

Birth to Five Program Inventory

Government-Funded Programs and
Initiatives in Illinois for Expecting
Families and Young Children

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Ounce of Prevention Fund

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***Note:** A number of the Programs & Services and Systems Development Initiatives in this guide also include public education and awareness activities (e.g. All Our Kids: Early Childhood Network, Local Interagency Councils, and Safe from the Start).

About the Birth to Five Program Inventory

The Birth to Five Program Inventory is a comprehensive listing of government investments in efforts aimed to improve the quality of life for expecting parents and children under the age of five and their families. The inventory profiles a wide range of initiatives and is designed to serve as a resource for local program directors, community members, administrators, policy makers, healthcare professionals and others.

Following the Quick Reference Guide, which provides an overview of thirty-one publicly-funded programs and initiatives, you will find detailed profiles of each program or initiative, categorized as follows:

- ***Programs and Services:*** Direct services to pregnant women and children birth to five years of age.
- ***Systems Development Initiatives:*** Collaborative initiatives that aim to coordinate services and produce policy or broad-level systems change to improve the quality and availability of services and access to services.

About the Birth to Five Project

The Birth to Five Project is Illinois' Build Initiative, a statewide collaborative effort to build a comprehensive system to ensure all Illinois children are safe, healthy, eager to learn and ready to succeed by the time they enter school. The Project brings together early childhood practitioners, government agency staff, health care providers, advocates, researchers and others to identify and develop solutions to system gaps and barriers that hinder families' ability to protect, nurture, and educate their young children. The Project is managed by the Ounce of Prevention Fund and supported by the Early Childhood Funders' Collaborative and the Robert R. McCormick Foundation.

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Visit www.ounceofprevention.org to access the Inventory on-line!

Overview of Types of Government-Funded Early Learning Programs for Young Children

PROGRAMS BY AGE OF CHILDREN SERVED

Birth to Three Programs	<ul style="list-style-type: none"> • Birth to Three Set-aside (ECBG) • Early Head Start • Early Intervention (Part C) • Family Case Management (serves children to age one) • Genetics/Newborn Screening Program • Healthy Families • Healthy Start • High Risk Infant Follow-up 	<ul style="list-style-type: none"> • Illinois Subsequent Pregnancy Project • Newborn Hearing Screening Program • Parents Too Soon • Perinatal Health Care System • Targeted Intensive Prenatal Case Management <p><i>Systems Development Initiatives</i></p> <ul style="list-style-type: none"> • AOK Early Childhood Networks (can include birth to five) • Local Interagency Councils (Early Intervention)
Three to Five Programs	<ul style="list-style-type: none"> • Head Start • PreKindergarten/Preschool for All (ECBG) 	<ul style="list-style-type: none"> • Special Education (Part B)
Birth to Five Programs (and Beyond)	<ul style="list-style-type: none"> • All Kids • Child Care (DCFS) • Child Care (IDHS) • Childhood Lead Poisoning Prevention • Illinois Immunization Program • Parents Care and Share of Illinois • Responsible Parenting Program • Teen Parent Services 	<ul style="list-style-type: none"> • WIC <p><i>Systems Development Initiatives</i></p> <ul style="list-style-type: none"> • Child Care Resource and Referral • Healthy Child Care Illinois • IDHS Automated Office Locator for WIC and Early Intervention Services • Safe from the Start

PROGRAMS BY ADMINISTERING/FUNDING AGENCY

Illinois Department of Children and Family Services	<ul style="list-style-type: none"> • Child Care (Foster care) • Parents Care and Share of Illinois (with IDHS) 	
Illinois Department of Human Services	<ul style="list-style-type: none"> • Child Care • Early Intervention (Part C) • Family Case Management • Healthy Families • Healthy Start • High Risk Infant Follow-up • Illinois Subsequent Pregnancy Project • Newborn Hearing Screening Program (with IDPH) • Parents Care and Share of Illinois (with DCFS) • Parents Too Soon 	<ul style="list-style-type: none"> • Perinatal Health Care System • Responsible Parenting Program • Targeted Intensive Prenatal Case Management • Teen Parent Services • WIC <p><i>Systems Development Initiatives</i></p> <ul style="list-style-type: none"> • AOK Early Childhood Networks • Child Care Resource and Referral • Healthy Child Care Illinois • IDHS Automated Office Locator for WIC and Early Intervention Programs • Local Interagency Councils
Illinois Department of Healthcare and Family Services	<ul style="list-style-type: none"> • All Kids • Family Care 	
Illinois Department of Public Health	<ul style="list-style-type: none"> • Childhood Lead Poisoning Prevention • Genetics/Newborn Screening Program • Illinois Immunization Program 	<ul style="list-style-type: none"> • Newborn Hearing Screening Program (with IDHS)
Illinois State Board of Education	<ul style="list-style-type: none"> • Birth to Three Set-aside (ECBG) • PreKindergarten/Preschool for All (ECBG) 	<ul style="list-style-type: none"> • Special Education (Part B)

Illinois Violence Prevention Authority	<i>Systems Development Initiative</i>	<ul style="list-style-type: none"> • Safe from the Start
U.S. DHHS Region V		<ul style="list-style-type: none"> • Early Head Start • Head Start

PROGRAMS BY TYPE OF SERVICE

Early Care and Education	<ul style="list-style-type: none"> • Child Care (DCFS) • Child Care (IDHS) 	<ul style="list-style-type: none"> • Head Start • PreKindergarten/Preschool for All (ECBG)
Early Childhood Development	<ul style="list-style-type: none"> • Birth to Three Set-aside (ECBG) • Early Head Start 	<ul style="list-style-type: none"> • Healthy Families • Parents Too Soon
Early Literacy/Parent Support	<ul style="list-style-type: none"> • Birth to Three Set-aside (ECBG) • Parents Care and Share of Illinois 	
Health: Coverage, Screening and Case Management	<ul style="list-style-type: none"> • All Kids and Family Care • Childhood Lead Poisoning Prevention • Family Case Management • Genetics/Newborn Screening Program • Healthy Start • High Risk Infant Follow-up 	<ul style="list-style-type: none"> • Illinois Immunization Program • Newborn Hearing Screening Program • Perinatal Health Care System • Targeted Intensive Prenatal Case Management • WIC
Specialized Developmental Services	<ul style="list-style-type: none"> • Early Intervention (Part C) • Special Education (Part B) 	
Systems Development Initiatives	<ul style="list-style-type: none"> • AOK Early Childhood Networks • Child Care Resource and Referral • Healthy Child Care Illinois 	<ul style="list-style-type: none"> • IDHS Automated Office Locator for WIC and Early Intervention Services • Local Interagency Councils • Safe from the Start
Teen Parent Programs	<ul style="list-style-type: none"> • Illinois Subsequent Pregnancy Project • Responsible Parenting Program • Teen Parent Services 	

PROGRAMS BY INTENSITY OF SERVICE

Primary Prevention	<ul style="list-style-type: none"> • All Kids and Family Care • Child Care (DCFS) • Child Care (IDHS) • Childhood Lead Poisoning Prevention • Family Case Management • Genetics/Newborn Screening Program • Illinois Immunization Program • Illinois Subsequent Pregnancy Project • Newborn Hearing Screening Program • Parental Training (ECBG) 	<ul style="list-style-type: none"> • Parents Care and Share of Illinois • Responsible Parenting Program • Teen Parent Services • WIC <p><i>Systems Development Initiatives</i></p> <ul style="list-style-type: none"> • AOK Early Childhood Networks • Child Care Resource and Referral • Healthy Child Care Illinois • IDHS Automated Office Locator for WIC and Early Intervention Services
Intensive Prevention	<ul style="list-style-type: none"> • Early Head Start • Head Start • Healthy Families • Healthy Start • High Risk Infant Follow-up • Parents Too Soon 	<ul style="list-style-type: none"> • Prevention Initiative (ECBG) • PreKindergarten/Preschool for All (ECBG) • Targeted Intensive Prenatal Case Management <p><i>Systems Development Initiatives</i></p> <ul style="list-style-type: none"> • Safe from the Start
Specialized Services	<ul style="list-style-type: none"> • Early Intervention (Part C) • Perinatal Health Care System • Special Education (Part B) 	<p><i>Systems Development Initiatives</i></p> <ul style="list-style-type: none"> • Local Interagency Councils

QUICK REFERENCE GUIDE

INVENTORY OF GOVERNMENT-FUNDED PROGRAMS & INITIATIVES IN ILLINOIS FOR EXPECTING FAMILIES AND YOUNG CHILDREN

Programs & Services

#	Program	Administering Agency	Purpose	Sites and Number Served (see individual profile for more details)
1	All Kids and Family Care	Illinois Department of Public Aid, Phone: (800) 226-0768 (866) 4OURKIDS (866) 468-7543 TTY: (877) 204-1012	To provide health insurance to uninsured pregnant women, children and parents in Illinois	<u>Sites:</u> Statewide <u>Number:</u> Over 1.3 million children are covered by All Kids (FY07)
2	Child Care (IDHS)	Illinois Department of Human Services, Bureau of Child Care and Development Phone: (217) 785-2559	The Illinois Department of Children and Family Services provides a variety of child care services and/or subsidies to children within the DCFS system.	<u>Sites:</u> Child Care Resource & Referral (CCR&R) sites statewide, contracted sites, and individual purchase of child care services through vouchers Approximately 9,700 licensed child care centers and homes statewide (FY08) <u>Number:</u> Approximately 172,852 children served monthly (birth to age 12) by multiple individuals and community-based organizations (FY08) Estimated 49,841 children ages 0-3 served monthly (does not include core services program) (FY08)
3	Child Care (DCFS)	Illinois Department of Children and Family Services, Office of Child Development Phone: (312) 793-8607 (Cook) (309) 693-5400 (Central) (630) 801-3400 (Northern) (618) 583-2100 (Southern)	To provide child care for children served by DCFS or at risk of abuse/neglect through site-administered day care centers and individual purchase of child care services through vouchers	<u>Sites:</u> 1 site-administered child care program which sub-contracts with 71 child care agencies throughout the city of Chicago for child care services through vouchers (FY07) <u>Number:</u> Approximately 1,800 children, primarily through vouchers (FY07)
4	Early Childhood Education Block Grant	Illinois State Board of Education, Division of Early Childhood Phone: (217) 524-4835	To prevent later academic failure by providing quality programs for children 0-5 and their families and strengthen the role of parents as the child's primary educator	Preschool for All/PreKindergarten: <ul style="list-style-type: none"> • Approximately 86,000 children, including Chicago (FY07) • 622 PFA/PreK At-risk programs (FY07) Birth to Three Set-aside: <ul style="list-style-type: none"> • 115 Birth to three programs (FY07) • 16,352 children served (FY07) Parental Training: <ul style="list-style-type: none"> • 204 Parental Training programs (FY07) • 29,066 children served (FY07)

#	Program	Administering Agency	Purpose	Sites and Number Served (see individual profile for more details)
5	Early Childhood Special Education (Part B)	Illinois State Board of Education, Division of Early Childhood Phone: (217) 524-4835	To ensure that children with disabilities receive a free and appropriate public education	<u>Sites:</u> Available in all school districts <u>Number:</u> 37,137 children (FY07)
6	Early Head Start (EHS)	U.S. Department of Health and Human Services, Administration for Children and Families, Office of Community Programs Phone: (312) 353-4237	To enhance the physical, cognitive, social and emotional growth of infants and toddlers; to support parents' efforts to fulfill their parental roles; and to help parents move toward self sufficiency	<u>Sites:</u> 24 community-based organizations serving 34 counties and 33 community areas in Chicago (FFY08) <u>Number:</u> 2,699 families (FFY08)
7	Early Intervention (EI)	Illinois Department of Human Services, Bureau of Early Intervention Phone: (217) 782-1981	To enhance the growth and development of children from birth to three years of age with disabilities and/or developmental delays or who are at risk for developmental delays	<u>Sites:</u> <ul style="list-style-type: none"> • 25 CFCs statewide • Actual services provided by individual specialists and programs statewide <u>Number:</u> 21,000 families (FY08) Approximately 4,500 providers (FY08)
8	Family Case Management	Illinois Department of Human Services, Bureau of Maternal and Infant Health Phone: (217) 524-3319	To assist pregnant women and women with infants and children in finding an ongoing source of medical care and related services	<u>Sites:</u> Approximately 113 sites in local health departments and community-based organizations in Chicago (FY07) <u>Number:</u> 345,769 children and families (FY07)
9	Genetics/ Newborn Screening Program	Illinois Department of Public Health, Office of Health Promotion Phone: (217) 785-8101	To facilitate early diagnosis of metabolic/genetic disorders and help prevent premature death, excessive morbidity, mental retardation, and other developmental disabilities	<u>Sites:</u> Statewide at places of birth (e.g. hospitals, health care facilities) <u>Number:</u> <ul style="list-style-type: none"> • Approximately 185,000 samples from babies born in Illinois were screened (FY07) • Over 12,000 infants received follow-up services (FY07) • 9,400 families received clinical genetic services (FY07) • 4,000 clients received services through local public health departments (FY07)
10	Head Start	U.S. Department of Health and Human Services, Administration for Children and Families, Office of Community Programs Phone: (312) 353-4237	To support the continuum of children's growth and development, which includes the physical, social, emotional, and cognitive development of each child; to build collaborative relationships among families, staff, health professionals, and the community to ensure all child health and developmental concerns and family needs are met	<u>Sites:</u> 36 Head Start grantees in Illinois (FY08) <u>Number:</u> 36,398 families enrolled in Head Start statewide (FY08)

#	Program	Administering Agency	Purpose	Sites and Number Served (see individual profile for more details)
11	Healthy Families (HF)	Illinois Department of Human Services, Office of Family Health Phone: (217) 785-0462	To promote healthy child development and reduce child abuse and neglect among at-risk families	<u>Sites</u> : 49 HFI agencies (FY07) <u>Number</u> : 4,972 families (FY07)
12	Healthy Start	Illinois Department of Human Services, Bureau of Maternal and Infant Health Phone: (217) 782-9923	To provide case management services to high risk women and women who have post-partum depression to reduce infant mortality and improve perinatal outcomes	<u>Sites</u> : 4 Family Health Centers in Chicago (FY08) <u>Number</u> : 571 high-risk pregnant and 373 interconceptional women served (FY08)
13	High Risk Infant Follow-up	Illinois Department of Human Services, Bureau of Maternal and Infant Health Phone: (217) 524-3319	To ensure the healthy development of infants born with a high-risk medical condition	<u>Sites</u> : 116 agencies -- primarily local health departments (FY08)
14	Illinois Immunization Program	Illinois Department of Public Health Phone: (217) 785-1455	To prevent the spread of vaccine preventable childhood diseases by providing and encouraging child immunizations	<u>Sites</u> : Approximately 3,000 providers including 95 local health departments
15	Illinois Lead Program	Illinois Department of Public Health, Office of Health Promotion, Division of Environmental Health Phone: (217) 782-3517 (800) 545-2200	To assess children at risk for lead poisoning on an annual basis and provide referrals as needed	<u>Sites</u> : 88 local health departments statewide (FY06) <u>Number</u> : 278,078 children screened for lead poisoning (FY06)
16	Illinois Subsequent Pregnancy Project	Illinois Department of Human Services, Bureau of Child and Adolescent Health Phone: (217) 785-0462	To provide home visiting and substantive training to first time teen mothers to delay a second pregnancy, educate teens on the proper contraception use, and remain in and complete high school	<u>Sites</u> : 7 community-based organizations (FY08) <u>Number</u> : 431 families (FY07)
17	Newborn Hearing Screening Program	Illinois Department of Human Services Bureau of Community Health Nursing Phone: (217) 782-5946 Illinois Department of Public Health, Division of Health Assessment and Screening Phone: (217) 782-4733 Division of Specialized Care for Children (DSCC) at University of Illinois – Chicago Phone: (217) 793-2350	To lessen the impact of congenital hearing loss through early identification and intervention by providing universal hearing screening of all newborns	<u>Sites</u> : Approximately 130 birthing hospitals statewide (FY07) <u>Number</u> : Approximately 173,765 newborns screened (FY07)

