

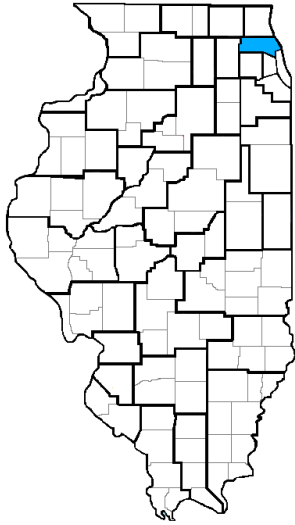
ACTION PLAN



Region 1-B-D

Cook County (North)

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Letter from Family & Action Council Members

The communities throughout our Region helped lead discussions by providing information through focus groups, interviews, community meetings, and surveys, and we are grateful for their help in developing our Early Childhood Regional Needs Assessment and Addendum, both produced in 2023. Their voices and passion for improving the Early Childhood Education and Care (ECEC) system to make it more equitable for all children, caregivers, and families are the driving force behind our work and are evident in this Region 1-B-D Action Plan.

Council members and others in the community had a chance to share their experiences with ECEC programs and services and add their input to the next steps, detailed in this Action Plan, to move the needle on several recommendations identified in our Early Childhood Regional Needs Assessment.

We especially want to thank the following community members for their support in developing our Regional Action Plan:

- The Niles Township ECA
- Dr. Peter Smith

It is our hope that everything proposed in the Action Plan will be achieved, increase the awareness of the available ECEC services and supports for children and families, ensure better access to supports for pregnant persons and children from birth to age five, and raise awareness about the work of Birth to Five Illinois.

We are excited to present our Regional Action Plan to our community partners and families and look forward to working with everyone to implement the recommendations included in the plan.

With gratitude,
Birth to Five Illinois: Region 1-B-D Family & Action Council Members

Action Plan Development

Between fall 2022 and spring 2023, the Action Council, Family Council, and Regional Birth to Five Illinois Team reviewed quantitative and qualitative data related to Early Childhood Education and Care (ECEC) services, programs, and supports and worked together to create an [Early Childhood Regional Needs Assessment](#) to highlight the experiences of families and caregivers in the Region. The report includes recommendations to improve ECEC opportunities at both the local and state level to make the system more equitable for all children. Councils developed an Action Plan based on several prioritized recommendations that will be used to help communities across the State raise awareness of ECEC services, expand the reach of services and resources to families, and advocate for better access to programs.

This Action Plan is aimed primarily at caregivers, community stakeholders, policymakers, elected officials, state agencies, and potential funders. It is our hope that caregivers find opportunities to talk about their experiences and become advocates for ECEC to help drive long-term, sustainable change in their communities. We also hope that community stakeholders build off the results of the Action Plan and help lead the efforts as we reimagine the ECEC system at the local level. We hope these plans provide an easy entry point for policymakers, elected officials, state agencies that administer ECEC programs, and funders to support community-led efforts, lending their expertise and support to bringing the plans to fruition.

How this Document is Designed

Each recommendation has an Action Plan that is rooted in Continuous Quality Improvement (CQI),¹ a method that involves setting SMART goals, gathering feedback, evaluating progress on a regular basis, and making data-driven decisions. SMART is an acronym for Specific, Measurable, Achievable, Relevant, and Time-bound.² Council members developed SMART goals for each recommendation they chose and identified key partners who could help implement each goal. They determined how long it might take and the steps needed to achieve the goal.

Councils were asked to think about the potential risks, barriers, and solutions for each recommendation. They also considered who else needed to be engaged in the work to be successful and what funding may be needed to fully implement the Action Plan. In this document, only state agencies, elected officials, and state agency representatives in public service roles are listed by name. This list only identifies those individuals who may be instrumental in pushing the Action Plan; it does not imply their commitment or obligation to do so. Local and regional organizations and individuals were considered but are not listed, which allows Regional Teams and Councils to engage with community members in a collaborative manner.

¹ See <https://www.ncbi.nlm.nih.gov/books/NBK559239/> for more information.

