

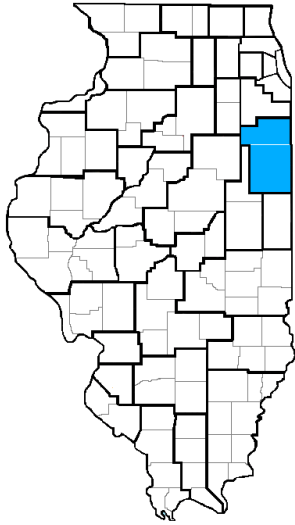
ACTION PLAN



Region 32

Iroquois & Kankakee Counties

Regional Council Manager: Liz Gibson (she/her/ella)
Email: lgibson@birthtofiveil.com
Phone Number: (309) 393-2539
Regional Website: www.birthtofiveil.com/region32



Family Council

Ali Denault
Alison Chandler
Ami Kring
Ashley Chappell
Brenda Mohr
Cheme Williams
Coen Clark
Danielle Norton
Hailey Siegel

Jazmine Mancha
Kasira Potts
Maria Orozco
Natasha Ashford
Sarah Gowler
Summer Hodge
Tahlia Guimond
Teage Drinnon

Action Council

Amanda Chorak
Carolyn Short
Chrissy Nojd
Christine Johnston
Cindi Schimmelpfennig
Cindy Luzeniecki
Erin Goldenstein
Holly Knupp

James Duggan
Lovice Brinkman
Marquita Cox
Mary Self
Mary Tillery
Pamela Powell
Penny Greenlee
Rebecca Graham

Rebecca Kroiss
Rhonda Pence
Rhonda Showers
Rita Armstrong
Rosemary Pistorius
S. Newcomb Mowrer
Sheree Sykes
Theodis Pace

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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 32 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:

- Carolyn Short
- Cindy Luzeniecki
- Dr. Jim Duggan, BESD School District
- Eric Ceci, Iroquois County Health Department
- Kankakee County Health Department
- Mariah Vail and Omar Arrocha, United Way of Kankakee & Iroquois Counties
- NAACP
- Nicole Smolkovich, Kankakee Community Foundation
- Project Sun staff
- Sarah Gowler
- KanIHelp volunteers

It is our hope that this Action Plan will provide solutions to some of the barriers identified in our Early Childhood Regional Needs Assessment and increase awareness of what services are available in our area.

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 32 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.

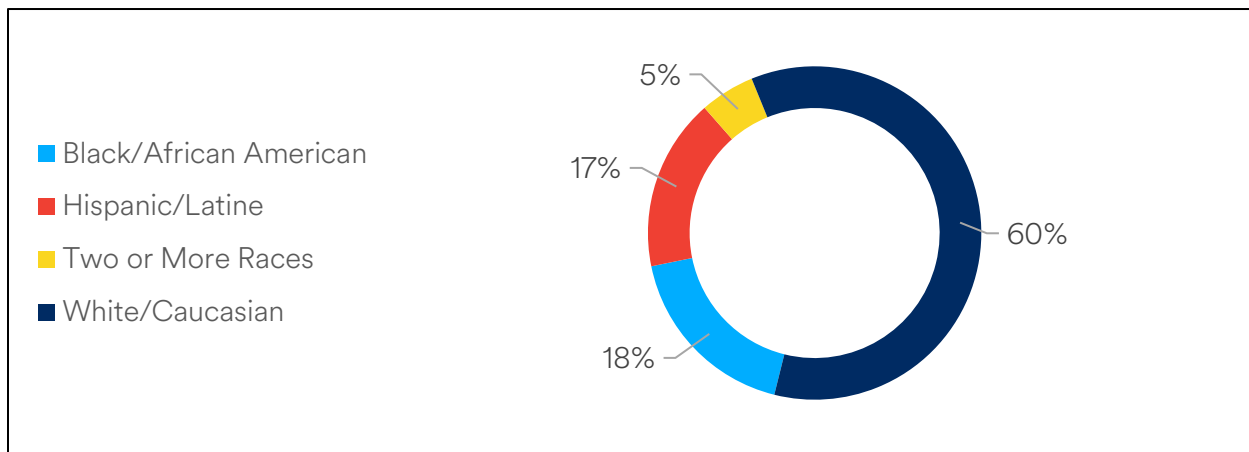
² See <https://www.samhsa.gov/sites/default/files/nc-smart-goals-fact-sheet.pdf> for more information.

