



AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

NAME OF AGENCY			
National Alliance on Mental Illness – Cook County North Suburban (NAMI CCNS)			
CONTACT PERSON AND TITLE			
Nathaniel Ekman (Executive Director)			
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8324 Skokie Blvd.			
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www.namiccns.org			
NO. OF YEARS IN EXISTENCE		TOTAL AGENCY FUNDING REQUEST FOR PROPOSED YEAR	
30		\$ 20,000	
PROGRAMS REQUESTING FUNDING	AMOUNT RECEIVED LAST YEAR	\$ AMOUNT FOR PROPOSED YEAR	FUNDED BY TOWNSHIP SINCE? (Estimate of Year OK)
1. <u>Family Education</u>	<u>\$20,000 / General</u>	<u>\$ 6,000</u>	<u>2012</u>
2. <u>Community Education</u>	<u>\$20,000 / General</u>	<u>\$ 6,000</u>	<u>2012</u>
3. <u>Peer & Family Support</u>	<u>\$20,000 / General</u>	<u>\$ 4,000</u>	<u>2012</u>
4. <u>Direct Support / Warm Line</u>	<u>\$20,000 / General</u>	<u>\$ 4,000</u>	<u>2012</u>



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Eligibility Criteria For Funding

New Trier Township General Statement of Policy:

- **Each agency/program requesting funding from the Township will be referred to either the Agency Oversight Committee, the Mental Health Committee, or the Money Follows the Person Committee of the Township. Those committees will make funding and agency/program recommendations to the New Trier Township Board of Trustees. You will be notified of their final decisions sometime in the spring.**
- Agencies considered for funding should have been in existence for one year after receiving their not-for profit status from the State of Illinois and have been providing services to the community during that time.
- No agency with the ability to tax or conduct referendums will receive Township funding.

In order to be eligible for funding an agency must meet the following minimum requirements:

- **Area Served** - While an agency may serve areas other than New Trier Township, its programs must serve residents of New Trier Township.
- **Proportion of Township Residents Served**- For agencies serving more than New Trier Township, the amount of funding requested shall take into consideration the proportion of the agency's service rendered to residents of New Trier Township.
- **Non-Profit** - Funded agencies must be 501 (c) (3) not-for-profits.
- **Needs**- The need for the service must be demonstrated.
- **Standards** - An agency requesting funding must have at least one full-time paid staff person, or its equivalent; the credentials of the applicant's staff shall meet professional standards, commensurate with the responsibilities involved.
- **Employment Practices** - The agency must be an equal opportunity employer.
- **Articles of Incorporation** - Submit a copy, as amended, if changed in the last 12 months.
- **Bylaws** - Submit a copy, as amended, if changed in the last 12 months.
- **Use of Funds** - Funds must be used as specified in the grant application and as approved by the Township. Changes must be cleared with the Township.
- **Accessibility** - *All services must be available to clients with disabilities and the agency must be able to deliver services from a site that is ADA accessible. If not, please explain.*



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- **Accountability** - The agency shall maintain communication with the assigned advisory committee liaison, who must be allowed to attend board meetings upon request. The agency may dismiss the person from a board meeting if they convene into Executive Session. The agency shall provide meeting minutes to the liaison upon request
- **Financial** - *All agencies with budgets of greater than \$300,000 must have an annual audit performed by an independent CPA. Those agencies with a budget of \$300,000 or less must submit to the Township a copy of form AG990 that is sent to the Attorney General's Office. The Township reserves the right to request an audit be performed for agencies with budgets of \$300,000 or less.*
- **Absence of Conflicts of Interest** – The agency certifies, to the best of its knowledge, information, and belief, that it has no current relationship or involvement with any New Trier Township Trustee, Employee, or Committee Member which the Agency reasonably believes could either favorably or unfavorably influence the Township's possible grant of the Agency's funding request.
YES X
NO _____ - **If no, please explain.**

Other Certification Issues

Please mark yes, no, or other as appropriate next to each statement. If no, or other, please explain. Supporting documents may be requested at a future date and must be supplied upon request.

