

SUBRECIPIENT GRANT AGREEMENT

THIS SUBRECIPIENT GRANT AGREEMENT ("Agreement") is entered into as of the day of _____ October, 2020 between the VILLAGE OF OAK PARK, Illinois (hereinafter the "Village") and THRIVE COUNSELING CENTER, an Illinois not-for-profit Corporation (hereinafter the "Subrecipient").

RECITALS

WHEREAS, the Village has applied for Community Development Block Grant ("CDBG") funds from the United States Department of Housing and Urban Development ("HUD") as provided by the Housing and Community Development Act of 1974, as amended (P.L. 93-383) (hereinafter "the Act"); and

WHEREAS, Subrecipient has applied to the Village for CDBG funds for the 2020 Program Year; and

WHEREAS, the Village has considered and approved the application of Subrecipient and hereby agrees to distribute to Subrecipient a portion of the total CDBG funds allotted to the Village by HUD, with the portion distributed to Subrecipient being in the amount provided in this Agreement and upon the conditions set forth herein; and

WHEREAS, the Village and Subrecipient, acting through their respective Boards are each authorized to enter into this Agreement.

NOW, THEREFORE, in consideration of the mutual covenants hereinafter set forth, the parties agree as follows:

1. INCORPORATION OF RECITALS. The foregoing recitals are incorporated into this Agreement as though fully set forth herein.

2. SCOPE OF SERVICES.

A. Subrecipient's project schedule and project budget (collectively referred to as "the Project") are set forth in the Subrecipient's Program Year 2020 Community Development Block Grant Program Proposal, attached hereto and incorporated herein by reference as Exhibit A (hereinafter the "Subrecipient's Proposal").

B. The Project will proceed in accordance with the terms of this Agreement, the Subrecipient's Proposal and all laws and regulations referenced in this Agreement. Any changes(s) in the Project must be approved by the Village prior to the Subrecipient incurring any Project costs or implementing any substantial Project modifications. Such approval shall only be effective if authorized by a written amendment to this Agreement.

C. The funds to be provided by the Village to Subrecipient pursuant to this Agreement shall be used to partially support four part-time, contracted medical positions to assist persons with mental disabilities. A total of 198 persons (92 Oak Park persons) will benefit.

3. ALLOCATION OF FUNDS.

A. The Village shall distribute to Subrecipient as Subrecipient's portion of the total grant received by the Village from HUD a maximum of thirteen thousand and five hundred dollars (\$13,500) (hereinafter the "Grant Funds") to be paid in accordance with the terms of this Agreement. The Subrecipient acknowledges and agrees that only those budget line items and percentages that appear in its Program Year 2020 Project Budget will be considered for reimbursement through the Grant Funds.

B. The Grant Funds shall not be used for ineligible or unallowable costs, including costs incurred prior to the effective date of this Agreement as defined herein. In the event the Village does not receive the Grant Funds from HUD, the Village shall not provide the Grant Funds, or any other funds, to Subrecipient.

4. PAYMENT.

A. The Village shall make all Grant Funds payments on a reimbursement basis. To request a payment of Grant Funds, the Subrecipient must submit a request for payment to the Village in the form of an invoice, together with such supporting documentation as the Village deems necessary in its discretion to support the invoice. The Village shall only reimburse the Subrecipient for approved expenditures to the maximum of the allocated Grant Funds for the Project.

B. The Village may refuse to reimburse the Subrecipient if the Subrecipient is not in compliance with any applicable law, rule or regulation or this Agreement. In such case, the Village shall assist the Subrecipient to bring the Project into compliance.

C. The Subrecipient shall submit invoices to the Village for reimbursement monthly for the first quarter (a separate invoice for October, November and December, 2020, respectively) and at least quarterly for the last three quarters of the Program Year, as defined below. Final project invoices must be submitted to the Village no later than October 31, 2021. Any invoices submitted after October 31, 2021 shall not be paid by the Village.

5. PROGRAM YEAR.

A. The Subrecipient shall perform the Project beginning October 1, 2020 and ending on September 30, 2021 (hereinafter referred to as the "Program Year").

B. The Project shall be completed no later than September 30, 2021. Project costs shall not be incurred after the Program Year.

C. If the Subrecipient is delayed in the completion of the Project by any cause legitimately beyond its control, it shall immediately, upon receipt and knowledge of such delay, give written notice to the Village and request an extension of time for completion of the Project. The Subrecipient shall request an extension from the Village in writing at least thirty (30) days before the end of the Program Year. The Village shall either grant or deny the request for an extension in its discretion and shall provide notice to the Subrecipient of its grant or denial of the request.

D. The Subrecipient shall return any funds not expended by the end of the Project to the Village. All funds obligated or committed by the Subrecipient to contractors, suppliers, etc. during the Program Year must be expended by the end of the Program Year unless an extension has been given to the Subrecipient. The Subrecipient shall have 30 days after the close of the Program Year to request reimbursement for costs incurred for the Project, unless an extension has been granted pursuant to this Agreement.

6. COMPLIANCE WITH LAWS AND REGULATIONS.

A. The Subrecipient shall comply with the applicable provisions Housing and Community Development Act of 1974, 42 U.S.C. § 5301 *et seq.* (hereinafter referred to as the "Act"), and all applicable rules and regulations promulgated under the Act by the Department of Housing and Urban Development (HUD), including, but not limited to 24 CFR Part 570, and all other applicable federal, state, county and local government laws, ordinances or regulations which may in any manner affect the performance of this Agreement, including but not limited to those set forth herein, and those identified in the document titled "Assurances," attached hereto and incorporated herein by reference as Exhibit B.

B. The Subrecipient shall comply with the applicable administrative requirements set forth in 2 CFR 200 of the Code of Federal Regulations.

C. The Subrecipient shall comply with the following in its performance of the Project:

1. Not discriminate against any worker, employee, or applicant, or any member of the public because of race, religion, disability, creed, color, sex, age, sexual orientation, status as a disabled veteran or Vietnam era veteran, or national origin, nor otherwise commit an unfair employment practice;

2. Take action to ensure that applicants are employed without regard to race, religion, handicap, creed, color, sex, age, sexual orientation, status as a disabled veteran or Vietnam era veteran, or national origin, with such

action including, but not limited to the following: employment, upgrading, demotion or transfer, termination, rates of pay, other forms of compensation, selection for training, including apprenticeship; and

3. The Village's Reaffirmation of Equal Employment Opportunity Policy ("EEO"), attached hereto and incorporated herein by reference as Exhibit C.

D. Subrecipient agrees not to violate any state or federal laws, rules or regulations regarding a direct or indirect illegal interest on the part of any employee or elected officials of the Subrecipient in the Project or payments made pursuant to this Agreement.

E. Subrecipient agrees that, to the best of its knowledge, neither the Project nor the funds provided therefore, nor the personnel employed in the administration of the program shall be in any way or to any extent engaged in the conduct of political activities in contravention of Chapter 15 of Title 5 of the United States Code, otherwise known as the "Hatch Act."

F. Subrecipient shall be accountable to the Village for compliance with this Agreement in the same manner as the Village is accountable to the United States government for compliance with HUD guidelines.

G. The Village, as a condition to Subrecipient's receipt of Grant Funds, requires Subrecipient, when applicable, to assist in the completion of an environmental review as needed for the Project.

H. Subrecipient shall permit the authorized representatives of the Village, HUD, and the Comptroller General of the United States to inspect and audit all data and reports of Subrecipient relating to its performance of this Agreement.

I. Subrecipient agrees and authorizes the Village to conduct on-site reviews, examine personnel and employment records and to conduct other procedures or practices to assure compliance with these provisions. The Subrecipient agrees to post notices, in conspicuous places available to employees and applicants for employment, setting forth the provisions of this non-discrimination clause.