#	Program	Administering Agency	Purpose	Sites and Number Served (see individual profile for more details)
18	Parents Care and Share of Illinois	Children's Home and Aid Society of Illinois Phone: (847) 991-1030	To prevent child abuse by strengthening families and empowering parents through a network of mutual support groups	<u>Number:</u> <ul style="list-style-type: none"> 1,300 parents/caregivers (FY08) 900 children (FY08) 60 parent support groups and 44 companion children's groups (March 31, 2008)
19	Parents Too Soon	Illinois Department of Human Services, Bureau of Child and Adolescent Health Phone: (217) 785-0462 Ounce of Prevention Fund Phone: (312) 922-3863	To assist teen parents to build healthy parent-child relationships, raise healthy children, delay subsequent pregnancy, and prepare for future self-sufficiency	<u>Sites:</u> 22 community-based organizations serving pregnant and parenting teens and their children (FY07) <u>Number:</u> 2,131 families served (FY07)
20	Perinatal Health Care System	Illinois Department of Human Services, Bureau of Maternal and Infant Health Phone: (217) 785-5900	To prevent injury, serious impairment or death of seriously ill newborns	<u>Sites:</u> 132 hospitals perform deliveries (FY04) <u>Number:</u> 25,000 high risk pregnant women (FY04)
21	Responsible Parenting Program	Illinois Department of Human Services, Bureau of Child and Adolescent Health Phone: (217) 785-0462	To delay subsequent pregnancies of teen parents and increase parenting proficiency through parent education and skills training	<u>Sites:</u> 2 community-based organizations (FY07) <u>Number:</u> 258 families (FY07)
22	Safe from the Start ** Also listed as a Systems Development Initiative	Illinois Violence Prevention Authority Phone: (312) 814-2796	To develop, implement, and evaluate comprehensive and coordinated community-based models to identify, assess and respond to children ages 0-5 who have been exposed to violence	<u>Sites:</u> 10 sites housed by community-based organizations in Peoria County, Madison County, Northwest Cook County (Hoffman Estates Schaumburg, Hanover Park, and Streamwood), Macon County, McLean county, Rock Island County and South Suburban Cook County, and Cook County (Englewood and Pullman)
23	Targeted Intensive Prenatal Case Management	Illinois Department of Human Services, Bureau of Maternal and Infant Health Phone: (312) 793-8234	To provide case management services to high risk pregnant women	<u>Sites:</u> 14 agencies (FY07) <u>Number:</u> 4,208 pregnant women (FY07)
24	Teen Parent Services (TPS)	Illinois Department of Human Services, Bureau of Child and Adolescent Health Phone: (217) 785-0462	To help low income parents under age 21 to become self-sufficient by completing school or its equivalent, postponing a subsequent birth, and for the teen to be connected to medical and social services	<u>Sites:</u> Available statewide through: <ul style="list-style-type: none"> 88 local health departments, community-based organizations and community colleges 2 DHS staffed offices <u>Number:</u> 9,974 families (FY08)
25	WIC (Special Supplemental Nutrition Program for Women, Infants and Children)	Illinois Department of Human Services, Bureau of Family Nutrition Phone: (217) 782-2166	To reduce the incidence of infant mortality, low birth weight and nutrition-related problems to ensure the proper growth and development of children to age 5	<u>Sites:</u> 220 sites (primarily local health departments or community-based organizations) statewide, including 73 sites, stations and Neighborhood Health Centers in Chicago <u>Number:</u> 289,000 women, infants, and children (FY08)

Systems Development Initiatives

#	Program	Administering Agency	Purpose	Sites and Number Served (see individual profile for more details)
1	All Our Kids: Early Childhood Network	Illinois Department of Human Services, Division of Community Health and Prevention Phone: (217) 793-8807	To develop a high-quality, well-coordinated, easily accessible system of care at the local level that will promote positive development of families with young children	<u>Sites:</u> 11 local health departments and one Regional Office of Education (FY06) The sites include: City of Chicago (North and South Lawndale, East and West Garfield Park), Cook County (Town of Cicero), Adams, Edwards, Kane, Macon, McLean, Rock Island, St. Clair, Stephenson, Tazewell, Vermillion, Wabash and Will counties
2	Child Care Resource and Referral (CCR&R)	Illinois Department of Human Services, Bureau of Child Care and Development Phone: (217) 785-2559 Illinois Network of Child Care Resource and Referral Agencies Phone: (309) 829-5327 or (800) 649-1884	To provide parents with child care referrals, deliver training and assistance to providers, develop new child care resources where needed, and support community capacity building	<u>Sites:</u> 16 contracted agencies statewide, with community partner sites in Cook County (FY08)
3	Healthy Child Care Illinois	Illinois Department of Human Services, Division of Community Health and Prevention, Bureau of Maternal and Infant Mental Health Phone: (217) 782-9923	To improve the health status and well-being of children in child care by enhancing coordination and collaboration between health care providers and the child care system	<u>Sites:</u> 26 IDHS Child Care Nurse Consultants in 16 service delivery areas (FY07)
4	IDHS Automated Office Locator for WIC and Early Intervention Programs	Illinois Department of Human Services Office of Compliance, Access & Workplace Safety Phone: (800) 323-GROW (helpline) or (217) 557-3776	To provide referrals for children and families to programs and services	<u>Sites:</u> All phone calls received by Illinois Department of Human Services in Springfield from entire state
5	Local Interagency Councils (LICs)	Illinois Department of Human Services, Bureau of Early Intervention Phone: (217) 782-1981	To identify children 0-3 in need of Early Intervention services, identify and improve Early Intervention services within the community, and make services more accessible to families	<u>Sites:</u> 44 LICs
6	Safe from the Start ** Also listed under Programs & Services	Illinois Violence Prevention Authority Phone: (312) 814-2796	To develop, implement, and evaluate comprehensive and coordinated community-based models to identify, assess and respond to children ages 0-5 who have been exposed to violence	<u>Sites:</u> 10 sites housed by community-based organizations in Peoria County, Madison County, Northwest Cook County (Hoffman Estates Schaumburg, Hanover Park, and Streamwood), Macon County, McLean county, Rock Island County and South Suburban Cook County, and Cook County (Englewood and Pullman)

Profiles of Programs and Services

All Kids and Family Care

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> All Kids, the Medicaid and State Children’s Health Insurance Program, offers health care coverage to children, pregnant women, and low-income and moderate-income parents, and creates a sliding scale of premiums and co-payments based on household income. All Kids provides comprehensive insurance for all children in Illinois. All Kids includes four plans with varying cost sharing based on income: All Kids Assist, All Kids Share, All Kids Premium and All Kids Rebate.</p>
KEY SERVICES	<p>Health benefits and private insurance premium assistance for:</p> <ul style="list-style-type: none"> • <u>Children:</u> Primary care by physician or nurse, immunizations and preventive care, hospital and clinic care, laboratory tests and x-rays, prescription drugs, medical equipment and supplies, medical transportation, dental care, eye care, psychiatric care, podiatry, chiropractic care, physical therapy, mental health, and substance abuse • <u>Pregnant women:</u> Prenatal care and other medical services
ADMINISTERING AGENCY	<p>Illinois Department of Healthcare and Family Services Phone: (800) 226-0768 (866) 4 OUR KIDS (468-7543) TTY: (877) 204-1012</p>
BUDGET	<p>\$90,000,000 (FY06)</p>
FUNDING SOURCES	<p>Federal: 50-65% State: 35-50%</p>
ELIGIBILITY CRITERIA	<ul style="list-style-type: none"> • All Kids covers children in families with income up to 200 percent of poverty regardless of other insurance coverage. Children in families above 200 percent of poverty must be uninsured to qualify. • All Kids Moms and Babies covers pregnant women and their infants up to 200 percent of poverty regardless of assets. • Family Care covers parents or caretaker relatives of children with income up to 185 percent of poverty regardless of assets.
GEOGRAPHIC AREAS SERVED	<p>Statewide</p>
PROGRAM CAPACITY: • Number served	<ul style="list-style-type: none"> • Over 1.3 million children are served in Kid Care (FY07) • 263,000 parents (FY03)
OUTREACH/ IDENTIFICATION METHODS	<ul style="list-style-type: none"> • IDPA is mandated to work with community groups to conduct outreach and enrollment activities • The state has formed partnerships with the City of Chicago, public libraries, schools, businesses, health care providers, and churches to educate communities about Kid Care
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>N/A</p>
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS	<p>Number enrolled</p>

*Current information is not available for this program

Child Care
(Illinois Department of Human Services)

<p>PROGRAM DESCRIPTION AND GOALS</p>	<p><u>Description:</u> The Illinois Department of Human Services Child Care program helps families achieve self-sufficiency by providing low-income families access to affordable, quality child care while they are working or participating in approved education/training activities.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • To ensure that children are cared for in a safe, healthy environment that supports their overall development • To prepare children for success in school • To support parents' self-sufficiency through employment
<p>KEY SERVICES</p>	<ul style="list-style-type: none"> • Child care subsidies • Information and resources about care in the community • Wage stipends to child care workers who remain in their jobs and have an education beyond licensing standards (Great START) • Technical assistance and training to providers, with a focus on health and safety issues for children
<p>ADMINISTERING AGENCY</p>	<p>Illinois Department of Human Services Bureau of Child Care and Development Phone: (217) 785-2559</p>
<p>BUDGET</p>	<p>\$733,741,300 (birth to age 12) (FY08)</p>
<p>FUNDING SOURCES</p>	<p>Federal CCDF and Title XX: 46% (FY07) State GRF: 54% (FY07)</p>
<p>ELIGIBILITY CRITERIA</p>	<ul style="list-style-type: none"> • Children 6 weeks old up to 13 years of age • Children 13 to 20 years of age who are under court supervision or who are incapable of self-care due to physical or mental disabilities or delays as documented by a statement from a local health provider or other health professional • Teen parents up to 20 years of age to enable them to obtain a high school degree or its equivalent (income eligibility based on the income of the teen if he/she is a single parent) • Families on TANF (if included in an approved Responsibility and Services Plan) • Working families with incomes at or below 200% Federal Poverty Level (FPL). Generally, there is no minimum number of hours a parent must be working • Families <u>not</u> on TANF but enrolled in any of the following education or training programs: <ul style="list-style-type: none"> • Literacy, adult basic education, GED preparation, English as a Second Language (ESL) and vocational programs – parents can attend for up to 2 years with no work requirement; thereafter there is a 20 hour per week work requirement • Two-and-four-year college degree programs – parents must work at least 10 hours per week. The work requirement can be satisfied with 20 hours per week of unpaid work required by the educational program. Parents are expected to maintain a minimum grade point average of 2.0 on a scale of 4.0 points

<p>PROGRAM CAPACITY:</p> <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • Estimated 49,841 children ages 0-3 served monthly (does not include core services program) (FY08) • Approximately 172,852 children served monthly (birth to age 12) (FY08) • Approximately 3,358 centers, 6,344 homes, 27,796 FFN (FY08)
<p>GEOGRAPHIC AREAS SERVED</p>	<p>Statewide</p>
<p>OUTREACH/ IDENTIFICATION METHODS</p>	<p>16 Child Care Resource and Referral (CCR&R) sites assist parents in locating and using available child care resources</p>
<p>STAFF EDUCATION AND/OR TRAINING REQUIREMENTS</p>	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Varies by facility and licensing requirements <p>Training Requirements:</p> <ul style="list-style-type: none"> • Child Care Resource and Referral (CCR&R) agencies train some child care staff and parents and provide scholarships for staff to participate in education and training provided by other institutions and organizations
<p>KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF OUTCOME GOALS</p>	<ul style="list-style-type: none"> • Number of children served • Number of TANF families who leave assistance due to supported child care assistance • Number of families accessing child care resource and referral services • Number of child care workers who qualify for wage stipends • Number of technical assistance visits, consultations, and training sessions provided for each provider by CCR&R
<p>EVALUATION METHODS</p>	<p>Uses child care tracking system, developed within the Illinois Department of Human Services. The system captures data for federal reporting and is also used to generate management reports.</p>

Child Care (Illinois Department of Children and Family Services)

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> The Illinois Department of Children and Family Services (DCFS) provides a variety of child care services and/or subsidies to children within the DCFS system.</p> <p><u>Goal:</u> To provide child care for children served by DCFS</p>
KEY SERVICES	<ul style="list-style-type: none"> • Child care subsidies for foster children • Specialized centers and home networks to serve high risk infants, children with parents in drug treatment, HIV-related children, and children in need of therapeutic child care • Special Needs Day Care for children whose parents are substantially disabled and unable to care for their children without supplemental child care • Teen Parent Day Care for children of DCFS teen wards who are employed or in school • Protective/Family Maintenance Day Care for families where actual or potential child abuse or neglect has been identified
ADMINISTERING AGENCY	<p>Illinois Department of Children and Family Services Office of Child Development Phone: (312) 808-5060 (Cook County) (309) 693-5400 (Central Region) (630) 801-3400 (Northern Region) (618) 583-2100 (Southern Region)</p>
BUDGET	<p><u>Foster Care Day Care:</u> \$8.2 million (FY07) <u>Adoption Assistance/Subsidized Guardianship Day Care (birth to three):</u> \$770,000 (FY07)</p>
ELIGIBILITY CRITERIA	<p><u>Foster Care Day Care:</u> Children in foster care whose foster parents are working or in education or training</p> <p><u>Protective/Family Maintenance Day Care:</u> Indicated case of abuse/neglect</p> <ul style="list-style-type: none"> • <u>Specialized Day Care:</u> DCFS children and other high risk children and families. Services include: specialized centers and specialized home networks serving high risk infants, children with parents in drug treatment, HIV-related children, and children in need of therapeutic child care • <u>Special Needs Day Care:</u> Children whose parents are substantially disabled and unable to care for their children without supplemental child care, or who are otherwise in critical need of child care to prevent the institutionalization of a child. Not available to families with an employed parent and/or only temporarily disabled • <u>Teen Parent Day Care:</u> Children of DCFS teen wards who are in school or employed <p><u>Adoption Assistance/Subsidized Guardianship Day Care:</u> Children under 3 years of age who have been adopted with adoption assistance or are in subsidized guardianship where the adoptive parent or guardian is working or in education or training</p> <p><u>Post Adoption Therapeutic Day Care:</u> Children adopted with adoption assistance requiring intensive treatment day care for physical, mental, or emotional disabilities</p>
PROGRAM CAPACITY: <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • Approximately 1,800 children, primarily through vouchers (FY07) • 1 site-administered child care program which sub-contracts with 71 child care agencies throughout the city of Chicago for child care services through vouchers (FY07)

