

To: The Honorable Pat Dowell

Chairman, Committee on the Budget and Government Operations

From: Allison Arwady, MD

Commissioner

Chicago Department of Public Health

CC: Elizabeth Beatty

Mayor's Office of Intergovernmental Affairs

Date: October 18, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID#: 41-01 CARE Results

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Lee asked for results of the Crisis Assistance Response and Engagement (CARE) program.

CARE data is available via a dashboard here: https://www.chicago.gov/city/en/sites/public-safety-and-violence-reduction/home/CARE-Dashboard.html

To find the CARE dashboard, scroll down to the middle of the page.



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Mayor's Office of Intergovernmental Affairs

Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-2 Mental Health Positions

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Rodriguez and Osterman asked about the status of the mental health positions in the 2022 budget, and how many times they were posted.

There were 29.5 FTE Mental Health Clinic positions vacant at the beginning of 2022:

- 13 Clinical Therapist III 7 positions posted June 2022, 4 filled and began October 2022. 6 positions in reclassification process for Clinical Therapist II. Clinical Therapist III to be posted November 2022. New title Clinical Therapist II to be posted in 2023.
- 1 Psychologist Posted twice in 2022, 2 offers made and both declined. Will be reposted in 2023.
- 1.5 Psychiatrist* Posted twice in 2022 no candidate applications. Will be reposted in Nov. 2022.
- 3 Community Outreach Coordinators—Positions expected to be posted in first quarter of 2023.
- 7 Behavioral Health Assistants 5 positions currently posted.
- 1 Administrative Assistant III Posted September, interviews to be scheduled.
- 1 Epidemiologist II Posted in September, interviews scheduled to start the week of October 24th.
- 1 Staff Assistant
 – Awaiting hiring paperwork.
- 1 Director of Mental Health Center- Posted in April 2022, 2 offers made and both declined. Position will be reposted in 2023.

^{*}Psychiatrst position is based on total hours that are equivalent to 1.5 FTE



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Re: Request for Information from Annual Appropriation Committee Hearing

ID#: 41-03 Violence Prevention South Shore

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Hairston asked about violence prevention outreach in South Shore.

Below is a report on Claretian activities reported to CDPH from 67th Street to 73rd Street, DuSable Lakeshore to Stony Island Avenue.

As always, please let me know if you have any further questions.

Claretian Beats Served:

- 331 (Jackson Park and 67th-71st and Jeffery-Lake Shore Drive)
- 332 (71st to 67th to Dorchester Ave to Jeffery Blvd)
- 421 (79th to 75th & Yates Blvd to Lake Shore Drive)
- 334 (75th to 71st to Crandon Ave to Lake Michigan)



The following table provides preliminary data on the agency's activities from January – August 2022.

| | 1/1/22 - |
|--|----------|
| SUB-CONTRACTORS: South Shore; Claretian | 8/30/22 |
| CPIC (CRIME PREVENTION AND INFORMATION CENTER) | |
| # CPIC notifications received from CPD (via MFS) | 60 |
| # of CPIC notifications received concerning non-fatal shootings | 55 |
| # of CPIC notifications received concerning fatal shootings | 5 |
| # CPIC notifications responded to by SO team(s) | 60 |
| How did Street Outreach Workers respond to each CPIC? | |
| In response to a CPIC, outreach workers conducted CPIC-mediations to diffuse further | |
| conflicts/retaliation | 3 |
| In response to a CPIC, outreach workers are monitoring the situation (no mediations | |
| conducted immediately) | 57 |
| TOTAL # of responses to monthly CPIC notifications | 60 |
| In addition to the above listed CPIC responses, outreach workers also saturated the area of the | |
| incident with presence and public education materials (#incident count) | 57 |
| OUTREACH SERVICES | |
| Total Persons Enrolled in High-Risk Caseload for Street Outreach support | 88 |
| # of new participants enrolled in Outreach services (persons who have completed the | |
| intake process) | 19 |
| # of participants enrolled as of January 1, 2022 (persons who have completed the intake process) | 69 |
| # of hours outreach workers engaged in canvassing in target areas | 10,946 |
| # of educational and prevention resources provided to community residents, pre-participants, | 10,946 |
| participants | 72,375 |
| # of pre-participants reached via outreach/canvassing | 2,389 |
| CASE MANAGEMENT AND REFERRALS COMPLETED | , |
| # of new participants enrolled in Case Management services (persons who have completed | |
| the intake process) | 12 |
| # Education referrals completed | 4 |
| # Employment referrals completed (including to MPA's Metropolitan Peace Academy services) | 1 |
| I. FACILITATE PARTNERSHIPS BETWEEN THE SO PROGRAM AND OTHER SYSTEM-LEVEL | |
| PARTNERS | |
| # of CP4P meetings attended | 64 |
| # of Street Outreach meetings attended | 64 |
| # of Victim Services meetings attended | 64 |
| # of Regional Coordination meetings on the West or South side attended | 32 |