² See <https://www.samhsa.gov/sites/default/files/nc-smart-goals-fact-sheet.pdf> for more information.

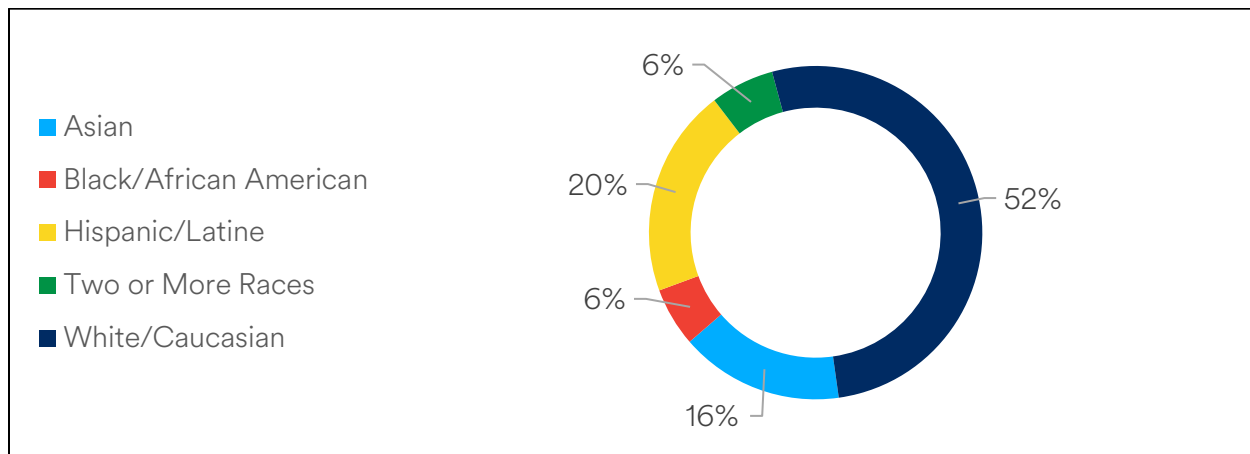
Action Plans will be reviewed in the summer with the community to discuss progress toward the SMART goals, potentially identify new goals and steps to meeting them, and talk about next steps for implementing the recommendations.

Region 1-B-D

Region 1-B-D is located in Cook County and partially or fully includes 11 townships: Barrington, Elk Grove, Evanston, Hanover, Maine, New Trier, Niles, Northfield, Palatine, Schaumburg, and Wheeling. The North Cook Region is unique in that it borders several county lines including DuPage, Kane, Lake, and the rest of Cook County.

In 2022, the total population of the Region was 974,722; 67,842 were children birth through age five. While most of the children aged four and under are identified as white, there is racial/ethnic diversity in certain communities. In Hoffman Estates, Palatine, Des Plaines, and Skokie the predominant ethnicity is Asian. In parts of Wheeling, Prospect Heights, Des Plaines, and Evanston the predominant ethnicity is Latine/Hispanic. Evanston also has communities of Black/African American families, Latine/Hispanic families, families that identify as Two or More Races, and white families.

Figure 1: Percentage of Children Aged Four and Under by Race/Ethnicity³



Source: IECAM
Created by: Birth to Five Illinois

Across the Region, there are 19,650 slots in publicly funded, licensed, and license-exempt child care centers and homes for children birth through age five. Currently, Region 1-B-D does not have enough spots available for families who might want to enroll their young child in an ECEC program.

³ Other races/ethnicities have too small of numbers to be represented in the chart: American Indian and Alaska Native, 48 people; Other, 376 people.

