

Central Iowa Community Services Region FY2021 Annual Report



CICS

Supporting Individuals. Strengthening Communities.

SUBMITTED 11/29/21

Geographic Area: *Boone, Franklin, Greene, Hamilton, Hardin, Jasper, Madison, Marshall, Poweshiek, Story, and Warren Counties.*

Approved by CICS Governing Board: 11/17/21

Reviewed by CICS Advisory Committees: 11/15/21

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Introduction

Central Iowa Community Services (CICS) was formed under Iowa Code Chapter 28E to create a Mental Health and Disability Service Region in compliance with Iowa Code 331.390. The annual report is a component of the Management Plan which includes three parts: Annual Service and Budget Plan, Annual Report, and Policies and Procedures Manual in compliance with Iowa Administrative Code 441.25.

There were no changes in FY2021 to the CICS member counties; however, CICS did complete work to onboard four new counties to the CICS region for FY2022. The four counties joining CICS effective 7/1/21 are Cerro Gordo, Hancock, Webster, and Wright. During FY2021 the CICS Administrative team held various meetings with stakeholders and provider agencies in the four counties joining CICS. CICS worked with the County Social Services region to ensure client funding authorizations for CICS were in place 7/1/21 for residents living in Cerro Gordo, Hancock, Webster, and Wright counties. Story County continues to be the fiscal agent for CICS.

Three CICS Administrative Team members retired in early FY2021; officer positions were realigned, and the Administrative Team now consists of five officer positions: Chief Executive Officer, Coordination Officer, Finance Officer, Operations Officer, and Planning and Development Officer.

The FY2021 Annual Report covers the period of July 1, 2020 to June 30, 2021. The annual report includes documentation of the status of service development; services actually provided; individuals served; designated intensive mental health services; a financial statement including revenues, expenditures, and levies; and specific regional outcomes for the year.

CICS Management Plans are available on the CICS Website www.cicsmhds.org and the Department of Human Services (DHS) Website <https://dhs.iowa.gov>.

The CICS Governing Board Directors for FY2021 were:

Chad Behn - Boone County (ended 12/20)

Erich Kretzinger – Boone County (began 1/21)

Mike Nolte - Franklin County

Dawn Rudolph - Greene County

Doug Bailey - Hamilton County (ended 12/20)

Jerry Kloberdanz (began 1/21)

BJ Hoffman - Hardin County

Brandon Talsma - Jasper County

Phil Clifton - Madison County

Bill Patten - Marshall County

Diana Dawley - Poweshiek County

Lisa Heddens - Story County

Aaron DeKock - Warren County (ended 12/20)

Darren Heater – Warren County (began 1/21)

JD Deambra - Individual who Utilizes Mental Health and Disability Services or is an Actively Involved Relative of such an Individual

Julie Smith - Ex-officio, non-voting Provider Representative

Allie Wulfekuhle - Parent/Actively Involved Relative of a Child who Utilizes Children's Behavioral Health Services

Robin Maas - The Education System (ended 10/20)

Kendra Alexander – The Education System (began 11/20)

Krystina Engle - Ex-officio, non-voting Children's Behavioral Health Service Provider (ended 10/20)

Andrea Dickerson – Ex-officio, non-voting Children's Behavioral Health Services Provider (began 11/20)

The CICS Adult Advisory Committee members for FY2021 were:

Individual who Utilizes Mental Health and Disability Services or is an Actively Involved Relative of such an Individual:

Kathy Hanzek

Brandon Greenfield

JD Deambra

Tamara Morris (ended 5/21)

Deb Williams (began 6/21)

Grace Sivadge (ended 10/20)

Robert Sproule (ended 12/20)

Kirsten Klepfer

Leatha Slauson (began 1/21)

Jody Eaton (began 1/21)

Provider Representative:

Mary Nelson

Anthony Wubben

Sherry Becker (ended 12/20)

Jennifer Ellis

Sharon Swope

Julie Smith

Jeff Vance

Brittany Palmer (began 1/21)

Kelly Kratz (began 1/21)

Nikki Fischer (began 8/20)

Governing Board Ex-Officio Non-Voting Members:

Diana Dawley

BJ Hoffman

The CICS Children's Behavioral Health Advisory Committee Members for FY2021 were:

Allie Wulfekuhle - Parent/Actively Involved Relative of a Child who Utilizes Children's Behavioral Health Services

Joy Meinders - Parent/Actively Involved Relative of a Child who Utilizes Children's Behavioral Health Services (began 1/21)

Andrea Dickerson - Children's Behavioral Health Service Provider

Kelly Olson - Children's Behavioral Health Service Provider (ended 10/20)
Krystina Engle - Children's Behavioral Health Service Provider (ended 10/20)
Kelly Moore - Early Childhood Advocate
Lori Price - Early Childhood Advocate
Rita Baker - Early Childhood Advocate
Clarissa Thompson - Child Welfare Advocate
Keith Halleland - Child Welfare Advocate
Rose Dickinson - Child Welfare Advocate (ended 4/21)
Karie Foster - The Education System
Kendra Alexander - The Education System
Robin Maas - The Education System (ended 10/20)
Chief Rob Burdess - Local Law Enforcement
Matthew Benson - Local Law Enforcement
Emilea Lundberg - The Juvenile Court System
Shirley Faircloth - The Juvenile Court System
Dejah Roman - Child Care Provider
Dr. Jack Swanson - Pediatrician
Dawn Rudolph - Regional Governing Board
Lisa Heddens - Regional Governing Board

The CICS Annual Report provides an opportunity to reflect on the past year's accomplishments. FY2021 continued to bring about additional challenges with the coronavirus disease 2019 (COVID-19) pandemic. CICS received CARES Act funding during FY2021 and distributed this money to various provider agencies and school districts within the CICS region based on CARES Act guidelines, as well as used these funds to address CICS office needs due to the impact of COVID-19.

CICS continued to have modified work practices in order to implement safety measures for staff and individuals served and worked to support providers as they maneuvered through the pandemic and provided services as much as possible to individuals. In FY2021, CICS continued to notice a downward trend in expenses with a decline in claims for service as some services were stopped and individuals were not accessing services as much as prior to the pandemic. These trends may also be attributed to the difficulty for providers to hire staff to provide services to clients.

Throughout FY2021 CICS continued to partner with regions and service providers for development of intensive mental health services and balance the challenges brought by the COVID-19 pandemic. The annual report conveys the developments of CICS by providing the data and statistics regarding services funded, annual expenditures, revenue, and counts of persons served. This report will feature the array of services that CICS funds along with facts regarding utilization and the outcomes of these programs.

A. Services Provided and Individuals Served

This section includes:

- The number of individuals in each diagnostic category funded for each service
- Unduplicated count of individuals funded by age and diagnostic category
- Regionally designated Intensive Mental Health Services

Table A. Number of Individuals Served for Each Service by Diagnostic Category

MI – Mental Illness

A – Adult

DD – Developmental Disability

C – Child

ID – Intellectual Disability

BI – Brain Injury

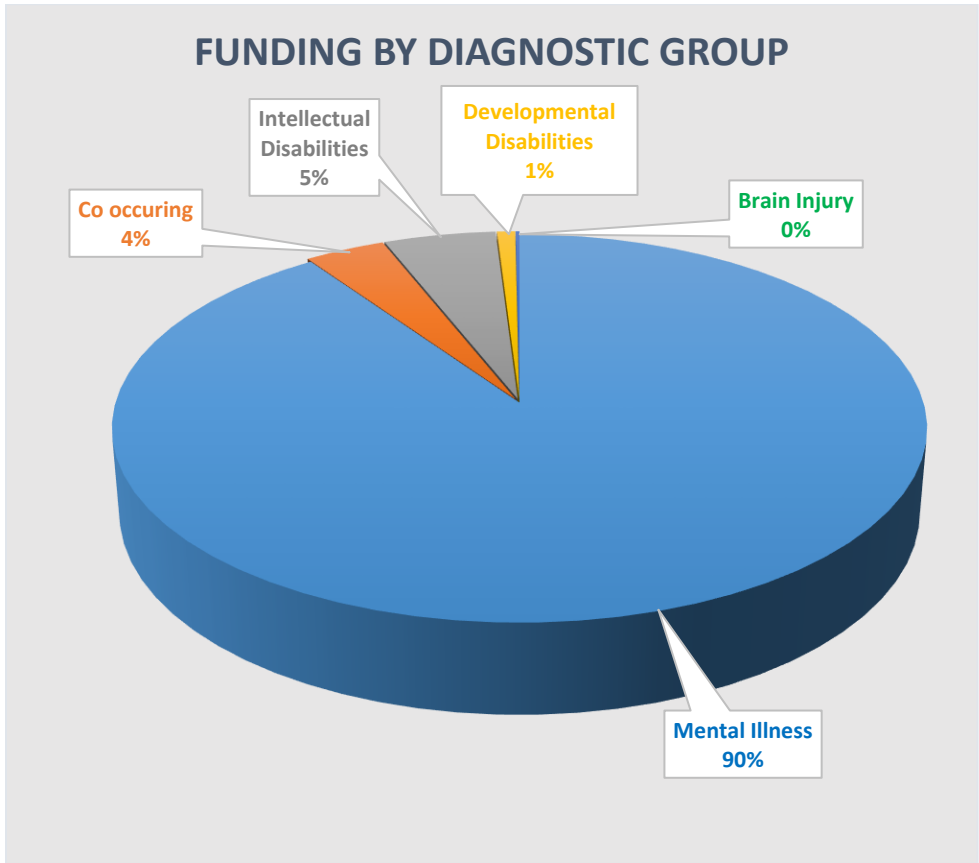
FY 2021 Actual GAAP	Central Iowa Community Services MHDS Region	Diagnosis										Total
		MI (40)		ID (42)		DD (43)		BI (47)		Other		
		A	C	A	C	A	C	A	C	A	C	
	Comprehensive Facility and Community Based Treatment											
	Core											
	Treatment											
42305	Psychotherapeutic Treatment - Outpatient	52	4									56
42306	Psychotherapeutic Treatment - Medication Prescribing	48										48
71319	State MHI Inpatient - Per diem charges	11										11
73319	Other Priv./Public Hospitals - Inpatient per diem charges	3										3
	Basic Crisis Response											
44301	Crisis Evaluation	829	292	11		1		1				1134
44312	Crisis Stabilization Community Based Services (CSCBS)	1										1
44313	Crisis Stabilization Residential Service (CSRS)	9	6									15
44396	Access Center start-up/sustainability/coordination	1										1
	Support for Community Living											
32329	Support Services-Supported Community Living	71	1	17		25		4				118
	Support For Employment											
50362	Voc/Day - Prevocational Services			1		1		1				3
50367	Day Habilitation	3		6		8		4				21
50368	Voc/Day - Individual Supported Employment	13		11		20		2				46
50369	Voc/Day - Group Supported Employment					1						1
	Recovery Services											
	Service Coordination											
	Sub-Acute Services											
	Core Evidence Based Treatment											
42398	Assertive Community Treatment (ACT)	18										18
	Core Subtotals:	1059	303	46		56		12				1476
	Mandated											
74XXX	Commitment Related (except 301)	427	63	2	1							493
75XXX	Mental health advocate	436	44									480

