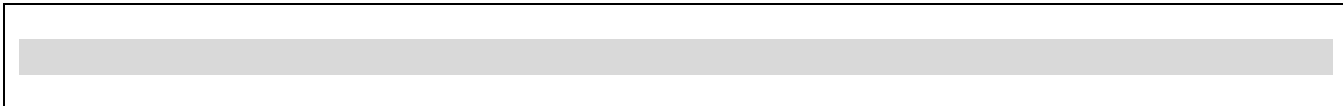




AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

NAME OF AGENCY			
PEER Services, Inc.			
CONTACT PERSON AND TITLE			
Maureen McDonnell, Executive Director			
ADDRESS			
906 Davis Street			
CITY		STATE	ZIP
Evanston		IL	60201
PHONE		FAX	
(847) 492-1778		(847) 492-0320	
E-MAIL			
mmcdonnell@peerservices.org			
WEB			
www.peerservices.org			
NO. OF YEARS IN EXISTENCE		TOTAL AGENCY FUNDING REQUEST FOR PROPOSED YEAR	
46		\$ 105,000	
PROGRAMS REQUESTING FUNDING LAST YEAR	AMOUNT RECEIVED	\$ AMOUNT FOR PROPOSED YEAR	FUNDED BY TOWNSHIP SINCE? (Estimate of Year OK)
1. Adolescent Substance Use	\$30,000	\$30,000	1999
2. Adult Substance Use	\$50,000	\$50,000	2005
3. Substance Misuse Prevention	\$25,000	\$25,000	2002
4. _____	\$ _____	\$ _____	_____





AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

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*



AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

must be able to deliver services from a site that is ADA accessible. If not, please explain.

- **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
Covers years 2021



AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

- Agency produces an Annual Report
Most recent report covers period CY2020
- 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
- Agency maintains general liability insurance coverage and names New Trier Township as additional insurer
Amount of coverage \$1,000,000 per occurrence/ \$3,000,000 aggregate
Name of insurer Amtrust
Effective dates of coverage 4/1/2021-4/1/2022
- 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 3/24/08
- Agency is accredited by recognized accreditation organization (where appropriate)
Date of most recent accreditation 06/29/18 (Currently in accreditation review process)
Accreditation Organization Joint Commission
- Agency's board serves without compensation
Number of board members 7
Number of Board vacancies 0
List board sub-committees Audit/Finance Committee, Board Development, Strategy Task Force
Schedule of board meetings 8-9 meetings per year



AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

- Agency has Auxiliary or other Advisory/Governing Board. If so, please explain:

- Agency provides staff with opportunities for training and personal development
- Agency has filed its annual report with the Illinois Attorney General
01-008570_____
- Agency has filed its annual report with the Illinois Secretary of State
N 5074-959-2_____
- Federal Tax ID # 36-2848969

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: Maureen McDonnell

Signature Maureen McDonnell Date: 9-9-21

Board President Name: Monica Weed

Board Secretary Name: Tom Schneider

Signature Tom Schneider Date: 9-9-21

Our Board Secretary Tom Schneider is signing in lieu of our Board President who is currently out the country until September 21.



AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

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.)**

PEER Services, Inc., was founded October 7, 1975, in response to recommendations made to the Evanston City Council. These recommendations were based on a report submitted by a task force assigned to study the problem of substance misuse in Evanston. We later expanded our service area to northern Cook County and have been serving residents of New Trier Township for more than 30 years. We are a freestanding, community-based agency that focuses on the prevention and treatment of substance use disorders.

During FY2021, PEER Services undertook an in-depth examination and revision of mission along with the development of new vision and values statements to guide our current and future work.

PEER Services' updated mission is to reduce the harms of substance use, addiction and stigma by engaging youth and adults with innovative prevention programming and supporting people on their path to recovery through holistic, evidence-based treatment. We provide affirming services to all in need, regardless of their ability to pay.

Our goal is to help people develop the skills and resilience to overcome challenges and to unleash their capacities to create the lives they want.

This is best accomplished by educating the community and preventing substance misuse from developing, intervening when problem substance use emerges, and providing treatment for those teens and adults struggling with dependence or addiction.

PEER Services is licensed by the State of Illinois to provide substance misuse treatment services to adolescents and adults. We are accredited by the Joint Commission (JCAHO), triennial review currently underway.



AGENCY/PROGRAM APPLICATION FOR FUNDING

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In June 2017, Maureen McDonnell joined our team as Executive Director. She continues to work on internal systems improvements, financial sustainability, and high-quality client care. She also works on sustaining and growing relationships with referral partners, stakeholders, and funders.

In our 46-year history, we have adapted and expanded services to respond to changing community needs and evolving best practices within the substance use prevention and treatment field. We have attached an organizational chart depicting our organizational structure, which has been designed to help us best achieve our mission.

Our current services include:

- 1) Substance Use Treatment – for Adolescents (ages 12+) and Adults
 - a. Substance Use Evaluations
 - b. Youth Early Intervention
 - c. Drug and Alcohol Education
 - d. Individual and Group Counseling
 - e. Intensive Outpatient Program (IOP)
 - f. Dual Diagnosis Treatment
 - g. Specialized Treatment for Older Adults
 - h. Medication-Assisted Treatment
 - i. DUI Risk Education and Treatment
 - j. Alternative to Suspension Programming
 - k. Individual and Corporate Drug Testing
 - l. AMITA St. Francis Hospital ER/Overdose Outreach

- 2) Prevention Program
 - a. Prevention Education and Information Campaigns
 - b. Drug and Alcohol Education
 - c. Drug Free Communities Coalitions, including North Shore Coalition for Drug Free Communities
 - d. Mental Health First Aid training

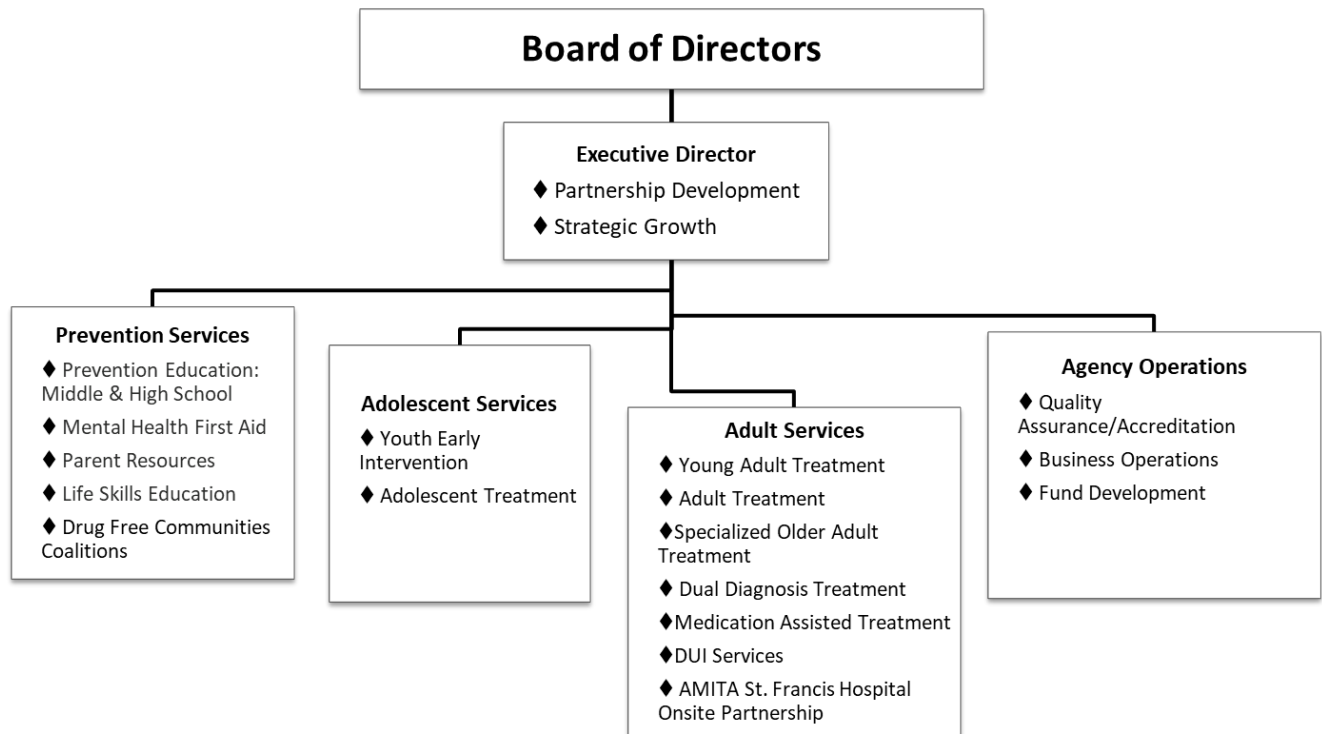
- 3) Additional Services
 - a. Training for Education and Mental Health Professionals (Treatment & Prevention)
 - b. Speakers Bureau (Treatment & Prevention)



AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

PEER Services Organizational Chart



(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 key roles of the board are to set policy, oversight, and evaluation of the Executive Director (including hiring and dismissing authority), fiscal oversight, and fundraising. Policy development and review are essential components of the work of the board. Our board chair is an attorney. Our current board is an active, working board, meeting every six weeks. Each member sits on a committee that meets six times a year or more if needed.