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Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-04 HIV Funding

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Hadden and Knudsen asked for a list of delegate agencies receiving HIV funding, and how many are black led.

Please find below a table detailing a list of delegate agencies receiving HIV funding, and how many are black led.



DEPARTMENT OF PUBLIC HEALTH

| Agency | Amount | Black Led* |
|--|------------|---|
| Access Community Health Center | 500,000 | Y |
| Agape Missions | 150,012 | |
| AIDS Foundation of Chicago (AFC) | 11,288,856 | |
| AIDS Healthcare Foundation | 339,756 | |
| Alexian Brother Bonaventure House | 251,599 | |
| Alliance Care 360 | 774,333 | Y |
| Ann & Robert Lurie Children's Hospital | 280,852 | |
| Brave Space Alliance | 250,000 | Υ |
| Catholic Charities | 118,362 | |
| Center on Halsted | 269,786 | |
| Chicago Black Gay Men's Caucus | 287,500 | Υ |
| Chicago House | 2,717,033 | |
| Children's Place Association | 175,000 | Υ |
| Christian Community Health Center | 150,927 | Υ |
| Community Supportive Living Systems | 92,584 | Υ |
| Erie Family Health Center | 350,006 | |
| Heartland Alliance Health | 1,885,505 | Heartland Alliance is but Heartland Alliance Health is not |
| Heartland Human Care Services | 882,252 | Heartland Alliance is but Heartland Alliance Health is not |
| Hektoen: Cook County Health System | 5,400,000 | |
| Housing Opportunities for Women | 285,551 | |
| Howard Brown Health | 3,627,500 | |
| Human Resources Development Institute | 202,539 | Υ |
| Lake County Health Department | 251,623 | |
| Legal AID Chicago (Former Legal Assistance Foundation) | 284,000 | |
| Legal Council for Health Justice | 394,000 | |
| Loyola Medical Center | 177,876 | |
| McDermott Center DBA Haymarket Center | 1,135,370 | |
| Michael Reese Research Education Foundation | 700,000 | |
| Northwestern University | 950,000 | |
| Open Door | 649,678 | |



| Pilsen Wellness Center | 80,000 | |
|--|------------|---|
| Prairie State Legal | 172,000 | |
| Puerto Rican Cultural Center | 1,406,522 | |
| Sinai Health System | 895,245 | Υ |
| South Shore Hospital | 205,510 | |
| South Side Help Center | 360,072 | Y |
| The Board of Trustees of the University of Illinois | 2,191,849 | |
| The Boulevard of Chicago | 363,440 | |
| The Chicago Recovery Alliance | 315,000 | |
| Unity Parenting & Counseling | 131,682 | Υ |
| Universal Family Connection | 287,500 | Υ |
| University of Chicago | 2,450,000 | |
| Grand Total | 43,681,320 | |
| Total Funding to 12 Black Led Organizations | 4,107,382 | |

^{*} For purposes of the CDPH Bureau of Syndemic Infectious Disease, Black-led is defined as having a Black Executive Director/CEO. In many cases, the above organizations also directly fund community-based providers.



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Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-05 Violence Prevention Funding

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Osterman asked for a breakdown of the \$85 million that was appropriated for violence prevention work last year, and what has been actually paid out to agencies doing street outreach work.

What has been appropriated for violence prevention

Community Safety Coordination Center and Community Violence Intervention Funding (\$45m) Youth Violence Intervention Programs (\$20m) Youth Diversion (\$10m) Victim Services (\$10m)

What has been Awarded to Street Outreach

\$12.3m has been awarded for street outreach

What has been paid out for Street Outreach

\$6.8m has been paid out to organizations and delegate agencies doing the street outreach work



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Re: Request for Information from Annual Appropriation Committee Hearing

ID#: 41-06 Infant Mortality

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Moore asked for an update on infant mortality trends.