Table 1: Number and Capacity of Early Childhood Education and Care Programs

| Program Type/Name | Ages Served | Number in Region | Capacity |
|-----------------------------|----------------------|------------------|----------|
| Early Head Start | Ages Birth to Three | 7 | 257 |
| Head Start | Ages Three to Five | 6 | 324 |
| Preschool for All | Ages Three and Four | 32 | 2,885 |
| Preschool for All Expansion | Ages Three and Four | 5 | 120 |
| Licensed Child Care | Ages Birth to Twelve | 158 | 13,703 |
| Licensed Family Child Care | Ages Birth to Twelve | 57 | 570 |
| License-Exempt Child Care | Ages Birth to Twelve | 16 | 1,791 |

Source: IECAM

Created by: Birth to Five Illinois

For additional data and information, please access Region 1-B-D's Early Childhood Regional Needs Assessment at: www.birthtofiveil.com/region1bd/#report.

Recommendation 1



Build partnerships with health care providers, such as developmental/mental health providers and local pediatricians, to increase access to early screening and resource sharing.

This recommendation was made because too often health care providers and Early Childhood Education and Care (ECEC) programs, services, and supports work in silos, not sharing information about the families and children being served. Increasing cross-sector collaboration will allow families to be more easily connected with services and provide a pathway for health care providers and ECEC professionals to better coordinate support for families and children throughout the Region.

SMART Goals

| SMART Goals | What steps will be taken to meet the SMART goal? | How will you know when the SMART goal has been achieved? |
|--|--|--|
| <p>Between April 2024 and October 2024, develop a one-page ECEC resource that pediatricians can share with caregivers during their well-child visit or yearly physical up to age 5/6, which will increase awareness of ECEC supports in the community.</p> | <ul style="list-style-type: none"> • Read and understand the public health departments' reports to become familiar with their priorities for local communities. • Between April and October 2024, collaborate with community partners to explore and select which resources to include in the one-page resource. • Strategize and create a plan with dates/times where this document can be shared in places families frequent, such as laundromats, libraries, grocery stores, bathrooms. • Develop a marketing plan including social media outreach and targeted advertising (based on funding). | <ul style="list-style-type: none"> • When the one-page resource is developed. • When the marketing plan is developed and approved by the Councils and involved stakeholders. |
| <p>Between March 2024 and March 2025, develop and build relationships with healthcare providers, including mental health, to increase the awareness of ECEC resources and support.</p> | <ul style="list-style-type: none"> • Contact a few large healthcare leaders and the local American Academy of Pediatrics to establish a working relationship. • Create a defined message for collaboration that will be shared. • Connect with 10 local pediatric offices and share a survey asking which screening tools and procedures they use in their practice. • Report survey findings during "Lunch and Learns". • Invite a Developmental Pediatrician to come and speak to the Councils to better understand the difference between pediatric specialties. | <ul style="list-style-type: none"> • When the survey for pediatric offices has been developed. • When the survey has been distributed to 10 pediatric offices. • When three Lunch and Learns have been held. • When two meetings have been held with a representative of the American Academy of Pediatrics. • When there is an understanding of the range of procedures and screening tools used by pediatricians. • When there is a regular meeting cadence with healthcare partners. • When parents/caregivers and providers have an increased |

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| | <ul style="list-style-type: none"> • Find a pediatrician conference/workshop, that may be more receptive to our information and idea of collaboration. • Pilot with the one-page ECEC supports resource with up to two pediatric offices to gain insight into its effectiveness. • Quarterly, have Lunch and Learns between providers and families to learn more about their experiences with healthcare/ECEC systems. | awareness of, and accessibility to, the resources available. |
| Between April 2024 and April 2025, increase awareness of families to receive free screenings for children in the community. | <ul style="list-style-type: none"> • Begin to explore/develop a plan for community screenings through Child and Family Connections (CFC) #6 to occur at a pediatric office or community health center. • Locate the pediatric therapeutic clinics in North Cook County that offer free screenings for children birth to age five. Add them to a resource list to be shared with caregivers in the Region. | <ul style="list-style-type: none"> • When a relationship is developed between CFC #6 and two pediatric offices to offer free screenings. • When a list of therapeutic clinics that offer free screenings has been developed. • When a plan to inform families has been developed. |

