IL Early Learning Council- Integration & Alignment Committee

Recommendations for Aligning Regional Intermediary Functions

Pre-read for ELC Executive Committee meeting

February 5, 2024

Project Objectives

Background

Illinois has a number of regional intermediary structures that support the Early Childhood Education and Care (ECEC) system by helping communities access and utilize State programs and funds to meet local needs.

Concern

They provide similar services but are governed by individual programs and State agencies, which has led to silos and duplication that makes it difficult for families and communities to access supports comprehensively.

Objective

The Governor's Office of Illinois asked the Early Learning Council, Integration & Alignment Committee (IAC) to review the functions of ECEC regional intermediaries and provide directional recommendations to increase efficacies, efficiencies, and alignments of regional supports.

Areas of focus

Regional Intermediaries in scope ¹:

- Child Care Resource and Referral Agencies (CCR&R) Child Care Assistance Program
- Child and Family Connections Offices (CFC) Early Intervention program
- Local Interagency Councils (LIC) Early Intervention program
- Birth to Five Illinois (B-5 IL)
- All Our Kids Early Childhood Networks (AOK)
- Coordinated Intake (CI) MIECHV Home Visiting program
- Regional Offices of Education (ROE)

Prioritized functions:

- Resource and referral / System point of entry
- Eligibility determination
- Case management
- Training & Technical Assistance (T&TA)
- Community development, elevating community voice

¹ The committee recognizes that this scope is not inclusive of the full ECEC system, and that these recommendations are based on the State's selection of regional intermediaries to focus on during this planning period as a first step to aligning regional supports.

Impact goals

Develop recommendations to integrate and align the functions of ECEC regional intermediaries to...

Create a more efficient, simplified, consistent, and seamless experience for families to connect to services.

Enable more collaboration between regional intermediaries and with local collaborations to improve services and align supports to local needs.



Increase provider capacity to make referrals by providing easier, more efficient navigation and systems.

Streamline operations and reduce duplication to increases funding efficacy and expand equitable access to services.

Approach to form IAC recommendations

	Review regional intermediaries & set goals	Identify opportunities	Formulate directional recommendations	Validate recommendations and prepare to implement
Timing	October 2022-April 2023	May-July 2023	July-September 2023	October-December 2023
Activities	 Overview of each regional intermediary presented to IAC in October 2022 meeting Cross-walk of regional intermediaries prepared and shared by IAFC (e.g., overarching purpose, goals, strategies of each) Goals and desired outcomes identified (April 2023 meeting) 	 11 IAC members shared ideas via interviews 70 stakeholders provided input via focus groups (parents, providers, community collaborations, and staff of regional intermediaries) Functional comparison (deeper dive) prepared by consultant to better understand overlapping services 	 41 IAC participants completed a survey to prioritize and build on ideas shared by field 3 IAC discussions to shape recommendations; open to public with 50+ in attendance Strong majority of IAC members voted to pass directional recommendations (September meeting) 	 Share recommendations with focus group participants to inform implementation planning Review IAC recommendations with ELC Executive Committee Develop final report and hand off to State planning teams

IAC Directional Recommendations

- Aligned
 Governance and
 Systems
- Align service area boundaries to simplify navigation and consolidate partnerships (CCR&Rs, CFC/LIC, AOK, CI, B-5 IL/ROE).
- Unify intake and application forms/processes for CCAP, EI, and HV to enable system points of entry to provide coordinated intake, eligibility determination, and referrals across ECEC programs (CCR&Rs, CFCs, CI).
- Integrated Intake & Referral Services
- Expand system point of entry's scope and capabilities to provide integrated intake, referral, and a "warm hand off" across ECEC programs (CCR&Rs, CFCs, CI).
- Develop a state-wide integrated intake & referral data system to streamline referrals between regional intermediaries & providers (CCR&Rs, CFC, CI, AOK).
- Streamline and consolidate support for referrals to community resources (CCR&Rs, CFCs, CI).

- Shared
 Community
 Development
- Merge regional intermediary councils and meetings to create one
 planning/reporting table per region for ECEC, coordinated by one regional
 intermediary and with a defined role and sufficient capacity for the other regional
 intermediaries to participate (CCR&Rs, LIC/CFC, AOK, CI, B-5 IL, ROE).
- **Develop a single, shared ECEC agenda** for each region that all regional intermediaries support (CCR&Rs, LIC/CFC, AOK, CI, B-5 IL, ROE).
- Unify needs assessments and parent surveys into one per region, and create universal access to this input. Reduce cadence of assessments/surveys to shift resources to driving change (CCR&Rs, LIC, B-5 IL, AOK).