	Mandated Subtotals:	863	107	2	1							973
Core Plus												
	Justice System Involved Services											
25XXX	Coordination services	168										168
46305	Mental Health Services in Jails	373	1									374
46399	Justice System - Involved Services - Other	5										5
	Additional Core Evidence Based Treatment											
42366	Psychotherapeutic Treatment - Social Support Services	355	2	197	1	16		3				574
42397	Psychotherapeutic Treatment - Psychiatric Rehabilitation	7	1									8
	Core Plus Subtotals:	908	4	197	1	16		3				1129
Other Informational Services												
Community Living Support Services												
22XXX	Services management	2098	379	40	2	39		4				2562
31XXX	Transportation	252	122	3		5						382
32327	Support Services - Representative Payee	26		5		3						34
33340	Basic Needs - Rent Payments	32	1	1								34
33399	Basic Needs - Other	21		1		1						23
41306	Physiological Treatment - Prescription Medicine/Vaccines	4										4
42310	Psychotherapeutic Treatment - Transitional Living Program	30										30
46306	Prescription Medication (Psychiatric Medications in Jail)	340	1									341
	Community Living Support Services Subtotals:	2803	503	50	2	48		4				3410
Congregate Services												
64XXX	RCF-6 and over beds	28										28
	Congregate Services Subtotals:	28										28
Administration												
Uncategorized												
Regional Totals:		5661	917	295	4	120		19				7016

Table B. Unduplicated Count of Individuals by Age and Diagnostic Category

Disability Group	Children	Adult	Unduplicated Total
Mental Illness	444	2622	3066
Mental Illness, Intellectual Disabilities	2	71	73
Mental Illness, Intellectual Disabilities, Other Developmental Disabilities	0	5	5
Mental Illness, Intellectual Disabilities, Other Developmental Disabilities, Brain Injury	0	1	1
Mental Illness, Other Developmental Disabilities	0	35	35
Mental Illness, Other Developmental Disabilities, Brain Injury	0	2	2
Mental Illness, Brain Injury	0	7	7

Intellectual Disabilities	2	170	172
Intellectual Disabilities, Other Developmental Disabilities	0	1	1
Other Developmental Disabilities	0	28	28
Brain Injury	0	6	6
Total	448	2948	3396



The chart (left) shows funding for residents in the Mental Illness disability group account for 90% of those funded, while residents in the Intellectual Disability group account for 5%.

B. Regionally Designated Intensive Mental Health Services

CICS did not officially designate an Access Center, ACT Services, or Subacute Services during FY2021. Currently CICS has established a Memorandum of Understanding (MOU) with County Rural Offices of Social Services, County Social Services, MH/DS of the East Central Region, and Heart of Iowa Community Services to honor the host region’s contract with the Access Centers located in these neighboring regions, these Access Centers also provide subacute and crisis stabilization residential services.

UnityPoint Health - Berryhill Center located in Webster County provides ACT services in Hamilton County. County Social Services designated ACT services with this provider on 7/1/20, the provider’s Fidelity Score was 129/140. Eyerly Ball Community Mental Health Services provides ACT services in Boone and Story Counties. The provider’s internal review generated a Fidelity Score of 97/140, the provider needs to have a peer review conducted before CICS will consider them operating to Fidelity. CICS intends to designate subacute services with Mary Greeley Medical Center in the near future.

Like all MHDS Regions within Iowa, CICS is working with providers for the development of Intensive Residential Services. With the service rate increase and desired clarifications to the no eject/reject requirements CICS is hopeful to have this service developed in FY2022. CICS is currently working with two providers who have expressed interest in providing Intensive Residential Services within the CICS Region.

C. Financials

As previously mentioned, CICS has seen a downward trend in expenditures due to COVID 19 and anticipates this trend will continue.

Table C. Expenditures

FY 2021 Accrual	Central Iowa Community Services MHDS Region	MI (40)	ID (42)	DD (43)	BI (47)	Admin (44)	Total
Core Domains							
COA	Treatment						
42305	Mental health outpatient therapy	\$ 146,848.71					\$ 146,848.71
42306	Medication prescribing & management	\$ 41,627.58					\$ 41,627.58
43301	Assessment & evaluation	\$					\$
71319	Mental health inpatient therapy-MHI	\$ 206,231.57					\$ 206,231.57
73319	Mental health inpatient therapy	\$ 5,908.00					\$ 5,908.00
	Crisis Services						
32322	Personal emergency response system						\$ -
44301	Crisis evaluation	\$ 451,969.92	\$ 6540.00	\$ 290.00	\$ 290.00		\$ 459,089.92
44302	23 hour crisis observation & holding						\$ -
44305	24 hour access to crisis response	\$					\$ -
44307	Mobile response	\$ 793,415.09					\$ 793,415.09
44312	Crisis Stabilization community-based services	\$ 125,234.00					\$ 125,234.00
44313	Crisis Stabilization residential services	\$ 96,763.32					\$ 96,763.32
44396	Access Centers: start-up / sustainability	\$ 360.19					\$ 360.19
	Support for Community Living						
32320	Home health aide						\$ -
32325	Respite						\$ -
32328	Home & vehicle modifications						\$ -
32329	Supported community living	\$ 682,596.29	\$ 135,355.75	\$ 99,303.64	\$ 7,119.65		\$ 924,375.33
42329	Intensive residential services						\$ -
	Support for Employment						
50362	Prevocational services	\$ -	\$ 4,876.63	\$ 4,990.04	\$ 82.48		\$ 9,949.15
50364	Job development						\$ -
50367	Day habilitation	\$ 31,849.09	\$ 20,477.77	\$ 31,534.76	\$ 11,009.07		\$ 94,870.69
50368	Supported employment	\$ 20,431.40	\$ 29,748.45	\$ 34,458.74	\$ 2,994.47		\$ 87,633.06
50369	Group Supported employment-enclave	\$	\$	\$ 1,346.13			\$ 1,346.13
	Recovery Services						
45323	Family support	\$ 25,395.00					\$ 25,395.00

45366	Peer support	\$ 1,592.64					\$ 1,592.64
	Service Coordination						
21375	Case management						\$ -
24376	Health homes	\$ 16,150.52					\$ 16,150.52
	Sub-Acute Services						
63309	Subacute services-1-5 beds						\$ -
64309	Subacute services-6 and over beds	\$ 2,455.00					\$ 2,455.00
	Core Evidenced Based Treatment						
04422	Education & Training Services - provider competency						\$ -
32396	Supported housing						\$ -
42398	Assertive community treatment (ACT)	\$ 45,654.09					\$ 45,654.09
45373	Family psychoeducation	\$					\$
	Core Domains Total	\$2,694,482.41	\$ 196,998.60	\$ 171,923.31	\$ 21,495.67		\$ 3,084,899.99
	Mandated Services						
46319	Oakdale						\$ -
72319	State resource centers						\$ -
74XXX	Commitment related (except 301)	\$ 190,076.42	\$ 846.05				\$ 190,922.47
75XXX	Mental health advocate	\$ 151,778.47					\$ 151,778.47
	Mandated Services Total	\$ 341,854.89	\$ 846.05	\$ -	\$ -		\$ 342,700.94
	Additional Core Domains						
	Justice system-involved services						
25xxx	Coordination services	\$ 303,312.00					\$ 303,312.00
44346	24 hour crisis line**	\$					\$ -
44366	Warm line**	\$ 1,430.13					\$ 1,430.13
46305	Mental health services in jails	\$ 140,522.14					\$ 140,522.14
46399	Justice system-involved services-other	\$ 389.22					\$ 389.22
46422	Crisis prevention training						\$ -
46425	Mental health court related costs						\$ -
74301	Civil commitment prescreening evaluation						\$ -
	Additional Core Evidenced based treatment						
42366	Peer self-help drop-in centers	\$ 801,264.27	\$ 119,473.64	\$ 19,096.14	\$ 7,229.75		\$ 947,063.80
42397	Psychiatric rehabilitation (IPR)	\$ 10,139.33					\$ 10,139.33
	Additional Core Domains Total	\$1,257,057.09	\$ 119,473.64	\$ 19,096.14	\$ 7,229.75		\$ 1,402,856.62
	Other Informational Services						
03371	Information & referral	\$ -					\$ -
04372	Planning and/or Consultation (client related)						\$ -
04377	Provider Incentive Payment						\$ -
04399	Consultation Other						\$ -
04429	Planning and Management Consultants (non-client related)	\$ -					\$ -
05373	Public education	\$ 718,837.04					\$ 718,837.04
	Other Informational Services Total	\$ 718,837.04					\$ 718,837.04
	Community Living Supports						