GEOGRAPHIC AREAS SERVED	Statewide
OUTREACH/ IDENTIFICATION METHODS	17 Child Care Resource and Referral Agencies (CCR&Rs) assist parents/foster parents in locating and using available child care resources
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Varies by facility and licensing requirements <p>Training Requirements:</p> <ul style="list-style-type: none"> • DCFS allocates funds to some of its contracted sites serving higher risk populations to train staff in working with these families (e.g. parents in drug treatment)
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF OUTCOME GOALS	N/A

Early Childhood Education Block Grant

<p>PROGRAM DESCRIPTION AND GOALS</p>	<p><u>Description:</u> The Early Childhood Education Block Grant combines three early childhood education programs: Preschool for All programs, serving three, four, and five year old children (Pre-K); Parental Training; and the Birth to Three Set-aside. All programs are operated by local school districts or community-based agencies. At least 11% of the total block grant is required to support programs for children ages birth to three.</p> <p>Preschool for All (PreKindergarten) programs offer services to all three, four, and five year old children in Illinois. If there are more programs applying for Preschool for All funding than there are dollars in the budget, programs serving primarily at-risk children will be given first priority, followed by programs serving primarily children below a set income level.</p> <p>Birth to Three programs offer coordinated services to high-risk children birth to three and their families.</p> <p>Parental Training programs provide parenting education and support for any families with children from birth to five.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • To prevent later academic failure by providing quality programs for children from birth to age five and their families • To strengthen the role of parents as their child's primary educators
<p>KEY SERVICES</p>	<p>PreKindergarten, Birth to Three, and Parental Training programs incorporate the following components:</p> <p><u>Preschool for All/PreKindergarten:</u></p> <ul style="list-style-type: none"> • Intensive language and literacy development based on the child's individual assessment • Curriculum addresses the domains of visual-motor, language and speech development, fine and gross motor development, social skills and cognitive development • Ongoing student progress plan developed and shared with parents • Parent education and involvement • Collaboration with other services and resources available in the community <p><u>Birth to Three Set-aside:</u></p> <ul style="list-style-type: none"> • Parenting education and parent-child interaction activities related to development and nurturing of infants and toddlers • Community collaboration and linkages • Individual family service plans • Case management services • Center-based infant-toddler child care modeled on Early Head Start <p><u>Parental Training:</u> (no longer receives new funding)</p> <ul style="list-style-type: none"> • Seven designated areas of instruction (child growth and development, childbirth and child care, family structure, prenatal and postnatal care, prevention of child abuse, interpersonal relationships, and parenting skill development) • Parent-child interaction activities • Community collaboration
<p>ADMINISTERING AGENCY</p>	<p>Illinois State Board of Education Division of Early Childhood Phone: (217) 524-4835</p>

BUDGET	<ul style="list-style-type: none"> • ECBG Total: \$380,261,400 (FY09) • \$41,828,754 funds programs for children birth to age three (11% of the total budget)
FUNDING SOURCES	State: 100%
ELIGIBILITY CRITERIA	<ul style="list-style-type: none"> • Currently targets children who are at-risk and children whose families make up to 400% the Federal Poverty Level, with the goal of reaching all three- and four-year-olds whose parents choose to participate. • At-risk communities (Birth to Three Set-aside) • Universal (Parental Training)
PROGRAM CAPACITY: <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<p>Preschool for All/PreKindergarten:</p> <ul style="list-style-type: none"> • Approximately 86,000 children served, including Chicago (FY07) • 622 Preschool for All/PreKindergarten programs (FY07) <p>Birth to Three Set-aside:</p> <ul style="list-style-type: none"> • 115 Prevention Initiative programs (FY07) • 16,352 children served (FY07) <p>Parental Training:</p> <ul style="list-style-type: none"> • 204 Parental Training programs (FY07) • 29,066 children served (FY07)
GEOGRAPHIC AREAS SERVED	<p><u>Chicago</u>: Albany Park, Armour Square, Auburn Gresham, Austin, Bridgeport, Englewood, Grand Boulevard, Humboldt Park, Lower West Side, North Lawndale, Rogers Park, South Chicago, South Lawndale, Washington Heights, West Englewood, West Town (some programs have no geographic boundaries and/or serve additional families from other communities)</p> <p><u>Suburban Cook County</u>: Alsip, Arbor Park, Arlington Heights, Bellwood, Blue Island, Bridgeview, Brookfield, Burnham, Calumet City, Calumet Park, Chicago Heights, Cicero, Countryside, Crestwood, Des Plaines, Dixmoor, Dolton, Elk Grove, Elmwood Park, Evanston, Ford Heights, Forest Ridge, Franklin Park, Glencoe, Glenview, Harvey, Highland Park, Hickory Hills, Hodgkins, Hoffman Estates, Homewood, Justice, Lansing, La Grange, Lincolnwood, Lyons, Matteson, Maywood, Melrose Park, Midlothian, Morton Grove, Niles, Northbrook, Northlake, North Palos, Oak Forest, Oak Park, Palos Heights, Park Forest, Riverdale, River Forest, River Grove, Rolling Meadows, Roselle, Rosemont, Sauk Village, Schaumburg, Schiller Park, Skokie, South Berwyn, South Holland, Steger, Stickney, Stone Park, Streamwood, Tinley Park, Wheeling, Wilmette, Worth</p> <p><u>Counties</u>: Adams, Alexander, Bond, Boone, Bureau, Calhoun, Carroll, Cass, Champaign, Christian, Clay, Clinton, Coles, Crawford, DeKalb, DeWitt, DuPage, Edgar, Effingham, Fayette, Greene, Grundy, Hamilton, Hancock, Henderson, Henry, Iroquois, Jackson, Jasper, Jefferson, Jersey, JoDaviess, Kane, Kankakee, Kendall, Knox, Lake, LaSalle, Lawrence, Livingston, Logan, Macon, Macoupin, Madison, McDonough, McHenry, McLean, Mercer, Monroe, Montgomery, Morgan, Ogle, Peoria, Pike, Pulaski, Randolph, Richland, Rock Island, Saline, Sangamon, Shelby, St. Clair, Tazewell, Union, Vermilion, Wabash, Warren, Washington, Wayne, White, Whiteside, Will, Winnebago, Woodford</p>
OUTREACH/ IDENTIFICATION METHODS	Varies by program

<p>STAFF EDUCATION AND/OR TRAINING REQUIREMENTS</p>	<p>Education Requirements:</p> <ul style="list-style-type: none"> • While there are no minimum educational requirements for staff working with the 0-3 population, the Early Learning Council advises that all infant toddler head teachers hold an Associate’s degree in Child Development (CD) or Early Childhood Education (ECE) or the equivalent by 2010. • In the prekindergarten at-risk initiative, all teaching staff must hold either an Initial or Standard Early Childhood Certificate. Teaching aides must have 30 hours of college courses in early childhood education. <p>Training Requirements:</p> <ul style="list-style-type: none"> • Staff receive ongoing professional development opportunities through the Illinois Comprehensive Staff Development Program. Regional training and workshops are held on topics that have been identified by program staff. Follow-up training and activities are also available. • An early childhood track has been added to the Administrators Academy to provide information on early childhood development education for children from birth to age 8 and their families • Technical assistance, support, and follow-up are provided to programs by the Illinois State Board of Education (ISBE) educational consultants • Birth to Three programs receive training through the Ounce of Prevention Fund’s Illinois Birth to Three Institute
<p>KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF OUTCOME GOALS</p>	<ul style="list-style-type: none"> • Parent surveys • ISBE data collection forms for staff
<p>EVALUATION METHODS</p>	<ul style="list-style-type: none"> • Birth to Three Program Standards • Three to Five Early Learning Standards <p>Preschool for All Birth to Five evaluation will begin data collection in FY09 (ISBE funded; Principal Investigator Erikson Institute)</p>

Early Childhood Special Education Services (Part B)

<p>PROGRAM DESCRIPTION AND GOALS</p>	<p><u>Description:</u> Early Childhood Special Education services for children ages three to five are part of the special education continuum as operated by the public schools of Illinois. Special Education services are provided for children ages three through twenty-one with an educationally related disability, or developmental delay for children three to five (Part B of the Individuals with Disabilities Education Act). Local school districts evaluate children to determine eligibility and if eligible, create an Individual Education Plan (IEP) to identify special education and related services.</p> <p><u>Goal:</u> Ensure that children with disabilities receive a free and appropriate public education.</p>
<p>KEY SERVICES</p>	<p>Services provided are individually determined based on child’s needs but may include:</p> <ul style="list-style-type: none"> • Assistive technology (durable medical equipment and supplies) • Audiology, aural rehabilitation, and other related services • Occupational therapy • Physical therapy • Psychological and other counseling services • Speech/language therapy • Transportation • Vision services • Parent counseling and training
<p>ADMINISTERING AGENCY</p>	<p>Illinois State Board of Education Division of Early Childhood Phone: (217) 524-4835</p>
<p>BUDGET</p>	<p>\$25 million specifically for children 3-5 (supplemented by other federal, state, and local funds)</p>
<p>FUNDING SOURCES</p>	<p>Varies by district; combination of federal, state, and local funds</p>
<p>ELIGIBILITY CRITERIA</p>	<p>Children three to five years of age who meet IDEA and state requirements for developmental delay and/or diagnosed conditions that are educationally related and require special education and related services.</p>
<p>PROGRAM CAPACITY:</p> <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • 37,137 children served (FY07) • Entitlement program: School districts are mandated to serve all eligible children
<p>GEOGRAPHIC AREAS SERVED</p>	<p>Available and serving children in all school districts</p>

STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Bachelor's degree, and • Type 04 early childhood certificate with ECSE approval or LBS I special education with ECSE approval <p>Training Requirements:</p> <ul style="list-style-type: none"> • Certificate Renewal Plans, including 120 Continuing Professional Development Units
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS	<ul style="list-style-type: none"> • Individual goals are measured by IEP team • Early Childhood Outcomes System
EVALUATION METHODS	<p>Local determination</p>
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>N/A</p>
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS	<p>Number enrolled</p>

Early Head Start

<p>PROGRAM DESCRIPTION AND GOALS</p>	<p><u>Description:</u> The Early Head Start (EHS) program was created as part of the reauthorization of the federal Head Start Act in 1994. EHS is a comprehensive child development program that aims to improve the growth and development of children before they transition to Head Start by providing early, continuous, intensive, and comprehensive child development and family support services on a year-round basis for children birth to three. Programs follow a variety of models including center-based, home-based, and combination models.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • Support and enhance the continuum of infant and toddler growth and development, including cognitive, social, emotional, and physical development • Support parents as they identify and meet their own goals and fulfill their parental roles, nurture the development of their child, and advocate for communities that are supportive of children and families of all cultures • Collaborate with partners in the communities to foster the development of a comprehensive system of family-centered services attuned to the complex and diverse needs of children and families • Help parents move toward self-sufficiency
<p>KEY SERVICES</p>	<p>Center-based, home-based, and combination models provide the following services:</p> <ul style="list-style-type: none"> • Address all areas of development (e.g. social, emotional, physical, cognitive, language) • Social service linkages (e.g. housing, food, mental health services, TANF) • Fatherhood support services • Medical, dental, and mental health services • Nutrition • Parent education and involvement • Family support • Community collaboration • Services to expectant women • Children with disabilities and their families are fully included in all services and components of Early Head Start.
<p>ADMINISTERING AGENCY</p>	<p>U.S. Department of Health and Human Services Administration for Children and Families Office of Head Start, Chicago Office Phone: (312) 353-4237</p>
<p>BUDGET</p>	<p>\$ 23,871,227 (Federal Fiscal Year 2008)</p>
<p>FUNDING SOURCES</p>	<p>Federal</p>
<p>ELIGIBILITY CRITERIA</p>	<p>Pregnant women and families with children under 3 years of age, if:</p> <ul style="list-style-type: none"> • family income is below the federal poverty level, or • in the absence of child care, family would potentially be eligible for public assistance, or • family is homeless.

