from the individuals served
		through our Supported Living
CONTRIBUTIONS/OTHER	160,000	program Private income from fundraising
GRANTS	100,000	and grants
SPECIAL EVENTS	90,000	Private income from Search's
		signature annual fundraising event
TOWNSHIPS	15,400	Funding from Townships in support
		of Search's services, including
		Community Inclusion (outings) and
		Disability Awareness Trainings
SALES OF SERVICES	1,833,950	Income from Search's social
		enterprises, especially the Planet
and the second sec		Access Company (PAC)
	51.000	warehouse in Des Plaines
INVESTMENT & INTEREST	51,000	
	100 100	The yeat majority of miga revenue
MISCELLANEOUS REVENUE	428,188	The vast majority of misc. revenue is shipping revenue from the
		Planet Access Company (PAC)
		warehouse. There are
		corresponding expenses with this
		line item.
TOTAL SUPPORT AND	18,676,094	
REVENUES		

# 26. What type of fund-raising efforts has your organization had this year? Please list event names and specify the REVENUE and COSTS for fundraiser(s) and what program(s) the money was raised for.

In Fiscal Year 2020 (July 1<sup>st</sup>, 2019 – June 30<sup>th</sup>, 2020), Search's main fundraising efforts were a Holiday Appeal mailing and online Giving Tuesday campaign, a signature fundraising event, and grant writing.

Fundraising Activity	Revenue	Costs	Programs Funded
Holiday Appeal & Giving Tuesday	\$47,169	\$2,876	General Operating
Search Trailblazers 2020 (signature fundraising event)	\$119,931	\$11,399.67	General Operating; Career Services
Grants	\$148,700	No direct expenses, only staff time	Career Services Disability Awareness Trainings Community Integration JJ's List ComEd Energy Force Program

The organization is focused on sustaining and growing these efforts in the current fiscal year.

#### 27. What fundraising efforts are planned for next year?

Search has planned a variety of fundraising efforts for the year ahead, based on three main activities: year-end giving, a signature fundraising event, and grants. Year-end giving is supported by a mailed Holiday Appeal and a one-day online Giving Tuesday campaign.

Search's signature fundraising event is a primary source of private support for the agency. **Search Trailblazers 2020:** *The Virtual Experience*, was held virtually on May 17<sup>th</sup> via Facebook Live. Amidst these unprecedented times, Search was still able to generate \$119,931 in revenue and engage over 150 supporters virtually. We will begin planning Trailblazers 2021 in the coming fall.

Grant revenue from private foundations and townships is the third main fundraising activity planned for the coming year. Search has already secured grants and/or applied to grants for the Disability Awareness Training program, Career Services program, and community integration activities in the year ahead. Due to our current COVID-19 pandemic, a lot of these programs have moved virtual thus we are using funding from various grants to help subsidize costs and create meaningful virtual experiences for our individuals.

Search, Inc. has placed a high priority on fundraising activities in order to maintain an excellent quality of service during the current COVID-19 pandemic when resources are challenged.

# 30. Please explain any changes that have occurred in your organization in the past year (i.e. new program(s), expansion or deletion of program(s), personnel, administration, major purchases or facility, etc.).

Effective January 1, 2020, Cory Gumm took over as Chief Executive Officer of Search as Beth Valukas left the organization. This was a structured transition with time for transition between the two leaders.

Due to the financial pressures of COVID-19, Search has made the difficult decision to close its Adult Learning Program in Waukegan effective 9/1/2020. Search is also responsibility restructuring our workforce to ensure we balance our expenses to the reduced State revenue

this year.

#### 31. Please provide numerical breakdown of all staff member positions.

- 1. Administration & Administrative Support44
- 2. Management of Service Providers <u>17</u>
- **3. Direct Service Providers** <u>192</u>

#### 32. Number of certified staff members: 209

#### 33. What kinds of certifications are required for your service providers?

The Direct Support Professional (DSP) certification, including CPR/First Aid training, is required by the State of Illinois for Search's caregivers who provide direct support to adults with developmental disabilities. Search is also required by the state to employ Qualified Intellectual Disabilities Professional (QIDP) certified staff to oversee the care of the individuals we serve.

#### **34.** Number of licensed staff members: <u>10</u>

#### 35. What kind of licensing is required for your service providers?

Search employs seven (7) masters-level licensed staff members and three (3) RNs who together provide medical and behavioral health services to the individuals we serve.

The state does not require that Search employ licensed staff. However, Search chooses to provide certain types of on-site medical and behavioral care to the individuals we serve, and the state requires that these specific treatments are provided by licensed professionals.

All of our programs are licensed to operate by the Illinois Department of Human Services.

#### 36. Please list all accreditations your organization has earned.

In November of 2019 Search achieved accreditation by the Council on Quality and Leadership (CQL). The previous and first CQL accreditation was achieved in November 2016. The decision to pursue CQL accreditation was based on the desire to seek the highest possible standard of person-centered care for the individuals we serve. Grounded in over 40 years of leadership and peer-reviewed research, CQL Accreditation promotes excellence in person-centered services and supports that lead to increased quality of life.

Search's Quality Assurances Accreditation is for a 3-year term, until November 2022.

### 37. How would your organization be affected if it received a reduction in Township funding or if there was a complete elimination of Township funding?

The proposed funding from Maine Township would provide essential support to ensure virtual community integration activities for the people we serve. If a <u>reduced</u> grant is awarded, we will

work to identify alternative sources of support for community integration and virtual experience activities at Oriole.

If the proposed grant funding from Maine Township is not awarded, the organization will work to fund virtual activities to the best of our ability.

Search is committed to providing high quality ongoing care to the individuals we serve and is working diligently to maintain and grow our programs over the long term. Current strategies include growing fundraising online and through mailed appeals, grant writing, and special events. In addition Search operates two social enterprises (a warehouse and a retail store) that generate revenue to invest back into our important programs.

Please let us know if you need any additional information. Thank you for your time and consideration of our proposal.

I hereby certify that I am authorized to execute this application on behalf of the organization listed below and that the statements contained herein are true and accurate.

Name of Applicant Organizatio	By Z Z
	Its Authorized Representative
	Printed Name Grace Lipscomb
	Title <u>COMMUNICATIONS</u> and Development Avistant
	Date 8-26-2020

SUBSCRIBED and SWORN to before me this 26H day of <u>August</u> , 20 <u>70</u> .	
Notary Sally Cupy	
SALLY GREGORY OFFICIAL SEAL Notary Public - State of Illinois My Commission Expires Apr 09, 2023	

The sliding fee scale used at Search, Inc. for reduced program fees is based on the federal poverty guidelines and is updated regularly as the guidelines change. Reduced program fees might be available to Adult Learning consumers based on the number in the household and the yearly income of the household. The scale is as follows:

Persons in Family	Poverty Guideline	
1	12,760	
2	17,240	
3	21,720	
4	26,200	
5	30,680	
6	35,160	
7	39,640	
8	44,120	
For families with more th	nan 8 persons, add \$4,480	
for each additional person.		

#### The 2020 Poverty Guidelines for the 48 Contiguous States and the District of Columbia

#### Search Inc.'s Fee Determination Levels:

100% of poverty or below- No service charge for Adult Learning Program services 101%-200% of poverty level- 33% of full fee for Adult Learning Program services 201%-300% of poverty level- 66% of full fee for Adult Learning Program services Above 300% of poverty level- Full fee for Adult Learning Program services

To qualify for the sliding fee, you will need to complete the attached form and return it to the Intake Manager with income information for the most recent tax year for each person in the household. Income is the amount earned before taxes are deducted. Additionally, applicants with personal assets over \$10,000 shall not qualify for the sliding fee.

Private pay service contracts at Search, Inc. are developed at the start of service and are renewed on July 1<sup>st</sup> of each year. The most recent FPG available at the time of the agreement will be used to determine if reduced rates are applicable.



#### FY 2021 ORGANIZATIONAL BUDGET

7/1/20 - 6/30/21

SUPPORT AND REVENUES	
ILLINOIS DEPT OF HUMAN SERVICES	13,844,353
ILLINOIS DEPT OF HEALTH & FAMILY SERVICES	406,992
FEDERAL GRANTS	40,000
CLIENT/FAMILY THIRD PARTY	1,806,212
CONTRIBUTIONS/OTHER GRANTS	160,000
SPECIAL EVENTS	90,000
TOWNSHIPS	15,400
SALES OF SERVICES	1,833,950
INVESTMENT & INTEREST INCOME	51,000
MISCELLANEOUS REVENUE	428,188
TOTAL SUPPORT AND REVENUES	18,676,094

#### EXPENSES

SALARIES, WAGES, AND RELATED EXPENSES	12,934,643
MANAGEMENT FEE	1,046,808
CONSULTANTS	255,836
CONSUMABLE SUPPLIES	601,700
OCCUPANCY	1,427,505
TRANSPORTATION	244,050
DEPRECIATION AND AMORTIZATION	718,971
INTEREST	292,393
MISCELLANEOUS	1,144,320
TOTAL EXPENSES	18,666,227



#### FY 2021 BUDGET REVENUE DETAIL

FEDERAL GRANTS DETAIL	
VILLAGE OF SKOKIE CDBG	\$ 10,000
VILLAGE OF MT. PROSPECT CDBG	\$ 30,000
TOTAL FEDERAL GRANTS	\$ 40,000
CONTRIBUTIONS/OTHER GRANTS DETAIL	
ECOLAB	\$ 3,000
CIRCLE OF SERVICE FOUNDATION	\$ 20,000
REVADA FOUNDATION	\$ 30,000
SPECIAL KIDS FOUNDATION	\$ 20,000
INDIVIDUAL CONTRIBUTIONS	\$ 87,000
TOTAL CONTRIBUTIONS/OTHER GRANTS	\$ 160,000
TOWNSHIPS DETAIL	
MAINE TOWNSHIP	\$ 1,500
NILES TOWNSHIP	\$ 5,000

\$

\$

10,000

16,500

NEW TRIER TOWNSHIP

TOTAL TOWNSHIPS

YEAR	REQUEST	ALLOCATION	CHANGE IN FUNDING
2014			
2015			
2016			
2017			
2018			
2019			
2020	\$10,000	\$1,500	New Agency

.

