

# Winnebago County Community Mental Health Board Impact Report



Issue 2  
Program Year  
2022-2023 (PY23)



**WCCMHB**

Winnebago County  
Community Mental  
Health Board

**Issue 2**  
**Program Year 2022-2023 (PY23)**

This impact report was produced thanks to the contributions of the following:

Region 1 Planning Council's Community Impact team,  
Amy Salamon, Technical Writer, and Myranda Gould, Multimedia Graphic Designer.

Winnebago County Community Mental Health Board (WCCMHB) Funded Programs.

# Table of Contents

Introduction .....	4
WCCMHB Program Year 2022-2023 (PY23) Data .....	5
WCCMHB Community Support System Framework .....	7
A Path Through Serious Mental Illness to Independence.....	8
After the Crisis .....	10
Changing the Conversation Corrects Stigma .....	12
Navigating the Wide World of Mental Health .....	14
Mental Health Identification Programs Mean At-Risk Individuals Aren't Left Behind.....	16
Fresh Perspectives to Treating Youth Trauma .....	18

**The PY23 Impact Report tells the stories of providers and clients served by Winnebago County Community Mental Health Board (WCCMHB) funding. Summaries of program activities and data visuals detail programmatic accomplishments to fully show the effect that WCCMHB-funded programs have had on the community.**

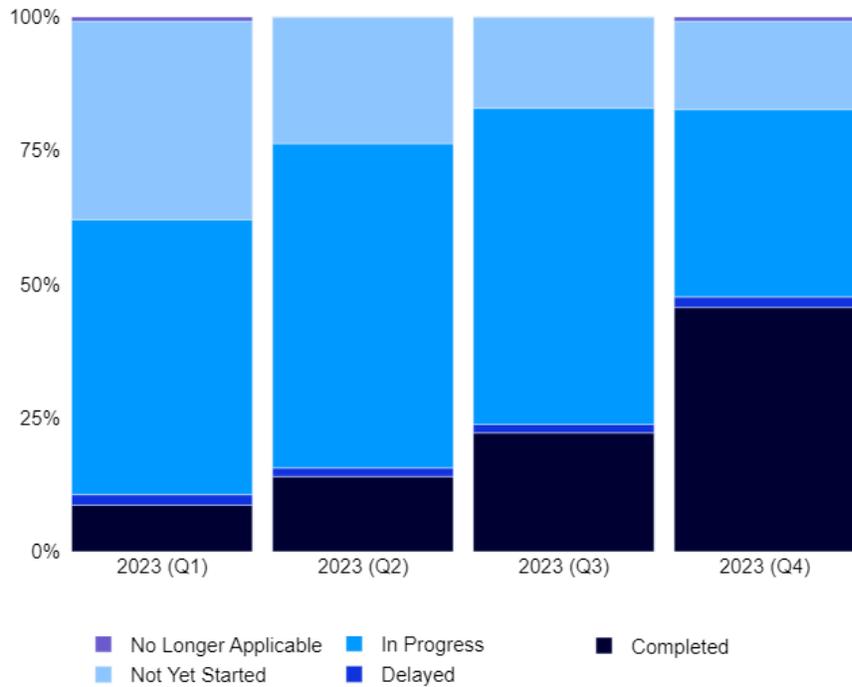
In PY23, the WCCMHB funded 30 mental healthcare programs for Winnebago County residents. These programs identified a total of 254 goals: 116 were completed, and 89 are in progress.

These programs were selected by the WCCMHB for their alignment with one or more of six themes:

- Mental health treatment
- Crisis response services
- Case management
- Family and community support
- Client identification and outreach
- Housing

These themes align with the WCCMHB’s vision, mission, values, and principles for Winnebago County residents seeking mental healthcare services.

**Outcomes Progress PY23**

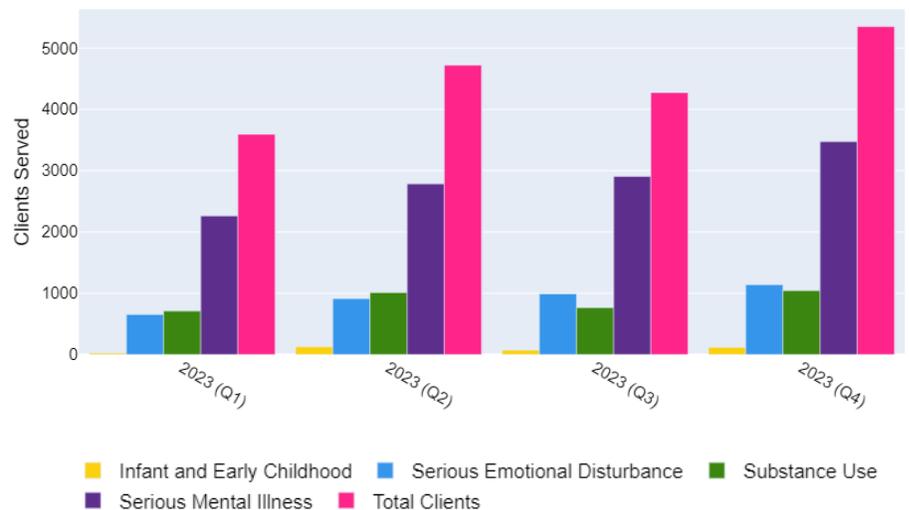


**Clients Served - PY23**

Total number of clients served by the WCCMHB programs by target population:

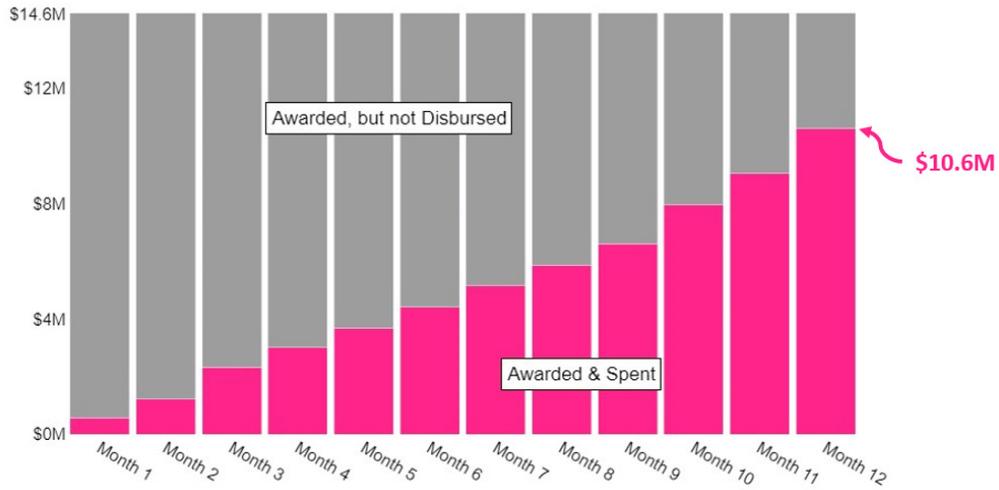
- **Infant and Early Childhood:**  
333 clients
- **Serious Emotional Disturbance:**  
3,689 clients
- **Substance Use Disorder:**  
3,527 clients
- **Serious Mental Illness:**  
11,420 clients
- **Total:**  
17,932 clients