J. The Village will provide technical assistance as needed to assist the Subrecipient in complying with the Act and the rules and regulations promulgated for implementation of the Act.

7. REPORTING AND RECORD KEEPING.

A. Subrecipient's Maintenance of Required Records.

Subrecipient shall maintain records to show actual time devoted and costs incurred in connection with the Project. Upon fifteen (15) days' notice from the Village, originals or certified copies of all time sheets, billings, and other documentation used in the preparation of said Progress Reports required pursuant to Section 7(C) below shall be made available for inspection, copying, or auditing by the Village at any time, during normal business hours.

B. Subrecipient's documents and records pursuant to this Agreement shall be maintained and made available during the Project Period and for three (3) years after completion of the Project. The Subrecipient shall give notice to the Village of any documents or records to be disposed of or destroyed and the intended date after said period, which shall be at least 90 days after the effective date of such notice of disposal or destruction. The Village shall have 90 days after receipt of any such notice to give notice to the Consultant not to dispose of or destroy said documents and records and to require Consultant to deliver same to the Village. The Subrecipient shall maintain for a minimum of three (3) years after the completion of this Agreement, or for three (3) years after the termination of this Agreement, whichever comes later, adequate books, records and supporting documents to verify the amounts, recipients and uses of all disbursements of Grant Funds passing in conjunction with the Agreement. The Agreement and all books, records and supporting documents related to the Agreement shall be available for review and audit by the Village and the federal funding entity, if applicable, and the Subrecipient agrees to cooperate fully with any audit conducted by the Village and to provide full access to all materials. Failure to maintain the books, records and supporting documents required by this subsection shall establish a presumption in favor of the Village for recovery of any Grant Funds paid by the Village under the Agreement for which adequate books, records and supporting documentation are not available to support their purported disbursement. The Subrecipient shall make the documents and records available for the Village's review, inspection and audit during the entire term of this Agreement and three (3) years after completion of the Project as set forth herein and shall fully cooperate in responding to any information request pursuant to the Illinois Freedom of Information Act, 5 ILCS 140/1 *et seq.* by providing any and all responsive documents to the Village.

C. Quarterly Progress Reports & Final Report. Subrecipient shall prepare and submit a quarterly Progress Report to the Village reporting on the status of the Project. Project progress is to be implemented based on the Project timeline set forth in the Proposal, attached hereto and incorporated herein as Attachment A. The information provided in the Progress Reports shall be forwarded to the United States Department of Housing and Urban Development and shall be made available to the Village's Community Development Citizen Advisory Committee in order to determine the success or failure of the Project.

All Progress Reports, unless otherwise specifically noted, shall be due by the 15th day of the month following the end of each quarter and shall contain data obtained during the preceding three months. The Subrecipient shall be required to submit a final report at the end of the Project in lieu of the last Progress Report.

The following schedule shall be applicable:

1 st Quarter: October–December, 2020	Progress report due by January 15, 2021
2 nd Quarter: January–March, 2021	Progress report due by April 15, 2021
3 rd Quarter: April–June, 2021	Progress report due by July 15, 2021
4 th Quarter: July–September, 2021	Progress report/Final report due by October 15, 2021

Each quarterly Progress Report and the Final Report shall include information regarding activity compliance pursuant to the national objective criteria set forth in 24 C.F.R. Section 208 (2) and 570 and in Section 2 - Scope of Services. See the attached formats Exhibits D & E. The Village may request additional reports from the Subrecipient as necessary to comply with any applicable federal law requirements.

D. Penalty for Late Submission of Quarterly Reports or Final Report. In the event the Subrecipient does not provide the Village with any report within the required time period, the Village shall withhold \$25.00 from the Grant Funds for each business day the report remains overdue. Funds charged for failure to submit a required report shall be deducted from the total Grant Funds and the amount allocated to reimburse for the scope of services shall be reduced accordingly. It is the Subrecipient's sole responsibility to be aware of the reporting schedule and to provide the Village with timely reports.

E. Subrecipient will keep and maintain such records and provide such reports and documentation to the Village as the Village deems necessary to further its monitoring obligations.

8. MONITORING AND PERFORMANCE DEFICIENCIES.

A. Village Project Monitoring. The Village will monitor the Subrecipient's planning and implementation of the Project on a periodic basis to determine Subrecipient's compliance with all laws, rules and regulations and to determine whether Subrecipient is adequately performing and operating the Project in accordance with the approved Project guidelines. Subrecipient acknowledges the necessity for such monitoring and agrees to cooperate with the Village in this effort by providing all requested records and information and allowing such on-site visits as the Village determines is necessary to accomplish its monitoring function.

B. Performance Deficiency Procedures. The Village may take such actions as are necessary to prevent the continuation of a performance deficiency, to mitigate, to the extent possible, the adverse effects or consequences of the deficiency, and to prevent a recurrence of the deficiency. The following steps outline the general procedure the Village will use when it becomes aware of a performance deficiency. The Village is not bound to follow these steps. Depending on the seriousness of the deficiency, the Village may take any steps it deems

necessary to address the deficiency, including immediate termination of the Project and any other remedies available by law.

1. When an issue involving a performance deficiency arises, including performance reporting requirements, the Village will first attempt to resolve the issue by informal discussions with the Subrecipient. The Village will attempt to provide Technical Assistance, to the maximum extent practicable, to help the Subrecipient successfully resolve the performance issue.
2. If discussion does not result in correction of the deficiency, the Village will schedule a monitoring visit to review the performance area that must be improved. The Village will provide the Subrecipient with a written report that outlines the results of the monitoring. Generally this report will include a course of corrective action and a time frame in which to implement corrective actions.
3. If, despite the above efforts, the Subrecipient fails to undertake the course of corrective action by the stated deadline, the Village will notify the Subrecipient in writing that its Project is being suspended. CDBG funds may not be expended for any Project that has been suspended.
4. The Village's written suspension notice will include a specified, written course of corrective action and a timeline for achieving the changes. Generally, corrective action plans will require a 15 to 60 day period of resolution (depending upon the performance issue).
5. The Village may lift a suspension when the performance issue has been resolved to the satisfaction of the Village. The Village will release a suspension by written release signed by the Village Manager or her designee.

C. Unresolved Performance Deficiencies. Subrecipient's failure, in whole or in part, to meet the course of corrective action to have a suspension lifted, shall constitute cause for termination pursuant to the procedures set forth in Section 9 below.

9. TERMINATION.

This Agreement may be terminated as follows:

A. By Fulfillment. This Agreement will be considered terminated upon fulfillment of its terms and conditions.

B. By Mutual Consent. The Agreement may be terminated or suspended, in whole or in part, at any time, if both parties consent to such termination or suspension. The

conditions of the suspension or termination shall be documented in a written amendment to the Agreement.

C. Lack of Funding. The Village reserves the right to terminate this Agreement, in whole or in part, in the event expected or actual funding from the Federal government or other sources is withdrawn, reduced or eliminated.

D. For Cause. The Village may terminate this Agreement for cause at any time. Cause shall include, but not be limited to:

1. Improper or illegal use of funds;
2. Subrecipient's suspension of the Project; or
3. Failure to carry out the Project in a timely manner.

E. Termination for Illegality. This Agreement shall be subject to automatic termination due to the Subrecipient's improper or illegal use of the Grant Funds. Notice of termination for illegality shall be provided by the Village to Subrecipient pursuant to Section 18 below.

10. REVERSION OF ASSETS.

A. At the termination of this Agreement, Subrecipient shall transfer to the Village any CDBG funds on hand, and any accounts receivable attributable to the use of CDBG funds.