06399	Academic services						\$ -
22XXX	Services management	\$1,294,304.09	\$ 20,248.25	\$ 33,987.27	\$ 2,710.82		\$ 1,351,250.43
23376	Crisis care coordination						\$ -
23399	Crisis care coordination other						\$ -
24399	Health home other						\$ -
31XXX	Transportation	\$ 132,531.29	\$ 2,321.28	\$ 5,242.52	\$ -		\$ 140,095.09
32321	Chore services						\$ -
32326	Guardian/conservator						\$ -
32327	Representative payee	\$ 10,535.00	\$ 2,079.80	\$ 620.00			\$ 13,234.80
32335	CDAC						\$ -
32399	Other support						\$ -
33330	Mobile meals						\$ -
33340	Rent payments (time limited)	\$ 40,292.13	\$ 312.69				\$ 40,604.82
33345	Ongoing rent subsidy						\$ -
33399	Other basic needs	\$ 14,680.82	\$ 373.50	\$ 377.59			\$ 15,431.91
41305	Physiological outpatient treatment						\$ -
41306	Prescription meds	\$ 1,266.61					\$ 1,266.61
41307	In-home nursing						\$ -
41308	Health supplies						\$ -
41399	Other physiological treatment						\$ -
42309	Partial hospitalization						\$ -
42310	Transitional living program	\$ 292,780.80					\$ 292,780.80
42363	Day treatment						\$ -
42396	Community support programs						\$ -
42399	Other psychotherapeutic treatment						\$ -
43399	Other non-crisis evaluation						\$ -
44304	Emergency care						\$ -
44399	Other crisis services						\$ -
45399	Other family & peer support						\$ -
46306	Psychiatric medications in jail	\$ 30,684.76					\$ 30,684.76
50361	Vocational skills training						\$ -
50365	Supported education						\$ -
50399	Other vocational & day services						\$ -
63XXX	RCF 1-5 beds (63314, 63315 & 63316)						\$ -
63XXX	ICF 1-5 beds (63317 & 63318)						\$ -
63329	SCL 1-5 beds						\$ -
63399	Other 1-5 beds						\$ -
	Community Living Supports	\$1,817,075.50	\$ 25,335.52	\$ 40,227.38	\$ 2,710.82		\$ 1,885,349.22
	Other Congregate Services						
50360	Work services (work activity/sheltered work)						\$ -
64XXX	RCF 6 and over beds (64314, 64315 & 64316)	\$ 464,586.29					\$ 464,586.29
64XXX	ICF 6 and over beds (64317 & 64318)						\$ -
64329	SCL 6 and over beds						\$ -

64399	Other 6 and over beds						\$
	Other Congregate Services Total	\$ 464,586.29	\$				\$ 464,586.29
Administration							
11XXX	Direct Administration	\$				\$ 1,296,485.34	\$ 1,296,485.34
12XXX	Purchased Administration					\$ 110,043.97	\$ 110,043.97
	Administration Total	\$				\$ 1,406,529.31	\$ 1,406,529.31
	Regional Totals	\$7,293,893.22	\$ 342,653.81	\$ 231,246.83	\$ 31,436.24	\$ 1,406,529.31	\$ 9,305,759.41
	(45XX-XXX)County Provided Case Management						\$ -
	(46XX-XXX)County Provided Services						\$ -
	Regional Grand Total						\$9,305,759.41
Transfer Numbers (Expenditures should only be counted when final expenditure is made for services/administration. Transfers are eliminated from budget to show true regional finances)							
13951	Distribution to MHDS regional fiscal agent from member county						\$ 6,126,633.64
14951	MHDS fiscal agent reimbursement to MHDS regional member county						\$ 1,200,000.00
15481	MHDS Distribution to Other MHDS regional fiscal agent (CARES Act)						\$ 1,750,000.00

** 24 hour crisis line and warm line are transitioning from additional core to state wide core services with state funding.

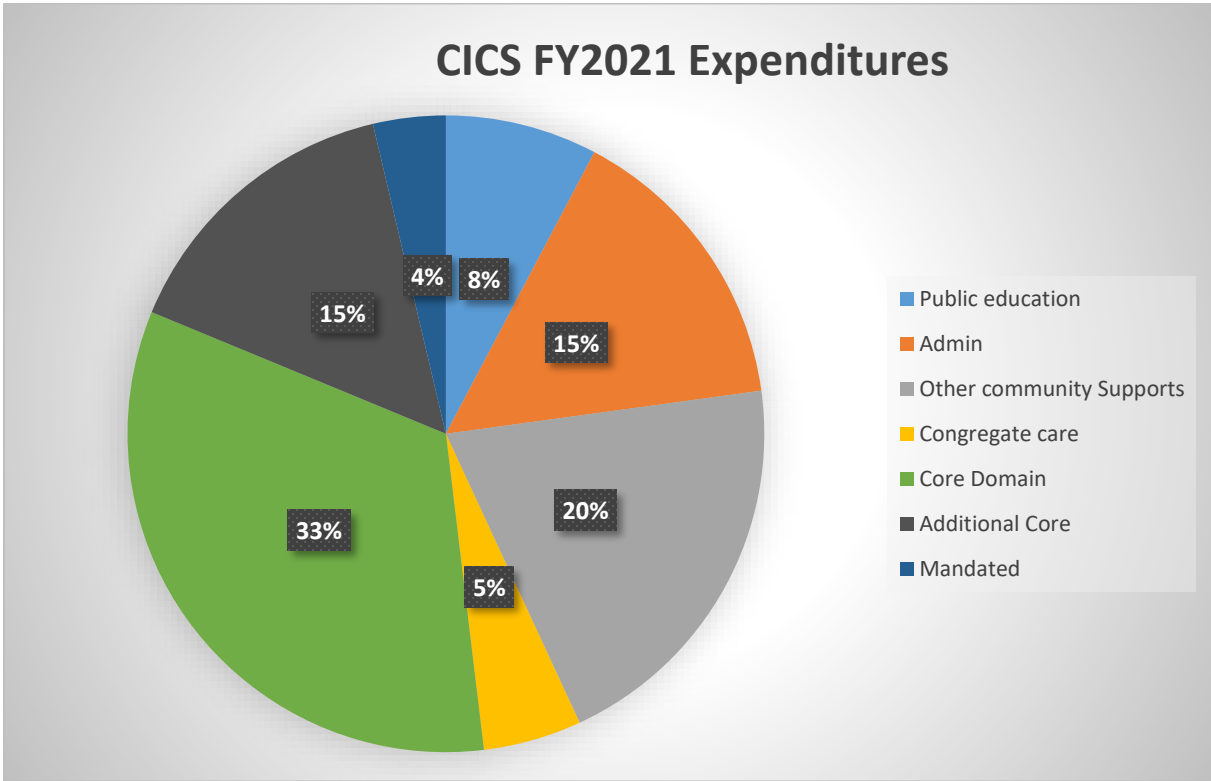


Table D. Revenues

FY 2021 Accrual	Central Iowa Community Services MHDS Region		
Revenues			
	FY20Annual Report Ending Fund Balance		\$ 10,453,359
	Adjustment to 6/30/20 Fund Balance		\$ 143,899
	Audited Ending Fund Balance as of 6/30/20 (Beginning FY21)		\$ 10,597,258
	Local/Regional Funds		\$ 8,487,794
10XX	Property Tax Levied	8,198,571	
12XX	Other County Taxes	9,400	
16XX	Utility Tax Replacement Excise Taxes	242,644	
25XX	Other Governmental Revenues	-	
4XXX-5XXX	Charges for Services	-	
5310	Client Fees	16,079	
60XX	Interest	3,067	
6XXX	Use of Money & Property	-	
8XXX	Miscellaneous	18,034	
9040	Other Budgetary Funds (Polk Only)	-	
	State Funds		\$ 570,001
21XX	State Tax Credits	387,697	
22XX	Other State Replacement Credits	181,275	
2250	MHDS Equalization	-	
24XX	State/Federal pass thru Revenue	-	
2644	MHDS Allowed Growth // State Gen. Funds	-	
29XX	Payment in Lieu of taxes	1,030	
		-	
	Federal Funds		\$ 1,437,077 *
2344	Social services block grant	-	
2345	Medicaid	-	
2347	CARES Act	1,437,077	
	Other	-	
	Total Revenues		\$ 10,494,872

Total Funds Available for FY21	\$ 21,092,130
FY21 Actual Regional Expenditures	\$ 9,305,759
Accrual Fund Balance as of 6/30/21	\$ 11,786,371

*The federal revenue received was \$3,187,076.96 prior to adjusting to account for the transfer of CARES Act funds to Polk County.

Table E. County Levies

County	2018 Est. Pop.	Regional Per Capita	FY21 Max Levy	FY21 Actual Levy	Actual Levy Per Capita
Boone	26,346	35.50	935,283	\$ 684,996	26.00
Franklin	10,124	35.50	359,402	\$ 263,224	26.00
Greene	8,981	35.50	318,826	\$ 233,506	26.00
Hamilton	14,952	35.50	530,796	\$ 388,752	26.00
Hardin	16,868	35.50	598,814	\$ 438,568	26.00
Jasper	37,147	35.50	1,318,719	\$ 965,822	26.00
Madison	16,249	35.50	576,840	\$ 422,474	26.00
Marshall	39,981	35.50	1,419,326	\$ 1,039,506	26.00
Poweshiek	18,699	35.50	663,815	\$ 486,174	26.00
Story	98,105	35.50	3,482,728	\$ 2,550,730	26.00
Warren	51,056	35.50	1,812,488	\$ 1,327,456	26.00
Total CICS Region	338,508		12,017,034	\$ 8,801,208	26.00

To address the regional ending fund balance, CICS member counties have levied less than the regional per capita maximum of \$35.50.

D. Status of Service Development in FY2021

CICS worked with Mary Greeley Medical Center to develop and implement subacute services at the former Crisis Stabilization Transitional Living Center location in Ames. Mary Greeley Medical Center received the provisional subacute license effective August 1, 2021, and anticipates completing the full licensure process in the near future. CICS has continued to work with YSS to complete the Chapter 24 accreditation process for youth crisis stabilization residential services in Ames and Mason City. CICS contracted with Youth Shelter Care of North Central Iowa for youth crisis stabilization residential services in Fort Dodge effective July 1, 2021; the provider has received Chapter 24 accreditation for this service.

CICS worked with Eyerly Ball Community Mental Health Services for the development and implementation of crisis stabilization community based services (CSCBS) for children and adults; these services became available January 2021 within the CICS Region. CICS also worked with Integrated Telehealth Partners to provide access to telehealth medication management services with CSCBS. CICS partnered with Eyerly Ball Community Mental Health Services and the County Social Services region for the expansion of Mobile Crisis Response (MCR) services and CSCBS to Cerro Gordo and Hancock Counties effective April 1, 2021. CICS then worked with Eyerly Ball Community Mental Health Services to expand these services to Webster and Wright Counties effective July 1, 2021, and also Kossuth, Winnebago, and Worth Counties in the Care Connections of Northern Iowa region. Access to telehealth medication management services through CSCBS is available to all of these counties through Integrated Telehealth Partners.

CICS is currently working with two providers within the CICS region for the development of Intensive Residential Services.