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 32

Region 32 is located in east-central Illinois and includes the counties of Iroquois and Kankakee. In 2022, the total population of the Region was 130,984; 8,885 were children birth through age five. While most children in the Region are identified as white, there are steadily growing numbers of children who are identified as Black/African American, Hispanic/Latine, and Two or More Races (Figure 1). Areas in and around Hopkins Park and Kankakee have a large population of people who self-identify as Black or African American.

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 3,775 slots in publicly funded, licensed, and license-exempt child care centers and homes for children birth through age five. Currently, Region 32 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, 3 people; Asian, 17 people; Other, 11 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	8	107
Head Start	Ages Three to Five	8	423
Preschool for All	Ages Three and Four	12	645
Preschool for All Expansion	Ages Three and Four	3	77
Licensed Child Care	Ages Birth to Twelve	20	1,626
Licensed Family Child Care	Ages Birth to Twelve	49	469
License-Exempt Child Care	Ages Birth to Twelve	5	428

Source: IECAM

Created by: Birth to Five Illinois

For additional data and information, please access Region 32's Early Childhood Regional Needs Assessment at: www.birthtofiveil.com/region32/#report.

Recommendation 1



Establish a centralized community network for Early Childhood Education and Care (ECEC) information, referrals, and resources.

There is an urgent need to increase communication and awareness of available ECEC programs and services within our Region. Family and Action Council members have emphasized the critical priority that exists in connecting our parents and caregivers to these services and the knowledge needed to utilize them. Furthermore, there is a desire for a comprehensive data collection system to support community leaders as they pursue funding and program development opportunities.

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 June 2024, partner with community agencies and organizations to raise awareness among community members, caregivers, and families about ECEC resources, support, and enrichment opportunities.</p>	<ul style="list-style-type: none"> • Council Members will share information about KanlHelp at meetings they attend. • Provide flyers with a QR code with guidance on how to access and update information. • Create a kid friendly bookmark for families. • Disseminate a list of community enrichment opportunities on KanlHelp. 	<ul style="list-style-type: none"> • When mechanisms for tracking event attendance and where information was disseminated are put in place. • When website managers run a report and track the number of visits to the “Enrichment” link category on the KanlHelp website. • When there is an increase in visitor traffic of at least 3% each quarter on the KanlHelp website. • When the number of support requests for 211 increases by at least 2% each quarter. • When partner facilitator referrals equate to at least 45 referrals per month, or a 10% increase, each quarter.
<p>By June 2024, community partners reinstate the KanlHelp/211 Policy Council.</p>	<ul style="list-style-type: none"> • Contact community members to be on the council. • Reach out to current organization(s) on the list to update/verify information. 	<ul style="list-style-type: none"> • When Policy Council meetings are reinstated on a semi-monthly to monthly basis.
<p>By June 2024, the KanlHelp/211 Policy Council connects and informs 50 community partners about the KanlHelp website and 211.</p>	<ul style="list-style-type: none"> • The Regional Office of Education will share the KanlHelp and 211 resources (such as QR codes, flyers, and links via social media) with local educational institutions and school districts. • Relationship Facilitator will follow up with all districts about KanlHelp/211 services. • CCR&R/CCRS will share the KanlHelp and 211 resources (such as QR codes, flyers, and links via social media) 	<ul style="list-style-type: none"> • When KanlHelp/211 Policy Council members have connected with at least 50 community partners. <ul style="list-style-type: none"> ○ When there is a data collection tool to track all school district superintendents’ communication status and participation. ○ When hard copies of a link or QR code have been sent to staff. ○ When the United Way email is sent to Council members.

