

SANGAMON COUNTY COMMUNITY RESOURCES

NEEDS ASSESSMENT AND COMMUNITY ACTION PLAN

**2016 Update for
FY 2013-2017 Strategic Plan**



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**Community Needs Assessment and Community Action Plan
FY 2012 - FY 2016**

July, 2016

2015 Community Needs Assessment

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I. Key Findings and Recommendations

Key Findings: At its core, poverty exists because of the need for stabilizing basic services, mental health services, affordable housing, asset accumulation, lack of employment and education and training. In Sangamon County, data collected from the SCCR Interagency Needs Assessment from over 5,500 low-income households (Appendix 2) revealed the greatest needs continue as utility assistance, financial literacy, credit repair, affordable housing and housing repair, food for seniors and school-aged children, GED assistance, activities for youth, dental services, vision services, cost of school, and available jobs. Many of these needs are basic (stabilizing) and the rest are to increase self-sufficiency. These findings also align with the 2014 2-1-1 report for Sangamon County with regard for calls for specific services. (Appendix 12). Importantly, while rendering services, the 2014-15 SCCR Inter-Agency Customer Service reports show that the overall rating of the SCCR agency and services as 89% as excellent and the balance of 11% as very good (Appendix 3).

Other findings, according to IDES, include that the Illinois unemployment rate dropped to 4.3% in April (Appendix 7) with the qualifier that many adults have simply stopped looking for work. Fortunately, the 2015 Citizen's Survey released on June 28, 2015. (Appendix 11), revealed that the number of uninsured people is down 66% from 11.3% to 3.8% or by 11,300 people. The same survey found the ongoing need for support services providing emergency food, shelter and provisions. Twenty percent of respondents experienced times when they did not have enough money to pay for food their family needed and 16.9% experienced times when they did not have enough money to pay for housing or shelter, unchanged since 2013. Findings also affirm that the number of people who did not have enough money to pay for health care or medicines decreased from 21% to 15% in 2015. The survey also concluded that there was a decrease in the number of underemployed residents and the number of people reporting their financial condition was worse off; from 21% to 13% in 2015. In terms of education, the surveyed showed a need for the community to improve access to educational programs.

The Community Commons Census Platform report for Sangamon County (Appendix 5) presents an increase in poverty in Sangamon County of 5.7% since 2000 to a 2013 poverty rate of 15.2% or 10,737 families. Of those families, households in poverty with a female householder is significantly higher at 3,391 while numbers of couple and male households in poverty are 1,200 and 842 respectively. Of the total, children have been hit hardest with a 2013 poverty rate of 21.5% up from 7.6% since 2000. Further, children 0-4 suffered the highest increase of 12.8% while their counterparts ages 5-17 endured an increase of a lower but still significant 5.8%. The number of white individuals in poverty totals 17,134 followed the number of African Americans in poverty at 8,472. Multi or other race families numbered 1,655. By race, percentages report that multiple race or other race families present the highest percent of the total number of families in poverty at 64.71% followed by African Americans at a rate of 36.25% followed by white families in poverty at 10.52%.

The Heartland Alliance Report (Appendix 6) also maintains that in 2015, the Sangamon County child poverty rate increased by .4% to 21.9% and that the number of people in poverty had increased to 29,693 or by 2,330 people. The percent of severely rent-burdened households was 25.2% with the mean renter hourly wage was \$9.65. The report further iterates that

monthly rent affordable at mean renter wage is \$502 but also submits that the work hours per week to afford a two bedroom house is 69 hours. Further, the food insecurity rate reported was 14% with the child food insecurity rate at 19.4%.

The Sangamon County Snapshot Health ranking (Appendix 8) finds Sangamon County ranks 79 of 102 Illinois Counties. It also states Sangamon County is 95 of 102 under Quality of Life Health Outcomes. Sangamon County's overall 80th-place ranking put it behind counties such as Cook (78th), Peoria (66th), Rock Island (54th), McLean (33rd) and Champaign (23rd) but ahead of Macon (86th) and St. Clair (88th).

The Springfield/Sangamon County Continuum of Care Homeless Population Point in Time Estimate for 2014 (Appendix 9) concluded that there were 175 homeless individuals that 52 were chronically homeless, 25 were veterans and 18 were youth. These numbers are within 11 of 2013 numbers.

Current State of Child Poverty in the U.S.(2012):

According to the Census Bureau data, between 2007 and 2012, just 17 of the nation's more than 3,100 counties saw poverty decline in a statistically significant way among children ages 5-17. Poverty for that age group rose in 964 counties from 2007 to 2012.

Determining the exact number of children living in poverty can depend on what Census calculation you go by. More than 16 million children, or roughly one in five, were living in poverty in 2011, according to the U.S. Census Bureau's *official poverty measure*, higher than any other age group.

The Census Bureau's official figures fail to paint a complete picture, though. The formula the government uses to calculate poverty was designed in the 1960's and does not account for expenses that are necessary to even hold a job such as transportation costs and child care. The formula does not account for government programs such as food stamps or the Earned Income Tax Credit. When the Census Bureau uses its supplemental rate formula, the number of children found to be living in poverty falls to 13.4 million.

The nation's poorest kids primarily live in households headed by a single female. Nearly half of all children with a single mother – 47.6 percent – live in poverty. Indeed, the children of single mothers experience poverty at a rate that is more than four times higher than kids in married-couple families.

The longer a child lives in poverty, the tougher it can be for them to climb out later in life. According to an analysis by Columbia University's National Center for Children in Poverty, 45 percent of people who spent at least half of their childhood in poverty were poor at age 35. Among those who spent less than half of their childhood in poverty, just 8 percent were poor at age 35.

In Sangamon County, children in poverty in 2000 were 6,646 or 14.3 percent while in 2013 this figure was 9,726 or 21.9 percent, an increase of 7.2%. The national increase was less at 6.4 percent and the Illinois increase was 6 percent.

Students participating in the free and reduced lunch program in 2013 was 54 percent according to the Heartland Alliance, while 11.85 percent of county households received SNAP. Food insecurity data showed 14.2 percent (Map the Meal Gap) with a child food insecurity rate of 18.3 percent.

The number and percentage of households in poverty are estimated in 2013 that there are 10,737.

Households in poverty were 5,433 out of 51,964 households or 13 percent. By family type, female householders made up 3,391 of those with male householders making up 842 and married couples at 1,200

The rate of Sangamon County seniors in poverty is 6.3% or 1,717 of a total of 27,116 seniors in the county. Nationally, the rate is 9.4 percent and state-wide is 8.6 percent.

The Point in Time homeless survey data on January 24, 2015 (Appendix 9) includes that in Sangamon County 161 individuals were homeless and sheltered, 14 were unsheltered. Regarding households, 87 were sheltered and 7 were unsheltered. All homeless sheltered persons totaled 248, 21 were unsheltered. However, because this data is a snapshot performed on a winter day, the total number of people struggling with homelessness may be significantly higher. Springfield School District 186 estimates over 600 homeless children and the Regional Office of Education estimates an additional 200.

Labor force and unemployment data for Sangamon County is provided in Appendix 5 of the Community Commons Platform US Census Data. Overall, the report area experienced an average of 7.4 percent unemployment rate in January, 2014. To arrive at this percentage, with a total labor force of 107,469, 100,468 are employed and 7,001 are unemployed. The change in unemployment from January, 2014 to January, 2015 fell 1.43 percent and from January, 2015 to May, 2015 another 1.74%. The report also contains an explanation that the drop may be from people who have stopped seeking work due to lack of jobs.

The level of educational attainment in 2013 was that 7.95 percent had no high school diploma, 28.3 percent had high school only and 23 percent had some college. The balance of 40.9 had attained from associate to professional degrees.

Persons lacking basic prose literacy skills was 7 percent in our county with the state percent at 13 and the national percentage at 14.64.

The Graduation Data Summary Report for Springfield School District #186 (Appendix 19) shows that the high school graduation rate students for the 2013-2014 academic years was 67.4 percent, up 2.9 percent from the previous year, compared to Decatur #1 (66%), Chatham Glenwood (93%), Normal Unit #5 (85%), Peoria (71%), and Champaign (86%). Conversely,

Sangamon County High School graduation rates were much higher at between 86 and 88 percent.

Regarding assets, in the Heartland Alliance Report (Appendix 6), the percentage of homeownership was 70%, and the percentage of the population with a Bachelor's degree or higher was 32.55.

