

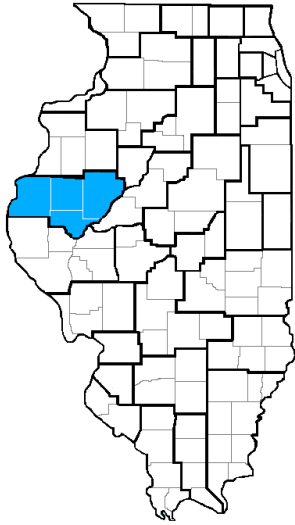
ACTION PLAN



Region 26

Fulton, Hancock, McDonough & Schuyler Counties

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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 26 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:

- Peoria SAL, Provider Connections
- Spoon River College-Early Childhood Department
- STAR NET, Regional Office of Education (ROE) #26
- Family Resource Center
- West Central Child Care Connection

It is our hope that this Action Plan will generate a strategic direction in addressing gaps in ECEC resources and services. We hope it lays the foundation for increased collaboration to support families and strengthen our community.

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 26 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.

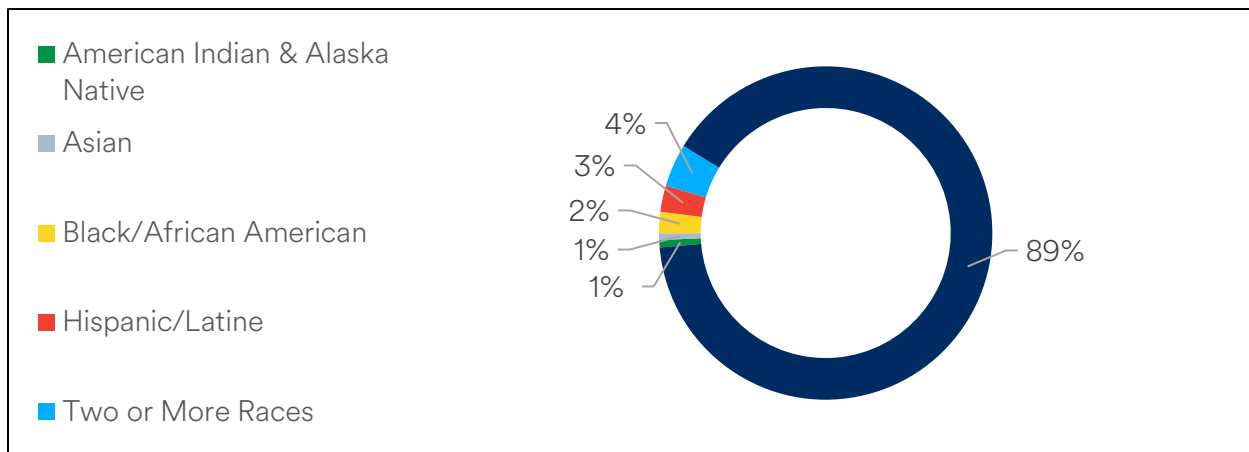
² See <https://www.samhsa.gov/sites/default/files/nc-smart-goals-fact-sheet.pdf> for more information.

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 26

Region 26 is located in west-central Illinois and includes the counties of Fulton, Hancock, McDonough, and Schuyler. In 2022, the total population of the Region was 82,974; 4,630 were children birth through age five. While the majority of the children aged four and under in the Region are identified as white, Canton (Fulton County), Macomb (McDonough County), and Schuyler County have recently seen an increase in those identify as Black/African American and Hispanic/Latine. (Figure 1).

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 2,729 slots in publicly funded, licensed, and license-exempt child care centers and homes for children birth through age five (Table 1). Currently, Region 26 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: Other, 17 people.

