



LINN COUNTY COMMUNITY SERVICES BOARD

Tuesday, August 11th, 12:00 P.M.

Hybrid meeting

AGENDA

- | | | |
|-------|---|---------------------|
| I. | Call to Order | LCCS Board Chair |
| II. | Minutes from June Meeting – Action Item | LCCS Board Chair |
| III. | Financial Report Year End FY26 – Action Item | Vickie Kindle |
| IV. | CACFP Report – Action Item | David Thielen |
| V. | Program Updates: | |
| | a. General Assistance/Outreach | Ashley Balias |
| | b. Access Center | Erin Foster |
| | c. Home Health | Stacey Lietz |
| | d. Ryan White | Nichole Baker-Jones |
| | e. Juvenile Diversion and Detention | William Wright |
| | f. Child and Family Services | Gloria Witzberger |
| VI. | Executive Director Updates | David Thielen |
| VII. | New Business/Public Comments | LCCS Board Chair |
| | a. Next Board Meeting – | |
| | i. September 8 th | |
| | ii. October 13 th | |
| | iii. November 10 th | |
| | iv. December 8 th | |
| VIII. | Adjourn | |

MISSION: Linn County Community Services addresses local health and human service needs by providing direct services, community planning, and administration of local, state, and federal funds in ways that promote service availability, access, cost-effectiveness, and quality.



LINN COUNTY COMMUNITY SERVICES BOARD

Tuesday, June 9th 12:00 P.M.

Hybrid meeting

Minutes

PRESENT: Melissa Dean (left at 12:51) Andrew Elam Mike Hines
Erin Koehn (joined at 12:12) Katy Lee Sami Scheetz (joined at 12:48)
Jody Wiegel

STAFF: Nichole Baker-Jones Ashley Balius Jody Bridgewater Erin Foster
Terri Godwin Amy Grunewaldt
Stacey Lietz
Vicki Kindl David Thielen Will Wright

I. **Call to Order** LCCS Board Chair
The meeting called to order at 12:00 p.m.

II. **Minutes from April** – Action Item LCCS Board Chair
The minutes of the April were approved. MSC: Dean/Wiegel (5-0).

III. **Financial Report through May** – Action Item Vicki Kindl
Vicki presented the budget through May. Vicki noted that the May numbers reflect prior to the second May payroll so all expenses will be artificially low.
In department 33, Options revenues are around 1 month behind due to Medicaid reimbursals. For DAP, revenues are received at the beginning of the quarter and will be reconciled every quarter. This will no longer be a Linn County program next year. The MHAC is billed through the ASO and is one to two months behind. County Committal expenses are intermittent and are at 70%. The MHA is billed through the ASO and reimbursals are 1 month behind.
In Department 34, admin expenses are in line and revenues are the from the fiscal agent contract for DAP. CYD is in line with expectations. Funded agencies trend behind but will be fully billed before the end of the FY. GA expenses are in line with expectations. Revenues are unpredictable and through SSA. Home Health is in line with expectations. Revenues reflect the full expenditure of the public health grant. Ryan White is in line with expectations but billings trend a month behind.
Department 35 are in line with expectations. Half the detention revenue is from the State payment which is expected after the end of the FY. S
Overall expenses are at 83% and revenues at 82%.
The monthly budget report was approved MSC: Elam/Wiegel (5-0).

IV. CACFP Report - Action Item

David Thielen

David presented the quarterly CACFP report. He explained how the CACFP meals are determined and that these are at the Child Development Center. Food expenditures were slightly below expectation but nothing out of the ordinary. Katy asked if this was stable; Colette explained that this is stable year over year. David noted that there are typically fluctuations around the holidays. The report was approved MSC: Elam/Wiegel (5-0).

V. LCCS Board Member Recommendations – Action Item

David Thielen

David presented biographies of the proposed new board members.

Shari Miller is an executive officer at the Sixth Judicial District. Jane Drapeaux is the retired CEO of HACAP. Jaye Kennedy is the retired CEO of Waypoint. Tonya Hotchkin is the VP of Clinical Care at Tanager. David asked the board for a recommendation that these individuals be appointed by the board of supervisors. MSC: Dean/Lee (5-0).