2021 REQUEST	\$10,000
2021 RECOMMENDATION	

#### COMMENTS

RETURN SHEET TO BRANKA MACKIC, AGENCY & PROGRAM COORDINATOR

### MAINE TOWNSHIP APPLICATION FOR FUNDING 2021-2022



Agency Name North Suburban Legal Aid Clinic

Address 491 Laurel Ave.	, Highland Parl	k, IL 600	35
<b>Phone</b> 847-737-4042	Fax 847-737-	4381	Email info@nslegalaid.org
Contact Person Susan S	hulman	Title Ex	kecutive Director
Grant Contact Person Jo	oanne Lee	Title G	rant Writer
Phone 847-737-4042	Email info@	nslegala	id.org

#### **Brief Description of Agency**

The North Suburban Legal Aid Clinic was founded in 2015 after the City of Highland Park's Human Services Task Force identified in a Needs Assessment the lack of access to affordable legal services. The mission of the Clinic is to provide quality pro-bono legal assistance in the areas of immigration, domestic violence, and housing to give those in need of access to justice the opportunity to live productive and secure lives. Today, the Clinic accomplishes this mission with 15 employees, a 16-member Board of Directors, as well as nearly 80 volunteer attorneys and professionals in the community. In 5 years, the Clinic has served over 2,600 clients throughout southern Lake County and northern Cook County. To be eligible for services, clients must be at or below 250% of the federal poverty guidelines, approximately \$65,500 for a family of four. There are no income requirements for victims of domestic violence. The Clinic continues to experience growth. As the end of July, the Clinic has served over 540 clients in 2020, compared to 875 in all of 2019.

## Agency Total Budget \$1,035,297 Amount requesting from Maine Township \$10,000 (Please provide a copy of your budget.)

Agency Fiscal Year (e.g. March 2019-February 2020) January-December 2020

Total number of all unduplicated clients directly served during your last fiscal year: 875

Total number of <u>unduplicated Maine Township clients</u> directly served during your last fiscal year: 62 or 7.1% (using zip codes 60016, 60018, 60025, 60053, 60056, 60068, 60631, 60714)

If your grant is restricted, what is the total number of unduplicated Maine Township clients directly served during your last fiscal year in the program(s) we fund?

What is the approximate number of Maine Township clients referred to other agencies during your last fiscal year? 40

Annual salary and title of the five highest paid full-time (if applicable) employees. Salary ranges are not acceptable.

- 1. Executive Director, \$80,000
- 2. Director of Immigration, \$72,000
- 3. Director of Domestic Violence, \$72,000
- 4. Director of Housing, \$67,000
- 5. Domestic Violence Staff Attorney, \$58,000
- 1. Is your agency not for profit? (If so, attach Certificate of Good Standing).  $\square$  Yes  $\square$  No
- 2. Has your organization been in business for at least one year?  $\square$  Yes  $\square$  No
- 3. Are all your programs, services, activities and facilities provided by your organization available to the residents of Maine Township?  $\square$  Yes  $\square$  No
- 4. Describe how your organization's services are currently promoted to the residents of Maine Township.

The Clinic's services are promoted through our partner organizations, referral network, and outreach activities. The Clinic hosts monthly off-site clinics with organizations that serve the Maine Township area including KANWIN, Harper College and HANA Center. We have also hosted presentations, such as the Domestic Violence Awareness Month presentation at the Mt. Prospect Library, to increase the visibility of our services. The Clinic's partner mailing list includes contacts from Maine Township, local representative, and municipalities within the township.

- 5. Has your organization ever received funding from Maine Township? ⊠ Yes □ No If yes, *list all years* and the allocation amount. \$1,500 in for 2020
- 6. Describe how your organization used the funding received from Maine Township during the previous funding year (if applicable). Maine Township funding was used to support the salaries of Domestic Violence and Immigration attorneys who provided direct legal services to township residents. In 2019, the Clinic served 62 Maine Township clients, compared to 24 in 2018.
- 7. Describe how your organization plans to use the requested funding from Maine Township during the upcoming funding year.

The Clinic is requesting funding to continue to support the salaries of Domestic Violence, Immigration, and Housing attorneys to provide direct legal services to township residents. In July 2020, the Clinic was able to hire a full-time Director of Housing. This increased capacity will allow the Clinic to serve housing clients within Maine Township. At the end of July 2020, the Clinic has already served 37 Maine Township clients and we expect to exceed our 2019 numbers.

8. How has the COVID-19 pandemic impacted your organization and what changes have you had to implement as a result?

The COVID-19 pandemic is an ongoing challenge for our community and organization. With respect to domestic violence, the pandemic naturally isolates victims from friends, family, and

coworkers. With many people working from home, it can make it more challenging for victims to leave undetected and seek services. The Clinic is adapting to the changing need of clients and have noted a 44% increase in calls. We are working with municipalities, partners, community leaders, and the Governor's office to reduce the barriers created by the pandemic and increase the accessibility of our legal services.

COVID-19 has only exacerbated existing housing issues. COVID-19 disproportionately impacts people of color and low-income residents, who are already at higher risk of eviction. Eviction bans enforced by the state are a stopgap measure and allow for widespread evictions as soon as they are lifted. Additionally, the Illinois order does not provide tenants with a grace period to pay rental debt accrued during this period. The Clinic has been assisting clients with applying for state and county rental assistance, doing outreach to reduce the anxiety felt by our community, and preparing for a surge in eviction filings once the moratorium is lifted at the end of September.

For immigration, studies show that Hispanic/Latinx adults are more likely than any other ethnic group to report job losses due to COVID-19. Even though immigrant families are disproportionately experiencing economic hardship due to COVID-19, policy changes such as changes in public charge can discourage these residents from receiving assistance. There is an immense need for outreach and education for these communities to reduce their anxiety and so that they can receive the assistance they qualify for. The Clinic has been doing extended outreach online through Facebook Live and Zoom. Additionally, staff have been consulting clients on how unemployment benefits may affect existing immigration cases.

### 9. Which of the following best describes the services that your organization will be providing with the funds that you have requested? (Please check all that apply.)

Public safety

- Recreation
   Library
- □ Environmental protection
- □ Public transportation
- □ Health

- Social services for youth
   Social services for the aged
- ☑ Other (please explain): Legal Services

### 10. Describe how your organization meets the eligibility requirements for the requested funding.

The Clinic is a 501©(3) non-profit organization that has been in operation since 2015. To be eligible for services, clients must be at or below 250% of the federal poverty guidelines, or \$65,500 for a family of four. There are no income requirements for victims of domestic violence. The Clinic's work meets the townships domestic violence and economically challenged families priorities. In 2019, the Clinic served 62 Maine Township residents.

The Clinic has best practices that ensures the provision of reliable and quality legal services. All Directors have extensive experience within their practice areas. The Clinic's 16-member Board of Directors come from diverse professional backgrounds, such as finance, law, and business, that ensures that the Clinic maintains best practices.

### 11. Describe any new programs, services, activities or facilities that are currently proposed or contemplated by your organization.

It has become evident that the Clinic's Housing program as the most urgent need for growth. The Clinic is exploring funding opportunities to grow this practice. Additionally, with the addition of several staff members, the Clinic intends to move in 2020/2021.

- 12. Do you certify that the funds that you are requesting from Maine Township will be used for your organization's ordinary and necessary maintenance and operating expenses and not for any capital expenditures? ⊠ Yes □ No
- 13. If your organization is providing services for the benefit of Maine Township residents who are persons with a developmental disability, do you certify that said services shall only be provided to such Maine Township residents who are not eligible to participate in any program conducted under Article XIV of the School Code? (Applies only to persons under 22 years of age.) ⊠ Yes □ No
- 14. Do you certify that no person shall be excluded from participation in, denied benefits of, or be subjected to discrimination under, any service, facility or activity offered or provided by your organization on the grounds of race, color, national origin, sex, gender identity, age, religion, sexual preference, marital status or disability? ⊠ Yes □ No
- 15. Do you certify that your organization will not expend any of the funds requested from Maine Township, either directly or indirectly, for any partisan political activity, or to further the election or defeat of any candidate for any office, or for lobbying or propaganda purposes designed to support or defeat any legislation, either pending or proposed, before any governmental body? ⊠ Yes □ No
- 16. If requested, do you agree to provide the following to Maine Township? (Please note: You do NOT need to include these items with your application.)
  - A. Quarterly statements or reports setting forth the services rendered and programs provided for Maine Township residents, along with the associated costs to provide such services and programs
  - B. At such times and in such forms as Maine Township may require, any other statements, records, reports, data or information pertaining to matters covered by this application (Information relating to personal, medical and financial data will be treated as confidential.)
  - C. A written report signed by your organization's executive director, or whomever else is deemed to be in charge of your organization's activities, programs, services and facilities, including the following:
    - I. A description of each program, service, activity or facility you provided or offered
    - II. A statement that all such programs, services, activities and facilities are accessible to the disabled within the meaning of the Americans with Disabilities Act and the Rules and Regulations on disabled as promulgated thereunder
    - III. An identification of those programs, services, activities or facilities, which are not accessible to the disabled
    - IV. With respect to those programs, services, activities or facilities identified in response to item 15(C)(III) above, a detailed statement setting forth the specific

steps and plans (including timetables for completion) to be taken to achieve accessibility and

V. If structural modifications will be required to achieve accessibility, a detailed statement setting forth the modifications required and a timetable for completion

⊠ Yes □ No

- 17. If you receive any requested funds from Maine Township, do you certify that your organization will maintain general liability insurance coverage in an amount not less than \$1 million, naming Maine Township as a co-party insured, and do you further agree to provide Maine Township with a certified copy of said policy of insurance, along with the declaration sheet, binder and any exclusions related to said policy of insurance? ⊠ Yes □ No
- 18. If you receive any requested funds from Maine Township, do you certify that your organization will indemnify and hold harmless, protect and defend, at its own cost and expense, Maine Township, its property, officers, agents, employees, assigns, successors, transferees, licensees, invitees and/or any other persons or property standing in the interest of Maine Township, from any and all risks, suits, damages, expenses, including without limitation reasonable attorneys' fees and court costs, or claims due to any acts or omissions of your organization? ⊠ Yes □ No

#### 19. What is the geographic service area of your organization?

The Clinic's service area is southern Lake County and northern Cook County, including but not limited to Moraine, West Deerfield, Shields, Maine, Northfield, and New Trier Townships.

