This report presents the recommendations of the Coordination of Social Services Action Group (CSSAG) to the governor of Illinois for the improvement of social services for children and parents within the state. Because of financial constraints, ways to develop a more efficient and effective social service delivery system must be found. To this end, the report recommends that the state focus on two goals: (1) the improvement of child and family well-being by providing services that stress school success, local empowerment, parental involvement, and prevention; and (2) the improvement of collaboration and coordination within and between state and local agencies. The report proposes the creation of a program in which the state will act as the initiator in a process of helping communities implement the new system of service delivery; and individual communities will form local governing boards of parents, school personnel, service providers, and community leaders to assess the needs of their community, identify services to meet local needs, and develop a family-focused delivery system. The report also proposes that, before implementing this program statewide, five pilot sites, at which services are offered to economically disadvantaged elementary school students and their families, be established. Two appendices list the membership of the CSSAG and its main goals.
School/Community Networks for Successful Families

Project SUCCESS

FINAL REPORT

from

Lieutenant Governor Bob Kustra
and the
Coordination of Social Services Action Group

Presented to
Governor Jim Edgar

September 1991
The Honorable Jim Edgar  
Governor  
207 Statehouse  
Springfield, Illinois 62706  

Dear Governor:  

In accordance with your goal of developing a more efficient and effective system for delivering health and social services to children and their families in a school-based setting, I recently assembled the Coordination of Social Services Action Group, made up of educators, community-based providers and state education and social service agencies to assist me in this task.  

Today, I present our recommendations for a new system of service delivery that promotes collaboration among state and local agencies. The effective implementation of this program will result in healthier and stronger families and children who will come to school prepared to learn.  

We propose that the experiment first be piloted in five different settings across the state. After evaluating the pilot projects, we would move next to statewide implementation.  

I am indebted to the members of the Action Group who gave up their summer to devote many hours developing this innovative project. Their efforts can make Illinois a national leader in efforts to take fragmented services available to our families and combine them into a cohesive and common sense program of social services for our kids.  

I stand ready to join you in the implementation of Project SUCCESS and will be available to address any questions you may have.  

Sincerely,  

BOB KUSTRA

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Executive Summary

The State of Illinois has reached a crossroad in its attempt to provide unlimited services to an ever growing at-risk youth population. The state can no longer afford to develop new programs on top of current services to create a productive citizenry. Instead, this Administration will strive toward the development of a more efficient and effective system of service delivery which will remedy problems at the source and promote prevention.

To that end, Lieutenant Governor Bob Kustra, at the direction of Governor Jim Edgar, formed the Coordination of Social Services Action Group and charged them to develop a new system of service delivery linking the children in schools with the health and social services provided by many local and state agencies.

The Action Group worked through the summer and brought back its recommendations to the Lieutenant Governor on August 5. This report brings those recommendations together to form a new collaborative system of service delivery in the State of Illinois.

The Model

The Action Group developed a system that embraces two goals:

- Improvement of the child and family well-being by providing services that stress school success, local empowerment, parental involvement, and prevention; and

- Improvement of collaboration and coordination at and between state and local agencies.

The new system incorporates six characteristics that emphasize flexibility, local development of needs and resources, and family-focused services that will ensure success. The system also identifies six core service components that each community must address.

State Level Responsibilities

The state will act as the initiator in this process to assist communities in the implementation of this new system of service delivery. Once the local sites master their responsibilities, the state role shifts to a collaborative partner working together to reach their identified goals.
For the state to take on the role of preparing communities for this process, several changes and responsibilities need to take place. The state will:

Form a Steering Committee made up of high level agency staff, Governor's staff and the Lieutenant Governor to oversee the program;

Identify a staff person from each social service agency at the local site who will act as the Agency Liaison;

Identify a Program Coordinator to work with the project on a day-to-day basis;

Attempt to raise private funds or provide directly, seed funding for five pilot sites;

Work with local sites to examine ways of redeploying existing services resources;

Train state agency and community leaders and providers to ensure success of this program;

Evaluate this program to determine the most effective methods for statewide replication;

Provide a service directory to each community informing them of the vast range of services the agencies now provide; and

Host five Information Conferences to unveil the program to interested communities.