<p>PROGRAM CAPACITY:</p> <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • 2,699 families were enrolled in Early Head Start statewide (Federal Fiscal Year 2008) • 24 EHS grantees in Illinois serving 34 counties and 33 community areas in Chicago (Federal Fiscal Year 2008)
<p>GEOGRAPHIC AREAS SERVED</p>	<p><u>Chicago:</u> Albany Park, Armour Square, Austin, Chatham, Douglas, Englewood, Fuller Park, Gage Park, Garfield Park, Grand Boulevard, Humboldt Park, Kenwood, Logan Square, Lower West Side, Near North Side, Near South Side, Near West Side, New City, North Lawndale, Oakland, Rogers Park, Roseland, South Chicago, South Deering, South Lawndale, Uptown, Washington Heights, Washington Park, West Englewood, West Pullman, West Ridge, West Town, Woodlawn</p> <p><u>Suburban Cook County:</u> Bellwood, Berwyn, Cicero, Evanston, Maywood, Robbins</p> <p><u>Counties:</u> Alexander, Champaign, Clinton, Cook, DuPage (Bensenville, Lombard, West Chicago, Wheaton, Villa Park), Edwards, Ford, Franklin, Gallatin, Hamilton, Hancock, Hardin, Iroquois, Johnson, Kane, Lake (Waukegan), Madison, Massac, McDonough, Peoria, Pike, Pope, Pulaski, St. Clair, Saline, Sangamon, Union, Vermillion, Wabash, Washington, Wayne, White, Will, Williamson</p>
<p>OUTREACH/ IDENTIFICATION METHODS</p>	<p>Varies by program. For more information, visit Head Start’s Early Childhood Learning and Knowledge Center (ECLKC) at www.eclkc.ohs.acf.hhs.gov.</p>
<p>STAFF EDUCATION AND/OR TRAINING REQUIREMENTS</p>	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Varies by program option: Early Head Start center-based staff currently need a minimum of an Infant/Toddler Child Development Associate (CDA) certificate within one year of employment and experience working with infants and toddlers <p>Training Requirements:</p> <ul style="list-style-type: none"> • Each program provides an orientation and a variety of in-service trainings for staff. Staff learn EHS’s philosophy and goals and acquire skills specific to their job duties.
<p>KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF OUTCOME GOALS</p>	<p>To be determined at the national level</p>
<p>EVALUATION METHOD</p>	<ul style="list-style-type: none"> • Early Head Start Research and Evaluation Project (EHSRE), 1996–Current • Survey of Early Head Start Programs, 2003-2008 <p><i>Note: Further information is available from the Office of Planning, Research and Evaluation (OPRE) - Early Head Start through the ECLKC link above.</i></p>

Early Intervention (EI)

<p>PROGRAM DESCRIPTION AND GOALS</p>	<p><u>Description:</u> The Early Intervention (Part C of the Individuals with Disabilities Education Act) system provides coordinated, comprehensive, multidisciplinary, social and developmental services to children under the age of three who have a developmental delay or disability or who are at risk of a delay. Children and families can receive up to sixteen services in their home or community.</p> <p>Child and Family Connections (CFC) sites are the system points of entry for state-provided Early Intervention services. CFC coordinators assist families in obtaining screenings and evaluations to determine eligibility for EI, assess service needs of eligible children, plan for needed services, and choose credentialed providers.</p> <p><u>Goal:</u> To enhance the growth and development of children from birth to three years of age with disabilities and/or developmental delays or who are at risk for developmental delays.</p>
<p>KEY SERVICES</p>	<ul style="list-style-type: none"> • Assistive technology (durable medical equipment and supplies) • Audiology, aural rehabilitation and other related services • Developmental therapy • Family training and support • Health services • Medical services (diagnostic/evaluation purposes only) • Nursing services • Nutrition services • Occupational therapy • Physical therapy • Psychological and other counseling services • Service coordination • Social work and other counseling services • Speech/language therapy • Transportation • Vision services
<p>ADMINISTERING AGENCY</p>	<p>Illinois Department of Human Services Bureau of Early Intervention Phone: (217) 782-1981</p>
<p>BUDGET</p>	<p>\$137,000,000 (FY08)</p>
<p>ELIGIBILITY CRITERIA</p>	<ul style="list-style-type: none"> • Children birth to three years of age who have a measurable developmental delay of 30% below age-appropriate standards in one or more developmental areas • Children birth to three years of age who have a physical or mental condition which typically results in developmental delay • Children birth to three years of age who are at risk of having substantial developmental delays based on the informed clinical judgment of a multidisciplinary team, including parents
<p>PROGRAM CAPACITY:</p> <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • Approximately 21,000 families (FY08) • 25 Child and Family Connections sites (FY08) • Approximately 4,500 providers (FY08)

GEOGRAPHIC AREAS SERVED	Statewide
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Consistent with state-approved or recognized certification, licensure, registration, or other comparable requirements which apply to the discipline and area in which staff are providing Early Intervention services • At enrollment/credentialing or within 6 months, staff must document participation in a systems overview workshop and completion of 240 hours of supervised professional experience <p>Training Requirements:</p> <ul style="list-style-type: none"> • Individuals become fully credentialed and maintain their credential through ongoing professional development and continuing professional education that is specific to the special needs of infants, toddlers, and their families • The Illinois Early Intervention Training Program, IDHS, and other professional development initiatives collaborate to offer a full menu of continuing professional education opportunities for Early Intervention providers
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS	<p>A system of performance-contracting with the Child and Family Connections (CFC) offices has resulted in progress towards meeting target values for performance indicators identified in Illinois' State Performance Plan (SPP). Beginning in state fiscal year 2005, nine performance measures have been used to establish incentive payments, with payments made to CFC offices that fall in the top 12 for each measure. Basic minimum performance standards are established on four measures that may result in a penalty adjustment if basic performance is not met.</p> <p>As part of Illinois' SPP, processes have been established to measure child and family outcomes. The Office of Special Education Programs has identified three areas they feel are critical to young children's success. Each child enrolled in the Early Intervention Program will have his or her progress in these areas assessed through the use of child outcomes. Child outcome ratings reflect the extent to which the child displays behaviors and skills expected for his or her age. The Individual Family Services Plan (IFSP) team will complete these ratings at the initial and annual IFSP meetings and before the child exits the program. Family outcomes are benefits a family experiences as a result of services and supports that it receives. Family outcomes will be measured using a family survey tool.</p>
EVALUATION METHODS	<p>Progress toward target values for performance indicators is tracked at the client level through the Cornerstone management information system.</p> <p>In addition, the Early Intervention Monitoring Program:</p> <ul style="list-style-type: none"> • Ensures that state and federal regulations regarding the delivery of Early Intervention services to infants and toddlers under the age of three are met. These areas include the provision of direct services, billing, and documentation. • Monitors service delivery and compliance of statewide Child and Family Connections (CFC) offices and credentialed/enrolled service providers • Assists families, CFC offices, and Early Intervention service providers to address issues and resolve conflicts prior to initiation of the formal complaint process through DHS directly • Safeguards the rights of families to receive appropriate services and supports

Family Case Management

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> IDHS contracts with local health departments, community-based agencies, and federally-funded community health centers to provide outreach and case management services. Case managers focus on clients' problems with access to and utilization of medically-related services.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • To assist pregnant women and women with infants in finding an ongoing source of medical care and related services • To assist families in achieving self-sufficiency, independence, and health by early adequate prenatal and routine well-baby care
KEY SERVICES	<ul style="list-style-type: none"> • Access to medical care • Outreach and case management • Referrals • Education • Identify and resolve barriers to accessing needed services • Home visits (at least one during pregnancy or infancy)
ADMINISTERING AGENCY	<p>Illinois Department of Human Services Division of Community Health and Prevention Bureau of Maternal and Infant Health Phone: (217) 524-3319</p>
BUDGET	<p>\$42,783,442 (FY07)</p>
FUNDING SOURCES	<p>State GRF: \$41,091,453 (96%) Fed. MCH Block: \$1,691,989 (4%)</p>
ELIGIBILITY CRITERIA	<ul style="list-style-type: none"> • Medicaid-eligible pregnant women and infants living under 200% of the federal poverty level • Medicaid-eligible children one year and older living under 185% of the federal poverty level • Pregnant women and children with a high-risk medical condition
GEOGRAPHIC AREAS SERVED	<p>Statewide</p>
PROGRAM CAPACITY <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • 345,769 children and families (FY07) • 113 sites (FY07)
OUTREACH/ IDENTIFICATION METHODS	<p>Identification of individuals who may qualify for Medicaid or All Kids services is a high priority. Although outreach varies by community, based on the population served (e.g. age, language, culture), methods include advertising, door-to-door canvassing, and providing information to local churches and community groups.</p>

<p>STAFF EDUCATION AND/OR TRAINING REQUIREMENTS</p>	<p>Education Requirements:</p> <ul style="list-style-type: none"> • <u>Case Managers</u>: The minimum educational requirement is an Associate’s degree and two years of experience in child, family, or community services. Case managers meeting only this requirement must be supervised by a more experienced case manager possessing a Master’s or Bachelor’s degree in behavioral science, social science, or a health-related area. • <u>Case Manager Assistants</u>: Paraprofessionals and lay workers perform some case management functions under the supervision of a case manager. These functions are limited to intake, follow-up, and provision of support and assistance that participants may require to access services.
<p>KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS</p>	<ul style="list-style-type: none"> • Low birth weight • Infant mortality • Breastfeeding initiation rates • Entry into WIC in first trimester • Proportion of children with health insurance/All Kids enrolled • Percentage of Medicaid-eligible women and infants enrolled in WIC and Family Case Management • Adequate prenatal care -- 1st trimester entry • EPSDT participation rate • Immunization status at 12 and 24 months
<p>EVALUATION METHODS</p>	<ul style="list-style-type: none"> • The administration of Family Case Management is evaluated by Community Support Service Consultants • Nursing/performance standards are evaluated by Maternal and Child Health Nurses at IDHS • Birth outcomes for case management clients are evaluated through Vital Records • Performance outcome indicators

Genetics/Newborn Screening Program

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> State screening and clinical services program designed to prevent excess morbidity, premature death, mental retardation, and other developmental disabilities.</p> <p><u>Goals:</u></p> <p><u>Newborn Screening:</u> To enhance the quality of life for all newborns and their families and to facilitate early diagnosis to help prevent premature death, excessive morbidity, mental retardation, and other developmental disabilities.</p> <p><u>Clinical Genetics/Genetic Counseling:</u> To increase the awareness and availability of clinical genetic services to providers and families.</p>
KEY SERVICES	<p><u>Newborn Screening:</u></p> <ul style="list-style-type: none"> • Screens newborns for 37 metabolic/genetic disorders • Provides referrals and follow-up services for infants with an abnormal test <p><u>Clinical Genetics/Genetic Counseling:</u></p> <ul style="list-style-type: none"> • Local health departments provide case-finding and referral of families to clinical genetic centers which provide diagnosis and genetic counseling
ADMINISTERING AGENCY	<p>Illinois Department of Public Health Office of Health Promotion Phone: (217) 785-8101</p>
BUDGET	<p>\$6,500,000 (FY07)</p>
FUNDING SOURCES	<p>Metabolic Screening Fee</p>
ELIGIBILITY CRITERIA	<p><u>Newborn Screening:</u> By Illinois state law, every newborn is screened 24 hours after birth or before discharge for various metabolic/genetic disorders.</p> <p><u>Clinical Genetics/Genetic Counseling:</u> The full range of genetic diagnostic, counseling and treatment services is available statewide to all Illinois residents as appropriate, regardless of income.</p>
PROGRAM CAPACITY <ul style="list-style-type: none"> • Number served • Number of programs/sites 	<p><u>Newborn Screening:</u></p> <ul style="list-style-type: none"> • Approximately 185,000 samples from babies born in Illinois were screened (FY07) • Over 12,000 infants received follow-up services (FY07) • Approximately 350 infants per year are diagnosed with disorders identified through newborn screening and placed on treatment <p><u>Clinical Genetics/Genetic Counseling:</u></p> <ul style="list-style-type: none"> • 9,400 families received clinical genetic services (FY07) • 4,000 clients received services through local public health departments and 25,000 were screened for family history/risk factors (FY07)
GEOGRAPHIC AREAS SERVED	<p>Statewide</p>

<p>OUTREACH/ IDENTIFICATION METHODS</p>	<p><u>Newborn Screening</u>: All newborns are screened for over 37 genetic/metabolic disorders 24 hours after birth or before discharge. The blood samples are then sent to the Illinois Department of Public Health to be tested.</p> <p><u>Clinical Genetics/Genetic Counseling</u>: The Genetic Screening Tool is used for assessing clients for the need to refer to a genetic specialist when a diagnosis can be made.</p> <p>Referrals are also made by staff from programs targeting children (e.g. Family Case Management, High-Risk Infant Follow-Up, pediatric primary care, Early Intervention, WIC, Immunization, Oral Health, and Hearing and Vision Screening).</p>
<p>STAFF EDUCATION AND/OR TRAINING REQUIREMENTS</p>	<p>N/A</p>
<p>KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS</p>	<ul style="list-style-type: none"> • Number of infants screened/diagnosed through newborn screening • Developmental progress of children who were diagnosed with a developmental disability through age 15 • Statewide accessibility to clinical genetic services
<p>EVALUATION METHODS</p>	<ul style="list-style-type: none"> • The Newborn Screening Program process and outcomes for individual children are assessed annually • Performance of providers (clinical genetic centers and local public health departments) is measured on a quarterly basis, based on fulfillment of project goals and objectives

Head Start

<p>PROGRAM DESCRIPTION AND GOALS</p>	<p><u>Description:</u> The Head Start program was created in 1965 to help break the cycle of poverty and promote school readiness by providing preschool children of low-income families with a comprehensive program to meet their educational, health, nutritional, and social needs. The programs provide services for eligible children ages 3 to 5. The program is administered locally by community-based non-profit organizations, school systems, and other social service agencies.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • Support the continuum of children’s growth and development, including cognitive, social, emotional, and physical development • Support parents as they identify and meet their own goals, nurture the development of their child, and advocate for communities that are supportive of children and families of all cultures • Collaborate with partners in the communities to foster the development of a comprehensive system of family-centered services attuned to the complex and diverse needs of children and families
<p>KEY SERVICES</p>	<ul style="list-style-type: none"> • Comprehensive early education addressing all areas of development (e.g. social, emotional, physical, cognitive, language) • Medical, dental, and mental health services • Nutrition • Parent education and involvement • Family support • Community collaboration • Children with disabilities and their families are fully included in all services and components of Head Start.
<p>ADMINISTERING AGENCY</p>	<p>U.S. Department of Health and Human Services Administration for Children and Families Office of Head Start, Chicago Office Phone: (312) 353-4237</p>
<p>BUDGET</p>	<p>\$246,726,975 (Federal Fiscal Year 2008)</p>
<p>FUNDING SOURCES</p>	<p>Federal</p>
<p>ELIGIBILITY CRITERIA</p>	<p>Children 3 to 5 years of age, if:</p> <ul style="list-style-type: none"> • family income is below the federal poverty level, or • in the absence of child care, family would potentially be eligible for public assistance, or • family is homeless.
<p>PROGRAM CAPACITY:</p> <ul style="list-style-type: none"> • Number served • Number of programs/sites 	<ul style="list-style-type: none"> • 36,398 families were enrolled in Head Start statewide (Federal Fiscal Year 2008) • 36 Head Start grantees in Illinois (Federal Fiscal Year 2008)
<p>GEOGRAPHIC AREAS SERVED</p>	<p>All counties in Illinois are served by Head Start</p>

OUTREACH/ IDENTIFICATION METHODS	<p>Varies by program. For more information, visit Head Start’s Early Childhood Learning and Knowledge Center (ECLKC) at www.eclkc.ohs.acf.hhs.gov.</p>
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>Education Requirements:</p> <ul style="list-style-type: none"> • At least 50% of Head Start teachers must have an Associate’s, Bachelor’s or advanced degree in Early Childhood Education or a degree in a related field, with preschool teaching experience, or • Teacher must have a Child Development Associate credential or a State-awarded certificate for preschool teachers that meets or exceeds the requirements of a CDA credential. • By October of 2011, all teachers must have a minimum of an Associate’s degree in Early Childhood Education or a degree in a related field, with preschool teaching experience. • By September of 2013, at least 50% of Head Start teachers must have a Bachelor’s or advanced degree in Early Childhood Education or Bachelor’s or advanced degree and coursework equivalent to a major related to early childhood education with experience teaching preschool. <p>Training Requirements: Each Head Start teacher must attend at least 15 hours of professional development per year. Each program provides a variety of in-service trainings for staff. Staff and volunteers learn Head Start’s philosophy and goals and acquire skills specific to their job duties. Trainings include:</p> <ul style="list-style-type: none"> • Child Abuse/Neglect Law Protocol • Classroom Management (discipline and guidance) • Health and Nutrition • Mental Health/Developmental Services • Disabilities • Site Risk Management • Family and Community Partnerships (transitions) • Emergency and Preventive Health Procedures (First Aid, CPR, OSHA, etc.)
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF OUTCOME GOALS	<p>Head Start Child Outcomes Framework comprised of 13 key domain elements/indicators in language, literacy, and numeracy</p>
EVALUATION METHOD	<ul style="list-style-type: none"> • Head Start Family and Child Experiences Survey (FACES), 1997-2010 • Head Start Impact Study and Follow-up, 2000-2009 <p><i>Note: Further information is available from the Office of Planning, Research and Evaluation (OPRE) - Head Start through the ECLKC link above.</i></p>