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

Program Type/Name	Ages Served	Number in Region	Capacity/ Funded Enrollment
Early Head Start	Ages Birth to Three	4	93
Head Start	Ages Three to Five	3	154
Preschool for All	Ages Three and Four	18	881
Preschool for All Expansion	Ages Three and Four	2	70
Licensed Child Care	Ages Birth to Twelve	15	1,011
Licensed Family Child Care	Ages Birth to Twelve	41	406
License-Exempt Child Care	Ages Birth to Twelve	3	114

Source: IECAM

Created by: Birth to Five Illinois

For additional data and information, please access Region 26’s Early Childhood Regional Needs Assessment at: www.birthtofiveil.com/region26/#report.

Recommendation 1



Work to increase the number of licensed child care providers with a focus on slots for children birth to age three and easier access in rural areas.

This recommendation was based on feedback from families and caregivers who reported needing more child care options, such as part-time care, child care after 6:00pm, and more affordable child care options for children from birth to age three. In conversations with Early Childhood Education and Care (ECEC) providers, they reported needing higher wages and benefits, more educational options, and a clear educational pathway to attain credentials and/or a degree in Early Childhood Education.

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>By fall 2025, identify two high schools in the Region with the capacity to offer a child care or child development class where students can earn the ECE Level 1 credential.</p>	<ul style="list-style-type: none"> • Meet with Illinois Network of Child Care Resource & Referral Agencies (INCCRRA) and/or Gateways staff and the Spoon River College Early Childhood Department to determine the timeframe of the credential, experience, and training required for employment in child care. • Determine which high schools and colleges are already partnered for dual credit. • Find out what college courses already exist in the area and if they would fulfill the need. 	<ul style="list-style-type: none"> • Goal is met once a standard timeframe is determined, and there is email correspondence and notes from the meeting. • Goal is met once a list of existing dual credit programs is determined. • Goal is met once existing college courses are known and a meeting has been hosted between colleges and high schools.
<p>By spring 2025, create a regional group of mentors to grow the field by assisting new providers and workers in navigating the ECEC system.</p>	<ul style="list-style-type: none"> • Determine if other state organizations or CCR&Rs are doing this work. • Determine a recruitment strategy and application process. • Identify possible grants to reimburse mentors and mentees. • Coordinate meeting dates, times, locations, cadence. 	<ul style="list-style-type: none"> • Goal is met once all existing groups have been identified. • Goal is met once best strategy has been identified and documented. • Goal is met when a list of funding sources has been identified and documented. • Goal is met when meeting dates, times, and location with roll call are set.
<p>By fall 2025, launch a campaign to increase the number of home providers by publicizing the need and a clear pathway for new providers to get started.</p>	<ul style="list-style-type: none"> • Develop a targeted outreach plan to disseminate information that is focused on unemployment offices and schools. • Determine the process for those interested in becoming a provider. • Determine what materials are already available and how they are being marketed. • Determine what funding is available for starting a licensed family child care home. 	<ul style="list-style-type: none"> • Goal is met when plan has been investigated and agreed to. • Goal is met when process is documented, including steps in becoming a provider. • Goal is met when folder of existing materials has been collected and previous marketing efforts have been listed. •

<p>By fall 2025, provide opportunities for local businesses to learn about partnering with child care providers to cost share or offer benefits to employees who utilize local child care providers.</p>	<ul style="list-style-type: none"> • Meet with the Chamber of Commerce to determine what would be the best approach to meet with business leaders. • Make businesses aware of ECEC and determine staff needs around child care. • Utilizing Dot foods program model, showcase local businesses with the information of offering child care benefits while teaming up with child care providers with available spots to employees. 	<ul style="list-style-type: none"> • Goal is met when meeting with Chamber of Commerce is set and completed. • Goal is met when promotion material and tool are published and distributed. • Goal is met when local companies have established partnerships to provide child care benefits to employees.
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Risks & Barriers