Below is a table that displays the Chicago infant mortality rates for 2016 through 2020. Overall Chicago infant mortality rates have decreased between 2016-2020. All races and ethnicities have had a decrease in infant mortality rates between 2016-2020.

| Infant Mortality Rates by Race-Ethnicity, Chicago, 2016 – 2020 (rate per 100,000) | | | | | |
|---|------|------|------|------|------|
| | 2016 | 2017 | 2018 | 2019 | 2020 |
| All race-ethnicities (Chicago) | 7.1 | 6.6 | 7 | 6.3 | 5.2 |
| Latinx | 6.3 | 5.5 | 5.8 | 5.2 | 4.1 |
| Non-Hispanic Asian/Pacific Islander | 3.2 | 4.0 | 4.8 | 3.4 | 1.3 |
| Non-Hispanic Black | 12.7 | 11.4 | 12.7 | 10.3 | 10.5 |
| Non-Hispanic White | 3.4 | 3.6 | 3.3 | 3.0 | 2.0 |



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Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID#: 41-07 CARE Calls

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Hadden asked for data on the Crisis Assistance Response and Engagement (CARE) program, police engagement, and staff capacity.

CARE data is available via a dashboard here: https://www.chicago.gov/city/en/sites/public-safety-and-violence-reduction/home/CARE-Dashboard.html

To find the CARE dashboard, scroll down to the middle of the page.

There were 110 calls in which CPD requested the CARE team because they determined that the caller's needs would be better met by the CARE team.

There are a multiplicity of factors that determine staff capacity given their multiple responsibilities. Clinician's responsibilities include 911 call response, case management follow up, and staffing call center.



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Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-08 Opioids

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Taylor asked for Opioid usage data by geography and race.

Opioid data is available on the Chicago Health Atlas here: https://chicagohealthatlas.org/

To find data by community area and race:

- 1. Search for "opioid-related overdoses" in the search bar
- 2. Click on a community area to view overdose data by race/ethnicity

Opioid reports with community area and race/ethnicity data are also available in PDF format here: https://overcomeopioids.org/free-resources



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Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-09 Vacancies

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman LaSpata asked for an update on CDPH Corporate and grant-funded vacancies.

As of October 18, 2022, CDPH had a total of 510 vacancies, 86 are funded by the Corporate fund and 424 are funded by grants.



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Date: October 24, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-10 Violence Prevention Organizations

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Moore asked for a list of organizations funded by the state and county that are doing violence prevention work in Chicago, plus a list of organizations funded by CDPH for violence prevention in Chicago.

Below is a list of organizations CDPH currently funds for violence prevention work.

- Alliance of Local Service Organizations (ALSO)
- Alternatives
- Breakthrough Urban Ministries Inc.
- BUILD, Inc.
- Centers for New Horizons
- Chicago Children's Advocacy Center
- Chicago Survivors
- Envision
- Habilitative Systems
- Institute for Nonviolence Chicago (INVC)
- Metropolitan Family Services
- New Life Centers of Chicagoland
- Public Health Institute of Metropolitan Chicago
- Taproots



- Together Chicago
- UCAN
- Universal Family Connection
- Youth Guidance
- Youth Advocate Program, Inc.

Inquiries about violence prevention funding at the County and State should be directed to them.



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Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-11 TICC

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Rodriguez-Sanchez asked for data and definitions on services provided by Trauma Informed Centers of Care (TICC).

Below are tables with data and definitions on TICC services.



| FY22 TICC TOTALS (January -June 2022) | | | | | |
|---------------------------------------|-------------------------|-------------------------|----------------------------|--|--|
| | Q1 | Q2 | TOTAL FY22 through June | | |
| Populations Served | Total Clients Served | Total Clients Served | Total Clients Served | | |
| Age | Total Clients Served | Total Clients Served | Total Clients Served | | |
| Youth (0-17) | 3308 | 2710 | 6018 | | |
| Young Adults (18 – 21) | 1037 | 880 | 1917 | | |
| Adults (22+) | 6606 | 5176 | 11782 | | |
| TOTAL UNDUPLICATED CLIENTS SERVED | 10951 | 8766 | 19717 | | |