**Number of Clients Served by Quarter**



# WCCMHB Program Year 2022-2023 (PY23) Data

## Funding Status by Month



## Funds Awarded & Spent

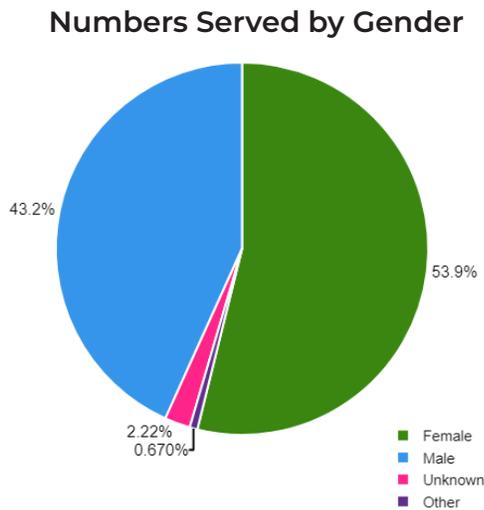
Funds Awarded in PY23:

- **Mental Health Treatment:** \$5,602,030
- **Case Management:** \$2,674,053
- **Crisis Response Services:** \$2,789,897
- **Family & Community Support:** \$1,592,788
- **Housing:** \$582,853
- **Client Identification & Outreach:** \$1,377,888

By the end of the program year, \$10,603,291.50 million was spent by programs out of a total of \$14,619,540. 72.5% of funding was spent in PY23.

## Numbers Served by Gender

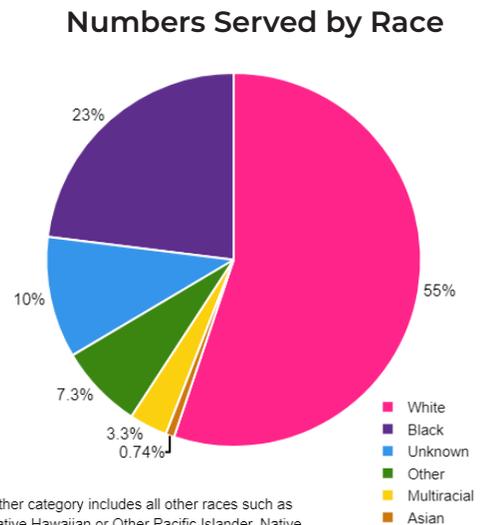
Out of 11,485 individuals served, 54% were female and 43.2% were male. Together, these two categories comprised 97% of the sample population.



\*Other category includes options such as transgender male/female, genderqueer/non-conforming, and non-binary.

## Numbers Served by Race

Based on a sample size of 10,672 individuals, the most served racial groups were white (55%), black (23%), and unknown race (10%). Multiracial (3.3%) and Asian (0.74%) groups composed a smaller proportion.

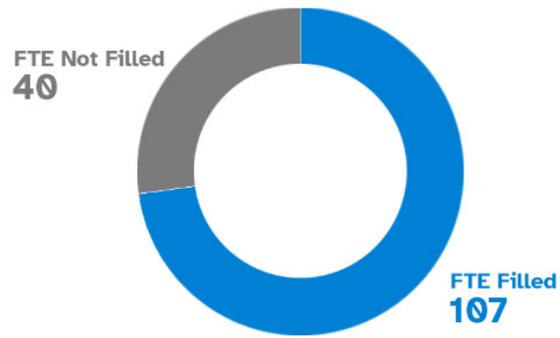


\*Other category includes all other races such as Native Hawaiian or Other Pacific Islander, Native American, and all other races not specified.

### New Positions Created & Filled

This chart represents the 147 full-time equivalent (FTE) positions created by WCCMHB grants, filled by mental healthcare and substance use professionals. 107 FTEs (73%) have been filled, leaving 40 FTE (27%) open. Due to the shortage of available mental healthcare and substance use workers in Winnebago County, the WCCMHB will focus on workforce development in the coming years.

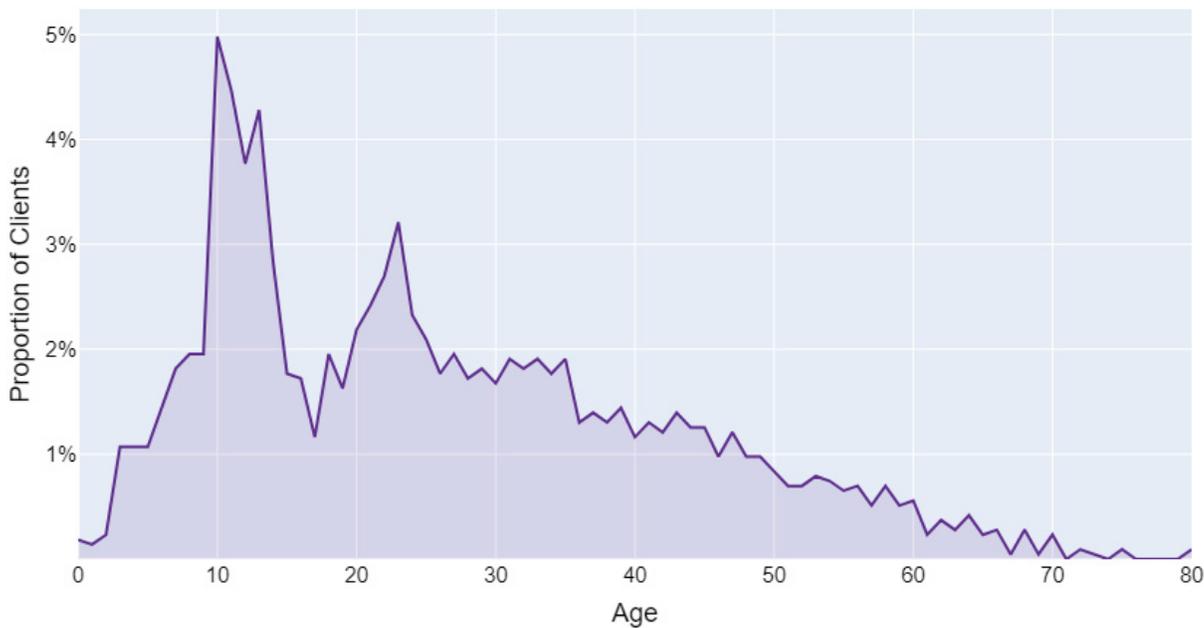
### New Positions Created & Filled



### Numbers Served by Age

In a survey of 2,149 individuals, the largest age groups receiving mental healthcare or substance use services were ages 9-15 and 19-26. Combined, these two demographics account for 50% of the programs. Other notable proportions are the late twenties and early thirties.

