

Winnebago County Community Mental Health Board Impact Report



Issue 3
Program Year
2023-2024 (PY3)



WCCMHB

Winnebago County
Community Mental
Health Board

Issue 3
Program Year 2023-2024 (PY3)

This 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

Winnebago County Community Mental Health Board	4
Data Dashboard	4
Clients Served	4
Funding Status by Month	5
Number Served by Gender	5
Number Served by Race	5
Positions Created and Filled	6
WCCMHB Community Support System Framework	6
Impact Stories	8
How Are the Children?	8
In Plain English (Or Spanish, or American Sign Language)	10
Melding Safety, Community, Healing	12
A Toolbox of Care	14
I'm More Than My Mistake	16
Continuity of Care	18

The PY3 Impact Report tells the stories of providers and clients served by the 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 PY3, the WCCMHB funded 44 mental healthcare programs for Winnebago County residents. These programs were selected by the WCCMHB for their alignment with one or more of these domains:

- Access/Wait Times
- Case Management/Follow-Ups/Wrap Around
- Community Outreach/Education
- Housing
- Numbers Served
- Perception of Care
- Recidivism/Readmission
- Staffing
- Symptomatology
- Systems Coordination
- Treatment Method
- Workforce/Professional Development

These themes align with the WCCMHB's vision, mission, values, and principles for Winnebago County residents seeking mental healthcare services. Organizations included in the stories in this report were selected according to their progress in these domains.

Data Dashboard

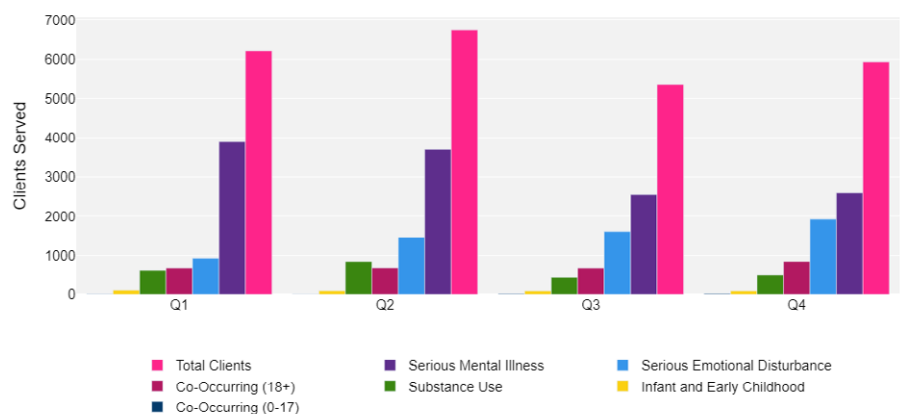
The WCCMHB Data Dashboard is the quickest and most accurate way to discover the variety of Funded Programs and progress toward their goals. It provides financial and client impacts for both the WCCMHB and its individuals programs, and can be filtered for individual programs or for the WCCMHB in general. To view the dashboard, go to www.r1planning.org/community-impact/wccmhb/wccmhb-impact and click on the green Data Dashboard button.

Clients Served

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

- **Co-Occurring¹ (0-17 years):** 41
- **Infant and Early Childhood (0-5 years):** 362
- **Substance Use Disorder (all ages):** 2,384
- **Co-Occurring (18+ years):** 2,842
- **Serious Emotional Disturbance (3-21 years):** 5,910
- **Serious Mental Illness (18+ years):** 12,722
- **Total:** 24,261

Number of Clients Served by Quarter

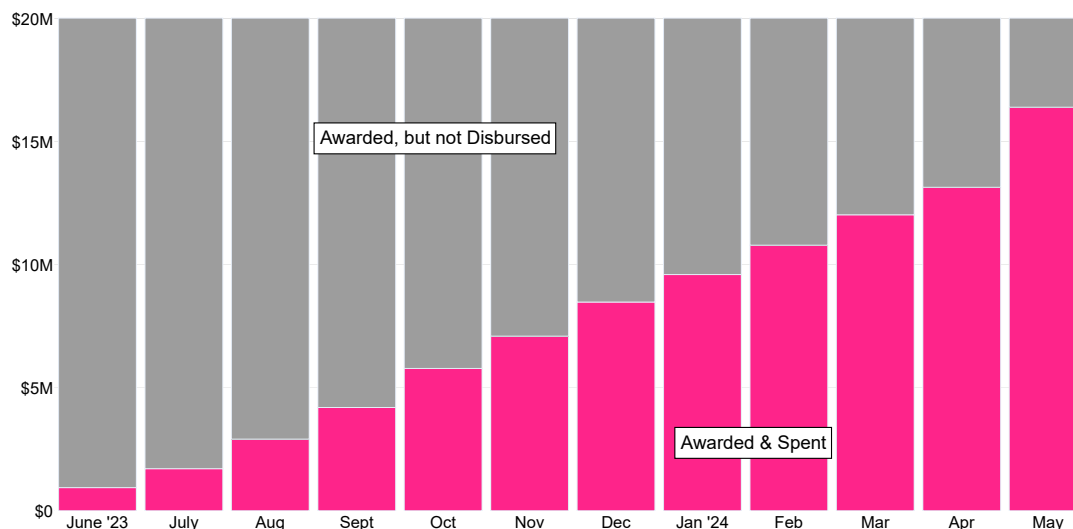


1 Co-occurring refers to individuals who have both a mental illness and a substance abuse disorder, as these illnesses often exacerbate each other.