CICS partnered with Optima LifeServices for expansion of supported community living services and medication management services in Hardin County and partnered with Friends Forever for expansion of supported community living services in Hamilton County.

CICS acknowledges that staffing shortages are affecting the ability of providers to offer services. CICS has formed a workforce taskforce and is partnering with others in the state to identify possible solutions to address the staffing shortages.

E. Outcomes/Regional Accomplishments in FY2021

This section includes:

- Service progress and availability of Core, Additional Core, and Other Informational Services
- Region Program Outcomes
- Other Community Living Support Services
- Regional Collaboration with Providers, Stakeholders, and Regions

Service Progress and Availability of Core, Additional Core, and Other Informational Services

Core Services

Treatment

Mental Health Outpatient Therapy: CICS continues to consider Provider Network Enrollment Applications to expand outpatient mental health services within the region. CICS will also honor host region contracts for outpatient mental health services. CICS continues to make available a Licensed Independent Social Worker (LISW) incentive policy for onboarding and access for providers that hire or increase LISW hours in service areas of the region that have an identified need.

Medication Prescribing & Management: CICS continues to work to ensure this service is available throughout the CICS region. CICS continues to make available a Psychiatric Prescriber incentive policy for onboarding and access for providers that hire or expand existing psychiatric prescriber services in service areas of the region that have an identified need.

Assessment & Evaluation: This service provided by Community Mental Health Centers (CMHCs) and providers is available in each county in the region.

Mental Health Inpatient Therapy (private/public hospital): CICS contracts with Mary Greeley Medical Center and will also honor host region contracts for inpatient behavioral health services.

Crisis Services

Personal Emergency Response System: Service options are available in CICS.

Crisis Evaluation: CICS continued to contract with Community Mental Health Centers and providers for a select number of crisis therapy and crisis psychiatric appointments to be held available by the CMHC or provider allowing for quicker access. CICS continued to guarantee payment for crisis therapy and crisis psychiatric appointments that were not filled and/or not billable through third-party payers.

CICS continued to financially support access to telepsychiatry at participating local hospital emergency rooms with this service provided by Integrated Telehealth Partners (ITP). At the end of FY2021, ITP was operational in

the following ten hospital emergency rooms located in the counties identified (Warren County does not have a hospital):

- Boone - Boone County Hospital
- Franklin - Franklin General Hospital
- Greene - Greene County Medical Center
- Hamilton - Van Diest Medical Center
- Jasper – MercyOne Newton Medical Center
- Madison - Madison County Health Care System
- Hardin - Hansen Family Hospital
- Marshall - UnityPoint Health – Marshalltown Hospital
- Poweshiek - Grinnell Regional Medical Center
- Story - Story County Medical Center

23 Hour Crisis Observation and Holding: Mary Greeley Medical Center has this service available in the CICS region.

24 Hour Access to Crisis Response Services: The CMHCs have trained health professionals available by phone 24 hours per day, as well as walk-in access during business hours.

Mobile Response: Eyerly Ball Community Mental Health Services provides this service throughout the CICS region, serving children and adults. Eyerly Ball provides case management follow-up within 24 hours of the service being dispatched and continues to provide case management for up to 30 days. Mobile response services are accessed by calling the Your Life Iowa Crisis Line answered by Foundation 2. Foundation 2 triages the call and dispatches the mobile response team when determined appropriate.

Crisis Stabilization Community Based Services: Eyerly Ball Community Mental Health Services began providing CSCBS in January 2021 in all CICS member counties. Integrated Telehealth Partners provides telepsychiatry services as needed for individuals accessing CSCBS.

Crisis Stabilization Residential Services: Mary Greeley Medical Center (MGMC) was accredited to provide crisis stabilization residential services (CSRS) through the first half of FY2021. MGMC discontinued providing this service 12/31/20 as they worked to transition to provide subacute services. CICS honors the host region contract when an individual accesses this service in another region. For FY2022, CICS has also established a Memorandum of Understanding (MOU) with County Rural Offices of Social Services, County Social Services, MH/DS of the East Central Region, and Heart of Iowa Community Services to honor the host region's contract with the CSRS provider. CICS has contracted with Plains Area Mental Health Center to access CSRS located in the Rolling Hills Community Services region.

Support for Community Living

Home Health Aid: Service options are available in CICS.

Respite: Service options are available in CICS.

Home and Vehicle Modifications: Service options are available in CICS.

Supported Community Living: Supported community living (SCL) services are available in each county in the CICS region.

Intensive Residential Services: CICS is currently working with two providers who have expressed interest in developing this service.

Support for Employment

Prevocational Services: Service options are available in CICS.

Day Habilitation: Service options are available in CICS.

Job Development, Supported Employment: Service options are available in each county in the CICS region.

Group Supported Employment – Enclave: Service options are available in CICS.

Recovery Services

Family Support and Peer Support: Family support and peer support are available with Integrated Health Home providers. Peer support is also available with Central Iowa Recovery and some drop-in centers. CICS continues to encourage employment of peer and/or family support specialists.

Service Coordination

Case Management: Case management is available through Iowa Department of Human Services and Managed Care Organizations.

Health Homes: This service continues to be available in each county in CICS.

Subacute Services

Subacute services 1-5 beds and 6 and over: CICS partnered with Mary Greeley Medical Center for the development of subacute services in Ames, IA; the services became available August 1, 2021, with the service capacity of eight beds.

Core Evidence Based Treatment

Education and Training Services – provider competency: CICS offered training in Trauma 101 and Recovery, Mental Health First Aid, Juvenile Mental Health First Aid, and Compassion Fatigue. Community Mental Health Center (CMHC) Federal Block Grant funding has been used in a variety of ways by CMHCs for evidence based training and therapy practices including: Eye Movement Desensitization Reprocessing (EMDR) training for therapists, Wellness Recovery Action Planning (WRAP) training, Mindfulness Based Cognitive Therapy (MBCT) for therapists, Applied Suicide Intervention Skills Training (ASIST), Mental Health First Aid (MHFA), Youth Mental Health First Aid, and Question, Persuade, and Refer (QPR). Additionally, providers offer integrated treatment of co-occurring substance abuse and mental health disorders, positive behavioral supports (PBS), cognitive based therapy (CBT), EMDR, NAVIGATE (RESTORE), Motivational Interviewing, Systems Training for Emotional Predictability and Problem Solving (STEPPS), play therapy, Dialectical Behavior Therapy (DBT), Parent Child Interaction Therapy (PCIT) and WRAP.

Supported Housing: The Bridge Home in Story County is offering permanent supportive housing services in Story and Marshall counties. CICS will continue to explore concepts of Permanent Supportive Housing and implementation strategies with other MHDS Regions.

Assertive Community Treatment (ACT): This service is available in Hamilton County through UnityPoint Health -Berryhill Center and in Story and Boone counties through Eyerly Ball Community Mental Health Services. CICS continues to explore implementation of ACT in additional CICS counties.

Family Psychoeducation: CICS continues to contract and collaborate with NAMI Central Iowa for outreach in the region, for guidance in the development of support groups, and educational opportunities. CICS has paid for Facilitator training through NAMI Iowa to establish and maintain support groups within CICS.

Additional Core Services

Justice Involved Services

Coordination Services: Jail diversion intensive case management services have been implemented in all CICS counties. CICS service coordination in Boone, Franklin, Greene, Hamilton, and Hardin counties provide jail diversion intensive case management services. The other counties within CICS have this service available through a contracted provider agency.

24 hour Crisis Line: CICS began using the Your Life Iowa Crisis Line (855-581-8111) in January 2020 as this became the statewide crisis line. Any calls received on the CICS Crisis Line are rolled over to the Your Life Iowa Crisis Line. Additional communication options for crisis support are available for individuals to chat one-to-one online at yourlifeiowa.org or by texting 855-895-8398.

Warm Line: Abbe Center for Community Mental Health, Inc. provides warm line services (1-844-775-9276) throughout the CICS region.

Mental Health Services in the Jails: CICS fully funds telepsychiatry services with ITP in eight county jails. Warren County and Franklin County do not have jails. Warren County inmates have been going to the Jasper County Jail since January 2018. Center Associates provides telehealth services to the Marshall County Jail. Telehealth is available in each CICS county that has a jail. CICS funding is also available for therapy evaluations and individual and group therapy for individuals with a mental health or co-occurring substance use diagnosis. Service Coordination staff are available to each jail to assist with referrals for telepsychiatry, therapy services, jail diversion services, and other services/resource supports.

Justice System Involved Services—other: CICS continues to reimburse county jails for the cost of inmate prescribed psychotropic medications on ITP's medication formulary.

Crisis Prevention Training: Even though CICS budgeted for Crisis Intervention Training (CIT), planning did not occur for implementation as resources were redirected due to COVID-19. CICS supports CIT for law enforcement officials and will provide reimbursement to employers of law enforcement for mileage, lodging, and food costs associated with an officer attending in-state Crisis Intervention Training. CICS supports Mental Health First Aid training for law enforcement as well.

Mental Health Court Related Costs: This service is not currently available. CICS is open to collaborating with justice systems for Mental Health Court should the Supreme Court of Iowa's moratorium on Specialty Courts be lifted.

Civil Commitment Prescreening Evaluation: ITP provides prescreening services in emergency rooms of hospitals contracted with ITP.

Additional Core Evidence Based Treatment

Peer self-help drop-in centers: This service is available in nine CICS counties.

Intensive Psychiatric Rehabilitation (IPR): This service is available in each county in CICS.

Other Informational Services

Information & Referral: The CICS website can be found at www.cicsmhds.org. CICS also has a Facebook page and works with Trilix Marketing Group for media announcements. These media outlets are avenues to inform others about CICS, how CICS can assist individuals, and services and resources available in the CICS Region. Service Coordination staff offer assistance with information and referrals; see Service Coordination under Region Program Outcomes for additional information. CICS partnered with Trilix Marketing Group to develop mental health informational videos and partnered with MHDS Regions in the development of the Iowa MHDS Regions website <https://www.iowamhdsregions.org/>. On the website, individuals can enter the county in which they are looking for services, and they will be linked to the appropriate MHDS Region website.

Public Education: CICS supports involvement with Mental Health Expos and other mental health awareness events. Providing these opportunities assists individuals to achieve wellness through health education. CICS contracts with Community Mental Health Centers and other providers for public education services.