CDPH tracks services each quarter. A table of the quarterly data summary is below. Clients that receive services across quarters are counted each quarter. To track unduplicated client numbers, each client is counted once at the point of enrollment for services.

| FY22 TICC TOTALS (January -June 2022) | | | | | | |
|--|-------------|------------------------|----------------|------------------------|----------------------------|---------------------|
| | Q1 | | Q2 | | TOTAL FY22 through June | |
| Service Type | Total Units | # Clients Served | Total Units | # Clients Served | Total Units | # Clients Served |
| Services Provided to Youth (ages 0 - 17) | | | | | | |
| Behavioral Health Consultation | 781 | 611 | 967 | 836 | 1748 | 1447 |
| Case Management and Care Coordination | 2300 | 1071 | 1433 | 1000 | 3733 | 2071 |
| Community Health Worker (CHW) Services | 35 | 15 | 37 | 8 | 72 | 23 |
| Crisis Intervention | 741 | 552 | 1280 | 767 | 2021 | 1319 |
| Outpatient Family Therapy | 338 | 186 | 262 | 164 | 600 | 350 |
| Outpatient Group Therapy | 102 | 54 | 188 | 83 | 290 | 137 |
| Outpatient Individual Therapy | 2779 | 1517 | 2732 | 1683 | 5511 | 3200 |



DEPARTMENT OF PUBLIC HEALTH

| Peer Services | 0 | 0 | 3 | 3 | 3 | 3 |
|--|------|-------|------|------|-------|------|
| Psychiatric Evaluation | 121 | 118 | 114 | 98 | 235 | 216 |
| Psychiatric Medication Monitoring | 197 | 165 | 179 | 138 | 376 | 303 |
| Psychological Testing | 5 | 5 | 171 | 66 | 176 | 71 |
| Community Support Individual (CSI) | 55 | 24 | 48 | 37 | 103 | 61 |
| TOTAL SERVICES PROVIDED BY | 7455 | 4318 | 7414 | 4883 | 14869 | 9201 |
| MONTH: | 7433 | 4516 | 7414 | 4003 | 14003 | 9201 |
| Services Provided to Transitional Age Youth (18 - 21) | | | | | | |
| Behavioral Health Consultation | 339 | 242 | 379 | 284 | 718 | 526 |
| Case Management and Care Coordination | 850 | 365 | 668 | 406 | 1518 | 771 |
| Community Health Worker (CHW) Services | 1 | 1 | 6 | 5 | 7 | 6 |
| Crisis Intervention | 118 | 79 | 97 | 99 | 215 | 178 |
| Outpatient Family Therapy | 3.35 | 5 | 22 | 20 | 25 | 25 |
| Outpatient Group Therapy | 323 | 154 | 182 | 80 | 505 | 234 |
| Outpatient Individual Therapy | 1480 | 636 | 1245 | 622 | 2725 | 1258 |
| Services | 0 | 0 | 2 | 2 | 2 | 2 |
| Psychiatric Evaluation | 39 | 36 | 52 | 40 | 91 | 76 |
| Psychiatric Medication Monitoring | 167 | 155 | 245 | 197 | 412 | 352 |
| Psychological Testing | 2 | 2 | 63 | 26 | 65 | 28 |
| Community Support Individual (CSI) | 62 | 3 | 17 | 9 | 79 | 12 |
| TOTAL SERVICES PROVIDED BY | 2206 | 4.670 | 2070 | 4700 | 6264 | 2460 |
| MONTH: | 3386 | 1678 | 2978 | 1790 | 6364 | 3468 |
| Services Provided to Adults (age 22+) | | | | | | |
| Behavioral Health Consultation | 1944 | 1388 | 1710 | 1390 | 3654 | 2778 |
| Case Management and Care Coordination | 2326 | 1375 | 1764 | 903 | 4090 | 2278 |
| Community Health Worker (CHW) Services | 538 | 117 | 520 | 107 | 1058 | 224 |
| Crisis Intervention | 210 | 151 | 274 | 112 | 484 | 263 |
| Outpatient Family Therapy | 61 | 35 | 35 | 25 | 96 | 60 |