### Numbers Served by Age



Detailed program descriptions and contact information for all WCCMHB funded programs can be found by scanning the QR code or by visiting our funded programs page at [bit.ly/WCCMHBFundedPrograms](https://bit.ly/WCCMHBFundedPrograms).

# WCCMHB Community Support System Framework

The WCCMHB utilizes the Community Support System (CSS) framework, a research-based conceptual model that defines the array of services that people with serious mental illness need to live and recover in their community. As such, the CSS serves as a model for local mental health systems planning, to identify and fill gaps so that Winnebago County residents have access to high quality mental health services when and where they need them.

Through an analysis of local data and with public input, WCCMHB identified six priority areas for funding within the CSS: client identification, mental healthcare treatment, crisis response services, housing, family and community support, and case management. This report will take a deeper look at these six priorities, looking at how WCCMHB-funded programs fill gaps and innovate within these priority areas. These narratives illustrate the individualized nature of ideal mental healthcare, incorporating both provider and client perspectives. Pseudonyms have been used for all client names in each story to maintain confidentiality. The WCCMHB's support of these organizations strengthens the CSS framework envisioned for the Winnebago County community.



## Community Support System Framework

### Client Identification and Outreach

- Client Identification
- Outreach
- Transportation Assistance

### Mental Health Treatment

- Diagnostic Evaluation
- Supportive Counseling
- Medication Management
- Substance Abuse Services

### Crisis Response Services

- Crisis Telephone Services
- Walk-In Crisis Services
- Crisis Outreach Services
- Crisis Residential Services

### Health and Dental Services

#### Housing

- Supportive Housing
- Residential Assistance for Homeless Mentally Ill Persons

### Income Support

#### Peer Support

- Self-Help
- Consumer-Operated Services

### Family and Community Support

- Assistance to Families
- Education for the Community

### Rehabilitation Services

- Social Rehabilitation
- Vocational Rehabilitation

### Protection and Advocacy

### Case Management

## Housing

# A Path Through Serious Mental Illness to Independence

## Stepping Stones of Rockford, Inc.

Family. Home. Everybody needs one that is warm and supportive. For adults in Winnebago County living with serious mental illnesses, that is exactly what Stepping Stones of Rockford offers: an inviting place where those in need of intensive mental health treatment are seen and loved for who they are.



**Sue Schroeder,**  
CEO, Stepping  
Stones

“We recognize the person, not the illness,” says Sue Schroeder, CEO of Stepping Stones Rockford. “Our mission is not only to provide safe housing and treat illness, but there are so many other challenges in day-to-day recovery that deserve compassion and autonomy. The best way we can do that is step by step.”

What Sue and her staff have done is create a living community where residents in recovery from a serious mental illness belong and thrive. They do this by providing a stable shelter paired with counseling, offering as much daily normalcy as possible. These pillars encourage responsibility and independence at the level clients are capable. They take control over their own lives whenever possible.

They provide hope, which aids recovery.

### Shelter: A powerful bridge to recovery

Stepping Stones provides housing coupled with mental health treatment for Winnebago County adults with a serious mental illness. Four levels of care are available, designed to provide the least restrictive environment.

Supervised homes - Five group homes providing 24-hour services and supervision. Each home houses six to eight people.

Supervised apartments - Two buildings with one-bedroom apartments, providing 24-hour services. One serves 15 men and one serves 14 women.

Supported apartments - Individual two-bedroom apartment units, with on-site staff only during the day. Two locations serve 14 adults and one location serves 44 people aged 50 and older.

Supported community - Four apartment buildings with a total 16 one-bedroom apartments, or referral to Rockford Housing Authority high rises/independent landlord-owned buildings. Mostly independent living, but clients receive weekly check-in visits and other mental health treatments as needed.

Many of Stepping Stones clients are living with schizophrenia or bipolar disorder, which is a significant challenge to obtaining independent housing. Additionally, many require gentle supports to manage emotional highs and lows, regularly take medication, or care for themselves. As clients are accepted into the program, they are assigned to housing appropriate for their needs (it is not always 24-hour group housing). As participants master recovery and life skills, some

supports are no longer needed and they move to the next level of independence.

"We saw that going from 24/7 care to check-ins once per week was too big of a leap and people were not being successful. We created additional steps to ease our clients into independence," says Sue.

"Now, clients who come in very unstable can get care in a group home, move up to an apartment, practice what they learned there, move to the Transitional Apartment Program, practice their learned skills, move to an apartment, and then just receive counseling."

Life in Stepping Stones group housing resembles dormitory living. Up to eight individuals live together in one house, attending classes – group and individual counseling, coping skills education and participating in scheduled leisure activities. Everyone is expected to pitch in with household chores like grocery shopping, cooking, or cleaning so they can develop skills necessary for independent living.

Residents living in close quarters naturally form friendships as they share life experiences and rely on each other for moral support. These relationships can make the difference between just getting by and successfully thriving. These bonds are critical, particularly as residents move to independent living and have to make more of an effort outside of their apartment to keep isolation at bay. Not infrequently, clients will return to their former group home for group leisure activities.

"Just because they might not be living together in a group home anymore doesn't mean our clients don't care about each other," says Sue. "We want them to nurture those bonds they have with each other."



Supervised homes offer 24-hour services for adults with serious mental illnesses. Group living encourages strong relationships and independence, setting residents on their way to recovery.

## Small steps, far-reaching outcomes

By providing safe and affordable housing for adults with serious mental illnesses, Stepping Stones offers a basic necessity that is one of the most powerful bridges to recovery. It provides stability that allows the client to focus on achieving their goals. But there's no impact more compelling than that on individual lives. (See sidebar for Brian's story)

"Success depends on the person," Sue emphasizes. "It could be staying out of jail, out of the hospital, getting to the next level of care, graduating from high school (we attend a LOT of graduations), or getting a job.

"But watching people do things they never dreamed they could do, seeing families come back together, those outcomes resonate much further than we could imagine."

All achieved one step at a time.

