

Partnering Organizations

Crossing Healthcare

Dove Domestic Violence Program

Decatur Psychological Associates

City of Decatur Police Department

Macon County Sheriff's Department

Macon County State's Attorney's Office

IL Department of Children & Family Services

Growing Strong Sexual Assault Center

Macon County Probation

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The HEALS Approach

Recognize

HEALS aims to train and help community members, stakeholders, and providers to recognize verbal, non-verbal, or behavioral indicators of victimization that children and youth may exhibit.

Connect

HEALS will work with community partners to streamline services and establish networks that promote information sharing, thus taking the burden off victims to navigate multiple systems.

Engage

HEALS staff seek to create a safe environment where individuals do not experience further trauma or harm when receiving services and support. Supports are provided based on the victim's goals, giving them the flexibility to choose what is right for them.

Macon County HEALS

Helping Everyone
Access Linked Systems



1025 N. Water St.
Decatur, IL 62523

Phone: (217) 791-8084

Fax: (844) 607-7523

A division of



www.child1stcenter.org

Macon County HEALS

Vision: to alleviate the burden of finding services to address victimization by ensuring appropriate care and services are made available to all victims.

Services:

- Case management
- Assistance in Filing for Crime Victim Compensation
- Victim & Family Advocacy
- Community Education on Prevention, Recognition and Responding
- Counseling Services
- Resource Connections



Who We Serve

The Illinois **HEALS** initiative provides free case management and victim advocacy services to young victims (age 0-25) and their families. Victim experiences may be a direct exposure (first hand experience) or indirect exposure (witness/vicarious).

Trauma creates change you DON'T choose.

Healing creates change you DO choose.

- Michele Rosenthal

The attached referral form can be filled out and submitted to the HEALS office by fax (844) 607-7523 or call (217) 791-8084.

Referral

Person making referral: _____

Organization: _____
(if applicable)

Contact number: _____

Referred individual(s) and age(s):

Parent/Guardian: _____
(if applicable)

Address: _____

Phone number: _____

Safe additional number where staff could reach individual or leave a message:

Best time of day to be contacted: _____

Reason for referral: __ Abuse/Neglect
__ Witness of Abuse/Neglect __ DV
__ Witness of DV __ Community Violence
__ Witness of Community Violence
__ Other: _____

Yes, I'm interested in receiving more information from a Macon County **HEALS** staff member.

Signature Required _____

Date: _____