Demographics considered in the planning process of programs offered in Sangamon County include the need for continued, strong support of families with children, ages 0-17, with emphasis on households headed by a single female. Services to be provided will include education to employment opportunities (C.N.A. and Scholarship awards in high-growth employment areas), the continuation of GED assistance and financial literacy for adults continues to be evident to help families move forward. *New training services will include certification opportunities for students (with emphasis on recent graduates of SPS #186) enrolled in computer repair or food handler course, both courses also containing a soft skills module to better assist with job search and employment retention. All individuals in training will also be assigned a Family Support Specialist with whom to set goals to achieve in the quest for self-sufficiency. In 2016, an expanded year-round senior nutrition monthly food box program and a 2016 summer food box program and farmers market vouchers for families with limited incomes would help our community continue to combat food insecurity caused by reductions in food stamps, especially for seniors. The agency will also provide transport of food boxes on a limited basis to the most vulnerable families. Last, due to changes in Medicaid, dental and medication assistance will continue to be available at the agency with additional monthly outreach of assistance downtown at the Helping Hands and the Salvation Army.*

The 2015 Staff survey results (Tab 1) were encouraging with most staff having a good understanding of SCCR mission, vision and values, that they see a spirit of teamwork in the workplace, believe that the agency is a leader in advocating for the interests of low-income families, and feel satisfied with the work they do in SCCR and the ability to help stabilize families with basic needs such as food and clothing. Comments included that overall they value that staff works together and helps each other but that the program requirements are somewhat confusing. Negative comments from staff included frustration with customers they feel "scam" the system and the need for more agencies to help renters and irresponsible landlords and to fine the landlords who do not follow guidelines. To end poverty, most felt that it is important to end the cycle of generational dependency on public programs but to support those families trying to end the cycle.

Stakeholder survey results (Tab 2) purport that funding issues have deeply impacted the most vulnerable sectors of our community and that financially, things are getting harder due to less money. However, some stakeholders feel that agencies need to stop enabling people and encourage them in the direction that services are only temporary to get them back on their feet. Solutions include relationship building with customers and including mutual trust, respect, life skills and financial literacy education with give customers the confidence to move forward. Other responses include that community partnerships can better strengthen services to meet community needs such as community gardens, community policing and the value of the new

mental health court but the need for mental health services. Additionally, other problems include school funding is too little, not enough good jobs and not enough affordable housing for low-income families. One responder wishes that before people are eligible for Medicaid that they should first be drug tested but that there should also be a sufficient number of programs in place to deal with substance abuse. Many responders opined the need for education but also for the skills that help people get and keep their jobs.

Sixty-nine of 135 landlords responded to the annual Landlord survey for 189 tenants. The total of tenants still renting was 54%. When asked if there was any trouble with rent being paid on time, 54% said yes. As to whether the renter had also used other agencies for assistance, landlords said that 59% had not. On the issue of weather rent assistance overall had helped their program, 77% said yes, that it had. Comments were both positive if renters made an effort to pay but negative if they did not.

In summary, poverty has increased, but significantly the most in the child 0-4 age group followed by the 5-17 age group, that wages are too low to afford safe, affordable housing unless an abundance of hours are worked to meet the price of monthly rent. As a result, the domino effect brings about food insecurity, especially for children and seniors. Utility and dental costs also continue to add great and on-going burdens for working families. And although the rate of unemployment has dropped, additional jobs suitable for many job seekers still have not been created to fill in for the jobs that no longer exist. Jobs that are available require education and training that many individuals cannot afford the training for or are not eligible for free training.

So what is the most effective way to address the needs in the community with existing services and funds? The following recommendations are presented to provide for maximum effectiveness and efficient use of CSBG and other SCCR funding. This service delivery model may yield services to fewer families with CSBG funds, but identifies, supports, and counsels families in greatest need and willing to do the work than in past years to become more self-sufficient to become less dependent on public benefits.

Recommendations:

Making Change Happen – Strength-Based Family Support and Case Management through Bundled Services

Just as there is no single pathway into poverty, there is no single pathway out—no magic bullet policy or program that will single-handedly eradicate poverty. There are, however, myriad solutions that target each issue area related to poverty—health, nutrition, housing, assets, employment and education—and that affect poverty in three different ways: mitigate the worst effects of poverty, move people out of poverty, keep people out of poverty. Through useful, this paradigm may create a false sense of distinctiveness, and we should be careful not to think about poverty solutions too narrowly. Instead, weaving together solutions from each issue area and from each level to form a cross-cutting and holistic poverty reduction approach. (*Excerpt from the 2013 Illinois Report on Poverty Social Impact Research Center.*)

Until families can be stabilized through basic needs, the expectation of moving toward self-sufficiency is not realistic. If a family is seeking a single or short term service, as perhaps for tangible assistance (fuel or rent payment), there will be no change in the family's circumstances -- except that an immediate crisis may be averted by the assistance. The family may reach a level of stabilization because of receipt of tangible assistance but this type of intervention cannot be expected to change lives.

Families who receive coordinated or “bundled” services are three to four times more likely to achieve a major economic outcome such as staying employed, earning a vocational certification or associate’s degree, or buying a car, than clients receiving only one type of service. Additionally, as poverty often affects several generations, the CSBG Network uses not only “bundled” services but a two-generation approach to poverty. This two-generation approach works to alleviate the burden of poverty for both children and adults. Sangamon County Community Resources (SCCR) often acts as a one-stop shop for access to a huge range of programs under one roof. SCCR also builds and maintain partnerships with over 75 organizations locally to ensure that our clients are connected to the best programs and services for their needs. SCCR serves as a resource and addresses client needs in a coordinated fashion, putting low-income Americans on the path of self-sufficiency and economic security.

As an example, a grandmother obtains custody of her grandchild due to the recent incarceration of her daughter and physical abuse by the boyfriend. Her own son is experiencing re-entry from 5 years of incarceration and needs work clothes for his new job at a local restaurant. Currently, grandmother missed a mortgage payment due to a recent high utility bill. How does our community assist her? To begin, an SCCR Family Support Specialist will review the grandmother’s Needs Assessment. Second, lack of income to pay basic needs is verified by submission of documentation around family members’ income, receipts for expenses and current utility bills, DOC release papers, employment verification and her custody of the child. Once the circumstances can be verified, the Family Support Specialist works with grandmother and the son to set goals which will provide for her family stability as well as assist her son in his desire for employment and meets or calls them every 30 days until strength-based goals are met. When goals are met, the Specialist will close the case but invite the family to share future successes. In this case, a bundle of 5 services will be provided to protect the child, stabilize the grandmother and assist her son toward employment. The bundle includes: a partial utility payment, a missed mortgage payment, a monthly food box due to a \$15.00 monthly SNAP payment, a referral to Senior Services Raising Grandchildren program and a uniform for her son to acquire a work uniform and shoes.

Helping agencies that provide services to individuals and families seeking assistance with some problem or issue they have identified are in a unique position to provide more than an immediate response to these needs. The assumptions that an agency has about help seekers, and the conditions in which they live, make a difference in the way services are provided. *For example: two agencies may provide short term services - but one provides them as a way to engage help seekers in more comprehensive services, thus using what may be known in the network as a "family development" approach, while the other operates with an "emergency intervention" approach.*

*When the help seeker wants support to make a change, the way that service is given can make a difference. **The service will be given with the expectation that results will follow.** The underlying assumptions of the agency make a difference in the outcomes that are achieved because they establish expectations for results at several levels - not only for those who are served, but also for the agency and for staff performance.*

And in Sangamon County, because one local agency does not address all 5 pillars of self-sufficiency, families in need will benefit from the guidance of certified Family Support Specialists. Locally, the service delivery system is comprised of multiple partners, both government and private with each offering services around housing, basic needs (food and clothing), asset accumulation, education and employment.

Integration with WIOA

In addition to intensive case management with a CSBG Family Support Specialist , SCCR will make available to WIOA staff, the CSBG C.NA. electronic program flyer to use to refer WIOA customers who do not qualify for the WIOA C.N.A. program or other agency training programs. WIOA Case Managers will have the option to call and ask for the customer to be placed on the list to be contacted to apply for selection for future CSBG C.N.A. cohorts. (There will be no guarantee of selection of WIOA referrals as CSBG program criteria is in place and approved by DCEO. Also, CSBG income guidelines are firm at 125% of poverty.)