### *My Story: Brian Cadmus*

**Mental illness is a lifelong struggle. There is no magic pill that will make it instantly go away. Recovery can take years. Recovery is very complex. I can proudly say that I am mostly recovered.**

**I've struggled with mental illness for most of my life. I've had many diagnoses: Borderline personality disorder, major depression with psychotic features, schizoaffective disorder, OCD, etc. My current diagnosis is Bipolar I. I also have anxiety.**

**When I was nineteen or so, I had to be hospitalized because of severe depression and suicidality. I was studying to be a veterinary technician. The coursework was very hard. I was not on the right medication for my bipolar disorder.**

**I have had four or five manic/psychotic episodes in my life. I have not had one since 2016. I credit that to being on the right medication.**

**I have been doing pretty well since 2016. I am living on my own. I am on the right medication now. I have a job that I enjoy and excel at. I am looking forward to going back to college.**

**I know that mental illness is a battle that I will have to fight for the rest of my life. I am currently winning that battle.**

## Crisis Response Services

# After the Crisis

### City of Rockford Crisis Co-Response Team, Mobile Integrated Health

“Officer Ruiz responding to a domestic disturbance on Green Street. Subject appears to be under the influence of alcohol, is yelling and threatening family members present. Subject is not responding to attempts at de-escalation. Officers are attempting to keep subject from fleeing the home. Subject’s mother reported that subject has not taken his bipolar medication or seen his doctor for three months.”

Suddenly the scene changes. The subject is not an aggressive, combative individual – a scenario Officer Ruiz is well-equipped to address – but now someone who cannot control his behavior, needs help filling a prescription, and has a family at its breaking point. It’s not the first time this has happened with him, either. Legal involvement is not what he needs.

#### *Now what?*

Thanks to two innovative Winnebago County models, jail time or release are not the only options. When mental health symptoms are found to be at the root of a 911 call, the Crisis Co-Response Team (CCRT) or Mobile Integrated Health-Mental Health Program (MIH-MHP) provide a mental health response more appropriately crafted to the individual’s needs.

“Some people are just lacking resources, which can escalate to a situation where calling the police is the only option they can see to get the help they need,” says Investigator Kengott, Rockford Police Officer in the CCRT program.

“We are here to get people back on their feet.”

#### **As often as necessary**

CCRT and MIH-MHP teams are called after a police or paramedic, respectively, is on the scene of a 911 call. Once the immediate situation is defused, no immediate threats are present, and it’s determined that mental health management was the main cause of the call, the first responder connects that individual with these

specialized teams who can ask the right questions to uncover the next-level supports that are needed. (See sidebar for step-by-step details of each program’s response.)

“What makes us unique is that we are offering services to those who wouldn’t have them otherwise,” says Investigator Kengott.

It goes well beyond therapy referrals. No insurance? They will look for a solution. No shelter? No car? No phone? No job? CCRT and MIH-MHP have links to 120 agencies (and growing) in Northern Illinois providing a myriad of services that they can quickly connect individuals to.

“Our staff will find a way for you to get the resources you need,” says Jon Larson, EMS Coordinator, who oversees the MIH-MHP program. “If we don’t already have connections with an agency who can help – and we have a long list – we will make them.”

After the initial crisis situation has passed officers, mental health providers, or medical staff conduct regular follow-up to provide additional resources or just see how things are going. This integrated model of immediate crisis response and consistent follow-up allows response team members in both programs to create valuable relationships with the individual and their families. It’s easier to guide a client toward a desired outcome when both sides trust each other and understand what makes each tick.

That’s important because getting to a point where individuals are ready to make change takes time. A lot of time.

“When we meet people in their moment of crisis, they’re not ready for treatment yet,” says Ryan Baney, Rockford Fire Department MIH-MHP Manager. “We’ll educate them and their family, and point them toward resources that will help. We may not hear from them again for a few months and then we’re there responding to the next overdose asking ‘Are you ready now?’ We’ll keep doing that, waiting until they *are* ready.”

## *How CCRT and MIH-MHP help individuals in a crisis*

### ***Crisis Co-Response Team (CCRT)***

**Members:** City of Rockford, Rockford Police Department, Loves Park Police Department, Winnebago County Sheriff's Office; Rosecrance Behavioral Health

- Police respond to 911 or non-emergency call and assess the situation.
- Do they feel that mental illness (diagnosed or not) is affecting the situation? Does the individual need to be hospitalized? Have they responded to multiple calls regarding this individual?
- If yes, the CCRT team is notified (immediately, if a counselor is needed to stabilize the scene) and contacts the individual within 48 hours or upon hospital discharge.
- Team visits individual at home and provides any resources needed. Common requests are medication management, housing/utility assistance, treatment provider referrals, food pantry or transportation assistance.
- Team continues follow-up calls and home visits.
- Police or clinician checks medical/police records for updates, contacts providers with information or questions to provide a holistic view of the individual's care.

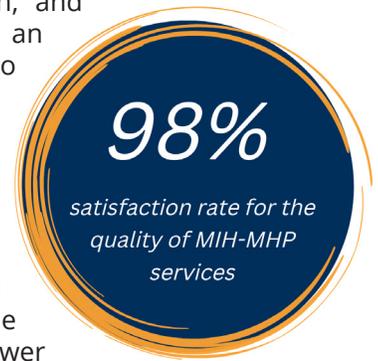
### ***Mobile Integrated Health - Mental Health Program (MIH-MHP)***

**Members:** Rockford Fire Department, UW Health

- Rockford Fire paramedic responds to medical call.
- Have they repeatedly responded to this patient or did patient request mental health help?
- If yes, Rockford Fire discusses MIH-MHP program and refers individual (with their permission).
- Patient referred to one of three MIH-MHP teams - long-term, short-term, or medium-term - based on immediacy of needs and desire for ongoing care. Team provides resources and develops goals that meet patient's unique needs (get medications, emergency housing, transportation).
- Team continues follow-up calls and home visits.

## **Care Beyond the Initial Call**

Investigator Kengott, Ryan, Jon, and their colleagues know that an individual is on their way to permanent change when they have the autonomy to directly call their CCRT or MIH-MHP provider when they hit a rough patch. Reaching out for connection when you need a listening ear or making sound medical decisions without the team's intervention puts the power back in the patient's hands.



The positive effects of patients taking control over their lives extend to encircle others in their social sphere. It ends up expanding the influence just one co-responder team can make.

"We can see we're successful by the ripple effect our program has," says Jon. "Someone who abuses substances stays in groups of people who also use. After that person's first overdose and entering treatment, others in the group see that example and some are motivated to seek treatment for themselves."

"I don't think any of us ever imagined one of our referrals would lead to a patient referring another patient."

This work saves lives. Last summer, the CCRT team made a follow-up house call to a client who had recently been discharged from the hospital following an overdose. Upon arrival, the responders found a man and woman unconscious outside the residence. Debris littered the ground. The clinician sprung into action, laying both individuals on the ground to perform CPR.

That's when he noticed an unused Narcan (medicine that counteracts an opioid overdose) dose among the debris and promptly administered it to the woman in active overdose. In minutes, she went from having glazed eyes, to blinking, to questioning what happened, to walking to the just-arrived ambulance.

After overdosing the previous day, she had been sent home from the hospital with Narcan. She decided to bring it outside that day just in case she or her friend needed it.

Both recovered from this incident and she expressed her intent to begin treatment immediately. The entire team is visibly proud, both because of the resources they could provide, and on behalf of the client's forethought and new commitment to recovery.

