

There are some new and exciting things coming that will change the way families receive mental health services in Illinois! The Alliance was awarded funding through SAMHSA Statewide Family Network grant. While the Alliance is based in Champaign County, our strategic and intentional expansion throughout the state of Illinois entitled. *The Alliance project represent a unified voice and active involvement of all Illinois families and youth in the planning and delivery of behavioral health services for Illinois youth* 

The goals that are outlined in the grant are:

- a) Empowering families to be effectively involved at both the state and local levels of the process of caring for youth involved children behavioral health services
- b) Build a dynamic/active community of support for families of youth with mental health and/or emotional challenges.
- c) Serve as a model and catalyst for increased interaction and cooperation amongst families, youth, services providers, policymakers and other relevant stakeholders (are any group of people with an interest in adding a providing support: community agencies, schools, parents, teachers, faith-based agencies, state level officials, businesses and families/youths).

We are aware that The Alliance does not represent the entire Illinois population, therefore our goal is to show a diverse representation of families across Illinois. There are 5 regions in Illinois (see insert) within each region there are multiple counties with their own unique characteristics such as: ethnicity, culture, race, economics and experiences. We want to bring that uniqueness together and one way to do that is through creating a Parent Network Committee.

The Parent Network Committee (PNC) will be the governing body that will reflect each region and county and the families that represent those areas. It is very important that the Alliance and the PNC reflect the System of Care (see glossary) values and principles.

Yes, the good news is this is a great time to get involved! How? I am glad you asked: You can be a:

- 1. **Parent Executive Network** *as a PENC you will provide representation for a larger group of people with shared interest or lived experience. The PENC will serve as specific chairpersons* (just complete the application process).
- 2. **Parent Network Committee,** will assist with particular tasks as outlined by PNC, Project Director, and/or Grant Coordinator, will participate in leadership training and will serve as a collective voice for Illinois families. Will be potential members for the PNC.

#### **Qualifications:**

You most have lived experience (a personal knowledge gained through direct first-hand involvement in everyday challenges navigating systems with children that are involved in child-serving systems: Mental Health, Education, Child-Welfare and Juvenile Justice). You can be a parent or caregiver raising or have raised a youth with mental, emotional/physical or behavioral challenges.

Thank you for your interest in being wanting to be involved with the Alliance. If you have any questions about the Parent Network Committee please feel free to contact me by phone or email. You can also visit The Alliance website: <a href="https://www.ilalliance.org">www.ilalliance.org</a> for more information and to fill out an application.

ULanda R. Hunter 217-282-9852 ulanda@ilalliance.org



# **Parent Network Committee**

## PLEASE PRINT

| Date:  |  |
|--|--|
| Name:  |  |
| Home Address:  |  |
| City:  | State: <b>Zip</b> :  |
| Home Phone:  | Cell Phone:  |
| Work Phone:  | Is it ok to call you at work?  |
| Email Address:   |  |
| Applicant Birthday (Month/Da   | ay only):  |
| This section is optional. The question of the section is optional. The question of the section o | uestions are designed to help us make our committees as diverse as possi |
| White Other:   | Indian/Alaskan<br>Non-Hispanic/Latino<br>Asian                           |
| Primary Language Spoken:   |  |
| What other language(s) do you  |  |
| Mark your area of interest:  |  |
| <ul><li>Parent Advisory Execut</li><li>Parent Network Commit</li></ul>   |  |
| Region:  | County:  |
| □ R-1<br>□ R-2<br>□ R-3<br>□ R-4<br>□ R-5  | Current Role:<br>Parenting<br>Peer Supporter<br>Other                    |



### TELL US MORE ABOUT YOURSELF AND YOUR EXPERIENCES

#### Why would you like to be a part of the Parent Network Committee?

How would you identify your primary system involvement? (Mental Health; Education: Child Welfare; Juvenile Justice; Disability):

Parent Network Committee should reflect the families represented in the following systems: Education, Juvenile Justice, Mental Health and Child Welfare. Please share how you have been involved as a parent/caretaker of a child whose emotional and/or behavioral challenges required accessing resources, supports and services from multiple child-serving agencies.

\*\*If you need additional room for any of the questions, please feel free to attach another sheet\*\*

I understand that completion of this application does not bind the applicant or the Parent Network Committee in any way. The PNC reserves the right to choose participants that best meet the needs of the program. Before participating on the Parent Advisory Board, you will be asked to sign a confidentiality agreement.

Signature

Date

Thank you for your time and interest. If you have any questions, please feel free to contact by phone or email.