Anticipated Risks/Barriers to Meeting Goals/Recommendation	Proposed Solutions to Anticipated Risks/Barriers to Meeting Goals/Recommendation
Finding teachers and school districts to teach the classes.	<ul style="list-style-type: none"> • Provide incentives to teachers to fill positions.
Finding and getting information to those who want the information.	<ul style="list-style-type: none"> • Provide incentives to providers/families wanting to open their home as a family child care home.
Increasing pay for providers.	<ul style="list-style-type: none"> • Provide benefits to all child care programs, not just those receiving support via the Child Care Assistance Program (CCAP).
The licensing process can be confusing and difficult to navigate.	<ul style="list-style-type: none"> • Streamline the process of licensing so teacher qualifications are the same across agencies.
It is difficult to attract new family child care providers to the field, especially since it can take a while for them to receive pay from families and CCAP.	<ul style="list-style-type: none"> • Provide supplemental benefits for the first year. • Open grants to all types of providers, including family child care programs.

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:

- Illinois Area Health Education Centers (AHEC): Consult to understand best practices.
- Child Care Resource & Referral (CCR&R) Agency: Ask to support career fairs, attend schools to talk about becoming family child care provider and available grants, provide marketing materials.
- Illinois Department of Children & Family Services (DCFS) and Illinois Department of Human Services (IDHS): Discuss making licensing and qualifications for teachers uniform across agencies, funding for stipends and incentives for teachers, and how to improve the background and fingerprinting process.
- INCCRRA: Collaborate on how to get teacher training programs established in more high schools and discuss teacher recruitment, incentives, and how to support providers who wish to apply for grants.

Possible Funding Sources

While funding may be needed to support activities related to the recommendation, the Council members did not identify additional possible funding sources at this time.

Community

Council members discussed that though there are online resources for those interested in working in the ECEC field, such as the Gateways to Opportunity website, the Day Care Home Licensing Orientation website, the Illinois Cares for Kids website, and the local Child Care Resource & Referral (CCR&R) agency website, there are no organizations or agencies working on this or related recommendations locally.

Recommendation Implementation

Council members said they will know the recommendation is fully implemented when there is an increase in providers and their awareness of child care center options.

They also predict that by fully implementing the recommendation, there will be greater parental involvement in a closer-knit community focused on supporting local child care providers. Additionally, high school students will have ECE Level 1 Credential courses available to them, and there will be new licensed family child care homes in the Region.

Recommendation 2



Collaborate with local agencies to provide more accessible and expanded services, raising awareness of referral opportunities and developmental screenings.

This recommendation was made based on feedback from parents, caregivers, and providers who discussed how difficult it is for families to access services, therapy, and assessments for children with suspected or diagnosed disabilities and/or specialized learning needs.

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>By December 2024, resources on special education programs and disability services/supports will be compiled for families and caregivers and distributed to community partners.</p>	<ul style="list-style-type: none"> • Investigate all current resources available. • Define criteria for including resources/information in the campaign. • Identify gaps in information. • Explore additional material to fill gaps. • Curate what will be included based on defined criteria. • Investigate the best delivery model. • Create a comprehensive list of community partners for distribution. • Carry out the best delivery model. 	<ul style="list-style-type: none"> • Goal is met when list is created. • Goal is met when criteria is determined and documented. • Goal is met when gaps in information are documented. • Goal is met when list is compiled and documented based on defined criteria. • Goal is met when delivery model is determined, and plan is documented. • Goal is met when list of partners is documented.
<p>By FY25, create a resource list of programs that provide funding/reimbursement for families who need to travel.</p>	<ul style="list-style-type: none"> • Explore what resources are already available to help fund mileage for families in the Region. • Compile a list of resources that reimburse for travel appointments and make partners 	<ul style="list-style-type: none"> • Goal is met when list of existing resources is created. • Goal is met when list of funding resources is created. • Goal is met when list is emailed or handed out. • Goal is met when contingency plan is made.