Board members also serve as ambassadors for the agency in the communities we serve. Underway is the creation of an Outreach Advisory Committee to assist the organization with additional community connections.

The board also reviews our quality assurance program to ensure that we are delivering services that address community needs and that our services are achieving the desired outcomes within the communities we serve. Board members are expected to participate in each of our fundraising efforts as well as to attend board meetings regularly and represent the agency at community functions. The board sets policy but is not involved in the day-to-day operation of the programs.



AGENCY/PROGRAM APPLICATION FOR FUNDING

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That responsibility has been assigned by the board to the Executive Director. We are currently working on recruiting more board members to reach a desired board size of 10-12 directors.

When pandemic mitigation measures were announced, we transitioned immediately to emergency operations on March 16, 2020. Our board guided us as we navigated the compounding crises, meeting weekly then semi-monthly. The Finance and Audit committee, other board members, our Executive Director and CFO, worked close on financial strategy and applications for emergency relief from the Paycheck Protection Program (PPP) and Economic Injury Disaster Loan (EIDL) program. PEER was successful in securing PPP and EIDL loans, as well as state, federal and private foundation emergency relief funds, allowing PEER to maintain essential staffing levels.

We also undertook efforts to boost our client census. At the onset of pandemic mitigations, our client census and revenue sources decreased by 30% after March 2020. In February 2021 our board approved directing funds toward a robust Outreach Project to refresh our connections with school, court, and community-based referral partners and to identify new connections and partners, such as primary care physicians and mental health counselors, faith-based organizations, and additional community-based organizations.

From among proposals responding to our RFP for outreach specialists, we selected and contracted with The Citizen Group, a Chicago-based firm with significant experience in community engagement, communications, and marketing for nonprofits. With them, we launched the Outreach Project to referral partners in July. We are confident that the Outreach Project will rebuild our client census by identifying teens and adults who are uncertain how or where to navigate assistance, reaching them earlier, before they experience the consequences of untreated substance use disorder.

Our board recognized that stabilizing the organization's infrastructure would benefit from outsourcing stewardship of our bookkeeping, accounting, audit, and strategic financing resources, relieving our executive director from direct management of these tasks. The board agreed to a contract with the financial management firm, EAB Solutions. EAB's clients and their specialty are nonprofits, including health and human services. Our Executive Director meets weekly virtually with our new CFO. Contracting with EAB dramatically increased our capacity in all areas of finance, including our strategic planning ability, which was crucial during the pandemic and as we move into recovery.



AGENCY/PROGRAM APPLICATION FOR FUNDING

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NEW TRIER TOWNSHIP ANNUAL FUNDING REQUEST FORM

2022-2023 TOTAL AGENCY BUDGET FORM

AGENCY NAME: Peer Services, Inc.			
Indicate year in each column	7/1/2020 - 6/30/2021	7/1/2021 - 6/30/2022	7/1/2022 - 6/30/2023
	PRIOR	PRESENT	PROPOSED
	YEAR	YEAR	YEAR
AGENCY REVENUES			
New Trier Township	105,500	105,000	105,000
Federal Government	359,064	125,000	125,000
State Government	578,022	532,840	538,169
Local Government/Townships	165,377	153,940	160,000
Client Fees	4,386	5,000	5,000
MCOs and other third Parties	734,226	1,020,982	1,021,000
Grants: Foundations, Corporate, Religious	108,050	61,000	70,000
Individual Contributions	71,986	40,000	45,000
Special Events	54,284	50,000	50,000
United Way	21,726	19,999	20,000
Sales	-	-	
Other Revenues	10,526	400	500
TOTAL REVENUES	2,213,147	2,114,162	2,139,669
AGENCY EXPENDITURES			
Program Staff Salaries, Benefits, Taxes	1,144,965	1,397,400	1,425,348
Administrative Staff Salaries, Benefits, Taxes	52,229	41,752	42,587
Fundraising Staff Salaries, Benefits, Taxes	61,361	63,811	65,087



AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

Professional Fees/Contractual Services	250,835	260,141	265,344
General Operating Expenses	120,295	139,406	142,195
Occupancy and Utilities	139,231	84,486	86,176
Specific Assistance to Individuals	-		-
Major and Minor Equipment	14,959	12,622	12,874
Major Capital Expenses	17,832	17,832	18,188
Other Fundraising Expenses	6,002	17,630	17,983
Other/Miscellaneous	13,437	41,080	41,902
TOTAL EXPENDITURES	1,821,146	2,076,161	2,117,684
SURPLUS (DEFICIT)	392,002	38,001	21,985
NET GAIN/LOSS FROM OTHER FUNDS			
SURPLUS (DEFICIT)			
TOTAL FUNDRAISING/ADMIN COSTS	119,591	123,193	125,657



AGENCY/PROGRAM APPLICATION FOR FUNDING
Fiscal Year 2022-2023

PEER Services

Adolescent Substance Use Treatment Program



AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

Agency/Program Funding Request Information

PROGRAM DESCRIPTION

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

The Adolescent Treatment program addresses the behavioral, psychological, and physical aspects of substance use and addiction and establishes a foundation for recovery. Our professional treatment team is overseen by the Clinical Director. The team includes Master's-level counselors with certifications or expertise in substance use treatment, social work, individual and group counseling, art therapy and family therapy.

We provide:

- Assessment
- Early intervention counseling
- One-on-one and group therapy for adolescents with substance use disorders
- Family counseling
- Individualized treatment plans
- Drug education
- Support services for parents
- Drug testing
- Psychiatric Evaluations and short-term psychiatric services

We strongly believe that all clients should be served in the least restrictive environment based on the clinical assessment. We provide extensive treatment and support services aimed at keeping as many teens in the community as possible.

- To be eligible for treatment services, a young person (ages 12-17) must meet the DSM V diagnostic criteria for a substance use disorder and be clinically assessed as appropriate for outpatient or intensive outpatient treatment according to the American Society of Addiction Medicine (ASAM) guidelines for level of care.
- Young people who are experiencing problems with substance use but do not meet the DSM V criteria may participate in early intervention counseling between one and five times a week.
- Clients in Level 1 treatment, also known as traditional outpatient services, typically attend one individual/family counseling appointment per week. We have found that



AGENCY/PROGRAM APPLICATION FOR FUNDING

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most adolescent clients do better in individual/family counseling appointments as compared to groups.

- When enough clients are interested and we determine the group setting is appropriate for them, we also offer them the group-based Intensive Outpatient Program (**IOP**). In IOP, teens receive a minimum of six hours of treatment services per week.
- The goal of the IOP is to reduce the likelihood that a young person, whose substance use is highly problematic, would need to leave the community and enter a residential treatment program.
- When our clinicians are concerned that significant mental health issues may pose a risk to the young person or impede their progress in addressing substance use, they will request a psychiatric evaluation from our consulting psychiatrist. We routinely make referrals for mental health counseling providers to clients who need mental health services in addition to or instead of substance use treatment.



AGENCY/PROGRAM APPLICATION FOR FUNDING Fiscal Year 2022-2023

(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.**

Our Adolescent Treatment Program reflects NTT's focus on identifying and addressing community needs and NTT's 2007-2012 strategic priorities to:

- Encourage individual choice and the creation of more programs to support living and working in one's local community
- Provide leadership to increase awareness of those more vulnerable
- Expand NTT's ability to act as a clearing house to assist residents in finding appropriate services
- Foster collaborative partnerships with other organizations

PEER's Adolescent Substance Use Treatment program provides counseling for youth engaging in substance use, designed to keep teens in the community (to the extent possible) while they address and recover from substance use challenges. We created our Intensive Outpatient Program (IOP) to position community-based treatment as more accessible for teens with severe substance use disorders, supporting individuals with services they need to remain in their own local community.