With restructuring of the CICS Administrative Team, CICS does not have staff capacity to offer as many trainings as in the past. CICS will continue to identify and promote trainings provided by external agencies, including meeting the four training sessions per requirements of Chapter 25. In FY2021, CICS staff provided training in: Trauma 101 & Recovery, Mental Health First Aid USA (MHFA)/Adult, Juvenile Mental Health First Aid, C3 De-escalation, and Compassion Fatigue. Trainings have been provided to regional staff, MHDS providers, school systems, public health, nursing students, county employees, and the general public. CICS partnered with Community and Family Resources to co-facilitate Adult and Juvenile MHFA.

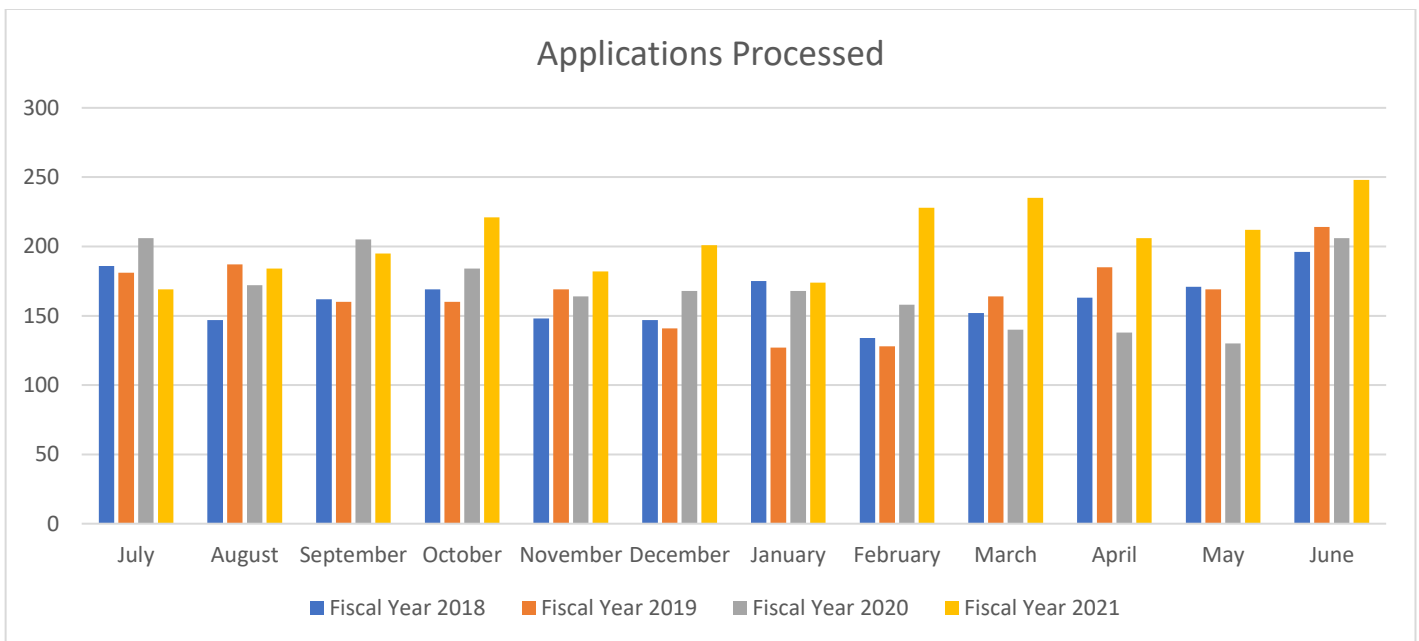
Region Program Outcomes

The following section provides information on:

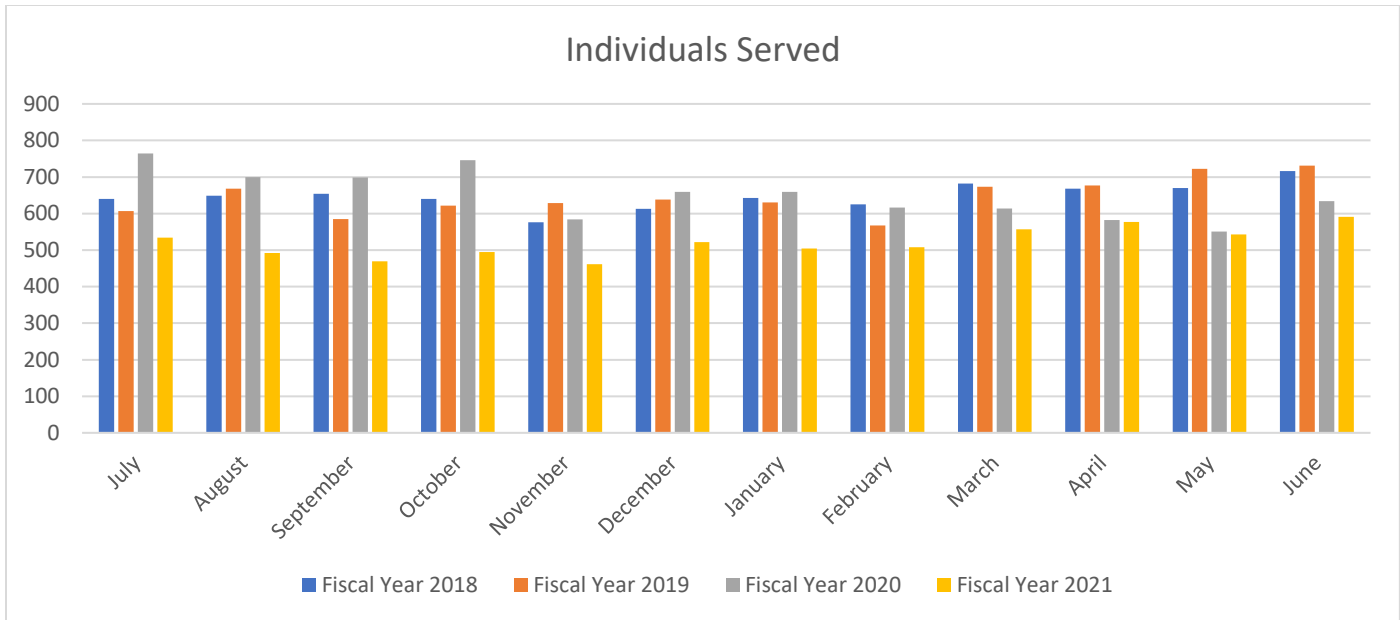
- *Service Coordination*
- *Medicaid Waiting List funding*
- *Special Project Grant funding*

Service Coordination

In FY2021 CICS was staffed with one Coordination Officer, one Service Coordination Specialist, one Lead Service Worker, one Children’s Behavioral Health Coordinator, and 13 Service Coordinators assigned to individual local county offices with at least one service coordinator designated as the Adult Coordinator of Disability Services in each county. Service coordination is essential in connecting individuals with mental health and developmental disabilities and/or co-occurring diagnoses to resources, services, and supports. In FY2021, 2,455 applications were processed; this is a 20% increase from FY2020. COVID-19 continued to have an impact on the number of applications in the first part of the year; however, the number of applications exceeded all previous years for the months of October 2020 through June 2021. The number of applications for FY2021 was impacted by the addition of “short” applications received for ITP services in the hospital emergency departments.

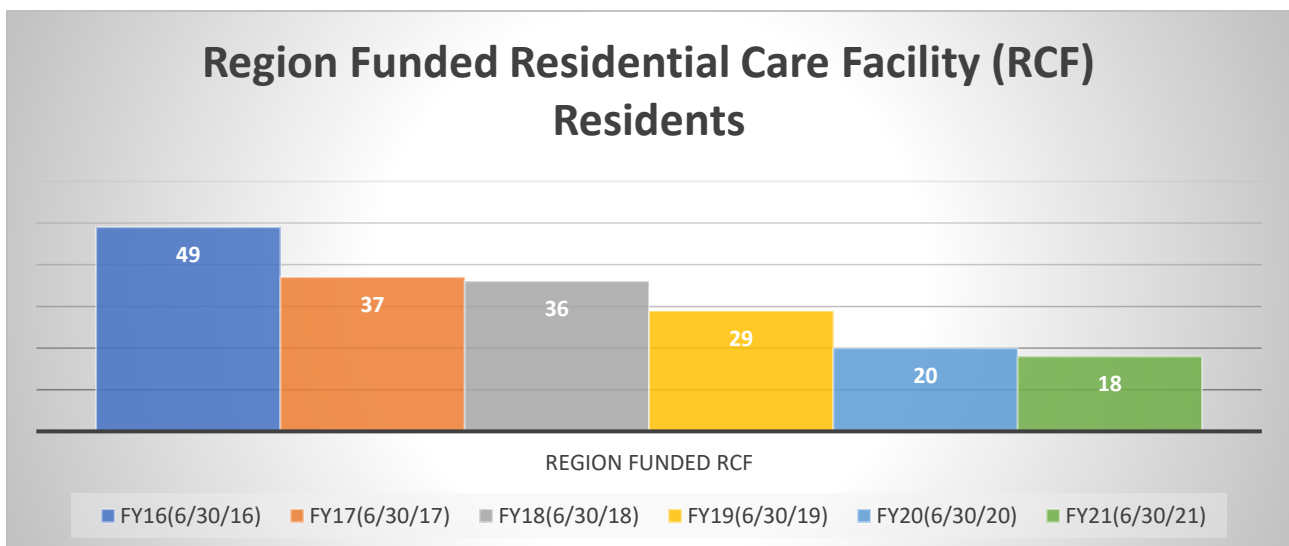


CICS tracks how many individuals are served each month; the number of individuals truly served by service coordination is much greater than the number of applications received and processed. In addition to tracking applications received, CICS also tracks contact with ongoing clients, collateral contact with provider agencies, contact with family members and other interested parties, email correspondence regarding ongoing clients, and other activities on behalf of those we serve. In FY2021, CICS served an average of 523 individuals monthly. This number is down significantly from FY2020, when an average of 651 individuals were served monthly. In addition to the continued effects of the pandemic, a change in those considered “served” was necessitated to align with State reporting requirements. For FY2021 CICS only tracked those served as individuals with a full CICS application on file. Previously CICS counted individuals that were assisted but did not have or need a full CICS application.