YES NO OTHER (PLEASE EXPLAIN)

Agency maintains a personnel policy manual

Agency has a non-discrimination policy

Agency has a sexual harassment policy

Agency has a grievance procedure

Agency has a Strategic Plan
A strategic plan for FY2022 – FY2024 will be completed by November 2021.



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- Agency produces an Annual Report
 Most recent report covers period FY2020 (7/1/19 – 6/30/20)
- Agency has an effective fiscal management system in place and has disclosed any and all Conflicts of Interest as described in the Eligibility Criteria for Funding.
- Audit or AG990 completed and copy provided to the Township for most recent fiscal year The FY2021 Audit is currently being completed and will be ready this fall.
- Agency maintains general liability insurance coverage and names New Trier Township as additional insurer
 Amount of coverage \$2,000,000
 Name of insurer Great American Insurance Company
 Effective dates of coverage 3/15/21 – 3/15/22
- Agency pays all state and federal payroll taxes
- Agency has a conflict of interest policy.

YES NO OTHER (PLEASE EXPLAIN)

- Agency has by-laws in place
 Date last amended/accepted 2016
- Agency is accredited by recognized accreditation organization (where appropriate)
 Date of most recent accreditation 2016
 Accreditation Organization NAMI National
- Agency's board serves without compensation
 Number of board members 18
 Number of Board vacancies None, though the Board could add up to five members
 List board sub-committees Programs, Fund Development, Organizational Development, Outreach & Communications, and Strategic Planning
 Schedule of board meetings Six (6) per year, held on 1st Wed. of alt. months
- Agency has Auxiliary or other Advisory/Governing Board. If so, please explain:
Yes, we also have a Sustainers Board and an Advisory Board to provide financial support, oversight, and guidance for all organizational activities.



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- Agency provides staff with opportunities for training and personal development
- Agency has filed its annual report with the Illinois Attorney General
01055678
- Agency has filed its annual report with the Illinois Secretary of State
6648-600-1
Federal Tax ID # 36-3714540

We certify that we meet all the eligibility criteria for funding and that the information contained in this application is true and correct to the best of our knowledge and agree to comply with all requirements of the program and funder if we are awarded and accept funding. Furthermore, our Board has been advised of the Eligibility Criteria and approved our signing of this document.

Agency Director Name Nathaniel Ekman

Signature

Date: 9/10/2021

Board President Name Richard DeCleene

Signature

Date: 9/10/2021



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Organizational Profile

(A) The Organizational Profile is part of the New Trier Township Application For Funding; and (B) It is the Agency's responsibility to keep the Organizational Profile information current each year and provide New Trier Township with further information on an ongoing basis if there are any significant changes, such as to the mission, organization, board requirements, and/or other changes.

(1) Briefly summarize the agency's mission, history, services, and organizational structure. Have these changed significantly over the lifespan of the organization? (Please attach a current organizational chart, if available.)

Mission Statement

NAMI Cook County North Suburban's mission is to give help and hope to individuals affected by serious mental illness and those who love and care for them. Our goal is to eliminate the harmful stigma associated with mental illness at the individual, family, and community levels. Our vision is that the stigma associated with mental illness will no longer exist. We operate in the greater Chicago area, specifically the northern suburbs of Cook County, which covers 17 communities and townships. The population served by NAMI CCNS programs is the 40,000+ residents of its 17-community catchment area who have any mental illness (including 16,000 who have a serious mental illness such as major depression, schizophrenia or bipolar disorder) and their countless families and loved ones. There are no eligibility requirements to participate in NAMI CCNS programs, and they are always free of charge, though a couple of our programs require pre-registration, such as our equine-assisted therapy program, Stable-ity.

History of Organization

NAMI CCNS is a grassroots organization and an affiliate of NAMI, the National Alliance on Mental Illness, headquartered in Arlington, Virginia. Our affiliate was started in the early 1990's by a group of family members who were all dealing with the challenges of caring for loved ones with mental illness. They offered a Family to Family class, and that was the beginning of our affiliate. Today, NAMI CCNS operates with 7 part-time professional staff, governed by an 18-member volunteer Board of Directors. The Board's strategic plan (currently under development for the 2022 – 2024 fiscal years) guides the direction and resource deployment of NAMI CCNS in order to achieve four goals: 1) fund our growth; 2) increase organizational capacity; 3) expand programming; and, 4) build reputation.