20. Does your organization charge for services?  $\Box$  Yes  $\boxtimes$  No

If yes, does your organization offer a sliding fee scale?

□ Yes. Attach 14 copies of the sliding fee scale.

 $\Box$  No. Please explain how charges are determined.

21. If your organization does charge fees, would you be willing to wave application, program and other fees on a case by case basis for Maine Township residents whom we refer directly to your organization for assistance? □ Yes □ No

#### 22. Are volunteers used within your organization?

#### ☑ Yes. Please indicate how many volunteers you have and how they are utilized.

The Clinic has approximately 80 volunteers. Volunteer attorneys take on pro-bono cases, help staff clinics and events, or volunteer at the office on a regular basis. Non-attorney volunteers help with event planning, translation, and fundraising.

#### □ No. Please give specific reasons for not using volunteers.

#### 23. Does your organization provide any bilingual services?

⊠ Yes. Please indicate languages.

The Clinic provides services in Spanish, Korean, Polish, and Italian. We will do our best

to accommodate other language needs.

🗆 No

- 24. Does your organization request proof of U.S. citizenship from its clients?
  - $\Box$  Yes. Please describe briefly.

🛛 No

24. Does your organization participate in cooperative programs with any other community agencies? (e.g. social service, not-for-profits, municipal agencies, etc.) Please explain.
 ☑ Yes □ No

The Clinic has partnerships with KANWIN, HANA Center Northwest, Niles Township, Partners for Our Communities, New Trier Township and Harper College. Additionally, the Clinic's referral network includes many local social services organizations such as A Safe Place, Northwest CASA, and Open Communities, as well as many local police departments and places of worship.

- 25. Does your organization participate in cooperative programs with any other service organizations? (e.g. Rotary, Kiwanis, Optimist, etc.) Please explain. ⊠ Yes □ No The Clinic receives funding and has a strong relationship with the Rotary Club of Highland Park/Highwood. As we continue to expand, the Clinic has been working on creating relationships with other local rotary clubs.
- 26. Does your organization participate in cooperative programs with any community businesses? Please explain. ☑ Yes □ No The Clinic frequently partners with the legal teams at AbbVie Inc. and Abbott Laboratories to host Power of Attorney Clinics for low-income seniors and other pro-bono opportunities.
- 27. List all sources of funding or support that your organization currently receives, including the total amount, frequency, duration, and percentage of any such support.

Funding Source	Amount	Frequency & Duration	Percentage
Maine Township	1,500	1x in 2020-2021	0.1%
Foundations	212,375	Annual	20.4%
Private Donors	65,000	1x major gift and personal contributions	6.3%
Federal	22,000	1x PPP	2.1%
State	397,797	Annual	38.3%
Municipalities			
Other Townships	35,500	Annual	3.4%
Other (County)	66,000	Annual	6.4%
Other (Fundraising)	104,000	1x for full year	10.0%
Other (Interest)	1,000	1x for full year	0.1%
Other (Reimbursed Advance Client Expenses)	1,125	1x for full year	0.1%
Other (2019 surplus)	133,000	1x for full year	12.8%
Total	1,039,297		100%

# 28. What type of fund-raising efforts has your organization had this year? Please list event names and specify the REVENUE and COSTS for fundraiser(s) and what program(s) the money was raised for.

Spring Event- General Funding Revenue: \$98,000 Cost: \$6,500 The Clinic's Spring Event was cancelled, however we still received sponsorship donations.

#### 29. What fundraising efforts are planned for next year?

The Spring Event and Taco Run are annual events. The Taco Run was cancelled dur to COVID-19 but we expect to raise around \$8,000 for the event. Additionally, each fall, we host an online matching grant called the Immigration Defense Fund which raises around \$40,000 in total.

# 30. Please explain any changes that have occurred in your organization in the past year (i.e. new program(s), expansion or deletion of program(s), personnel, administration, major purchases or facility, etc.).

In January 2020, the Clinic secured funding that allowed us to bring our second part-time DOJ Accredited Representative to full-time and to hire an additional Immigration staff attorney. In July 2020, the Clinic was able to hire a Director of Housing, a second Domestic Violence staff attorney and a social worker to coordinate services.

#### 31. Please provide numerical breakdown of all staff member positions.

1.	Administration & Administrative Support	2
2.	Management of Service Providers	2
3.	Direct Service Providers	11

**32.** Number of certified staff members 10, 5 in progress

#### 33. What kinds of certifications are required for your service providers?

All service providers must complete the 40 Hour Domestic Violence Training, Mental Health First Aid Training, trauma informed care training. All attorneys must fulfil their continuing legal training requirements. All immigration staff and volunteers must complete Catholic Legal Immigration Network's Comprehensive Overview of Immigration Law course.

#### 34. Number of licensed staff members 11

#### 35. What kind of licensing is required for your service providers?

All legal staff must be licensed to practice law in Illinois and social work staff must be licensed to provide clinical care.

#### 36. Please list all accreditations your organization has earned.

The Clinic's Immigration practice is accredited through the Board of Immigration Appeals.

## 37. How would your organization be affected if it received a reduction in Township funding or if there was a complete elimination of Township funding?

The Clinic is eager to grow our geographic service area and without Maine Township funding, we would be limited in the number of cases we could accept from Maine Township residents.

I hereby certify that I am authorized to execute this application on behalf of the organization listed below and that the statements contained herein are true and accurate.

Name of Applicant Organization North Suburban Legal Aid Clinic

Sisar B. Shilman Bv

Its Authorized Representative

Printed Name <u>Susan Shulman</u>

Title Executive Director

Date 8/31/2020

SUBSCRIBED and SWORN to before me this 31 day of Augu Notar

		8
A STATION	SARAH DINCIN	2
Care a	OFFICIAL SEAL	
SERME	Notary Public, State of Illinois	)-
11 201/	My Commission Expires	
ALC: NOT ALL ALC	May 08, 2023	5



### 2020 Budget - REV

come		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
4000 Grant Revenue	Grants	\$	735,17
4100 Contributions Received	Personal Contributions	\$	45,00
4200 Major Gifts	Major Gifts	\$	20,00
4300 Spring Event Revenue	Events	\$	98,00
4400 Other Event Revenue	Events	\$	2,00
Reimbursed Advanced Client Expenses		\$	1,12
4800 Interest Income	Interest Income	\$	1,00
Surplus from 2019		\$	133,00
	Total Revenue	\$1	,035,297.0
	Reserves	\$	25.00
		\$	35,00
	Total Revenue + Reserves	\$	1,070,29
(pense			
6020 Accounting Fees	Accounting	\$	5,50
6040 Audit	Accounting	\$	6,50
6060 Advertising & Promotion	Advertising	\$	2,00
6095 PayPal Fees	Paypal fees	\$	1,600
6105 Case Management System	CMS	\$	14,40
6120 Computer & Interent Expenses	Computer Related, Consultant	\$	4,000
6120 Computer & Interent Expenses	New Computer	\$	8,000
6200 Consultant Fees	Consultant Fees	\$	20,00
6240 Continuing Education	Books	\$	1,50
6260 Dues & Subscriptions	Dues and Subscriptions	\$	4,00
6280 Spring Event Expense	Spring Event Expense	\$	6,50
6300 Other Event Expense	Other Event Expenses	\$	50
0500 Other Event Expense			10,000
6330 Insurance Expense	Insurance	\$	10,000
•	Insurance Licenses and Fees	\$ \$	
6330 Insurance Expense		\$	2,000
6330 Insurance Expense 6440 Licenses & Fees	Licenses and Fees	\$ \$	2,000 2,500
6330 Insurance Expense 6440 Licenses & Fees 6460 Meals & Entertainment	Licenses and Fees Meals and Entertainment	\$	2,000 2,500 5,000
6330 Insurance Expense 6440 Licenses & Fees 6460 Meals & Entertainment 6490 Office Supplies	Licenses and Fees Meals and Entertainment Supplies	\$ \$ \$	2,000 2,500 5,000 8,500
6330 Insurance Expense 6440 Licenses & Fees 6460 Meals & Entertainment 6490 Office Supplies 6840 Travel Expense	Licenses and Fees Meals and Entertainment Supplies Travel	\$ \$ \$ \$	2,000 2,500 5,000 8,500 648,763
6330 Insurance Expense 6440 Licenses & Fees 6460 Meals & Entertainment 6490 Office Supplies 6840 Travel Expense 6510 Salary	Licenses and Fees Meals and Entertainment Supplies Travel Salary	\$ \$ \$ \$ \$	2,000 2,500 5,000 8,500 648,763 40,223
6330 Insurance Expense 6440 Licenses & Fees 6460 Meals & Entertainment 6490 Office Supplies 6840 Travel Expense 6510 Salary 6520 ER OASDI	Licenses and Fees Meals and Entertainment Supplies Travel Salary Fica	\$ \$ \$ \$ \$ \$ \$	2,000 2,500 5,000 8,500 648,763 40,223 9,407
6330 Insurance Expense 6440 Licenses & Fees 6460 Meals & Entertainment 6490 Office Supplies 6840 Travel Expense 6510 Salary 6520 ER OASDI 6530 ER Medicare	Licenses and Fees Meals and Entertainment Supplies Travel Salary Fica Medicare	\$ \$ \$ \$ \$	2,000 2,500 5,000 8,500 648,763