Similarly, for the CSBG Employment Supports program, an interagency referral form between CSBG and WIOA will be created and contain CSBG income guidelines, documentation required at intake and criteria for services. The referral form would also include space for a required narrative describing the need for the service. If all CSBG criteria is met, priority for services would be given to WIOA referrals as funding is available.

Using a **strengths-based approach**, (as opposed to a deficit-based approach), carries an underlying viewpoint that all individuals *have* strengths, and they want to *use their strengths* to achieve maximum quality of life. In other words, the message includes an expectation that a positive change will happen. An assumption in the National Community Action Theory of Change states that community stakeholders, particularly those with low-income, know best the needs of their community. It is this assumption - that those who are in need know their situations better than those to whom they go for help -- upon which a positive helping relationship is built.

Family Empowerment recognizes that support is needed to assist people who lack an equal share of valued resources as they learn to access and control these resources. These approaches are all about capacity-building and they are different from traditional models of help giving, which are based on responding to a deficit that has been identified. In the traditional model, an individual or family must be "eligible" for services because they have demonstrated a specific need, which the agency has the capacity to meet (usually because of some targeted funding for the specific need).

Here is an example of the comparison between these two models:

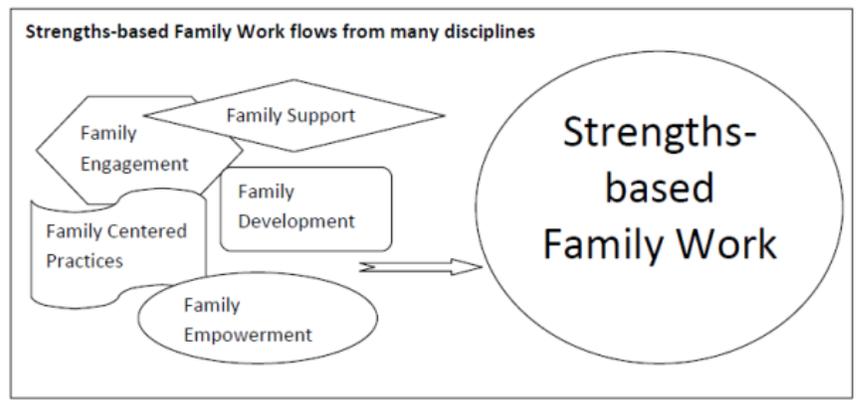
A strengths-based approach is the foundation for true results orientation in an agency. We assert that this approach should be used in our own agency throughout Community Action Agencies, but we are focused on the value added when incorporating it into the practices of staff that provide direct services to individuals and families.

This approach requires a set of skills for direct service workers that encourage continuous supportive interactions with families and the promotion of new family member competencies. To effectively engage help seekers in this way, workers need knowledge and skills to facilitate action. Once they are confident of their own skills, they provide opportunities for help seekers to, in turn, build their skills related to healthy family/life management and self-sufficiency.

Figure 3 – The Effective Help Giving Cycle

The Help Giving Cycle includes, as the top of the cycle, the element of "engagement" and "relationship building." Consider how this element can be the key to actually being able to identify results. If help seekers have a relationship with the agency worker they will be more likely to return to the agency to report their results than help seekers who have just received a service and do not have a relationship.

See Appendix 1, p. 14 to pair with two diagrams below)



The Results Oriented Management and Accountability Cycle



ROMA at the Front Line Creates a Greater Results Orientation for the Agency

In addition to the two cycles (ROMA And Help Giving) having parallel steps, the agency level ROMA actions and the worker's strengths-based helping actions with families are entwined. **(see Appendix 1)**

Family-level assessment informs larger community needs assessment

When the agency's family workers build relationships with families and have completed strengths- based assessments with families to identify family needs and resources, they are collecting data that can be included in the agency's community level assessment. This data leads to a more accurate and informed needs assessment.

Aggregating family-level data supports agency strategic planning

When an agency has a process for assuring family workers are taught a comprehensive planning process to use with families, this focus on planning will also be evident in the agency level planning process. Information gathered at the family level, regarding goals and priorities of participating families, can help to inform the agency's planning process in terms of strategies that have been successful and therefore are realistic. They can also highlight common barriers that may need to be addressed by a new effort.

Follow-up is essential to determine level of results

When the agency expects to achieve results, they must have a plan for doing follow up after services are delivered. Workers who are expected to do a service without follow up will never be able to identify successful movement toward stability or self-sufficiency. Documentation of success is achieved only when workers are trained to discuss how they will identify outcomes and progress towards results with families, when they expect that movement (change) will happen, and when they include strategies for observing outcomes and progress in the planning process. Only with accurate outcome data will the agency know what works.

Assuring staff competencies

When agency services are implemented by staff that has competencies and a specific framework that enables something like the Help Giving Cycle to actually be used in the agency, clearly defined plans will be created for achievement of results. These competencies must be acquired by appropriate training and supported by supervisory monitoring and agency policies.

Accountability for progress toward results

When strengths-based family workers use critical reflection skills to review "what happened" to families as a result of their action steps (services and strategies), they can help family members understand their own progress or lack of progress. It is important for staff to plan their work to monitor and support progress of their families. This allows the family to learn to be accountable for their success.

Likewise, on-going management oversight is imperative to monitor the effectiveness of staff performance. This allows the agency to assess how well the services being provided are producing success.

Analysis of results may change how the agency does business

If services are not producing success, the many elements of implementation must be analyzed. For example, does staff need more training or support? Is there a lack of appropriate resources to assure the program can produce success?

The step on the Help Giving Cycle where information gathered from the staff and family reflection of progress toward goals is essential for empowerment of the help seeker to happen. This process mirrors the ROMA cycle and reinforces the agency's need to use the data they have gathered and its analysis to make changes in the agency. The information gathered from the ROMA reflection step is also essential to the agency as they identify successes and barriers to success that may need to be addressed differently at the agency level.

As a result of the 2015 Inter-Agency Community Needs Assessment report, myriad 2015 local data, the 2015 agency Strategic Planning update and 2015 Family and Community Development certification of 4 staff, the recommendation is to increase the number of families enrolled in CSBG Case Management up to 60 with the assistance of 3 certified Family Support Specialists. One staff will also train to become a certified HUD housing counselor in 2016 and provide housing counseling services in 2016. However, services such as LIHEAP and Weatherization, under the auspices of OEA and HHS, require a single service be rendered on a first-come, first-served basis. Even so, these services may be utilized during case management as the “bundling” of services for families enrolled with an FSS case manager and could receive LIHEAP as a result of their Needs Assessment Survey and a work plan created in concert with their Family Support Specialist.

II. Introduction and Methodology:

Assessment and Planning Process, Assessment Protocol

In developing the (PY) 2016 Community Needs Assessment/Action Plan, Community Resources conducted, throughout the year, an in-house customer assessment to determine community needs. We used a variety of approaches to gain input from staff and stakeholders including an annual stakeholder survey. Because the stakeholder survey seeks qualitative data and, therefore, takes more time to complete, the rate of return from stakeholders did not meet our expectations. Even so, responses were reviewed and analyzed (see Key Findings section).

Strategic Planning

The 2015 Strategic Planning update was held on July 6 and 7 and included representatives of the CSBG Advisory Council, direct service staff, senior staff and the department director. The Strategic Planning Committee met for 9 hours on July 6 and 7, 2015 with a ROMA certified facilitator and was responsible for:

- Providing leadership, direction, and oversight for the strategic planning process and ensuring integration of various elements that go into the plan.
- Creating a planning design that ensured all stakeholders were included in a meaningful way in articulating needs, goals, and strategies.

Developing timelines and realistic expectations for completion of tasks by this committee and ensuring that work was completed in a timely way.

Analyzing needs assessment data.

Making recommendations to the CSBG Advisory Council regarding priorities, goals, and strategies for the next three years of the agency's development, as well as how progress toward the goals set out in the plan should be monitored.

Ensuring that the goals and strategies presented to the Council for approval were consistent with the agency's mission, approach, and values, as well as with the needs of the community.

Ensuring that the planning process and outcomes were consistent with the expectations of the U.S. Office of Community Services and with the National Organizational Performance Standards and the format of the Results Oriented Management and Accountability (ROMA) system.