Risks & Barriers

| Anticipated Risks/Barriers to Meeting Goals/Recommendation | Proposed Solutions to Anticipated Risks/Barriers to Meeting Goals/Recommendation |
|---|--|
| Gaining buy-in and being able to collaborate effectively with healthcare leaders and providers. | <ul style="list-style-type: none"> • Engage and build relationships with pediatricians to encourage their openness to implementing and using a resource page. • Provide space for health professions to ask questions about resources to understand why it is an important support for families. |
| Agreeing on concise, family-friendly language and terms to share with the community. | <ul style="list-style-type: none"> • Develop a plan to receive feedback from Early Childhood Education and Care leaders. |

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| Funding to produce materials, host meetings, attend conferences, and produce advertisements. | <ul style="list-style-type: none"> • Solicit donations and in-kind donations of time, space, printing, food, and materials from local businesses, organizations, and agencies. |
| Ensuring community partners understand their role and responsibilities in carrying out steps and goals. | <ul style="list-style-type: none"> • Engage in planning meetings and check-in meetings with partners. |

Additional Engagement with State Organizations, Agencies & Individuals

Council members and Regional staff identified additional community and state-level organizations, agencies, and individuals and what role they might need to play in implementing the Action Plan SMART goals and/or recommendation. Local organizations, agencies, and individuals are still being contacted and their specific role is being defined at this time, so they have not been listed as a part of the Action Plan. However, Council members and Regional staff identified the following statewide organizations, agencies, and/or individuals who should be engaged further to help support the SMART goals and/or recommendation:

- American Academy of Pediatrics: Collaborate to develop best practices, and partner to understand their recommendations regarding screenings.
- Early Intervention: Support connections to pediatricians and create a Memorandum of Understanding (MOU) for free screening opportunities.
- Public Health Department: Share information and resources about ECEC programs, services, and supports.

Possible Funding Sources

The Council members identified the following as possible funding sources to support this recommendation:

- Township grants
- Local businesses, including banks and retailers
- Rotary Club
- McCormick Foundation
- SBB Research Foundation

Community

Council members identified community groups who have been, and are currently, working on similar goals and recommendations, including the DuPage Collaboration and other Birth to Five Illinois Regions. They are in the process of meeting with these community groups to discuss how

they have, or plan to implement, similar goals and recommendations, as well as the challenges and lessons learned.

Recommendation Implementation

Council members said they will know the recommendation is fully implemented when caregivers have easy access to early screenings and resources to meet the needs of their children, there is better and ongoing communication between healthcare providers and ECEC professionals, and pediatricians are engaging with the resources and attending Lunch and Learns hosted by Birth to Five Illinois and community partners.

They also predicted that by fully implementing the recommendation there will be an increased awareness and knowledge across the community about ECEC programs, regular collaboration between pediatric offices and CFC #6, an increase in referrals to ECEC programs and Special Education services, and better data collected about the needs of families.

Recommendation 2



Create a path for information sharing with families, such as family and primary care-friendly list of options for Early Childhood Education and Care (ECEC) support services, to help them make connections to community resources.

Caregivers expressed concern that they were unsure of where to find information and resources on ECEC support services and recommended a centralized place be developed to access information and resources. Providers also expressed the same need for a centralized place to locate information for caregivers and families.

“Luckily my wife found out about programs such as ECDEC/FIND (Early Childhood Developmental Enrichment Center and FIND website), but in my friend circle they don’t know.” – Community Parent

SMART Goals

| SMART Goals | What steps will be taken to meet the SMART goal? | How will you know when the SMART goal has been achieved? |
|---|---|---|
| <p>Between March 2024 and September 2025, Region 1-B-D Council members in collaboration with community members will create a list of options for ECEC support services for three areas of the Region for pregnant/expecting families and families with children through age five.</p> | <ul style="list-style-type: none"> • Identify three communities in Region 1-B-D where lists of educational opportunities or resources do not exist. • List all local community partners that are connecting/working with families. • Explore possible partners in Region 1B-D- to discuss information sharing and identify other partners who agree to be part of the conversation. • Identify the model that currently has a list of educational resources and implements best practices. • Create a framework that will be used to gather/collect information for the identified communities for potential resources/providers. • Identify community partners that could be the digital host for the resource list. • Create a marketing plan to disseminate information and supports family connections. • List possible ways to help families make community connections, considering those that do not have family/supports around them. | <ul style="list-style-type: none"> • When data points have been mapped. • When the group has decided on areas to target. • When connections have been made with Community Collaborations such as Elgin Partnership for Early Learning (EPEL), SPARK Aurora, the Collaboration for Early Childhood Education and Care, and the Evanston Early Childhood Council. • When a resource list has been created. • When information has been disseminated to targeted communities. |