Funding Status by Month

The gray segments of the bar represent funds that were awarded but not spent, while the pink segments indicate funds that have been awarded and disbursed. By the end of PY3, \$16.4 million, or 82% of total funds was expended.

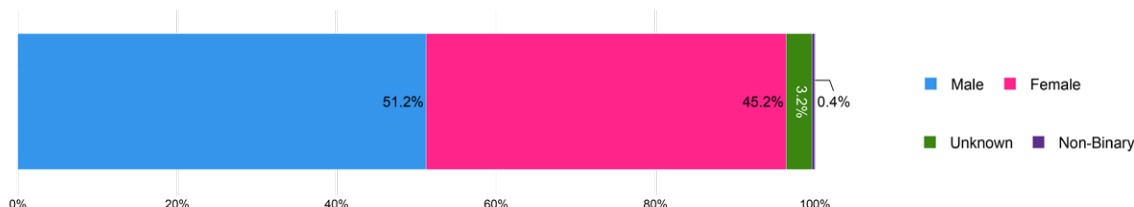
Funding Status by Month



Number Served by Gender

Out of the 24,261 individuals served, 51.2% were male and 45.2% were female.

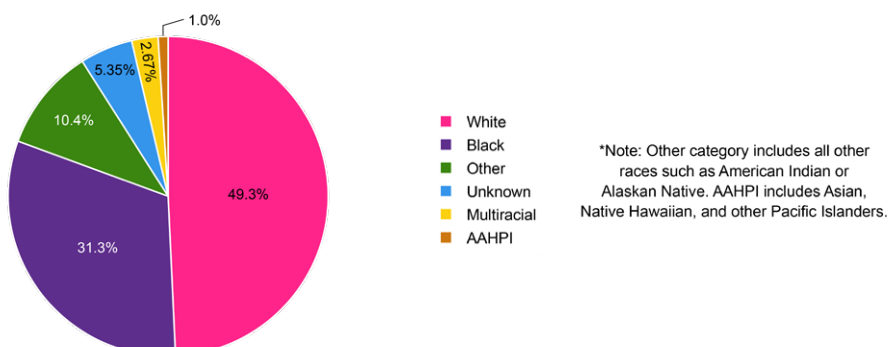
Number Served by Gender



Number Served by Race

Racial groups with the highest percentage of people served in PY3 were white (49.3%), black (31.3%), other races (10.4%), and unknown (5.4%). Multiracial (2.7%) and AAHPI (1.0%) groups composed a smaller proportion.

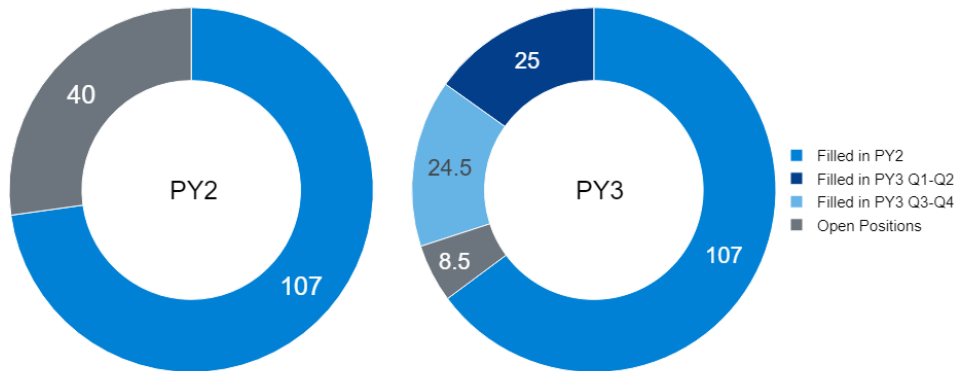
Numbers Served by Race



Positions Created and Filled

There were 58 full-time equivalent (FTE) positions to be filled in PY3. During the first two quarters of PY3, 25 of those positions were filled, followed by an additional 24.5 in the last two quarters (some roles are part-time). 8.5 FTEs remain to be filled in the next program year.

New Positions Created & Filled



Funded Program Details

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.



Data Dashboard

The WCCMHB Data Dashboard is the quickest and most accurate way to discover the variety of funded programs and progress toward their goals. More information on the program's data can be found at bit.ly/WCCMHB-DataDashboard.

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

CSS Priority Areas

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



 = Priority areas targeted for WCCMHB Funding

How Are the Children?

*Alignment Rockford, doula outreach
give all children a healthy start*

Emily Klonicki has a story to tell.

It's the 39% of children who were developmentally on track in all five key areas (see sidebar) when starting kindergarten. It's the four Rockford neighborhoods with over half of kindergarteners who are vulnerable in at least one area. The areas with highest vulnerability? Language and cognitive development (measuring things like reading awareness and early literacy/number skills) and social competence (which measuring the ability to cooperate with other children and willingness to try new things).

These findings are significant because they show big portions of the county's children are missing the skills needed to start school on the right foot. This data, uncovered through Alignment Rockford's 2022 Early Development Instrument (EDI) kindergarten survey, then forms the foundation for their Ready to Learn initiative. Ready to Learn provides a number of programs and interventions for the community's youngest members.