VI. Program Presentation – Child & Youth Development

Terri Godwin

Terri and Colette presented information about the Child & Youth Development programs. The programs include the Child Development Center (CDC), Family Transformation Services (FTS), and Family Support Services (FSS). Colette discussed the mission and purpose of the CDC as well as a brief history. The CDC serves families at or below 185% of Federal Poverty Guidelines. Families are expected to work or have full-time education for enrollment with a priority for children with special needs or challenges such as homelessness. The CDC is open 244 days a year with full day service from 6:30-5:30. Maximum capacity is 72 children with lower child-to-teacher ratios than state licensing standards. There is currently a 38 child waiting list; Colette noted this is a typical waitlist. The ratios are required to meet accreditation standards but also provide a higher standard and quality of care. Colette discussed some of the unique challenges encountered at the CDC and shared that there are three sensory rooms for neurodivergent children. The CDC uses Creative Curriculum and Second Step Curriculum. Colette shared information about assessments and screening tools used at the center for learning, health, and social emotional health. All children are screened for dental, hearing and vision as well as provided nutrition, behavioral, and developmental screenings. There is a family support worker from HACAP housed in the center to do goal setting and provide supports.

The CDC is at IQ4K level 4, has been NAEYC accredited since 1990, and meets IQPPS and CACFP standards. Colette discussed the variety of funding sources and partnerships at the CDC and covered the different standards that must be met for qualifications. She also discussed partnerships with local partnerships. David shared that the percent of children that enter the center Kindergarten ready at around 50% of expectations and graduate at 98%. Terri also shared that the classrooms work to create continuity of care and keep the same children with the teachers once they enter the three year old group. Colette also highlighted the high level of staff experience.

VII. Program Updates

LCCS Directors

- a. General Assistance/Outreach Ashley Balias

Ashley shared the update for GA and Outreach. Ashley shared that there are opportunities in the pipeline for the homeless systems work but she will bring more concrete projects at a future meeting. GA continues to see a high level of need. She shared that they just did a three week pause to ensure they don't overexpend. There has been an increase in requests for burial assistance, with 127 requests last year. They continue to receive calls from the state medical examiner's office of unclaimed or abandoned remains. Ashley shared that J'nae Peterman is joining the GA board as well as Cody Crawford from HHS. There has been a high level of requests from sober living facilities which are not subject to typical landlord tenant regulations. Mike noted the highlighting from the City of Cedar Rapids of the decrease in homeless populations in contrast with statewide increases in homelessness rates.
- b. MHAC Erin Foster

Erin shared the update for the MHAC. They received their contract from the State last week. There were no changes from the State but the budget was the identical to the prior year. They are working to revise the budget based on the contract but are close. Erin shared that there were thirteen applicants for five open positions on the MHAC advisory board and they will go to the BOS for approval. They are also out of the staggered terms from the MHAC opening and into standard three year terms. They experienced typical seasonality with the uptick in spring walk-ins. Erin assisted the State in scoring the spring round of opioid settlement RFPs.
- c. Home Health
- d. ECI/Decat Amy Grunewaldt

Stacey shared the update for Home Health. She discussed that they are reviewing compliance with grant and have worked on Work Rules for the department. David explained the context of the changes to the PTO structure.

Amy shared the update for ECI/Decat. Decat and CPPC are officially ending June 30. The majority of programs were picked up by the state and will continue to be funded. They will be losing one staff that oversees Decat/CPPC. ECI received funding of discretionary and home visitation services. They funded 12 separate contracts for a total of approximately \$1.1 million for FY27. Home visitation is funding NPP and YPN for around \$752,000. Amy shared that she will be working with the State to strengthen ECI policies.
- e. Ryan White Nichole Baker-Jones

Nichole shared the update for Ryan White. She discussed the ongoing litigation for breach of contract with the state providing pharmacy and noted that the contract for the remainder of the year reflects at \$800,000 with a reduction from \$1.2 million. The biggest impacts are in services such as food vouchers and housing assistance. Nichole noted the client challenges that will result from the reduction in funds. Nichole also shared that she has set up a new translation service that is more than 50%

cheaper than the prior service. The new pharmacy benefit manager is being established with the State but this has not been made public yet. The clients have been transitioned over to new pharmacies to cover the interim and then will have to be changed again once the new pharmacy is announced.