Healthy Families

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> Healthy Families is a voluntary, intensive home visiting program that reduces family isolation, supports parents as children’s first teachers and caretakers, and helps parents develop good parenting skills. Services are offered beginning prenatally or at birth and are weekly at the outset, with frequency of contact increasing or decreasing over time as family circumstances require. The program is modeled after the national, evidence-based Healthy Families America program.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • Decrease child abuse and neglect • Increase parent/child interaction <p>Promote healthy child development</p>
KEY SERVICES	<ul style="list-style-type: none"> • Weekly home visiting • Development of good parenting skills • Referral to necessary resources
ADMINISTERING AGENCY	<p>Illinois Department of Human Services Division of Community Health and Prevention Bureau of Child and Adolescent Health Phone: (217) 785-0462</p>
BUDGET	<p>\$13,925,500 (FY07)</p>
FUNDING SOURCES	<p>Funded entirely through state GRF</p>
ELIGIBILITY CRITERIA	<ul style="list-style-type: none"> • Families at risk of child abuse and neglect are identified during pregnancy or at time of birth through a structured assessment • Child less than 3 months of age
PROGRAM CAPACITY <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • 4972 families (FY07) • 49 agencies (FY07)
GEOGRAPHIC AREAS SERVED	<p><u>Chicago:</u> Austin, Avondale, Belmont Cragin, Beverly, Douglas, Englewood, Grand Boulevard, Greater Grand Crossing, Hermosa, Humboldt Park, Hyde Park, Irving Park, Logan Square, Lower West Side, Morgan Park, Near North Side, Near South Side, Near West Side, New City, North Center, North Lawndale, Portage Park, Pullman, Rogers Park, Roseland, South Chicago, South Lawndale, South Shore, Washington Heights, Washington Park, West Englewood, West Pullman, West Town, Woodlawn</p> <p><u>Suburban Cook County:</u> Barrington, Bellwood, Berwyn, Bloom Township, Cicero, Dixmoor, Elgin, Harvey, Markham, Maywood, Mount Prospect, Palatine, Phoenix, Prospect Heights, Rich Township, Robbins, Rolling Meadows</p> <p><u>Counties:</u> Adams, Alexander, Bond, Boone, Carroll, Champaign, Clay, Cook, DeWitt, DuPage, Fayette, Ford, Franklin, Henry, Iroquois, Jackson, Jefferson, Kane, Kankakee, Lake, Livingston, Macon, Macoupin, Madison, McLean, Peoria, Perry, Piatt, Pulaski, Rock Island, St. Clair, Sangamon, Stark, Stephenson, Tazewell, Vermilion, Whiteside, Will, Williamson, Winnebago, Woodford</p>

OUTREACH/ IDENTIFICATION METHODS	<p>A systematic screening of all new or expectant mothers in a targeted population is completed to determine the families' risk for child abuse and neglect.</p>
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>Education Requirements:</p> <ul style="list-style-type: none"> • HFI Supervisors are required to have a Bachelor's degree • High School diploma and relevant experience is required for HFI Assessment Workers and HFI Home Visitors. Some programs may require a Bachelor's degree. <p>Training Requirements:</p> <ul style="list-style-type: none"> • HFI program staff are required to have received intensive role-specific training within six months of their date of hire. • HFI program staff are also required to demonstrate knowledge on a variety of topics necessary for effectively working with families and children, within six to twelve months of hire. (including but not limited to infant care, maternal and child health and safety, infant and child development, child abuse/neglect, family violence and substance abuse)
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF OUTCOME GOALS	<p>Current key indicators:</p> <ul style="list-style-type: none"> • Percentage of successful home visits completed, in relation to the number of visits expected for each family • Timeliness of the first home visit, relative to the birth of the child targeted for services • Health care utilization • Immunization rates • Developmental Screening – receipt and referral • Breastfeeding Initiation
EVALUATION METHOD	<p>At the statewide level the program conducts a process evaluation which includes an analysis of the following program indicators:</p> <ul style="list-style-type: none"> • Home visit timeliness and ratio completion • Health care utilization • Immunization, well-child visit and developmental delay screening rates

Healthy Start

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> Healthy Start Family Centers provide case management services to high-risk pregnant women and interconceptional women.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • To reduce infant mortality • To improve perinatal outcomes in target communities with high infant mortality rates
KEY SERVICES	<ul style="list-style-type: none"> • Case management/outreach • Perinatal depression • Interconceptional case management • Medical services • Transportation • Child care • Supportive male programs • Community empowerment • Job training • Quality assurance • Nutrition and health education • Adolescent services • Substance abuse and smoking cessation • Public education and information
ADMINISTERING AGENCY	<p>Illinois Department of Human Services Division of Community Health and Prevention Bureau of Maternal and Infant Health Phone: (217) 782-9923</p>
BUDGET	\$1,421,600 (FY07)
FUNDING SOURCES	Federal
ELIGIBILITY CRITERIA	Women of child-bearing age and their infants residing in the target areas
PROGRAM CAPACITY • Number served Number of sites/programs	<ul style="list-style-type: none"> • 571 high-risk pregnant and 373 interconceptional women served (FY08) • 4 Family Health Centers in Chicago (FY08)
GEOGRAPHIC AREAS SERVED	<p>Chicago Community Areas of Near North Side, Near South Side, Near West Side, Douglas, Grand Boulevard and West Town</p> <p>Programs funded directly by the federal government: <u>Chicago:</u> Austin, East Garfield Park, Englewood, far South Side, North Lawndale, West Englewood, West Garfield Park</p> <p><u>Suburban Cook County:</u> Chicago Heights, Ford Heights</p> <p><u>Statewide:</u> Greater East St. Louis area</p>

OUTREACH/ IDENTIFICATION METHODS	Pregnant and/or parenting families are identified through local outreach efforts.
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>IDHS Education Requirements:</p> <ul style="list-style-type: none"> • Case Managers: The minimum educational requirement is an Associate’s degree and two years of experience in child, family, or community services. Case managers meeting only this requirement are supervised by a more experienced case manager possessing a Master’s or Bachelor’s degree in behavioral science, social science, or a health-related area. • Case Manager Assistants: Paraprofessionals and lay workers perform some case management functions under the supervision of a case manager. These functions are limited to intake, follow-up, and provision of support and assistance that participants may require to access services. <p>IDHS Training Requirements:</p> <ul style="list-style-type: none"> • IDHS Nurse Consultants conduct in-service programs and training sessions for case managers and program managers. Training focuses on risk assessment, care plan development, and implementation.
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF OUTCOME GOALS	<ul style="list-style-type: none"> • Reduction of infant mortality • Reduction of low weight births • Improvement of immunization rates • An increase in enrollment in prenatal care during the first trimester
EVALUATION METHODS	<ul style="list-style-type: none"> • Project uses an independent local evaluator as part of its evaluation effort. • Achievement of outcome goals is measured at the client level through the Cornerstone management information system and at the community level through state vital records related to perinatal health status indicators. Cornerstone data and special surveys or other procedures will be used to examine client satisfaction, honored appointments, and the initiation of prenatal care by women who speak English as a second language. • IDHS nurse consultants are assigned to each of the project sites to evaluate the overall quality of services provided, assess the appropriateness of care, and identify areas needing improvement. Nurse consultants provide or facilitate the provision of technical assistance to address identified needs and work with program management to achieve this objective.

High Risk Infant Follow-up

<p>PROGRAM DESCRIPTION AND GOALS</p>	<p><u>Description:</u> This voluntary program serves medically at-risk infants from all income levels who have conditions ranging from a temporary health problem to those who require specialized care.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • Reduce infant mortality and morbidity • Reduce complications due to perinatal high-risk conditions • Improve parents' knowledge and skills for caring for their infant • Provide infants with appropriate follow-up care and referrals as needed • Prevent future avoidable perinatal high-risk conditions • Promote optimal development for infants and families
<p>KEY SERVICES</p>	<ul style="list-style-type: none"> • Three to four home visits are expected for Adverse Pregnancy Outcomes Reporting System (APORS) clients with additional home visits based on the professional judgment of the case manager • Physical health assessment • Monitor infant development • Educate and support parents in caring for at-risk infant • Support parents in obtaining needed resources • Refer to appropriate agencies and services
<p>ADMINISTERING AGENCY</p>	<p>Illinois Department of Human Services Division of Community Health and Prevention Bureau of Maternal and Infant Health Phone: (217) 524-3319</p>
<p>BUDGET</p>	<p>Budget for High Risk Infant Follow-up is included in the Family Case Management budget</p>
<p>ELIGIBILITY CRITERIA</p>	<p>Infants with certain medical conditions:</p> <ul style="list-style-type: none"> • Drug toxicity or withdrawal • Congenital anomaly • Congenital infections • Endocrine, metabolic, or immune disorder • Blood disorder • Birth weight < 1501g • Diagnosis as a perinatal death or neonatal death • Other medical conditions that put the infant at risk
<p>PROGRAM CAPACITY</p> <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • 116 agencies (primarily local health departments)
<p>GEOGRAPHIC AREAS SERVED</p>	<p>Statewide</p>

<p>OUTREACH/ IDENTIFICATION METHODS</p>	<p>Hospitals are required to identify and refer high-risk infants to follow-up services prior to hospital discharge. Infants who meet the criteria and were not referred by the hospital can be referred to public health departments and receive follow-up services as a high-risk Family Case Management client.</p> <p>Health departments provide follow-up and case management services for children birth to two years of age and beyond, if services are needed. When a child is no longer eligible for services, services can continue to be provided through the Part C Early Intervention program, the Division of Specialized Care for Children, and the Cerebral Palsy Association.</p>
<p>STAFF EDUCATION AND/OR TRAINING REQUIREMENTS</p>	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Staff who provide follow-up services are registered nurses. <p>Training Requirements:</p> <ul style="list-style-type: none"> • IDHS Maternal and Child Health Nurse Consultants provide in-service training related to infant physical health assessments and Denver developmental assessments • Local staff are also required to complete in-service training regarding high risk follow-up protocols and service provision to families
<p>KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS</p>	<ul style="list-style-type: none"> • Percent of infants referred who receive follow-up services

Illinois Immunization Program

<p>PROGRAM DESCRIPTION AND GOALS</p>	<p><u>Description:</u> Prevents the occurrence and transmission of diseases through distribution of vaccines through the Vaccines for Children (VFC) program, conducts surveillance/outbreak control of vaccine-preventable diseases, conducts assessment of vaccine coverage levels amongst target populations, implements the statewide immunization information system (registry), conducts provider quality assurance activities for the VFC program, implements the Perinatal Hepatitis B Prevention program and collaborates with STD program to provide Hepatitis A and B vaccinations for high risk individuals.</p> <p><u>Goal:</u> To reduce or eliminate vaccine-preventable diseases by achieving high vaccine coverage levels</p>
<p>KEY SERVICES</p>	<ul style="list-style-type: none"> • Annual distribution of over 2 million doses of vaccines statewide to public and private providers through the Vaccines for Children (VFC) program • Participation/leadership in community coalitions • Promotion of childhood, adolescent and adult immunization initiatives to accomplish Healthy People 2010 goals • Maintenance of the statewide immunization registry, Tracking Our Toddlers Shots (TOTS), and implementation of the web application, Illinois' Comprehensive Automated Registry Exchange (I-CARE). Statewide roll-out implemented in 2007. • Provider quality assurance activities • Surveillance, investigation, and follow-up (lab services) for vaccine-preventable diseases • Population-based assessment and validation of immunization coverage levels <p>Pandemic influenza planning and preparedness activities</p>
<p>ADMINISTERING AGENCY</p>	<p>Illinois Department of Public Health Immunization Section Phone: (217) 785-1455</p>
<p>BUDGET</p>	<ul style="list-style-type: none"> • Approximately \$4.8 million (operations), approximately \$70 million (vaccines) (Federal VFC entitlement) Approximately \$3.6 million (vaccines) (State) to support "Plus"
<p>FUNDING SOURCES</p>	<ul style="list-style-type: none"> • 100% federal for operations • Vaccine funding is apportioned according to population estimates and CDC formula. Vaccine funding from 3 sources: 317 FA, for vaccines not held on a federal contract, VFC-DA and GRF. GRF supports the Plus portion of the VFC-Plus program in Illinois directed at under-insured children ages 0-18. Approximately 70% of vaccine funding is VFC, but fluctuates according to population/eligibility estimates. Remaining funding from 317 (as available) and GRF.
<p>ELIGIBILITY CRITERIA</p>	<p><u>Vaccines for Children Program:</u> Free vaccines for children 0-18 years of age who are Medicaid-eligible, uninsured, Native American or Alaskan Native, and children who are under-insured <u>AND</u> receive services through Federally Qualified Health Centers (FQHC). In Illinois, the Plus program was created to eliminate FQHC accessibility as a barrier. Therefore, under-insured children can receive vaccines through the local health department with no interruption or fragmentation of services for most of the childhood vaccines.</p>
<p>PROGRAM CAPACITY:</p> <ul style="list-style-type: none"> • Number served 	<ul style="list-style-type: none"> • Over 2 million doses of vaccines to children served by the VFC-Plus program. Approximately 70% of the annual birth cohort received vaccines through the Plus program.