DEPARTMENT OF PUBLIC HEALTH

| Outpatient Group Therapy | 550 | 220 | 620 | 227 | 1170 | 447 |
|------------------------------------|-------|------|-------|------|-------|-------|
| Outpatient Individual Therapy | 6697 | 3114 | 6929 | 3352 | 13626 | 6466 |
| Peer Services | 33 | 9 | 1 | 1 | 34 | 10 |
| Psychiatric Evaluation | 322 | 318 | 481 | 464 | 803 | 782 |
| Psychiatric Medication Monitoring | 2152 | 2026 | 4380 | 1882 | 6532 | 3908 |
| Psychological Testing | 10 | 10 | 56 | 17 | 66 | 27 |
| Community Support Individual (CSI) | 281 | 50 | 144 | 59 | 425 | 109 |
| TOTAL SERVICES PROVIDED BY MONTH: | 15124 | 8813 | 16914 | 8539 | 32038 | 17352 |

| Keyword | Definition |
|--|--|
| Behavioral Health Consultation | Brief (10-30 minutes), symptom-focused or solution-oriented behavioral health interventions usually delivered in a primary care setting intended to enhance motivation, functioning, and engagement in care. Behavioral Health Consultants are Licensed Clinical Mental Health professionals. |
| Case Management and Care Coordination | , Assessment and coordination of a range of services that are responsive to a patient's service needs, including behavioral health, rehabilitation, physical health, social services, housing, employment, and education. Case Managers and Care Coordinators are specialized staff designated to develop resources and facilitate connections to providers programs, and service systems. |
| Community Health Worker (CHW) Services | Support related to health education services, identification of community resources, case management, home visits and outreach services, and care coordination activities. CHWs are frontline public health workers who are trusted members of and/or have unusually close understanding of the community served, and often become part of a patient's support network. |
| Community Support Individual (CSI) | The service consists of therapeutic interventions that facilitate illness self-management, skill-building, identification, and use of natural supports, and use of community resources. At least 60% of CSI services must be provided in natural settings. |



| Crisis Intervention | Activities or services for a person experiencing a psychiatric crisis designed to reduce symptoms, assist in stabilization, and aid in restoring a level of functioning. |
|--------------------------------------|---|
| Outpatient Family Therapy | Family interventions based on psychotherapy theory and techniques to promote emotional, cognitive, behavioral or psychological changes in the family unit as identified in the treatment plan. A Mental Health Professional with clinical training delivers a brief, medium, or long-term family therapy format depending upon the nature of a family unit's presenting concerns and the goals of the intervention. |
| Outpatient Group Therapy | Group interventions based on psychotherapy theory and techniques to promote emotional, cognitive, behavioral or psychological changes as identified in the treatment plan. A Mental Health Professional with clinical training delivers a brief, medium, or long-term group therapy format depending upon the nature of a client/group's presenting concerns and the goals of the intervention. |
| Outpatient Individual Therapy | One-on-one interventions based on psychotherapy theory and techniques to promote emotional, cognitive, behavioral or psychological changes as identified in the treatment plan. A Mental Health Professional with clinical training delivers a brief, medium, or long-term therapy format depending upon the nature of a client's presenting concerns and the goals of the intervention. |
| Peer Services | Supportive services delivered by a peer support specialist with lived or shared experiences outside the clinical environment. These services support clients in staying engaged in the recovery process, reduce the likelihood of relapse, can include home visiting and outreach, and supports the client's broader psychosocial functioning. |
| Psychiatric Evaluation | Evaluation completed by a Psychiatrist or Psychiatric Nurse Practitioner to diagnose emotional, behavioral, or developmental conditions or disorders. |
| Psychiatric Medication Monitoring | Observation and evaluation of target symptom responses to prescribed medications, adverse effects, and new target symptoms for medication. Can be performed by a licensed prescriber of psychiatric medication such as a Psychiatrist or Psychiatric Nurse Practitioner or by a Primary Care Provider when clinically appropriate. |
| Psychological Testing | Psychological evaluation conducted and documented by the provider consistent with the Clinical Psychologist Licensing Act (225 ILCS 15), using nationally standardized psychological assessment instruments. |