- f. DAP Jody Bridgewater Jody Bridgewater
Jody shared the update for DAP. Jody noted that this is her final meeting with the LCCS board due to the transition on July 1 but that this will not fundamentally change the work being done.
- g. Juvenile Detention & Diversion Will Wright
Will shared the update for JDDS. The tracking program will not be renewed for FY27 but they completed an RFP with JCS and that will replace tracking. They received the intent to award. The program does everything tracking did but incorporates crisis planning, skill building, and more in-depth work with JCS and the families.

VIII. New Business/Public Comments

LCCS Board Chair

David thanked Erin, Jody and Mike for serving on the board. There will not be a board meeting in July to allow for the close of the fiscal year.

- a. Next Board Meeting –
 - i. August 11th

IX. Adjourn

The meeting adjourned at 12:58 p.m.

MISSION: Linn County Community Services addresses local health and human service needs by providing direct services, community planning, and administration of local, state, and federal funds in ways that promote service availability, access, cost-effectiveness, and quality.

CACFP Meals Served				
	Apr-26	May-26	Jun-26	TOTAL
Free	3,019	2,767	2,211	7,997
Non-Reimbursable	60	90	45	195
Reduced Price	107	53	41	201
Total Meals Served to Children	3,186	2,910	2,297	8,393
Meals Served to Adults	-	-	-	-

CACFP Attendance Data				
	Apr-26	May-26	Jun-26	TOTAL
Number of Days Meals were Served	22	20	21	63
Total Monthly Attendance	1,188	1,077	797	3,062
Average Daily Attendance	54	54	38	49

Accrued CACFP Budget Data				
	YTD	Budget	% Utilized	% Expected
Salaries& Benefits	146,434.20	\$ 155,612.89	94%	100%
Food Expenditures	\$ 66,248.59	\$ 77,000.00	86%	100%
Non-Food Expenditures	\$ 7,418.57	\$ 8,000.00	93%	100%
Total Expenditures	\$ 220,101.36	\$ 240,612.89	91%	100%
CACFP Revenue	\$ 90,043.43	\$ 73,800.00	122%	100%
Deficit	\$(130,057.93)	\$ (166,812.89)	78%	100%



**LINN COUNTY GENERAL ASSISTANCE
ADVISORY COMMITTEE**

Wednesday July 8, 2026
2:00 PM

Teams and Linn County Community Services Building, Conference Room 1A
1240 26th Ave Ct SW, Cedar Rapids, IA 52404

Our mission is to provide temporary assistance to low-income Linn County residents who are ineligible for, or awaiting approval from federal or state assistance programs according to Linn County Ordinance

MEETING MINUTES

Present:

Ashley Balius (STAFF)
David Thielen (STAFF)
Cody Crawford

Carol O'Brien
Karey Chase
Heather Harney
April Aswegan

CALL TO ORDER

The meeting called to order at 2:05 p.m.

WELCOME & INTRODUCTION OF NEW MEMBERS

Ashley introduced three new Advisory Committee members:

- April Aswegan, Community Liaison with HHS, filling the HHS representative seat
 - o April is taking the place of the long-term member Kristy Tisl
- Cody Crawford, Division of Behavioral Health with HHS, filling the Healthcare representative seat
 - o Cody oversees work at HHS regarding Recovery Housing/ Sober Living which is something we are seeing growth in Linn County and frequent requests to become eligible GA Vendors under the current Transitional Housing provision.
- J'nae Peterman, Homeless Systems Manager with Housing Fund for Linn County, filling the low-income population representative seat
 - o I asked J'nae to serve on the committee to identify ways that GA can effectively serve the population experiencing homelessness.

APPROVAL OF 1/14/26 MEETING MINUTES

The January 14, 2026, meeting minutes were approved. MSC: Aswegan/O'Brien (5-0).