	<p>with their child care centers and families.</p> <ul style="list-style-type: none"> • Community partners will connect with Administrative Assistants and social workers to provide hard copies of resource guides. • Plan for bi-annual Mailchimp newsletter with updates/links/information on IKAN/211 to other community entities. • Create QR code and print hard copies for distribution. 	
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Risks & Barriers

Anticipated Risks/Barriers to Meeting Goals/Recommendation	Proposed Solutions to Anticipated Risks/Barriers to Meeting Goals/Recommendation
Social work staff are being asked to contribute but may not have the time to dedicate to completing the steps.	<ul style="list-style-type: none"> • Break overall tasks into phases. • Ongoing support could be provided by administration and time could be given to work on early release or in-service dates.
There may be costs to developing and printing materials, especially if they need to be translated into multiple languages to meet community needs.	<ul style="list-style-type: none"> • Work with community partners to utilize grant or discretionary funds for the development and printing of materials. • Prioritize printing of resources for children from birth to age three. • Utilize faith community, village websites, utility bills and other community partners to spread information about KanIHelp.
There is a need for someone or a group of people to contact agencies and organizations to update digital resources.	<ul style="list-style-type: none"> • Find community members to serve on KanIHelp/211 Policy Council. • Cross reference updates with the Integrated Referral and Intake System (IRIS) database, as participating entities are responsible for keeping their IRIS profiles current.
There is a tight timeline to complete the steps.	<ul style="list-style-type: none"> • Break overall tasks into phases to ensure success of each action step throughout the implementation period.

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 local health departments in our Region and the Illinois Department of Children and Family Services (DCFS) should be engaged further to help support community outreach and partner with the Relationship Facilitator, who works primarily out of the Kankakee County Health Department to support the implementation of the recommendation.

Possible Funding Sources

The Council members identified the following possible funding sources to help support the steps and goals of the recommendation:

- Community Foundation of the Kankakee River Valley
- Donations from community members, businesses, or local organizations
- In-kind donations from businesses or local organizations
- Local school districts
- Pledge for Life
- Success by Six/United Way

Community

KanlHelp and the 211 Policy Council are leading this effort and shared with Council members that the biggest lesson they have learned is communication is key not only for a basic understanding of this platform, but also for the effectiveness of services provided. If an entity does not keep their profile up to date, parents/caregivers and community members may be unable to fully utilize this resource.

Recommendation Implementation

Council members said they will know the recommendation is fully implemented when there is increased traffic on the KanlHelp website, there is an increased number of support requests at the 211 call center, there is an increase in Parent Facilitator referrals, and when the policy council has been reinstated.

They also predict that by fully implementing the recommendation there will more interaction between providers and less redundancy in resource guides; additionally, caregivers will be more

knowledgeable about the resources available to them in the Region and will be empowered to find the supports their family needs. Council members also predict there will be an overall increased awareness of where to find ECEC resources, programs, and services amongst both ECEC providers and community members.

Recommendation 2



Provide mental health supports/wrap-around services for all children birth to age eight, families, and Early Childhood Education and Care (ECEC) professionals in Region 32.

There is an urgent need to support the deficiency in the number of providers, resources, professional development, and peer support in the Region. Support for social emotional learning, mental health services, Kindergarten preparation, infant services, and ECEC services, as well as the desire for parent/child interactions, was conveyed during focus groups and Council meetings.