B. Any real property under Subrecipient's control that was acquired or improved in whole or in part with CDBG funds (including CDBG funds provided to Subrecipient in the form of a loan) in excess of \$25,000 must be either:

1. Used to meet one of the national objectives in Section 570.208 for a period of five years after the expiration of the agreement, or for such longer period of time as determined to be appropriate by the recipient; or
2. If not so used, Subrecipient shall then pay to the Village an amount equal to the current market value of the property, less any portion of the value attributable to expenditures of non-CDBG funds for the acquisition of, or improvement to, the property, which payment shall be considered program income to the Village, as required by law. Such change in use or property disposition will be reported to the Village within 30 days of the intent to dispose of said property. Promissory notes, deeds of trust or other documents may additionally be negotiated as a term for receipt of funds.

C. If Subrecipient intends to dispose of any real property acquired and/or improved with CDBG funds, Subrecipient must report, in writing, to the Village, such intent to dispose of said property 30 days prior to the negotiation and/or agreement to dispose of said property.

D. For a period of 5 years after the Project Year, Subrecipient will provide the Village with an annual report inventorying all real property acquired or improved with CDBG funds and certifying its use in accordance with the CDBG National Objectives.

11. REMEDIES.

A. In the event of any violation or breach of this Agreement by Subrecipient, misuse or misapplication of funds derived from the Agreement by Subrecipient, or any violation of any laws, rules or regulations, directly or indirectly, by Subrecipient and/or any of its agents or representatives, the Village shall have the following remedies:

1. The Subrecipient may be required to repay the Grant Funds to the Village;

2. To the fullest extent permitted by law, the Subrecipient will indemnify and hold the Village harmless from any requirement to repay the Grant Funds to HUD previously received by the Subrecipient for the Project or penalties and expenses, including attorneys' fees and other costs of defense, resulting from any action or omission by the Subrecipient; and

3. The Village may bring suit in any court of competent jurisdiction for repayment of Grant Funds, damages and its attorney's fees and costs, or to seek any other lawful remedy to enforce the terms of this Agreement, as a result of any action or omission by the Subrecipient.

12. INDEPENDENT CONTRACTOR. Subrecipient is and shall remain for all purposes an independent contractor and shall be solely responsible for any salaries, wages, benefits, fees or other compensation which she may obligate herself to pay to any other person or consultant retained by her.

13. NO ASSIGNMENT. Subrecipient shall not assign this Agreement or any part thereof and Subrecipient shall not transfer or assign any Grant Funds or claims due or to become due hereunder, without the written approval of the Village having first been obtained.

14. AMENDMENTS AND MODIFICATIONS.

A. The nature and the scope of services specified in this Agreement may only be modified by written amendment to this Agreement approved by both parties.

B. No such amendment or modification shall be effective unless reduced to writing and duly authorized and signed by the authorized representative of the Village and the authorized representative of the Subrecipient.

15. SAVINGS CLAUSE. If any provision of this Agreement, or the application of such provision, shall be rendered or declared invalid by a court of competent jurisdiction, or by reason of its requiring any steps, actions or results, the remaining parts or portions of this Agreement shall remain in full force and effect.

16. ENTIRE AGREEMENT.

A. This Agreement sets forth all the covenants, conditions and promises between the parties.

B. There are no covenants, promises, agreements, conditions or understandings between the parties, either oral or written, other than those contained in this Agreement.

17. GOVERNING LAW, VENUE AND SEVERABILITY.

A. This Agreement shall be governed by the laws of the State of Illinois both as to interpretation and performance. Venue for any action brought pursuant to this Agreement shall be in the Circuit Court of Cook County, Illinois.

B. If any provision of this Agreement, or the application of such provision, shall be rendered or declared invalid by a court of competent jurisdiction, or by reason of its requiring any steps, actions or results, the remaining parts or portions of this Agreement shall remain in full force and effect.

18. NOTICES.

A. All notices or invoices required to be given under the terms of this Agreement shall be given by United States mail or personal service addressed to the parties as follows:

For the Village:

Grants Supervisor
Village of Oak Park
123 Madison Street
Oak Park, Illinois 60302

For Subrecipient:

Executive Director
Thrive Counseling Center
120 S. Marion Street
Oak Park, IL 60302

B. Either of the parties may designate in writing from time to time substitute addresses or persons in connection with required notices.

19. EFFECTIVE DATE. The effective date of this Agreement as reflected above shall be the date that the Village Manager for the Village of Oak Park executes this Agreement.

20. COUNTERPARTS; FACSIMILE OR PDF SIGNATURES. This Agreement may be executed in counterparts, each of which shall be considered an original and together shall be one and the same Agreement. A facsimile or pdf copy of this Agreement and any signature(s) thereon will be considered for all purposes as an original.

21. CAPTIONS AND SECTION HEADINGS. Captions and section headings are for convenience only and are not a part of this Agreement and shall not be used in construing it.

22. NON-WAIVER OF RIGHTS. No failure of any Party to exercise any power given to it hereunder or to insist upon strict compliance by any other Party with its obligations hereunder, and no custom or practice of the Parties at variance with the terms hereof, shall constitute a waiver of that Party's right to demand exact compliance with the terms hereof.

23. ATTORNEY'S OPINION. If requested, the Subrecipient shall provide an opinion by its attorney in a form reasonably satisfactory to the Village Attorney that all steps necessary to adopt this Agreement, in a manner binding upon the Subrecipient have been taken by the Subrecipient.

24. BINDING AUTHORITY. The individuals executing this Agreement on behalf of the Parties represent that they have the legal power, right, and actual authority to bind their respective Party to the terms and conditions of this Agreement.

**[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK -
SIGNATURE PAGE FOLLOWS]**

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be signed by their duly authorized representatives on the dates set forth below.

VILLAGE OF OAK PARK

THRIVE COUNSELING CENTER

Name: Cara Pavlicek
Title: Village Manager

Name:
Title:

Date: _____, 2020

Date: _____, 2020

ATTEST:

ATTEST:

Name: Vicki Scaman
Title: Village Clerk

Name:
Title:

Date: _____, 2020

Date: _____, 2020

EXHIBIT A
SUBRECIPIENT'S PROPOSAL

Submission #77

[View](#)[Edit](#)[Delete](#)[Printer-friendly version](#)[Previous submission](#)[Next submission](#)[Print](#)[Resend e-mails](#)

Submission information

Form: [Village of Oak Park CDBG Public Services Grant Submission Form](#)

Submitted by thrive

Fri, 2020-02-21 09:52

12.96.230.218

1. Applicant Information

A. Organization Information

1. Organization Name

Thrive Counseling Center

2. Organization Mailing Address

120 S. Marion St., Oak Park, IL 60302

3. Organization Phone

7083837500

4. Executive Director

John Meister

5. Email Address

jmeister@thrivecc.org

6. FEIN

36-2179793

7. DUNS

072327794

B. Project Information

1. Proposed Project Name

Psychiatric Services for Medicaid Clients

2. Proposed Project Address

120 S. Marion St., Oak Park, IL 60302

3. Project Manager/Primary Contact

John Meister

4. Secondary Contact

Sarah Finnegan

5. Proposed Project Phone Number

708-383-7500

6. Email Address

jmeister@thrivecc.org

C. Type of Organization

Private non-profit

D. Project Overview**1. Total CDBG dollars requested**

\$ 25,000

2. Total project budget

\$ 121,790

3. Total Low/Moderate Income Persons Served Annually

In FY19, we served 189 unduplicated individuals, 88 of these were either Medicaid or sliding fee scale client living in Oak Park. For PY20, we project a 5% increase in the project's Psych Medicaid clients to 198, with a corresponding increase in the Oak Park portion of Psych Medicaid clients to 92 clients.

4. Brief project description and purpose

The Psychiatric Services for Medicaid Clients program provides psychiatric and medication management services to LMI clients in order that they may manage their symptoms and lead productive lives.