	<p>aware of additional possible funding sources.</p> <ul style="list-style-type: none"> • Distribute the list to partnering agencies and providers. • If no plan or resources exist, craft a contingency plan to propose addressed need and include funding opportunities for partners to seek reimbursement for families in the Region. 	
<p>Throughout the remainder of FY24 and during FY25, identify and connect providers who are willing to travel across counties to provide care, and possible locations for therapy for families.</p>	<ul style="list-style-type: none"> • Identify all special service providers who serve children in the Region. • Determine their geographic boundaries. • Identify any program restrictions, funding gaps, or other barriers to implementing rotating service locations. • Determine who is best suited to provide services. • Advocate for program development and implementation by identified providers, making them aware of the need, and connect partners to each other to begin implementation. • If no plan or resources exist, craft a contingency plan to address the need. 	<ul style="list-style-type: none"> • Goal is met when a directory of services from STAR NET, the West Central Illinois Special Education Cooperative (WCISEC), and Provider Connections is generated. • Goal is met when a map of the boundary is created. • Goal is met when an Operational Delivery Model document is created. • Goal is met when a list of who to target/invite is completed. • Goal is met when individual providers have been invited and a regular meeting cadence is established. • Goal is met when the Birth to Five Illinois: Region 26 Team has met with Western Illinois University staff to discuss a graduate project proposal.

Risks & Barriers

Anticipated Risks/Barriers to Meeting Goals/Recommendation	Proposed Solutions to Anticipated Risks/Barriers to Meeting Goals/Recommendation
How to ensure the information reaches families and caregivers who need it.	<ul style="list-style-type: none"> • Partner with pediatricians and professionals to ensure the information is getting to families.
Determining which sources to use and what is most valuable to families.	<ul style="list-style-type: none"> • Curate existing sources based on defined criteria. • Compile and utilize resources that are already available.
There are not enough Early Intervention therapists to meet the current need, and families often must seek out additional services. Additionally, the frequency of	<ul style="list-style-type: none"> • Employ incentives to attract more Early Intervention therapists to the Region. • Collaborate with workforce organizations that share the same goal.

therapy visits may not be enough for coverage.	
How to bring together medical providers and school staff to encourage collaboration.	<ul style="list-style-type: none"> • Host quarterly joint meetings between medical providers and school staff. • Foster partnerships to help make educators and health providers aware of the benefits of collaboration.

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:

- Child and Family Connections (CFC): Ask to provide information on existing networks and providers, and partner to disseminate information.
- Division of Specialized Care for Children (DSCC): Request information regarding reimbursing travel expenses for families.
- Easter Seals and March of Dimes: Request funding and provide resources they have developed.
- STAR NET: Request funding and to provide educational opportunities.

Possible Funding Sources

While funding may be needed to support activities related to the recommendation, the Council members did not identify additional possible funding sources at this time.

Community

Council members noted that no other community groups are currently working on similar goals and recommendations.

Recommendation Implementation

Council members said they will know the recommendation is fully implemented when at least one program has been created and is running for at least six months, information has been disseminated to families and is available to those who need it, and the needs of clients are being fully met.

They also predict that by fully implementing the recommendation, more children will get the appropriate referrals, more children will be ready for Kindergarten, and families will be able to find and easily access the services and supports they need.

Recommendation 3



Publicize existing programs, streamline information between families and providers, increase community connections, and support the Integrated Referral & Intake System (IRIS).

This recommendation was based on feedback from parents, caregivers, and community members who reported it was difficult to find information about Early Childhood Education and Care (ECEC) services in 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?
Throughout FY24 and FY25, generate a marketing plan and partner with healthcare and ECEC professionals and providers to provide information, directories, education, and resources to parents and caregivers.	<ul style="list-style-type: none"> • Gather pre-existing regional and local information on resources and determine the best content distribution method. • Create a Marketing Communications Plan for the Region with the three local Child Care Resource & Referral Agencies (CCR&Rs). • Collaborate with the local CCR&R to determine the marketing gaps and widen the targeted audience; include resources for Child Care Assistance Program (CCAP) 	<ul style="list-style-type: none"> • Goal is met when list is created, and distribution plan is documented. • Goal is met when marketing meetings and a plan are completed. • Goal is met when gaps in previous outreach initiatives are documented. • Goal is met when a list of funding streams is generated. • Goal is met when resources have been sent out. • Goal is met when names of individuals and agencies who are