Early childhood development domains measured by EDI



Physical health



Emotional maturity



Social competence



Language and cognitive skills



**Communication skills and general
knowledge**

It all starts in the home. In the pre-school years, cementing those positive parent/child connections and encouraging play is mental health, as creating security sets a foundation for future mental well-being. This will affect everything from forming good friendships to school success.

"The family is a child's first teacher and if our children don't have strong development during their first years, they'll struggle the whole way through school," says Emily, Alignment Rockford's Executive Director.

"We're going to fill the environment with education, resources, and support for parents and the community."

The Data Difference

Ask 50 community members how to boost young kids' mental health and make them more successful in school and you will get 50 different answers. Some might be best practices, others might be opinions.

But if you want to know which neighborhoods and needs should be targeted for maximum effect, look at the data.

Alignment Rockford has spent the past six years conducting EDI studies to keep track of the development and well-being of Rockford-area children from birth to age five. The EDI is a survey method conducted every three years that measures kindergarteners' school preparedness across five domains. It then combines this observational data with neighborhood socio-economic data to provide a 'big picture' of the county's early childhood needs. New data will be available in fall 2025 that will include more districts in Winnebago County.

"This tool gives everyone a shared data set," says Emily. "Once we all know what the strengths and gaps are, then organizations and communities who serve families and children can anchor around that information, developing ways to meet those needs."

Who do they reach?

The target population for these data-driven outreach services is infant and early childhood mental health (IECMH). IECMH is the ability of infants (ages 0-3) and young children (ages 3-5) to regulate their emotions, form secure attachments, and explore their environments. Attention to this area positively influences a child's brain development, socio-emotional and cognitive skills, physical health, and school success.

This is where outreach and communication bring the data to life. Alignment Rockford gives countless community and organizational presentations to show how groups can use data to shape their programs. Should certain neighborhoods receive extra resources? Has a new focus area emerged? Is anything being ignored?

"One hundred hands can move one hundred small rocks," Emily says, describing the large-scale effort. "But one hundred hands can also move the big system-sized rocks, shaping a better ecosystem, one boulder at a time. By uniting everyone around the same set of needs, area organizations can multiply their impact."

Coming soon is a universal support system for newborns and their parents, Winning Start Winnebago, which offers up to three home nurse visits for any newborn living in Winnebago County, free of charge. It's the result of a gap unveiled by EDI data and addressed through community initiative.

Alignment Rockford's early childhood work using EDI data is so effective, it is gaining state recognition as a best practice. As one of three communities to pilot an Illinois Action for Children (IAFC) Community Parent Support Saturation (CPSS) initiative in Illinois, Ready to Learn is a template for the IAFC's statewide framework for community-driven support of early childhood.

"We take our work very seriously and do it well," Emily comments. "I want to show how EDI can shape community outcomes to support our communities' successes. It's a very powerful tool in building a shared narrative around how a community should function."

Nurtured Mom, Balanced Baby

Okay Brielle. Here, sit down on your couch. Are you comfortable? Good.

You're 30 weeks along now! Lots of exciting changes! Have you been feeling the baby move?

Oh yeah. All the time. Sometimes I think he's never going to stop.

Let's try something. Baby's quiet now? I'm going to put this speaker near your belly and play a lullaby. Tell me what happens.

Bump. Bump. Brielle's face lights up.

Aw! He likes it! Hey buddy, we should have a jam session every night.

It's parent/baby connections like these that Brightpoint's doula program solidifies. It's full of practical information and activities that grow a healthy baby but more importantly, the doula nurtures the mother, who in turn, raises a more secure child.

"Everything's about the baby," says Neesha Hammond-Bryant, Brightpoint Doula Program Supervisor. "The doula is the one person who's there for the mother."

Pregnancy, childbirth, and the postpartum period is a mental health roller coaster – working through taking care of a baby, managing extra costs or job changes, hormonal swings, worry that everything will be okay. To support this turbulence, Brightpoint's doulas make one-hour weekly prenatal home visit, assist at the hospital during labor and delivery, and continue weekly home visits for eight weeks after the baby arrives. They give individualized education on a healthy pregnancy and postpartum period, connect to community resources, monitor for signs of more serious mental health effects, and teach stress management techniques.

Brightpoint's doula program served 61 mothers in PY3. These mothers reported lower levels of postpartum depression, fewer deaths, greater security and confidence as a new parent, and more awareness of available resources.

"Showing care and dedication to the mom is proven to support child development," Neesha says. "A strong family center creates a thriving, emotionally healthy child, both which contribute to strong communities."

An Educational Banquet

Stronger families and communities start at birth. The education Alignment Rockford and Brightpoint scatter throughout Winnebago County reinforces that, story by story.

They tell of families spending more time together, getting their practical needs met, and building a support system to deal with life's stress. When families feel secure, especially during a child's formative years, they have a solid foundation to accept the rich support the community provides.

"Our community lays out a banquet of education and other resources. But for some reason, our kids can't enjoy it because they can't pick up what is there," Emily summarizes. "We want to help their early development so all kids can get what's offered at the table."