That warm, guiding hand will be there for Winnebago County residents in a crisis, beyond the initial call for help. As often as necessary.

## Family & Community Support

# Changing the Conversation Corrects Stigma

## Rockford Sexual Assault Counseling, RAMP, NAMI Northern Illinois

*You must be crazy.*

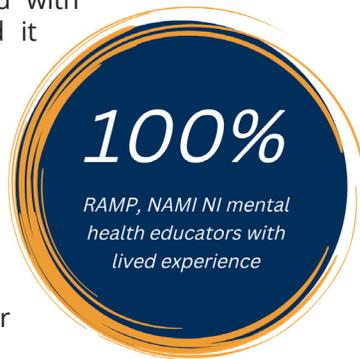
*Just think positive and you'll be fine.*

*That kind of thing doesn't happen here.*

*People will judge me if they know.*

STIGMA. It's an ugly word with harmful associations. And it holds people back.

"When people first inquire about our services, many still pause when talking about their mental health because of the stigma attached to it," says Katie Lee, Chief Services Officer at RAMP.



Changing the conversation around mental health to discuss what's *right* encourages empathy. It normalizes differences. It rewrites stories to become ones of encouragement and strength.

### The More You Know

Mental health awareness has come a long way. The statements above are less prevalent, as seeking help for mental illnesses is becoming more commonplace. The reason is partly generational: young adults talk more about their mental health, which is changing the way society as a whole views mental health and illness. By opening up that conversation, all of these passionate individuals are holding systems accountable for providing support and services.

RAMP, Rockford Sexual Assault Counseling (RSAC), and NAMI Northern Illinois (NAMI NI) are just a few Rockford non-profits working to get those conversations started. They're dispelling myths using the most powerful means available to them: education given by individuals with

firsthand experience. Why is that so impactful? Because the more you hear about others' very personal stories, successes, and failures, the easier it is to see your own experience reflected there and reach out for help.

"Many people who experience mental illness may hesitate to seek help due to fear of judgment or lack of understanding about available resources," explains Danielle Angileri, Executive Director at NAMI NI. "Education helps individuals recognize the importance of seeking professional help and provides information about where to find it."

### It all starts with me

"Sam, I just can't go. Some days I'm okay but some days I get panic attacks when I see the school and I just can't go in. He's just there, living his life. Mom is gonna flip when she finds out I've been skipping school. I don't wanna go home either. She just doesn't get me."

"Stella, as your therapist, I've see how far you've come since the assault. Remember when you skipped a whole month? Only missing once a week now is progress. Do you feel like you could talk with your mom - help her understand?"

"Sometimes I'll see her with this *look* and it reminds me of how I've let her down. I wish I could talk like we used to but I feel so guilty."

"That's a normal feeling, but I want to remind you again that you did nothing wrong and the assault was not your fault. It takes time and you just might not be ready to believe it yet. That's ok. I also want to remind you that skipping school is a normal trauma response since the perpetrator is there. It's something we can work on but does not mean you are a bad person."

"Yeah, I dunno...."

Stella did talk with her mom eventually. It took another six months of therapy but after a confrontation with her mom, she reached her breaking point. Therapy gave her had enough confidence to advocate for herself. That conversation resulted in a long discussion about PTSD, where Stella educated her mom on better ways to respond when she's panicking. It also resulted in an unexpected revelation: Stella's mom had a similar history of abuse.

"So often, the kid opens up the topic at home," says Erica Engler, Executive Director at RSAC. "That causes them to discover that mom, maybe a sibling, has a history of sexual assault too and now can be seen by our therapists."

Every conversation, big or small, therapist to client, client to sibling, chips away at that swirling stigma. Clients become experts. And after healing enough to develop the confidence to talk about their experience, they often become advocates. That means correcting peers when they're misinformed, connecting with family over their past, or speaking up publicly to show that 'yes, these things are happening all around you.'

## Educating With Lived Experience

Who better to advise you through your mental unrest than someone who's been there too? Lived experience is the cornerstone of all NAMI NI's educational programming. Every class and support group is led by someone with firsthand knowledge of living life with a mental illness. It's the reason why these groups are in demand and resonate so deeply with participants.

"When you are part of a group where everyone is directly impacted by mental illness, they understand what you're going through," explains Danielle. "Whatever the circumstance, people with that lived experience are there to support you on your journey."

Widely known for its mental illness advocacy and education, NAMI NI offers 10 support groups per month that serve hundreds of residents, no diagnosis required. There are groups for mental illness recovery, mood disorders, parents and caregivers, family and loved ones, and teens. There are also in-depth programs for families and parents/caregivers, and resources specific for faith-based support.

NAMI Family-to-Family is their most popular class. It is a free, eight-session program providing guidance and support for adults on caring for their loved one with a mental illness. Participants learn ways to communicate better, how to handle a crisis, current therapies and treatments, how mental health conditions affect the whole family, and how to handle the stress of being a caretaker.

RAMP, on the other hand, takes its educational programming out to the community. Eric Brown, RAMP Systems Change Coordinator, delivers disability awareness training to groups interested in promoting community inclusiveness. Some of the more popular trainings are Disability and Ableism Awareness and Inclusive Work Environment for Disabled Employees, although any employer or community group can request a customized topic.

RAMP's exclusive use of educators with lived experience makes the difference between a dialogue that ends when the presentation does and discussions that can change long-held beliefs. The more these authentic conversations happen, the less mental illness will be seen as something 'bad' or 'scary;' it's just *ordinary*. That's when big changes can happen.

"Generations have grown up where the Americans with Disabilities Act was already a thing," says Eric. "The expectation that our world should be accessible is there. With that expectation comes accountability that holds communities responsible. It's the same with mental health."

We now expect that buildings will have buttons to open doors and sidewalks will have curb ramps to accommodate those with limited mobility. Every day, people like Eric, Danielle, and Erica keep educating, with the hope that someday, widespread flexibility with scheduling and time off or more user-friendly communication options will be equally familiar to accommodate those with anxiety or counseling needs, for example.

With every parent who hears hard truths from their child, an employer who offers disability awareness training, and friend who knows how to carry you through a crisis, influence spreads. Stigma transforms. And once every conversation gets started, slowly but surely, those statements change from denial and blame to support and healing.



# Navigating the Wide World of Mental Health

*Crusader Community Health, NAMI Northern Illinois*

Taking care of your health can be time-consuming and exhausting, especially when mental health is combined with other major physical issues. It's a common occurrence: NAMI (national) reports that people experiencing Serious Mental Illness are more than twice as likely to develop cardiovascular or metabolic diseases. And those are just two of the more common ailments.

Imagine you're on Medicaid, don't have a car, and your major depressive disorder makes getting out of bed the hardest part of your day. Your recent knee pain means you'll have to see your primary care doctor, who will refer you to an orthopedic specialist, who will want x-rays or an MRI taken, and then refers you for physical therapy and a follow-up and quarterly diabetes check-ups, yearly primary care visit - it adds up.