| Unduplicated Clients Served (Everything under Populations Served section) | Clients are only counted once during the funding year upon enrollment in services, no matter how many service types and units the client receives during that year. |
|---|---|
| Units | All service units rendered during the month are counted regardless of duration. Each service unit rendered to a client during the month is counted individually. |
| Clients Served (Service type, Setting, and Ability to Pay sections) | Number of clients that received services for the month. A client is only counted once per service type per month. A client can receive multiple services within the month, but will only be counted once per service type (in the clients served column). |
| Bisexual | A term used to indicate attraction or potential for attraction to more than one gender. |
| Cisgender | People whose gender identity aligns with the sex they were assigned at birth. |
| Cross Sector Collaboration Developmental Disability: Autism Spectrum Disorder | Collaboration across sectors is built on a shared understanding of trauma and principles of a trauma-informed approached. While a trauma focus may not be the stated mission of various service sectors, understanding how awareness of trauma can help or hinder achievement of an organization's mission is a critical aspect of building collaborations. People with significant trauma histories often present with a complexity of needs, crossing various service sectors. Even if a mental health clinician is trauma-informed, a referral to a trauma-insensitive program could undermine the progress of the individual. A complex developmental condition that involves persistent challenges in social interaction, speech and nonverbal communication, and restrictive/repetitive behaviors. The effects of ASD and the severity of symptoms are different in each person. |
| Engagement and Involvement of People In Recovery, Trauma Survivors, People receiving services and family members receiving services | These groups have significant involvement, voice, and meaningful choice at all levels and in all areas of organizational functioning (e.g., program design, implementation, service delivery, quality assurance, cultural competence, access to trauma-informed peer support, workforce development, and evaluation). This is a key value aspect of a trauma-informed approach that differentiates it from the usual approaches to services and care. Measures and evaluation designs used to evaluate service or program |
| Evaluation | implementation and effectiveness reflect an understanding of trauma and appropriate trauma-oriented research instruments. |



| Extremely Low Income | HUD Income Limits: 1 Person (\$17,850), 2 Person (\$20,400), 3 Person (\$22,950), 4 Person (\$25,500), 5 Person (\$27,550), 6 Person (\$29,600), 7 Person (\$31,600), 8 Person (\$33,650) |
|--------------------------------------|---|
| Financing | Financing structures are designed to support a trauma-informed approach which includes resources for: Staff training on trauma, key principles of a trauma-informed approach; development of appropriate and safe facilitates; establishment of peer-support, provision of evidence-supported trauma screening, assessment, treatment, and recovery supports; and development of trauma-informed cross-agency collaborations. |
| Gay | Most frequently used by male-identified people who experience attraction primarily or exclusively for other male- identified people. |
| Gender Identity | Gender describes one's internal understanding and experience of their own gender identity. Each person's experience of their gender identity is unique and personal and cannot be known simply by looking at a person. |
| Governance and Leadership | The leadership and governance of the organization to support and invest in implementing and sustaining a trauma-informed approach; there is an identified point of responsibility within the organization to lead and oversee this work; and there is inclusion of the peer voice. A champion of this approach is often needed to initiate a system change process. |
| Heterosexual | A term used to indicate attraction primarily or exclusively for people of the opposite sex. |
| Intellectual Disability | Below average intelligence and set of life skills present before age 18. |
| Lesbian | Most frequently used by female-identified people who experience attraction primarily or exclusively for other female-identified people. |
| Low Income | HUD Income Limits: 1 Person (\$47,600), 2 Person (\$54,400), 3 Person (\$61,200), 4 Person (\$68,000), 5 Person (\$73,450), 6 Person (\$78,900), 7 Person (\$84,300), 8 Person (\$89,750) |
| Mobile Behavioral Health Services | Novel approaches to increase access to high quality, integrated behavioral healthcare services using mobile medical clinics, home-based delivery of services, or other service models that deliver behavioral health services in the community. These approaches may mitigate barriers to care related to transportation, childcare, scheduling demands, or by otherwise delivering clinical services more proximately to the persons served. |