5. Population Served

51% or more Low/Moderate Persons

6. Did you return any CDBG funds in program year 2018? If yes, explain why.

No

Explanation**7. Do you have a written Oak Park CDBG Policies and Procedures Manual?**

No

2. Project Narrative

I. Background & Need

National and Local Trends

In the United States, nearly one in five U.S. adults lives with a mental illness (46.6 million in 2017), per the National Institute of Mental Health. The disease burden of mental health and substance use disorders was higher than for any other condition in 2015, according to the American Medical Association. In Oak Park, just as across the nation, mental illness affects people's ability to work, build relationships, and contribute to their communities.

Locally, we can point to the Oak Park River Forest Community Health Plan issued in September 2014 as evidence of need. The plan identified Under-Addressed Behavioral Health Needs as a key problem. The plan set a clear goal: by 2030, 95% of Oak Park River Forest residents will have their behavioral health needs met. Thrive, with an array of counseling, psychiatric treatment and medication management, crisis intervention and community education, is a key community partner in achieving this goal.

And yet, availability and affordability remain a primary reason that individuals cannot access psychiatric care. Researchers point to two primary reasons for this: a) a critical shortage of psychiatrists, and b) the limited number of psychiatrists that either private insurance or Medicaid.

A 2017 National Council for Behavioral Health report highlighted the critical current shortage of psychiatrists. By 2025, demand for psychiatric treatment may outstrip supply by 6,090 to 15,600 psychiatrists.

Additionally, the Journal of the American Medical Association (JAMA) Psychiatry reports that 45% of all psychiatrists surveyed do not accept any kind of insurance - meaning that clients must pay the full cash price. A full 57% of do not accept Medicaid. This means that low to moderate income persons are particularly at risk for being unable to obtain psychiatric care, a situation which can have tragic consequences.

The study also indicates that one of the primary reasons that psychiatrists do not accept Medicaid is low reimbursement rates. Thus, any agency or practice providing psychiatric services to Medicaid clients is doing so at a loss. Taken together, the JAMA survey revealed that, despite the requirements of the federal parity law, people encountered significant barriers to receiving psychiatric services.

Thrive's commitment

As a community mental health agency, Thrive Counseling Center believes it is critical to our community that we continue to provide an affordable option for psychiatric care. Thrive offers these services at a financial loss, but feels strongly that psychiatric services are essential in a robust community mental health program. PCC Wellness, the only comparable community mental health provider in Oak Park, has no psychiatrists on staff and just one APN in Oak Park who provides psychiatric medication management services. Thrive believes it is essential to the Oak Park community that we

Last year, we discussed the Behavioral Health Consortium meeting in June 2017. At that

gathering, key stakeholders from Oak Park and River Forest came together to discuss behavioral health problems in our communities. In response to this meeting, Thrive added a second psychiatrist to our staff to expand our capacity.

More recently, Thrive launched a “tele-psych” option for clients who have difficulty coming to us, either due to severe depression and related symptoms or to a simple lack of transportation. We will continue to strive to expand our psychiatric services; since the program operates at a loss, the availability of funding is a key challenge.

II. Approach

a. Purpose

The purpose of our program is to provide psychiatric and medication management services to all clients who will benefit from psychiatric care as determined by our psychiatric staff regardless of income levels. We currently have four staff members dedicated to providing psychiatric services to our clients. In FY19, Thrive provided psychiatric services to 405 unduplicated clients. This particular program targets only those clients who use Medicaid as their health care insurance provider, typically due to the lack of any insurance. This project meets the national objective of serving LMI persons as, in order to qualify for Medicaid, an individual must prove their low-to-moderate income status per HUD guidelines.

In FY19, we served 189 unduplicated individuals, 88 of these were either Medicaid or sliding fee scale client living in Oak Park. For PY20, we project a 5% increase in the project's Psych Medicaid clients to 198, with a corresponding increase in the Oak Park portion of Psych Medicaid clients to 92 clients.

b. Target Populations

The target population for this program is lower income adults aged 18 and over requiring psychiatric services. Clients will only be excluded from this program if the clinical evidence indicates that receiving psychiatric services would not be beneficial.

Our clients are ethnically and racially diverse. Our staff is culturally competent to serve this diverse population. Thrive's Lead Psychiatrist, Dr. Ann Sarpy, is a highly qualified African American woman with over 20 years of clinical experience. Our second psychiatrist, Dr. Renu Gupta, is an Asian Indian American woman experienced in telepsych to serve home-bound patients. Our third prescriber, Dr. Michelle Heyland, is a Psychiatric Nurse Practitioner with over 10 years of experience as a psychiatric nurse serving diverse populations in a variety of medical settings. Finally, our fourth professional, Nancy O'Connell, is a Psychiatric Registered Nurse with significant experience in adolescent and adult psychiatry in settings such as Hartgrove and Riveredge hospitals.

c. Strategies

Individuals who receive psychiatric services enter our program in one of two ways – either they are already clients receiving therapy services at the agency or they come to us specifically seeking psychiatric services. Whether a Thrive therapist refers a current client or a person comes to us through outside sources, each potential psychiatric client will have a client centered evaluation. The Department of Healthcare and Family Services (HFS) requires that every person receiving behavioral health services in the state of Illinois be assessed using the Integrated Assessment and Treatment Planning (IATP) tool. This assessment is repeated every

six months for ongoing patients. If it is determined during the assessment and treatment planning phase that a patient may benefit from the prescription of psychotropic medication, the client will be referred to one of Thrive's staff psychiatrists or our Advanced Practice Nurse (APN). If after a complete Initial Psychiatric Evaluation (IPE), the prescription of medications is deemed appropriate, the psychiatrist/APN will meet with the patient as often as needed to establish the medication regimen. Subsequently, clients will see the treating practitioner at regular intervals for medication management visits. Some clients will reach a stage where they no longer require psychotropic medication, but the majority of clients receiving psychiatric treatment do not exit the program. The goal for those clients is to reach the maintenance phase of their treatment, meaning their symptoms are managed and they see the prescriber every three months for evaluation.

d. Timeline

Use the attached chart format with applicant having the ability to complete the fields.

III. Outcomes & Evaluation

a. Goal Statement

The goals for clients entering the Psychiatric Services program are symptom management, reduced hospitalizations due to mental health issues, increased independence and an overall sense of emotional well-being.

b. Narrative

1. Ensuring Outputs/Outcomes

Outputs are documented by Thrive staff as detailed below:

Outputs/Activities: Clinical documentation is required for each of these activities. All documentation is entered in the agency's electronic health record (EHR) system, CareLogic. Quantitative reports are generated by Accounting Specialist, Mark Wallace, and reviewed by Clinical Director, Cicely Johnson, LCSW and Laura Palmer, Operations Director. Our internal utilization review, completed monthly by Janet Mankoff, LCSW, reviews this documentation regarding regulatory requirements and qualitative, best practice standards.

Outputs/Participation: During point of entry, a client's insurance status and residency are collected by the agency's intake staff (department manager, Angelica Kauffmann, LCSW) and entered in the EHR. At the first appointment during orientation, the client is required to provide proof of residency and their Medicaid card. This data is stored in the client's confidential record in the EHR. During billing cycles, client eligibility is checked to ensure claims are valid and no changes to insurance coverage have been made.

Outcomes are documented by Thrive staff as detailed below:

Indicators for Short-term Outcomes: Accounting Specialist, Mark Wallace generates a report for each client indicating the number of IATP's completed and the number of medication monitoring sessions attended during the defined timeframe. Summary quarterly reports are also submitted to the Village to report these indicators.