Data and Reports used in Planning

- Utilizing a Strength-Based Approach to ROMA throughout the CAA. This publication was created by the National Association of Community Action Agencies – Community Action Partnership, in the performance of the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Community Services Grant Number 90ET0428 (Appendix 1)
- September, 2014 – June 30, 2015 Inter-Agency Customer Needs Assessment and Demographics, (Appendix 2)
- September, 2014 – June 30, 2015 Inter-Agency Customer Service Report Results. (Appendix 3)
- 2014 Information Survey (IS) Section G Report (Appendix 4)
- Comprehensive Community Needs Assessment Report (2013) from the Community Commons Platform courtesy of the Community Action Partnership. (Appendix 5)
- Heartland Alliance Report on Illinois Poverty: Sangamon County (Appendix 6)
- IDES Employment Report, May 28, 2015 (Appendix 7)
- County Health Rankings Snapshot Report (Appendix 8)
- Springfield/Sangamon County 2015 Continuum of Care Homeless Populations: Point in Time (PIT) Estimates (Appendix 9)
- Sangamon County 2014 Regional Comprehensive Plan: published by the Springfield-Sangamon County Regional Planning Commission. (Appendix 10)

- 2015 Sangamon County Citizens Survey (Appendix 11)
- United Way 2-1-1 Report, January-June, 2015 (Appendix 12)
- 2010 Census Analysis for Population, Age, Households, Race, Housing, Education and Income. Springfield –Sangamon County Regional Planning Commission. (Appendix 13)
- Community Health Need Assessment, Memorial Health System (Appendix 14)
- American Fact Finder Income Information, US Census (Appendix 15)
- Map the Meal Gap, Overall Food Insecurity in Illinois by County in 2013 (Appendix 16)
- Sangamon County Regional Office of Education Summary, Free and Reduced Lunch (Appendix 17)
- Child Care Profile, Sangamon County, Community Child Care Connections, Inc. (Appendix 18)
- Graduation Summary Report, Teaching and Learning Dept., SPS, August, 2014 (Appendix 19)
- Sangamon County Graduation Rates, Illinois Report Card (Appendix 20)

Organizational Standards for Public CSBG Eligible Entities, Category 3: Community Assessment

Local control of Federal CSBG resources is predicated on regular comprehensive community assessments that take into account the breadth of community needs as well as the partners and resources available in a community to meet these needs. Regular assessment of needs and resources at the community level is the foundation of Community Action and a vital management and leadership tool that is used across the organization and utilized by the community to set the course for both CSBG and all agency resources.

Standard 3.1 • The organization conducted a community assessment and issued a report within the past 3 years.

Standard 3.2 • As part of the community assessment, the organization collects and includes current data specific to poverty and its prevalence related to gender, age, and race/ethnicity for their service area(s).

Standard 3.3 • The organization collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.

Standard 3.4 • The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.

Standard 3.5 • The governing board formally accepts the completed community assessment.

The last Community Needs Assessment was administered in 2014. The 2015 local Needs Assessment was derived from thousands of Inter-Agency Needs Survey Results Staff and Stakeholder survey results as well as results from one focus group. Other local data was collected from various local, state and national sources for required report categories.

The Community Assessment and its Annual Updates should have clear timelines and clear guidance regarding content. Because of the large amounts of data available, it is important to be strategic in identifying only the key data that bear on the mission of SCDCR and that provide the necessary guidance to the organization to plan its activities.

C. *Community Stakeholder/Board Member feedback*

Methodology: Community stakeholders are broken into three groups: partners, board/council members and community leaders. Partners are institutions with which SCDCR has a partnership relationship relative to service delivery or community engagement initiatives. Board members are all county board members, oversight committee members of the county board and the CSBG Advisory Committee. (Survey and results located in Tab 2.) Community leaders are individuals in the community with a high-level knowledge of issues relative to particular subject areas (such as crime, education, politics, the faith community, health, etc). Because a specific individual or institution could belong to more than one of these groups, it is critical to ensure that no duplication occurs.

- a) Is our community better, worse or the same than 1 year ago?
- b) What do you think it would take to substantially reduce poverty in our community?
- c) What do you think are our community's most valuable resources?
- d) What are some positive things happening in our community?
- e) What are some challenges facing our community?
- f) What services are missing in our community that you think need to be added?
- g) What do you know about the Sangamon County Department of Community Resources (SCDCR)?

Staff feedback

1. Methodology: All SCDCR staff members are surveyed annually in May.

2. Content & purpose: This survey tool can be found in Tab 1.

It includes questions about:

- a) *SCDCR's Mission, Vision and Values:* These questions gauge the degree to which staff members identify with the agency's mission, vision and values, to ensure that these foundation principles do not become obscured to staff at any level.
- b) *Teamwork at SCDCR:* The questions examine the degree to which staff members feel a shared identity across their department and across the agency. It should be used to determine whether the organization needs to invest resources in better-integrating staff from different departments to ensure the organization can present a consistent set of services to the community.
- c) *Communication at SCDCR:* These questions should be used to diagnose any potential concerns about the transmission of information within the

organization. Responses could potentially be used to support management initiatives around openness, professional conduct or other related topics.

- d) *SCDCR in the Community*: These questions, in combination with feedback received from external stakeholders, can help the CSBG Advisory Council and management prioritize strategic initiatives related to the building of partnerships and the perceived responsiveness of the agency to community needs.
- e) *My Work at SCDCR*: These questions should be used to track staff satisfaction with their work environment and to determine if any strategic initiatives need to address concerns around staffing or the circumstances under which staff work.
- f) *The most important thing for SCDCR to focus on in the coming year*: This question is designed to permit staff to identify a single area (from the above areas – or others) that they would like to be the agency’s primary focus. This provides management with a sense of how strongly the staff feels about these issues relative to each other.
- g) *Additional questions that ask more specifically about community issues related to the Community Assessment*: These questions should mirror the questions asked of the consumer sector and of other community stakeholders. Responses should be compared to identify areas of agreement and disagreement and also to ensure a wide range of responses can be collected which represent the full diversity of the community.

F. Quantitative Data

1. Methodology: Quantitative data was collected from data in reports available as appendices 2, 3, 5, 6, 7, 8, 9, 11, 12, 13, 14, 15, 16, 17, 18.

2. Content & purpose: The content for this section will be developed in cooperation with the programs and departments of the organization. Specifically, the Agency will need to know from each operating unit the following:

What is the population for which you need data (city only, county, region, state, federal? By race, gender, age? By poverty status? Etc.)

SCDCR is currently operating on a planning cycle where FY2017 will be the year in which a full Community Assessment will be conducted and which will form the basis of a new multi-year Strategic Plan for 2018-2022. With reference to the above components, an Assessment and Assessment Update schedule would follow the following structures:

Year 1: Full Assessment 2014	Includes: <ul style="list-style-type: none"> a) Customer feedback b) Community feedback c) Staff feedback d) Oversight Committee/Advisory Council feedback e) Complete set of quantitative data
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	f) All other relevant data (internal data/reports, etc)
Year 2: Update 2015	Includes: <ul style="list-style-type: none"> a) Data (from any source) that addresses an issues or need not previously discussed or that has newly emerged b) Follow-up areas from the Year 1 Full Assessment: data or concerns that had been identified as a negative trend or “threat” that requires updated information (these will be flagged as such in the Assessment) c) Any news stories or reports that appeared in the intervening year that are relevant to SCDCR’s Assessment and merit inclusion. d) Community feedback – only SCDCR’s partners e) Staff feedback
Year 3: Update 2016	Includes: <ul style="list-style-type: none"> a) Data (from any source) that addresses an issues or need not previously discussed or that has newly emerged b) Follow-up areas from the Year 2 Update or the Full Assessment: data or concerns that had been identified as a negative trend or “threat” that requires updated information (these will be flagged as such in the Assessment and Year 2 Update) c) Any news stories or reports that appeared in the intervening year that are relevant to SCDCR’s Assessment and merit inclusion. d) Survey of SCDCR’s partners e) Community feedback – only SCDCR’s partners f) Staff feedback

B. Timelines for completion

Although it is impossible to synchronize all agency activities to correspond to an idealized planning calendar, a reasonable calendar would follow this rough outline in order to take account of the needs of the Community Services Block Grant (CSBG):

SCDCR Community Assessment	
January	<ul style="list-style-type: none"> • Distribute timelines for upcoming fiscal year Assessment activities. • Orient program staff to current year Assessment activities. • Finalize all surveys: staff, consumer sector, community stakeholder; schedule Board, Policy Council focus groups
February/ March	<ul style="list-style-type: none"> • Disseminate all surveys to staff, consumer sector and community stakeholder surveys

	<ul style="list-style-type: none"> • Hold focus groups.
April	<ul style="list-style-type: none"> • Gather quantitative data; collect outstanding surveys and tabulate.
May	<ul style="list-style-type: none"> • Prepare Needs Assessment draft containing survey results, qualitative data. • Hold Strategic Planning or Update
June	Prepare Community Action Plan using Needs Assessment
July	Management/staff review of Community Assessment
	Present Community Action Plan/Needs Assessment for formal acceptance by CSBG Advisory Council.
	Board review and approval of Community Assessment
	Presentation of key findings in Community Assessment at October CSBG Advisory Meeting
August	Review previous-year Assessment process with staff, solicit feedback for improvements
August-October	Finalize list of data elements for upcoming year Community Assessment/Update

Planning activities in the above table represent activities consistent with revised practice based on the 2015 Organizational Performance Standards and quarterly meeting dates of the CSBG Advisory Council in February, May, July and October of each calendar year.