We provide treatment to all in need, regardless of their ability to pay.

Our community outreach and stigma reduction efforts provide leadership, increasing community awareness of those who are more vulnerable in our communities.

Our Outreach Project identifies community members in need of services who are not actively seeking them.

Our collaborative relationships include The Jewish Center for Addiction, Turning Point, Gateway, Rosecrance, New Trier High School, and Evanston's Erie Health Center (FQHC), accessible to NTT residents. We foster partnerships and are committed to referring clients to other service providers as needed.

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 type="checkbox"/> Persons with Disabilities |
| <input type="checkbox"/> Other _____ | |

NEED



AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

(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.**

While the majority of teens in NTT do not misuse substances, it is essential that treatment is available for those in need of services. The metrics of the 2019 biennial CDC Youth Risk Behavior Survey (**YRBS**), a national comparison of previous 30-day substance use rates among 3,209 NTHS responses, found a decrease from 2017 in e-cigarette/vape use (from 42% to 33%, the 2019 national average) and small decreases in alcohol use, but binge drinking remained the same (33%). Marijuana use also remained consistent at 28%, 6 percentage points above the 2019 national average.

The 2019 survey also highlighted mental health needs. 95% of students reported some level of stress/anxiety and 21% reported feeling sad or hopeless almost every day for 2+ weeks in a row. NTHS staff and students shared anecdotally that stress increased during the pandemic.

These data point to continued substance use challenges among NTT youth. Research shows that only about 10% of those with substance use disorders receive treatment, so the fact that more youth are not reaching out for treatment currently is not surprising, especially during remote school, when they had less contact with school staff who could identify substance use challenges and make referrals.

Several studies published in academic journals highlight a range of impacts of Covid-19 on substance use in adolescents, from increased use among those already using to decreased use during stay-at-home orders:

- An online survey of 1,316 adolescents found that the frequency of both alcohol and cannabis use increased among respondents already using alcohol or other drugs, and that these adolescents were more likely to use alone. (September 2020 *Journal of Adolescent Health*, "What does Adolescent Substance Use Look Like During the COVID-19 Pandemic?")
- A 2020-2021 national in-person survey of 580 12th graders found that while respondents perceived a significant decrease in the availability of marijuana and alcohol during the pandemic, the prevalence of adolescent (30-day) marijuana and alcohol use did not change significantly from pre-pandemic use. ("Adolescent drug use before and during U.S. national COVID-19 social distancing policies." Research grant supported by NIDA, conducted by Institute for Social Research, U of Michigan, Richard Miech, PhD).
- Another study noted, "Although developmentally appropriate for children to increase their reliance on peers as they age, time spent with peers who engage in unhealthy behaviors is one of the strongest risk factors for substance use. Stay-at-home orders potentially benefit some youth by reducing their likelihood of initiating substance use." (August 2020 *Journal of Adolescent Health*, "The Effects of the COVID-19 Pandemic on the Risk of Youth Substance Use.")



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We hope that many NTT youth are in the latter category of teens who did not initiate or reduced their substance use during Covid-19. However, PEER counselors have seen pandemic isolation negatively affect youth mental health, especially among depressed teens already using substances. We are most concerned for those who continued to use during Covid-19, especially those who increased their use. As we emerge from the pandemic, PEER Services will be alert to changes, such as potential increases in substance use once teens begin socializing again.

Through relationships with schools – now in person – and outreach to new referral partners, we believe we will be able to identify and connect with more teens in need of early intervention counseling or substance use treatment.

Funds awarded to PEER by New Trier Township will significantly bolster our financial stability, allowing us to maintain sufficient staffing of leading-edge substance use treatment services and ensure they are accessible to NTT youth and their families.

- (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?**

At this time we have no waiting list. With the pandemic disruption to in-person schooling, school staff and non-familial adults were challenged to identify students misusing substances in virtual-only settings. During school closures, we worked with schools – where possible given the increased demands on school staff – to determine how to better identify students in need of early intervention or substance use treatment and how to effectively deliver prevention messages in a remote context.

As students return to school, our Prevention Team is building broader and deeper relationships with schools to support identification of students in need of treatment, as well as to determine if area schools will benefit from increased access to adolescent treatment and early intervention services, either onsite or in the community. The Citizen Group will also support outreach within NTT to identify adolescents, as well as adults, in need of services.

With ongoing funding from NTT, we are confident PEER will have the capacity to serve more NTT adolescents.

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.**

As noted above, through an extensive process with input from staff and board, PEER Services arrived at the following articulation of the organization's vision:



AGENCY/PROGRAM APPLICATION FOR FUNDING

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We strive toward a community free from harmful cycles of trauma, substance use, and addiction and from the stigma and systemic barriers that reinforce them. Our goal is to help people develop the skills and resilience to overcome challenges and to unleash their inner capacities to create the lives they want.

Unique among substance use disorder service providers, our Clinical Director and Master's-level counselors are responsible for shaping our programs and services, participating in outreach, engaging youth and families, and achieving positive client outcomes. Our agency leadership team includes the Executive Director, Clinical Director, and program managers. They frequently review outcomes data and suggests modifications. Counselors are encouraged to suggest improvements. The theoretical underpinnings for the program and the methods we employ are largely based on Treatment Protocols published by the National Center on Substance Abuse and Child Welfare under the federal Substance Abuse Mental Health Services Administration (SAMHSA).

Our therapists receive extensive training, supervision and support from our Clinical Director. In turn, they must demonstrate strong clinical skills, including client engagement, managing resistance, and enhancing motivation for change. Each client is directly involved in setting his/her goals and treatment plans. Group clients assist in shaping various group activities and establishing group rules and norms.

As noted in the challenges section below, several of our therapists departed PEER for private practice. We were able to hire excellent, Master's level therapists to replace them, but have increased salaries and added signing bonuses to attract therapists in an increasingly competitive job market.



AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

SERVICE STATISTICS/DEMOGRAPHICS

(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 – Therapy Hours/Total Hours

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

PLEASE INDICATE FISCAL YEAR/DATES IN EACH COLUMN	Prior Year 7/1/20 - 6/30/21	Present Year 7/1/21 – 6/30/22	Proposed Year 7/1/22 – 6/30/23
Number of persons served (unduplicated count)	52	162	225
Number of units of service	583/1,735	1,816/5,405	2,520/7,502
Cost per unit of service	\$335.61/\$112.78	\$132.94/\$44.67	\$97.71/\$32.82

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

Wilmette = 27%; Winnetka = 27%; Northfield = 9%; Glencoe = 18%; Kenilworth = 0%; Glenview = 18%

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

11

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

21%



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Fiscal Year 2022-2023

(10) Units of Service to New Trier clients.
123 Therapy hours/367 Total hours

(11) Units of Service to NTT clients are what % of total
19%

(12) New Trier clients age breakdown
Clients Age 14-17 = 11 (100%)

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.**

Objective #1: To have at least 50% of youth in the program achieve a drug free status and meet NIDA's CODAP criteria for successful completion of treatment.

Result #1: 88% of youth clients achieved a drug-free status at the time of reassessment.

Objective #2: At least 75% will develop a positive support network of at least three people they can seek support and drug-free companionship as documented in their Relapse Prevention Plan.

Result #2: 86% of youth clients developed a positive network of at least three people at the time of assessment.

Objective #3: At least 75% of youth will be employed, enrolled in an educational program and/or engaged in volunteer work at the time of discharge.

Result #3: 99% of youth clients achieved employment, educational, and/or volunteer work goals at the time of discharge.

Objective #4: Upon discharge, 75% of adolescents will have an increased knowledge of the harmful effects of substance use and brain development.



AGENCY/PROGRAM APPLICATION FOR FUNDING Fiscal Year 2022-2023

Result #4: 99% of youth clients demonstrated an increased knowledge of the harmful effects of substance use and brain development at the time of discharge.

- (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)**

Through increased outreach, we seek to increase the number of adolescents we serve in the coming year. We strive to improve upon our results on the same outcomes described above.

- (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 routinely conduct annual anonymous in-person client surveys on satisfaction and suggestions for improvement. We also provide a confidential client suggestion box. Client feedback has allowed us to make significant changes in group content and schedules.

In 2020, we did not survey counseling clients on our overall services, the vast majority receiving remote counseling services, but did survey them on how counseling was progressing during COVID. In 2021, we requested that clients complete a virtual survey about our services, including their telehealth experience, however, we did not receive responses from our adolescent clients.

We actively seek perspective from parents, schools, law enforcement, and other community agencies on emerging needs and areas for improvement. Our Leadership Team meets weekly and regularly explores these issues.