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>Increase access to information and support related to social emotional wellness for groups such as: parents, educators, local community stakeholders, and first responders as measured by usage of available modules and certifications by January 2025.</p>	<ul style="list-style-type: none"> • Create and disseminate an eQUIP (E Therapy) Modules Flyer with codes for access to educational modules. • As a part of the eQUIP Grant (pending funding available): <ul style="list-style-type: none"> ○ Provide training for Early Childhood Educators on Level 1 Theraplay/Sunshine Circles. ○ Identify Theraplay/ Sunshine Circle coach, trainer, and/or facilitator to provide support to child 	<ul style="list-style-type: none"> • When social media posts about trainings have been shared monthly by community partners. • When emails have been sent monthly about trainings by community partners. • When the six educational modules on mental health have been accessed on the eQUIP platform. • When the cost of holding at least one Sunshine Circle training has been determined.

	<p>care and school district staff.</p> <ul style="list-style-type: none"> • Work with child care and school district programs to schedule trainings and identify staff to receive training. 	<ul style="list-style-type: none"> • When the cost of holding at least one Level 1 Theraplay training on has been determined. • When the cost of hiring at least one Sunshine Circle or Theraplay coach, trainer, and/or facilitator has been determined.
<p>By January of 2025, create a Parent/Peer Support Mentor Program to support parent education in the community</p>	<ul style="list-style-type: none"> • Identify role of Parent/Peer Mentors in the community. • Identify trainings needed for Parent/Peer Mentors. • Create a Parent/Peer Mentor subcommittee to become a support system for parents/caregivers in the community. 	<ul style="list-style-type: none"> • When the role of Parent/Peer Mentors in the community has been defined. • When trainings have been identified. • When a subcommittee has been established.

Risks & Barriers

Anticipated Risks/Barriers to Meeting Goals/Recommendation	Proposed Solutions to Anticipated Risks/Barriers to Meeting Goals/Recommendation
<p>It may be a challenge sustaining the program and expanding into Iroquois County, which does not currently have a program like KanlHelp.</p>	<ul style="list-style-type: none"> • Continue to collaborate with partners across both counties to ensure buy-in and support.
<p>The possible exclusion of voices from Iroquois County.</p>	<ul style="list-style-type: none"> • Partner with members of the faith-based community and local elected officials to help fill in gaps.
<p>There is still stigma associated with people who receive mental and behavioral health services.</p>	<ul style="list-style-type: none"> • Create a stigma busting campaign that includes billboards and local celebrities talking about mental and behavioral health supports. • Create a therapeutic program for general education students Kindergarten through third grade. • Partner with parents/caregivers to offer supports.
<p>Funding is needed to support Theraplay staff.</p>	<ul style="list-style-type: none"> • Partner with child care centers to identify potential funding sources and establish a fiscal agent to receive grant funds.
<p>Some priority populations, such as bilingual families and families experiencing homelessness, may be inadvertently excluded from receiving support.</p>	<ul style="list-style-type: none"> • Collaborate with school staff and community organizations that serve priority populations to ensure they are connected to information about available resources and supports.
<p>There may not be enough providers to support families and caregivers who need it.</p>	<ul style="list-style-type: none"> • Look for virtual options to support families and caregivers.

Additional Engagement with State Organizations, Agencies & Individuals

Council members and Regional staff identified additional community 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.

Possible Funding Sources

The Council members identified the following as possible funding sources to support the steps and goals of this recommendation:

- Bourbonnais Elementary School District #53 grant funds
- Community Foundation of Kankakee River Valley
- Project Sun
- Success by Six/United Way

Community

Council members noted that Riverside Medical Center has initiated a Patient and Family Advisory Council, which can serve as a connection for family voice in the medical and behavioral services in Kankakee County. While no lessons have been shared with Council members or Regional staff, the Council will be a model of how parents and families can be engaged in conversations regarding needed services, supports, and resources.

Recommendation Implementation

Council members said they will know this recommendation is fully implemented when each phase has been completed, parents/caregivers/providers have accessed the eQUIP modules, participated in Theraplay/Sunshine Circle training is offered (based on funding), and when the Parent/Mentor subcommittee has been established.

They also predict that by fully implementing the recommendation caregivers will feel supported, safe, and engaged in their community, empowered to advocate for their families, and they will have a better understanding of how to interact with and support their children.

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.



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