III. Community Action Agency History and Programs

What is Community Action?

In 1964, The Great Society, as envisioned by President Lyndon Johnson, was a sweeping plan to improve the lives of all Americans, regardless of their circumstances. Inspired by President Kennedy and his New Frontier, Johnson pledged to fulfill his promise of equal opportunity for all by enacting several comprehensive changes within the federal government. In August of that same year, the Economic Opportunity Act was signed into law by President Johnson creating the nationwide Community Action Network.

The War on Poverty

In 1963, shortly before he was assassinated, President Kennedy had asked his economic advisors to draw up some proposals to address the problem of American poverty. Johnson took up this charge after he succeeded Kennedy as President. In Johnson's first State of the Union address on June 8, 1964, he called for an unconditional war to defeat poverty. He expanded and revised the proposals given to Kennedy and developed the Economic Opportunity Act of 1964. The act included a variety of initiatives:

- Head Start
- Job Corps

- Work-Study program for university students
- VISTA (Volunteers in Service to America) - a domestic version of the Peace Corps
- Neighborhood Youth Corps
- Basic education and adult job training
- CAPS (Community Action Programs) - CAPS turned out to be the most controversial part of the package, as it proposed the "maximum feasible participation" by poor people themselves to determine what would help them the most. CAPS were a radical departure from how government had run most social reform programs in the past.

The Economic Opportunity Act was innovative legislation, but it received only about \$1 billion to divide among the various programs and remained critically underfunded. By 1966, Congress appropriated \$4 billion for the programs.

The Start of Community Action

Community Action was a bold idea, especially for the federal government. It handed over control to the local level, so that programs were geared specifically for target population needs. This concept, "maximum feasible participation", represented a new paradigm in the government and many sectors were wary of its innovative ideas. President Johnson selected a member of President Kennedy's inner circle to head up the newly formed "Office of Economic Opportunity" –Sargent Shriver.

President Johnson signing the Economic Opportunity Act, August 1964



Shriver was head of Peace Corps in the Kennedy administration and married to Kennedy's sister, Eunice. He had proved himself to be a capable leader and President Johnson admired

his abilities. President Johnson, legendary for his acumen in recruiting key personnel, offered the position to Shriver and would not take no for an answer. Shriver was installed as the first head of the OEO in October 11, 1964 and leapt into action.

Unfortunately for Shriver, he simply did not have adequate funding to begin the process of addressing national poverty issues. However, he assembled an impressive team of advisers, including Michael Harrington, author of *The Other America* and began to implement new policies and actions to resolve these issues.

Community Action was modeled after two fairly successful urban renewal projects, one undertaken by the Ford Foundation and the Mobilization for Youth, a program aimed at juvenile delinquency. Inspiration was also taken from the “Back of the Yards” program in Chicago, which was developed by Saul Alinsky, considered the father of “community development”. It should be noted that Alinsky became very critical of the OEO as it developed. The key component was that low-income citizens played an active role in program design and administration, or “maximum feasible participation”. The Economic Opportunity Act was amended (known as the Green Amendment) in 1967 to mandate the board structure of community action agencies, which complemented the earlier Quie Amendment which required the tripartite representation, including low-income participation.

In 1981, President Reagan introduced the Block Grant, which dramatically changed the way federal funding was distributed. Programs including Community Action, would now receive funding through the State Office of Community Action/Services and would be under more intense scrutiny than previous administrations. Illinois Community Action now worked more closely with the Illinois Department of Commerce and Economic Opportunity to implement the Community Service Block Grant (CSBG) and worked to build a strong partnership to provide robust services to Illinois’ low-income residents.

Over the past several years, federal funding to support the Community Service Block Grant has been challenged. President George W. Bush denounced Community Action programs as being static. However, Community Action remains an important safety net for many vulnerable individuals and families. Beginning in 2001, Community Action has improved their reporting through the Results Oriented Management and Accountability (ROMA) framework and continuously seeks ways to improve outreach and services. The National Community Action Partnership now encourages all Community Action Agencies to embrace the National Standards of Excellence as a pathway to improve and empower agency operations.

The guiding principle of maximum feasible participation continues today in Community Action. Local Community Action boards are tripartite, in other words, have representation from all segments of the local community including their low-income clients.

Why Community Action?

Community Action equips low-income citizens with the tools and potential for becoming self-sufficient. The structure of program is unique – federal dollars are used locally to offer specialized programming in communities. It is a coordinated effort to address the root effects of poverty and to, ultimately, move families and individuals to self-sufficiency.

This work is not easy and demand is always shifting and changing. Over the years, the federal government has changed as well. The funding is now part of the Block Grant System, which allows for the flexibility and specialization of unique programs. Poverty is viewed as a systemic problem and Community Action is a systems approach to resolving those issues. There are now over 1000 Community Action Agencies throughout the United States and Puerto Rico.

Community Action Agencies (CAAs) promote self-sufficiency, not dependency. Among their three key assets are:

FLEXIBILITY - The Community Services Block Grant, which supplies the core CAA funding, is unique; it is flexible, and it primarily funds local investments in services, facilities and partnerships which are particular to the CAA's home community. By adding to and altering government programs' "one-size-fits-all" programming, a community can provide its low-income members the right mix of assistance, encouragement, and incentives to become self-sufficient.

IMMEDIACY - CAAs are located in the areas of greatest need, managed and staffed by community residents and often open far into the evening. Therefore, when a family or an individual faces a crisis, their CAA is able to respond quickly with targeted forms of assistance appropriate to the situation; these may well include the mobilization of help from many of the CAA's private sector partners, volunteers, and faith-based groups.

The goal is to promptly stabilize a family, and thus avoid the long-term consequence of costly dependency. However, Community Action also has the capability to sustain long-term involvement in a family's progress to self-sufficiency, as well as in the development of the low-income community.

COORDINATION - A bedrock principle of Community Action is that resources of all kinds need to be integrated so they can be used in combination to solve community and individual problems. CAAs manage more than \$5.6 billion in public and private resources annually, serving more than 9.3 million low-income persons; the CSBG-funded staff goes into the community and to other government sources to bring in not only leveraged funds but also hundreds of thousands of local volunteers.

So, in other words:

The Community Action Method:

- Prioritizes prevention
- Addresses the causes of poverty
- Involves the Community
- Improves the Community

- Creates Opportunity
- CAA response to clients/customers is:
- Flexible
- Coordinated
- Directed to Long Term Client Development

Typically, the programs and services coordinated, enhanced and offered to the community by its CAA include all or some of the following:

TO HELP AND ENCOURAGE CHILDREN AND YOUTH: Head Start, Literacy Programs, Dropout Prevention, After School Enrichment and Tutoring, Teen Centers, Recreation and Sports Programs, Special Supplemental Nutrition Program for Women, Infants & Children (WIC), Well-Baby Clinics, Summer Enrichment Programs, Summer Food Programs, Child Care Food Programs, Pregnancy Prevention, Character Education, Substance Abuse Education, Prevention & Counseling, Summer Youth Employment Programs, College Counseling and Placement.

TO SUPPORT THE WORKING POOR: Child Care, Adult Education, GED Preparation, Job Training and On-The-Job Support, Job Search Assistance, Job Placement, Job Creation, Small Business Development, Loan Funds, Senior Community Service Employment, Displaced Homemaker Programs, Budget Counseling, Internet Training and Access.

TO SUPPORT THE POOR FACING CRISIS: Homeless Shelters & Drop-In Centers, Utility Deposits, Eviction Prevention, Domestic Violence Programs & Shelters, Transitional Housing, Food Pantries Energy Crisis Assistance & Shelter, Emergency Food Baskets, Emergency Clothing, Supplies, and Services - including Medical & Legal Volunteer Help.