Local Communities' Responsibilities

Communities will form a Local Governing Board comprised of one-third parents, no more than one quarter school personnel, and the remaining members chosen from the providers and leaders of the community. The main objectives for the Board are to assess the needs of the community, identify services to meet the needs from local and state providers, and develop a delivery system that is family-focused. Each Local Governing Board shall have a Project Coordinator to implement the Board's directives and act as the collaborative force of the community.

The Local Governing Board and community leaders must also:

Send a delegation to one of the state-sponsored Information Conferences;

Attend all scheduled training sessions;

Send representatives to quarterly networking meetings to assist in further development of the program;

Provide space in or near the school for the Project Coordinator and possibly service delivery;

Submit required progress reports and assist in the evaluation of the project.
Implementation Steps

Before implementing this program throughout Illinois, the state will select five pilot sites geographically spread in two urban settings, one suburban site, one middle-sized community, and one rural site.

Interested communities will apply for selection through an application process. Each interested local site will send a delegation made up of one elementary school representative, one community-based provider, and one other community representative to one of five regionally held Information Conferences hosted by the state. The conferences will provide greater detail about this program and the application process.

Service Population

The group recommends, that for the five pilot sites, the eligible population shall consist of all students in an elementary school; however, the school must serve a minimum of 20% economically disadvantaged children which the school can define using any of the established indicators such as the federal free or reduced lunch count, the Chapter 1 count, the Public Aid match count, etc.

Program Name

The official name of this program shall be:

School/Community Networks for Successful Families

The short version of this name shall be: Project SUCCESS
Introduction

Every day, 100,000 American children are homeless; every 47 seconds a child is abused or neglected; every 53 minutes, another child dies because of poverty. Such social problems that elevate stress in children, families and communities have emerged during the past twenty years at alarming and unprecedented levels. The resulting demand on systems to provide individual services has prompted the collaboration of agencies to provide coordinated, comprehensive assistance.

This Administration firmly believes that Illinois’ future depends upon successful families and that all children should be valued as individuals with inherent worth and viewed as a community resource. The entire community shares responsibility to provide for children, utilizing a full range of resources and talents. Therefore, intervention should not be limited to responses by government, but should include less formal involvement of family, neighborhoods, charitable organizations, and religious groups when appropriate. To this end, the Lieutenant Governor, at the direction of the Governor, established the Coordination of Social Services Action Group, comprised of state agency directors, state and private social service providers and educators (see Appendix A).

The Lieutenant Governor charged the Action Group with the task of developing a system of comprehensive coordination of health and social services for the child and family to ensure that all Illinois children come to school prepared to learn (see Appendix B).

The Action Group divided up into four subgroups: framework development, social service development, funding development, and training and evaluation. This committed assemblage of people met long hours throughout the summer and drafted a system of service delivery to children and their families.

On August 5, 1991, the Coordination of Social Service Action Group reconvened and presented Lieutenant Governor Kustra with its recommendations. This report brings those recommendations together to form a new collaborative system of service delivery in the State of Illinois.
The Model

A major challenge in a project such as this is turning the theoretical discussions and creative thoughts into something both concrete and practical. To begin this process, the Action Group developed a mission statement which reads,

"The State of Illinois is committed to promoting coordination and collaboration at the state and local level to improve health and social service delivery to students and their families. In order for this to take place, state agencies will work with parents, local-based social service agencies, schools and community groups to identify, integrate and utilize existing resources in the most effective manner possible."

With a mission statement that captures the spirit of the project, two goals emerged as a follow-up.

Goal Number 1

Improve the well-being of the child and family by providing services that place a strong emphasis on:

School Success

Although the state recognizes that there are countless variables that influence the success of students, this pilot seeks to eliminate the most significant systemic barriers, and thereby make it easier for students to concentrate on their education and future.

Local Empowerment

Services delivered through this health and social service program should enhance and facilitate the local community's effectiveness in addressing the community health and social service needs. Interaction among providers, parents and state level agencies in this new model of service delivery should be characterized as a partnership.