Indicators for Intermediate/Long-term Outcomes: We also seek longer term recovery and stability of a client's psychiatric status. Attendance at medication management is monitored via our CoreLogic EMR tracking of attendance at medication monitoring

sessions with their care provider. Further, Thrive's Perception of Care Survey (Client feedback Tool), we track client responses to the question "The psychiatric staff's ability to address my psychiatric concerns is..." We seek a rating of Good, Very Good or Excellent from at least 80% of our Psychiatry Medicaid clients" in the annual survey.

2. Documenting Income

We have defined this program as serving only those clients who qualify for an Illinois Medicaid program. This is an accurate measure for ensuring that the beneficiaries are LMI persons. We verify the insurance coverage for every new client before they enter treatment.

The Medicaid status for ongoing clients is verified monthly. Thrive outsources its billing activities. Claims are processed at minimum once per month. Each time a claim is processed, a client's medical insurance is verified. If a client has for some reason lost their Medicaid status, we would be notified by our billing service.

All client information is kept in the client's individual electronic health record (HER) within CareLogic. Only clinicians and certain support staff have access to CareLogic. Each time a staff member accesses the system they must login with their personal credentials. Our network security is maintained by our IT team at Network it Easy.

3. Evaluation Process

Thrive's Program Evaluation process is detailed below:

Outcome reports are completed every 6 months in the areas of efficiency, effectiveness, and access; annually for satisfaction. Each program has an established set of criteria based on best practice standards/CARF regulations. Data collection/analysis is completed by Operations Staff (data, Mark Wallace and analysis, Laura Palmer). Clinical staff reviewed and revised the criteria for each area in 2019 to ensure consistency with national standards.

The results of the reports are shared with staff and plans for improvement, as needed, are developed and monitored by Clinical Program Managers and the Clinical Director.

One example of an improvement in our program resulting from this regular evaluation is reduced wait times for services. We continue to address this issue through increased efficiencies in our intake process, targeted recruitments to match clinical credentials and insurance paneling with client demand, and an increased emphasis on solution-focused therapy wherever appropriate.

Thrive's Psychiatric Services Participant Feedback process is detailed below:

The Integrated Assessment and Treatment Planning (IATP) process is repeated every six months. The IATP is a collaborative process between the client and their primary therapist. Our "psychiatric only" clients are also assigned a primary therapist to complete this process biannually.

At each medication management visit, the clients provide feedback to the prescriber about the effectiveness of the prescribed medication. Adjustments are made as needed based on client feedback and the prescriber's medical expertise

The third piece in the client feedback process is the annual “Perception of Care Survey.” As noted above, all Thrive clients are asked to complete this feedback survey once per year.

The final aspect of the client feedback process is a formal discharge summary. Many psychiatric clients are ongoing and are never formally discharged from the program, but if they are the summary will be completed by the primary therapist.

IV. Organization Capacity

a. Mission & Experience

The mission of Thrive Counseling Center is to build healthy minds, families, and communities by empowering people to attain mental and emotional well-being. Hope, resilience, and recovery form the heart of our programs and services.

For 120 years, Thrive has been a pioneer in developing programs and services that meet the changing needs of individuals and families in the community. In 1972, Thrive recognized a need in the community and began offering psychiatric services. Increased demand for these services is certainly a measure of success and our program has expanded over time to help address this demand. We now have four psychiatric staff members:

Ann Sarpy, MD has been Thrive’s Lead Psychiatrist since 2003. She graduated from the University of Illinois, College of Medicine. She did her psychiatric residency at the University of Illinois Hospital in Chicago. Ann received her board certification from the American Board of Psychiatry and Neurology in 1996.

Renu Gupta, MD was hired this past year to support Thrive’s psychiatric services program. She has extensive experience in medication management and telepsychiatry as well as inpatient psychiatry. Dr. Gupta has more than thirty years of psychiatric experience.

Dr. Michelle Heyland DNP, APN, PMHNP-BC is a Psychiatric Nurse Practitioner and Assistant Professor at Rush University College of Nursing. She has been employed at Thrive on a part-time basis since 2017.

Nancy O’Connell, formally an ED Psychiatric Nurse at Northwestern Memorial Hospital, joined Thrive on a part-time basis in 2016.

b. Ability to Meet Reporting Requirements

Thrive receives operating funds from various public entities including the Department of Human Services (DHS), the Community Mental Health Board of Oak Park Township (CMHB), the Oak Park Police Department, and the River Forest Township. We must report to these entities on a regular, ongoing basis.

Thrive received \$12,000 in funding from CDBG in FY19 to support our psychiatric services for Oak Park Medicaid client. Thrive reports frequently to dozens of funders, both public and private. In FY19, Thrive received approximately \$232,000 in local, state and federal grants and nearly \$320,000 in private grants and donations. We report on the funded programs’ finances, activities, and outcomes in order to substantiate our progress in meeting the intended program goals, to the respective funders. Additionally, Thrive has

hired a development director with 30 years of experience to help monitor reporting activities and a new clinical director to evaluate assessment tools and help ensure high quality standards in all Thrive services.

As reported previously, two years ago we were awarded a grant from the Healthy Communities Foundation for alcohol and substance abuse clients, anticipating DASA certification. We ran into some hurdles in this pursuit and were unable to become DASA certified in that timeframe. We contacted HCF and asked to use the awarded funds for an alternate program. This was approved and we reported accordingly.

c. Collaboration with Others

Thrive benefits from various partnerships in our community. Most of our collaborations are not directly linked to our psychiatric program but certainly are connected. We do not have formal agreements, however, related to these partnerships.

Thrive has provided psychiatric services to our community for almost fifty years. As the primary provider of out-patient psychiatric care for publicly insured persons in our community, we are committed to providing the best care. In fact, surrounding communities look to Oak Park and Thrive to receive these services. Since many community mental health agencies struggle to maintain psychiatric programs, we receive numerous referrals. We are the "provider of last resort" for Medicaid clients in this community.

Thrive is also listed as a community partner on the Health Connection HUB, which is a resource to connect community members to quality care and services. The HUB is funded and supported by the Community Mental Health Board of Oak Park Township, Healthy Communities Foundation, and River Forest Township.

Currently, Thrive has a formal partnership with the Oak Park and River Forest Police Departments offering 24/7 crisis intervention services. Since 1995, our services have assisted the Oak Park Police department in helping persons with mental illness in need of crisis services on site, in home and within the community. Many of these crisis interventions result in new clients for Thrive, some of whom receive psychiatric services.

While not relevant to the psychiatric program, has established other partnerships in the community. Thrive collaborates with Hephzibah Children's Association. As a support for youth with specialized needs, Thrive reserves therapy appointments specifically for referrals from this local non-profit providing trauma focused therapy to youth in the foster care system. Thrive also continues to partner with the River Forest Township to offer Sibshops, which is a program specially designed for brothers and sisters of kids with special needs, which can include developmental and physical disabilities or emotional and mental health challenges.

Thrive is also a member of various committees and task force initiatives which support the local community as well as support advocacy efforts at the State and National Levels. Thrive is a founding member and a Thrive staff member currently chairs the local Opioid Task Force. This group organizes and helps implement the communities' efforts to combat opioid overdoses in collaboration with local and Chicagoland members. Additionally, Thrive is a member of the local Behavioral Health Consortium. This consortium brings together all local service providers to support coordinated care for all agency clients based

on their needs. Thrive is also a member of the Oak Park and River Forest Suicide Prevention/Mental Health Awareness Task Force seeking to reduce suicides in our community and mental health stigma.

V. Budget Narrative

a. Budget Description

CDBG funding will be used to support part of four positions – all contracted part-time medical personnel (2 psychiatrist MDs, APN and RN). Total project costs for the four staff persons are \$121,790, including \$120,400 in personnel costs and \$1,390 in direct program costs. The project's personnel costs represent 46.6% of these four staff member's time and earnings.