TO SUSTAIN AND HONOR THE ELDERLY: Meals on Wheels, In-Home Care Programs, Senior Centers, Senior Day Care, Foster Grandparents, Congregate Meals, Medical Transportation, Volunteer Chore Services.

TO STRENGTHEN THE WHOLE FAMILY: Comprehensive Family Development Support, Nutrition Education, Parenting Education, Community Gardens and Canneries, Food Stamps, Health Clinics, Weatherization Assistance, Energy Assistance, Rental Assistance, Home Ownership Programs, Community Centers, Individual Development Accounts.

TO STRENGTHEN THE WHOLE COMMUNITY: Low-Income Housing Development, Economic Development and Support for New Business Ventures, Mobilization of Community-Wide Safety and Crime Prevention Initiatives, Consumer Education and Fraud Prevention, Community Reinvestment Act Partnerships, Support for Groups Working on Neighborhood Improvements, Support for Dialogue and Planning among all Sectors of the Community.

Unique Characteristics of Community Action Agencies

BOARD STRUCTURE - CAAs are required to have a tripartite board consisting of equal parts of local private sector, public sector, and low-income community representatives. This structure brings together community leaders from each of these groups to collaborate on developing responses to local needs. This allows for Maximum Feasible Participation in both the creation and administration of Community Action programs.

VOLUNTEER SUPPORT – The CAA network is one of the largest users of volunteer services in the country. In FY 98, CAAs reported that volunteers contributed more than 27 million hours of service, equivalent to more than 13,000 full time employees.

LEVERAGE FOR OTHER RESOURCES – Every Community Service Block Grant (CSBG) dollar spent leverages nearly \$4 of state, local, and private contributions combined. The CAA network administers a total of nearly \$5.6 billion in federal, state, local and private resources.

INNOVATIVE SOLUTIONS – CSBG funds give CAAs the flexibility to design programs that address needs specific to individuals and the local community and to identify specialized resources that fit these needs.

IV. Overview of Sangamon County and Springfield, IL: Community Profile

Located in the heartland of both Illinois and the nation, Sangamon County was established in 1821 and has an estimated population of 200,000 in an area of 877 square miles. Sangamon County is a growing community with one of the nation’s lowest costs of living. Sangamon County has a strong and thriving local economy that is based upon healthcare, professional services, state government, tourism and agriculture, all of which help provide for one of the lowest unemployment rates in the state. Sangamon County is also home to the Mid-Illinois Regional Medical Center, including the Southern Illinois University School of Medicine, as well as several colleges and the University of Illinois at Springfield, a four-year state university that is ranked as one of the best in the Midwest. Sangamon County enjoys a national reputation as a wonderful place to live, do business and raise a family and is home to several of the nation’s most significant historic sites.

V. Demographic Profile (age, gender, race/ethnicity, households, veterans)

Population	198,269	Change since 2010 – 4.93% increase	Persons in Poverty 29,639 15.2%	Poverty Rate Change 2000-2013 5.7%	Children in Poverty 9,726 Poverty Rate Change
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					2000-2013 7.6%
Gender	Male 93,888	Female 103,187	In poverty Male 12,325 (13.19%)	In Poverty Female 15,334 (15.16%)	
Ages	0-4: 12,363 In Poverty 3,307 (27.5%)	5-17: 34,180 In Poverty 6,632 (19.7%)	18-64: 123,281	Over 64: 62,981 In Poverty 1,717 (6.3%)	
Race	White : 83.94% 165,471	Black: 12.25% 24,143 Other: 3.81% 7,509	In Poverty White 17,134 (10.52%)	In Poverty Black 8,472 (36.25%)	In Poverty Other/Multiple 2,053 (35.84%)
Ethnicity	Non-Hispanic in Poverty 919 (24.8%)	Hispanic in Poverty 26,740 (14,01%)			
Households	Total 82,807	Total in households poverty 10,737 (13%)	In poverty Female Head 3,391	In poverty Married 1,200	In poverty Male Head 842
Veterans	15,997	18-34: 1,231	35-54: 4,013	55-54: 4,157	Over 65: 6,596

VI. Changes in the Community Over Time: Trends in population, age, households, race, housing, education and income. (Appendix 13: 2010 Census Analysis, Sangamon County Regional Planning) *(Note: for tables not displayed in this report, please refer to Appendix 13 for them.)*

Population

Sangamon County Census Analysis- 2010 its smallest growth rate of 1% between 1980 and 1990. The State of Illinois demonstrates an even wider range of growth rate fluctuation, with

growth rates from 101% between 1850 and 1860 to one-half of a 1% increase for the 1980-1990 decade. For each of these three bodies, growth rates have slowed in recent decades. These declining rates of growth are significant, and may suggest a move toward potential future population declines.

Population Growth

In recent decades, mid-size Illinois counties such as Sangamon, Champaign, McLean, Macon, Peoria, Rock Island and Winnebago show considerable variation in growth rates. Sangamon County’s population increased moderately at 4.5% from 2000 to 2010.

**Table 2: POPULATION GROWTH
Sangamon and Selected Illinois Counties, % Change
1990-2010 Population**

County	1990	2000	2010	2000-2010
Sangamon	178,386	188,951	197,465	4.5%
Champaign	173,025	179,668	201,081	11.9%
McLean	129,180	150,433	169,572	12.7%
Macon	117,206	114,706	110,768	-3.4%
Peoria	182,827	183,433	186,494	1.7%
Rock Island	148,723	149,374	147,546	-1.2%
Winnebago	252,913	278,418	295,266	6.1%
Illinois	11,430,602	12,419,293	12,830,632	3.3%

In comparison, most counties fluctuated at a similarly moderate rate. McLean County proved the exception again with a growth rate of 12.7% between 2000 and 2010, although this represents a decline from its previous growth rate of 16% from 1990-2000. Macon and Rock Island Counties both showed a population decrease in the last decade, whereas Peoria and Champaign Counties showed only slight increases.

Within Sangamon County, a comparison of population growth of the twenty-six townships reveals distinct trends from those that occurred in the last decade. Between 1990 and 2000, most townships experienced population increases, with the exception of the east side of the county. In contrast, eleven of the twenty-six townships in Sangamon County experienced decreases in population from 2000 to 2010. The bulk of these townships were on the west side of the county.

The greatest population growth in the last decades occurred in Ball, Fancy Creek, New Berlin, and Rochester Townships, which all had population growth of over 20% (Table 3, Figure 2). With the exception of New Berlin and Island Grove Townships, these townships are all located on outside edges of Capital Township and the City of Springfield. These trends represent the increased prevalence of “bedroom communities,” or those yet-developable communities near enough to the City of Springfield to attract commuters, but which can expand and attract residents without facing some of the growth constraints associated with annexation to the City of Springfield.

Table 3: POPULATION BY TOWNSHIP, 2000-2010

Sangamon County 1990-2010 Population

	1990	2000	2010	# Change	% Change
Auburn Township	5,208	6,020	6,333	313	5.2%
Ball Township	3,475	4,573	6,701	2,128	46.5%
Buffalo Hart Township	226	195	173	-22	-11.3%
Capital Township	104,126	111,471	115,756	4,285	3.8%
Cartwright Township	1,381	1,507	1,482	-25	-1.7%
Chatham Township	4,961	6,019	6,978	959	15.9%
Clear Lake Township	7,780	8,155	8,527	372	4.6%
Cooper Township	771	820	893	73	8.9%
Cotton Hill Township	954	1,065	902	-163	-15.3%
Curran Township	1,505	1,678	1,586	-92	-5.5%
Divernon Township	1,484	1,548	1,510	-38	-2.5%
Fancy Creek Township	3,293	4,145	5,410	1,265	30.5%
Gardner Township	3,870	4,250	4,245	-5	-0.1%
Illioopolis Township	1,366	1,302	1,314	12	0.9%
Island Grove Township	494	532	621	89	16.7%
Lanesville Township	225	199	208	9	4.5%
Loami Township	1,071	1,118	1,070	-48	-4.3%
Maxwell Township	215	194	193	-1	-0.5%
Mechanicsburg Township	2,261	2,116	2,293	177	8.4%
New Berlin Township	990	1,262	1,524	262	20.8%
Pawnee township	2,775	2,948	3,058	110	3.7%
Rochester	4,432	4,486	5,361	1,145	25.5%

Township Springfield	7,857	7,046	6,245	-801	-11.4%
Township Talkington	257	263	189	-74	-28.1%
Township Williams	2,797	3,310	3,446	136	4.1%
Township Woodside	14,612	12,729	11,447	-1,282	-10.1%
TOTAL	178,386	188,951	197,465	8,514	4.5%

The largest decreases in population in the 2000-2010 decade occurred in the rural areas of Sangamon County. Nine of the eleven townships that experienced decreases in population in the last decade were in rural areas, many in the western portion of the county. The more distant the township area from a larger urban area, the greater the decrease, including Talkington, Buffalo Hart, and Cotton Hill Townships, each with a decrease of more than 10%. It is important to note, however, that these large percentages of decrease may slightly exaggerate the trends in these areas, since their population bases are smaller than those in the rural areas. For example, with a decrease of only 74 people in the last decade, Talkington Township experienced a population growth rate of -28.1%. Even taking these numerical factors into account, however, there is a pattern of decrease in the rural areas more prevalent in those townships that do not have a strong incorporated area attracting residents. This is likely also related to the mechanization of farming and the decline of smaller family farms, requiring less population in rural areas.