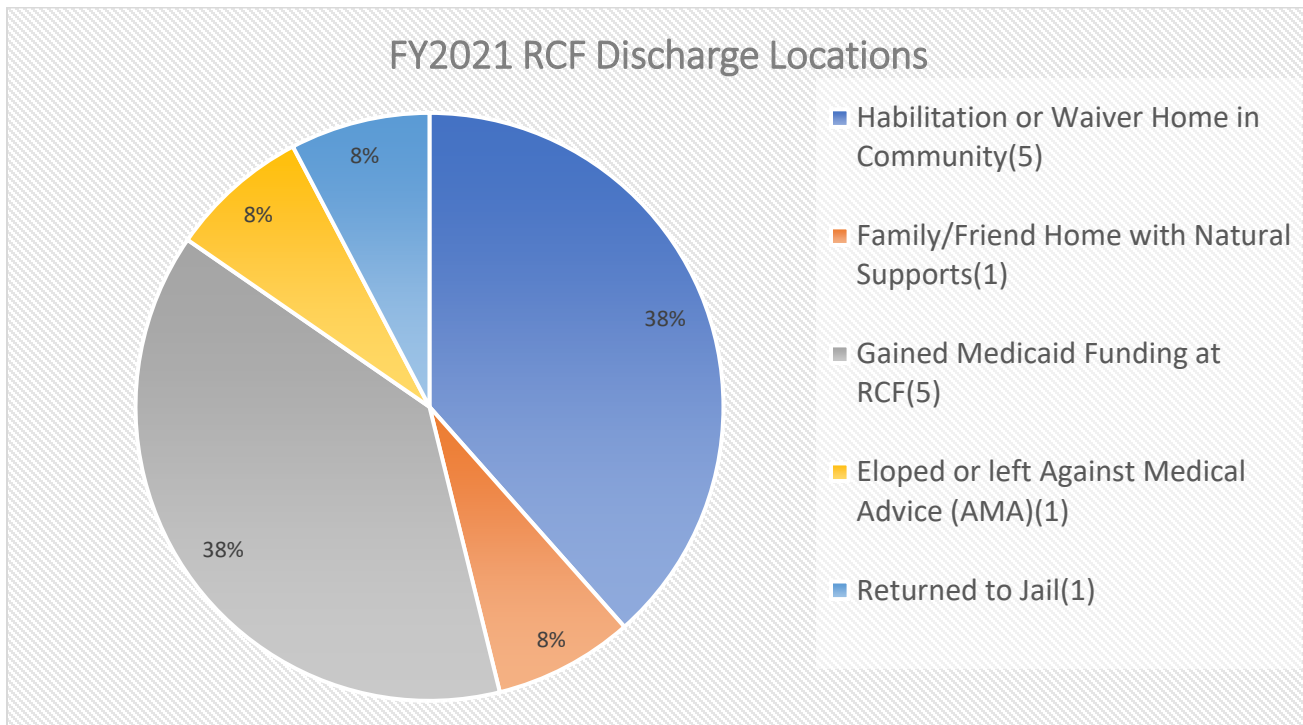


The Service Coordination Specialist focuses on assisting individuals with transitioning from Residential Care Facilities (RCFs) and Mental Health Institutes (MHIs) to residing in appropriate community-based services. Strategies to reduce the number of individuals at Residential Care Facilities have included working to reduce the number of admissions to RCFs, identifying RCF providers who have shown a willingness to stabilize and assist in community placement, focusing on a targeted list of individuals appropriate to move to a lower level of care, and building a base of community providers willing to work with individuals discharging from RCFs. Efforts have also been strengthened to look at alternative services, such as subacute, crisis stabilization, and transitional living to help an individual stabilize and return to their home.

During FY2021 there were 11 admissions to RCFs and 13 discharges, resulting in a net reduction of two from the end of the previous year. This compares with 28 admissions and 37 discharges in FY2020. At the end of FY2021 (6/30/21) the number of regionally funded individuals in RCFs was 18, a decrease of 10% from the previous year, and a decrease of 63% from the baseline year of FY2016. Efforts will continue to enhance community-based services and reduce individuals in RCFs.



Many of the individuals discharging from RCFs continue to need ongoing support. After a short time of stabilization in the RCF, individuals are able to discharge into community-based services.



In FY2021, there remained just one individual at the State Mental Health Institutes (MHIs) at the end of the fiscal year. There was one at the end of FY2020 also, compared to 4 at the end of FY2019. During FY2021 there were four individuals considered “long-term” (stays of 30+ days) that were admitted at MHI and four discharges. The Specialist works with all long-term (30+ days) individuals at both the Independence and Cherokee MHIs to coordinate services and assist with transition.

CICS utilizes the Level of Care Utilization System (LOCUS) assessment tool to assist in determining level of care and needed services for individuals with a mental illness diagnosis. Additionally, the Inventory for Client and Agency Planning (ICAP) assessment tool for individuals with Intellectual Disabilities (ID) and Development Disabilities (DD) is used. The service coordination specialist position assesses individuals when RCF, Transitional Living Center (TLC), or ongoing regionally funded services are requested. In FY2021, 115 assessments were completed compared with 175 in FY2020, and 263 assessments in FY2019. The primary reasons FY2021 assessments continued to decrease were the reduced number of individuals in RCF care, the continued phaseout of the TLCs, and the overall decrease in individuals served due to the pandemic.

Medicaid Waiting List Funding

During FY2017, CICS began tracking Medicaid gap funding. CICS funded 84 individuals in FY2021 who were waiting for Medicaid waiver funding. This is compared to 141 in FY2020, 121 in FY2019, 128 in FY2018, and 114 in FY2017. Individuals funded for this purpose dipped significantly for FY2021, as it did for overall individuals served, primarily due to issues related to the COVID-19 pandemic. According to the Iowa Code, MHDS Regions are not required to fund individuals that are on a Medicaid waiting list. However, CICS implemented a policy that states CICS will fund minimum necessary services for individuals while they are waiting for Medicaid funding.

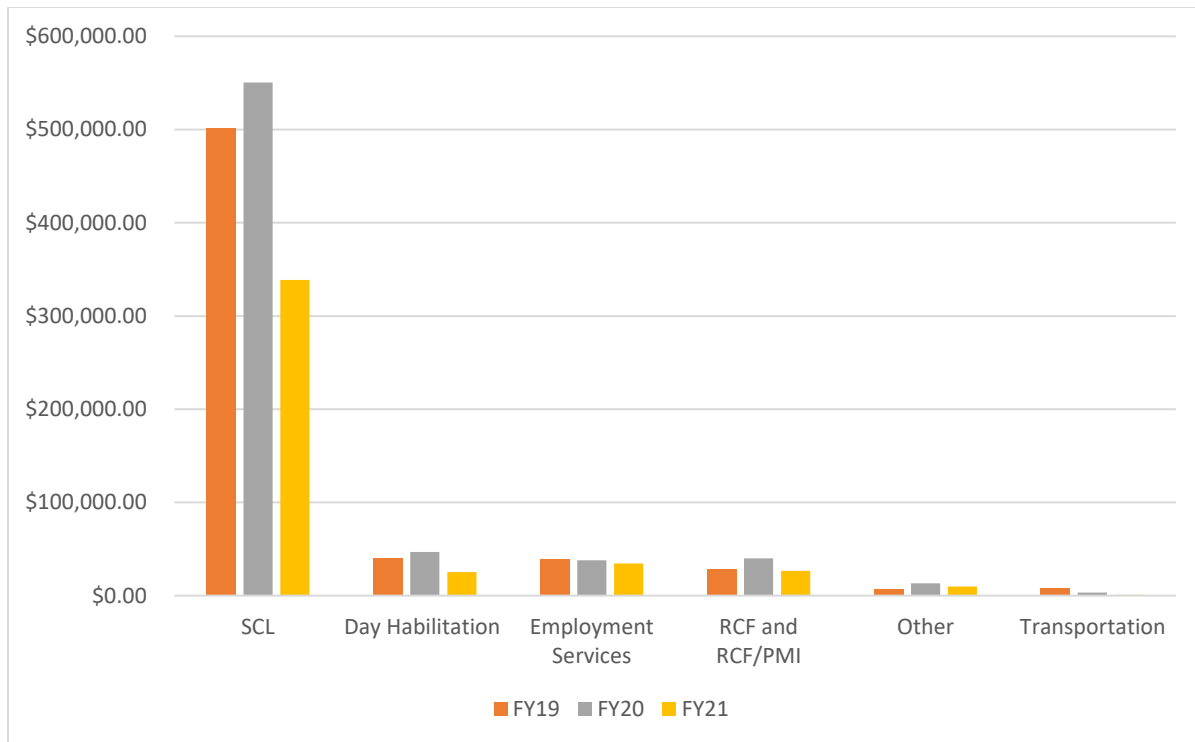
CICS expenditures for services that should be Medicaid funded for FY2021 were \$435,580.30, a significant decrease from prior years.

The funding streams for which individuals may be waiting include: Intellectual Disability (ID) Waiver, Health and Disability (H&D) Waiver, Habilitation Services, Elderly Waiver, Physical Disability (PD) Waiver, and Brain Injury (BI) Waiver. A new category (Other Gap Funding) was added to account for those waiting for straight Medicaid funding for services such as outpatient, ACT, and IPR. The below table reflects the level of funding for FY2019, FY2020, and FY2021.

Medicaid Waiting List Information

	FY2019		FY2020		FY2021	
Waiver	Individuals Funded	Amount Paid	Individuals Funded	Amount Paid	Individuals Funded	Amount Paid
BI Waiver	2	\$3,481.77	2	\$8,720.40	1	\$4,620.00
Elderly Waiver	4	\$2,932.71	10	\$30,434.65	6	\$22,049.07
Habilitation Services	89	\$401,965.39	97	\$464,088.05	45	\$256,847.41
ID Waiver	23	\$214,324.74	29	\$187,770.97	23	\$145,422.29
H&D Waiver	2	\$1,069.06	1	\$410.90	1	\$117.76
PD Waiver	1	\$793.84	2	\$413.70	0	\$0
Other Gap	0	\$0	0	\$0	8	6,523.77
Total	121	\$624,567.51	141	\$691,838.67	84	\$435,580.30

The chart on the next page reflects the services and dollars expended in FY2019, FY2020, and FY2021 for individuals waiting for Medicaid program eligibility.