The requested CDBG grant of \$25,000 would cover 20.8% of the total compensation expense. Oak Park residents account for 88 (46.6%) of the 189 Medicaid clients who benefit from the services. In FY19, Oak Park residents accounted for 88 (46.6%) of the 189 Medicaid clients who benefit from the services. For PY20, we project a 5% increase in the project's Psych Medicaid clients to 198, with a corresponding increase in the Oak Park portion of Psych Medicaid clients to 92 clients.

b. Alternate Revenue Sources

The majority of Thrive's programs operate at a deficit as there is a gap between salaries/operating costs and the rate of reimbursement of various insurance plans whether public or private. Thrive applies for numerous grants, both public and private, each year. Our success in obtaining grants, combined with significant private fundraising, enables us to continue operating our current programs and add new ones each year. Thrive is also fortunate to have an endowment fund which provides some financial stability for the agency. Funding our programs is an ongoing challenge which we must address continuously. The Psychiatric Services for Medicaid Clients program will be funded by a combination of public and private grants, as well as private fundraising. CDBG funds would be extremely valuable in helping support this program.

3. Attachments

Timeline

[thrive cdbg public services timeline form 1.pdf](#)

Logic Model

[thrive py20 logic model chart.pdf](#)

Articles of Incorporation and By-Laws

[thrive articles of inc and bylaws.pdf](#)

Non-Profit Determination (IRS Letter)

[thrive_non-profit_determination_letter.pdf](#)

List of Board of Directors

[thrive_board_list_nov_2019.pdf](#)

Organizational Chart

[org_chart_feb2020.pptx](#)

Resumes

[thrive_key_personnel_resumes.pdf](#)

Financial Statement and Audit

[thrive_fy18_audit_and_fy20_budget.pdf](#)

Conflict of Interest Statement

[thrive_conflict_of_interest_statement.pdf](#)

Anti-Lobbying Statement

[thrive_anti-lobbying_statement.pdf](#)

EEO Form

[thrive_eeo_report.pdf](#)

Statement of ADA Compliance

[thrive_ada_reasonable_accommodations_11.18_rev.doc](#)

Intake Documentation

[thrive_intake_form_demographics.pdf](#)

Support Statements

Budget Worksheet

[thrive_py_2020_cdbg_public_svcs_project_budget-other_revenue_summary.pdf](#)

Project Client-Evaluation Tool

[thrive_client_feedback_tool.pdf](#)

4. Proposal Agency Information & Verifications

1. Name of Authorized Official of Applicant Organization

John Meister

2. Title of Authorized Official of Applicant Organization

Executive Director

3. Date of Submittal

Fri, 2020-02-21

4. Affirmation

I agree

[Previous submission](#)

[Next submission](#)



PY 2020 CDBG Public Services

As with all application components, please carefully read the Instructions

Organization	Thrive Counseling Center
Project Name	Psychiatric Services for Medicaid Patients

Goal Statement: The goals for clients entering the Psychiatric Services program are symptom management, reduced hospitalizations due to mental health issues, increased independence and an overall sense of emotional well-being.

Inputs	Outputs		Outcomes		Measurement/Indicator for Short Term Outcomes
	Activities	Participation	Short Term	Intermediate/Long Term	
Outpatient Psychiatric Services Staff	Client centered assessment/individualized treatment plan (IATP)	198 Total unduplicated persons served (without regard to income or residency)	Symptom reduction/treatment adherence	Recovery/Maintenance	Number of IATP completed
Ann Sarpy, MD	-completed @ onset of treatment and reviewed every 6 months	198 Extremely Low, Low and Mod-Income Persons served	Reduction of inpatient hospitalizations	Improve quality of life (social skills, vocational skills, use of natural/community supports)	Number of medication monitoring sessions attended
Renu Gupta, MD	Initial Psychiatric Evaluation (IPE)	92 Oak Park persons served		Improve overall functioning	80% of clients rate "The psychiatric staff's ability to address my psychiatric concerns is... 'Good,' 'Very Good,' or 'Excellent'"
Michelle Heyland, APN	-completed @ onset of treatment				
Nancy O'Connell, RN	Psychiatric Treatment -medication management and training	92 Extremely Low, Low and Mod-Income Oak Park Persons Served			



PY 2020 Timeline, CDBG Public Services

As with all application components, please carefully read the Instructions

Organization	Thrive Counseling Center
Project Name	Psychiatric Services for Oak Park LMI Residents

Month 1	Receive notice of award; execute documentation Intake and Integrated Assessment Treatment Plan (IATP) - requires 2-4 therapy sessions	John Meister New Clients: Assigned staff therapist Existing clients: Current therapist
Month 2	Initial Psychiatric Evaluation (IPE) – requires 1 sessions (if deemed appropriate next step after IATP)	One of three staff prescribers
Month 3	Medication prescription (if deemed appropriate next step after IATP and IPE)	One of three staff prescribers
Month 3	Prepare quarterly grant recipient report Prepare invoice for Qtr 1	Finance and Development Staff Finance and Development Staff
Month 4	Ongoing medication management visits – goals include increased symptom management, reduced hospitalizations, increased independence	One of three staff prescribers
Month 5	Ongoing medication management visits	One of three staff prescribers
Month 6	Ongoing medication management visits	One of three staff prescribers
Month 6	Prepare quarterly grant recipient report Prepare invoice for Qtr 2	Finance and Development Staff Finance and Development Staff
Month 7	Ongoing medication management visits IATP - required every 6 months	One of three staff prescribers Therapist and Prescriber
Month 8	Ongoing medication management visits	One of three staff prescribers
Month 9	Ongoing medication management visits	One of three staff prescribers
Month 9	Prepare quarterly grant recipient report Prepare invoice for Qtr 2	Finance and Development Staff Finance and Development Staff
Month 10	Ongoing medication management visits	One of three staff prescribers
Month 11	Ongoing medication management visits	One of three staff prescribers
Month 12	Conduct Client Perception of Care Survey	Operations Staff
Month 12	Prepare annual grant recipient report Prepare invoice for 4th Qtr	Finance and Development Staff Finance and Development Staff

WORKBOOK CONTAINS BOTH THE *PROJECT BUDGET* & THE *OTHER REVENUE SUMMARY* .

COMPLETE BOTH SECTIONS AND ATTACH THIS DOCUMENT TO YOUR PROPOSAL

PY 2020 PROPOSED PROJECT BUDGET. Project budget must include the entire project funding even if CDBG is only funding a portion of the activity. You must limit your amount/percentage of Oak Park CDBG funds requested to match or be less than the proportional amount of Oak Parkers to Non-Oak Parkers served.

	1	2	3		4	5	6	7	8
Project Expenses	Total Project Costs	CDBG Request Amount	CDBG % of Total Cost		Other Revenue List Source	Other Revenue List Source	Other Revenue List Source	Total Other Revenues	Other Revenues % of Costs
Please ensure that percentages, subtotals & totals are listed.				Funding Source:					
<i>Personnel Costs</i>									
Salaries	\$0	\$0	#DIV/0!					\$0	0%
Benefits	\$0	\$0	#DIV/0!					\$0	0%
Taxes	\$0	\$0	#DIV/0!					\$0	0%
Medical Staff	\$120,400	\$25,000	21%		\$43,800	\$51,600		\$95,400	79%
Other (Identify)	\$0	\$0	#DIV/0!					\$0	0%
<i>Subtotal: Personnel Costs</i>	\$120,400	\$25,000	21%		\$43,800	\$51,600	\$0	\$95,400	79%
<i>Operating Costs:</i>									
Rent/Lease	\$0	\$0	#DIV/0!					\$0	0%
Utilities	\$0	\$0	#DIV/0!					\$0	0%
Telephone	\$0	\$0	#DIV/0!					\$0	0%
Postage	\$0	\$0	#DIV/0!					\$0	0%
Supplies	\$0	\$0	#DIV/0!					\$0	0%
Mileage	\$0	\$0	#DIV/0!					\$0	0%
Medical Supplies	\$570	\$0	0%			\$570		\$570	100%
Telepsyche Tech	\$820	\$0	0%			\$820		\$820	100%
<i>Subtotal: Operations</i>	\$1,390	\$0	0%		\$0	\$1,390	\$0	\$1,390	100%
<i>Professional/Services</i>									
Consultant	\$0	\$0	#DIV/0!					\$0	0%
Engineering	\$0	\$0	#DIV/0!					\$0	0%
Other (Identify)	\$0	\$0	#DIV/0!					\$0	0%
<i>Subtotal: Professional Services</i>	\$0	\$0	#DIV/0!		\$0	\$0	\$0	\$0	0%
TOTAL (all categories)	\$121,790	\$25,000	21%		\$43,800	\$52,990	\$0	\$96,790	79%