BUDGET DISCUSSION

Budget Update for FY26 Year to Date

Ashley provided an update on the FY26 budget, which she explained should be representative of the full fiscal year, noting that things are still being finalized and could change slightly from this, but she would not expect any major shifts. Overall, Ashley noted that the budget is in line with the budget expectations, noting that budget expenditure ended at 95% expended. On the income side, she noted that we received quite a bit less income than we had budgeted for. However, she reminded the committee that the income we receive is from our ongoing assistance: any assistance we provide while someone is diligently pursuing an application with the Social Security Administration for SSI and has signed an IAR (Interim Assistance Reimbursement) with our department can be paid back. While the income line in our budget is based on prior year's averages, it is very unpredictable, and this year we received less. So, overall, the FY26 budget was nearly 97% expected.

Ashley then reminded the committee about how the budget is managed to stay in line with our budget while we continue to see increased demand for services. She then showed the committee the weekly budget tracker that she uses to ensure that assistance going out the door is in line with budget expectations. She indicated that when we start looking over budget to the extent that a few down weeks cannot make up, GA institutes a pause in accepting new applications for a few weeks. This has been an effective strategy, and Ashley indicated that she tries to implement the pause when we expect to be slower anyway, the two middle weeks of the month and months in which we are historically slower anyway.

PROGRAM UPDATES

Cybersecurity Training & Data System Updates

Ashley shared that, given the world we all live in, Linn County has been going through different cybersecurity training. After those trainings, Ashley identified weak points in the General Assistance process that could be improved, so she moved forward with the Budget & Finance team and our data system manager to identify solutions. We are currently rebuilding our system to allow a completely online process that ensures secure storage of applicant personal information throughout. Ashley stated that they expect this to launch in early Fall.

TranslateLive

Ashley shared that GA continues to see an increase in non-English-speaking populations and that, given the nature of our work, it is very hard to use phone translation services. She then stated that Laura Brade, a member of the GA team, had identified a different solution called Translative. This dual tablet offers text and spoken translation live, with a one-time purchase cost for 3 years and then a low annual cost after that. She stated that we have not yet received the device but that we are all very excited to test it!

ADA Modification Procedure

Ashley indicated that, with the reintroduction of the in-person photo-ID process, she has seen a significant uptick in ADA modification requests. She stated that she has been working with the Director of Policy & Administration for Linn County to incorporate appropriate language into our policies and procedures and to identify a formal procedure for GA to follow when these come up. She stated that it is not yet final but is very close and will be extremely helpful when completed. The proposed updates are outlined below, and Ashley requested feedback from the committee.

POLICY UPDATE

Ashley walked through several updates that staff have made to the new proposed code since the last time that this Advisory Committee met. Ashley stated that while the staff all stand by what we had initially brought to this committee, the staff have learned a lot over the last year or so that have identified areas in which the new code may be too 'gray' and we want to try to make more black and white.

Needy Assistance would be renamed Emergency Assistance

Ashley stated that this rebrand will help us achieve our goals for this rewrite, which is to right-size how this assistance is used. It is intended to fill short-term financial gaps that help someone through an emergency.

Residency Requirements

In addition to being a Linn County resident, applicants must reside in Linn County at the time of application.

Financial Hardship & Stabilization Plan

Staff proposed eliminating these new criteria from the new code because they were too vague; however, they want to keep the total obligation for rental assistance at or below \$2,000 without applicant payment or a payment plan.

Income Eligibility - Area Median Income

Increasing income guidelines from 30% to 40% or 50% of Area Median Income. The General Assistance Advisory Committee agreed that there is a significant gap for higher-income populations but expressed budgetary concerns about increasing it to 40% or 50% so quickly. They advised keeping it at 30% for now with the option to increase after staff better understand how the rest of the code changes affect the budget.

Incidental Electronic Transfer Exemption

Ashley then introduced the idea of "Incidental Electronic Transfer Exemption" which is a way to accommodate for the 'random' transactions that we see in someone's bank account that are not really income in a traditional sense but based on how income is calculated in GA, counts against a person in our eligibility assessment. This is intended to reflect more modern ways that people bank and interact with friends and family

through services like Venmo, Cash App, etc. The program will exclude up to a total of \$200 in peer-to-peer electronic transfers received during the 30-day assessment period from income calculations. This exemption applies to transfers received through payment applications or platforms such as Cash App, Venmo, PayPal, Zelle, or similar services. The \$200 exemption is a cumulative total for all qualifying transfers received during the assessment period and does not apply per individual transaction. Transfers exceeding \$200 total during the assessment period, recurring transfers, or transfers identifiable as wages, self-employment income, business activity, or ongoing financial support will be counted as income.