Parental Involvement

Parents should be assisted in recognizing their capabilities, as well as encouraged to learn new skills that can be used to mobilize resources to meet the family's needs. By promoting positive interaction between child and parent, parent and school, and school and community, this program should have a meaningful impact on the achievement and aspirations of students.

Prevention

Providing services that deter or eradicate the occurrence of student and family problems will help reduce the likelihood or prevalence of poor performance in school.
Goal Number 2

Improve collaboration and coordination at and between state and local level service-providing organizations.

This State can no longer afford to service families in a fragmented system. Agencies must begin the process of working together to develop, in collaboration with local communities, new methods of delivering services more effectively to families.

Both of these goals encompass the belief that to ensure Illinois' future economic prosperity, the state must produce a more qualified work force. This fundamental economic realization leads to a markedly different role for state government. In addition to providing health and social services that remedy specific problems, the state must provide services that build the family through a community driven educational and social service system. This is not only the most efficient way to build and improve the quality of Illinois' work force, it is an effective way to develop economic self-sufficiency in the state's most disadvantaged communities.

The characteristics that will make this model successful are flexibility and local empowerment, particularly for the parent and collaborating agencies. The program must be flexible to meet the unique needs of the community it serves. While this may seem a basic concept, traditionally programs of this sort have a rigid structure into which the community must fit. In this new model, the community is the structure, and the program must be made to fit into the community. Through the planning process, parents and other community members will identify both the needs and resources of their particular community. The state will then work with the community to provide the support, technical assistance and resources necessary to fully implement the plan. The specific characteristics are as follows:

The framework must have the flexibility to enable any community to participate as a pilot site.

Because most families need support, regardless of their socioeconomic status, communities must develop a defined set of services available to all children and families in the pilot area.

Within the program framework, communities must have the latitude to determine their service priorities, their level of need and their means of delivery.

Parents must have increased opportunities for involvement in influencing and improving the lives of their children and family.

Services must be child-centered and family-focused.

Service definition and delivery will be collaborative in nature.
The final general area of the model involves core services. If the model is to succeed, it must be flexible enough to be accepted and used in all communities, but that flexibility cannot ignore the need to deliver essential core services. The following list identifies the six **core service components**. These core components are specific student/family problem areas for which all sites must either demonstrate that effective interventions currently exist or develop new services that support and contribute to the wellness of students and their families:

- **Ensure access to basic health care for child and family;**
- **Ensure access to proper nutrition and nutrition education;**
- **Ensure access to preventative and rehabilitative mental health services for child and family;**
- **Ensure access to services that will protect children and promote the stability of the family;**
- **Ensure access to substance abuse prevention, intervention and treatment of children and their families; and**
- **Ensure access to social activities which enhance positive interaction within families.**

This list of core service components reflects the effort to strike a balance between the need for flexibility at the community level and the desire of the state agencies to have administrative and programmatic consistency at all pilot sites. The resulting agreement proves that while flexibility is critical, some essential needs should be addressed in every program. A local community may identify other needs which require service development and delivery on top of these six core service components.
State Level Responsibilities

After completing the foundation and characteristics of the program, the Action Group proceeded to develop the state and local structures. The group identified collaboration as the essential concept for the success of this program. They defined collaboration as the process to reach goals that cannot be achieved by acting singularly. While this seems to be a simple concept, significant changes need to take place in the relationships between local service providers, state agencies and the families themselves.

The major change required involves placing the needs and concerns of organizations second to the goal of having as many children as possible enter the classroom ready to learn by providing comprehensive services to students and their families. In doing so, participants at both the state and local level must have jointly developed goals and directions, shared responsibility for obtaining those goals, and a commitment to working together to achieve these goals efficiently and effectively by using the strengths of each collaborator.

At the state level this process will occur through a Steering Committee. This committee will be appointed by the Governor and be comprised of the Lieutenant Governor as the Chairman, Health and Human Service Agency Directors and the Superintendent of Education or their designates and the Governor's appropriate staff. Initially, the responsibilities of this body will include further defining the state agencies' role in the model project, overseeing interagency collaboration and identifying existing resources available for the model sites and funds that may come available in the future. The Steering Committee will hold regular meetings to discuss these issues. After successful implementation has occurred, the steering committee will be involved in problem resolution, policy development activities, and meet less frequently.