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).**

As an agency, we encountered challenges on numerous fronts over the past year:

- The closure of schools and courts significantly reduced new client referrals from those sources. In addition to the challenge of not being able to connect with more community members in need of treatment, decline in client census meant related revenue loss.



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- We had to alter how we worked together as colleagues and providers, applying safety adaptations to any in-person work or meetings and conducting counseling via telehealth.
- Some of our therapists departed for private practice, their skills and experience in great demand. Consequently, we developed a new salary scale, increasing salaries and offering hiring bonuses for new clinical staff members. While this dramatically increased personnel costs, we believe it was imperative to attract and retain high-quality staff, and we shifted other expenses to adapt. Since then, we have been able to hire new Master's level therapists to replace those who left.
- We adopted costly but necessary updates of our technology infrastructure to support Electronic Health Records, telehealth, and insurance reimbursement compliance.
- We re-negotiated multiple contracts to save funds and postponed building repairs, where possible, which we will need to address and pay for in the coming year.
- We also experienced increased costs in the following areas:
 - personal protective equipment
 - supplies and services for disinfecting the entire Evanston facility, and
 - hazard pay for staff working onsite.

On-going virus mitigation measures also impacted our clients, as follows:

- For clients already in recovery, the shutdown sharply limited their access to 12-step and other in-person meetings and support groups.
- Many clients lost their jobs, or friends and family, further increasing the instability and isolation that can lead to substance misuse.

We are extremely proud that PEER Services remained open throughout the pandemic. As noted above, we transitioned our Adult and Adolescent counseling to remote telehealth and provided virtual Prevention programming during the 2020-21 SY.

Last December, in spite of the pandemic, we also launched a partnership with AMITA St. Francis Hospital in Evanston for PEER to provide clinical support and guidance to patients presenting in their ER with substance use disorders and to connect with treatment following hospital release.

Through Covid-19 adaptations, we have learned that telehealth works. Our no-show rate decreased substantially for telehealth counseling compared to in-person. Clients have shared that with transportation, childcare or other barriers eliminated, telehealth was a satisfactory and often welcomed change, especially among adult clients. We added telehealth group services and open support groups for clients in recovery, which have also been well-attended, often with greater, more regular attendance than in-person sessions.

The personal connection between client and therapist has been more difficult to establish and maintain via telehealth for teens. Adult clients accepted telehealth therapy more readily than adolescents, who do not have the same level of privacy at home or other locations to feel fully open



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during remote counseling. Adolescent participation has grown over time after a slow acceptance, but we are now working to bring more adolescents back to safe in-person counseling, to address these challenges.

In May 2021 we restored in-person services for teens and adults at our Evanston facility, and we will begin offering in-person counseling at a new co-location with Turning Point in Skokie this September, to provide a second site in place of our closed Glenview office. We believe co-locating will assist us in achieving our goals for integrating and building more meaningful partnerships with other community service organizations. We are open to discussion of providing onsite services at one or more locations in NTT, as well.

While we are grateful to provide in-person treatment again, we will continue with a hybrid care model so that clients can receive services via telehealth if they prefer this option.

Finally, in June 2021, PEER's board and Executive Director announced a **Rebuilding Year for PEER** in FY 2022 (starting July 1), designed to further address the challenges outlined above through a focus on the following objectives:

- Rebuild our programs to full patient census and revenues
 - Increase referrals and identify clients in need of services through our Outreach Project
 - Provide more prevention support across our communities
- Expand reach and depth of services
 - Reach people sooner through our Outreach Project
 - Establish new service location (Skokie: Turning Point)
- Develop new referral streams (Outreach Project)
- Hire and retain high-quality clinical staff by setting salaries at competitive levels and offering signing bonuses
- Implement staff training to address the complex trauma we are seeing in clients now

We are proud of the adaptability shown by PEER staff, board members and clients over the past year and a half, and as an organization we are prepared to navigate additional challenges posed by any continuation of or changes in Covid protocols. We will adjust our services accordingly to continue meeting client needs.



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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 our funding letter, you made the following requests and recommendations:

- **Continue prioritizing New Trier Township residents in treatment programs, especially when there is a waiting list.** We fully intend to do so. NTT clients will continue to be prioritized in treatment programs, especially when there is a waiting list.
- **We recommend you increase the size of your small board.** We are working diligently to increase the size of our board. In spring of 2021, our board established a Board Development Committee, developed and began implementing a board recruitment plan. We intend to identify and onboard 2-4 new board members over the next 12 months.
- **Continue to emphasize vaping as a prevention issue.** As noted in the Prevention section below, we will continue to emphasize vaping, along with binge drinking and marijuana use, as key prevention issues.
- **With the loss of many court referrals, outreach is also more important to publicize the availability of your services to potential clients.** We hired The Citizen Group, a firm with expertise in nonprofit outreach and communications, to renew relationships with current referral partners and identify new ones, including PCPs and pediatricians, faith-based and community-based organizations. This is our **Outreach Project**. Our participation in the North Shore **Coalition** for a Drug-free Community will also make our presence and services more familiar in the NTT communities.
- **We congratulate you on moving seamlessly to virtual services and trust that you will continue to offer them after the pandemic is over. With fewer clients appearing in-person, it makes sense that you closed the Glenview office and saved \$50k per year.** Thank you for acknowledging our swift move to virtual services. Yes, we will continue to offer and provide telehealth for counseling clients. Virtual counseling works less effectively with teens, so we will encourage in-person counseling for teens and their families. As noted above, we finalized a contract with Turning Point, a mental health provider, to launch a less-costly co-location in Skokie, which will provide a second location for onsite counseling.

RESOURCES/BUDGET



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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 Adolescent Treatment Program program relies on an experienced Clinical Director and Master's-level counselors with strong clinical skills, particularly with adolescents, and experience working with addiction.

During Covid-19 our revenue was reduced considerably. Covid relief funding allowed us to avoid significant staff cuts, which paid off as clients began to return this spring. This funding will not be repeated, so we will rely on increasing client numbers through our Outreach Project and public and private funding to maintain sufficient staffing levels to avoid waiting lists and treat all clients in need. Sliding scale fee schedules are included at the end of this application. Additional budgetary needs are outlined on the program budget page.

If the Township is unable to fund the program, staffing levels may need to be adjusted; reduced staffing could delay access to treatment services for NTT residents.

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.

N/A



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PEER Services

Adult Substance Use Treatment Program



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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.

The target population for our adult treatment program is adults ages 18 and older whose use of alcohol and/or other drugs is problematic for them. The adult treatment program addresses the behavioral, psychological, social, and physical consequences of substance use and addiction, and prepares the foundation for recovery. Our professional treatment team includes Master's-level counselors with certifications or expertise in substance use treatment, social work, individual and group counseling, art therapy and family therapy.

We provide:

- Assessment
- One-on-one counseling
- Group therapy
- Family counseling
- Individualized treatment plans
- Drug education
- Parenting training for parents in recovery
- Specialized treatment for female survivors of trauma and abuse
- Medication to assist with opioid withdrawal
- Home-based services for older adults
- Support for families
- Drug testing
- Relapse Prevention Training/Aftercare
- Psychiatric evaluations and short-term psychiatric care
- Case management

Clients may receive services between one and six times per week. Clients in Level 1 treatment, also known as traditional outpatient services, typically attend one to three individual/group counseling appointments per week.

In our Intensive Outpatient Program (IOP), clients receive a minimum of nine hours of treatment services each week. The IOP goal is to reduce the likelihood that an individual whose substance use is highly problematic would need to leave the community and enter a residential treatment program.

We strongly believe that all clients should be served in the least restrictive environment that is viable based on the clinical assessment. We try to keep as many clients as possible within the community by providing extensive treatment and support services. At the same time,



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when we identify that residential treatment is needed, our counselors refer clients to residential providers.

We also provide services specifically designed for substance misuse among older adults. While some adult clients have struggled with addiction for a long time, others have developed problems with substances later in life. Their substance use is often connected to loss, isolation, and depression. For others, a struggle with substances is related to the unintended consequences of mixing certain prescription medications, over-the-counter medications, and/or alcohol.

Substance misuse among older adults has been well-documented by the Center for Substance Abuse Treatment, which has developed specialized treatment protocols that we follow closely to respond to the frequently unmet treatment needs of adult clients.

To be eligible for treatment services, an adult client must meet the DSM V diagnostic criteria for substance use disorders and be clinically assessed as appropriate for outpatient or intensive outpatient treatment according to the American Society of Addiction Medicine guidelines for levels of care. Adults who are experiencing problems with substances but do not meet the DSM V criteria for a substance use disorder may be seen by a PEER counselor for early intervention counseling.