PY 2020 CDBG OTHER REVENUE SUMMARY

This chart provides more information about "Other Revenue" sources that were listed above in columns F, G & H. Please **fully** complete this table. The columns are self-explanatory

1	2	3	4	5	6	7
FUNDING SOURCE	LOAN OR GRANT?	FUNDING AMOUNT	FUNDING STATUS	DATE AVAIL.	FUNDING RESTRICTIONS	TYPE: Federal, State/Local or Private?
Medicaid Fees		\$43,800	Ongoing		None	State
Private Fundraising/ Endowment Allocat.		\$52,990	Ongoing		None	Private
		\$0				
		\$0				
		\$0				
		\$0				
		\$0				
		\$0				
TOTAL; where applicable		\$96,790				

WORKBOOK CONTAINS BOTH THE PROJECT BUDGET & THE OTHER REVENUE SUMMARY .

*******REVISED BUDGET*******

COMPLETE BOTH SECTIONS AND ATTACH THIS DOCUMENT TO YOUR PROPOSAL

PY 2020 REVISED PROJECT BUDGET. Project budget must include the entire project funding even if CDBG

is only funding a portion of the activity. You must limit your amount/percentage of Oak Park CDBG

funds requested to match or be less than the proportional amount of Oak Parkers to Non-Oak Parkers served.

	1	2	3		4	5	6	7	8
Project Expenses	Total Project Costs	CDBG Request Amount	CDBG % of Total Cost		Other Revenue -List Source	Other Revenue -List Source	Other Revenue List Source	Total Other Revenues	Other Revenues % of Costs
Please ensure that percentages, subtotals & totals are listed.				Funding Source:					
Personnel Costs									
Salaries	\$0	\$0	#DIV/0!					\$0	0%
Benefits	\$0	\$0	#DIV/0!					\$0	0%
Taxes	\$0	\$0	#DIV/0!					\$0	0%
Medical Staff	\$120,400	\$13,500	11%		\$43,800	\$63,100		\$106,900	89%
Other (Identify)	\$0	\$0	#DIV/0!					\$0	0%
Subtotal: Personnel Costs	\$120,400	\$13,500	11%		\$43,800	\$63,100	\$0	\$106,900	89%
Operating Costs:									
Rent/Lease	\$0	\$0	#DIV/0!					\$0	0%
Utilities	\$0	\$0	#DIV/0!					\$0	0%
Telephone	\$0	\$0	#DIV/0!					\$0	0%
Postage	\$0	\$0	#DIV/0!					\$0	0%
Supplies	\$0	\$0	#DIV/0!					\$0	0%
Mileage	\$0	\$0	#DIV/0!					\$0	0%
Medical Supplies	\$570	\$0	0%			\$570		\$570	100%
Telepsyche Tech	\$820	\$0	0%			\$820		\$820	100%
Subtotal: Operations	\$1,390	\$0	0%		\$0	\$1,390	\$0	\$1,390	100%
Professional/Services									
Consultant	\$0	\$0	#DIV/0!					\$0	0%
Engineering	\$0	\$0	#DIV/0!					\$0	0%
Other (Identify)	\$0	\$0	#DIV/0!					\$0	0%
Subtotal: Professional Services	\$0	\$0	#DIV/0!		\$0	\$0	\$0	\$0	0%
TOTAL (all categories)	\$121,790	\$13,500	11%		\$43,800	\$64,490	\$0	\$108,290	89%

PY 2020 CDBG OTHER REVENUE SUMMARY

This chart provides more information about "Other Revenue" sources that were listed above in columns F, G & H.

Please **fully** complete this table. The columns are self-explanatory

1	2	3	4	5	6	7
FUNDING SOURCE	LOAN OR GRANT?	FUNDING AMOUNT	FUNDING STATUS	DATE AVAIL.	FUNDING RESTRICTIONS	TYPE: Federal, State/Local or Private?
Medicaid Fees		\$43,800	Ongoing		None	State
Private Fundraising/ Endowment Allocat.		\$64,490	Ongoing		None	Private
		\$0				
		\$0				
		\$0				
		\$0				
		\$0				
		\$0				
TOTAL, where applicable		\$108,290				

Agency Name: Thrive Counseling Center

PY 2020 CDBG, Revised Post Award

a. Budget Description

CDBG funding will be used to support part of four positions – all contracted part-time medical personnel (2 psychiatrist MDs, APN and RN). Total project costs for the four staff persons are \$121,790, including \$120,400 in personnel costs and \$1,390 in direct program costs. The project's personnel costs represent 46.6% of these four staff member's time and earnings.

The awarded CDBG grant of \$13,500 would cover 11% of the total compensation expense. In PY20, we project that Oak Park residents will account for 92 (46.5%) of the 198 clients to benefit from the services. This represents a 5% increase from PY19 in the project's Psych Medicaid clients, with a corresponding increase in the Oak Park portion of Psych Medicaid clients.

EXHIBIT B - ASSURANCES

Subrecipient hereby certifies that it will comply with the regulations, policies, guidelines and requirements with respect to the acceptance and use of Grant Funds in accordance with the Housing and Community Development Act of 1974 ("Act"), as amended, and will receive Grant Funds for the purpose of carrying out eligible community development activities under the Act, and under regulations published by the U.S. Department of Housing and Urban Development at 24 CFR Part 570. Also, Subrecipient certifies with respect to its receipt of Grant Funds that:

1. Its governing body has duly adopted or passed as an official act, a resolution, motion or similar action authorizing the person identified as the official representative of Subrecipient to execute the agreement, all understandings and assurances contained therein, and directing the authorization of the person identified as the official representative of Subrecipient to act in connection with the execution of the agreement and to provide such additional information as may be required.
2. Subrecipient shall conduct and administer the Project for which it receives Grant Funds in compliance with:
 - a. Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and implementing regulations issued at 24 CFR Section 1 (24 CFR 570.601(a)(1);
 - b. Title VIII of the Civil Rights Act of 1968 (P.L. 90-284), as amended; and that the Subrecipient will administer all programs and activities related to housing and community development in a manner to affirmatively further fair housing (24 CFR 570.601(a)(2))
 - c. Executive Order 11063, as amended by Executive Order 12259 (3 CFR, 1959-1963 Comp., p. 652; 3 CFR, 1980 Comp., p. 307) (Equal Opportunity in Housing), and implementing regulations in 24 CFR part 107. [24 CFR 570.601(b)].
 - d. Section 109 of the Housing and Community Development Act, prohibiting discrimination based on of race, color, national origin, religion, or sex, and the discrimination prohibited by Section 504 of the Rehabilitation Act of 1973 (P.L. 93-112), and the Age Discrimination Act of 1975 (P.L. 94-135), as amended and implementing regulations when published. (24 CFR 570.602);
 - e. The employment and contracting rules set forth in (a) Executive Order 11246, as amended by Executive Orders 11375, 11478, 12086, and 12107 (3 CFR 1964-1965 Comp. p. 339; 3 CFR, 1966-1970 Comp., p. 684; 3 CFR, 1966-1970., p. 803; 3 CFR, 1978 Comp., p. 230; 3 CFR, 1978 Comp., p. 264 (Equal Employment Opportunity), and Executive Order 13279 (Equal Protection of the Laws for Faith-Based and Community Organizations), 67 FR 77141, 3 CFR, 2002 Comp., p. 258; and the implementing regulations at 41 CFR chapter 60; and

f. The employment and contracting rules set forth in Section 3 of the Housing and Urban Development Act of 1968, as amended and implementing regulations at 24 CFR part 135; 24 CFR 570.607.