| Non-binary | People who experience their gender identity and/or gender expression as outside of the male-female gender binary. Many other words for identities outside the traditional categories of man and woman may be used, such as <i>genderfluid</i> , <i>genderqueer</i> , <i>polygender</i> , <i>bigender</i> , <i>demigender</i> , or <i>agender</i> . These identities, while similar, are not necessarily interchangeable or synonymous. |
|---|--|
| Physical Environment and Teleheath Practices | The organization ensures that the physical environment promotes a sense of safety and collaboration. Staff working in the organization and individuals being served must experience the setting as safe, inviting, and not a risk to their physical and psychological safety. The physical setting also supports the collaborative aspect of a trauma-informed approach through openness, transparency, and shared spaces. |
| Policy | There are written policies and protocols establishing a trauma- informed approach as an essential part of the organizational mission. Organizational procedures and cross agency protocols, including working with community-based agencies, reflect trauma-informed principles. This approach must be "hard-wired" into practices and procedures of the organization, not solely relying on training workshops or a well-intentioned leader. |
| Primary Medical Condition | Primary medical diagnoses of obesity, diabetes, asthma, and/or chronic pain in conjunction with mental health symptoms. Health outcomes often associated with Adverse Childhood Events (ACEs) manifest in the abovementioned medical conditions. |
| Progress Monitoring and Quality Assurance | There is ongoing assessment, tracking, and monitoring of trauma- informed principles and effective use of evidenced-based trauma- specific screening, assessments, and treatment. |
| Race/Ethnicity | Race is a socially defined category, based on real or perceived biological differences between groups of people. Ethnicity is a socially defined category based on common language, religion, nationality, history, or another cultural factor. |
| Screening, Assessment, and Treatment Services | Practitioners use and are trained in interventions based on the best available empirical evidence and science, are culturally appropriate, and reflect principles of a trauma-informed approach. Trauma screening and assessment are an essential part of the work. Trauma-specific interventions are acceptable, effective, and available for individuals and families seeking services. When trauma-specific services are not available within the organization, there is a trusted, effective |



| | referral system in place that facilitates connecting individuals with appropriate trauma treatment. |
|--|--|
| Sexual Orientation | Sexual Orientation includes different forms of attraction, behaviors, and identities. |
| Social Determinants of Health | Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. |
| Substance Use Co-Occurring Disorder | Clients with co-occurring disorders have one or more disorders related to the use of alcohol or other substances with misuse potential as well as one or more mental disorders. |
| Training and Workforce Development | On-going training on trauma and peer support are essential. The organization's human resource system incorporates trauma-informed principles in hiring, supervision, staff evaluation; procedures are in place to support staff with trauma histories and/or those experiencing significant secondary traumatic stress or vicarious trauma, resulting from exposure to and working with individuals with complex trauma. |
| Transgender | People whose gender identity differs from the sex they were assigned at birth. |
| Trauma and Violence Informed Care (TVIC) | Account for intersecting impacts of systematic and interpersonal violence and structural inequities on a person's life, emphasizing both historical and ongoing violence and their traumatic impacts. |
| Community Support Team (CST) | The service consists of therapeutic interventions delivered by a team that facilitates illness self-management, skill building, identification and use of natural supports, and use of community resources. |
| Assertive Community Treatment (ACT) | An evidenced-based model of treatment that provides an inclusive array of community-based mental health and supportive services for adults (18+) with serious and persistent mental illness or co-occurring mental health and medical or substance use. |



To: The Honorable Pat Dowell

Chairman, Committee on the Budget and Government Operations

From: Allison Arwady, MD

Commissioner

Chicago Department of Public Health

CC: Elizabeth Beatty

Mayor's Office of Intergovernmental Affairs

Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-12 TICC Site Visits

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Rodriguez-Sanchez asked for an update on Trauma Informed Centers of Care (TICC) site visits.

CDPH has conducted virtual or in-person meetings with each TICC organization.



To: The Honorable Pat Dowell

Chairman, Committee on the Budget and Government Operations

From: Allison Arwady, MD

Commissioner

Chicago Department of Public Health

CC: Elizabeth Beatty

Mayor's Office of Intergovernmental Affairs

Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-13 Violence Prevention Outcomes

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Dowell asked about how violence prevention outreach is measured.

The primary outcome measures used to evaluate the Street Outreach program are the impact that the intervention had on the participant's risk of arrest, risk of arrest for a violent crime, and risk of violent injury.

In addition, CDPH monitors the number of individuals engaged in the Street Outreach (caseload), number of mediations or peace agreements between groups and cliques, and referrals to services like mental health and workforce development services.



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Chairman, Committee on the Budget and Government Operations

From: Allison Arwady, MD

Commissioner

Chicago Department of Public Health

CC: Elizabeth Beatty

Mayor's Office of Intergovernmental Affairs

Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-14 TICC Audit

The following information is provided in response to questions posed at our department's hearing on October 17, 2022, to discuss the proposed 2023 budget.