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(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.

Like our Adolescent Program, our Adult Treatment Program reflects NTT's focus on identifying and addressing community needs and NTT's 2007-2012 strategic priorities to:

- Encourage individual choice and the creation of more programs to support living and working in one's local community
- Provide leadership to increase awareness of those more vulnerable
- Expand NTT's ability to act as a clearing house to assist residents in finding appropriate services
- Foster collaborative partnerships with other organizations

In alignment with these priorities:

- Through our outpatient programs, PEER supports our clients to remain in the community while in treatment for substance use disorder.
- PEER serves all clients, regardless of their insurance status or ability to pay for treatment. We deliberately designed our Intensive Outpatient Program (IOP) as a community-based treatment program to assure our services are accessible to adults with severe substance misuse.
- We maintain collaborative relationships with organizations including North Shore Senior Center, the Council for Jewish Elderly, the Jewish Center for Addiction, Turning Point, Gateway, Rosecrance, the Family Service agencies, AMITA St. Francis Hospital, North Shore University Health System, and Evanston's Erie Family Health Center, among other organizations. We foster partnerships and are committed to referring clients to other service providers as needed.

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 checked="" type="checkbox"/> Aging in Place | <input checked="" type="checkbox"/> Low Income Families |
| <input type="checkbox"/> Youth Services | <input type="checkbox"/> Persons with Disabilities |
| <input type="checkbox"/> Other _____ | |



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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.**

As highlighted in the Surgeon General's groundbreaking 2016 report, *Facing Addiction in America*, addiction to alcohol and other drugs is a major public health issue, impacting people from all backgrounds and all communities. One in seven Americans will develop a substance use disorder at some point in their life. However, as shown consistently in the National Survey on Drug Use and Health, only about 10% of people with substance use disorders receive help. In part, this is due to the stigma around addiction and lack of understanding that addiction is a chronic disease, not a character flaw.

While our client numbers overall decreased during the pandemic due to lower referral rates, isolation which allowed some individuals to hide their use from employers, friends and families, and other reasons, the need for substance use treatment remains acute across Northern Cook County, including in NTT. Through our Outreach Project we will work with current and new referral partners to better identify and connect with NTT residents struggling with addiction.

Addiction is not confined to the individual with a substance use disorder. It impacts all those close to them, including children, spouses and partners, employers, friends and the community at large. When we help parents enter into recovery, we can help to stabilize an entire family. Treatment also helps to reduce the chances of car crashes caused by driving under the influence and the lasting impacts of non-fatal and fatal overdoses on families.

According to national research and anecdotal evidence from our own clients, Covid-19 has increased mental health and substance use challenges for adults, adding to their need. A nationally representative survey conducted in June 2020 by the CDC found the percentage of respondents experiencing symptoms of anxiety was three times that of the same quarter in the previous year, and the percentage of respondents experiencing symptoms of depression had quadrupled compared to the same quarter in the previous year. The survey also found that one in ten respondents started or increased substance use because of Covid-19, and reported suicide ideation twice as high as the rate for the previous year.

The combination of the Covid-19 pandemic, related job losses and financial instability, personal losses sustained during the pandemic and ongoing mental health and substance use challenges push many adults into complex crises, best met with a multi-disciplinary response, which PEER provides. Many of our adult clients are in need of concrete services such as housing, food, employment, healthcare, dental care, day care for their children, and legal support. Our counselors provide extensive case management to our clients and work closely with other service providers to meet the needs identified in the assessment and treatment planning processes.



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Our commitment to accepting clients regardless of insurance status or ability to pay is especially important in light of the financial challenges so many people, including in NTT, are experiencing related to the pandemic.

With treatment, NTT residents suffering from alcohol or drug addiction can attain lasting recovery and reclaim their lives. The Township's investment insures that each person in NTT can have access to community-based treatment services. This will ultimately enhance the overall quality of life for all NTT residents.

- (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?**

At this time we have no waiting list and are prepared to meet the full demand for services to adolescent and adult residents of NTT. Through our Outreach Project and additional relationships resulting from our involvement in the North Shore Coalition for Drug Free Communities, discussed later, we are significantly increasing our connections to formal and informal referral partners who can help to identify and connect PEER with NTT residents struggling with substance use who are not currently seeking treatment. These relationships will also help us to better understand and be responsive to changes in the needs of NTT residents.

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.**

Please see our response to this question in the Adolescent Program section above for a full description of our vision to support clients in achieving recovery by treating the whole person, including addressing past trauma and personal goals.

There we also describe the quality of our Master's-level counselors who implement a range of evidence-based treatment practices to meet our clients where they are and help them set and meet individual treatment goals. Our therapists receive extensive training, supervision and support from our Clinical Director. In turn, they must demonstrate strong clinical skills, including client engagement, managing resistance, and enhancing motivation for change.

As noted in the challenges section below, several of our therapists departed PEER for private practice. We were able to hire excellent, Master's level therapists to replace them, but have increased salaries and added signing bonuses to attract therapists in an increasingly competitive job market.



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SERVICE STATISTICS/DEMOGRAPHICS

(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 – Therapy Hours/Total Hours

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

PLEASE INDICATE FISCAL YEAR/DATES IN EACH COLUMN	Prior Year 7/1/20 – 6/30/21	Present Year 7/1/21 – 6/30/22	Proposed Year 7/1/22 – 6/30/23
Number of persons served (unduplicated count)	490	812	1,090
Number of units of service	4,425/9,741	7,332/16,142	9,843/21,668
Cost per unit of service	\$170.12/\$77.28	\$116.51/\$52.92	\$88.51/\$40.21

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

Wilmette = 34%; Winnetka = 29%; Northfield = 13%; Glencoe = 4%; Kenilworth = 2%; Glenview = 18%

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

44

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

9%



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(10) Units of Service to New Trier clients.
398 Therapy hours/876 Total hours

(11) Units of Service to NTT clients are what % of total
8%

(12) New Trier clients age breakdown
18-24: 8
25-54: 23
55+: 13

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.**

Objective #1: To have at least 33% of adults in the program achieve a drug free status and meet NIDA's CODAP criteria for successful completion of treatment.

Result #1: 85% of adults achieved a drug-free status at the time of reassessment.

Objective #2: At least 75% will develop a positive support network of at least three people they can seek support and drug-free companionship as documented in their Relapse Prevention Plan.

Result #2: 89% of adult clients developed at least three people in their positive network at the time of reassessment.

Objective #3: At least 75% of adults will be employed, enrolled in an educational program and/or engaged in volunteer work by the time of discharge.

Result #3: 85% of adult clients achieved employment, educational, and/or volunteer work at the time of discharge.



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- (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)**

Through increased outreach, we seek to increase the number of clients we serve in the coming year. We strive to improve upon our results on the same outcomes described above. Again, we continue to be heartened by adult clients' positive responses to individual counseling and group therapy telehealth.

- (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 conduct annual anonymous client satisfaction surveys and provide a client confidential suggestion box to elicit their feedback. We have applied those data to add or modify groups, make changes to our facility, identify staff training needs, and prioritize the use of agency resources.

In 2020, due to Covid-19 we conducted a client satisfaction survey with on-site MAT clients, and surveyed all clients about our service adaptations in response to Covid-19. In 2021, we administered our client satisfaction survey online, which garnered significant participation from adult clients. The survey proposed eighteen questions to assess their opinion regarding PEER Services as an organization, and specifically, client's perception of the facility, agency staff, individual counselor, group counseling, level of sensitivity to each client's ethnicity and gender, and to gain the client's opinion of how well the treatment process is assisting them with recovery and life skills development.

PEER Services Leadership Team sets performance improvement priorities and provides the resources needed to achieve improvement. Additionally, our Leadership Team ensures that all individuals who work in the organization participate in performance improvement activities.

We are currently undergoing our triennial Joint Commission re-accreditation survey process; the surveyor interviews clients anonymously and provides us with aggregated feedback data. In addition to providing an important marker of compliance and service quality, the survey process helps us to reflect on our practice and identify areas for improvement, which we have found extremely beneficial.



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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).**

We have addressed major challenges in our response to Question 16 in the Adolescent Program section.

As noted elsewhere, we found that adult clients were more receptive and responsive than adolescents to virtual individual and group therapy sessions. Adult clients told PEER that transportation and childcare concerns, often obstacles to consistent in-person attendance, were reduced with remote access to their care.