	Net Income/Loss	\$ 119,975
	Total Expenses	\$ 950,322
6900 Miscellaneous Expense	Miscellaneous	\$ 2,000
Reserve for Advance of Client Expenses		\$ 1,500
Moving Expenses		\$ 8,000
6870 Website	Website	\$ 7,500
6860 Utilities	Utilities	\$ 3,000
6850 Training	Training	\$ 6,000
Security		\$ 360
6810 Telephone and Internet	Telephone	\$ 6,000
6720 Repairs and Maintenance		\$ 4,000
6710 Research Services	Lexis Nexis	\$ 2,418
6710 Rent Expense	Rent	\$ 25,470
6660 Printing Expense	Printing	\$ 5,000
6650 Postage & Delivery	Postage	\$ 1,600
	Subtotal Payroll	\$ 774,974
6590 Payroll Service Expense		
403(b)	Payroll Expenses	\$ 1,500
402(h)		\$ -

### 2020-2021 Funding

Source	A	mount	Status	Practice
VOCA	\$	355,000	Actual	Domestic Violence
A2J	\$	130,000	Actual	Immigration
West Deerfield Township	\$	5,000	Actual	General
Illinois Bar Foundation		5,000	Actual	Housing/Immigration
Lake County Community Foundation-				15,000 for DV; 10,000 for
Donor Advised Funds	\$	25,000	Actual	Housing
Niles Township	\$	10,000	Actual	Immigration
New Trier Township	\$	8,000	Projected	General
North Shore Giving Circle	\$	10,000	Actual	Domestic Violence
Moraine Township	\$	4,000	Actual	General
HP-HW Rotary	\$	3,000	Projected	General
Healthcare Foundation of Highland Park	\$	125,000	Projected	Domestic Violence
Lawyer's Trust Fund of Illinois	\$	15,000	Projected	Immigration
Allstate	\$	10,000	Projected	Domestic Violence
Trillium Foundation	\$	3,500	Projected	General
Lake County Housing and Community				
Development Commission	\$	50,000	Projected	Housing
Immigration Funders Coalition	\$	25,000	Actual	Immigration
Harper College	\$	2,500	Projected	Immigration
YEAR	REQUEST	ALLOCATION	CHANGE IN FUNDING	
------	----------	------------	-------------------	
2014				
2015	n/a	\$58,542	New Agency	
2016	\$65,000	\$60,000	+2.5%	
2017	\$63,000	\$60,000	0%	
2018	\$60,000	\$59,000	-1.7%	
2019	\$60,000	\$56,200	-4.7%	
2020	\$60,000	\$55,400	-1.4%	

2021 REQUEST	\$60,000
2021 RECOMMENDATION	

#### COMMENTS

RETURN SHEET TO BRANKA MACKIC, AGENCY & PROGRAM COORDINATOR

# MAINE TOWNSHIP APPLICATION FOR FUNDING 2021-2022



Agency Name: Leyden Family Service and Mental Health Center

Address: 10001 Grand Ave., Franklin Park, IL 60131

Phone: 847-451-0330 Fax: 847-451-1652 Email: bsewick@leydenfamilyservice.org

Title CEO

**Title Controller** 

Contact Person: Bruce Sewick

Grant Contact Person: Brenda Parzygnat

Phone: 847-451-5091 Email: bparzygnat@leydenfamilyservice.org

**Brief Description of Agency** Leyden Family Service is a 501c3 Joint Commission accredited Community Mental Health Center in existence since 1950 providing a broad array of Behavioral Health Services to adults, adolescents and children. Leyden provides Crisis services for adults and children, Outpatient Mental Health and Substance Use Disorder services as well as Psychosocial Rehabilitation and Transitional Living, and Peer Support Center Programs for those with serious and persistent mental illness. Case Management and Benefit Assistance Programs are available to all clients we serve as well as a Food Pantry for anyone in need. We are also an Agency that collaborates with the Greater Chicago Food Depository. This allows us to provide perishable food in addition to canned and packaged food. Our Senior Program is dedicated to helping elders maintain independent living. We currently have one psychiatrist and an APN providing tele-psychiatry to Crisis Mobilization for children (the program was formerly SASS). They also provide psychotropic medication management. Additionally, Leyden's SHARE Program has a 56 bed Inpatient Detoxification and Residential Rehabilitation Program for adult male and females with substance abuse disorders.

Agency Total Budget <u>\$6,445,163.00</u> Amount requesting from Maine Township <u>\$60,000.00</u> (Please provide a copy of your budget.) Agency Fiscal Year (e.g. March 2019-February 2020) <u>July 1, 2020 – June 30, 2021</u>

Total number of <u>all unduplicated clients</u> directly served during your last fiscal year: <u>9,816</u>

Total number of <u>unduplicated Maine Township clients</u> directly served during your last fiscal year <u>499</u>

If your grant is restricted, what is the total number of unduplicated Maine Township clients directly served during your last fiscal year in the program(s) we fund? Not applicable

What is the approximate number of Maine Township clients referred to other agencies during your last fiscal year? 23

Annual salary and title of the five highest paid full-time (if applicable) employees. Salary ranges are not acceptable.

- 1. Bruce Sewick \$142,800
- 2. Brenda Parzygnat \$91,902
- 3. Jennifer Hamilton \$91,800
- 4. Jill DeLarco \$91,800
- 5. Robert Harriet \$61,526
- 1. Is your agency not for profit? (If so, attach Certificate of Good Standing).  $\square$  Yes  $\square$  No
- 2. Has your organization been in business for at least one year?  $\square$  Yes  $\square$  No
- 3. Are all your programs, services, activities and facilities provided by your organization available to the residents of Maine Township?  $\square$  Yes  $\square$  No
- 4. Describe how your organization's services are currently promoted to the residents of Maine Township. Virtual presentations, responding to e-mails to Agency website, response to referrals, outreach to hospitals and other Agencies
- 5. Has your organization ever received funding from Maine Township? ⊠ Yes □ No If yes, *list all years* and the allocation amount.
  2016 \$60,000, 2017 \$60,000, 2018 \$59,000, 2019 \$56,200, 2020-\$55,400
- 6. Describe how your organization used the funding received from Maine Township during the previous funding year (if applicable). Maine Township funds were used to cover the cost and supplement the cost of services

To Maine Township residents seeking services

7. Describe how your organization plans to use the requested funding from Maine Township during the upcoming funding year.

The Maine Township Funds will be used to cover the cost and supplement the cost of services to Main Township residents seeking services.

8 How has the COVID-19 pandemic impacted your organization and what changes have you had to implement as a result? Due to the pandemic, we had to quickly adapt to providing remote service when possible. Adults with Serious Mental Illness are still seen for Community Support, however contact is limited and safety precautions have been put in place. We utilize and pay for a cab service for clients as needed.

The SHARE program has continued to provide in-person service, also instituting safety precautions. SHARE has had to decrease capacity by 13 beds so that social distancing may be maintained.

We have incurred additional expenses to provide remote services and also to provide PPE to staff. Purchasing extra cleaning supplies and paying for increased maintenance hours is also a factor.

We have also experienced a 28% reduction in the number of people calling for services during the pandemic. This results in reduced revenue coming in to support agency operations.

- 9 Which of the following best describes the services that your organization will be providing with the funds that you have requested? (Please check all that apply.)
  - □ Public safety

Health

Environmental protection

- □ Recreation
- Library

Public transportation

☑ Social services for youth
 ☑ Social services for the aged

☑ **Other (please explain):** Social Services for Adults. Substance abuse inpatient. Social Services and skill building for those with chronic and persistent mental illness

## 10 Describe how your organization meets the eligibility requirements for the requested funding.

Residents live in the Maine Township area.

11 Describe any new programs, services, activities or facilities that are currently proposed or contemplated by your organization.

We are starting two new programs that will expand our scope of services to the community.

The first one is the <u>Living Room Program (LRP)</u>, which will add to the local crisis care system. It could serve as a resource for any police officers in the area responding to a situation involving a person with a mental illness, rather than having to present to a local emergency department. It will operate six days a week from 4-9 PM Monday through Friday and from 9 AM to 2 PM Saturdays. Here is a description of the Program:

The LRP is for those in need of a crisis respite program with services and supports designed to proactively divert crises and break the cycle of psychiatric hospitalization. The LRP provides a safe, inviting, home-like atmosphere where individuals can calmly process a crisis event, as well as learn and apply wellness strategies to prevent future crisis events. The LRP is staffed by Recovery Support Specialists. Individuals seeking services at LRPs are screened for safety by Qualified Mental Health Professionals upon entry and exit. Individuals experiencing psychiatric crises may self-refer or may be referred by police, fire, emergency departments, or other organizations with which an individual experiencing such a crisis may come into contact

The second Program is the <u>Transitional Community Care and Support Programs (TCCS)</u> which will help those who are hospitalized at the State Operated Psychiatric Hospitals link up with services before discharge. Here is a description of the program:

Individuals eligible for TCCS are those who are currently in an SOPH and preparing to be discharged. The hallmark of the program is the development of engagement specialists who work in recovery support specialist roles within CMHCs and who will be coming to SOPHs for face-to-face engagement with individuals while they are hospitalized. This will facilitate linkage and establish a trusting relationship with a provider of community-based services for SOPH patients during their inpatient stay. The TCCS will include funding for non-traditional supports, such as cell phones, food, clothing, transportation, and other resources that are necessary for individuals to succeed as they transition to communities. In addition, the TCCS agencies will be providing clinical consultation to the SOPH treatment team during treatment and discharge planning to ensure that treatment needs are anticipated and addressed prior to discharge.

Both of these grants will help the overall mental health in the community by expanding the scope of our services to individuals with serious mental illness, who are at high risk of rehospitalization. These grants will allow us to provide a level of support to our community that has been lacking. New technologies for remote services now in use for the Covid 19 pandemic will be used in the program launch and be a standard feature of the new programs in the future.

For these programs, we have rented 2 new spaces. 7 staff have been added to run these programs and furniture, equipment, and supplies have been purchased.