Amount & Frequency of Assistance

Ashley then introduced the idea of moving to \$1,000 once every 24 months instead of once every 12 months as an alternative to a lifetime limit. Ashley stated that this was a brand-new idea that would curb assistance to households that return every single year and use the program in a way that does not meet the intent of the program. It is filling long-term financial hardships rather than operating as emergency assistance. The Advisory Committee understood the logic of this idea but was concerned about the effect on the population intended to be served, feeling like once every two years was simply too long. They asked staff to consider either keeping it annual or shifting to once every two years, but allowing certain circumstances in which someone could access assistance sooner. Ashley stated that she appreciated the feedback and would take it back to staff to generate different ideas.

Recovery Housing/ Sober Living Environments

Ashley stated that this is an increasing housing option in Linn County, and they are regularly seeking assistance from General Assistance. Ashley stated her concerns, indicating that the last one approved by this committee under the transitional housing provision closed its doors and kicked all its residents out before payment was ever processed. Given that Ashley connected with Cody Crawford to learn more about how the state and HHS is thinking about these types of housing situations and identified the following criteria:

- Same eligibility criteria as Needy/ Emergency assistance
- Eligible rental arrangements
 - Must be NARR certified
 - Will allow currently approved providers a transitional period to become certified within 12 months or they will become ineligible providers under this provision.
- Amount cannot exceed the cap established by the State

There were two remaining policy updates to discuss that were tabled for the next meeting due to time constraints.

UPCOMING MEETINGS

October 14, 2026

Meeting adjourned at 3:02 pm.



Linn County Mental Health Access Center

Quarterly Report
April 1, 2026-June 30, 2026



General Snapshot of Numbers

	Quarter 4	FY26 YTD
Walk In's	296	1276
Law Enforcement Referrals	26	97
EMS Referrals	26	83