Risks & Barriers

| Anticipated Risks/Barriers to Meeting Goals/Recommendation | Proposed Solutions to Anticipated Risks/Barriers to Meeting Goals/Recommendation |
|---|--|
| Narrowing who will be the point of contact and coordinate this list. | <ul style="list-style-type: none"> Find a stakeholder within the selected communities that has the capacity to be the point of contact and coordinate the list. |
| Identifying the organization/hub that will maintain this list/document of resources. | <ul style="list-style-type: none"> Convene local ECEC stakeholders within the identified communities to discuss the benefits and potential to start a collaboration/coalition. |
| Resource constraints, such as lack of time, funding, and people to complete steps to achieve Smart. Measurable. Achievable. Relevant. Time-Bound. (SMART) goal. | <ul style="list-style-type: none"> Develop partnerships with local colleges looking for internship opportunities or classroom projects for students, or identifying funding/raising money, printing, or graphic design partnership with local colleges. |

Additional Engagement with State Organizations, Agencies & Individuals

Council members and Regional staff identified additional community and state-level organizations, agencies, and individuals and what role they might need to play in implementing the Action Plan SMART goals and/or recommendation. Local organizations, agencies, and individuals are still being contacted and their specific role is being defined at this time, so they have not been listed as a part of the Action Plan. However, Council members and Regional staff noted that the Illinois Network of Child Care Resource & Referral Agencies (INCCRRA) should be engaged further to provide data and information on providers in targeted communities.

Possible Funding Sources

The Council members identified townships, local businesses, and local foundations or grants that fund educational initiatives as potential funding sources that can be tapped to support the full implementation of this recommendation.

Community

Council members identified social service agencies and Elgin Partnership for Early Learning (EPEL) as groups who have been, and are currently, working on similar goals and recommendations. They conveyed the lessons they learned while doing this work:

- Organizations have closed and program requirements have changed, leaving lists needing to be updated on a regular basis to ensure accurate materials are being distributed to the community.
- There must be a dedicated team or person who can support community members with finding and connecting to services.
- Consider creating a centralized database like Unite Us, where anyone can submit a resource for verification and then posting.

Recommendation Implementation

Council members said they will know the recommendation is fully implemented when information is readily accessible to families through digital and print materials, when there is an established pathway for effective information sharing, marketing, and utilization, when a comprehensive and easily accessible database of ECEC services in the Region is widely distributed, when surveys on information sources are conducted, when data tracking of website visits and clicks is implemented, and when the distribution and uptake of printed materials from various locations, such as hospitals, are monitored.

Council members also predicted that by fully implementing the recommendation there will be more positive outcomes related to the mental and behavioral health and development of children, enrollment in programs will increase, and families will be aware of and able to access ECEC services in the Region.

Next Steps



Birth to Five Illinois Regions will continue to use the CQI process and meet with stakeholders this summer to discuss the community's progress on implementation and continue bringing stakeholders together.

As pieces of the Action Plan are implemented, stakeholders will be encouraged to build on those efforts and develop new SMART goals to expand access to ECEC services, programs, and

supports, and continue this important work in making Illinois the best state in the nation for families raising young children, with the nation's best Early Childhood Education and Care system.

For more information on Birth to Five Illinois, please visit: www.birthtofiveil.com.



Birth to Five Illinois is funded by the Illinois Department of Human Services (IDHS) and the Illinois State Board of Education (ISBE) and is a department of the Illinois Network of Child Care Resource and Referral Agencies (INCCRRRA).

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