Access/Wait Times

In Plain English (Or Spanish, or American Sign Language)

Eliminating Wait Times, Increasing Awareness Makes Care Accessible for All

When someone reaches out for help, they need action immediately. Tomorrow, after all, is a different story.

Circumstances and attitudes change quickly. Nothing waits for an appointment. All the impactful mental health providers in Winnebago County? It doesn't mean anything if you can't get an appointment when you need to. Or maybe you can, but only understand some of the advice you receive.

That's why most WCCMHB Funded Programs make improving access and wait times a priority. Youth Services Network's Trauma Clinic (YTC) and Prairie State Legal Services (PSLS) set the standard for how it should be done.



Becky Gielow, Program Director and her team at Youth Services Network know that improving access and eliminating wait times for mental health care means that those reaching out can get the attention they need.

Services Everywhere You Are, In Any Language

Trauma doesn't discriminate. Youth all over the county, from all backgrounds, experience its negative effects. Heartbroken parents and caregivers see their struggles. YSN's Trauma Clinic is an inroad to managing those difficult symptoms, and knows they have to cast a wide net to reach impacted youth.

"A lot of youth have experienced trauma and then have difficulty at school or are struggling with their mental health," Becky Gielow, Youth Trauma Clinic Program Director says. "We need to get the word out so they know where they can turn."

The organization needs to be wherever youth are – schools, churches, medical providers, libraries, community events – so they put the word out everywhere. Even if it's just leaving a brochure, the clinic makes their presence known so they can reach as many youth from birth to age 21 as possible.

New referrals are now coming in from a mix of places – rural areas, schools, other parents – showing that its client base is reflecting the wide net it casts. This means there's a higher chance a trauma-affected child can get the intervention they need.

But *access* doesn't just mean getting the word out. The range of mental health services available in Winnebago County aren't useful if the client can't understand it – a fact that Prairie State Legal Services encounters every day. Primarily serving low-income and disadvantaged

populations, their lawyers see how easy it can be for their clients to be taken advantage of, particularly when limited English or mental health is a factor. That's essential because the stakes are high when it comes to legal rights, options, consequences, and next steps.

"You don't have your true day in court if you don't have an attorney to advocate or you're not able to speak up for yourself," says Jesse Hodierne, PSLS Managing Attorney. "Providing language services, free services, navigating the overwhelming legal system all help our clients avoid outcomes that are hard to come back from."

PSLS takes no chances in providing equitable access to justice. They employ bilingual staff, have an extensive library of legal documents in popular local languages, and use Language Line (a phone-based translation service) and video American Sign Language interpreters for any need not available in-house. Even legal-speak is routinely explained in a way that can be understood – in any language.

Every single one of their clients with serious mental illness who needed translation services received them. And every single one understood the legal advice given – whether translated or in plain English.

One hundred percent is a guarantee that's not easily matched.

WAIT TIME: 0 days

Trauma doesn't wait, either. Once youth are ready to reach out for help, they should get it immediately. Guilt, shame, frustration, and other priorities can all intervene and prevent that teen from receiving critical support.

That's why YTC has no waiting list. Period. And the time from that first call to first appointment is measured in hours.

"If it takes two or three months to have that first appointment, either they don't have the problem anymore or have learned to live with it," says Becky.

Their priority is for every person requesting services at the Trauma Clinic to begin receiving them within 24 hours. The immediate services are typically case management or a mentoring outing; therapy can begin in one to two weeks, if it is needed. Creating personal connection early on is key to getting started on the right foot.

Youth Trauma Clinic offers immediate access for its clients, with:

- *No waitlist*
- *under 24 hours from initial call to first service received*

Who do they reach?

The target populations for these initiatives addressing access to mental health services are people with Serious Mental Illness (SMI), Substance Use Disorder (SUD) and serious emotional disturbance (SED). SED is a diagnosable mental, behavioral, or emotional disorder in children ages 3-21 that severely interferes with the child's ability to function. Specific to youth services, target age ranges frequently overlap to ensure uninterrupted care for children (for example, IECMH/SED and SED/SMI).

"We immediately start building a relationship with the kids and doing things they don't normally get to do, like going to the Discovery Center or just to the park," Becky explains. "Putting another trusted adult in their lives is vital to their therapy."

No wait list is unheard of in the industry. YTC can do it because, like an urgent care medical clinic, the program focuses on short-term stabilization (lasting about one year). They get the teen in quickly and treat the most critical needs so when the teen feels more balanced, they can provide a warm hand-off to long-term care.

Equitable Access = Trust

"Okay, so we have Tyler all set to take Darien for an outing to the museum tomorrow. And... we can get Darien in to see Sierra, the therapist, next week at 4:00."

"Next week? Already? I've never gotten into *anything* that fast."

YSN's clients are astonished at the attentive care they receive. PSLS's clients are grateful when their lawyer re-explains the proceedings just to make sure they get every detail. By meeting their individual needs, these two organizations are ensuring treatment is available to everyone – particularly those who have been overlooked in the past.

"It is hard to reach out in the first place and when you don't receive a response, it's very easy to give up hope," says Becky. "We are giving them a positive experience, gaining trust within the community that we are going to be there and follow through in whatever they are experiencing."

"Hopefully, this changes their perspective on what mental health therapy is."

Treatment Method

Melding Safety, Community, Healing

Extensive Domestic Violence Services for Complex Needs

Caitlin's domestic violence survivor client could never fully relax. Even though she enthusiastically attended every session, Caitlin knew something wasn't right.