- 12 Do you certify that the funds that you are requesting from Maine Township will be used for your organization's ordinary and necessary maintenance and operating expenses and not for any capital expenditures? ⊠ Yes □ No
- 13 If your organization is providing services for the benefit of Maine Township residents who are persons with a developmental disability, do you certify that said services shall only be provided to such Maine Township residents who are not eligible to participate in any program conducted under Article XIV of the School Code? (Applies only to persons under 22 years of age.) □ Yes □ No X Not Applicable
- 14 Do you certify that no person shall be excluded from participation in, denied benefits of, or be subjected to discrimination under, any service, facility or activity offered or provided by your organization on the grounds of race, color, national origin, sex, gender identity, age, religion, sexual preference, marital status or disability? ⊠ Yes □ No
- 15 Do you certify that your organization will not expend any of the funds requested from Maine Township, either directly or indirectly, for any partisan political activity, or to further the election or defeat of any candidate for any office, or for lobbying or propaganda purposes designed to support or defeat any legislation, either pending or proposed, before any governmental body? ⊠ Yes □ No

16 If requested, do you agree to provide the following to Maine Township? (Please note: You do NOT need to include these items with your application.)

- A. Quarterly statements or reports setting forth the services rendered and programs provided for Maine Township residents, along with the associated costs to provide such services and programs Yes
- B. At such times and in such forms as Maine Township may require, any other statements, records, reports, data or information pertaining to matters covered by this application (Information relating to personal, medical and financial data will be treated as confidential.) Yes, except when such information would violate HIPPA
- C. A written report signed by your organization's executive director, or whomever else is deemed to be in charge of your organization's activities, programs, services and facilities, including the following:
  - I. A description of each program, service, activity or facility you provided or offered Yes

- II. A statement that all such programs, services, activities and facilities are accessible to the disabled within the meaning of the Americans with Disabilities Act and the Rules and Regulations on disabled as promulgated thereunder Yes
- III. An identification of those programs, services, activities or facilities, which are not accessible to the disabled All are accessible
- IV. With respect to those programs, services, activities or facilities identified in response to item 15(C)(III) above, a detailed statement setting forth the specific steps and plans (including timetables for completion) to be taken to achieve accessibility and
- V. If structural modifications will be required to achieve accessibility, a detailed statement setting forth the modifications required and a timetable for completion

X Not applicable. All are accessible

- 17 If you receive any requested funds from Maine Township, do you certify that your organization will maintain general liability insurance coverage in an amount not less than \$1 million, naming Maine Township as a co-party insured, and do you further agree to provide Maine Township with a certified copy of said policy of insurance, along with the declaration sheet, binder and any exclusions related to said policy of insurance?
- 🛛 Yes 🗆 No
- 18 If you receive any requested funds from Maine Township, do you certify that your organization will indemnify and hold harmless, protect and defend, at its own cost and expense, Maine Township, its property, officers, agents, employees, assigns, successors, transferees, licensees, invitees and/or any other persons or property standing in the interest of Maine Township, from any and all risks, suits, damages, expenses, including without limitation reasonable attorneys' fees and court costs, or claims due to any acts or omissions of your organization? ⊠ Yes □ No

**19 What is the geographic service area of your organization?** 

Leyden serves all of Leyden, Norwood Park and Maine Townships and our SHARE Program

### Program

Leyden serves all of Leyden, Norwood Park and Maine Townships and our SHARE Program primarily serves Cook, Suburban Cook, Lake, DuPage, Kane and Kendall Counties. Although, clients come from all over the State of Illinois and from other states as well. Our SASS/MCR Program serves Rosemont, Harwood Heights, Norridge, Schiller Park, Franklin Park, River Grove, Elmwood Park, Melrose Park, Northlake, Berkley, Bellwood, Maywood, River Grove, Forest Park, Hillside, Westchester, Broadview, Brookfield and LaGrange Park. No actual service boundaries exist as anyone can seek services anywhere with the Affordable Care Act and Medicaid expansion. Some funding sources do restrict the use of funds and we abide by those parameters.

**20** Does your organization charge for services?  $\square$  Yes  $\square$  No

If yes, does your organization offer a sliding fee scale?

☑ Yes. Attach 14 copies of the sliding fee scale.

□ No. Please explain how charges are determined.

21 If your organization does charge fees, would you be willing to wave application, program and other fees on a case by case basis for Maine Township residents whom we refer directly to your organization for assistance? ⊠ Yes □ No

### 22 Are volunteers used within your organization?

### ☑ Yes. Please indicate how many volunteers you have and how they are utilized.

114 12 step volunteers run on-site Alcoholic Anonymous, Narcotics Anonymous, Cocaine Anonymous and our Bridging the Gap meetings at our residential substance abuse facility. Our Board of Directors is an all-volunteer board with 9 members. Our Senior Program uses volunteers from Triton's RSVP program, and we are currently waiting for one to be assigned.

One volunteer worked for the new programs – The Living Room and Transitional Community Care and Supports.

 $\Box$  No. Please give specific reasons for not using volunteers.

23 Does your organization provide any bilingual services?

⊠ Yes. Please indicate languages.

Spanish and Polish for the Senior Programs

Spanish for the Outpatient Program

### 24 Does your organization request proof of U.S. citizenship from its clients?

 $\Box$  Yes. Please describe briefly.

🛛 No

### 24. Does your organization participate in cooperative programs with any other community agencies? (e.g. social service, not-for-profits, municipal agencies, etc.) Please explain. ⊠ Yes □ No

Yes, the agency participates in cooperative programs with many other social service agencies, hospitals, senior programs and municipalities. For example, we have done enrollment events at multiple local sites (i.e., libraries, churches, community centers). This has shifted to virtual enrollment events. This includes the HACC property, Henrich House in Des Plaines. At our SHARE program, we coordinate services with Northwest Center Against Sexual Assault to help clients that have been victims. We also work closely with Impact Behavioral Health Partners, who provides supported employment services to our clients. In addition, we serve as members of our local Continuum of Care, the Alliance to End Homelessness in West Suburban

Cook County. We are also owners and providers in the new IHPA (Illinois Health Practice Alliance). This is a joint venture between provider agencies and Centene Corporation. We are also partners in the Region IX Emergency Preparedness Coalition.

- 25. Does your organization participate in cooperative programs with any other service organizations? (e.g. Rotary, Kiwanis, Optimist, etc.) Please explain. ⊠ Yes □ No We are members of four chambers: O'Hare, Grand Corridor, Rosemont and Hoffman Estates. We also attend Rotary and Kiwanis Meetings.
- 26. Does your organization participate in cooperative programs with any community businesses? Please explain. ⊠ Yes □ No The CEO is a member of the Triton College Advisory Board. The agency collaborates with the Leyden High Schools, which supports our food pantry. The agency also collaborates with the Greater Chicago Food Depository and the USDA. We partner with Scot Forge to provide food for our food pantry and needed clothing items for our clients. We are also partner with Sloan Valve to provide healthy meals to participants in our Psychosocial Rehabilitation Program.
- 27. List all sources of funding or support that your organization currently receives, including the total amount, frequency, duration, and percentage of any such support.

Funding Source	Amount	Frequency & Duration	Percentage
Maine Township		Included with Budget	
Foundations			
Private Donors			
Federal			
State			
Municipalities			
Other Townships			
Other (list all)			
Total			100%

- 28. What type of fund-raising efforts has your organization had this year? Please list event names and specify the REVENUE and COSTS for fundraiser(s) and what program(s) the money was raised for. We have an annual fundraiser, this year's theme is "Make a Difference" and it will be virtual. Due to its being virtual, the cost should be less than \$1,000. The money goes towards all Leyden Programs. So far we have raised \$50,000.
- **29.** What fundraising efforts are planned for next year? We have reserved Oct 1<sup>st</sup> of next year for our annual fundraiser.
- 30. Please explain any changes that have occurred in your organization in the past year (i.e. new program(s), expansion or deletion of program(s), personnel, administration, major purchases or facility, etc.).

We are starting two new programs that will expand our scope of services to the community.

The first one is the <u>Living Room Program (LRP)</u>, which will add to the local crisis care system. It could serve as a resource for any police officers in the area responding to a situation involving a person with a mental illness, rather than having to present to a local emergency department

It will operate six days a week from 4-9 PM Monday through Friday and from 9 AM to 2 PM Saturdays. Here is a description of the Program:

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Both of these grants will help the overall mental health in the community by expanding the scope of our services to individuals with serious mental illness, who are at high risk of rehospitalization. These grants will allow us to provide a level of support to our community that has been lacking. New technologies for remote services now in use for the Covid 19 pandemic will be used in the program launch and be a standard feature of the new programs in the future.

For these programs, we have rented 2 new spaces. 7 staff have been added to run these programs and furniture, equipment, and supplies have been purchased.

31. Please provide numerical breakdown of all staff member positions.

1.	Administration & Administrative Support	23	
2.	Management of Service Providers	11	
3.	Direct Service Providers	66	

- 32. Number of certified staff members \_\_\_\_2
- 33. What kinds of certifications are required for your service providers? CADC, CANS, CRSS, NCC, CSPI, CPR
- 34. Number of licensed staff members 33

### **35.** What kind of licensing is required for your service providers?

LPC, LCPC, LSW, LCSW, MD

### 36. Please list all accreditations your organization has earned.

The Agency is Joint Commission accredited. We are also certified by DMH and SUPR.

37. How would your organization be affected if it received a reduction in Township funding or if there was a complete elimination of Township funding? If funding is reduced, there may be longer wait times to see psychiatrists and to receive services in other programs.

If funding is completely eliminated, the agency would have a reduced capacity to serve Maine Township residents.

I hereby certify that I am authorized to execute this application on behalf of the organization listed below and that the statements contained herein are true and accurate.