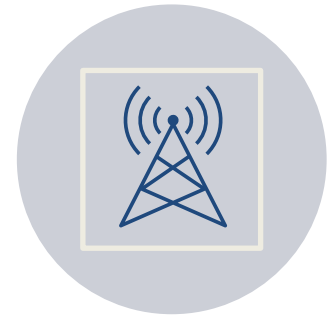
Quarter 4 at a Glance



Advocacy: Wrap
Up with State &
Beyond



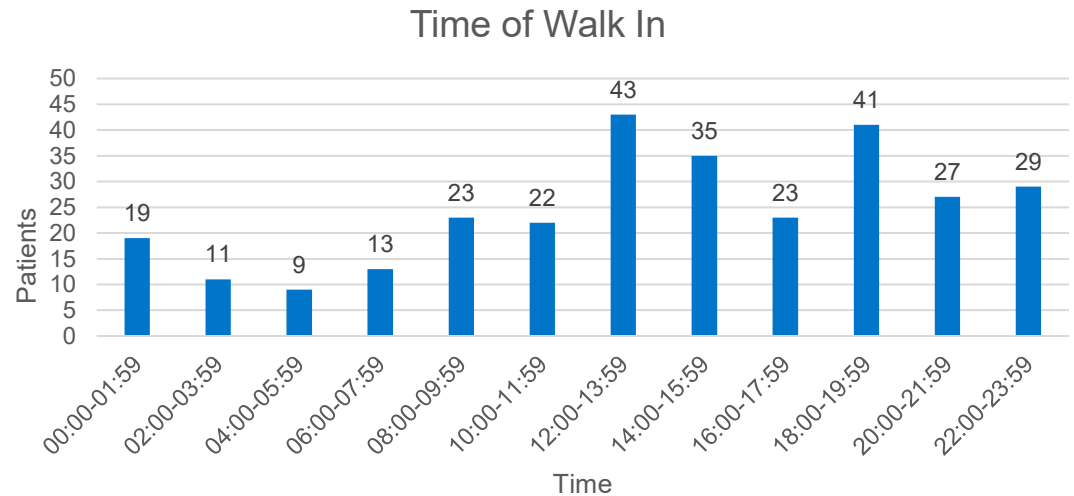
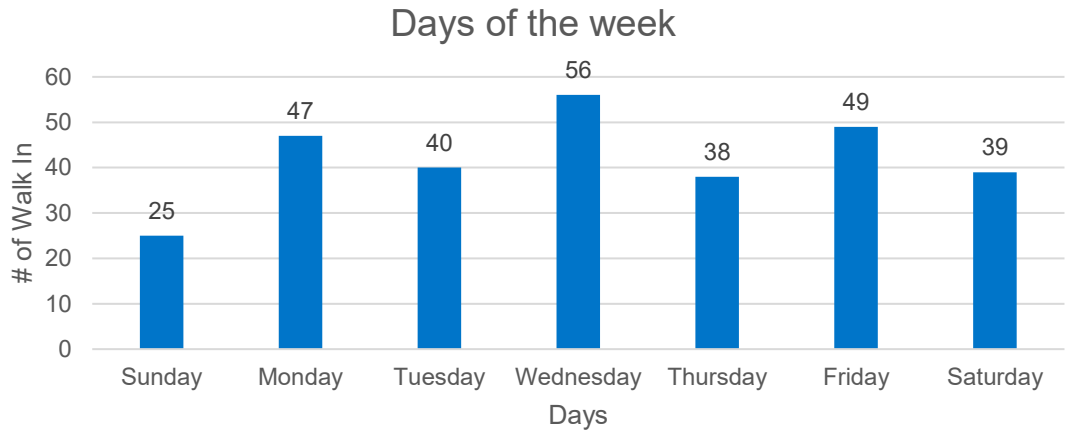
Spring
Outreach Plan