In addition to the Steering Committee, the state also will identify a Program Coordinator from the Lieutenant Governor's office. This person will act as the state contact person for any questions or concerns regarding the program. This person's duties will include coordinating the local sites, serving as liaison between the Steering Committee, Agency Liaisons and Governing Boards, ensuring appropriate training and evaluation and promoting awareness of the project.

Each state agency also will identify a local Agency Liaison who will assist both the Program Coordinator and the community sites. These liaisons will attend Governing Board meetings, assist in problem resolution, and promote collaboration at the site as needed with the other Agency Liaisons. Although each site will have seven Agency Liaisons at its disposal, the state will identify one of the seven as the Lead Agency Liaison who will assist the site in implementation and collaborate with the other Agency Liaisons to address the site's needs and concerns.

The state will assist the local sites with the issue of funding. The primary goal is to encourage communities to develop creative funding resources and budgets at the local level. However, the state may need to provide some seed funding assistance. The state will attempt to raise up to $90,000 per site in seed funds from the private sector for an 18-month pilot time period ending June 30, 1993. If private resources do not materialize, greater onus will be placed upon the local sites to find these funds. The state will grant up to $25,000 per site annually if private sources cannot be found.

Besides the initial seed funding, the state will provide local sites with resources for training, evaluation, and services. Delivery of state services will occur through a collaborative effort between the local community and the state agency involved. The state will work with the communities to redeploy existing resources when possible to meet the identified needs of the local site.
The state also will be responsible for developing methods by which federal funds can be accessed and funneled to the local communities. Recommendations call for the Department of Public Aid to assist in the enrollment of community-based providers who service medicaid eligible clients which will result in increased federal matching funds for the community. The state agencies will also assist the sites with identifying state, federal, and private grants that apply to this program and providing technical assistance to complete the grant applications.

Training of state agency representatives and local community participants also will fall under the responsibility of the state. The Program Coordinator will train the Steering Committee members to ensure they have full understanding of this project. The Steering Committee members will in turn train their state agency staff which they have identified. That training will consist of a comprehensive explanation of the project and an analysis of the local community's needs which have been identified from the application. The state will also work with the Project Coordinators to provide training to the Local Governing Board members, school personnel and other participating local agencies.

Evaluation of this project is another critical area of responsibility for the state. The evaluation should measure the program's impact or effect on the children and their families and also focus on the internal procedures, staffing and management of the program as a whole. The evaluation process will develop baseline data for quantitative and qualitative measures which will be used to show and compare improvement as a result of this project. The Program Coordinator will oversee the development, implementation and analysis of the evaluation process.

Before the pilot sites are selected, the state will develop and host five Information Conferences held at various locations across the state. The purpose of these Conferences is to unveil the program to interested communities, presenting them with the specifics of this project, the components of the application, and ideas for collaboration, funding and services.

At the Information Conferences, the state will provide to each community a service directory which lists all services state agencies provide that relate to this project's core service components. Each state agency will identify and provide to each selected local community pilot site, a list of community-based organizations funded by the state agency to provide the core service components. The state also will provide public relations services to market this project and to help the communities learn of its existence.

In summary, the state agencies will take on a new role in providing services to local communities. That role will consist of empowering local communities to determine their own needs and actively working with the community to provide services to meet the needs of children in school and their families.
Local Communities' Responsibilities

The key to the success of this program is using the above described state structure to help communities help themselves. The first step toward empowerment of the local community is the development of a governing board. To eliminate legal liability problems, the Local Governing Board will be housed under the umbrella of a community-based not-for-profit organization. The community will determine the size of the Local Governing Board, but the make-up of the board will be comprised of one-third parents, no more than one quarter school personnel, and the remaining members chosen from local service providers including hospitals, local affiliates of state agencies, members of the business and civic community, local elected officials, law enforcement and legal service providers, etc. The duties of this Board include but are not limited to the following:

Development of Community Goals

- Completion of student and family needs assessment including technical assessment and staff needs.
- Review of community service capacity to meet identified needs.
- Prioritization of service needs.
- Identification of service population for the community.