Multiple trips to multiple clinics for all of these issues? Getting proper treatment is looking less and less likely.

Sometimes it feels like the deck is stacked against you. But with case management services provided by Crusader Community Health and NAMI Northern Illinois, it doesn't have to be.

## Connecting Health with Social Needs

Just one phone call. That's all that's needed for the 2,700 patients living with mental illness taking advantage of Crusader's case management system in PY23. One phone call to their case manager allows a patient to hand over that administrative part of their health and just focus on receiving care. Prior to having a case manager, many patients were overwhelmed by the barriers to getting their physical and mental care and just went without.

That's the need Crusader's Behavioral Health case management fills: making sure all those connections are made between the patient and his/her providers. This involves making appointments with psychiatric or primary care doctors, navigating the insurance system, ensuring transportation or interpreters are available, and leading discussions between all members of the patient's care team. Everything is under one roof, so it can be coordinated quickly and efficiently.

"Our patients need someone who's there for them," says Will Holm, Chair of the Department of Behavioral Health at Crusader. "Lots don't have good systems in place, so I'm happy to say we are being proactive in heading off emergencies. A patient may be out of their meds, they can call that day and get it filled. We can make sure gaps don't happen."



**Will Holm,**  
Chair of the Department  
of Behavioral Health,  
Crusader

Crusader patients can be referred for case management by their primary care provider or referred by behavioral health staff. The case manager assesses their needs, creates a treatment plan, and sets a follow-up schedule with the patient. They are the patient's main point of contact at Crusader, making sure patients receive their direct health care in tandem with supporting services to provide a holistic view of that patient's health.

"This is true social work," says Will. "We are able to address all issues that are going on, impacting health in all areas of their lives."

As a Federally Qualified Health Center (FQHC), Crusader's model of integrated care is unique among healthcare or behavioral health organizations. Anyone needing health care will receive it and the variety of providers meets every basic need for the entire family. They offer primary care, women's health, pediatric, mental health, and dental providers; have an on-site pharmacy; accept Medicare/Medicaid; and offer a sliding fee scale, all in easily accessible clinics throughout the county.

Crusader case managers ensure that when a patient needs therapy, primary care, check-in appointments, and a prescription filled, they can all happen in the same day at the same location. This benefits the providers, too; a patient's therapist may have an office across the hall from the patient's pediatrician. They regularly discuss mutual patients and design treatments that address all conditions the patient has, not just the one specific for each doctor.

The more barriers that can be removed for a patient, the greater chance that patient continues the care plan laid out for him/her.

“Our case management keeps the patient closely tethered if they need a behavioral health safety net,” says Brittney Fry, Manager of Case Management Services at Crusader.



**Brittney Fry,**  
Manager of Case  
Management Services,  
Crusader

For a patient with mental health needs that make all those tasks seem overwhelming, the convenience is a critical lifeline.

## How are you doing?

Claire thinks her apathy might be to the point of requiring treatment. Jordan has a nine-year old son with obsessive-compulsive disorder and is mentally exhausted with caring for him. Where do they even begin to look for help?

NAMI Northern Illinois is well-connected. It knows all the mental health services in Winnebago County and has a comprehensive list of resources for almost any client need. While Crusader’s case managers unite the diverse aspects of a patient’s health care, NAMI NI’s core purpose is to point people in the right direction when seeking mental health help.



**Danielle Angileri,**  
Executive Director,  
NAMI NI

“Because we are a niche, peer provider and not doing clinical work, we can provide clients with unique tools for recovery,” Danielle Angileri, Executive Director at NAMI NI, says. “If an individual cannot receive clinical care right away, our case managers can fill a gap by making regular contact and support with them while they are waiting to receive treatment.”

Case managers provide resources and walk hand-in-hand to assist clients and their families in accessing specific services for their needs. Based on their regular communication, case managers also uncover client needs like getting help with insurance, finding housing options, receiving comfort from NAMI NI’s many support groups, or just providing a listening ear.

Kinsey White is one of NAMI NI’s case managers and believes her weekly check-ins provide a personal touch that is integral to her clients’ well-being. Sometimes just asking “How are you doing today?” is exactly what that client needs at that time.

“It’s not a requirement that I call my clients weekly, but because of personal experience, I know how important it is for people who may not be in a good mental place to have that continual contact. Clients tell me they feel like they actually are cared about and there is someone out there who will listen to them,” Kinsey, Mental Health Advocate, explains.



**Kinsey White,**  
Mental Health  
Advocate, NAMI NI

All of NAMI NI’s staff have lived experience, so all clients know they are speaking with a peer, not a clinical provider. When a client calls their advocate – distressed, anxious, unsure, navigating new territory – their case manager takes time to listen, empathize, and find the right resource for what the client truly needs. Sometimes it’s not what they’re calling for and sometimes it’s just to be there while they figure it out.

“They understand what their clients are going through, even if the client is not ready to go into treatment,” says Danielle. “They’re there for support on the journey.”

## More providers, more services, more appreciation

Crusader Behavioral Health Services and NAMI NI continually see an uptick in people wanting their case management services. In 2023, both expanded their number of case managers, which allowed both to offer extended hours and services. More case managers able to conveniently connect patients with services or direct care is especially important for Crusader, considering there is no cap on the caseload it carries. They add new patients every week.

“It’s so hard to access care and there’s so much frustration with coverage. The more providers we have available, the more patients can be followed closely and the more robust those services can be for both team and patient,” says Brittney.

In the vast landscape that is the mental health world, the direction that NAMI NI and Crusader’s case managers provide makes a difference to patients swept up in it. Brittney has a patient who has progressed to the point where she is now seeing a psychiatrist, has a new job, controls her mental health symptoms, and is reconnected with her children.

“She realizes we are giving to her in ways that are not seen in other areas of her life,” Brittney says. “These services are not offered everywhere and are unique to her needs.”

“That’s meaningful.”

# Mental Health Identification Programs Mean At-Risk Individuals Aren't Left Behind

## Lifescape, Rosecrance Behavioral Health

"Hello?"

"Hello, this is Ashley and I'm calling from Lifescape Community Services. I'm calling as part of a program we have for senior mental health, where we're completing screenings."

"Can I ask you two questions about how you've been doing?"

"In the last two weeks, have you been bothered by having little interest or pleasure in doing things? Have you been bothered by feeling down, sad, or hopeless?"

### Depression is Not A Normal Part of Aging

Just two questions and Ashley Suddarth, Senior Mental Health Advocate at Lifescap, knows enough about this person's mental health to determine if Lifescap needs to extend a helping hand. This dedication to outreach is what makes the Senior Mental Health Program (SMHP) a unique and essential service in Winnebago County.