She would actively participate in sessions but was constantly looking over her shoulder. In time, she told Caitlin that she was afraid her husband was following her and wanted to retaliate.

Safety. Until a survivor knows she or he is in a secure place, any mental health treatment won't make much progress. Living in the uncertainty of 'fight or flight' mode doesn't leave much room for anything else.

"Survivors know we're going to be here, non-judgmental, providing hope," says Kelsey Hart, Family Peace Center (FPC) Training and Care Coordinator. "We know finding safety and healing takes time, especially to rebuild your self-esteem."

The secure haven FPC and its partners have built wraps its arms around every survivor, building their confidence and guiding them through the system's complexities to receive help. Piece by piece, they can be assured someone is looking out for them so they can focus on recreating their lives. On their schedule.

One Stop for Hope and Healing

Domestic violence's mental health impact shows up in survivors as anxiety, fear, depression, PTSD, myriad body aches, and substance use. And it's not just for survivors; anyone close to the situation – particularly children – can also experience lasting effects.

FPC is Winnebago County's highly regarded example of how to meet domestic survivors' complex needs with compassion, respect, and hope. Overseen by the City of Rockford, it offers services from 35 partner organizations, all under one roof, to increase survivors' access to support. Partner agencies range from practical needs (intake and case management, housing, employment) to criminal justice (Prairie State Legal Services, Rockford Police Department) to mental support (Family Counseling Services, Remedies, various support groups).



Dominique Sheehama and Kelsey Hart, both staff at family Peace Center ensure that domestic violence survivors see FPC as a safe haven so that deeper healing can begin.

Who do they reach?

The target population for domestic violence services is anyone affected by trauma. Trauma is any event that results in physical or emotional harm with negative effects on mental, physical, or emotional health and well-being. Trauma diagnoses are typically post-traumatic stress disorder (PTSD) and autism spectrum disorder (ASD), but are also linked to substance use or mood, anxiety, or personality disorders.

Many of the mental health board's funded agencies have embedded staff at FPC. This presence is fundamental to making the center's model work. For clients with safety or transportation concerns, they can attend multiple appointments for services in one trip. Most importantly, having an extensive range of services in one location minimizes the number of times survivors need to retell their story and relive their trauma.

"What we hear over and over again is how safe survivors feel here. They are welcome, cared for, and they can tell their stories in a way they have never been able to before," says Kelsey.

FPC's system was the solution for Caitlin and her anxious client. She moved therapy sessions to Family Counseling Service's (FCS) embedded office there. FPC's locked doors and strict access policy gave the security her client needed to thrive in counseling.

You're the Only One I Can Talk To

"Just taking that first step to actually talk with someone starts recovery," says April Poggioli, FCS Client Services Supervisor.

Along with meeting survivors' immediate needs, talking it out through therapy begins laying the mental security they need. It delivers rapid and effective results. Of those who have received individual therapy through FCS, 100% report that they feel stable or improved after as few as three counseling sessions. Remedies, a domestic violence counseling and advocacy service provider, provides similar services with similar results. Of their clients, 96% report that they are more hopeful about their future following services.

Isolation is another snare treated through conversation. Survivors commonly feel alone, like no one can ever understand them. Fellow survivors 'get it' and often break through barriers with more impact. Healing suddenly becomes more realistic when more than one person supports you.

At Remedies, two weekly participant-directed support groups and one bi-monthly art therapy group provide that community. The lived experience that survivors share in these spaces is transformational, placing survivors in the center of their recovery.

"We live in a community, so it's only natural that we heal in community too," says Chantyl Outzen, Remedies Domestic Violence Advocate. "Trusted groups like our support groups create a comfortable place that empowers them to move past today's emotion to tackle other barriers."

A Stronger, Safer Community

When the survivor is your mother, best friend, or sister, the individual impact made by Family Peace Center, Family Counseling Services, Remedies, and their partners is invaluable. And their impact extends outward, even paving the way for those who could never imagine needing it.

"Our presence and advocacy has changed how safe survivors feel in the community. It trickles down to have an impact on mental health," Kelsey states. "When you feel safe, you reach out for help, find a team of people who believe and validate your experiences, and your mental health improves."

"What we've seen is that calls for domestic violence have gone up. We do not attribute that to domestic violence happening more often, but that survivors are empowered to get help and believe they're going to get a meaningful coordinated response to their needs."

Because when you're fighting your trauma, no one should be alone.



Family Peace Center provides tools to get all five sense involved in healing. Scents, textures, candy, calming sounds motivational messages all help to manage anxiety, focus, emotion, and memory.

Workforce

A Toolbox of Care

Building a Stronger, Empowered Mental Health Workforce

A lot is asked of mental health service providers. Prepare for anything and everything. Be familiar with all mental health services in the area. Hope there isn't a long waitlist. Bring your best self every day. And please, please don't get weighed down by it all.

It's no wonder as awareness of the value of mental health and substance use treatment has increased, workforce availability hasn't met the demand. That's even more reason for the sector to pour care into the professionals it already has.

Several organizations have led the way in supporting the county's mental health workforce along two key tracks: professional development and emotional support.