Programs, Services & Organizational Structure

NAMI CCNS offers multiple support, education, and advocacy groups, workshops and mental health classes to families and individuals. Our **peer-to-peer support** programming for families and for individuals with a mental health disorder includes Family Support Groups, Connection Recovery Support Groups and a Dual Solutions peer support group for



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young adults experiencing co-occurring mental health and addictions (currently under redesign). Sundays at One is a social group for adults with serious mental illness that combats the isolation that tends to come with (and often worsens) the disease. Balance for Success is a support group for young adults seeking to incorporate their mental health recovery with their careers and educational pursuits. NAMI CCNS also offers an innovative equine therapy support group, Stable-ity, in partnership with Equestrian Connection in Lake Forest, and a Grief and Loss Support Group for those who live or have lived with a person with a mental illness.

Family education for caregivers of adults with mental illness is delivered through an 8-week Family to Family class; education for parents of children under 18 with a psychosocial condition is provided through the 6-week class Basics for Parents. **Community education** and advocacy for the needs of our neighbors with a mental health disorder are achieved through more than 10 Community Education Forums a year, covering a variety of mental health topics; NAMI Reads, a quarterly presentation featuring the author of a memoir about mental illness; and a speakers program called In Our Own Voice, in which an individual in recovery shares her/his story of living with a mental illness.

NAMI CCNS has developed a crisis intervention awareness program to address the need for an alternative to formal crisis intervention training, which is costly and out of the reach for many police and fire departments. NAMI CCNS has also turned its attention to the military veterans and their families who live in our service area in coordination with the launch of NAMI Homefront nationally. We offer bi-weekly support groups for veterans, led by a specialized clinical psychologist. Our equine therapy programming, Stable-ity, is also available to veterans and is held in collaboration with Equestrian Connection. We are currently developing specialized groups to serve female veterans that may focus on their particular struggles. Our program manager, Christine Somervill, PhD, is nationally certified as a Mental Health First Aid Instructor.

To meet the burgeoning mental health needs that have arisen due to the pandemic, we continue to run several innovative mental health **direct support programs**, including:

- NAMI Chats, which connects callers to a supportive peer who talks to them about their needs and situations, then offers specialized resources and support systems, and
- NAMI Frontline, a (currently tele-health) support group for healthcare workers that utilizes multiple techniques like equine-assisted therapy and meditation to help relieve the mental health crisis involving front line workers.

Finally, we operate a Warm Line five days per week from our Skokie office to assist callers in crisis or who require resources, information, services and/or support to assist them and their loved ones affected by mental illness.

(2) Briefly summarize the role of the board and the requirements for serving on it. What role does the board play in the administration and operation of your organization and what is the desired size of a full and active board?

The Board of Directors plays an integral and highly active role in governing and serving NAMI CCNS. Many board members are trained and certified by NAMI Illinois to lead family education classes and facilitate support groups. All possess a deep and committed understanding of our programming and a strong appreciation for our work. Most have experienced mental illness directly, either because of a loved one's mental illness or because they have firsthand ('lived') experience with an illness. All board members are dedicated to our cause and committed to working toward our mission. 100% of our board members donate annually, per our expectation. Other than possessing a connection to and passion for our mission and a willingness to be a working board member, there are no formal requirements for board service.

The NAMI CCNS Board currently has 18 voting members. Our by-laws provide for a full and active board of between 18 and 23 members; there is room to grow at the present time.



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Agency/Program Funding Request Information

PROGRAM DESCRIPTION

- (1) Describe the services provided by this program, eligibility requirements, and the target population.