Many of our clients continue to deal with a sense of isolation as well as increased family conflicts, especially while children were not in school, job losses, financial hardship and, for some, the loss of loved ones. There was a clearly disproportionate impact on under-resourced clients and families. In 2020, several communities in the Cook County Northern Suburbs experienced significant increases in alcohol and opioid-related deaths (IDPH, April 2021).

Through increased outreach, we hope to identify and be of service to more adult NTT residents in need of support.



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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).**

Please refer to our response to this question in the Adolescent Treatment section above.

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 program utilizes a treatment team that is comprised of a Clinical Director counselors, nurses, interns and a part-time consulting physician and part-time consulting psychiatrist. As noted in the Adolescent Treatment section, we have been able to maintain staffing levels during the pandemic with the help of Covid-19 relief funding. Going forward, we will rely on increasing our client numbers and the support of private and public funders to maintain services and to continue serving low-income clients, for whose services we do not receive full payment/reimbursement. Our budgetary needs are included on the program budget form. Please find our sliding fee scales at the end of this application.

- (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.**

N/A



AGENCY/PROGRAM APPLICATION FOR FUNDING

Fiscal Year 2022-2023

**NEW TRIER TOWNSHIP
ANNUAL FUNDING REQUEST FORM**

2022-2023 PROGRAM BUDGET FORM

PROGRAM NAME: PEER Services ADULT TREATMENT			
Indicate year in each column	7/1/2020 - 6/30/2021	7/1/2021 - 6/30/2022	7/1/2022 - 6/30/2023
	PRIOR	PRESENT	PROPOSED
	YEAR	YEAR	YEAR
PROGRAM CLIENT FEES/REVENUE	307,801	451,472	455,000
PROGRAM RESTRICTED REVENUE	72,438	164,962	165,000
ALL OTHER REVENUES	39,000	-	
TOTAL REVENUES	419,238	616,434	620,000
PROGRAM EXPENDITURES			
Program Staff Salaries, Benefits, Taxes	523,148	620,918	633,336
Professional Fees/Contractual Services	71,958	73,106	74,568
General Operating Expenses	12,907	17,505	17,855
Occupancy and Utilities	37,410	37,926	38,685
Specific Assistance to Individuals	-	-	-
Administrative/Fundraising Costs	93,672	86,656	88,389
Major and Minor Equipment	5,812	5,128	5,231
Major Capital Expenses	7,785	8,006	8,167
Other/Miscellaneous	96	5,000	5,000
TOTAL EXPENDITURES	752,787	854,244	871,229



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PEER Services
Substance Use
Prevention Program

"Prevention is a conversation."

Olivia Livingston, MHA
PEER Services Prevention Coordinator



AGENCY/PROGRAM APPLICATION FOR FUNDING

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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.**

YOUTH

PEER Services' provides substance use prevention education and awareness services to youth ages 11-18. The Prevention Team is planning for and looking forward to in-person prevention activities at NTHS this school year, but will remain ready to provide programming virtually if needed. During the 2020-21 school year, we provided Prevention Programming virtually to NTHS and Sunset Ridge Middle School and Christian Heritage Academy. We produced and distributed electronic materials, convened Zoom sessions, and provided Webinars in response to specific needs identified in collaboration with school staff and the Mental Health Advisory Board at NTHS.

The PEER Prevention team will continue to provide the following services to NTT youth:

- A PEER Prevention Specialist co-facilitates the student Mental Health Advisory Board, the student group guiding school prevention substance use and mental health efforts.
- Development and distribution of printed and virtual factual information about alcohol, marijuana, e-cigarettes, and prescription drug misuse in NTHS and NTT middle schools.
- Collaboration with NTHS staff and Student Assistance Program (SAP) to incorporate healthy decision-making, coping skills, and stress management into student advisory activities.
- Prevention workshops (focused on alcohol and drug education, coping skills, and a range of other prevention topics such as healthy relationships and future planning).
- Administration and analysis of Youth Behavior Risk Survey.
- Collaboration with school staff, SAP and student group to identify areas of focus, plan and evaluate prevention programming.
- Facilitation of in-person presentations or group discussions in the school and/or community setting. We want to emphasize facilitated small groups in physical spaces where students can feel free to express their thoughts and feelings about substance use related to peer pressure.
- Participation in NTT health fairs to promote drug-free activities for youth.
- Organizing focus groups in collaboration with SAP and Kinetic Wellness to receive student feedback and ideas on effective substance use school-based communication.



AGENCY/PROGRAM APPLICATION FOR FUNDING

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PARENTS

PEER Services provides substance use prevention education and awareness services to parents of youth ages 11-18. Services include:

- Coordination with NTHS on Parent Support Network newsletter. All parents receive a quarterly informational newsletter that includes adolescent substance use trends and where to seek treatments.
- Hosting parent discussion groups about crafting family conversations and setting and enforcing consistent family-appropriate rules on substance use. In 2021, we added a new Parent Webinar series, which we intend to continue.
- Provision of print/web-based information to parents about substance use with a focus on binge drinking, marijuana, and prescription drug misuse risks to youth. We print out or direct parents to the "What to Know as a Parent or Mentor" created by the IL Dept. of Health's "Let's Talk Cannabis Illinois" prevention and wellness campaign site.
- Distribution of a prevention newsletter to parents, educators, and community service providers about current substance use prevention news, policies, and local resources. The newsletter is distributed three times per year.
- Provision of education and materials about prescription drug misuse, proper monitoring, storage, and disposal in response to opioid misuse and how to talk with a medical professional if their teen is prescribed an opioid.

SCHOOL STAFF

PEER Services provides substance use prevention services to middle school and high school staff in New Trier Township. Services include:

- Participation NTHS's All-School Wellness and Prevention Teams. PEER Services assists in reviewing the school's intervention and prevention strategies and advises on best practices.
- Outreach to NTT Township middle and high school principals and social workers to offer professional development sessions for school staff on substance use prevention topics, guidance on selecting evidence-based youth prevention education curricula, and in promoting evaluation of local substance use behaviors and attitudes revealed in the Illinois Youth Survey.
- Distribution of prevention newsletter to parents, educators, and service providers about current substance use prevention news, policies, local resources The newsletter is distributed three times per year.
- Education of school staff and SAP team around identification and referral of adolescents in need of early intervention or substance use treatment services.



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COMMUNITY

One path to community support PEER Services has provided to community members in 2020-21 is the nationally certified **Mental Health First Aid (MHFA)** courses. Free of charge, MHFA teaches participants how to identify, understand, and respond to signs of mental illness or substance use disorders. Employing step-by-step learning like CPR or First Aid training, MHFA gives adults and youth the tools to identify signs and symptoms of a mental health crisis, how to respond, interact, support, and assist. PEER Services now has two certified Mental Health First Aid Instructors (one dual-certified adult and youth program trainer and one youth program trainer) to lead this unique training in our communities. We provided four trainings last year, two focused on MHFA for adults, and two focused on MHFA for youth, and we plan to provide them again this year.

In 2019, PEER Services' staffed the formative stages, and is now the fiscal agent, of the **North Shore Coalition for Drug Free Communities (Coalition)**, a prevention initiative developed to address locally the factors that contribute to youth substance use and related risk factors. This is a voluntary collaborative prevention partnership among NTT, public and private schools, government agencies, community-based organizations, parents, residents, and fire and law enforcement departments.

The **Coalition** proudly announced in 2020 the receipt of a federal Drug-Free Communities grant of up to \$625,000 over 5 years to implement evidence-based substance use prevention programming throughout New Trier Township communities and the North Shore. While PEER Services serves as the fiscal agent of the **Coalition**, the funding is directed solely to **Coalition** activities and infrastructure, separate from PEER Prevention programming.

The **Coalition** mission is to reduce the use of e-cigarettes, alcohol, marijuana, and other substances among youth in the communities of Glenview, Kenilworth, Northbrook, Northfield, Wilmette, and Winnetka. The **Coalition** will accomplish this mission by building and sustaining a safe and drug-free community in which our youth feel protected, confident, and empowered to make healthy choices.

In recognition that local problems benefit from local solutions, **Coalition** commitments came from Winnetka Youth Organization, Haven Youth and Family Services, Winnetka Police Department, Glencoe Youth and Family Services, and New Trier High School, all whose commitment propelled the grant award, which now funds staff and resources for the Coalition. PEER Services hired a **Coalition** coordinator who began work in April 2021.

ELIGIBILITY REQUIREMENTS:

Our eligibility criteria are quite simple. To be eligible for substance use prevention services and/or to receive materials, a youth or adult must be a resident of New Trier Township or attend/work in a school located within the Township.