The Mental Health Toolbox

Seventy mental health professionals regularly gather in one room to share tips, celebrate successes, and build stronger support systems. It's a magnificent sight.



The only regional case manager training, the Northern Illinois Center for Nonprofit Excellence's biannual conference is a way for mental health case managers to connect and get the tools they need.

This is the Rockford Area Case Management Initiative's (RACMI) Community of Practice. Each month, mental health professionals meet at the Northern Illinois University-Rockford campus to hear from a local human service organization on its services and how to access them. Sessions also provide a space for case managers to regularly check in with each other, problem-solve, and build a community.

This network assures each person that they are not alone, despite the complexity of their work.

In PY3, the Community of Practice held seven sessions, educating on needs and resources for teens, people with disabilities, the LGBTQIA+ population, substance use, domestic violence, and justice involvement. Participants became aware of services they didn't know existed, expanding their toolbox of referral options and increasing the likelihood that their clients find the right care the first time.

"Across the board, these case managers now have a face and name that corresponds to a resource if they need to make a referral," says Deanna Mershon, Rockford Area Case Management Initiative Program Coordinator, part of the Northern Illinois Center for Nonprofit Excellence. "It's so much more meaningful than sending an email or handing out a business card."

On top of this, RACMI holds two large group case management trainings per year. For many who learned the job by simply doing it, this event shows them how to be more efficient and empowered case managers. This free training encompasses several themes:

- What case management is and tools to improve the job

- Encouraging self-sufficiency in participants
- Prompting case managers and participants to proactively think ‘what more can you do?’
- Creating a local network of case managers, strengthening the profession

“There’s no other regional training specifically for case managers,” Deanna emphasizes. “Our participants are taking the initiative to be better at their jobs. Since their jobs bridge vulnerable people with the services they need, this enthusiasm makes a tremendous impact on everyone.”

Emotional First Aid

If your loved one suddenly broke down, saying they couldn’t handle life anymore, what would you do?

If you froze, you could benefit from Tommy Corral Memorial Foundation’s (TCMF) mental health first aid training. With one in four people dealing with mental illness during their lives, it’s likely that a mental health crisis will cross your path.

The foundation conducts monthly mental health first aid training with eight nationally certified instructors. Much like how physical first aid helps a patient until EMS arrives, the mental health counterpart provides interventions until a person in crisis gets the professional help they need.



Tommy Corral Memorial Foundation's mental health first aid toolbox includes fidgets to address the intense emotions experienced by someone in a crisis.

Training is intended for employers, mental health professionals, and the general community and focuses on identifying mental illnesses, guiding someone needing help, and responding scaled to the level of severity. No one knows when they will encounter someone who needs immediate help, which is why TCMF’s goal is to train as many people as possible. In PY3, that totaled 178 individuals, and 912 since they began in 2018.

“That’s 912 people who can better support those who are experiencing a mental health crisis with understanding, empathy, compassion, and resources,” says Xavier Whitford, Tommy Corral Memorial Foundation Executive Director.

Care for the Caregiver

Every time a shooting is reported, I worry one of my clients was involved.

I work with domestic violence survivors. They’ve overcome so much, but I just don’t have it in me today to face their stories.

I’m doing everything I can but my client keeps making harmful choices. Am I even doing the right thing?

Let’s talk about it.

Working in mental health care is an emotionally heavy calling. Caring for a staff’s mental needs is just as important as giving them the physical tools to be successful. No stranger to difficult topics, the Family Peace Center (FPC) is keenly attuned to its staff’s emotional equilibrium. It’s just a part of the job, like filling out paperwork, counseling survivors, or upgrading skills.

“We’re very intentional in the way we train staff, having built-in conversations about vicarious trauma [the emotional residue of witnessing or hearing about others’ trauma] and giving language to it so people know what to look for in themselves or others,” says Kelsey Hart, Family Peace Center Training and Care Coordinator.

Voluntary weekly staff support groups, wellness check-ins, drop-ins to confide in a therapist co-worker, are all ways FPC encourages a work culture that intentionally provides meaningful ways to process emotions. Kelsey points out that the organization prioritizes relationships over productivity, which helps create its culture of care.

“Even when our staff’s hope levels dip, they still make sure survivors receive the best they have. Each staff member gets what little is left. When you provide safe spaces to process experiences, you find a deeper connection to the work and survivors we serve,” says Kelsey.

A lot of the time, healthcare providers are taken for granted, believing they always have the answers and grace for whatever is daily thrown their way. But it’s really tools like these – connections with professional peers, treatment techniques, emotional outlets – that allow mental health providers to work the miracles they do. These resources, knowledge, community, and fulfillment are ready to take them from ‘good’ to ‘remarkable’ in supporting those who crave it.

Recidivism/Readmission

I'm More Than My Mistake

Justice System Reduces Recidivism by Treating the Human Behind the Offense

Often, an arrest is about more than just doing something wrong.

A food and housing insecure teen cannot control their violent anger.

A heroin user is repeatedly charged with trespassing.

A depressed, unemployed person is picked up for stealing a handbag.

They deserve a closer look to get at the heart of the issue. Winnebago County's justice organizations are approaching misdemeanor offenders with a holistic approach, paying particular attention to mental health and meeting basic needs. They're pointing justice-involved individuals toward a more productive track.