As discussed earlier in Question #1, the mission of NAMI Cook County North Suburban is to give help and hope to individuals affected by serious mental illness and those who love and care for them. The population served by NAMI CCNS programs is the 40,000+ residents of its 17-community catchment area, including the communities of New Trier Township, who have any mental illness (including 16,000 who have a serious mental illness such as major depression, schizophrenia or bipolar disorder) and their countless families and loved ones. There are no eligibility requirements to participate in NAMI CCNS programs, and all programs are offered completely free of charge. Programming falls into four discrete areas that correspond with the basis of this renewal request for grant funding: Family Education (including our signature peer-led NAMI Family to Family class, offered throughout the year); Community Education (offered virtually and to a growing audience with increased frequency since the beginning of the COVID-19 pandemic); Peer & Family Support (including family support groups, Connection peer recovery support groups, and Balance for Success); and Direct Support, especially as provided by our compassionate and supportive Warm Line response team.

Family to Family, which has been offered live at several New Trier community locations, is an 8-week course (online or in-person) taught by trained individuals who care for an adult with a serious mental illness. Most often a family member is the first responder to an individual's mental illness. Family to Family educates these first responders about mental illness as a brain disorder and teaches strategies for responding constructively to someone who is mentally ill. The course also provides resources and support and stresses the need for caregivers to also take appropriate care of themselves in order to care patiently and positively for their loved one. NAMI has long recognized that "caring for the caregiver" is crucial to effective, ongoing care for a loved one with mental illness. A recent study estimated the average caretaker contributes up to 104 hours per week supporting an individual with mental illness. And while caretakers occupy a stressful and difficult position, it is also an important one with a pivotal role in successful treatment of severe mental illnesses. The course is taught by two volunteer teachers who have taken Family to Family to help with their own situation and who have been certified by NAMI Illinois as a Family to Family teacher, following 40 hours of professional training.

Family Support Groups supplement Family to Family beautifully. These support groups, which serve about 1,000 NAMI CCNS participants over the course of a year, provide continued support for those families who are caring for a child/adult child or loved one who struggle with mental illness. Since these families act as de facto unpaid caregivers for these loved ones, the pressures they face – emotionally, financially, physically – are immense and often overwhelming. Meeting regularly with other peers who are in similar situations can be life-altering, particularly since many resources besides those offered by NAMI CCNS that were available to families before the pandemic are no longer options.

New Trier Township residents participate in numerous other NAMI CCNS programs, both those physically offered in the Township and elsewhere in our 17-community catchment area (during non-pandemic times and on a virtual basis at the moment). A support group for parents of children and adolescents exhibiting symptoms of mental illnesses, guided by NAMI National Principles of Support and facilitated by trained volunteers, meets regularly at the Wilmette Public Library (when social distancing is not necessary). Balance for Success, which meets at the Winnetka Congregational Church during non-pandemic times, is a NAMI CCNS innovation that addresses the peer support needs of adults who are positively managing their mental illness while pursuing their education or careers. (These physical locations, of



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course, are all pre- and post-pandemic).

Anyone dealing with mental illness is eligible for Family to Family, Family Support groups or any other NAMI CCNS courses and support groups. There is no charge to participants for NAMI CCNS programs. The target audience for NAMI CCNS programming is the Township residents who are likely to be living with a mental illness, and their families and loved ones.

Virtually all other programming has also been placed online since the start of the pandemic, and in 2020 we added new programming for frontline healthcare workers (NAMI Frontline) and for those who needed immediate connections to mental health resources (NAMI Chats). Nearly every program and group continues to see increases in (virtual) attendance in light of the rapidly deepening mental health crisis in America and in Illinois and north suburban Cook County. The need for our programs in New Trier Township has never been greater.

(2) How does this program fit in with one or more of the priorities identified by New Trier Township in its strategic plan? Please explain.

New Trier Township strives to provide advocacy, leadership and resources to benefit the physical, mental and social well-being of its residents. We work to help the Township fulfill this mission by providing tangible and effective mental health services to residents by the way of mental health support, advocacy, and education.