Internal QI Work

Quarter 4 Triage Information

Average
Triage Time:
71 Minutes



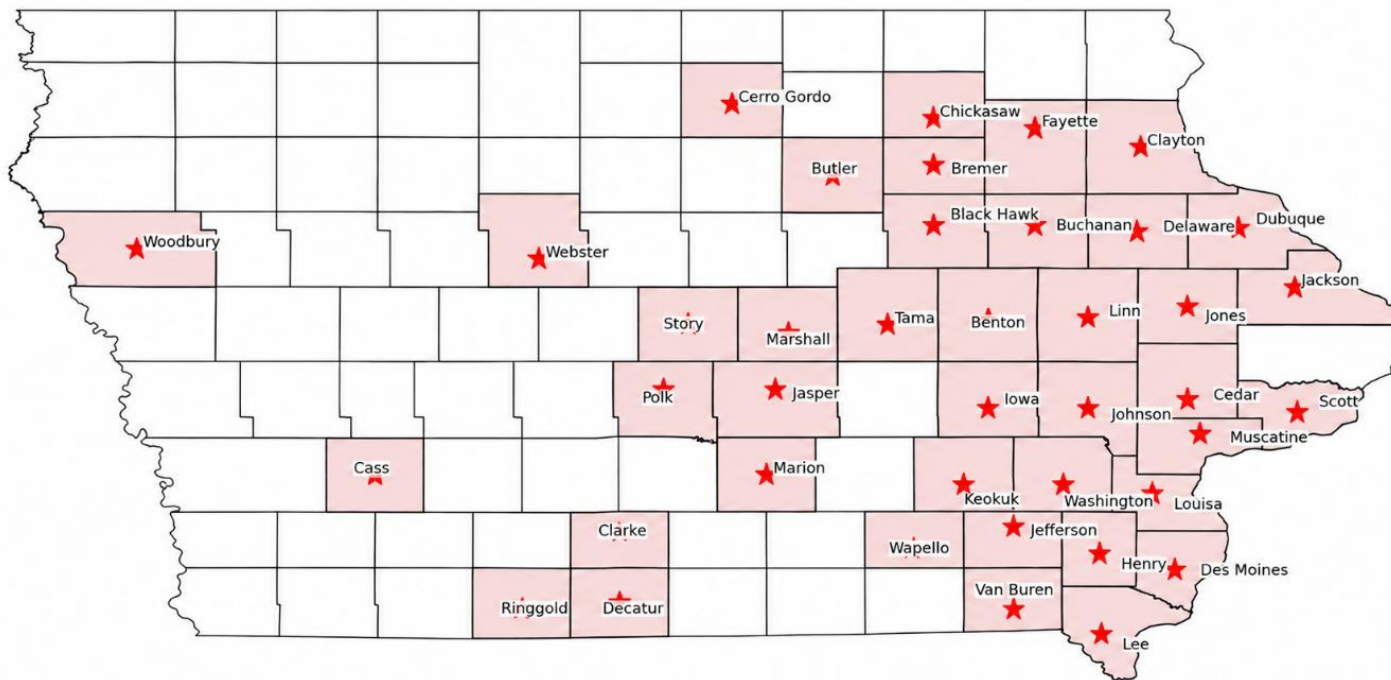
Quarter 4 Triage Referrals vs YTD

	Quarter 4	FY26 YTD
Crisis Stabilization	117	530
CSCBS	0	4
Crisis Observation	3	7
Withdrawal Management	3	4
SUD CADDC Services	36	174
Sobering Unit	50	147
Hospital	16	60
Community Discharge	186	638

Quarter 4 Patient Residence

County	Amount
Linn	268
Benton	8
Jones	3
Johnson	3
Dubuque	2
Iowa	2
Cedar	1
Decatur	1
Henry	1
Polk	1
Tama	1
Van Buren*	1
Wapello	1
Webster	1
Out of State: Illinois	1

Residence of Patients



Law Enforcement & EMS Referrals

Quarter 4	YTD
52	180

- Deferred from Jail
 - 10%
- Deferred from Hospital
 - 46%

Law Enforcement & EMS Referrals

- Average length of time at MHAC in Quarter 4
4 Minutes
- Departments using MHAC in Quarter 4
 - Area Ambulance
 - Cedar Rapids PD
 - Marion PD
 - Linn County Sheriff
 - Hiawatha Fire/EMS
 - Monticello PD