g. The Uniform Administrative Requirements and Cost Principles set forth in 2 CFR 200.

h. The conflict of interest prohibitions set forth in 24 CFR 570.611.

i. The eligibility of certain resident aliens requirements in 24 CFR 570.613.

j. The Architectural Barriers Act and Americans with Disabilities Act requirements set forth in 24 CFR 570.614.

k. The Uniform Administrative Requirements in 2 CFR 200.

l. Executive Order 11063, Equal Opportunity in Housing, as amended by Executive Orders 11375 and 12086, and implementing regulations at 41 CFR Section 60.

3. All procurement actions and subcontracts shall be in accordance with applicable local, State and Federal law relating to contracting by public agencies. For procurement actions requiring a written contract, Subrecipient may, upon the Village's specific written approval of the contract instrument, enter into any subcontract or procurement action authorized as necessary for the successful completion of this Agreement. Subrecipient will remain fully obligated under the provisions of this Agreement notwithstanding its designation of any third party to undertake all or any of the Project. Subrecipient may not award or permit an award of a contract to a party that is debarred, suspended or ineligible to participate in a Federal program.

Subrecipient will submit to the Village, the names of contractors, prior to signing contracts, to ensure compliance with 24 CFR Part 24, "Debarment and Suspension."

4. It has adopted and is enforcing:

a. A policy prohibiting the use of excessive force by law enforcement agencies within its jurisdiction; against any individuals engaged in non-violent civil rights demonstrations; and

b. A policy of enforcing applicable State and local laws against physically barring entrance to or exit from a facility or location which is the subject of such non-violent civil rights demonstrations within its jurisdiction.

5. To the best of its knowledge and belief no Federal appropriated funds have been paid or will be paid, by or on behalf of it, to any person for influencing or attempting to influence an officer or employee of Subrecipient, a Member of Congress, an officer or employee of Congress,

or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

EXHIBIT C
VILLAGE OF OAK PARK REAFFIRMATION OF EQUAL EMPLOYMENT OPPORTUNITY POLICY
(EEO)

APPENDIX V

REAFFIRMATION STATEMENT

MARCH 31, 1987

**REAFFIRMATION OF
EQUAL EMPLOYMENT OPPORTUNITY POLICY (EEO)
VILLAGE OF OAK PARK**

It is the policy of the Village of Oak Park to afford equal opportunity in employment to all individuals, regardless of race, color, religion, age, sex, national origin, sexual orientation, disability, or status as a disabled veteran or Vietnam era veteran. The Village is committed to this policy because of legal requirements set forth in the Civil Rights Act of 1964 and the Equal Employment Opportunity Act of 1972, and because such principles are fundamental to Oak Park's existence as a racially and culturally diverse community. Equal Employment Opportunity within the Village government is essential if Oak Park is to effectively pursue community-wide goals of racial diversity and increased economic opportunity. EEO is, therefore, a legal, social, moral and economic necessity for the Village of Oak Park.

Chapter 13, Article III of the Code of the Village of Oak Park expressly prohibits discrimination in hiring, terms and conditions of employment, and promotions. Appeal procedures set forth in the Village Personnel Manual provide a mechanism for reporting any such practice to the Village Manager, who is empowered to hold hearings and issue decisions on such matters in behalf of the Village.

Policy statements alone are not sufficient, however, to address longstanding social barriers which have resulted in under-utilization of the skills and abilities of certain groups within our society. The Village of Oak Park, therefore, embraces a policy of affirmative recruitment, whereby specific efforts are made to attract and retain qualified female, minority, and disabled employees in the Village work force.

Responsibility for administering the Village of Oak Park's Equal Employment Opportunity/Affirmative Recruitment Plan lies with the Village Manager, who is assisted by the Human Resources Director in implementing policies which ensure Equal Employment Opportunity within the Village work force. Ultimately, however, the Village's EEO/affirmative recruitment efforts will succeed only with the cooperation of all Village employees. Each of us is responsible for creating a work environment which encourages full participation by women, minorities and the disabled. Each of us is responsible for forging a Village work force that reflects the diversity of our community and utilizes the best talent available for serving the residents of Oak Park.



**Carl Swenson
Village Manager**

*Village of Oak Park
Personnel Manual*

Adopted 3/31/87

Exhibit D: PY 2020 Quarterly Report Form, Oak Park CDBG Program

Subrecipient:	
Project Name:	
Prepared by:	Email:

Accomplishment Narrative: Describe your successes and challenges meeting your project goals this quarter, or for entire year if at the Final stage.

Beneficiaries by Race and Ethnicity <i>All unduplicated persons served during the reporting period should be included. Do not count a person in more than one quarter. If a person identifies as Hispanic, they also need to be counted under a race</i>	Q1		Q2		Q3		Q4		TOTAL	
	RACE (Including Hispanic)	ETHNICITY Hispanic	RACE (Including Hispanic)	ETHNICITY Hispanic	RACE (Including Hispanic)	ETHNICITY Hispanic	RACE (Including Hispanic)	ETHNICITY Hispanic	RACE (Including Hispanic)	ETHNICITY Hispanic
White									0	0
Black/African American									0	0
Asian									0	0
American Indian or Alaska Native									0	0
Native Hawaiian or Other Pacific Islander									0	0
American Indian or Alaska Native AND White									0	0
Asian AND White									0	0
Black/African American AND White									0	0
American Indian /Alaska Native AND Black/African American									0	0
Other Multi-Racial									0	0
0	0	0	0	0	0	0	0	0	0	0

Income Levels	Total Oak Park Extremely Low/Low/Moderate Income Beneficiaries (0-80% median income)			
	Total Oak Park Resident Beneficiaries	Total Oak Park Extremely Low/Low/Moderate Income Beneficiaries (0-80% median income)		
The total should equal the number from the Race and Ethnicity count above.		Q1	Q2	Q3
Extremely low (0-30% of median income)				
Low (31-50%)				
Moderate (51-80%)				
Non-Low/Moderate (81%+)				
Total	0	0	0	0
Percent Low/Moderate	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Project Goals	
Total of all persons benefitting (without regard to income or residency)	0
Number of all Extremely Low, Low and Moderate income persons to be served	0
Percentage of LMI benefit	#DIV/0!
Number of all Oak Park persons benefitting	#DIV/0!
Percentage of Oak Park persons benefitting	
Number of Extremely Low, Low and Moderate Income Oak Park persons to be served	0

Exhibit E: PY 2020 Final Report Form, Oak Park CDBG Program

FINAL REPORT COMPONENT (Please explain even if you exceeded goals)

Did the beneficiary number change from the number proposed in the original application? If so, why?

Funds Expended on CDBG Activity	
Total CDBG Project Funds Expended	
Other funds expended and their source:	
Other Federal	
HUD Funding (non-CDBG)	
State	
Local government	
Private	
Other (specify source) in-kind food donations	
Total	0
Total All funds	0

Signature of Authorized Official	Typed or Printed Name	Date