Exceptions to this pattern of decline in rural areas are the large decreases in Woodside and Springfield Townships, which are not as rural in nature. These areas are generally already developed, are covered by Springfield School District 186, and do not represent areas with as many opportunities for growth as some of their neighboring townships that house growing bedroom communities. Residential growth in the Villages of Chatham, Rochester, and Sherman (Chatham, Rochester, and Fancy Creek Townships) may reflect positive resident attitudes toward community attributes, such as village amenities, services, or school districts.

Noteworthy Trends — Two significant trends are demonstrated in the population characteristics data that have potential to impact the region significantly:

Sangamon County’s growth increased at a slighter rate in the last decade than the prior decade, suggesting that the population’s rate of growth is trending downward. This is in contrast to some peer counties that continue to see more robust growth.

Most rural townships in Sangamon County that do not immediately border the urbanized area experienced population decreases. As agricultural communities require fewer people to sustain their industries, birthrates decline, aging populations experience natural declines, gas prices increase, and residents move to urban areas; rural areas in Illinois have begun to see noteworthy decreases in population.

Policymakers in Sangamon County should be aware of these trends and consider them as well as programs targeted to meet rural needs through increased amenities and quality-of-life programming.

Population of incorporated areas in Sangamon County increased by 5.2% overall. The average growth rate for the various incorporated areas was 10%. The Village of Clear Lake experienced the most population decline. In contrast, Spaulding (56%), Sherman (44%), and Chatham (34%) had the greatest rates of population growth (Appendix 11, Table 4). These patterns reflect similar trends to those discussed above related to growth in “bedroom communities,” as opposed to rural areas.

Noteworthy Trends — Another important trend evident in the population distribution data is the continued dispersion of the City of Springfield’s population. North and central portions of the city have experienced population decline, whereas the southwest portion of the city’s census tracts all exhibit increases in population.

While this statistically supported trend parallels intuitive assumptions based on the west side’s growth, it is important to note because of its significant potential to impact policy decisions.

New development on the outer reaches of the city, rather than infill development, has potential to increase infrastructure costs to the city and lead to decline and blight in the central city areas.

While some favorable increases in population appear to have occurred in some of the near northeast census tracts in the city, perhaps incentivized by redevelopment projects, the decreases in population in the majority of the central city are a noteworthy and concerning trend.

Age Characteristics

Continuing the trend from 2000, Census data indicate that the population of Sangamon County as a whole is growing older. Since 1970, median age has been increasing in the State of Illinois, Sangamon County, and the City of Springfield. Years with the largest increases for Sangamon County include from 1980-1990 and 1990-2000. Between 2000 and 2010, median age in Sangamon County increased by just under two years. Median age in Springfield, which is generally slightly lower than Sangamon County’s median age, increased by 1.3 years. Significantly, both have higher median ages than the State of Illinois as a whole, pointing toward an aging population in the region.

Increases in median age over the last several decades have been heavily influenced by the aging of the Baby Boom cohort beyond the median age (Table 8). Baby Boomers in 2010 are considered those who are in the age cohort of 45-64 years. In 1970, Baby Boomers were in the under 18 age cohort. Table 8 demonstrates the shifts in population distribution based on the growth of the Baby Boomers. From 1970 to 2000, this age group shifted from under 18 to middle age, and the distribution bulge of above 30% in these selected age groups represents this trend. In 2010, Baby Boomers were aging beyond the middle range of 35-54 years, seen by the reduction of this figure to 28%.

Table 7: MEDIAN AGE Illinois		Sangamon County	Springfield
1970	28.6	30.3	31.4
1980	29.9	30.8	31
1990	32.8	34.2	34
2000	34.7	37.3	36.9
2010	36.6	39.2	38.2

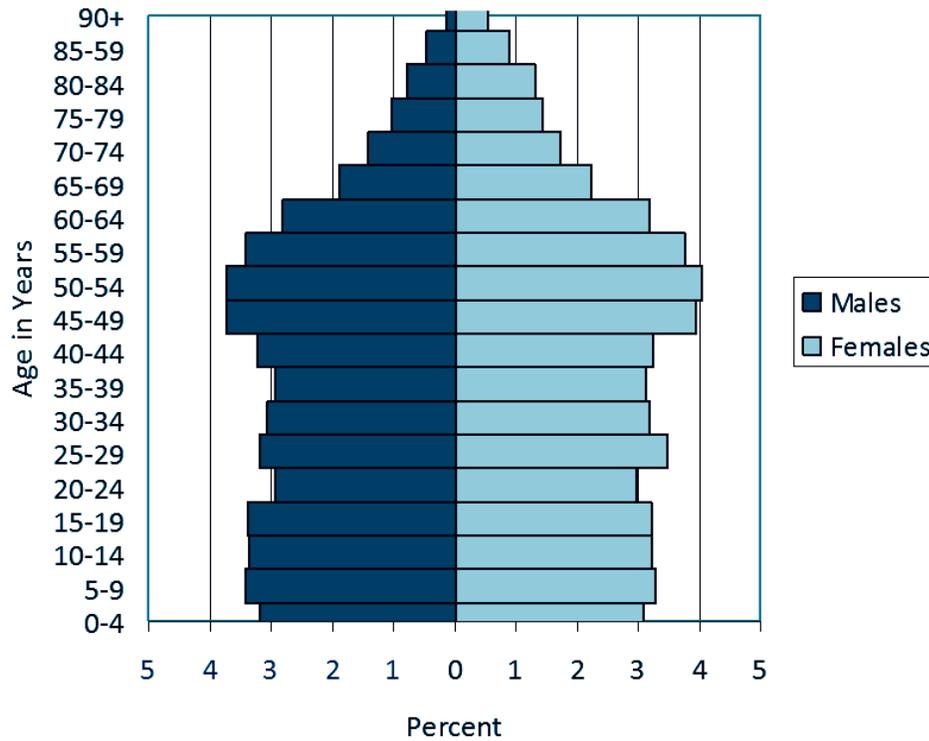
Accordingly, the age group of 45-64, which has previously not been a cohort of focus, has been added. The 26% increase in this group from 2000-2010 indicates that Baby Boomers have now reached this stage of life. The population pyramid (Figure 4) also demonstrates this trend. Sangamon County’s pyramid represents a typical 2010 structure, with the Baby Boom generation creating the “bulge” from ages 45-64.

As time continues to pass, this age distribution will have significant impact on the region, as well as the amenities and services its residents may require. Sangamon County’s largest population cohort will soon reach retirement age, leading to a higher dependency ratio of non-working population to working population (see page 21 for further discussion).

Increases in the relative size of the retirement-age population cohort could have other effects as well. For example, it may lead to population decline as residents relocate. Alternatively, it could lead to on-going increases in the number of aging residents. In 2020, for instance, nearly 8% of residents are likely to be reaching age 70, perhaps requiring additional social services and/or medical care. This group would reach approximately age 80 by 2030. While life cycle effects will likely lead to a slight reduction in the number of people in this age cohort over time, as natural deaths occur, improved medical care will likely reduce this decline and increase the life expectancy of this age cohort.

