

Illinois Early Learning Council (ELC) Health and Home Visiting Committee (HHVC)
Monday January 13, 2025
2:30 pm – 4:00 pm

Draft Minutes

Co-Chairs: Joanna Su, Diana Rauner
Staff: Jean Davis, Kayla Goldfarb

Participants: Donna Emmons, Lori Orr, Abby McCartney, Abby Snow, Alicia Lynch-Deatherage, Alli Lowe-Fotos, Ana Mendez, Ann Erickson, Aussannette Garcia-Goyette, Beza Bulega, Brenda Solorzano, Brittany Hale, Catrena Lones, Cecilia Leal-Camacho, Celena Sarillo, Charles Dooley, Chrissi Guarnieri, Cindy Rodriguez, Collen Cicchetti, Dan Harris, Delreen Schmidt-Lenz, Elizabeth Rodgers, Elizabeth Smith, Gia Moore, Glendean Burton, Ireta Gasner, Janique McCowan, Jeni Weisiger, Jennifer Vidis, Jenny Martin, Jermaine Hughes, Jessica Wilkerson, Jon Korfmacher, Katelyn Kanwischer, Katie Wise, Laronda, Laura Barrett-Kane, Laura Beavers, Lesley Schwartz, Lisa Weah, Robin Chaney-Jones, Lorena, Lori Carroll, Maria Aguilar, Marsha Shigeyo Hawley, Megan Adamczewski, Melissa Box, Nancy Salvador, Paula White, Penny Smith, Rose Malloy, Rowan Atwood, Sandra Cartagena, Sandy Schultz, Shauna Ejeh, Sherneron Hillard, Shewandia Johns, Tamara Sanders-Carter, Tia Staggers, Ticorral Tolliver, Tracy Small, Vivian Moreno, Viviana Deltas, Whitney Walsh, Lisa Masinter, Timika Anderson-Reeves.

I. Welcome and Agenda Review

The meeting was called to order at 2:35 pm. Co-Chair Joanna Su welcomed the participants. She called for a volunteer to read the ELC Racial Equity Definition:

A racially equitable society values and embraces all racial/ethnic identities. In such a society, one's racial/ethnic identity (particularly Black, Latino, Indigenous, and Asian) is not a factor in an individual's ability to prosper. An early learning system that is racially equitable is driven by data and ensures that:

- Every young child and family regardless of race, ethnicity, and social circumstance has everything s/he/they need to develop optimally.
- Resources, opportunities, rewards, and burdens are fairly distributed across groups and communities so that those with the greatest challenges are adequately supported and not further disadvantaged; and
- Systems and policies are designed, reframed, or eliminated to promote greater justice for children and families.

II. Home Visiting Data Review

Co-Chair Diana Rauner began the discussion on data across the different funding streams to examine the state of the home visiting (HV) system in Illinois and to understand trends, utilization, enrollment, and personnel. This gives the HHVC Committee an opportunity to review the data collectively to see how we are doing in terms of serving and supporting children and families with HV services. Slides were developed by Kayla Goldfarb and Rowan Atwood from Start Early.

Kayla Goldfarb - Discussed and shared data relating to the following: Program enrollment trends, total state funding and children served, Trends in Children Served, Total children served by Funder and Year, ISBE PI Children Served by Year, EHS/HS Children Served by Year, Start Early Children Served By Year, IDHS Children Served By Year, Workforce Themes as reported by funders FY24, Programmatic themes as reported by funders FY24, Workforce themes as reported by funder FY25, and FY25 Funded Capacity Slots.

This data shows the effort of the HHVC to monitor workforce data, number of families served, and how those trends change from year to year. There are variations on how data is collected. The HHVC wanted to look for the common ground elements that we can analyze across all funders.

III. State Agency Updates

Illinois State Board of Education - Penny Smith: The ISBE Prevention Initiative [FY26 RFP NOFO Intent to Apply is posted](#) on the ISBE Early Childhood webpage. The deadline was listed as 12/30/24 but the link was still active. Therefore, those grantees seeking to expand a current PI program or start a new PI program may complete the form. Details will be shared when the RFP is posted. The dates for the PI Forum are 4/2/25 and 4/3/25 and it will be held in Urbana at the Illini Union. The theme will be "Stronger together, building connections, and strengthening systems." More information is forthcoming. ISBE has an Early Childhood newsletter, and it is posted on the [Early Childhood webpage](#) on the ISBE website. Those who wish to receive those newsletters can go to the current newsletter. There is a place to sign up for future newsletters.

Illinois Department of Human Services Division of Early Childhood – Joanna Su: The HHVC plays an important role as part of the ELC and serves as an advisory board for Illinois' federal funding from the Maternal Infant and Early Childhood Home Visiting program (MIECHV). Joanna reviewed slides with an overview of IDHS' home visiting work.

IDHS has multiple funding streams: MIECHV (federal), state general revenue funds (formerly known as Healthy Families Illinois), Maternal Child Home Visiting (MCHV, formerly known as Parents Too Soon). For all three funding streams, IDHS provides grants for direct services to families, as well as support for the state's home visiting infrastructure. The infrastructure for IDHS includes coordinated intake in selected communities, data, policy and planning, work with priority populations, professional development, and program quality assessment.

Since the inception of IL MIECHV in 2012, IDHS has supported coordinated intake for home visiting in selected communities. In our March 2025 HHVC meeting, IDHS anticipates having a presentation on what we are learning from coordinated intake communities, as well as some innovative practices from Lurie Children's Hospital's Connect Home Visiting Chicago Program.