Name of Applicant Organization Leyden Family Service and Mental Health Center

Bv

Its Authorized Representative

Printed Name Bruce Sewick

Title CEO

Date August 28, 2020

SUBSCRIBED and S before me this <u>28</u>	WORN to day of	Angust	, 20 20
Notary	Arph	na Zempr	neR

"OFFICIAL SEAL" Aldona Czempinski NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires 09/21/21

Poverty Level	At or Below 100%	125%	150%	175%	200%	Above 200%
	Nominal Fee \$5	20% pay	40% pay	60% pay	80% pay	100% pay
Family Size	\$5 per hour for all Services	Ind Dr \$22 \$13	Ind Dr \$44 \$26	Ind Dr \$66 \$39	Ind Dr \$88 \$52	Ind Dr \$110 \$65
1	0-\$12,490	\$12,491- \$15,613	\$15,614- \$18,735	\$18,736- \$21,858	\$21,859- \$24,980	\$24,981 +
2	0-\$16,910	\$16,911- \$21,138	\$21,139- \$25,367	\$25,368- \$36,992	\$36,993- \$50,735	\$50,736 +
3	0-\$21,330	\$21,331- \$26,663	\$26,664- \$31,997	\$31,998- \$46,661	\$46,662- \$63,995	\$63,996 +
4	0-\$25,750	\$25,751- \$32,188	\$32,189- \$38,627	\$38,628- \$56,330	\$56,331- \$77,255	\$77,256 +
5	0-\$30,170	\$30,171- \$37,713	\$37,714- \$45,257	\$45,258- \$65,999	\$66,000- \$90,515	\$90,516 +
6	0-\$34,590	\$34,591- \$43,238	\$43,239- \$51,887	\$51,888- \$75,667	\$75,668- \$103,775	\$103,776+
7	0-\$39,010	\$39,011- \$48,763	\$48,764- \$58,517	\$58,518- \$85,336	\$85,337- \$117,035	\$117,036+
8	0-\$43,430	\$43,431- \$54,288	\$54,289- \$65,147	\$65,148- \$95,005	\$95,006- \$130,295	\$190,296+
For each additional person, add	\$4,420	\$5,525	\$6,630	\$7,735	\$8,840	\$8,841+

Based on 2020 Federal Poverty Guidelines

#### Budget

#### Fiscal Year Ended June 30, 2021

Revenue

Revenue DHS - Department of DHS - DMH Medicaid DHS - DMH MMC & M DHS - DASA DHS - DASA Medicaid DHS - DASA MMC & Local Townships DHS - Supportive Hou Fees & Insurance Title III CEDA DCFS Revenue/IPS ICG SASS Westlake Revenue Interest Income Cash Contributions Other Revenue	IMAI d MMAI	639,098 985,467 679,860 226,447 1,115,039 380,000 161,368	IPS
	Total Revenue	6,445,163	
Expenses Personnel Services Consumable Supplies Occupancy Local Transportation Specific Assistance Minor Equipment Lease Depreciation Interest Expense Miscellaneous	Total Expenses	5,109,296 529,700 391,111 19,321 1,370 21,295 15,115 180,717 144,552 32,686 6,445,163	

NET SURPLUS/(I\_\_\_\_\_\_

Other Revenues: Client Rent FP - Senior Tax Deferal Program FP - Social Service Grant Medical Records Copies Park Ridge Community Fund Payphone Commision Schaumburg Township Vending Machine Commissions Washer/Dryer Funds

### Budget Revenue

### Fiscal Year Ended June 30, 2021

### Revenue

DHS State of Illinois Grants	2,149,801
DHS - Medicaid/ MMC & MMAI	3,227,151
Local Townships	380,000
Foundations	-
Fees & Insurance	474,118
Cash Contributions	50,000
Other Revenue	157,593
Interest	6,500
Total Reven	ue 6,445,163



### Budget

### Fiscal Year Ended June 30, 2021

Revenue		%
DHS State of Illinois Grants	2,149,801	33.36%
DHS - Medicaid/ MMC & MMAI	3,227,151	50.07%
Local Townships	380,000	5.90%
Foundations	-	0.00%
Fees & Insurance	474,118	7.36%
Cash Contributions	50,000	0.78%
Other Revenue	157,593	2.45%
Interest	6,500	0.10%
Total Revenue	6,445,163	100%

### Contracts

### Fiscal Year Ended June 30, 2021

### Contract

DHS - Department of Mental Health	925,263
DHS - DASA	679,860
Hanover Township	50,000
Leyden Township	270,000
Maine Township	60,000
Schaumburg Township	37,255
DHS - Supportive Housing Grant	161,368
Title III	115,186
DCFS/SOC	257,924
Westlake Revenue	-

Total Contracts	2,556,856
Total Contracts	2,556,856

YEAR	REQUEST	ALLOCATION	CHANGE IN FUNDING
2014			
2015			
2016			
2017	\$14,000	\$8,000	New Agency
2018	\$40,000	\$10,600	+28%
2019	\$30,000	\$14,100	+28.3%
2020	\$25,000	\$13,130	-7.1%

2021 REQUEST	\$12,000
2021 RECOMMENDATION	

### COMMENTS

RETURN SHEET TO BRANKA MACKIC, AGENCY & PROGRAM COORDINATOR

### MAINE TOWNSHIP APPLICATION FOR FUNDING 2021-2022



Agency Name	Maryville Academy	(dba)	Family	<b>Behaviora</b>	l Health	Clinic
		the second s	the second s	the second s	Name of Concession, name of Co	

Address \_\_\_\_\_ 1455 Golf Road, Suite 210, Des Plaines, IL 60016

Phone <u>847-390-3004</u> Fax <u>847-390-3016</u> Email <u>info@fbhclinic.com</u>

Contact Person Fred Smith Title Administrator, Behavioral Health Services

Grant Contact Person <u>Daniela Krivak</u> Title <u>Grants Manager</u>

Phone <u>847-294-1996</u> Email <u>krivakd@maryvilleacademy.org</u>

**Brief Description of Agency** 

The Maryville Family Behavioral Health Clinic, open since 2014 in Des Plaines, provides

substance use disorder counseling and recovery services, court mandated anger

management, and DUI risk education and counseling to children, adults, and families. The

<u>clinic is open 6 days a week and accepts Medicaid.</u>

Agency Total Budget <u>\$245,799</u> Amount requesting from Maine Township <u>\$12,000</u> (Please provide a copy of your budget.) Agency Fiscal Year (e.g. March 2019-February 2020) July 1, 2020 – June 30, 2021

Total number of <u>all unduplicated clients</u> directly served during your last fiscal year <u>221</u>

Total number of <u>unduplicated Maine Township clients</u> directly served during your last fiscal year <u>56</u>

If your grant is restricted, what is the total number of unduplicated Maine Township clients directly served during your last fiscal year in the program(s) we fund? <u>56</u>

What is the approximate number of Maine Township clients referred to other agencies during your last fiscal year? <u>39</u>

Annual salary and title of the five highest paid full-time (if applicable) employees. Salary ranges are not acceptable.

Below are the names, titles, and salaries of the top five paid employees – including full-time and part-time employees:

- 1. <u>Mark Friedman, Psychiatrist, FTE = .20, \$46,694</u>
- 2. <u>Graciela Victor, Administrative Assistant, FTE = 1.0, \$33,650</u>
- 3. <u>Sergio Hernandez, Certified Alcohol and Drug Counselor, FTE = .80, \$26,010</u>
- 4. <u>James Eaglin, Program Director, FTE = .20, \$13,421</u>
- 5. Fred Smith, Administrator, Behavioral Health Services, FTE = .05, \$4,691

- 1. Is your agency not for profit? (If so, attach Certificate of Good Standing).  $\square$  Yes  $\square$  No
- 2. Has your organization been in business for at least one year?  $\square$  Yes  $\square$  No
- 3. Are all your programs, services, activities and facilities provided by your organization available to the residents of Maine Township?  $\boxtimes$  Yes  $\square$  No
- 4. Describe how your organization's services are currently promoted to the residents of Maine Township.

Services provided by the Family Behavioral Health Clinic (FBHC) are promoted to residents of Maine Township through flyers, brochures, face to face meetings, presentations, and on the clinic's website, *www.familybehavioralhealthclinic.com.* Services are also promoted through the Des Plaines Ministerial Association, local school districts, through MaineStay Youth and Family Services, the Des Plaines Chamber of Commerce, and through local police districts. In addition, Maryville annually participates in the Maine Township Agency Day (when held) to promote the services provided by our Family Behavioral Health Clinic.

# 5. Has your organization ever received funding from Maine Township? $\boxtimes$ Yes $\Box$ No If yes, <u>list all years</u> and the allocation amount.

- **2017-2018 \$8,000**
- **2018-2019 \$10,600**
- **2019-2020 \$14,100**
- 2020-2021 \$13,130 plus a one-time supplemental payment of \$1,313 to assist with financial hardship due to the COVID-19 pandemic

# 6. Describe how your organization used the funding received from Maine Township during the previous funding year (if applicable).

During the 2020-2021 funding year, Maryville's Family Behavioral Health Clinic (FBHC) continues to meet a need in the community by providing high-quality mental health and substance use disorder services in the northwest suburbs. Although Maryville has been unable to accept new mental health clients since late February 2020, current mental health clients continue to receive psychiatric services. Most of the clients we serve are low-income individuals with Medicaid coverage. A few have private insurance. It is a financial burden for providers to accept Medicaid patients due to low reimbursement rates – and many providers do not accept Medicaid clients. Maryville does accept Medicaid clients and subsidizes the gap between the cost of services provided to a client and the payments received from Medicaid for each client. Private insurance payments are only slightly higher than Medicaid payments but still leave a substantial gap for Maryville to cover. Maryville is committed to providing behavioral health services to disadvantaged members of our community in need of those services.

The allocation of \$13,130 from Maine Township will be distributed in six installments during the 2020-2021 funding year. Two installments of \$2,188 have already been received as well as the one-time supplemental payment of \$1,313 to assist with financial hardship related to the COVID-19 pandemic. The \$1,313 and the two payments of \$2,188 have been applied against the variance between the cost of services provided to Maine Township residents between March 1, 2020 and June 30, 2020 and the payments received from Medicaid and private insurance for services provided to those clients during the 4-month period. The remaining four installments will be applied as they are received against the variance between the cost of services provided to Maine Township residents between provided to Maine Township residents between July 1, 2020 and February 28, 2021 and the payments received from Medicaid and private insurance for services provided to those clients during the 4-month period. Maryville subsidizes the balance of the variance.