Collaborative Efforts for Service Delivery.

- Identification of existing state services in the community.
- Identification of gaps in services needed.
- Solicitation for new services from local and state agencies.
- Development of service delivery mode for children and families.

Administrative Oversight

- Hiring, evaluation, supervision and termination of Project Coordinator.
- Training of all local participants.
- Conflict Resolution.
- Policy Development.
The Local Governing Board's primary function then, is to act as a collaborating force in the community. The Board will determine the needs of the students and their families, develop a family-focused mechanism to deliver the services and then work with local service providers and state service agencies to ensure all needs are met in an efficient and effective manner.

With the Local Governing Board overseeing implementation in the community, each site will have a Project Coordinator to oversee implementation at their individual site and serve as the local level administrator. The Project Coordinator will have the following duties:

- Coordinate services at/throughout the site;
- Act as liaison between involved parties;
- Solicit case managers among current personnel in local and state agencies;
- Assign cases to case managers;
- Follow-up;
- Plan family activities;
- Develop community outreach programs;
- Organize training for all aspects of the program; and
- Set Advisory Board meeting times and locations.

The application proposed by the state is crucial to the initial process for the communities. In the most basic sense, it fosters collaboration by having involved parties work together before being selected as a site thus increasing the likelihood of continued commitment to the concept should they not be selected as one of the five pilot sites.

The applicant should be required to identify or develop a directory of local services as part of the application process. This activity will increase knowledge of the local services available to students and their families, and will assist the applicants in determining any service gaps. The budget submitted as part of the application should reflect similar goals. The applicants should identify all project costs by line item and local sources of revenue to fund the projected costs including in-kind contributions.

The role of the parents is also essential for the success of the project. Too often there is a lack of communication between those providing services and the family. Many families are actively involved in the education, health care and social services prior to their children entering school. However, for many, this involvement ends when the child enters school. Involvement in the Governing Board should help to maintain interest in the services provided to the children. For these reasons, family members must be an integral part of the Governing Board and should participate in all facets of the project including the proposal development process.

Training is another vehicle to foster collaboration. School and community participants will train together as one unit. The participants in local level training will then disseminate training information to their respective organizations and will provide documentation to the Governing Board that training has occurred within their organization. The Governing Board will oversee local level training and provide documentation to the Project Coordinator that appropriate training has taken place. This information will then be used by the Program Coordinator for evaluation purposes.
In return for the services provided by the state during development and implementation, the state will expect certain requirements from every local community interested in implementing this project. The following is requested from each site:

A delegation from the community must attend the state-sponsored information conferences to receive additional information and the application.

The Project Coordinator and other active participants from selected sites shall attend all scheduled trainings.

Staff from sites shall attend networking meetings for representatives of all pilot sites. These meetings will be sponsored by the Governor's designee and/or state level steering committees.

The sites selected for participation will provide space in or near the school to establish services and will provide office space for the Project Coordinator.

The Project Coordinator in conjunction with the Local Governing Boards will submit regular reports of progress to the Program Coordinator.
Implementation Steps

This report has outlined the state's new initiative to coordinate social services available to children in school and their families. The Action Group developed this new system to work in any community in the state eliminating any barriers to become a statewide program. However, the Action Group recommends that before implementing this program throughout Illinois, the state should pilot it in five communities. The five communities selected should be geographically spread and also consist of 2 urban settings, 1 suburban site, 1 middle-sized community and 1 rural community.

The Action Group further recommends that the state develop a comprehensive application process to determine the location of the five pilot sites. There are many perceived barriers to achieving the necessary coordination and collaboration that can be resolved through an application process designed by the state. Through the application process, communities will identify potential concerns and begin addressing them. The application should require the following:

- Prepare a summary of organizations that exist within the community for potential networking;
- Describe in some detail the method to be used to determine the need for collaboration and to receive recommendations from both the community and the participants in the design and character of the collaborative efforts;
- Develop a plan for delivery of services that includes a description of the current "status" of collaboration in the community and how it could be improved, identify agencies for collaboration including the scope and impact of the services they provide and identify collaboration and/or service barriers; and
- Establish a timetable for meetings to encourage linkage between agencies.