The stigma of mental illness continues to prevent too many people from fulfilling their potential and contributing to the common good. NAMI CCNS programs – every single one of our programs is presently offered online (and via telephone for those participants who do not have ready access to a computer) -- help to reduce the harmful stigma of mental illness in New Trier Township, fostering greater effectiveness and well-being in the lives of all its residents, regardless of age, income or ability. Family to Family and Family Support Groups encourage families who are dealing with mental illness to work within their communities to find the resources they need to help their loved ones. Sundays at One and Balance for Success provide indispensable positive reinforcement to adults with mental illness, helping to prevent withdrawal from their larger community and dangerous isolation. NAMI Frontline supports healthcare workers who are suffering from exacerbated mental health issues during this pandemic, leveraging techniques that include equine-assisted therapy via online formats. NAMI Chats connects those with specific and urgent needs during the pandemic with current and accessible resources targeted to their particular circumstances; it is staffed by volunteers who are knowledgeable about what resources are available in real time. All NAMI CCNS programs provide a network of (currently online) support that any and every New Trier Township resident can access, at no cost to them.

It's important to note once again that the pandemic has exacerbated mental health issues across the board, worsening mental health issues in those that already have mental illness, and suddenly occurring in people who had not previously experienced mental illness. Social distancing and isolation, economic uncertainty, financial losses and job losses, fear for loved ones' health, these pandemic-related factors are all known factors for mental health illness. We are seeing significant increases in participation for almost all programs. We expect this to continue for a while as experts have noted the start of a long-term mental health fallout from the pandemic.

NAMI CCNS programs generate grassroots advocacy on behalf of those who live with mental illness, in their community and beyond. We help anyone, of any age, gender, socio-economic background or circumstances. NAMI programs based in New Trier Township make the township a better place for people with mental illness and their families to live, and thrive.



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Please check each priority you feel the program addresses. (Most programs will address only one or two priorities.)

See our website at www.newtriertownship.com for more information.

- | | |
|---|---|
| <input type="checkbox"/> Aging in Place | <input checked="" type="checkbox"/> Low Income Families |
| <input checked="" type="checkbox"/> Youth Services | <input checked="" type="checkbox"/> Persons with Disabilities |
| <input checked="" type="checkbox"/> Other <u>People and families affected by serious mental illness and its related challenges.</u> | |

NEED

- (3) Describe the need and demand for this program in the community and justify that it deserves investment of Township funding. You may include both data and examples of individual clients.

The ongoing (and undeserved) stigma of mental illness is endemic to our society. NAMI CCNS works to fight the harmful stigma that others place on mental illness. Embarrassment, shame and guilt are most frequently mentioned by Family to Family class participants when they discuss how they felt when they realized their child or other family member had a mental illness. The stigma of mental illness prevents many from seeking the help that they so urgently need. Of the 56,131 people who reside in New Trier Township (2016 Census estimate), 2,414 likely are living with mental illness, based on the 4.3% rate of "serious" mental illness in Illinois (NAMI National State Fact Sheet) (these are pre-COVID-19 figures; according to the CDC, the prevalence of mental illness has doubled since the pandemic began, and a full 4.2% of the U.S. adult population could be diagnosed with anxiety, depression or another illness). Add family and loved ones to this figure and you have innumerable Township residents who are dealing with mental illness day to day. In 2020, NAMI CCNS delivered direct service to 8,862 individuals (unduplicated) and we reached an additional 70,100 through our website, Facebook Live, and fundraising events. We estimate that about 1,063 (unduplicated), or 12%, of those receiving direct services resided in New Trier Township. Township residents comprise 14% of current NAMI CCNS membership and represent 9% of fiscal year 2019 donors.

NOTE: Unduplicated data remains elusive for all programming because of the anonymity many people prefer when attending public education programs on mental illness. Many course participants also attend public lectures, where many people do not sign in. Every effort is made to obtain a reasonably accurate head count of program attendance, although the figures likely include other program participants. Given the "drop in" nature of support groups (whether virtual or live), estimates of an average number of participants by the facilitators is the best available option for collecting participation data.

- (4) Are you able to meet the full demand for this service or is there a waiting list? What new or unmet needs do you see in the community or for the clients served in this program?

While the demand for our services (and that of the larger mental health workforce) far outstrips our capacity to serve all in need, we do our best to go where and when we are needed. NAMI CCNS utilizes teachers and facilitators to meet the demand for programs in the different communities it serves. Classes and support groups are offered at an optimal size; for Family to Family, the upper limit is 15 participants. Most Family to Family courses have 10-12 participants. If someone contacts us about taking Family to Family after the class in their area is underway, they may be able to take class in another location. Every effort is made to stagger start times so that we have Family to Family courses starting every six to eight weeks. If we have a waiting list, we can usually add a class or group. During the pandemic, with Family to Family and Family Support groups available online, we can



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rather quickly ramp up if a waiting list accrues and add additional classes or groups.