Maryville's Family Behavioral Health Clinic served 56 unduplicated Maine Township residents in our fiscal year 2020 (July 1, 2019 – June 30, 2020) through 423 appointments and 421 hours of service. The total variance for Maine Township residents during the 12-month period totals \$31,000. Between March – June 2020, the period when FBHC was unable to accept new mental health services, the clinic served 13 clients through 67 appointments, 68 hours of service, and with a billing variance for the 4-month period of \$3,200.

# 7. Describe how your organization plans to use the requested funding from Maine Township during the upcoming funding year.

Funding from Maine Township during the 2021-2022 funding year will be applied towards the gap between the cost of services provided by the Family Behavioral Health Clinic (FBHC) to Maine Township residents and the payments received from Medicaid and private insurance for services provided to Maine Township residents between March 1, 2021 and February 28, 2022.

The variance between the cost of services provided to Maine Township residents alone and the payments received from Medicaid and private insurance for services provided to those residents totals over \$192,000 for the last 5 years and averages a variance of approximately \$38,000 annually. The allocations provided by Maine Township in the last four years have helped close this gap.

During the 2021-2022 funding year, FBHC will focus on substance use disorder services and will continue to provide substance use disorder counseling, court ordered anger management services, and DUI risk education and counseling to children, adults, and families. Maryville projects that FBHC will serve approximately 40 unduplicated Maine Township residents and incur a variance of \$12,000 for those clients.

A \$12,000 allocation from Maine Township during the 2021-2022 funding year will provide needed financial assistance to Maryville by reducing or eliminating the amount subsidized by Maryville for services provided to Maine Township residents, and enable the FBHC to continue to operate in Des Plaines and provide behavioral health services to individuals in need of these services, including Maine Township residents. Thank you for your consideration of our request for continued support of Maryville's Family Behavioral Health Clinic.

# 8. How has the COVID-19 pandemic impacted your organization and what changes have you had to implement as a result?

To ensure the health and safety of our clients and our staff, the Family Behavioral Health Clinic (FBHC) implemented a telehealth program due to the COVID-19 pandemic. Instead of seeing clients in person, since mid-March clients and FBHC staff, including our psychiatrist, program director, and Certified Alcohol and Drug Counselor (CADC), have been participating in virtual appointments through the Microsoft Teams platform. Services include individual sessions and group sessions. The impact of virtual appointments has been significant – clients are receiving the services they need and there are fewer cancelled appointments and fewer no-shows when appointments are held virtually. Our clients do not need to worry about childcare, weather, transportation, and other factors that impact their ability to physically attend an appointment.

Staff who come into the FBHC offices to use the conference room to host virtual group and individual sessions or to work in their office, and the administrative assistant at the front desk all follow health and safety measures including wearing face coverings when in the office with others, using hand sanitizer, and using disinfecting wipes to clean door handles, bathrooms, and other commonly used surfaces throughout the day. A generous supply of disinfecting wipes, disposable masks, and hand sanitizer are always available for staff to use. The FBHC offices are in a professional building and are thoroughly cleaned every day.

- 9. Which of the following best describes the services that your organization will be providing with the funds that you have requested? (Please check all that apply.)
  - □ Public safety
  - Environmental protection
  - Public transportation

- □ Recreation
- □ Library

□ Social services for youth

⊠ Health

□ Social services for the aged

Other (please explain): DUI Risk Education and Counseling

#### 10. Describe how your organization meets the eligibility requirements for the requested funding.

Although the Family Behavioral Health Clinic (FBHC) does not have any geographic restrictions, most of the clients we serve live in the northwest suburbs of Chicago. FBHC accepts clients from the entire Chicago metropolitan area. No one is denied service based on their address. FBHC services are available to everyone with no specific eligibility requirements. We accept private insurance, Medicaid, and self-pay clients.

#### Describe any new programs, services, activities or facilities that are currently proposed 11. or contemplated by your organization.

There are no new programs, services, activities or facilities that are currently proposed or contemplated by the Maryville Family Behavioral Health Clinic.

- 12. Do you certify that the funds that you are requesting from Maine Township will be used for your organization's ordinary and necessary maintenance and operating expenses and not for any capital expenditures?  $\square$  Yes  $\square$  No
- 13. If your organization is providing services for the benefit of Maine Township residents who are persons with a developmental disability, do you certify that said services shall only be provided to such Maine Township residents who are not eligible to participate in any program conducted under Article XIV of the School Code? (Applies only to persons under 22 years of age.)  $\boxtimes$  Yes  $\square$  No
- 14. Do you certify that no person shall be excluded from participation in, denied benefits of, or be subjected to discrimination under, any service, facility or activity offered or provided by your organization on the grounds of race, color, national origin, sex, gender identity, age, religion, sexual preference, marital status or disability?  $\boxtimes$  Yes  $\Box$  No
- 15. Do you certify that your organization will not expend any of the funds requested from Maine Township, either directly or indirectly, for any partisan political activity, or to further the election or defeat of any candidate for any office, or for lobbying or propaganda purposes designed to support or defeat any legislation, either pending or proposed, before any governmental body?  $\boxtimes$  Yes  $\Box$  No
- 16. If requested, do you agree to provide the following to Maine Township? (Please note: You do NOT need to include these items with your application.)
  - A. Quarterly statements or reports setting forth the services rendered, and programs provided for Maine Township residents, along with the associated costs to provide such services and programs

- B. At such times and in such forms as Maine Township may require, any other statements, records, reports, data or information pertaining to matters covered by this application (Information relating to personal, medical and financial data will be treated as confidential.)
- C. A written report signed by your organization's executive director, or whomever else is deemed to be in charge of your organization's activities, programs, services, and facilities, including the following:
  - I. A description of each program, service, activity or facility you provided or offered
  - II. A statement that all such programs, services, activities and facilities are accessible to the disabled within the meaning of the Americans with Disabilities Act and the Rules and Regulations on disabled as promulgated thereunder
  - III. An identification of those programs, services, activities or facilities, which are not accessible to the disabled
  - IV. With respect to those programs, services, activities or facilities identified in response to item 15(C)(III) above, a detailed statement setting forth the specific steps and plans (including timetables for completion) to be taken to achieve accessibility and
  - V. If structural modifications will be required to achieve accessibility, a detailed statement setting forth the modifications required and a timetable for completion

🛛 Yes 🛛 No

- 17. If you receive any requested funds from Maine Township, do you certify that your organization will maintain general liability insurance coverage in an amount not less than \$1 million, naming Maine Township as a co-party insured, and do you further agree to provide Maine Township with a certified copy of said policy of insurance, along with the declaration sheet, binder and any exclusions related to said policy of insurance? ⊠ Yes □ No
- 18. If you receive any requested funds from Maine Township, do you certify that your organization will indemnify and hold harmless, protect and defend, at its own cost and expense, Maine Township, its property, officers, agents, employees, assigns, successors, transferees, licensees, invitees and/or any other persons or property standing in the interest of Maine Township, from any and all risks, suits, damages, expenses, including without limitation reasonable attorneys' fees and court costs, or claims due to any acts or omissions of your organization? ⊠ Yes □ No

### 19. What is the geographic service area of your organization?

Although Maryville's Family Behavioral Health Clinic (FBHC) does not have any geographic restrictions, most of the clients we serve live in the northwest suburbs of Chicago and within 10 miles of our Des Plaines office. FBHC accepts clients from the entire Chicago metropolitan area. No one is denied service based on their address.

20. Does your organization charge for services?  $\square$  Yes  $\square$  No

If yes, does your organization offer a sliding fee scale?

⊠ Yes. Attach 14 copies of the sliding fee scale. Copies Attached.

 $\Box$  No. Please explain how charges are determined.

21. If your organization does charge fees, would you be willing to wave application, program, and other fees on a case by case basis for Maine Township residents whom we refer directly to your organization for assistance? ⊠ Yes □ No

FBHC has served clients who meet the criteria on a pro-bono basis when appropriate, including Maine Township residents, and will continue to do so as necessary.

### 22. Are volunteers used within your organization?

 $\Box$  Yes. Please indicate how many volunteers you have and how they are utilized.

### $\boxtimes$ No. Please give specific reasons for not using volunteers.

The Family Behavioral Health Clinic is a small office and does not currently have a need for volunteers.

### 23. Does your organization provide any bilingual services?

☑ Yes. Please indicate languages. Spanish and Polish

🗆 No

### 24. Does your organization request proof of U.S. citizenship from its clients?

 $\Box$  Yes. Please describe briefly.

🛛 No

# 24. Does your organization participate in cooperative programs with any other community agencies? (e.g. social service, not-for-profits, municipal agencies, etc.) Please explain. ☑ Yes □ No

Maryville has consistently served as a leader in our community, developing collaborative working relationships with other not-for-profits, the business community, civic organizations, and faithbased organizations. Maryville staff are active members of the Des Plaines Ministerial Association and the Des Plaines Chamber of Commerce. We have established reciprocal referral relationships with many organizations, including Lutheran General Hospital, Chicago Behavioral Health Hospital, Alexian Brothers Hospital, MaineStay Youth and Family Services, Oakton Community College, and local school districts. We maintain reciprocal referral relationships with Soft Landing, Brookdale Senior Living, Kenneth Young Center, Streamwood Behavioral Health Hospital, Chicago Lakeshore Behavioral Health Hospital, Hartgrove Hospital, DuPage County Juvenile Probation Department, and the Illinois Department of Children and Family Services. The professional staff at the Family Behavioral Health Clinic are active members in their professional organizations and are committed to ongoing professional development.

# 25. Does your organization participate in cooperative programs with any other service organizations? (e.g. Rotary, Kiwanis, Optimist, etc.) Please explain. ⊠ Yes □ No

Maryville is an active member of the Rotary Club of River Cities (includes Des Plaines, Mount Prospect, and Prospect Heights) and our representative is engaged in various service activities including providing coats to members of the community in partnership with Operation Warm; packing meals for The Night Ministry to distribute to the homeless; collecting non-perishable food and hygiene supplies for local food pantries; providing scholarships for local college students; bell-ringing for the Salvation Army in December; and sponsoring and/or attending various events and fundraisers hosted by local organizations including Catholic Charities of the Archdiocese of Chicago, Des Plaines Chamber of Commerce, the Des Plaines Park District, Oakton Community College, and the Maine Community Youth Assistance Foundation.