ULanda R. Hunter 217-282-9852 ulanda@youthandfamilyalliance.org

Please return forms to: Attention: Tahirih Payne 121 E. Congress Ste. C Rantoul, IL 61866 Email: tahirih@ilalliance.org Fax: 217-666-7248



#### **Next Steps**

Once we receive your completed application, you will be notified by receipt of the next steps. The grant coordinator will contact you to arrange a time for an interview. These interviews are designed to get know you better and for you to ask any additional questions you may have.

If you are selected as a Parent Network Committee for any role (Executive member/PNC) you will be required; to sign a confidentiality and commitment agreement.

If you have any questions about the Parent Network Committee please feel free to contact me by phone or email:

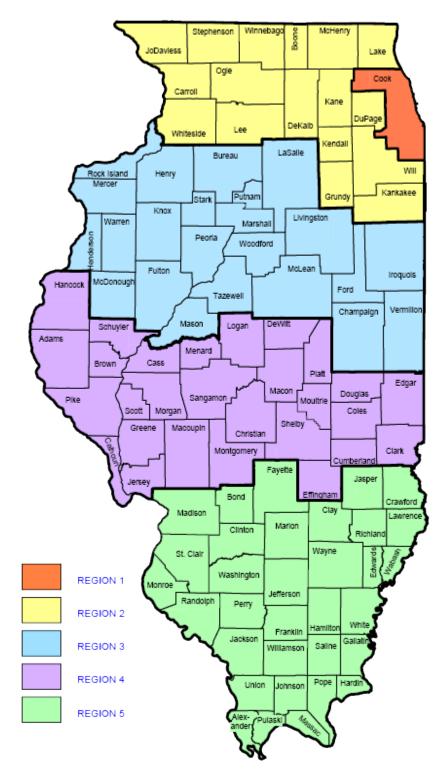
There are other documents included to help with filling out the application and preparing for the acquaintance interview if selected.

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### Thank you once again for your interest in the Parent Network Committee.



#### **ILLINOIS REGION MAP**





**System of Care** is a complete network of community-based services and supports organized to meet the needs of families who are involved with multiple child service agencies, such as child welfare, mental health, schools, juvenile justice, and health care. Families and youth work in partnership with public and private organizations, ensuring supports are effective and built on the individual's strengths and needs. System of Care is not a service or a program—it is a useful way of collaborating with youth and families to achieve the desired outcomes identified by the youth and family.

**Guiding Principles** - A local System of Care, by definition, is characterized by each local community. The group comes together to share strengths, resources and to meet the specific needs of its community.

**Child and Family Teams**—The Child and Family Team consists of individuals agreed on by the family and committed too informal, formal, and community supports and services.

All decisions are guided by System of Care values and principles and should reflect the following:

**Collaboration**–System of Care is supported by teams of individuals who come together and have a strong commitment to the community's well-being. At the systems level, the community collaborative represents the voice of the community, identifies strengths and needs for its children and families. On the individual level, the Child and Family Team is developed around the youth and family based on individuals who know them well. Teams work collaboratively together to develop planning based on the youth and families identified strengths and needs.

**Community Based**–Services and supports take place in the most inclusive, most responsive, most accessible, and least restrictive settings possible to safely promote child and family integration into the homes, school and community life.

**Culturally and Linguistically Competent**–All processes within a System of Care demonstrate respect for and build on the values, preferences, beliefs, culture, and identity of the community and each individual, youth, and family.

**Family Driven and Youth Guided**–Families and youth have a voice in local and community decisions. Planning is grounded in family and members' perspectives, and each Child and Family Team provides options and choices that reflect the family's values and preferences.

**Individualized**–All processes are individualized to the community or individual being supported. At the community level, plans are based on the individual strengths, assessments, resources, and culture of the community. At the individual level, each Child and Family Team develops and implements a plan based on the needs and desires of the youth and family.

**Natural and Community Resources**–The formal service delivery system cannot meet the needs of youth and families alone. All teams identify and encourage full participation from informal, interpersonal, and community partners and networks.

**Outcome Based and Data Driven**–Goals, strategies, and interventions are tied to observable progress that is important to the youth and family. Plans are monitored and revised as needed to ensure that outcomes become a focus.

**Persistence**–Individuals must develop a "hang in there" skill and not give up when challenges occur. On every level, teams work through difficulties discovered during planning and implementation and continue to monitor and make changes in the plan.

**Strength- Based**–All processes identify, build upon, and enhance the capabilities, knowledge, skills, and resources of the community, team members, and individual youth and families.