The programs that we have launched successfully, and continued to offer, amid the challenges of the pandemic provide evidence that supports our efficacy in responding to the needs of the communities we serve, including New Trier Township. As COVID-19 continues to affect and change our society, we will remain responsive to the mental health and other needs of our people.

CAPACITY

- (5) Demonstrate that the program has the vision, personnel, and skills to successfully carry out the program and achieve its goals, objectives and performance measures. Summarize any major changes in staff or personnel.

The NAMI CCNS Board of Directors and staff comprise many individuals who have lived experience dealing with mental illness. They are extremely well informed and deeply committed to meeting the needs of everyone in our service area. They have successfully raised funds to increase the organization's administrative capacity and program development and will continue to do so.

As the Executive Director begins his third year at NAMI Cook County North Suburban, the Development team is in transition while we search for our next Director of Development and Grants Manager, both of whom left in the summer of 2021 to pursue new opportunities.

Our programs in the four funding focus areas (Family Education; Community Education; Peer & Family Support; and Direct Support) continue to be led by experienced and well-qualified staff and volunteers. Programs that replicate the "signature" programs designed and offered by NAMI National are held to high standards of quality, model fidelity, goal-orientation, and a commitment to evidence-based practice. We remain focused on evaluation with an eye to continuous quality improvement.

SERVICE STATISTICS/DEMOGRAPHICS



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(6) Who is being served by this program? Please provide a statistical breakdown of the number of clients served, the total units of service delivered, and costs per unit of service by filling in the chart below. Please state and define your unit of service for this program and why you chose it. To calculate cost per unit of service, divide the total number of units of service into the total budget for the program. (Suggestions for the appropriate unit of service are included in the proposal in the directions. For some programs you may wish to calculate cost per unit of service in more than one manner.)

(6a) Unit of service definition – *Individual x Service x Number of Times Service is Delivered*

For request, this definition includes Peer Support Groups, Family Support Groups, Community Education Events, In Our Own Voice (IOOV) Presentations, Family to Family Classes, Basics for Parents Classes, and Warm Line Callers / Contacts.

(Example: 1 IOOV presenter educates 35 attendees = 35 units of service)

(6b) SERVICE STATISTICS – Please indicate fiscal year dates for each column

PLEASE INDICATE FISCAL YEAR/DATES IN EACH COLUMN	Prior Year FY20/21	Present Year FY21/22	Proposed Year FY22/23
Number of persons served (unduplicated count)	8,862	9,500	10,000
Number of units of service	51,045	55,000	60,000
Cost per unit of service	\$7.90	\$7.24	\$6.72

(7) What are the demographics of New Trier clients served in the prior year? (breakdown by community).

TBD; further detail is needed and will be available at the time of the grant hearing.

(8) Total from New Trier Township (unduplicated).

At least 1,063 (may be higher; see Question #9).

(9) New Trier Township clients are what % of total?

About 12% of NAMI CCNS clients hail from New Trier Township. Since the start of the pandemic, this percentage has been higher, as our programs are particularly popular among New Trier Township residents, who can now take any class, group, workshop or presentation online without needing to travel.



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(10) Units of Service to New Trier clients.

At least 6,125 (may be higher; see Question #9).

(11) Units of Service to NTT clients are what % of total

At least 12% (as before).

(12) New Trier clients age breakdown

As in previous years, New Trier clients may be of any age, though a majority are between the ages of 30 and 76.

OUTCOMES/EVALUATION

(13) What outcomes did you achieve for your clients in the prior year? Results should be client-outcome based, specify a target level of achievement, the measurement tool that was used, the rationale for setting the target at a certain level, and a timeframe for accomplishment. Detail any changes made in the program as a result of these outcome results.