GEOGRAPHIC AREAS SERVED	Statewide (Approximately 3,000 providers, including 95 local health departments)
OUTREACH/ IDENTIFICATION METHODS	Population-based assessments have identified “pockets of need” or areas at risk of not accessing immunization services. Funds have been provided to the health departments and/or community organizations to implement community outreach strategies to improve immunization levels among children prior to their 2 nd birthday. Outreach efforts include: reminder/recall activities, implementation of TOTS, community promotion, provider and consumer education, and additional clinic services to address target population needs (e.g. evening and Saturday clinics, co-scheduling with other health services, walk-in/express immunizations).
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	N/A
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF OUTCOME GOALS	<ul style="list-style-type: none"> • National Immunization Survey (NIS) data • Performance measures as developed for annual comptroller’s public accountability reports • CoCASA software as developed by CDC to monitor VFC-AFIX site visits • Illinois’ National Electronic Diseases Surveillance System (INEDSS): I-NEDSS is a web-based application utilized by 95 Illinois local health departments and by health care providers and laboratory staff throughout Illinois to report and investigate infectious disease conditions, clusters and outbreaks. INEDSS includes extensive reporting capabilities including canned reports & ad hoc reporting on both current and legacy data for CDs and VPDs.
EVALUATION METHODS	NIS data, annual clinic reviews/assessments of all public providers, VFC site reviews for 25% of all VFC providers annually and utilization of program evaluation templates as developed by CDC

Illinois Lead Program

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> The Illinois Lead Prevention Act requires health care providers to evaluate each child for lead poisoning at least once before they enter a licensed day care or school program. Local health departments provide assessments and screenings for lead poisoning, referrals, medical management, and in some cases, environmental investigations for children with elevated lead levels.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • Elimination of lead hazards • Prevention of childhood lead poisoning • Identification of poisoned children • Assurance of treatment for lead-poisoned children
KEY SERVICES	<ul style="list-style-type: none"> • Collection and analysis of blood lead test results • Public and family education • Medical case management • Property inspection and identification of hazards • Assurance of abatement and hazard remediation
ADMINISTERING AGENCY	<p>Illinois Department of Public Health Office of Health Protection Division of Environmental Health Phone: (217) 782-3517 Toll free hotline: (800) 545-2200</p>
BUDGET	<p>\$2,779,000 (FY04)</p>
FUNDING SOURCES	<p>GRF: 25% CDC: 32% Lead Screening Fund: 43%</p>
ELIGIBILITY CRITERIA	<ul style="list-style-type: none"> • Every physician or health care provider is required to screen all children 6 months through 6 years (84 months) of age for lead poisoning. Children residing in low risk areas are required to be assessed using the IDPH risk assessment questionnaire. Any positive or “Don’t know” responses to any portion of the assessment are considered high risk and these children will receive a blood lead test. • Blood lead testing is a requirement for all children residing in high-risk ZIP codes.
PROGRAM CAPACITY: <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • In CY06, 278,078 children were tested for lead poisoning. Of this total, 6,480 children had test results greater than or equal to 10mcg/dL (At 15mcg/dL a clinical record is started, and at 20mcg/dL a nurse visit is conducted. At 25mcg/dL [or persistently high levels between 15-24mcg/dL] an environmental inspection of the home is done). If the child is 36 months or younger a nurse home visit and an environmental inspection is conducted if the child has a blood lead level \geq10 mcg/dL. • 88 sites (local health departments)
GEOGRAPHIC AREAS SERVED	<p>Statewide</p>

Illinois Subsequent Pregnancy Project

<p>PROGRAM DESCRIPTION AND GOALS</p>	<p><u>Description:</u> The program provides an integrated model of service delivery to help first-time mothers 15 through 18 years of age, and has two primary interventions: intensive home visiting and substantive training through membership in a peer support group. Participants are intensely trained to work as Peer Educators after one year of successful program participation.</p> <p><u>Goals:</u> To help young mothers:</p> <ul style="list-style-type: none"> • Delay a second pregnancy • Use a contraceptive method effectively and consistently • Remain in and complete high school
<p>KEY SERVICES</p>	<p><u>Home Visiting:</u> Home visiting services weekly, up to two years</p> <p><u>Advisory Group Meetings:</u> During the first year, program participants become members of the Subsequent Pregnancy Advisory Group. Advisory group meetings provide an avenue for training and follow-up, as well as peer support for the common goal of avoiding early parenting.</p> <p><u>Peer Education:</u> After one year of program participation, young eligible mothers are intensely trained as Peer Educators. Peer Educators are paid an hourly stipend to work in their own communities talking to their peers about "why" and "how" to delay a pregnancy.</p>
<p>ADMINISTERING AGENCY</p>	<p>Illinois Department of Human Services Bureau of Child and Adolescent Health Division of Community Health and Prevention Phone: (217) 785-0462</p>
<p>BUDGET</p>	<p>\$49,400 (FY08)</p>
<p>FUNDING SOURCES</p>	<p>General Revenue: 100%</p>
<p>ELIGIBILITY CRITERIA</p>	<p>High-risk teen parents under 19 years of age in Chicago who have one child. The program targets first-time mothers between 15 and 18 years of age.</p>
<p>PROGRAM CAPACITY: • Number served Number of sites/programs</p>	<ul style="list-style-type: none"> • 431 families (FY07) • 7 community sites (FY08)
<p>GEOGRAPHIC AREAS SERVED</p>	<p>Cook County</p>
<p>OUTREACH/ IDENTIFICATION METHODS</p>	<p>Referrals from schools, program participants, non-profit agencies, local health departments, parents/guardians, and school health centers.</p>

STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Home visitors must have a high school degree; many have a social service background. <p>Training Requirements:</p> <ul style="list-style-type: none"> • Staff are trained on the program’s curriculum. Home visitors receive monthly training. Peer educators receive 8 weeks of intensive training and bi-monthly training thereafter.
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS	<ul style="list-style-type: none"> • Lower subsequent pregnancy rate • Increased use of contraception • Higher school completion rate • No substantiated cases of child abuse or neglect
EVALUATION METHODS	<p>Data are collected to monitor program implementation and impact on the individual program participants, agencies, and communities.</p>

Newborn Hearing Screening Program

<p>PROGRAM DESCRIPTION AND GOALS</p>	<p><u>Description:</u> The Newborn Hearing Screening Program provides early identification of congenital hearing loss with subsequent referral to services as needed. As of December 31, 2002, all hospitals performing deliveries are required to conduct physiological hearing screenings of all newborns and appropriately refer for services those newborns who do not pass the screening.</p> <p><u>Goal:</u> To lessen the impact of congenital hearing loss through early identification and intervention.</p>
<p>KEY SERVICES</p>	<ul style="list-style-type: none"> • Physiological hearing screenings • Referrals for newborns who do not pass screening <p>Illinois Department of Public Health (IDPH):</p> <ul style="list-style-type: none"> • Collects data from screening programs • Tracks and follows-up on infants who do not pass the hearing screening • Maintains a registry of infants with confirmed hearing loss and those at risk for progressive or acquired hearing loss • Maintains aggregate data on the hearing screening program statewide <p>Illinois Department of Humans Services (IDHS):</p> <ul style="list-style-type: none"> • Establishes an Advisory Committee • Promulgates rules for administration of the Act and overall implementation of the universal newborn hearing screening program in Illinois <p>Division of Specialized Care for Children (DSCC): Assures diagnosis and appropriate intervention services through the Children with Special Health Care Needs program</p>
<p>ADMINISTERING AGENCY</p>	<p>Illinois Department of Public Health (IDPH) Division of Health Assessment and Screening Phone: (217) 782-4733</p> <p>Division of Specialized Care for Children (DSCC) at University of Illinois – Chicago Phone: (217) 793-2350</p> <p>Illinois Department of Human Services (IDHS) Bureau of Community Health Nursing Phone: (217) 782-5946</p>
<p>BUDGET</p>	<p>\$300,000 (FY06, including all 3 agencies)</p>
<p>FUNDING SOURCES</p>	<p>Federal: 50% Source: Discretionary grants from the Maternal and Child Health Bureau and the Center for Disease Control and Prevention Other: 50% Screening at the hospital level is not funded</p>
<p>ELIGIBILITY CRITERIA</p>	<ul style="list-style-type: none"> • Services are currently available in all birthing facilities in Illinois • Screening is mandated for all newborns

PROGRAM CAPACITY: <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • Approximately 173,765 newborns (FY07) • Approximately 130 birthing hospitals statewide (FY07)
GEOGRAPHIC AREAS SERVED	Statewide
OUTREACH/ IDENTIFICATION METHODS	<ul style="list-style-type: none"> • Families learn about services at the hospital at the time of birth. Hospitals inform parents, physicians, and IDPH of hearing screening results. IDPH recommends further testing to the physician and parent/guardian of infants who do not pass hearing screening. IDPH tracks infants and assures referral to DSCC and Early Intervention services for infants with confirmed hearing loss. <p>To assure timely diagnosis and intervention, infants are followed through programs targeting children (e.g. Family Case Management, High-Risk Infant Follow-up, Early Intervention, and DSCC)</p>
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	Infant hearing screening is to be provided by appropriately trained personnel (not volunteers) employed by the birthing facility. Licensed audiologists (Master's/Doctoral level) provide diagnostic hearing evaluations.
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS	<ul style="list-style-type: none"> • Number of birthing facilities providing hearing screenings • Average age of diagnosis • Age of initiation of intervention • Number of providers for diagnostic hearing testing • Number of birthing facilities reporting to IDPH • Number of infants screened • Number of infants re-screened • Number of infants referred • Number of confirmed hearing losses
EVALUATION METHODS	Data is maintained through the use of HI*TRACK software from the National Center for Hearing Assessment and Management (NCHAM).

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> Parents Care + Share is a statewide peer support group for parents who are at risk for child abuse and neglect. The focus of the support group is to provide support to parents in the day-to-day challenges of raising children. Parents connect with other parents and learn positive parenting techniques from each other, family management skills and how to create and maintain social support systems. Each group is facilitated by a volunteer professional who helps parents link to other services in the community, identifies clinical issues and makes appropriate referrals, and develops meaningful parent leadership. The program helps to strengthen families and prevent or end the cycle of child abuse and neglect. The majority of groups have a companion children's program led by trained children's program specialists. This enables parents to bring their children with them to group meetings.</p> <p><u>Goals:</u> To prevent child abuse and neglect by strengthening families, empowering parents, and helping them:</p> <ul style="list-style-type: none"> • Improve their parenting skills • Develop nurturing/healthy relationships with family members <p>Develop and maintain social support networks</p>
KEY SERVICES	<ul style="list-style-type: none"> • Promoting public awareness and information about the prevention of child abuse • Facilitating the development and maintenance of mutual self-help groups in local communities across Illinois • Teaching coping mechanisms and positive parenting tips
ADMINISTERING AGENCY	<p>Children's Home & Aid Society of Illinois (hereinafter called Children's Home + Aid) Phone: (847) 991-1030</p>
BUDGET	<p>\$426,199 (FY08)</p>
FUNDING SOURCES	<p>State: 100% Funding stream: IDCFS, Title XX, IDHS</p>
ELIGIBILITY CRITERIA	<p>Any parent in Illinois, who is not impaired by alcohol or drugs and not at risk of harming themselves or others, and wishes to be in a parent support group.</p>
PROGRAM CAPACITY: <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • 1,300 parents/caregivers (FY08) • 900 children (FY08) • 60 parent support groups and 44 companion children's groups (March 31, 2008)
GEOGRAPHIC AREAS SERVED	<p>Statewide in five regions of Children's Home + Aid (Mid-Central, Metropolitan, Northwest Suburban, Northern, and Southern)</p>
OUTREACH/ IDENTIFICATION METHODS	<p>Presentations and information distribution (e.g., Head Start sites, hospitals, Healthy Families Illinois sites, schools, libraries and health fairs), television and radio interviews, newsletters, and conferences</p>

STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Staff and volunteers must have a Bachelor’s degree (Master’s degree with significant experience leading groups preferred) <p>Training Requirements:</p> <ul style="list-style-type: none"> • Staff and volunteers receive training about the mission of Parents Care + Share, group dynamics and facilitation, family support principles, reporting child abuse and neglect, and resources and rules for groups
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS	<p>Parents Care and Share, as a program of Children’s Home + Aid, works to meet Council on Accreditation (COA) standards using measurements of:</p> <ul style="list-style-type: none"> • Improved knowledge of parenting role • Improved knowledge of appropriate child development and behavior • Improved family management skills • Improved positive problem-solving • Improved communication and interactions • Improved relationship development with peers <p>Development of a social support network</p>
EVALUATION METHODS	<p>Semi-annual outcome measurement surveys are administered to parents/caregivers.</p>

Parents Too Soon

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> Parents Too Soon (PTS) is a partnership between the Illinois Department of Human Services (IDHS) and the Ounce of Prevention Fund (OPF). PTS programs are based on the belief that comprehensive services to adolescents are best provided in the context of family, culture, and community.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • To assist teen parents to build strong parent-child relationships, raise healthy children, delay subsequent pregnancy, and prepare for future self-sufficiency
KEY SERVICES	<ul style="list-style-type: none"> • Voluntary, intensive home visiting (weekly) • Parent groups • Doula support • Family needs assessment • Developmental screening • Resource and referral to other needed services such as medical care or educational and vocational opportunities
ADMINISTERING AGENCY	<p>Illinois Department of Human Services Bureau of Child and Adolescent Health Phone: (217) 785-0462</p> <p>Ounce of Prevention Fund Phone: (312) 922-3863</p>
BUDGET	\$11,227,200 (FY08)
FUNDING SOURCES	<p>General Revenue Funds - \$7,562,000</p> <p>Federal Funds - \$3,665,200</p>
ELIGIBILITY CRITERIA	Pregnant or parenting teens in high-risk communities. Most sites recruit prenatally. All doula sites serve pregnant teens.
PROGRAM CAPACITY: • Number served Number of sites/programs	<ul style="list-style-type: none"> • 2,131 families (FY07), Projected to be served in FY08 = 2,200 • 22 program sites serving pregnant and parenting teens and their children (FY07)
GEOGRAPHIC AREAS SERVED	<p><u>Chicago:</u> Albany Park, Belmont-Cragin, East Garfield Park, Englewood, Greater Grand Crossing, Hyde Park, Lower West Side, Near West Side, North Lawndale, Roseland, South Lawndale, South Shore, Uptown, Washington Park, West Englewood, West Garfield Park, West Pullman, West Town, Woodlawn</p> <p><u>Counties:</u> Alexander, Boone, Champaign, Cook, Jefferson, Kane, Kankakee, Marion, Peoria, Pulaski, St. Clair, Sangamon, Tazewell, Vermilion, Winnebago</p>

<p>STAFF EDUCATION AND/OR TRAINING REQUIREMENTS</p>	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Varies depending on job title and host agency requirements <p>Training Requirements:</p> <ul style="list-style-type: none"> • The Ounce of Prevention Fund Training Institute provides staff with initial and ongoing training designed to promote specific competencies. All staff receive basic training in areas such as child development, promoting and strengthening parent-child relationships, balancing personal value systems with service provision and respecting cultural beliefs, parenting education, goal-setting and problem-solving, service planning, identifying and reporting child abuse and neglect, and services in their communities. • Continuous training to maintain the quality of program services is offered within a staff development context. Many staff also participate in specialized training including the Developmental Training and Support Program (DTSP) and Heart to Heart, a child sexual abuse prevention education program.
<p>KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS</p>	<ul style="list-style-type: none"> • Rate of subsequent pregnancy after program enrollment • Number of developmental screenings on children 0-5 • Change across time in maternal efficacy scores • Change across time in number and reliability of social supports • Rate of developmental screenings found to need further intervention • Immunization rates • Percent of children with a medical home • School completion rates (for teen parents) • School enrollment/attendance (for teen parents) • Medical interventions at birth (c-sections) • Birth weight • Well-child medical care • Breast feeding initiation • Duration and frequency of father's involvement with children
<p>EVALUATION METHODS</p>	<p>Programs use OPF's computerized management information system to closely monitor service delivery and outcome achievement and make program changes where indicated. Information is currently collected to determine the extent to which the program is achieving its goals as listed above (e.g. low birth weight, immunization, and subsequent pregnancy rates; teens' school achievement and/or vocational readiness; rates of indicated abuse/neglect). This data is reported to IDHS quarterly.</p>