Additional considerations

- Extend integrated intake & referral to include PFA/PFAE, PI, HS/EHS, and other DHS programs for families (e.g., WIC, Family Connects, etc.)
- Continue to analyze
 T&TA alignments but
 inclusive of all 3rd party
 providers and within a
 provider-focused
 context (e.g., Workforce
 Development)
- Define a model for supporting EC local collaborations more comprehensively and the role of regional intermediaries in this

Appendix

Insights (1/2): Review of regional functions (similarities/differences)

Program-funded supports common across contracts

			1 ource and Refe stem Point of E		2 Eligibility Determination	Case Management	T&TA (to providers, not staff)		5 Community Development			
		Intake services / referrals to State programs	Referrals to ECEC service providers	Referrals to community supports	Eligibility verification / Service plan development	Service coordination / experience monitoring	Technical assistance (Program and Systems)	Training (coaching, delivering training, credentials)	Facilitating commun- ication / collaboration	Needs assessments	Community planning (action)	Elevating family voice
State-wide Structures ¹	CCR&R (CCAP)	Light (varies)	X (child care)	X (Referral Specialist)	X (CCAP)	X (warm handoff)	X (CCAP)	X (safety, quality)	X (varies)	X (child care focused)	X (participates)	X (family survey)
	CFC (EI)		X (EI)	Light (if don't qualify)	X (EI)	X (El service plan)	X (EI)	Light (Social Emotional con- sultants)				
	LIC (EI)								X (Child Find)	Light		Light (council member)
	Birth to Five Illinois						Light (grant applications)		X (ECEC and adjacent)	X (Regional Needs Assessment)	X (Implemen- tation plan)	X (Family Council)
Not State-wide	AOK Networks	X (IRIS)	X (IRIS)	X (IRIS)			X (IRIS, AOK Connect)	X (coordinating cross-sector)	X (Prenatal, B-5 growth/ development)	X (CAPAP²)	X (Strategic plan²)	X (Parent Ambassadors, Family Engagement)
	Coordinated Intake (MIECHV-HV)	X (HV)	X (HV)	Light (if don't qualify)					X (Network partners)			X (parent members)

¹ ROEs are excluded here because they currently have no statutory requirements for Early Childhood; however, a few ROEs provide ECEC supports via public and private grants. 2 CAPAP = Community Assessment Planning and Action Process. Strategic plans related to Network Capacity, Information and Referral, and Child/Family Outcomes.

Insights (2/2): Input from the field - common themes

Function

Opportunities/Barriers

- 1 Resource and Referral / System Point of Entry
- Disjoint programs and systems cause families to work with regional structures individually and repeat burdensome intake and application
- Regional structures use and maintain different referral systems and databases (e.g., IRIS, Visit Tracker, CCR&R Provider database)
- Significant time is spent on building relationships and generating knowledge individually to provide community referrals and resources
- 2 Eligibility Determination
- Regional structures don't currently have the capacity, expertise, or access to do cross-systems intake and eligibility determination
- 3 Case Manage- ment
 - Differing, complex requirements makes it hard to enroll in programs and find service providers; parents need to be guided through this, but regional entities are not equipped to do this across programs
- 4 Training &Technical Assistance
- Disparate training requirements make it hard for regional entities to provide credit-bearing cross-sector training
- Multiple training systems makes it hard to help providers find training that meets their needs and provide cross-sector training
- 5 Community Development
- There are disparate agendas, structures, and unclear roles across regional structures; entities are supporting each other but not integrating efforts in most regions
- Duplicative meetings and activities spread resources thin (misaligned / overlapping service areas, individual needs assessments & surveys)
- Great variation in collaboration models across the State; concerns of sustainability, progress, and equity in many communities

"Intake is a real pain point for families; they are telling their story over and over." CCR&R

"A list of names is nice but having someone help you find help can make all the difference." FAC

"My CCR&R hosts so many good workshops but they don't meet my credentials so I don't attend." Provider

"B-5 IL has been great at bringing us together, but it is shaping up to be a regional silo like the others." Community Collaboration

"We have so many report-out meetings in our community; that time could be used to solve problems together instead." CI Worker

"Parents say, 'You know my story and I still can't find child care or preschool in my community." B-5 IL FACE

70 stakeholders across Illinois participated in listening sessions to discuss regional functions

Group	Stakeholders	Participants
Parents / Parent Voice	ELC – Family Advisory Council (FAC)	5
	B-5 IL Family & Community Engagement Specialists (FACE)	7
Providers	ECEC Providers: Child care, EI therapists, Home Visitors	11
Community	EC Community Collaborations	4
Collaborations	CI Workers	7
	AOK Networks	5
State-wide	CCR&R Directors	9
Regional structures	B-5 IL Regional Council Managers	7
	CFC Managers	8
	LIC Coordinators	7