# 26. Does your organization participate in cooperative programs with any community businesses? Please explain. $\boxtimes$ Yes $\square$ No

Maryville's Stephen Sexton Training Institute was developed to support the exchange of information on mental health issues and suicide prevention. Maryville conducts quarterly seminars annually on the topics of depression, suicide, children at risk, and other mental health issues. In FY 2020, the Sexton Training Institute held two seminars, one on Military Culture offered with cooperation of the Evanston Vet Center, the other an internal seminar on Attachment, Trauma and Psychotherapy. Maryville planned a session on Support of Survivors of Suicide (the family and loved ones left behind) in conjunction with the Catholic Charities LOSS program but due to COVID-19, that session was rescheduled to a later date. Through support from the Stephen Sexton Memorial Foundation, Maryville provides professional development opportunities at no cost to social service workers, teachers, parents, and other community members. CEU's are offered to participants.

Maryville also participates in the Arlington Heights Health Center Advisory Council. The Cook County Health Department coordinates this quarterly meeting for social service agencies and Cook County Health staff to promote health care options in the region and services that are available within Cook County or from outside providers.

## 27. List all sources of funding or support that your organization currently receives, including the total amount, frequency, duration, and percentage of any such support.

Funding Source	Amount	Frequency & Duration	Percentage
Maine Township	\$10,000	1-year funding period	12%
Foundations	\$0	N/A	
<b>Private Donors</b>	\$0	N/A	
Federal	\$0	Monthly/Per Medicaid Contract	
State	\$5,679	Monthly/Per DASA Contract	7%
<b>Municipalities</b>	\$0	N/A	
<b>Other Townships</b>	\$0	N/A	
Other (list all)	\$68,580	Insurance & Private Pay Clients – Monthly	81%
Total	\$84,259		100%

# 28. What type of fund-raising efforts has your organization had this year? Please list event names and specify the REVENUE and COSTS for fundraiser(s) and what program(s) the money was raised for.

Maryville's annual fundraising plan for support of all programs and services includes seeking public and private grant awards, soliciting individuals for contributions through direct mail appeals and online donations through our website, and hosting special events whose net proceeds directly support a specific program. In fiscal year 2021 (July 1, 2020 – June 30, 2021), Maryville will continue to seek federal and state funding opportunities for support of FBHC. Maryville has not hosted any fundraising events for direct support of the FBHC.

### 29. What fundraising efforts are planned for next year?

Maryville's fundraising plan for the Family Behavioral Health Clinic (FBHC) for our fiscal year 2021 (July 1, 2020 – June 30, 2021) includes submitting grant requests to Maine Township, City of Des Plaines, and to other corporations and foundations whose funding priorities align with the mission and work of the FBHC. To ensure sustainability, Maryville needs to increase its fundraising efforts and close the gap between the actual cost of services and the payments received from Medicaid and private insurance for all clients.

# 30. Please explain any changes that have occurred in your organization in the past year (i.e. new program(s), expansion or deletion of program(s), personnel, administration, major purchases or facility, etc.).

Effective February 2020, Maryville's Family Behavioral Health Clinic discontinued providing mental health services except for the clients of our Psychiatrist and those clients in our Substance Use Disorder treatment program. The Family Behavioral Health Clinic will focus on substance use disorder services and will continue to provide substance use disorder counseling, court ordered anger management services, and DUI risk education and counseling to children, adults, and families.

Based on this service change and taking into consideration that due to the pandemic and the subsequent consequences (e.g. loss of a job, loss of a home, loss of a loved one, personal illness) individuals may turn to alcohol, drugs, and other medications/substances to cope with the challenges affecting their lives, Maryville projects that the Family Behavioral Health clinic will serve approximately 40 unduplicated Maine Township residents between July 1, 2020 and June 30, 2021.

### 31. Please provide numerical breakdown of all staff member positions.

1. Administration & Administrative Support	2
2. Management of Service Providers	1
3. Direct Service Providers*	9

(\*4 salaried employees and 5 CADC interns)

32. Number of certified staff members \_\_\_\_\_3

### 33. What kinds of certifications are required for your service providers?

Certified Alcohol and Drug Counselor (CADC) or Anger Management Certificate.

34. Number of licensed staff members \_\_\_\_\_1

#### 35. What kind of licensing is required for your service providers?

The Family Behavioral Health Clinic operates under the license of a state licensed medical doctor.

#### 36. Please list all accreditations your organization has earned.

Maryville programs are accredited by the Council on Accreditation (COA). COA is an international, independent, non-profit, human service accrediting organization that accredits the full continuum of child welfare, behavioral health, and community-based social services. Maryville underwent the accreditation process in 2017 and per a letter dated July 13, 2017 from Richard Klarberg, President and CEO of the Council on Accreditation, Maryville - including the Family Behavioral Health Clinic - has been re-accredited through April 30, 2021.

#### How would your organization be affected if it received a reduction in Township funding 37. or if there was a complete elimination of Township funding?

A reduction in Maine Township funding will result in a higher amount that Maryville will be required to subsidize to cover the variance between the cost of services provided to Maine Township residents and the payments received from Medicaid and private insurance for those clients. Payments from Medicaid and private insurance cover less than 50% of the cost of services. A complete elimination of Township funding will result in Maryville subsidizing the entire variance between the cost of services for Maine Township residents and the payments received from Medicaid and private insurance.

Marvville will be deeply grateful to Maine Township for any amount of funding provided for the 2021-2022 funding year. We appreciate all financial assistance received to help us continue to provide behavioral health services to members of our community.

I hereby certify that I am authorized to execute this application on behalf of the organization listed below and that the statements contained herein are true and accurate.

Name of Applicant Organizatio	n Maryville Ad	cademy	
	By <u>Setter Catherine M. Ryan</u> Its Authorized Representative		
	Printed Name	Sr. Catherine M. Ryan, O.S.F.	
	Title	Executive Director	
	Date <u>Auguse</u>	25, 2020	
	,		
SUBSCRIBED and SWORN to before me this 25 <sup>44</sup> day of	<u>just, 2020.</u>	MEGAN BIASCO	
Notary Mena	Risson	OFFICIAL SEAL Notary Public, State of Illinois	

Notary

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Ay Commission Expires June 24, 2023

### 2020 Sliding Fee Schedule-Annual Income

Federal Poverty Guideline	At or Below 100%	101%-125%	126% - 150%	151-200%	Above 200%
Family Size	Nominal Fee	Level 1	Level 2	Level 3	
	(\$10)	Charge \$20	Charge \$30	Charge \$40	No Discount
1	\$0 - \$12,760	\$12,761- \$15,950	\$15, 951- \$19,140	\$19,141- \$25,520	\$25,521+
2	\$0 - \$17,240	\$17,241- \$21,550	\$21,551- \$25,860	\$25,861- \$34,480	\$34,481+
3	\$0 - \$21,720	\$21,721- \$27,150	\$27,151- \$32,580	\$32,581- \$43,440	\$43,441+
4	\$0 - \$26,200	\$26,201- \$32,750	\$32,751- \$39,300	\$39,301- \$52,400	\$52,401+
5	\$0 - \$30,680	\$30,681- \$38,350	\$38,351- \$46,020	\$46,021- \$61,360	\$61,361+
6	\$0 - \$35,160	\$35,161- \$43,950	\$43,951- \$52,740	\$52,741- \$70,320	\$70,321+
7	\$0 - \$39,640	\$39,641- \$49,550	\$49, 551- \$59,460	\$59,461- \$79,280	\$79,281+
8	\$0 - \$44,120	\$44,121- \$55,150	\$55, 151- \$66,180	\$66,181- \$88,240	\$88,241+

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### MARYVILLE FAMILY BEHAVIORAL HEALTH CLINIC FISCAL YEAR 2021 PROGRAM BUDGET

REVENUES AND SUPPORT	<u>7/1/20 – 6/30/21</u>
REVENUES	
Department of Healthcare and Family Services	\$ 5,679
Third Party Billing and Other Program Revenues	<u>\$ 68,580</u>
TOTAL REVENUES	\$ 74,259
SUPPORT	
Contributions, Bequests and Grants	<u>\$ 10,000</u>
TOTAL SUPPORT	\$ 10,000
TOTAL REVENUES AND SUPPORT	<u>\$ 84,259</u>
EXPENSES	
PROGRAM EXPENSES	
Program Staff Salaries, Fringe Benefits, and Taxes	\$ 148,248
Direct Service Equipment and Supplies	\$ 72
Program Insurance	\$ 1,968
<b>Telecommunication Costs Assigned to Program</b>	<u>\$ 2,355</u>
TOTAL PROGRAM EXPENSES	\$ 152,643
SUPPORT EXPENSES	
Housekeeping Supplies	$\frac{\$}{\$}$ $\frac{3}{\$}$
TOTAL SUPPORT EXPENSES	\$ 3
OCCUPANCY EXPENSES	
Building and Equipment Operations and Maintenance	\$ 2,448
Depreciation and Amortization	\$ 3,361
All Other Leases/Rent/Taxes	\$ 34,486
Equipment	
TOTAL OCCUPANCY EXPENSES	<u>\$504</u> \$40,799
ADMINISTRATIVE AND OFFICE EXPENSES	
Administration Salaries, Fringe Benefits, and Taxes	\$ 5,530
Office Supplies and Equipment	\$ 3,096
Telecommunication Costs Not Assigned to Program	\$ 2,352
All Other Administrative and Office Expenses	\$ 19,308
Management and General Allocation	<u>\$ 22,068</u>
TOTAL ADMINISTRATIVE AND OFFICE EXPENSES	\$ 52,354
TOTAL EXPENSES	<u>\$ 245,799</u>
NET SURPLUS/(DEFICIT)	<u>(\$ 161,540)</u>