The overall goal of all our programs is to eliminate the harmful stigma associated with mental illness at the individual, family, and community levels. We do this by providing peer support to individuals living with a mental health disorder, educating family and loved ones on how to best support and care for a person with mental illness, and advocating for people with mental illness through public education and advocacy. Goals for each of our programs are drawn from the outcomes identified by NAMI National for each signature program.

Our goal is for 95% of our family education class participants to:

- More effectively manage crises, solve problems and communicate.
- Learn how to take care of yourself and handle stress
- Understand the challenges and impact of mental health conditions on your entire family
- Learn about current treatments, including evidence-based therapies, medications and side effects
- Advocate for your child's rights at school and in health care settings (Basics)
- Find and use local supports and services for your loved one (Family to Family)
- Gain an overview of the public mental health care, school and juvenile justice systems (Basics)

To evaluate our programming, we administer a survey to all participants post completion. For Family to Family, it is administered at 8 weeks. We use a program called Survey Monkey to survey with consistency and effectiveness. Course evaluations indicate that our Family to Family and Family Support groups continue to meet or exceed course outcome objectives. The vast majority – over 90% -- of participants indicate that they developed improved knowledge and understanding of mental illness as a brain disorder.



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Importantly, family members learned that they did not cause their family member's mental illness, nor could they cure it. More than 90% indicated that they learned to use the tools gleaned in the course to improve problem solving and enhanced their ability to communicate with their loved one with a mental illness, reducing overall stress and anxiety for the entire family. More than 85% of respondents indicated that they became better at caring for themselves, which is crucial when it comes to providing the supportive, patient and stable environment that so benefits a person who is living with mental illness. The ability to effectively communicate with mental health professionals about their family member's illness also improved by taking the class.

- (14) What results are you committed to achieving in the present year? (If outcomes are the same as above, simply state that we hope to improve upon the past year's results)

Our outcomes remain the same; we hope to keep improving on last year's results. Since we have successfully served more people than ever before (a record number of program participants this past fiscal year), we will continue to make every effort to increase the size of our volunteer pool, train more teachers and facilitators and continue to expand our class, peer support group and educational workshop and forum offerings. For example, we plan to double our education forums this year because of the demand for this popular programming as well as the need to spread awareness of mental health issues. We are aware of the ever-increasing mental health impact of the pandemic and want to ensure that we can serve ever-greater amounts of people in need.

- (15) Are there any other program effectiveness/evaluation measures you think are important, such as customer/client satisfaction surveys, quality of service measures, or other indicators? Please describe.

We obtain continuous feedback from facilitators and teachers to gauge their opinions on how programming is proceeding and whether they have suggestions or recommendations on honing their particular classes or groups. We also obtain informal feedback from participants and are extremely responsive to feedback.

CHANGES/CHALLENGES

- (16) What changes or challenges (legal, socio-economic, demographic, financial, political or other) did the agency, program, and clients face in the prior year? How did you respond? What challenges or changes do you anticipate in the present year? (If changes/challenges were the same for all programs, do not repeat).

The demand for our free, peer-led, community-based mental health programs remains greater than ever, and increased markedly in the past year, as the COVID-19 pandemic tested the limits of our mental health care system. This same demand far outstrips the capacity of the provider-driven mental health care system and, indeed, of the entire mental health workforce. Waiting times for an appointment with a psychiatrist or therapist are longer than ever, and sessions are conducted virtually rather than in-person, removing a layer of personalization. Moreover, resurgences of the coronavirus (e.g., Delta variant) are striking even as the country is reckoning with another public health crisis—that of racism and social unrest. With widespread social isolation, unemployment and unprecedented levels of stress, we are truly in a mental health crisis. Doctors are seeing more and more patients with worsening mental health issues. They are also seeing patients who never experienced mental health issues before COVID-19 but are now seeking help for anxiety, depression and other conditions due primarily to social isolation and medical/economic/financial fears.



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The mental health and substance abuse fallout from the pandemic is expected to be substantial and long-lasting. We continue to expand our offerings, increasing the number of classes and groups in existing programs and launching new programs that meet emerging needs. NAMI Chats, NAMI Frontline, and our Grief and Loss Support Group, for instance, have been very successful in responding to these needs.