Perinatal Health Care System

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> A regionally coordinated system of medical care focusing on pregnancy, delivery, and newborn care for pregnant women and newborns with high-risk medical conditions.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • To ensure appropriate care for all pregnant women and to better utilize available resources • To improve pregnancy outcomes
KEY SERVICES	<ul style="list-style-type: none"> • Maternal-fetal medicine • Neonatology • Genetic services • Pediatric surgery • Radiology <p>Referrals</p>
ADMINISTERING AGENCY	<p>Illinois Department of Public Health Office of Health Promotion Phone: (217) 785-4093</p>
BUDGET	<p>\$4,538,700 (FY09)</p>
FUNDING SOURCES	<p>GRF: \$2,136,900 (47.1%) Fed. MCH Block: \$2,401,800 (52.9%)</p>
ELIGIBILITY CRITERIA	<p>Pregnant women and newborns with high-risk medical conditions</p>
PROGRAM CAPACITY <ul style="list-style-type: none"> • Number served Number of sites/programs	<ul style="list-style-type: none"> • Estimated 30,000 high-risk pregnant women (FY07) • 132 hospitals perform deliveries
GEOGRAPHIC AREAS SERVED	<p>Statewide</p>
OUTREACH/ IDENTIFICATION METHODS	<p>Pregnant women are referred to the appropriate level of perinatal care by their physician</p>
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Staff include Board-certified physicians in maternal-fetal medicine and Neonatology and medical, nursing, and appropriate allied health specialists (e.g. respiratory care, social work, nutrition) <p>Training Requirements:</p> <ul style="list-style-type: none"> • Staff receive ongoing training and supervision by appropriate professionals within the hospital and their respective professional organization or group

<p>KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS</p>	<ul style="list-style-type: none"> • Birth weight • Birth rate numbers • Fetal mortality • Neonatal mortality • Perinatal mortality • Post-neonatal mortality • Maternal mortality
<p>EVALUATION METHODS</p>	<p>The Perinatal Program and the Illinois Center for Health Statistics at Illinois Department of Public Health are responsible for data analysis and dissemination of information used to monitor and evaluate the perinatal health care program. The databases used for monitoring and evaluation of the system include Vital Records, APORS, maternal and perinatal mortality.</p>

Responsible Parenting Program

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> The Responsible Parenting Program aims to delay subsequent pregnancies of teen parents and to increase parenting proficiency through parental education and skills training.</p> <p><u>Goals:</u> To help adolescent mothers from ages 13 to 18 to:</p> <ul style="list-style-type: none"> • Delay subsequent pregnancies • Consistently and effectively practice birth control • Remain in and complete high school • Develop strong parenting skills • Cope with the social and emotional problems related to pregnancy and parenting • Ensure their children are healthy and prepared for school
KEY SERVICES	<ul style="list-style-type: none"> • Peer group services • Parenting skill courses
ADMINISTERING AGENCY	<p>Illinois Department of Human Services Bureau of Child and Adolescent Health Division of Community Health and Prevention Phone: (217) 785-0462</p>
BUDGET	<p>\$153,000 (FY08)</p>
FUNDING SOURCES	<p>General Revenue: 100%</p>
ELIGIBILITY CRITERIA	<p>High-risk pregnant or parenting teens</p>
PROGRAM CAPACITY: <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • 258 families (FY07) • 2 community sites
GEOGRAPHIC AREAS SERVED	<p><u>Counties:</u> DuPage and Winnebago</p>
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Varies depending on job title, many have social service background
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS	<ul style="list-style-type: none"> • Lower subsequent pregnancy rate • Increased use of birth control • Higher school completion rate • No substantiated cases of child abuse or neglect • Receipt of research-based parenting skills instruction • For children, receipt of screening for developmental delay, well-baby visits and immunizations
EVALUATION METHODS	<p>Data are collected to monitor program implementation and impact on the individual program, participants, agencies, and communities.</p>

Targeted Intensive Prenatal Case Management

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> Intensive case management services to high-risk pregnant women, using case managers with low caseloads.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • To reduce Medicaid costs by encouraging the highest risk pregnant women to enroll in the Supplemental Nutrition Program for Women, Infants, and Children (WIC) • To ensure that women receive medical and other support services that promote healthy birth outcomes • To decrease incidence of infant mortality and low birth weight
KEY SERVICES	<ul style="list-style-type: none"> • Outreach to high-risk pregnant women • Intensive case management – case managers have caseloads of 40 pregnant women • Face-to-face visits – two visits per month, one of which is in the home
ADMINISTERING AGENCY	<p>Illinois Department of Human Services Division of Community Health and Prevention Bureau of Maternal and Infant Health Programs Phone: (312) 793-8234</p>
BUDGET	<p>\$4,906,100 (FY07)</p>
FUNDING SOURCES	<p>GRF: 100%</p>
ELIGIBILITY CRITERIA	<p>Women eligible for Medicaid who have high-risk pregnancy indicators, including:</p> <ul style="list-style-type: none"> • Alcohol/substance abuse • Tested positive for an STD or HIV • Under 15 years of age • Victim of domestic violence • DSM-IV diagnosis issues <p>Health that impacts the pregnancy</p>
PROGRAM CAPACITY: <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • 4,208 pregnant women (FY07) • 14 agencies
GEOGRAPHIC AREAS SERVED	<p><u>Downstate:</u> East Side Health District, Macon County, Peoria County, St. Clair County, Vermilion County, Will County Health Department, and Winnebago County</p> <p><u>Chicago and Cook County:</u> Auburn, Bellwood, Burnside, East and West Garfield, Gresham, Harvey, Humboldt Park, Maywood, North Lawndale, Roseland, South Chicago, Woodlawn, South Shore, Riverdale, Markham, Hazel Crest, Homewood, Matteson, Chicago Heights, Calumet City, Dolton, Country Club Hills, Avalon Park, Calumet Heights, Washington Heights, Morgan Park, Beverly and Austin</p>
OUTREACH/ IDENTIFICATION METHOD	<p>Community-specific outreach methods and incentives for compliance</p>

<p>STAFF EDUCATION AND/OR TRAINING REQUIREMENTS</p>	<p>IDHS Education Requirements:</p> <ul style="list-style-type: none"> • Case Managers: The minimum educational requirement is an Associate’s degree and two years of experience in child, family, or community services. Case managers meeting only this requirement are supervised by a more experienced case manager possessing a Master’s or Bachelor’s degree in behavioral science, social science, or a health-related area. • Case Manager Assistants: Paraprofessionals and lay workers perform some case management functions under the supervision of a case manager. These functions are limited to intake, follow-up, and provision of support and assistance that participants may require to access services. <p>IDHS Training Requirements:</p> <ul style="list-style-type: none"> • IDHS Nurse Consultants conduct in-service programs and training sessions for case managers and program managers. Training focuses on risk assessment, care plan development, and implementation.
<p>KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF OUTCOME GOALS</p>	<ul style="list-style-type: none"> • Reduction of infant mortality • Reduction of low weight births • Improvement of immunization rates • An increase in enrollment in prenatal care during the first trimester
<p>EVALUATION METHODS</p>	<ul style="list-style-type: none"> • Project uses an independent local evaluator as part of its evaluation effort. • Achievement of outcome goals is measured at the client level through the Cornerstone management information system and at the community level through state vital records related to perinatal health status indicators. Cornerstone data and special surveys or other procedures will be used to examine client satisfaction, honored appointments, and the initiation of prenatal care by women who speak English as a second language. • IDHS nurse consultants are assigned to each of the project sites to evaluate the overall quality of services provided, assess the appropriateness of care, and identify areas needing improvement. Nurse consultants provide or facilitate the provision of technical assistance to address identified needs and work with program management to achieve this objective.

Teen Parent Services (TPS)

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> To help low-income young parents under age 21 to become self-sufficient by completing school or obtaining a GED, postponing a subsequent birth, and for the teen and their child(ren) to be connected to medical and social services.</p> <p><u>Goal:</u> To increase post-secondary school completion, reduce subsequent birth, improve parenting skills, increase the rate of the immunizations, well-baby visits and screening for developmental delay of the teen parent's children for teens enrolled in the program.</p>
KEY SERVICES	<ul style="list-style-type: none"> • Comprehensive case management • Life skills development • Parenting instruction • Reproductive health information and referral • Completion of High School or GED • Assistance with preventive health care for the teens and their children (e.g. prenatal care, well-child exams, and immunizations) • Individualized counseling • Referral to social service agencies <p>Transportation assistance</p>
ADMINISTERING AGENCY	<p>Illinois Department of Human Services Bureau of Child and Adolescent Health Division of Community Health and Prevention Phone: (217) 785-0462</p>
BUDGET	<p>\$5,910,800 (FY08)</p>
FUNDING SOURCES	<p>GRF: 100%</p>
ELIGIBILITY CRITERIA	<ul style="list-style-type: none"> • Teen parent or pregnant teen (single, married, married couples) • Under 20 years of age • High school or GED not completed when initially identified for program participation <p>Receives or applied for Temporary Assistance for Needy Families (TANF) or receives All Kids (medical assistance), Food Stamps, WIC, or Family Case Management or low income</p>
PROGRAM CAPACITY: <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • 9,974 families (FY08) • Available statewide through 88 local health departments, community-based organizations, community colleges and 2 IDHS staffed offices
GEOGRAPHIC AREAS SERVED	<p>Statewide</p>

OUTREACH/ IDENTIFICATION METHODS	<p>This program is mandatory for teens receiving TANF and voluntary for others.</p> <p>Outreach/identification methods include:</p> <ul style="list-style-type: none"> • Automated information from IDHS • Referrals from IDHS local offices • Referrals from local health departments of teens who receive WIC and/or Family Case Management services • Self Referral
STAFF EDUCATION AND/OR TRAINING REQUIREMENTS	<p>Training Requirements:</p> <ul style="list-style-type: none"> • TPS providers receive regularly scheduled training, on-site program support, and an opportunity to network and problem solve with their peers on a monthly or quarterly basis. In addition, special meetings or conferences are conducted to provide information or “best practices” and resources to increase the probability of enhanced program outcomes.
KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS	<ul style="list-style-type: none"> • High school/GED completion • Subsequent pregnancy
EVALUATION METHODS	<p>No formal evaluation. Outcomes are tracked.</p>

WIC
(Special Supplemental Nutrition Program for Women, Infants and Children)

PROGRAM DESCRIPTION AND GOALS	<p><u>Description:</u> The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is the primary nutrition program for low-income pregnant and parenting women.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • To reduce the incidence of infant mortality, low birth weight, and nutrition-related problems • To ensure the proper growth and development of infants and young children
KEY SERVICES	<ul style="list-style-type: none"> • Supplemental foods/food instruments • Nutrition education • Breastfeeding promotion and support • Referral to health/social services
ADMINISTERING AGENCY	<p>Illinois Department of Human Services Bureau of Family Nutrition Phone: (217) 782-2166</p>
BUDGET	<p>\$ 277,000,000 (FY08)</p>
FUNDING SOURCES	<p>Federal</p>
ELIGIBILITY CRITERIA	<ul style="list-style-type: none"> • Pregnant, postpartum, or breastfeeding women with an infant or child under 5 years of age • Income below 185% of the poverty level • Certified by a health professional to be at nutritional risk (e.g. inadequate diet, abnormal weight gain, high-risk pregnancy)
GEOGRAPHIC AREAS SERVED	<p>Statewide</p>
PROGRAM CAPACITY: <ul style="list-style-type: none"> • Number served • Number of sites/programs 	<ul style="list-style-type: none"> • 289,000 women, infants, and children (FY08) • 220 sites (primarily local health departments) statewide, including 73 in Chicago (FY06)
OUTREACH/ IDENTIFICATION METHODS	<p>Local agencies administering WIC programs are mandated to provide outreach services and educate community members about WIC.</p>

<p>STAFF EDUCATION AND/OR TRAINING REQUIREMENTS</p>	<p>Education Requirements:</p> <ul style="list-style-type: none"> • Registered Dietitian, Nutritionist, Registered Nurse, or a Home Economist with an emphasis on nutrition <p>Training Requirements:</p> <ul style="list-style-type: none"> • IDHS Community Health and Prevention Training Center provides training for clerical employees and Certified Health Professionals. Supervision for training is provided by state WIC program staff and regional nutritionists.
<p>KEY INDICATORS USED TO MEASURE ACHIEVEMENT OF PROGRAM GOALS</p>	<ul style="list-style-type: none"> • Breastfeeding initiation and duration rates • Trimester of entry into program • Integration with Family Case Management (i.e. eligible families are also enrolled in Family Case Management) • Number of participants enrolled in Medicaid or All Kids (Illinois' child health insurance program) • Weight gain during pregnancy • Immunization rates
<p>EVALUATION METHODS</p>	<ul style="list-style-type: none"> • Program participation is reviewed on an ongoing basis using Cornerstone management information system • Nutrition care is reviewed by state nutrition staff • Program operations are reviewed by staff from the IDHS Bureau of Family Nutrition

Profiles of Systems Development Initiatives

All Our Kids Early Childhood Networks

<p>PROGRAM MISSION AND GOALS</p>	<p><u>Mission:</u> The All Our Kids Early Childhood Networks are community-based collaborations committed to developing a high-quality, well-coordinated, easily accessible system of care where babies are born healthy, children maintain physical and emotional health, children enter school ready to learn, families are connected to the services they need, and parents are leaders in their families and communities.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • The community has a coordinated and collaborative system of early childhood services • Families have access to needed and appropriate early childhood services that are responsive to community needs • The early childhood system is comprised of a skilled, competent workforce • Early childhood services are family-focused, culturally competent and strength-based <p>Parents/Caregivers are leaders in their families and their communities</p>
<p>KEY ACTIVITIES</p>	<p>Each of the thirteen Network communities has developed and implemented a strategic plan that addresses the following areas:</p> <ul style="list-style-type: none"> • Assess the needs of young children and their families • Link children and their families with appropriate services • Facilitate the coordination of services and elimination of service gaps • Inform the community about issues affecting families with young children • Identify and better understand the services families with young children need and use • Address the training needs of people who work with expectant parents and families with young children • Evaluate the accessibility and capacity of the system of services for young children and their families • Provide leadership for policy development to assure the health of young children and their families • Assist network partners in establishing a family-focused, strength-based, culturally competent approach in their service • Provide opportunities for parents and caregivers of families with young children to be leaders in their families, the Early Childhood System and their communities
<p>ADMINISTERING AGENCY</p>	<p>Illinois Department of Human Services Division of Community Health and Prevention Phone: (312) 793-8807</p>
<p>LOCAL AGENCY</p>	<p>11 local health departments, 1 Regional Office of Education and 1 local Early Childhood Collaborative</p>
<p>BUDGET</p>	<p>\$1,151,100 (FY07)</p>
<p>FUNDING SOURCES</p>	<p>Federal: WIC, SECCS, CCD State: Infant Mortality Reduction Initiative, Early Childhood Block Grant</p>
<p>TARGET POPULATION</p>	<p>Pregnant women and all families with a child under age 5 within each Network community</p>

GEOGRAPHIC AREAS COVERED	City of Chicago (North and South Lawndale, East and West Garfield Park), Cook County (Town of Cicero), Adams, Edwards, Kane, Macon, McLean, Rock Island, St. Clair, Stephenson, Tazewell, Vermilion, Wabash, and Will counties
STRUCTURE AND PROCESS	<p>A Network Coordinator based at the local health department in each community staffs the Network and brings together a broad-based group of stakeholders from the community on a regular basis. A strategic plan (described above) is developed and implemented by the Network.</p> <p>State-level systems issues that are identified through the work of the local Networks are passed to the Birth to Five Project. The Project includes representatives from city, state and federal agencies serving young children, community-based programs, researchers, health care professionals, legislators and advocates.</p> <p>The Network coordinators meet three times a year for peer-to-peer learning and state-level technical assistance.</p>
PARTNERS AND PARTICIPANTS	The local health department is the lead agency in 11 of the AOK sites; the Regional Office of Education is the fiscal agent in St. Clair county and a local Early Childhood Collaborative is the fiscal agent for Rock Island County. The specific composition of each Network varies from community to community. Generally members include representatives of the following local systems: health, Early Intervention, early care and education, family support, mental health, the faith community, parents, education, advocacy, social services, employers, and local government.
YEAR INITIATED	Project planning began in the Fall of 1999. Local networks were initiated in January 2000.