Special Project Grants

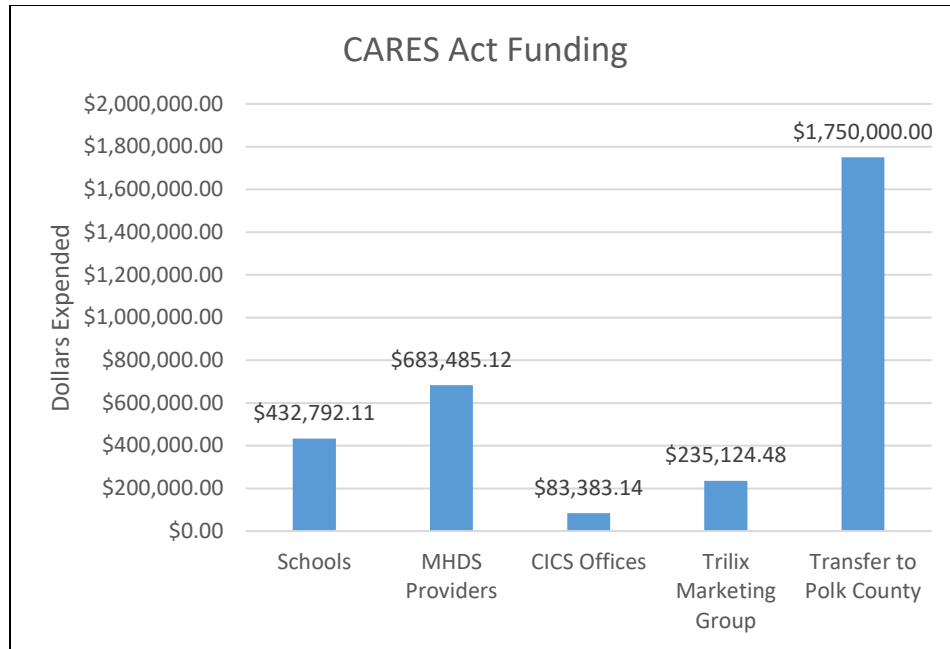
CICS has used special project block grant funding for a variety of reasons, such as program start up, service sustainability, service access, and availability.

CARES Act Funding

In August 2020, CICS received \$3,217,609 in funding from the Coronavirus Relief Fund under the CARES Act. To manage distribution of these funds, CICS had several requests for proposal (RFP) opportunities for mental health disability service providers and school districts to request funding; CICS distributed \$1,116,277.23 to these entities. Some examples of CARES Act funding provided was for personal protective equipment, technology, conferencing equipment, cleaning/sanitizing, plexiglass, mental health training and services, Social Emotional Learning Training, vehicles for client transport to reduce risk of COVID-19 exposure, flooring replacement and conference room chairs to allow for easier sanitation, substitute teacher compensation, school social worker compensation for additional days per week, and water fill stations to replace drinking fountains.

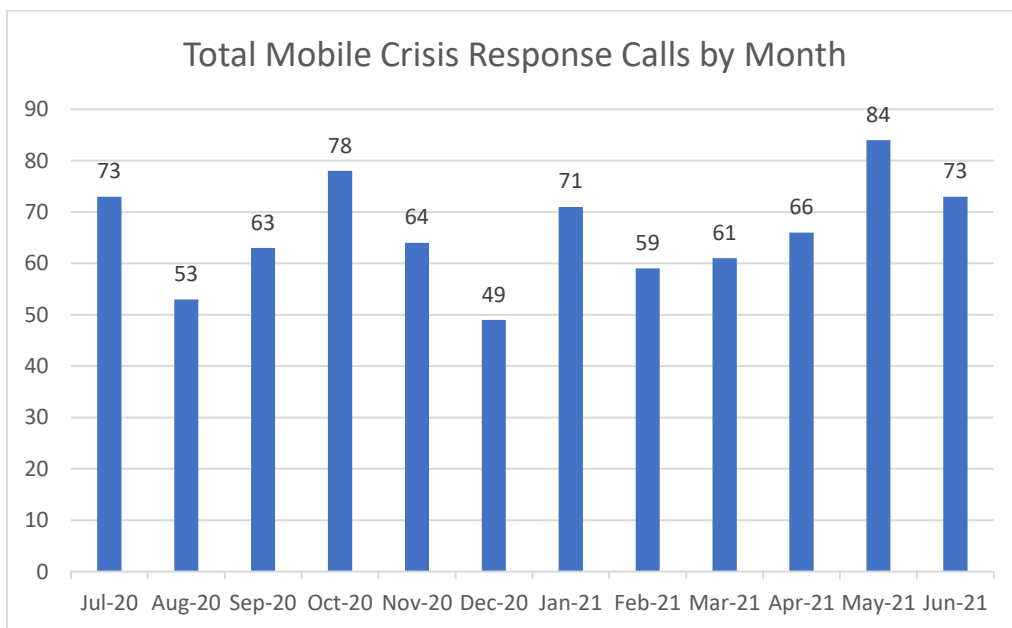
CICS used \$83,383.14 of CARES Act funds to address various needs identified within the CICS offices related to COVID-19 for technology, equipment, sanitization, cleaning, training, and crisis line yard signs and banners. As well as worked with Trilix Marketing Group for development of mental health prevention, education, and awareness videos, marketing material, website updates, and MHDS Regions website development and media campaign in response to the increased needs with COVID-19.

CICS transferred \$1,750,000.00 of CARES Act funds to Polk County as several MHDS providers in Polk County also serve residents of CICS.

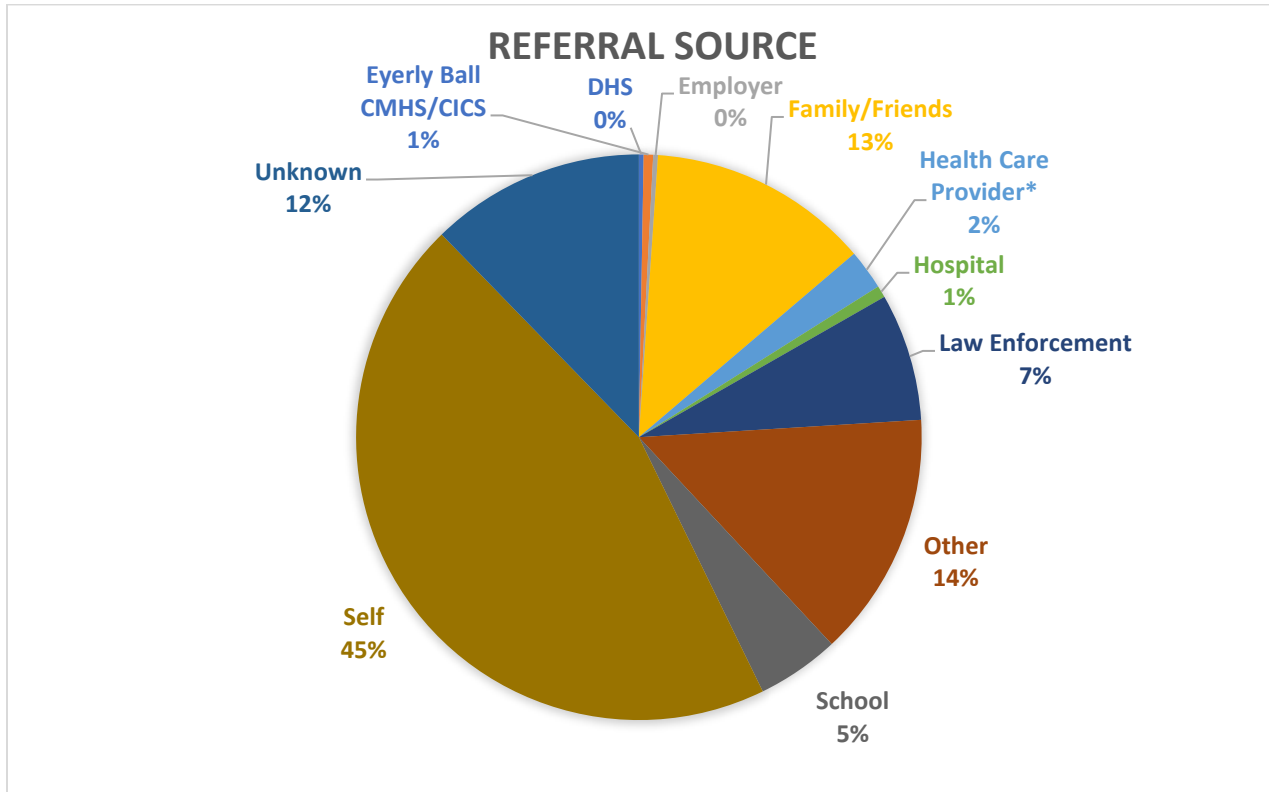


Mobile Crisis Response

Mobile Crisis Response services are provided by Eyerly Ball Community Mental Health Services for the entire CICS Region. Due to the geographic area, mobile response teams are grouped by service areas; from July through March 2021 there were three teams with the following service area: North team covers Franklin, Hamilton, Hardin counties; Central team covers Greene, Boone, Story, and Marshall counties; and Southern team covers Madison, Warren, Jasper, and Poweshiek counties. A fourth team was added in April 2021 as the provider expanded their service area to also include Cerro Gordo and Hancock counties with funding from County Social Services region. At that time, the counties covered by each team were adjusted. The number of calls during FY2021 ranged from 49 to 84 per month regionwide, see chart below for monthly calls.