Illinois Department of Healthcare and Family Services - Timika Anderson-Reeves: HFS was funded for the Transforming Maternal Health (TMaH) Model, and the press release went out last week. Their areas of focus will be Rockford and Aurora. In addition, HFS is working on Medicaid provider types and had a press release in December for their doula and lactation provider types; provider trainings are being scheduled. In the area of home visiting, HFS is working with their sister state agencies and currently strategizing what implementation will look like for that new provider type. HFS must first determine what the rate for reimbursement will look like. More information is forthcoming.

- TMAH Press Release: <https://hfs.illinois.gov/info/media/press-release.30795.html>
- Medicaid Coverage of Doula Services Press Release: <https://hfs.illinois.gov/medicalproviders/notices/notice.prn241219b.html>
- Medicaid Coverage of Lactation Consultation Services Press Release: <https://hfs.illinois.gov/medicalproviders/notices/notice.prn241219c.html>

Illinois Department of Public Health - Lisa Masinter: This summer IDPH will release the Title V State Maternal Child Health Block Grant annual report which will include the strategic plan and needs assessment. The strategic plan will be aligned with the work of the HHVC. The IDPH annual report will be available for public comment. This year the annual report will include the new strategic plan, which will be their direction for the next 5 years. IDPH is brainstorming on how they are investing their resources across the state. They are also working on a project called the “Birth Equity Blueprint.” IDPH is collaborating with the University of Illinois Chicago (UIC). IDPH is looking forward to the engagement of the HHVC and hopes that the “Birth Equity Blueprint” will be a launching pad to get people more engaged across the state involved in the work of the Maternal Health Innovation grant (formerly known as I-PROMOTE). The draft Blueprint should be available for the public in Spring 2025.

IDPH issued a Birth Equity grant opportunity. They received approximately 40 applications, which are currently being reviewed. IDPH stated they hope to inform grant applicants if they will be receiving funding by the end of this week.

Lisa also informed the HHVC that an important regulatory change will be coming out of IDPH in this calendar year, which has to do with the birthing/prenatal levels of care. One of the things this regulatory change aims to do ensure that people are being cared for in the risk appropriate setting, for both maternal care and neonatal care. This regulatory change is a significant change to the current model and will have many implications for maternal and neonatal health and perinatal health.

IV. IDHS Home Visiting FY26 Priorities - Listening Session

Lori Orr discussed Priorities for FY26 IDHS Home Visiting. Feedback from the focus groups conducted by Prenatal to Five Fiscal Strategies as part of the cost model development revealed constant challenges with recruitment and retention, need for additional administrative staff to implement the home visiting program and increasing salaries for home visiting staff. The priorities for IDHS in FY26 include increasing compensation for home visiting including considerations for supervisors and equitable allocations of funds to home visiting programs based on the program costs and available resources and funds. Any decisions made by IDHS will be contingent upon state appropriation.

Beza Bulega from Afton Partners informed the HHVC that we will be using Padlet to capture any conceptual questions or reactions and will be asking the group questions via Padlet. The Padlet was left open until Friday, 1/17/25.

Jean Davis discussed proposed salary floors for Home Visitors and Supervisors. IDHS is responding to feedback stating the current salary is inadequate to attract and retain quality staff. IDHS is using the new cost model, which uses data from the Bureau of Labor Statistics (BLS). This is a better reflection of competitive wages for individuals with similar training and skill set as home visitors. The proposed salary floors are \$50,000 for home visitors and \$61,000 for supervisors. The salary floor would be required for all home visitors and required for supervisors if IDHS provides at least 50% of the salary for the

supervisor position. IDHS recognizes there are challenges and risks with implementing a salary floor and would like input from the HHVC on this topic. IDHS also understands that without additional funding, raising salary floors could result in fewer slots and fewer positions.

Participant were asked to respond in the Padlet to:

1. What other potential risks, or unintended consequences should we consider for salary floor increases?
2. What guidelines/supports would be helpful to grantees to implement higher wages?

Joanna Su discussed the Equitable Allocations of Funds to HV Programs for FY26. IDHS noted the current practice appears to be inequitable. A cost model for Illinois was developed by Prenatal to Five Fiscal strategies with input from national models, as well as local programs. This cost model includes staffing, as well as benefits of non-personnel programmatic cost, and an indirect rate. The updated cost model reflects the “true cost” to provide services. For FY26, IDHS is proposing to use the cost model to move to a more equitable allocation of funding.

Questions from Joanna to be answered in the Padlet:

1. What questions do you have about our approach to using cost estimates?
2. What potential risks, or unintended consequences should we consider with using cost estimates?

Lori Orr (IDHS): Conducted a poll to get final overall impressions from participants:

1. Is the proposed higher salary floor a step in the right direction? All respondents agreed or strongly agreed.
2. Is it appropriate to require the supervisor’s salary for supervisors who have at least 50% of their salary funded by IDHS? Most respondents agreed, with a small percentage supporting it for supervisors with less than 50% of their salary funded by IDHS.
3. Does using the cost model to determine per child funding amounts seem to be a step in the right direction towards an equitable grant allocation process? Most agreed or strongly agreed, with.
4. If additional funding is not available, would you prefer IDHS to prioritize raising the salaries or funding as many slots as possible? A slight majority said to raise salaries, with most of the remaining respondents preferring to balance raising salaries and funding slots.

Lori informed the HHVC that IDHS is hosting another listening session on 1/16/25. All committee members are welcome to attend and were told to email her if they have follow-up questions.

V. Public Comments: None

Next Meeting is scheduled for **Monday, 3/17/25, 3:00 pm - 4:30 pm**. Feel free to share suggestions for agenda items. All materials from this meeting will be sent post meeting.