All communities interested in participating in this project must send a delegation of three people (one from the school, one from a community-based service provider, and one other community representative) to one of five state-sponsored Information Conferences. The Conferences will provide additional detail about the project and provide the application materials which the communities must collaboratively complete.
The Governor's and Lieutenant Governor's Office staff will review the application submissions and choose the five sites in early January, 1992. The application form will describe some of the criteria required of the applicants. They will include:

A stipulation that the school or schools being used in the model must be elementary schools with a minimum population of 20 percent economically disadvantaged students, which may be defined by the school using any one of a number of indicators such as Chapter 1, federal free or reduced lunch, public aid match, etc.

Details of what is expected from the non-for-profit organization that will house the project.

Details of what is expected from the organizations that have signed up to be part of the collaborative process for service delivery.

A proposed spending plan, including the amount of funds and in-kind resources from the local community.

The content of the needs assessment and service delivery model.

The Action Group identified several advantages to pursuing the comprehensive application process. Once the local communities begin the collaboration process required by the application, they may realize that even if they are not accepted as one of the pilot sites, they can continue to implement the project. The state will choose five pilot sites for evaluation purposes, but will work with other sites who wish to pursue full implementation of this new system of service delivery. The only difference between the five selected pilot sites and the other sites is seed funds will not be allocated. The Action Group does not expect funding to be a major constraint for the implementation of this project. After all, the most the state will attempt to raise from the private sector is $60,000 annually per site and, if that should fail, the state due to a tight budget year, will only grant $25,000 annually per site. The human resources harnessed in each community will prove to be the greatest asset for the success of this project, and will be one of the strongest criteria used for selection of the pilots. Collaboration within the community, not the amount of funding required, will drive the selection process.

The other advantage to using a comprehensive application process is the marketing across the state that will occur when the state notifies groups of this proposal. A descriptive flyer will be mailed out to elementary schools, community-based organizations, business groups, PTA groups, local government officials, and other interested groups to alert them of this new venture sponsored by the state. This will start the collaborative process that needs to occur in the local communities.
Service Population

One of the most difficult issues discussed among members of the Action Group was the age range of children this project will serve. After lengthy debate, the group recommends that only elementary schools be selected for the pilot sites. This means that all students in an elementary school building, including pre-schoolers, will form the eligible population for this program.

The goal of this program from the beginning, as directed by the Governor, is to provide coordinated and comprehensive services to children and their families from birth to graduation. There is no question that this must be the end product of the program. However, the question that must be asked is what age group is appropriate for the test pilot sites.

The decision to focus the first year model on elementary schools and their families is based on many factors. In the past few years, a great deal of emphasis has been placed on collaboration of services and parental involvement through early intervention initiatives. However, this system breaks apart when children reach school age. Services are no longer readily accessible and parental involvement wanes as children progress through the school system. By focusing the efforts of the first year model, the program simply continues to practice effective intervention and encourages the continued involvement of parents in the child's growth and learning process.

Evaluation of the program would also become more difficult if the program focused on different grades at different sites. By having five sites across the state focusing on the same population, the state will be able to more accurately measure the effectiveness for statewide replication. Mistakes will be more easily identified and corrected before expanding the service population.

Finally, this focus is realistic. There is an enormous amount of work to be accomplished at the local and state level in terms of training, organizing and putting together a program for this population. Focusing on a larger population would only increase the chances of initial failure without giving this program the chance to grow and develop through a series of successes. This is not to say that a site, if capable, cannot go beyond this minimum requirement. This project is family-focused, therefore services will be provided to all ages as needed. The elementary school is merely a starting point.
Coordination of Social Services Action Group Membership

Education and Community Based Service Providers:

Ann Alvarez, Director, Casa Central
Judith Block, Director, Child Welfare League of America
Barbara Bowman, Executive Director, Erickson Institute
Dr. Clinton Bristow, Jr., Board President, Chicago Board of Education
Judy Carter, Executive Director, Family Resource Coalition
Dr. Mary Davidson, School of Nursing, Southern Illinois University
Karen Dorn, Teacher, Central Elementary, Arlington Heights, IL
Jerry Erikson, President, United Charities
Dr. Richard Fairgrieves, Regional Superintendent, Boone, Winnebago Counties
Mary Finley, St. Anthony's Hospital, Effingham, IL
Sherry Fachey, Teacher, Fairview School, Springfield, IL
Mary Gherardini, Eastern Illinois Special Education Cooperative Office
Russ Hagen, President, CEO, Chestnut Health Systems, Inc.
Roger Hannon, Director, Pulaski Alexander Mental Health Association
Calvin Jackson, Superintendent, Prairie Central School District
Keith Kasper, Special Education Teacher, Fenton High School
Joan Kennelly, University of Illinois at Chicago, School of Public Health
Barbara Labino, Parent, Chicago, IL
Vince Lane, Director, Chicago Housing Authority
Rosa Maria de Lopez, Director, Early Intervention, El Valor Corporation
Dorothy Marks, School Nurse, Chicago Public Schools
Marcene Mitchell, Vice President, Geller and Company
Ron Moorman, Executive Director, Child Care Association of Illinois
Barbara Murphy, School Nurse, Mount Vernon City School District
Mary Nelson, Executive Director, Bethel New Life
Greg Petty, Social Worker, Treatment and Learning Center
Robert Rogers, Superintendent, Bluffs School District
Carmen Samples, Social Worker, St. Charles School District #303
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Jackie Settles, Coordinator, East St. Louis Housing Authority
Nancy Shier, Executive Director, Kids PEPP
William Southwick, Director, Youth Outreach Services
Matthew Stagner, Assistant Director, Chapin Hall Center for Children
Jerome Stermer, Executive Director, Voices for Illinois Children
Howard Veal, President, Springfield Urban League
Marsha Zierk, Counselor, Burlington Central High School, Elgin, IL
State Agency Directors:

Phil Bradley, Department of Public Aid
Robert Leininger, Superintendent, State Board of Education
James E. Long, Department of Alcoholism and Substance Abuse
Dr. John Lumpkin, Department of Public Health
Audrey McCrimon, Department of Rehabilitation Services
William K. Murphy, Department of Mental Health and Developmental Disabilities
Sue Suter, Department of Children and Family Services
Joan Walters, Bureau of the Budget

State Agency Staff:

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Carrie Kahl, Assistant to Executive Assistant, Governor's Office
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Gary Laszewski, Assistant to Lt. Governor for Education, Lt. Governor's Office
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Karen Loeb, Assistant to the Governor, Governor's Office
Dr. Mary Ann Louderback, Executive Assistant for Education, Governor's Office
James Nelson, Associate Director of Public Health, Office of Community Health
Felicia Norwood, Executive Assistant for Health and Human Services, Governor's Office
Judy Pierce, Associate Deputy Director, Department of Rehabilitation Services
Geanine Pirc, Elementary and Secondary Coordinator, Lt. Governor's Office
Dr. Leigh Steiner, Associate Director, Department of Mental Health and Developmental Disabilities
Winnie Tuthill, Assistant to the Chief of Staff, State Board of Education
Lori Williams, Assistant to the Director, Lt. Governor's Office-Rural Affairs
Coordination of Social Services Action Group

Charge to the Group

The Governor of the State of Illinois requests the participation of state social service agency directors, the Superintendent of the State Board of Education and private social service and advocacy organizations to offer recommendations regarding the coordination of health and social services for the child and family to ensure that all Illinois children in school are prepared to learn. These recommendations should:

- Develop a flexible framework for local schools/communities to adopt and mold in order to implement a system for coordination of social services for the child and family.

- Develop ideal social services that should be provided to the child and his/her family including case management, and identify current resources available for service delivery to them.

- Develop/define potential sources of funding, especially reprioritization of existing state agency operations and grants.

- Design a mechanism for follow-through, evaluation, and training of all personnel who will interact with the child and family.