TARGET POPULATION:

The target populations for substance use prevention are NTT youth from 11 to 18 years old, school staff, and parents.



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(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.**

Our prevention services support key NTT priorities including stress reduction, engaging social service agencies in volunteer work in the community, and youth binge drinking prevention. We are also focused on reduction in youth cannabis use and vaping.

1. Stress Reduction : Multiple factors related to COVID-19 created additional and more intense stressors for students and families this year. The challenge of remote schooling required significant changes to our programming with virtual materials aimed at students and at parents. PEER Prevention Team and the staff at NTHS told our Prevention team in 2020 that teens were experiencing increased stress during Covid-19. In response, Prevention focused much of their resources on general wellness and self-care. We anticipate learning NTHS substance use/pandemic trends when 2021 YRBS data is released in the NTT community.

PEER Services recognizes stress as a contributing factor to youth substance use. Confirmed in the 2019 YRBS, NTHS students reported experiencing high levels of stress on a regular basis, from several sources. We continue to work with NTHS administration and student groups to support student stress prevention and management and to promote positive coping skills.

2. Engage Social Service Agencies in Volunteer Work in the Community: The North Shore **Coalition** for Drug Free Communities, a voluntary partnership, embraces goals that support PEER Services' prevention program; it coordinates and broadens prevention goals with co-ordination of intentional, consistent messages across the community more effectively than one agency at a time.

3. Youth Binge Drinking Prevention: NTHS identified youth binge drinking prevention as a priority. We are collaborating with the NTHS Prevention Team and the **Coalition** to bring an urgent focus on alcohol use with youth and parents through school and community-based outreach.

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 type="checkbox"/> Low Income Families |
| <input checked="" type="checkbox"/> Youth Services | <input type="checkbox"/> Persons with Disabilities |
| <input type="checkbox"/> Other _____ | |

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.

PEER Services has provided substance use prevention programs to the New Trier community for over 20 years. Prevention staff are continually engaged in efforts to modify services in response to new



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research in evidence-based practices as well as changing community needs, based on review of local data.

Effective prevention takes place on a community-wide scale, in schools, at home and in community settings. When a community comes together to support healthy decision-making among youth and has a collective culture that sends a no-use message, then prevention is effective.

PEER Services' prevention program coordinates with NTHS in the collecting student substance use data. Again, our major source of our prevention strategies is the CDC's biennial Youth Risk Behavior Survey, in which students report on substance use and mental health behaviors over the past 30 days. The 2019 survey found a decrease from 2017 in e-cigarette/vape use (from 42% to 33%, the 2019 national average) and small decreases in alcohol use, but binge drinking remained the same (33%). Marijuana use also remained consistent at 28%, 6 percentage points above the 2019 national average.

The 2019 survey also highlighted mental health needs. 95% of students reported some level of stress/anxiety and 21% reported feeling sad or hopeless almost every day for 2+ weeks in a row. Staff and students shared anecdotally that stress increased during the pandemic.

While some progress has been made in decreasing youth substance use in NTT, there is still much work to be done specifically around alcohol and binge drinking, e-cigarettes/vaping, and marijuana use and misuse. Input from community members has suggested that teens and parents do not fully understand the potential risks that binge drinking poses to teens or know how to appropriately handle possible alcohol poisoning.

An article on youth substance use throughout the pandemic called for attention to prevention and the value of working with place-based organizations – the type of programming we provide:

"Youth who are desperately in need of care may not get the services they need if no one identifies the problem early....We must empower and build the capacity of community mental health and addiction recovery organizations to respond to and prevent future youth substance use during the current pandemic." (Nov 2020 *Journal of Behavioral Health Services and Research*, "COVID-19 and Youth Substance Use: We Need More than Good Intentions")

Needed Funding

The funding PEER Services receives from the Illinois Department of Human Services has strict parameters and restrictions. Any work PEER does with parents, or includes parents, is not an eligible expense. The only parent education program approved for funding use is the "What to Know as a Parent or Mentor" created by the IL Dept. of Health's "Let's Talk Cannabis Illinois" prevention and wellness campaign site. This does not allow us the flexibility to address local concerns that additional parent programming can provide.

While we strive to insure prevention is adequately staffed and resourced to serve the Township, without Township funding our ability to provide parent programming would be significantly limited. In addition, we might have to reduce staffing levels which would negatively impact our ability to provide comprehensive prevention programming to NTT youth.



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- (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?**

With the continued support of NTT, PEER Services' prevention program is prepared to meet the full demand for this service with our current staffing. In prevention, there is no waiting list, but we are in active discussions with additional public middle schools and private schools in NTT to expand our services to more youth and their families.

Our prevention focus is on awareness and education through a universal public health outreach strategy: present throughout the community a consistently articulated prevention and intervention message that becomes familiar. We will work with **Coalition** members to coordinate a consistent message all **Coalition** members can apply or display at their facilities, events, and public-facing presentations.

PEER Services' prevention program has identified more urgent education on binge drinking as a priority. Although binge drinking has long been a concern of our prevention program, community input gathered in the past year suggests that significant education and awareness should be heightened among youth and parents about the risks of underage binge drinking. Our programming will also continue to address e-cigarette use/vaping and marijuana use.

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.**

PEER Services' prevention program has a clear vision for our work in the Township - to prevent or delay youth (ages 11-18) substance use in New Trier Township. Based on research in the prevention field and extensive experience in public health, we believe that the combination of programs described above will lead to the achievement of this vision. We are motivated to implement this vision with comprehensive community- and school-wide prevention messages that address youth and the persuasive adults in their lives: parents and school personnel.

Our partnership in the **Coalition** will boost our prevention capacity to reduce the use of e-cigarettes, alcohol, marijuana, and other substances among youth in the North Shore communities of communities of Glencoe, Glenview, Kenilworth, Northbrook, Northfield, Wilmette, and Winnetka.

PEER Services assigns one full-time staff equivalent to deliver prevention services in the Township. Our Prevention Coordinator Olivia Livingston, MHA, oversees all PEER Prevention work in NTT. Direct



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services are delivered by Olivia Livingston, Erin Tegge, MA, LSW, and Greg Nelson, MPH. As noted above, PEER Services also hired the Coalition Coordinator under the DFC grant.

Our prevention program relies on credible data-based resources to shape all of our services. We have significant experience in developing objectives, designing measurement tools, and applying evaluation data to performance. We collect NTT metrics, opinions, and client experiences through focus groups, informal hardcopy or on-line surveys, post-program evaluations, and the bi-annual high school CDC survey Youth Risk Behavior Survey.

SERVICE STATISTICS/DEMOGRAPHICS

- (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 – Staff Hours/All Hours (Includes Administrative Hours)

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

PLEASE INDICATE FISCAL YEAR/DATES IN EACH COLUMN	Prior Year 7/1/20 – 6/30/21	Present Year 7/1/21 – 6/30/22	Proposed Year 7/1/22 – 6/30/23
Number of persons served (unduplicated count)	11000	11000	12000
Number of units of service	8900/9500	8900/9500	9500/10500
Cost per unit of service	\$31.34/\$29.36	\$30.83/\$28.88	\$29.46/26.65

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

Our Prevention programs are universal and currently serve all the students and parents in New Trier Township High School, Sunset Ridge Middle School and Christian Heritage Academy. Due to the nature of the services we provide, we do not collect specific demographic information on service recipients.



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

5,855

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

53%

(10) Units of Service to New Trier clients.

3,744

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

39%

(12) New Trier clients age breakdown

70% were students ages 11-18. The remaining 30% were adults who impact youth including parents, school staff, and the staff of youth-serving agencies.

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.**

In the 2020-2021 school year our outcomes looked a bit different than normal. Between fully remote learning and the then the choice of a hybrid model at NTHS, prevention had fewer opportunities to engage with students and provide direct services.

At NTHS, we provided all our customary prevention campaign materials electronically, utilized emails, social media, and other school electronic platforms to deliver those messages/materials. Our parent materials, including the parent guide, were made available on NTHS's website, and emailed to the school community. We were able to reach the entire student population and parents using virtual methods.



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We were also provided live, virtual prevention education workshops to the Sunset Ridge 8th graders.

We are still in the process of evaluating the specific topics we shared with students this year. While we still provided information on alcohol, cannabis, and e-cigarettes, we also emphasized student social-emotional protective factors to support the management of pandemic-related mental health and stress. In these many months of isolation and uncertainty, our intent was to prevent the initiation of substance use.