Alderman Rodriguez-Sanchez asked for an update on the audit of Trauma Informed Centers of Care (TICC) delegate agencies.

CDPH provides individual technical assistance to many of the TICC organizations and conducts quarterly report audits. CDPH has conducted virtual or in-person meetings with each TICC individually and provided network-wide training using the delegate agency manual. In addition, CDPH has a contract with Northwestern University to provide technical assistance to TICC organizations.



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Chairman, Committee on the Budget and Government Operations

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Commissioner

Chicago Department of Public Health

CC: Elizabeth Beatty

Mayor's Office of Intergovernmental Affairs

Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-15 Mental Health Public Education

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Rodriguez-Sanchez asked for an update on the public education and engagement of CDPH mental health clinics.

CDPH Mental Health leadership is working with our Public Information Office to develop a public education and engagement campaign, including a social media strategy to promote services at CDPH Mental Health clinics. Over the last year, CDPH made a video highlighting clinic services that was shared multiple times on social media, clinics have been represented in all Trauma Informed Centers of Care announcements, and the general intake line has been shared as a way to contact and receive services at CDPH Mental Health clinics.

For more information feel free to check out our website https://fb.watch/ghl5iPMUnO/



To: The Honorable Pat Dowell

Chairman, Committee on the Budget and Government Operations

From: Allison Arwady, MD

Commissioner

Chicago Department of Public Health

CC: Elizabeth Beatty

Mayor's Office of Intergovernmental Affairs

Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-16 Mental Health Clinic Patients

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Rodriguez-Sanchez asked for an update on patients served, and the capacity of CDPH Mental Health clinics.

1,362 clients have been cared for through CDPH Mental Health Clinics from January-August of 2022. Capacity is determined by a number of different factors including number of clinicians and specific needs of each patient (e.g. do they need to see multiple providers, cadence of appointments that are needed, etc.). There is currently capacity in all 5 of the CDPH Mental Health clinics.



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Commissioner

Chicago Department of Public Health

CC: Elizabeth Beatty

Mayor's Office of Intergovernmental Affairs

Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-17 CDPH 988 211 Interaction

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Rodriguez-Sanchez asked for an update on 211 interactions with CDPH.

211 staff will have access to the same resource directory that is featured on mentalhealth.chicago.gov. CDPH will be marketing 211 as a linkage to mental health resources in early 2023 once it is fully operational. CDPH awaits State of Illinois' implementation of EMS regional advisory boards that will provide guidance to local municipalities regarding how EMS systems are to interface with their local 988 provider organizations.



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Chairman, Committee on the Budget and Government Operations

From: Allison Arwady, MD

Commissioner

Chicago Department of Public Health

CC: Elizabeth Beatty

Mayor's Office of Intergovernmental Affairs

Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-18 Overdose Prevention Sites

The following information is provided in response to questions posed at our department's hearing on October 17, 2022, to discuss the proposed 2023 budget.

Alderman Rodriguez-Sanchez asked for an update on overdose prevention sites.

CDPH does not currently have any injection sites. The department is strongly committed to evidence-based harm reduction and interventions that address substance use disorders. We have a robust harm reduction program that includes innovative Narcan distribution, one of the nation's largest fentanyl test strip programs, robust training and stigma reduction interventions, a citywide drug diversion program, and investments in community-driven overdose prevention and linkage to care programs. CDPH is closely monitoring developments related to the implementation of overdose prevention sites. We are currently examining this issue and the role it might play as part of a comprehensive approach to overdose prevention.



To: The Honorable Pat Dowell

Chairman, Committee on the Budget and Government Operations

From: Allison Arwady, MD

Commissioner

Chicago Department of Public Health

CC: Elizabeth Beatty

Mayor's Office of Intergovernmental Affairs

Date: October 19, 2022

Re: Request for Information from Annual Appropriation Committee Hearing

ID: 41-19 Stabilization Housing

The following information is provided in response to questions posed at our department's hearing on October 17, 2022 to discuss the proposed 2023 budget.

Alderman Rodriguez-Sanchez asked for an update on stabilization housing.

CDPH is working with DOH who will acquire and renovate a building associated with this project. CDPH and DOH expect to acquire the building by quarter two of 2023. CDPH expects services to be provided at the site by mid-2023. These services will include primary care, substance use treatment, on-site mental health services, as well as holistic case management and connection to long-term housing upon completion of the program at this site.