Doing this means there's a greater chance that arrests become one-time events. And for that angry teen, adrift substance user, or discouraged adult, this fresh start is a lifeline.

I'm a good kid

Intake at the Winnebago County Juvenile Justice Center can certainly be considered an emotionally low point in a teen's life. This is where Amnesty Viveros first meets her youth clients. A therapist with the Juvenile Resource Intervention Center (JRIC), she provides on-site risk assessments and conducts Dialectical Behavior Therapy for Adolescents (DBT-A) therapy for youth ages 10-21 on court-ordered supervision or probation. JRIC's focus is to treat the human, emotional element behind the offense, getting help outside of the court system whenever possible.

"Life is hard. Young people are tasked with a lot," says Amnesty. "They're still developing and they don't always have the ability to balance it all."

To begin restoring that balance, she conducts a therapy eligibility screen upon arrival and immediately addresses physical needs. If transportation, housing, or food is needed, that assistance is coordinated with the probation officers. Then, the focus can shift toward therapy to regulate emotions and manage behaviors.

Amnesty uses DBT-A style therapy, which is particularly effective for calming people with intense emotions. It builds foundational coping skills – providing strategies for slowing down when getting worked up, showing how impulsive decisions have consequences, replaying situations with positive outcomes – that will be used their whole lives. Twenty-five youth successfully received this therapy during PY3.

This therapy reduces recidivism by giving youth the tools to recognize and correct behavior, which makes them better able to control their impulses. They learn to fix their mistakes. They see there can be stability in their lives (Amnesty is a constant presence through their probation). They understand that some negative events don't have to define who they are as a person.

One of Amnesty's favorite activities is to ask her clients, "What would a billboard say about you?" Commonly, her youth answer "I'm a good kid."

"As long as you believe you are, you are. Keep that mindset," she instructs.

Who do they reach?

The target populations for services to reduce recidivism are people affected by SMI and SUD. SUD includes people of any age and occurs when the use of alcohol and/or drugs causes significant impairment, including health problems, disability, or failure to meet major responsibilities.

A Second Chance

Restoration. Dignity. Compassion.

The Assistant State's Attorney for the 17th Judicial Circuit demonstrates that when it comes to justice in Winnebago County, jail is not always the answer. Care for each person comes first.

"Our aim is to intervene so those with minimal prior contact with the criminal justice system don't have to go to jail," says Anne Stevens, an Assistant State's Attorney prosecutor, dedicated to treatment-based court programs. "We want to help them correct course."

Using programs such as Wellness Track is how many start down that path. Individuals who have been arrested for a nonviolent misdemeanor – usually for the first time – can opt into this program, which promotes treatment for untreated mental illness or substance use conditions as the preferred approach to rehabilitation. Frequently, charges are dismissed after successful completion of program requirements.

Imagine an unhoused individual who has had multiple police visits because he's not where he is supposed to be. Maybe he's seeking shelter in an abandoned building, maybe he's wandering, maybe he also uses substances. His anxiety has increased over time. When he's arrested for trespassing, he knows this pattern can't continue.

The Wellness Track liaison is notified and determines his eligibility for the program. The State's Attorney and Public Defender agree his case is appropriate for Wellness Track. Once he agrees to services, he starts correcting course, beginning by addressing basic needs before moving on to individual therapy or other treatments.

Services are customized to each individual and always put the decision-making and responsibility in the participant's hands. Nothing is court-ordered; it's a voluntary program. Either the participant completes the recommended actions, or they don't.

"Giving them the autonomy allows them to show initiative and prove that they can take care of themselves and have a voice in what they need – critical for staying on the right path," says Anne. "It's not often that we see them back because they're getting the treatment they need."

CCRT: Stepping In When Jail Isn't Appropriate

Since the Assistant State's Attorney is only involved with justice-involved individuals after an arrest is made, the City of Rockford's Crisis Co-Response Team (CCRT) is its counterpart on the streets, intervening to potentially avoid an arrest. The team is composed of City of Rockford Police, Loves Park Police, Winnebago County Sheriff Departments, and Rosecrance personnel.

These social worker/police officer teams largely conduct ongoing follow up to ensure needs are met following 911 calls that involve some mental health component, as well as some active 911 call response. Just as Wellness Track aims to provide second chances by treating the individual, CCRT looks deeper.

"A lot of the time, people don't know where to turn to fix behavior caused by substance use or mental illness so in desperation, they will call 911," says Shelly Turner, Winnebago County Sheriff CCRT Deputy. "Jail usually isn't appropriate but receiving links to resources is."

That's just the starting point. The real progress happens when CCRT conducts follow-up visits. By continually checking in, the duos establish a relationship with the client. They're looking out for that individual's wants and needs – providing a ride to a food bank, urging them to seek treatment and passing along a contact, or just being a listening ear. Often, it can seem to that individual that the CCRT staff are the only ones doing so.

Only four percent of CCRT's 2,305 individuals who received services in PY3 resulted in incarceration.

"To me, our core value is reassuring each person that someone is there for them, this is a safe place, and we can get the help they need," Shelly emphasizes.

The CCRT, Wellness Track, and JRIC programs send a clear message that justice-involved youth and adults' needs matter. That's monumental on a personal level, but it's changing the whole community, too.

"It shows we are a community of people who care and are not always about sending people to jail," says Anne. "We all want to make this community better because this is where we live and play."