**Joy Drysdale,**  
Program Services  
Director, Lifescape

"There is such a gap in addressing the mental health needs of this population and this is our niche," says Joy Drysdale, Program Services Director. "Because of that, our client identification and outreach services seamlessly work among all our services. It's like a warm handoff from our screener to all of our in-house services - meal delivery, day programs, information and assistance, volunteer activities."

Senior citizens are an often overlooked group, with unique factors - social isolation, health issues, loss (of abilities, loved ones) - that make them more vulnerable to developing mental illness. As many as 25% of people aged 65 and older are living with a mental health condition, with anxiety and depression the most common. This is where Lifescape's compassionate check-ins can fill those gaps, making sure each individual in their suite of programs is noticed and heard.

"We're making contact with numerous seniors who wouldn't have been contacted otherwise," Joy says.

Following the initial two-question screen from Ashley, those choosing to receive mental health services will formally enter Healthy IDEAS, a three- to four-week depression awareness program that educates and provides resources for older adults and their families. It begins with a comprehensive intake exploring the individual's level of depression, loneliness, and isolation. Based on those results, older adults attend weekly education sessions on identifying depressive symptoms and developing skills to manage them. Clients can also receive referrals to additional care providers, such as Rosecrance, Stepping Stones, or Crusader, for more in-depth assistance. This can all be done in the client's home if necessary, it's free, and there is no waiting list.

"The flexibility of where we can conduct this program is a great asset," says Ashley. "We have clients who no longer drive and can't get out much who love the home visits. We also have clients that come into the office or prefer sessions are done by phone because they may not be comfortable with people in their homes. Feeling secure and safe is a huge factor in their success."

### Holistic Client ID Delivers Seamless Care, Unique Insight

Rosecrance Behavioral Health's Access to Care program continues that individualized patient identification, both for Lifescape clients and the general public. Access to Care offers mental health services for individuals ages five and up who are struggling with a serious emotional disturbance. Clients can receive a psychiatry evaluation, medication, and treatment referrals. Rosecrance providers and support services regularly talk with each other, giving a holistic understanding of a patient's multiple health issues, similar to Crusader Clinic.

WCCMHB funds have allowed Rosecrance to place mental health providers in their locations throughout the Stateline, further expanding the type and quality of care a patient can expect to receive, all in one convenient, familiar spot. This centralized access to medical services allows patients to build a rapport with their medical

team; crucial when considering mental health is usually not the only concern patients seek treatment for.

“By addressing all our client's needs, we can better serve them and ensure that they receive the highest level of care possible for the best possible outcome for whatever challenge they may face,” says Jessica Relle, Access to Care Supervisor at Rosecrance Behavioral Health.

Kayla, an Access to Care nurse, had been giving monthly long-acting mood stabilizing injections to her client, Linda, for years at Rosecrance Ware Center. These monthly check-ins allowed Kayla to get to know Linda personally, almost as well as her own family. But when Linda arrived for her August visit, Kayla immediately knew something was off and noted it. She was right. Looking further into her symptoms, Kayla discovered Linda was experiencing life-threatening sepsis and her kidneys were starting to fail. She was admitted to the emergency room, received treatment, and fortunately recovered.

“If it wasn't for the fact that she came in for mental health treatment, this likely would have gone unnoticed,” says Heather Borgardt, Practice Manager for Medical Services at Rosecrance. “The nursing staff's attentive personal care potentially saved a life.”

## Cementing Well-Being Through Strong Social Connections

In PY 22-23, Lifescape screened 279 older adults to check for depression symptoms. Eighty-seven individuals qualified for and completed the Healthy IDEAS education program. Those are 87 older adults who otherwise did not have family support or resources to seek mental health guidance on their own.

What makes this program work so well is that it's patient-centered with a strong emphasis on social interaction. Any service received or goal set is decided by the client, guided by case managers. Giving clients control over their lives whenever possible is key to building self-esteem.



**Christa Reiter,**  
Senior Mental Health  
Program Supervisor,  
Lifescape

“It's all about empowering them to be independent and in their homes as long as possible. We give them the control, as slow or as fast as they prefer,” emphasizes Christa Reiter, Senior Mental Health Program Supervisor at Lifescape.

Knowing that social isolation is a major contributor to older adult depression (as well as a symptom), the SMHP incorporates complementary services to boost moods and provide face-to-face

interaction. There's the Friendly Caller project, where a volunteer calls once or twice per week to chat. There's dog therapy with Circle of Change. There are art projects completed during group counseling sessions. Lifescape day camps and the Americorps Senior volunteer program may also be socialization options.

Playing with puppies goes a long way toward lifting spirits, but it's the strength of personal relationships that gives seniors a feeling of belonging and motivates them to make positive changes. At Lifescape, those connections are most easily observed in weekly group counseling sessions. The group is small – less than 10 participants per session – but that allows them to form closer, caring relationships.



Lifescape regularly invites Circle of Change and their support dogs to conduct a session with Lifescape's Support Group clients. In this activity, paint was put on a canvas, which was put into a Ziplock bag. As the support dogs licked the cheese that was applied to the outside of the bag, they ended up painting a picture for the older adult clients to take home. Of course, the dogs were also allowed to conduct their 'official' duties of providing one-on-one cuddle time with clients.

“It's very motivating to me to watch group therapy sessions, seeing them sit and talk. I know that without this group, they would not have that connection with each other,” says Christa. “We recently added two new members and a few of our long-term members immediately jumped in, introducing themselves and asking them how they were doing.”

“It is encouraging for clients to come together and discuss the various trials they're going through. They need to know 'hey, I'm not the only one going through something like this.' There's also power in uplifting and educating others based on their own experiences,” Ashley adds.

The results of both organizations' outreach is clearly written on the faces of those they help, whether it's saving a life or providing space for social connections to happen.

“I know we're making a difference when I sit with someone and they can see there's hope,” Christa says. “They don't always have to be stuck in that place.”

# Fresh Perspectives to Treating Youth Trauma

## Youth Services Network, Rockford Barbell, Brightpoint

*Because I'm happy*

*Clap along if you feel like happiness is the truth*

*Because I'm happy*

*Clap along if you know what happiness is to you*

Williams, Pharrell. "Happy." G I R L, 2014

Jasmine loves the song "Happy." The twelve-year-old recently started seeing Ebony Waller, her hip-hop therapist at Youth Services Network (YSN), to help manage her emotional dysregulation after moving homes yet again. This time, she lives with her biological father, stepmother, and half siblings. It was just the latest event in a pattern of neglect and instability from other caretakers sustained since her infancy. Ebony knew this popular song was the ticket to meaningfully connect with her client.

Her first step: Together, they explored Pharrell's history as a hip-hop artist and music producer. Next: Ebony guided Jasmine to incorporate lyrics from "Happy" into her daily mindfulness routine. After that: Jasmine wrote a remix of her song, incorporating her own life experiences.