Child Care Resource and Referral (CCR&R)

PROGRAM MISSION AND GOALS	<p><u>Mission:</u> Regionally-based Child Care Resource and Referral (CCR&R) agencies promote and facilitate quality early care and education for children, families, child care providers, employers, and communities in Illinois through a coordinated effort, and support, expand, and enhance existing statewide child care resource and referral services.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • To provide families access to quality child care services statewide • To improve the quality of child care through training programs and assistance • To ensure that child care programs meet the needs of communities
KEY ACTIVITIES	<ul style="list-style-type: none"> • Consumer education on child care • Child care referrals for families • Training, technical assistance and supports for child care programs • Help develop new child care resources in communities where needed • Assemble and maintain an accurate child care database • Record and analyze data on child care supply and demand
ADMINISTERING AGENCY	<p>Illinois Department of Human Services (IDHS) Bureau of Child Care and Development Phone: (217) 785-2559 For information and to contact local CCR&Rs: Illinois Network of Child Care Resource and Referral Agencies (INCCRRA) Phone: (309) 829-5327 or (800) 649-1884</p>
BUDGET	<p>\$28,250,000 (FY08)</p>
FUNDING SOURCES	<p>Federal Child Care and Development funds</p>
LOCAL AGENCY	<p>16 contracted agencies statewide, with community partner sites in Cook County (FY08)</p>
TARGET POPULATION	<ul style="list-style-type: none"> • Families with children in need of child care services • Children ages 6 weeks to 12 years in early childhood and school age settings • Early care and education professionals <p>Local communities, business leaders, employers</p>
GEOGRAPHIC AREAS COVERED	<p>102 Counties statewide</p>
STRUCTURE AND PROCESS	<p>IDHS contracts with INCCRRA and local CCR&Rs to provide services. Program policies are determined by IDHS. Contracted agencies are either independent community-based organizations or part of an umbrella organization. These agencies have boards of directors and they facilitate advisory groups.</p>
PARTNERS AND PARTICIPANTS	<p>Local CCR&R agencies and INCCRRA partner with numerous organizations including Illinois Association for the Education of Young Children and local affiliates, Head Start, Illinois Department of Children and Family Services, Illinois State Board of Education, Illinois Community College Board, and two-year and four-year institutions to deliver quality services to children and families.</p>
YEAR INITIATED	<p>The CCR&R Statewide System was initiated in 1990. INCCRRA was formed in 1996.</p>

Healthy Child Care Illinois

<p>PROGRAM DESCRIPTION AND GOALS</p>	<p><u>Description:</u> The Healthy Child Care Illinois initiative was launched on the principle of the Healthy Child Care America campaign that families in partnership with child care and health care providers can promote the positive development of children in child care settings.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • To improve the health status and well-being of children in child care by ensuring access to effective health, dental, and developmental screenings and follow-up • To facilitate children’s use of health services • To ensure that all children have access to safe, comprehensive, affordable child care • To enhance coordination between health care providers and the child care system • To expand the knowledge of child care providers and families regarding health care issues • To develop a structure to plan, evaluate, and improve the health component of child care • To develop, implement, and evaluate a public awareness/marketing campaign in support of safe and healthy child care operations • To incorporate a multi-disciplinary approach with professionals so that child health, child care, and child development are addressed • To develop/maintain an advisory relationship with all license/license-exempt child care providers • To clarify programs’ rules and policies (e.g. All Kids) and policies for child care centers and homes
<p>KEY ACTIVITIES</p>	<p>Through a statewide child care nurse consultant network:</p> <ul style="list-style-type: none"> • Ensure a safe, healthy child care environment for all children • Provide health, mental health, nutrition, and safety education for children, families, and child care providers • Provide individualized attention to children with special health care needs • Provide the highest level of training and technical assistance on health-related issues to center- and home-based child care providers (licensed, unlicensed, kith & kin) • Collect and distribute data on health/safety issues • Assist child care providers in developing health policies, procedures, and plans • Referral to physicians, early intervention, dental care, mental health care, All Kids insurance and other local, state or federal programs
<p>FUNDING AGENCY</p>	<p>Illinois Department of Human Services Division of Community Health and Prevention Bureau of Maternal and Infant Health Phone: (217) 782-9923</p>
<p>LOCAL AGENCY</p>	<p>26 IDHS Child Care Nurse Consultants in 16 service delivery areas (FY07)</p>
<p>BUDGET</p>	<p>\$1,605,000 (FY07)</p>
<p>FUNDING SOURCES</p>	<p>Federal: 33% State: 66%</p>
<p>TARGET POPULATION</p>	<p>Child care providers</p>
<p>GEOGRAPHIC AREAS COVERED</p>	<p>Statewide</p>

<p>PARTNERS AND PARTICIPANTS</p>	<ul style="list-style-type: none"> • Child Care Resource & Referral Agencies • Local health departments • Illinois Department of Human Services • Division of Specialized Care for Children • Illinois Department of Public Health • Division of Child and Family Services • Early Intervention • AOK Networks • Birth to Five Initiative • Illinois Department of Public Aid: CHIP – “All Kids”
<p>YEAR INITIATED</p>	<p>The Healthy Child Care America campaign was launched in 1995.</p>

Illinois Department of Human Services Automated Office Locator for WIC and Early Intervention Programs

PROGRAM MISSION AND GOALS	<p><u>Mission:</u> Illinois Department of Human Services Automated Office Locator for WIC and Early Intervention Programs is a fully automated, toll-free helpline accessible from 8:00am to 4:30pm, Monday through Friday, to assist families in accessing local WIC and EI office information. For other assistance, callers are directed to call the IDHS Customer Service Helpline at: (800) 843-6154.</p> <p><u>Goal:</u> To increase the level of self-sufficiency for Illinoisians.</p>
KEY ACTIVITIES	<ul style="list-style-type: none"> • Provide callers with local WIC and EI Office information • Computerized telephone system provides callers with immediate information by zip code
ADMINISTERING AGENCY	<p>Illinois Department of Human Services Office of Compliance, Access & Workplace Safety: Coty Murphy Phone: (800) 323-GROW/4769 (Helpline) or (217) 557-1711</p>
BUDGET	<p>This Helpline is now part of a larger Computer Telephone System and not easily broken into individual budgetary information. There is one full-time State employee and one full-time Contractual employee who field calls live. Health/Nutrition option of DHS Customer Service Helpline: (800) 843-6154</p>
TARGET POPULATION	<p>Pregnant women and families with young children</p>
GEOGRAPHIC AREAS COVERED	<p>Statewide</p>
STRUCTURE AND PROCESS	<p>Through the statewide toll-free number, families can receive information about local WIC and EI office information.</p> <p>Families learn about the Illinois Department of Human Services Automated Office Locator for WIC and Early Intervention Programs through magnets, brochures, other agencies, newspaper articles, directory assistance, and word of mouth. Reports on automated call information (numbers) are accessible.</p> <p>Callers directed to the IDHS Customer Service Helpline who choose the Health and Nutrition option receive information and referrals to WIC services, nutrition, childhood lead screening, pregnancy testing, family planning, Early Intervention services, medical care for pregnant and parenting teens and their children, child care, advocacy and support services, health care coverage, financial assistance, education and employment, medical providers, immunization sites, emergency services, etc.</p> <p>Monthly reports are also conducted on calls that reach a live operator via the IDHS Customer Service line to analyze number and diversity of calls, as well as the impact of campaigns advertising a particular program.</p>
PARTNERS AND PARTICIPANTS	<p>The Help Me Grow/Futures for Kids Helpline works with staff from the numerous state-administered programs serving children and families to ensure that program information is accurate and up to date.</p>
YEAR INITIATED	<p>1984</p>

Local Interagency Councils (LICs)

PROGRAM MISSION AND GOALS	<p><u>Mission:</u> Local Interagency Councils (LICs) have been established throughout Illinois to identify children from birth to age three in need of Early Intervention services, to identify and improve those Early Intervention services within the community, and to make them more accessible to young children and their families.</p> <p>LICs advise local Child and Family Connections agencies (CFCs) in the coordination of local services and resources necessary to implement a comprehensive system for screening and identifying young children with developmental delays or disabilities and delivering appropriate Early Intervention services to those in need.</p> <p><u>Goals:</u></p> <ul style="list-style-type: none"> • To identify children in need of Early Intervention services • To identify and improve Early Intervention services • To make Early Intervention services more accessible to children and families
KEY ACTIVITIES	<ul style="list-style-type: none"> • Conduct local needs assessments, identify service gaps and local resources to fill those gaps • Disseminate information to local CFCs and providers • Develop and implement strategies for public awareness and Child Find • Provide a forum to share and discuss local concerns
FUNDING AGENCY	Illinois Department of Human Services Bureau of Early Intervention Phone: (217) 782-1981
LOCAL AGENCY	44 Local Interagency Councils
BUDGET	\$607,000 (FY08) (Each of the 25 CFCs is given \$19,000 for LIC coordination for each LIC that the CFC supports, along with \$3,000 for materials, etc.)
TARGET POPULATION	Illinois children from birth to age three with a developmental delay or disability
GEOGRAPHIC AREAS COVERED	Statewide
STRUCTURE AND PROCESS	LICs are established in communities throughout Illinois to advise the local Child and Family Connections. An LIC Coordinator is hired by the CFC to facilitate the work of the group. Membership is open to all individuals in the community; participants are actively recruited when necessary. Meetings are held on a regular basis.
PARTNERS AND PARTICIPANTS	All stakeholders at the local level are invited to participate in the LICs. Representatives usually include parents, Early Intervention service providers, early childhood programs, health care professionals, school representatives, state agency representatives at the local level, other public and private service providers, and interested parties.
YEAR INITIATED	1997

Safe From the Start (SFS)

PROGRAM MISSION AND GOALS	<u>Mission:</u> Safe from the Start is a multi-year demonstration project to develop, implement, and evaluate comprehensive and coordinated community-based models to identify, assess, and respond to children ages 0-5 who have been exposed to violence in their home or community, as well as their caregivers. Exposure to violence is defined as being a victim of abuse, neglect, or maltreatment or a witness to domestic, physical, or sexual violence or other violent crime.
KEY ACTIVITIES	<ul style="list-style-type: none"> • Provide individual child and family therapy • Provide case management services • Create specialized services to identify and provide interventions for children exposed to violence • Provide training and support services to direct care providers around prevention and providing treatment for the psychological effects of young children's exposure to violence • Develop a public awareness campaign to educate the public and get input from residents • Develop a local coalition to collaborate and coordinate local efforts and services • Develop a model with potential for replication • Participate in technical assistance and evaluation efforts with Illinois Violence Prevention Authority (IVPA) and partners
FUNDING AGENCY	Illinois Violence Prevention Authority Phone: (312) 814-2796
LEAD AGENCY	<u>Cook County:</u> Chicago Safe Start (2 implementation and 2 planning sites)* <u>Cook County:</u> Children's Advocacy Center of Northwest Cook County <u>Cook County:</u> Pillars Community Services* <u>Peoria County:</u> The Center for the Prevention of Abuse <u>Madison County:</u> Phoenix Crisis Center <u>Macon County:</u> Macon County Child Advocacy Center <u>McLean County:</u> Children's Home and Aid* <u>Rock Island County:</u> Child Abuse Council <u>Southern Cook County:</u> South Suburban Family Shelter
BUDGET	Approximately \$1,500,000 (FY08)
FUNDING SOURCES	State Funds: GRF and Violence Prevention Fund: 100%
TARGET POPULATION	Children ages 0-5 who have witnessed violence and their caregivers
GEOGRAPHIC AREAS COVERED	Cook County (Englewood and Pullman neighborhoods on Chicago's south side; Lakeview, Uptown, Edgewater, Rogers Park, West Ridge neighborhoods on Chicago's north side*; Humboldt Park, Logan Square, Hermosa, West Town, Austin, Belmont Cragin, South Lawndale, Near West Side neighborhoods on Chicago's west side*), Northwest Cook County (Hanover Park, Hoffman Estates, Schaumburg, and Streamwood), Western Cook County (Lyons, Proviso, Riverside, Berwyn, Cicero, Oak Park., River Forest)*, Peoria County, Macon County, Madison County (Granite City, Madison, Mitchell, Pontoon Beach, and Venice), McLean County *, Rock Island County (East Moline, Moline, and Rock Island), and South Suburban Cook County (Blue Island and Calumet Park)

<p>PARTNERS AND PARTICIPANTS</p>	<p>Each pilot community has identified local collaborative partners, including representatives from the following types of agencies, as well as other secondary partners that vary by site:</p> <p>Local Area Networks (LANs), local health departments, local agencies providing domestic violence and sexual assault services, child advocacy centers, Family Violence Coordinating Council, local law enforcement, Illinois Department of Children and Family Services, Healthy Families sites, Head Start, preschool and early childhood programs</p>
<p>YEAR INITIATED</p>	<p>Three pilot sites (Madison County, Northwest Cook County, and Peoria County) initiated planning in January 2001, and began implementation in June 2001. In FY08, these three sites began their seventh year of implementation. Three new sites initiated planning processes in June 2002 (Macon County, Rock Island County, and South Suburban Cook County), and are now in their fourth year of implementation. Chicago Safe Start joined the IVPA Safe From the Start in FY05. In FY08, four sites (North and West Chicago Safe Start, McLean County, and Western Cook County) entered a planning year. In FY09 these sites will begin implementation.</p>

* In FY08, four SFS sites began a planning year. These sites will begin implementation in FY09.