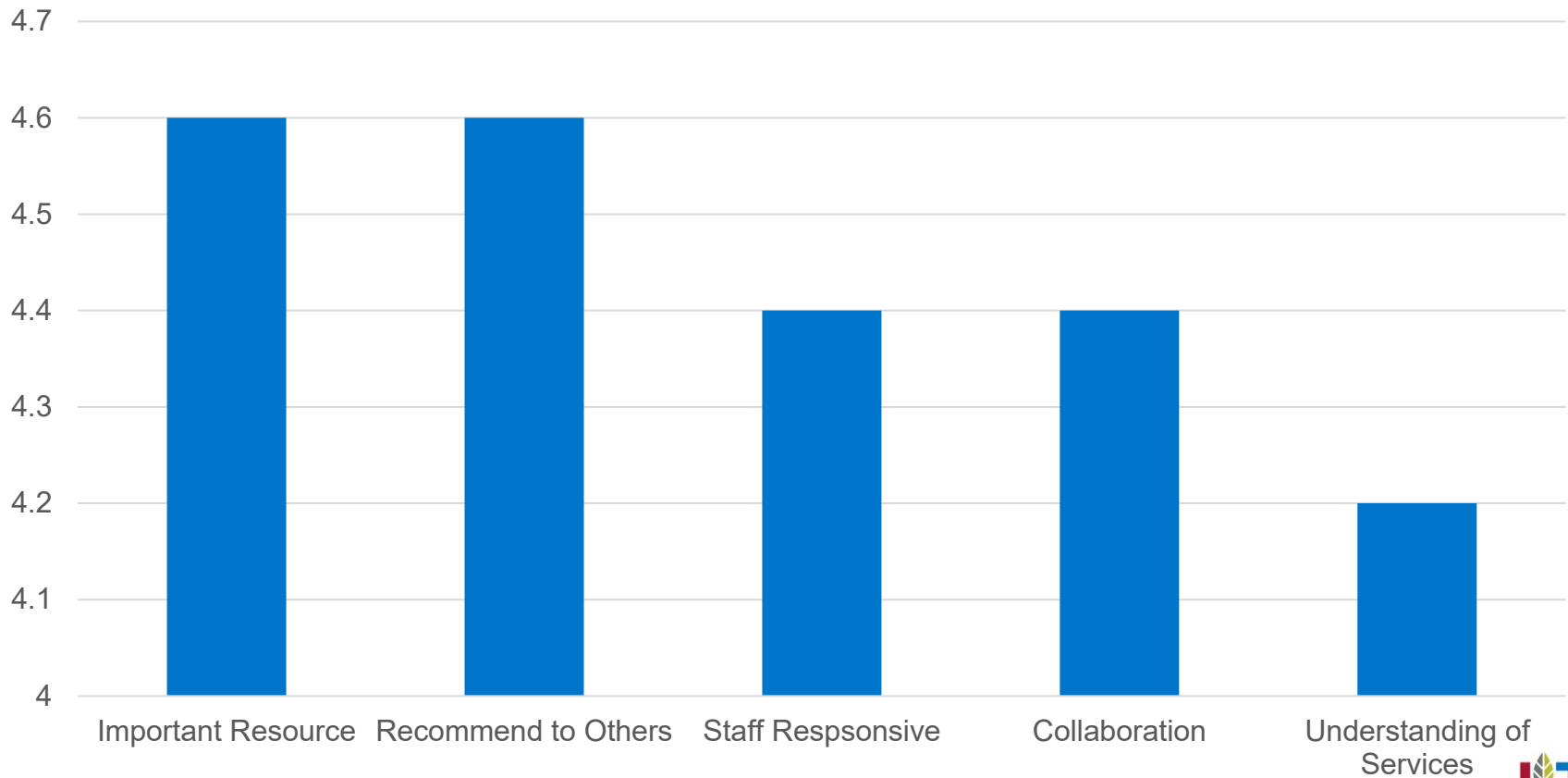


FY26: More Relevant Data

- Number of Inpatient Admission: 547
 - 17% were directly placed by Mobile Crisis or Law Enforcement Liaisons
 - 12% were directly placed by hospital staff
 - 3% were directly placed by MHP at Abbe
- 70,762 minutes of crisis counseling
- 15% of individuals referred by PD or EMS would have gone to jail.
- 43% of individuals referred by PD or EMS would have gone to the ED
- 640 boxes of Naloxone distributed to the community through Linn Co PH & Linn County Opioid Settlement Funds

FY26 MHAC Community Survey Feedback

Scale from 1-5



FY26 MHAC Community Survey Feedback

- Major Strengths
 - Alternative to Jail or ER
 - Compassionate staff
 - 24/7 Access
 - Safety and Comfort
 - Resource Connections
- Areas to Improve
 - Discharge Planning
 - Intake/Triage Process gaps identified
 - Warm Handoffs
 - More Capacity
 - Community Awareness

FY26 MHAC Community Survey Feedback

- Looking towards FY27 and beyond
 - Large emphasis on connecting people to what they need in the moment and measuring impact
 - More emphasis on follow up
 - When it's done, how it's done, what is the bar and how do we go past it
 - Community outreach & stronger relationships
 - Identifying barriers WE put into place and removing them

What's Upcoming

- Updated patient surveys to align with strategic plan
- Advocacy Committee Prep
- Preparing for potential changes with Iowa HHS's goals for FY27

QUESTIONS

Year In Review

July 1, 2025–June 30, 2026

Number of Walk ins 1276	Inpatient Admissions 547 • 94 Mobile Crisis or Law Enforcement Liaison Placements • 65 Unity Point placements • 14 Abbe Outpatient placements • 374 walk in placements	
Number of crisis counseling minutes 70,762	Boxes of Naloxone distributed 640	Number of Sobering patients 147
Number of LE/EMS Referrals 180	Number of Counties and states represented 27 Counties 3 States	
Percent of patients referred by LE/EMS who would have gone to jail 15%	Percent of patients referred by LE/EMS who would have gone to the hospital 43%	