


Proposal for a
Living Room
Program
in Oak Park

Community Mental Health Board of
Oak Park

NAMI Metro Suburban

Agenda

- Mental Health Crisis Re-envisioning for Village of Oak Park
- Overview of Living Room Program Model
- History of Living Room Program
- Impact on Community
- Pilot structure
- Indicators to be Measured
- Expenses and Funding



Mental Health Crisis Re- envisioning for Village of Oak Park

- November 2020 - Berry Dunn Report
- October 2022 - Taskforce Established
- April 2022 - Taskforce Final Report to VOP Staff
- June 2022 - Taskforce Presentation to Trustees
- October 2022 - Trustees Review IPLAN
- December 2022 - Board of Health Approves IPLAN

The Alternative Calls Taskforce Recommendations and the IPLAN both identified a Living Room Program as a benefit to the community to assist in mental health crisis.

Local Need

- 2025 survey of over 500 Oak Park residents indicated that 63% of respondents lived in households where someone was diagnosed by a health professional with a mental health challenge, yet nearly 20% were not engaged in care.
- Persistent barriers such as high costs, long wait times, lack of insurance, and stigma identified.
- Rush Oak Park Hospital reported that for calendar year 2023, it had 757 visits to the emergency department related to psychiatric crisis. Over 27% (206) of those visits were from Oak Park residents.
- West Con reported that between May 2023 and May 2025, there were over 2,500 calls for service that were classified as “Psychiatric Abnormal” or “Psychiatric Crisis.” Over 50% were from Oak Park residents.
- E.C.H.O. team reported that in the five-month period between February and June 2025, 15% of their engagements (27 out of 181) were mental health-related.

Living Room Program

- Welcoming and Calm Atmosphere
- Staffing
 - Recovery Support Specialist
 - At least one Mental Health Professional
- Process
 - Risk assessment
 - Peer counseling and support
 - Recovery tools
 - Crisis de-escalation
 - Linkage to resources and other care
- Recovery & Hope

Living Room History (National and Local)

- 2009- California and Colorado
- Illinois
 - 2012- Turning Point in Skokie
 - 2016, 2018, 2020- NAMI LaGrange, Broadview, Summit
 - 2020- IDHS began funding Living Rooms
 - 2023 IDHS required 24/7
 - 25 IDHS funded in the State of Illinois
- Nationally: 84-93% of LRP guests were deflected from emergency departments

NAMI Living Room Success

La Grange-
1,800 Guests
Summit-
1,100 Guests

87% reduction in
distress

46% return rate

Over 98%
stabilized
without
hospitalization



Impact on Mental Health Care System

Reduced Emergency Department
Overload

Cost Savings (Hospitals and Police)

Improved Long Term Recovery Outcomes

Enhanced Community Trust

Recovery versus Stabilization

Decreased Stigma

Oak Park Pilot

3 Year Pilot-
emphasis on data
collection

Potential to
convert 816
Harrison

Storefront
7 Days a week,
12:00- 8:00PM

Partner with
Police, Area
Hospitals, Local

Agencies
Position us to
apply for State
funding



Indicators to be Measured

served by zip code

Referral source

% return rate

hospitalizations (involuntary vs. voluntary)

Reduction in distress

of engagement and outreach efforts

% maintain stability after 30 days

Outgoing referrals

Exit Survey feedback

Anticipated Costs

Annual Cost

- Salaries & Benefits
\$213,493
- Program Supplies \$23,750
- Occupancy \$60,600
- Misc.
\$2,750
- Indirect
\$57,113
- Total
\$357,706

Capital Improvement

- Labor & Materials
\$59,800
- Drawings & Permitting
\$13,000
- Furniture & Tech
\$13,000
- Total
\$85,800


Requested and Committed Funding

Operational Costs

• CMHB	\$100,000	Committed
• OPRF Community Foundation	25,000	Committed
• River Forest Township	10,000	Committed
• Oak Park Township	10,000	Committed
• Rush Oak Park Hospital	50,000	Requested
• Village of Forest Park	10,000	Requested
• Village of Oak Park	150,000	Requested
Total	\$355,000	

Capital Improvement

• CMHB	\$85,80	
Committed		



Questions and
Thank You!