	<p>application accuracy completion process.</p> <ul style="list-style-type: none"> • Explore and secure further funding for current campaigns that have depleted their marketing and could include printed media. • Determine a reachable % or number of those to target with outreach. • Identify partners willing to take part in the project's scope of work. 	<p>willing and interested in being collaborators are engaged.</p>
<p>During the remainder of FY24 and throughout FY25, create a messaging campaign to promote collaboration among providers.</p>	<ul style="list-style-type: none"> • Meet with the Regional Office of Education (ROE) to determine what support could be provided to help aid in the growth of IRIS. • Create curated content about collaboration to be used across the local three CCR&Rs to promote the services and supports. • Create information about local ECEC on the Birth to Five Illinois: Region 26 IRIS card to provide clear and concise information to be offered to parents and caregivers (i.e., Illinois Care for Kids and the local CCR&Rs). 	<ul style="list-style-type: none"> • Goal is met when written plan with due dates of who, what, and when needs to be contacted is completed. • Goal is met when a shared drive with content to be used by county is created that specificity identifies the topics needed to be addressed and highlighted. • Goal is met when a working document with current and live content that would be made available internally to agencies looking to seek information on the referral process and those providers who are quality based is created.

Risks & Barriers

Anticipated Risks/Barriers to Meeting Goals/Recommendation	Proposed Solutions to Anticipated Risks/Barriers to Meeting Goals/Recommendation
<p>Having a process that makes it feel accessible and is possible for parents and caregivers to take advantage of while they are recovering postpartum.</p>	<ul style="list-style-type: none"> • Work with birthing hospitals, pediatricians, and doctors. • Work with hospital social workers to identify needs.
<p>Reaching people through the developmental stages of both family and child to help support the entire family.</p>	<ul style="list-style-type: none"> • Create educational ads that run in the Region about developmental stages that can be shared via social media and maintained by the CCR&R and Birth to Five Illinois: Region 26 staff and Council members. • Enhance parental awareness at well-baby visits.

	<ul style="list-style-type: none"> • Shift view of Early Beginnings from being a resource only in crisis to being a resource for every family.
Obtaining the correct and complete information by county/city and keeping it current.	<ul style="list-style-type: none"> • Work with IRIS, County Health Departments, the Regional Office of Education #26, and community partners to maintain accurate information.
How to disseminate materials so they are accessible to all community members.	<ul style="list-style-type: none"> • Use social media, school newsletters, and online directories that can be printed for dissemination.

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:

- County Health Departments: Ask for resources they have developed and to distribute information to parents and caregivers.
- Local Child Care Resource & Referral (CCR&R) Agencies: Engage with Peoria SAL, Skip-Along (SAL), and West Central Child Care Connection (WCCCC) and ask to support dissemination of ECEC content, promote IRIS, and help increase the number of providers.

Possible Funding Sources

Council members identified the following potential sources of addition funding to support this recommendation:

- Dot Food Foundation
- NTN-Bower
- Nutri-Ag
- Pella Foundation
- Quincy Community Foundation
- Rotary Clubs
- Service clubs such as P.E.O., Macomb Women’s Club, and the American Legion
- Tracey Family Foundation
- United Way
- Western Illinois University

Community

Council members noted that SAL, WCCCC, the Center for Early Childhood and Best Practices, and Caregiver Connections are currently working on similar goals and recommendations. While collaboration and communication has been established with these community groups, no clear lessons learned about their initiatives have yet been conveyed to Council members or Regional staff.

Recommendation Implementation

Council members said they will know the recommendation is fully implemented when families know where to find help, materials have been developed and are accessible to all families, and there is an increased sense of community amongst families and providers. They also predict that by fully implementing the recommendation, families will experience less stress when trying to find resources and will access resources earlier; families and children will have better health and educational outcomes; and providers will see an increase in digital platform engagement.

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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