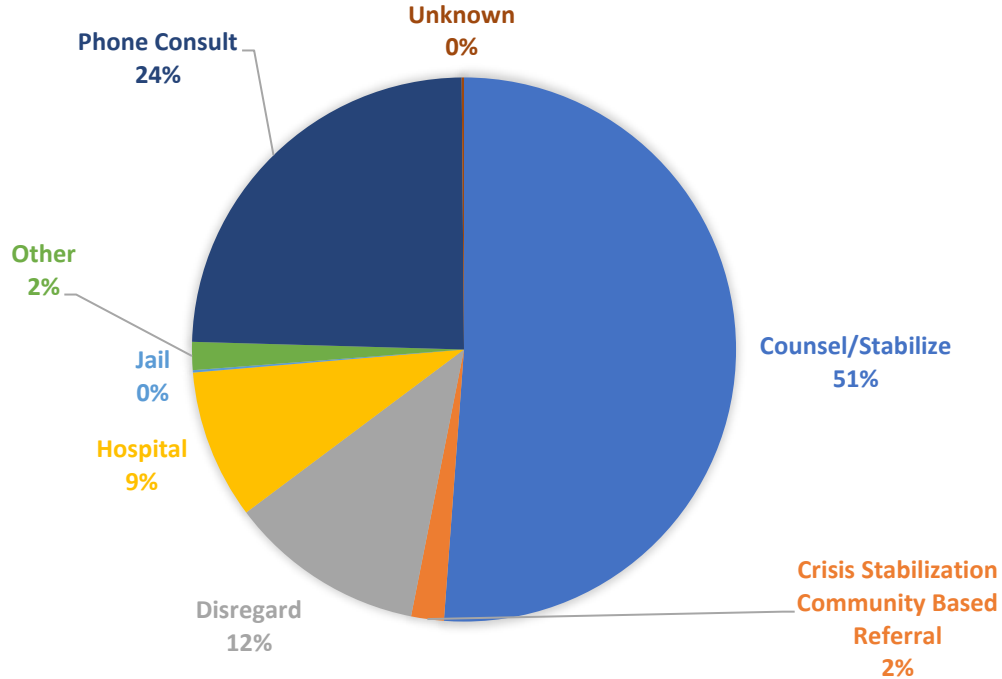


Mobile Crisis Response services can be requested by calling the Your Life Iowa Crisis Line. Due to a change with data collection, information is not available for referral sources or disposition of calls for July 2020. From August 2020 through June 2021, of the total 721 mobile response calls received during this timeframe, 45% were self-referral, 7% were from law enforcement, and 13% from family members and friends. This compares to FY2020 where a total of 757 calls were received with 47% were self-referral, 22% were from law enforcement, and 16% from family members and friends.



In FY2021 from August 2020 to June 2021, 51% of the calls resulted in the individual being stabilized and remaining in their home, 9% of calls individuals were hospitalized, 2% of calls resulted in a referral to Crisis Stabilization Community Based services, 12% resulted in mobile response being cancelled prior to the team’s arrival, 26% had other outcomes including phone de-escalation, and 0% resulted in jail. With the COVID-19 pandemic, county infection rates were monitored. If a county was in the “red zone,” the team had the option of responding to the call via phone or in-person.

RESULT OF MOBILE CRISIS RESPONSE SERVICE



Drop-In Centers

CICS funds drop-in centers at a monthly contracted amount based on each drop-in center's service budget. CICS allocates costs to members served when possible. Funding drop-in centers in this manner helps to ensure sustainability of the drop-in centers as the service is not billable to Medicaid.

Other Community Living Support Services

In addition to Services Management, the following section describes other services funded by CICS.

Transportation: CICS contracts with Central Iowa Juvenile Detention Center (CIJDC) and Mary Greeley Medical Center (MGMC) for transportation services for Civil Mental Health Commitment transports when requested by the Sheriff's Office. This offers the ability for law enforcement to return to other duties more expediently. CIJDC also assists with voluntary transports to and from crisis stabilization residential services, voluntary hospitalization, subacute mental health services, and discharge needs, as well as other transportation needs receiving prior funding authorization by CICS. CICS contracts with MGMC for voluntary transport services for individuals who are located at MGMC and need transport assistance to other inpatient behavioral health services, subacute mental health services or crisis stabilization residential services. CICS contracts with public transit providers and other providers for transportation services as well.

Guardianship: Service Coordination staff can assist individuals in obtaining information regarding guardianship options.

Representative Payee: Individuals accessing CICS funding prior to 1/1/21 for representative payee services continue to receive funding if the individual meets all other eligibility criteria and the representative payee service continues uninterrupted.

Rent Payments: CICS offers time limited assistance with rent and utilities as well as longer term assistance for individuals receiving SCL services on a daily basis. Rent and utility assistance can be helpful when individuals are going through the application process for SSI/SSDI benefits and/or seeking employment.

Transitional Living Center Services: Mary Greeley Medical Center provided transitional living center services as fee-for-service.

Regional Collaboration with Providers, Stakeholders, and Regions

The following section describes regional collaborative efforts with others.

Regional Collaboration with Department of Human Services (DHS) and Managed Care Organizations (MCOs)

The CEO Collaborative meets with DHS monthly to discuss relevant topics and initiatives. The CEO Collaborative also meets with MCOs every other month to discuss important topics and current initiatives.

CICS staff continue to participate in the Iowa Therapeutic Alternatives to Incarceration Coalition (ITAIC). ITAIC provides opportunity for providers, law enforcement, MCOs, and other interested individuals to meet and work toward the common goal of ITAIC's mission statement, "Supporting the development of therapeutic alternatives to incarceration in Iowa communities." Several CICS counties have signed the Stepping Up Initiative.

Data Analytics

MHDS regions meet monthly to work on a standardized approach for data informed decision making and outcomes development. Membership includes representatives from regions across the state. Patti Treibel Leeds and Russell Wood, who serves as chair, represent CICS.

Adult Advisory Committee

The CICS Adult Advisory Committee is an advisory stakeholders' group that provides for broad representation. The Committee consists of two members from each county and two Governing Board Directors. One member is an adult service provider, and one member is an individual who utilizes mental health and disability services or is an actively involved relative of such an individual. Two committee members are appointed to the CICS Governing Board: provider representative ex-officio non-voting Director and individual who utilizes mental health and disability services or is an actively involved relative of such an individual voting Director. The Adult Advisory Committee met on five occasions during the fiscal year; the following is a summary of those meetings:

Meeting date: July 14, 2020. Member participation: three individuals who utilize mental health disability services or are actively involved relatives of such an individual, five providers, and one Governing Board member. Meeting content: election to fill Vice-Chair vacancy; election to CICS Governing Board of an individual who utilizes mental health and disability services or is an actively involved relative of such an individual; Governing Board meeting updates; update from CICS CEO; Service Coordination update; agency update/information sharing.

Meeting date: October 13, 2020. Member participation: three individuals who utilize mental health disability services or are actively involved relatives of such an individual, seven providers, and one Governing Board member. Meeting content: Governing Board meeting updates; requests from Cerro Gordo, Webster, and

Wright counties to join CICS; CARES Act COVID-19 funds; Service Coordination report; Advisory Committee terms expiring; agency update/information sharing.

Meeting date: January 12, 2021. Member participation: three individuals who utilize mental health disability services or are actively involved relatives of such an individual, five providers, and one Governing Board member. Meeting content: election of chair and vice-chair; review of bylaws for CICS Adult Advisory Committee; Governing Board meeting updates; 2020 Advisory Committee Report; Cerro Gordo, Webster, and Wright counties joining CICS; Resource Center community integration transition planning; CARES Act COVID-19 funding; service planning; agency update/information sharing.

Meeting date: April 13, 2021. Member participation: three individuals who utilize mental health disability services or are actively involved relatives of such an individual, seven providers, and one Governing Board member. Meeting content: consideration of revised bylaws for CICS Adult Advisory Committee; Governing Board meeting updates; election to CICS Governing Board of provider representative; consideration of revised CICS Management Plan Policies and Procedures; CEO update; CARES Act COVID-19 funding; agency update/information sharing.

Meeting date: June 3, 2021. Member participation: three individuals who utilize mental health disability services or are actively involved relatives of such an individual, seven providers, and one Governing Board member. Meeting content: consideration of revised bylaws for CICS Adult Advisory Committee.

Children's Behavioral Health Advisory Committee

This committee is formed with representation across the CICS region, and two committee meetings were held in FY2021. Three committee members are appointed to the CICS Governing Board: Children's Behavioral Health Service Provider ex-officio non-voting Director, the Education System voting Director, and Parent/Actively Involved Relative of a Child who Utilizes Children's Behavioral Health Services voting Director. Please see below for a summary of the Children's Behavioral Health Advisory Committee meetings:

Meeting date: October 21, 2020. Eight committee members present and four CICS representatives. Meeting content: welcome and introductions; discussed quorum; serious emotional disturbance statewide workgroup; appointment of an Education System representative and Children's Behavioral Health Service Provider representative to the CICS Governing Board; election of committee chair; crisis stabilization services; CARES Act COVID-19 funding.

Meeting date: April 7, 2021. Eight committee members present and four CICS representatives. Meeting content: CICS Management Plan Policies and Procedures amendments; crisis services; CARES Act COVID-19 funding.

Provider Meetings:

CICS met with various provider groups at least quarterly.

CEO Collaborative meetings:

The Regional CEOs meet at least monthly to discuss and resolve statewide issues. Members are appointed to taskforce groups to meet with representatives from MCOs on topics such as funding for crisis services, solutions for individuals with complex needs, and outcomes projects.

Mental Health and Disabilities Services Commission:

CICS attends monthly meetings of the MHDS Commission; Russell Wood was reappointed by the Governor to serve on the MHDS Commission and now serves as chair.

Iowa Community Services Association (ICSA) meetings:

The ICSA Board of Directors represent county Community Services offices for the purpose of promoting progressive county government administration. Karla Webb serves on this Board.

Legislative Review Committee:

The purpose of the Legislative Review Committee is to make recommendations on priorities for legislative action and to review legislation regarding the effect on counties. Karla Webb and Russell Wood, who serves as chair, were representatives of this committee.

Iowa Counties Technology Services (ICTS) Advisory Committee (formerly CSN-ETC):

Betsy Stursma and Lisa Hill from CICS are representatives on this committee.

Regional Collaborations:

Due to the fact that CICS is located within the center of Iowa, we work with many regional groups on partnering and planning for services.

Local Collaborations:

CICS encourages collaboration through local MHDS advisory boards, other social services agencies, and law enforcement entities including:

- Homeless coordinating boards
- Local providers
- AEA transition advisory board
- DHS transition committees
- Department of Correctional Services advisory board
- Integrated health home agencies
- Mental health interdisciplinary team
- Mental health task force
- Criminal justice task force
- Opioid task force
- Human services providers
- ASSET – Analysis of Social Services Evaluation Team
- Public health departments
- Public libraries
- Ministerial Association
- City councils

- Local hospitals
- Public schools
- Public and private colleges
- Learning community
- Wellness coalition
- Regional Housing Authority
- Substance use task force
- Transportation boards
- Sheriff offices, county jails, and community law enforcement agencies

Please visit the CICS website www.cicsmhds.org for updates on service development, contracted provider network, and activities occurring within CICS.

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