In the substance use prevention sector, we measure outcomes through changing community-wide youth behaviors and attitudes towards alcohol and drug use. We look at actual 30-day use among students but also the perception of risk, social norms, and perception of approval from both parents and other peers. Currently, we do not have updated data on prevention efforts in the community this past year. Also, any data collected during the time of COVID-19 will need to be analyzed carefully as this is an unprecedented time in our community.

We will have more definitive data, as well as a direction to proceed, once the March 2021 YRBS results are announced.

(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)**

We look forward to meeting students live, itself an improvement over last year, and implementing the programming described in question 1, above, for students, staff, parents and the community as a whole.

In addition, we look forward to expanding our work in the following ways:

- Expanding our prevention efforts to include Loyola Academy and additional NTT middle schools.
- Expanding the reach of our program to K-8 schools to support the use of evidence-based classroom curricula. We are currently reaching out to NTT public and private elementary and middle schools to obtain invitations to include grade-appropriate prevention services remotely or in-person.
- Deepening our data collection so we have a more thorough understanding of the substance use attitudes and behaviors among NTT youth.



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- (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.**

Our program effectiveness and evaluation measures include:

PEER Services' prevention staff work with New Trier Township High School to revise, administer, and analyze results of a biennial health survey modeled after the CDC's Youth Risk Behavior Survey, last administered in March 2021.

We conduct student focus groups to gain feedback and information on campaign materials, we conduct an annual intercept survey to gain information on effective delivery of our campaign materials and believable sources of information. For parent/community webinars and in-person workshops, we administer evaluations to determine program quality and opportunities for the future.

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).**

We addressed many of the major challenges facing the organization in question 16 of the Adolescent Substance Use Program section above.

Specific to Prevention:

As always, the central challenge of Prevention work is how to better educate students and parents about the risk factors related to substance use, how to teach healthy decision-making and coping skills, and how to change student, parent and community attitudes regarding youth substance use. We continue to work closely with students and staff at NTT schools to refine our Prevention programming to better address these concerns, and now have an opportunity to work community-wide through the **Coalition**.

School closures and remote schooling challenged our ideal model of prevention services provided in-person or on school premises. We put a great deal of thought and planning into how to adapt our services to achieve the same goals in a virtual setting.

In 2020, our Prevention team successfully transitioned prevention programming for students and parents to virtual formats, including our prevention education and information campaigns at local high schools, prevention workshops for middle and high school students, and prevention webinars for parents and families of teens.

In SY 2021-22, NTHS' board plans a return to all-in-person classes in revised longer class blocks to reduce student circulation within the school. This is welcome news for the return of our



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Prevention Team's in-person presence and coordination with Kinetic Wellness, Student Assistance Program, and the All-School Wellness Team.



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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 line with your recommendation, we will continue to emphasize vaping prevention within our prevention programming in NTT.

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.**

Our Prevention programming relies on staffing by skilled Prevention Specialists and our Prevention Coordinator, along with resources to produce print and/or electronic materials and, in the past year, a Zoom webinar account to deliver workshops virtually.

Typical Prevention expenses decreased during our transition to virtual-only prevention service delivery due to a significant reduction in high-cost print materials, and no travel costs to appear in-person at communities' schools. We invested these savings in professional development for our Prevention staff to build their capacity to provide quality programming to youth, families and the community.

PEER Services relies on local partnerships to deliver prevention services. PEER Services' prevention program has developed enduring partnerships with New Trier High School that result in greater access to youth, parents, and staff. Without continued support from NTT, we may need to reduce staff, which would limit the number of schools in which we could work and could hinder our ability to provide a full suite of Prevention services.

- (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.**

N/A



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NEW TRIER TOWNSHIP
ANNUAL FUNDING REQUEST FORM

2022-2023 PROGRAM BUDGET FORM

PROGRAM NAME: PEER Services PREVENTION			
Indicate year in each column	7/1/2020 - 6/30/2021	7/1/2021 - 6/30/2022	7/1/2022 - 6/30/2023
	PRIOR	PRESENT	PROPOSED
	YEAR	YEAR	YEAR
PROGRAM CLIENT FEES/REVENUE	18,071	-	
PROGRAM RESTRICTED REVENUE	281,663	236,663	240,000
ALL OTHER REVENUES	1,150	-	
TOTAL REVENUES	300,884	236,663	240,000
PROGRAM EXPENDITURES			
Program Staff Salaries, Benefits, Taxes	200,616	213,283	217,549
Professional Fees/Contractual Services	7,721	5,414	5,522
General Operating Expenses	11,812	3,842	3,919
Occupancy and Utilities	12,777	13,599	13,871
Specific Assistance to Individuals	-	-	-
Administrative/Fundraising Costs	41,012	33,269	33,934
Major and Minor Equipment	2,270	2,072	2,114
Major Capital Expenses	2,710	2,871	2,928
Other/Miscellaneous	-		
TOTAL EXPENDITURES	278,917	274,350	279,837



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PEER Services Sliding Fee Scales FY2020

Below are three examples of our Sliding Fee Scales for specific treatment services from FY2020. They are aligned to federal poverty guidelines. Beginning with this fee structure, we will assess what our clients can afford to pay for treatment and will decrease fees, down to zero, as needed.

Level 1 INDIVIDUAL Outpatient Treatment (Adult and Adolescent) Treatment Scholarship Guidelines FY 2020

Annual Income	\$ 0- \$24,980	\$24,980- 33,820	\$33,820- 42,660	\$42,660- 51,500	\$51,500- 60,340	\$60,340 - 69,180	\$69,180 - 78,020	\$78,020 - 86,860	\$86,860 - \$100,000	\$100,001- 120,000	\$120,001- 140,000	\$140,001- 180,000
Number of Dependents	Shaded Areas Show Family Income Eligibility Criteria Contract Reimbursed (Non-Medicaid)											
1	15	20	30	40	50	60	90	100	100	120	140	140
2	10	15	25	35	40	50	80	90	90	120	140	140
3	10	15	20	30	35	40	70	80	80	120	140	140
4	10	10	20	25	25	30	60	70	70	100	140	140
5	5	10	15	20	20	20	50	60	60	100	120	140
6	5	5	10	15	15	15	40	50	50	90	120	140
7	5	5	10	10	10	10	30	40	40	80	100	140
8 or more	5	5	5	5	10	10	20	20	30	70	100	140

1 Hour Individual Therapy = \$140.00

PEER Services Sliding Fee Scales FY2020

ASSESSMENT SLIDING SCALE FEE SCHEDULE Treatment Scholarship Guidelines FY 2020

Annual Income	\$ 0- \$24,980	\$24,980- 33,820	\$33,820- 42,660	\$42,660- 51,500	\$51,500- 60,340	\$60,340 - 69,180	\$69,180 - 78,020	\$78,020 - 86,860	\$86,860 - \$100,000	\$100,001- 120,000	\$120,001- 140,000	\$140,001- 180,000	\$180,001 & Above
Number of Dependents	Shaded Areas Show Family Income Eligibility Criteria Contract Reimbursed (Non-Medicaid)												
1	25	35	50	60	95	95	95	120	150	195	195	195	195
2	25	25	40	60	95	95	95	120	150	195	195	195	195
3	25	25	35	50	95	95	95	120	150	195	195	195	195
4	25	25	30	50	60	95	95	95	120	195	195	195	195
5	25	25	30	40	50	60	75	95	120	195	195	195	195
6	25	25	30	30	40	50	75	95	120	195	195	195	195
7	25	25	25	25	35	40	50	50	120	195	195	195	195

Alcohol and Drug Assessment including Toxicology \$195.00

Adult IOP Group Fee Schedule

Treatment Scholarship Guidelines FY 2020

Annual Income	\$ 0- \$24,980	\$24,980- 33,820	\$33,820- 42,660	\$42,660- 51,500	\$51,500- 60,340	\$60,340 - 69,180	\$69,180 - 78,020	\$78,020 - 86,860	\$86,860 - \$100,000	\$100,001- 120,000	\$120,001- 140,000	\$140,001- 180,000
Number of Dependents	Shaded Areas Show Family Income Eligibility Criteria Contract Reimbursed (Non-Medicaid)											
1	30	30	40	50	60	80	120	160	200	240	280	325
2	25	25	35	45	45	70	100	120	160	200	240	325
3	20	20	25	35	35	45	70	80	100	120	160	270
4	20	20	25	30	30	40	60	70	80	100	120	240
5	15	15	20	25	25	35	45	60	70	80	100	200
6	15	15	20	25	25	30	35	45	60	70	80	160
7	15	15	15	20	20	25	30	35	45	50	70	100

3 Hour Group Session = \$325