"Her father and stepmother have seen extremely positive improvements in her behavior," says Ebony. "She now writes songs to help deal with her emotions and spends time with silkies [a chicken breed] as part of her mindfulness practice."

**This is not your traditional trauma therapy.** Treating youth often requires a fresh perspective both to gain credibility with youngsters but also to stay current as new trauma sources and researched-based treatment methods change.

"It gives you a lens to see them through and figure where they're coming from in a non-threatening way," says Ebony.

### Treating the trauma response

Trauma is any event or circumstance that a person experiences which creates a negative social, physical, emotional, psychological response. Trauma events are different for everyone - bullying is a common one - but they range from car accidents to witnessing neighborhood violence to abuse. Trauma responses are also just as unique as the traumatic event; symptoms

range from anxiety and isolation to defiance and violent behavior.

"We are always mindful that, considering the things they've been through, it's not their fault," says Becky Gielow, Youth Trauma Clinic Program Director at YSN. "There's not something wrong with them - this event is something that happened *to* them."

Using Winnebago County Community Mental Health Board funds, YSN, Bright Point, and Rockford Barbell provide novel treatment techniques to begin trauma healing for the county's most vulnerable populations. Even though the delivery differs, all three organizations' end goal is for youth to be able to identify their feelings use healthy strategies to manage their trauma symptoms when they arise. These organizations follow the same researched-based strategies to begin their clients' healing.

### This is a safe space

*First strategy:* Establish a stable and trusting relationship.

If you're a child who has experienced trauma, the world around you feels shaky. You never know what to expect. You take your frustrations out by shouting at teachers and refusing to do what your parents ask. Now you're in therapy, going to YSN once per week to chip away at disrespectful, fearful, defiant behavior.

It's never going to work, though, unless you have someone in your life you can count on. So YSN lays the foundation for a trusting relationship by pairing you with the therapy method that will spark interest and put you at ease.

Ebony's hip hop therapy is one approach, but play, art, sand, and traditional talk therapy are other methods that allow a child to process their trauma using play - particularly for those who don't have the words to express it - which is how children naturally learn about their world.

Case managers supplement the work therapists do by attending to the family's needs that may contribute to the client's trauma. They do this by connecting families with utility services, help at school, temp agencies for employment, and even outings with a mentor.

"To really heal, the youth has to feel safe and secure. If they don't feel safe and secure because 'I don't know when I'm going to eat' or because 'Mom is stressed because she doesn't have a job and is worried about bills,' we'll never be able to help them heal because their basic needs are not met," Becky comments.

### Feel the tension, then let it go

*Second strategy:* Teach youth how to appropriately respond to their big emotions.

Weightlifting is not one of the first approaches that comes to mind. Rockford Barbell's Youth Self-Regulation Program proves that mindful, controlled physical movement allows kids to similarly direct their thoughts and actions.

"Since children's brains are not fully developed, they have to use their bodies to calm their minds," says Nick Votava, Trauma Therapist at Rockford Barbell. "We offer options in addition to talking it out."

The majority of Rockford Barbell's young lifters are aged 10-13 and meet three times per week for classes. Each session begins with each child giving a readiness score, determined by their sleep, mood, food intake, daily events, and physical readiness. Monday's class is chiefly a mini-lesson on a social/emotional topic that is the focus for that week. Wednesdays are for movement. Thursdays are also devoted to movement, but incorporate an end-of-week reflection that is both a personal evaluation and encouragement to share new skills with their adult caregivers.



Rockford Barbell's  
Therapy Space

Two foundational elements make progress possible. First, everyone adheres to a consistent routine – equipment is always in the same places, staff and group members are the same, exercises are done the same way every time. This practice encourages emotional regulation by giving these youth predictability in their unpredictable lives. Second, all work is done in groups of two or three, intentionally set by Elliot and Nick. Connecting with others makes full healing happen. Small groups allow youth to practice new social skills, advocate for themselves, and work with someone they don't know.

Ryder was a very solitary kid when he joined this program. He would begin a weightlifting session with the other kids in his group, but after the first exercise would go off by himself, talking with the adult leaders or not doing anything. After four sessions, Ryder was spending the entire session with his group and even suggesting to his partner what they should do next.

The side effect of engaging, active therapy? CONFIDENCE.

### Family Matters

*Third strategy:* Include the whole family.

"You want to engage as many people in the child's life as you are able to," says Lori Poppen, Northern Region Director of Mental Health and Wellness for Brightpoint. "It takes a village."

Like Youth Services Network, Brightpoint delivers trauma counseling directly to children. And like many other mental health service providers in Winnebago County, they pride themselves on 'meeting people where they are,' often literally. Brightpoint differs from other providers by offering counseling during the school day onsite in the Harlem School District, and holds sessions at children's homes, parks, churches – wherever it's convenient - to break down barriers to receiving mental health services.

But Brightpoint's strength is in its devotion to supporting the family, in addition to the youth participant. They believe that everyone has had trauma in their lives, progress made with a child needs to be reinforced at home, and families understand what will best work for them. Family educational sessions typically happen at the same time the child receives counseling. Focus areas deal with identifying trauma and how it impacts the entire family, managing their child's difficult behaviors, and providing connections to resources like support groups or food assistance.

Family education can change a parent's reactive attitude toward their child to one of understanding and teamwork.

"When parents can change the lens through which they view their child and they are able to see behavior as a trauma response," explains Lori, "they can change how they react and respond to the child."

"That's when transformation happens."

### So, where are you coming from?

Ebony continues to use Pharrell Williams to help Jasmine control her emotions when her life seems overwhelming. And there are many more like Jasmine coming through her door, needing the familiarity of their favorite hip-hop artists to heal their diverse trauma.

It's unconventional. It's personal. It works.

*Can't nothin'  
Bring me down  
My level's too high to bring me down  
...Because I'm happy*



**WCCMHB**

Winnebago County  
Community Mental  
Health Board

**Region 1 Planning Council**  
127 N. Wyman St., Ste. 100  
Rockford, IL, 61101



**(815) 319-4180**



**[info@r1planning.org](mailto:info@r1planning.org)**



**[r1planning.org](http://r1planning.org)**



**[@R1Planning](https://www.facebook.com/R1Planning)**



**[linkedin.com/company/r1planning](https://www.linkedin.com/company/r1planning)**



**[R1 Planning](https://www.youtube.com/R1Planning)**

**Winnebago County  
Community Mental  
Health Board**



**(815) 277-1022**



**[info@mentalhealth.wincoil.us](mailto:info@mentalhealth.wincoil.us)**



**[r1planning.org/wccmhb](http://r1planning.org/wccmhb)**



**[@wccmh](https://www.facebook.com/wccmh)**



**[@wccmhb](https://www.instagram.com/wccmhb)**



**[@WCCMHB](https://www.youtube.com/WCCMHB)**