Of the individuals served by CCRT, only 4% resulted in incarceration. This percentage has remained consistent throughout the past two years it has received WCCMHB funding.

Continuity of Care

Pulling Together Healthcare, Community Systems to Empower

Release from jail is a huge step. But then what?

It is a significant life change for justice-involved individuals and one that likely comes with some anxiety. While incarcerated, their medical needs were met, their prescription medications were given daily, and they received regular mental health or substance use treatment. They certainly didn't have to call and make appointments.

Suddenly handling all that on your own? It's a lot. Add in housing, employment, and transportation needs plus other barriers that arise, like substance use relapse or recurring trauma symptoms. They could use one less thing to worry about. The University of Illinois College of Medicine Rockford's (UICOMR) CARE has it all under control.

"When you support their behavioral health, people are better able to move on to other needs, like improving relationships or treating high blood pressure," says Danielle Rodriguez, DNP FNP-BC, UIC Behavioral Health and Addiction APRN. "We are their foot in the door."

Set for Success

Since UICOMR provides healthcare services within the jail, its Compassionate Appreciation for Everyone (CARE) program is a natural next step after release. When that day comes, Anita Bramble, UICOMR's Peer Recovery Specialist embedded within the Winnebago County Justice Center, is the first contact.

The process begins by setting an appointment with the Mile Square Health Center L.P. Johnson clinic to assure all care continues: medical, mental health, and

substance use treatments. Familiar with each individual's treatments and diagnoses, Anita ensures that their transition begins with a behavioral health service the same or next day following release.

"Many of our patients had gotten to a place in jail where they felt mentally stable," says Anita. "We don't want to miss the opportunity to continue therapy."



Anita Bramble, UICOMR Peer Recovery Specialist Coordinates all the appointments and supports justice involved individuals need upon their release from the Winnebago County jail.

UICOMR's involvement advantageously provides all continuing healthcare needs under one roof with same or next-day appointments. A patient can receive primary or mental health care, substance use treatment, and dental care all in one trip. Doctors can simply walk down the hall to consult on a common patient to get a more complete picture of their health. A vast majority of patients receive Medicaid; not to worry here. It's all covered.

The CARE team provides continuing care with compassionate support, always centered on the patients' needs while crushing those barriers that hold them back. Gradually empowering patients to take responsibility for their own lives is the ultimate goal because that's how change lasts.

"It's up to each person to decide what they want their life to look like, not any of us," says Danielle. "By doing that, they gain the ability to see the good things in themselves."

They see they are capable, worthy people who have hope.

"I've had a patient tell me, 'I'm so glad they just didn't throw me in the street,'" adds Alesia Oscea Hawkins Jones, UIC Clinical Psychologist. "Everyone deserves a second chance. We're here to give them that start and show that they matter."

A Community Confronting Trauma

While CARE coordinates systems related to healthcare, the Winnebago County Health Department (WCHD) is separately pulling together the community systems that compassionately address the hidden sources of trauma. Through its Trauma-Informed Community Care Coordination (TICCC), the health department becomes a comprehensive source of education on a topic that touches everyone in some way.

TICCC provides regular, free training sessions to Winnebago County residents designed to spot and

Beyond medical care, UIC CARES provides referrals for additional client needs. In PY3, the most common referrals provided by UIC CARES staff were for:



Food - 50%



Housing - 42%



Transportation - 35%



Employment - 23%

Who do they reach?

The target populations for these services are people with SUD, SED, and serious mental illness (SMI). SMI is a diagnosable mental, behavioral, or emotional disorder affecting adults ages 18+ that severely interferes with their daily lives. It includes disorders such as schizophrenia, major depressive disorder, and anxiety or personality disorders (when impairment is significant).

respond to trauma as it may arise in a variety of settings. The goal is to start a community discussion so that all can realize how widespread trauma's impact is, understand paths to recovery, and use this knowledge to inform systemic policies, procedures, and practices.

"A trauma-informed community identifies trauma's signs and collaborates to address it," explains Cynthia Hall, WCHD Director of Strategic Initiatives. "We are raising awareness to build resilience and prevent re-traumatization wherever it may occur."

In PY3, WCHD provided training to more than 500 residents, employers, mental healthcare providers, and partner organizations. Recent topics included trauma as it pertains to bullying, grief, community violence, work supervisors, and cultures.

"The long-term effects of trauma can be reduced through an informed and supportive community," says Cynthia. "The awareness our program offers reduces stigmatization and re-traumatization while improving access to care for everyone."

Pulling it Together

CARE and TICCC show struggling people that they are not alone. UICOMR medical staff make sure justice-involved individuals have a guide and access to continue their stability upon re-entering the community. Through TICCC, communities touched by trauma – which is all of them in one way or another – are armed with the understanding and tools to care for the vulnerable among them.

They tie together all the messy, disconnected parts and deliver an easily navigable plan, creating a community that cares.

The result? Empowerment, restoration, compassion.

"For those who haven't always been well-cared for, they know they matter to the community," Danielle summarizes.



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



(815) 319-4180



info@r1planning.org



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)



WCCMHB

Winnebago County
Community Mental
Health Board



(815) 277-1022



info@mentalhealth.wincoil.us



r1planning.org/community-impact/wccmhb



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



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



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