As in prior years, discrimination against those with a mental illness remains a serious barrier to employment. The unemployment rate for adults living with a mental illness is three-to-five times higher than for those without one, according to the Centers for Disease Control.

Once again, we faced the twin challenges in 2021 of having to conduct both our Spring Gala and Fall Walk as virtual (online) events, with limited success in our Gala fundraising but impressive progress-to-date toward our Walk revenue goal.



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RECOMMENDATION RESPONSES

- (17) How did you respond to the recommendations made by New Trier Township, if any? Please describe in detail. (These are contained in the funding letter you received in June).

In response to Ms. Eisenberg's letter of June 8, 2021, and the recommendations of the Township, we have successfully broken out expenses by program in our most recent and upcoming audits, a practice that enables us now, in this 2022-2023 application, to request separate funding streams to support each of several distinct programs. We have also made progress at refining and improving the evaluation component of our programs, with new tools having been adopted to measure both outcomes and impact.

RESOURCES/BUDGET

- (18) What non-financial resources are required to deliver this service? Specify staffing/volunteer requirements, budgetary needs and other resources, inputs, and/or community partners that are needed for this program. If the Township is unable to fund this program at the desired level, what will the impact be on services? Describe how your program will or will not continue without investment by the Township. Complete the attached budget forms. Were any cost reduction measures implemented in the prior year? If there is a sliding fee scale for this program, please attach it and indicate how many clients paid each fee level.

The non-financial resources needed to deliver current New Trier Township programs are primarily volunteer time to teach, facilitate, lead and present these programs, along with donated meeting space for in-person groups and events, where viable.

All programs are still delivered at no cost to participants; we do not charge any fees. For Family Education Courses delivered in person (Family to Family), course materials are provided for each participant and are paid for by NAMI CCNS at \$50 each. Teachers and facilitators donate their time; the audited value of their time is \$25 per hour; clearly a substantial contribution. With two teachers per 8-week course, this comes out to \$1,200 per course. We do pay them a stipend of \$600 each. NAMI CCNS pays for volunteer training by NAMI Illinois at \$150 for each trainee. NAMI CCNS staff register program participants, assemble the course materials and coordinate pick up of course materials by the teachers. Our Program Director provides guidance to teachers and monitors classes. She regularly visits all classes and support groups to offer assistance, field questions and ensure that programs are conducted in compliance with NAMI standards. When problems occasionally arise, she works with the teachers to solve them. She reviews all class evaluations and discusses results with the teachers. She has an excellent relationship with the NAMI National Program Director, with whom she exchanges information about our Family to Family classes and others around the country. Our Program Director also conducts extensive outreach to class participants, following up with parents whose children were adolescents when they took Basics for Families and discussing the benefits of taking Family to Family now that their children are young adults. For the Family to Family Refresher, she made personal calls to past course participants to talk about the benefits of the program. She is well-connected in New Trier Township.

Other programs, including Community Education Presentations, Peer & Family Support, and Direct Services / Resource Line, entail (for virtual programming) the costs of Zoom subscriptions and webinar technology, staff and volunteer time, telecommunications (landline and/or mobile phone in conjunction with Google Voice for remote call answering), office rent and utilities, and other overhead costs. A share of each non-Development team member's salary is allocated to these program costs, including the Director of Programs, the Administrative &



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Peer Resource Manager, and the Executive Director.

Should New Trier Township be unable to fund these programs at the desired level, the impact on our programs will be negative, but we will work to enhance our fundraising from the Annual Appeal (in December), the Fall Walk (Virtual), and the Spring Gala (whether Virtual or Live). In the past year, we have discovered additional sources of revenue by monetizing and/or requesting donations for presentations on current topics in mental health made by the Executive Director and/or the Director of Programs; we are working to cultivate this as a growing source of dependable income to support program costs.

We are actively seeking new funders, primarily small family foundations, and we hope to increase grant support in the coming years. Our Board continues to support investment in expanded programming and organizational capacity.

- (19) If your program or agency budget request represents an increase from last year, please explain the reason for the change and what the increase will be used for.

We are not requesting an increase for 2022 – 2023.