	1980	1990	2000	2010	1980- 1990	1990- 2000	2000- 2010	
Under 18 Years	48,356	45,551	47,147	46,816	-6%	4%	-1%	-3%
35-54 Years	36,967	46,893	59,066	55,268	27%	26%	-6%	50%
45-64 Years	n/a	n/a	44,841	56,522	n/a	n/a	26%	n/a
65+ Years	22,037	24,450	25,524	27,362	11%	4%	7%	24%
Total	176,089	178,386	188,951	197,465	1%	6%	5%	12%

Sangamon County 2010 Population Pyramid



Geographical Distribution

Median age in Sangamon County varies by geographical area. For instance, the lowest median age county-wide is 27.1 years, in Census Tract 28.07. In contrast, the median age in Census Tract 20 is 55.5 years. This variation in age is likely linked to other demographic factors as well, such as race and gender.

Noteworthy Trends— Sangamon County’s median age has increased in the last decade, particularly in the western portion of the City of Springfield and in rural areas. Areas that have lower concentrations of white population and lower incomes, in contrast, retain lower median ages.

It will be important for policymakers to consider the needs of this aging population in future years. Some avenues for doing this that may be considered include expansion of medical services, public transit, and community or accessible housing.

Age By Township

An examination of townships suggests that the highest percentages of children (those under 18) are in Ball Township and Maxwell Township, both of which have 30% of the population in this age cohort. By way of comparison, in 2000 Ball and Cartwright Townships each had a high distribution of 30%. Sangamon County has a county-wide distribution of 27% under the age of 18 in 2010, whereas in 2000 there were 25% under the age of 18.

In 2010, Buffalo Hart Township had the lowest percentage of children, 12%. This continues a striking trend of decreasing numbers of children in this township, down from 16% in 2000 and 31% in 1990. Buffalo Hart Township's rural character, including no municipalities, provides a likely explanation for these aging trends.

As Table 11 indicates (Appendix 13, page 15), the lowest median age, 35.7, occurred in Auburn and Chatham Townships. Buffalo Hart had the highest median age, 51.9. The median age for Sangamon County in 2010 was 39.2.

**Table 12: (See report page 16, Appendix 13)
COMPARATIVE AGE DISTRIBUTION,
2000-2010**

Selected Geographies

Table 12 provides a preliminary look at the growth trends for specific age cohorts in Sangamon County as compared to both the State of Illinois and the City of Springfield.

As the county's age distribution data discussed above suggest, fewer children and higher proportions of older adults now reside in the county. However, Sangamon County's decrease in residents age 18 and under is smaller than the decrease experienced by Illinois in the last decade. Sangamon County showed a decline of only 0.7%, compared to a 3.5% decline for the state at large. The City of Springfield has experienced even less of a decline and also had a smaller increase than the county or state in its population age 60 and over.

Under 18 Age Group Table 13: Historical % under 18 years; Sangamon County (Appendix 13, page 17)

Throughout the county, the historical trend has been a gradual decline in the number of children (defined as those under 18 years of age) from decade to decade. From 2000 to 2010, only ten census tracts showed an increase in the number of children. This increase was negligible in all but Tracts 8 (near east Springfield) and 13 (downtown). With 39% of its population under 18 years of age, Census Tract 8 has the greatest distribution of children in the County. Tract 8's relatively low median age reflects this fact.

For Tract 8 (which includes the area between 11th and 19th Streets that is north of Jefferson Street and south of North Grand Street), the new development of residential homes in Madison Park place likely led to this increase. Tract 13 runs from 5th Street to Walnut Street, between Jefferson Street and Lawrence Street. Here, the substantial increase in the under-18 population is likely due to additional residential housing downtown, on top of an initially small residential base, allowing for smaller numerical increases to reflect greater percentage change.

In contrast, Tract 14 has only 4% children, followed by Tract 27 with 19% children. These low percentage distributions of children are in keeping with the historical trends for these tracts.

Figure 6 depicts the percent distribution of those under 18 years of age by tract in 2010. Census tracts with over 30% of their population under 18 years of age are concentrated on the east side of the City of Springfield. The large proportions of children in these areas are noteworthy, particularly given some other demographic challenges facing the area.

Baby Boom Generation (45-64 Years) Table 14: BABY BOOM GENERATION Appendix 13, page 19)
Sangamon County 2010

As discussed above, the Baby Boom generation, age 45 to 64 in 2010, are an age group of historical importance. The Baby Boom generation was born between 1946 and 1965, in a time of high fertility rates and rising levels of births. In 2010, Baby Boomers made up approximately 29% of the population of Sangamon County, as compared to 31% in 2000. Geographically, Census 2010 indicates that larger concentrations of Baby Boomers reside in the area surrounding the City of Springfield than within the city. These areas represent more affluent and rural areas.

In Sangamon County, the Baby Boom population ranges from a low of 18% in Tract 28.02 to a high of 38% in Tract 36.01 (Figure 7).

As a whole, Sangamon County's population has aged since 2000. As the Baby Boom generation ages, there are not as many members of the 25 to 44 year-old age cohort to replace their demographic in Sangamon County's workforce. In 2000, the Baby Boom generation was part of the 35 to 54 age cohort, and therefore was still a presence in the County's labor force. However, as the Baby Boom generation nears retirement age, the aging population will be a concern for Sangamon County.

As discussed above, some of the implications of these changes include increasing retirements or increased need for social services and healthcare. Particularly because this age cohort generally lives in the outlying areas surrounding the city, transportation to and from these amenities for aging residents may also be a policy matter of concern.

Age 65 and Above

In keeping with the aging population trends of the nation, the number of persons age 65 and older has increased by approximately 7% since 2000 in both Sangamon County and the State of Illinois. Although the proportion of the population in this age cohort decreased from 1990-2000, this proportion increased to 13.9% in 2010. In 2010, this age cohort made up 13.9% of Sangamon County's total population, compared to 13.5% in 2000. The geographical distribution of this cohort is represented in Table 14 and Figure 8.

The highest concentrations of those aged 65 and older expanded in geographical distribution toward the outlying areas around the city of Springfield, particularly on its west side. This represents a slight change from 2000, when tracts within Springfield's downtown and near west side, such as 3, 14, 15, 10.02, and 11 had the highest percentages. In contrast, Tract 20, with 28.2% over the age of 65, had the highest concentration in 2010. Tracts 10.01, 11, and 15 had the next highest concentrations, all with over 20%. This suggests that, while tracts that previously had high percentages of elderly residents maintained relatively similar distributions of those aged 65 and older, aging patterns in other, surrounding tracts have caused more tracts to fall into the category with highest percentages of respondents in this age cohort.

Noteworthy Trends—

Another useful way to consider age data is to develop dependency ratios for a region. Age dependency ratios represent the percentage of residents that are either children (0-18 years), elderly (65 years +), or both (considered the dependent populations), as compared to the population of working age (19-64 years). Dependency ratios for Sangamon County and Illinois are provided to the below.

Sangamon

Illinois

	County	
Age dependency ratio	66.4	58.6
Old-age dependency ratio	24.4	19.9
Child dependency ratio	41.8	38.7

These ratios suggest that the population that is of working age has an unusually high portion of dependent population to support in this region. While these ratios are not a perfect metric because some residents work prior to age 18 and after age 65, they nevertheless provide a simple and useful representation of the potential impact that age distribution may have on the economic well-being of the region. Increases in the proportions of older and younger populations can place demands on healthcare, social services, and education services, which can create strain on governmental entities, particularly in a scenario where the economic base of those in the labor force is not robust enough to support these service levels.

The trend of a slightly more elderly distribution of the female population occurs in all racial groups except that of American Indians, suggested by the median ages presented in Table 17, below.

Table 17 also indicates that the median age for black residents of Sangamon County is substantially lower than that of white or American Indian residents. Blacks have a median age of 26.8 years of age, compared to the total median age of 40.6 for Sangamon County. Asians have a median age of 33.1 years.

**Table 17: MEDIAN AGE BY RACE
Sangamon County 2010**

Race	Total	Male	Female
White	42.0	40.4	43.6
American Indian	40.6	41.0	40.5
Asian	33.1	31.9	34.4
Black	26.8	25.4	28.0
TOTAL	40.6	41.0	40.5

Race Characteristics

Composition

As in 2000, the white population was the largest racial group in both Sangamon County and the City of Springfield in 2010. However, the white population made up a smaller percentage of the population in 2010 in both areas, with 83.6% in Sangamon County (compared to 87% in 2000) and 75.8% in Springfield (compared to 81%). This trend stems from increases in the black population, especially in Springfield, and slight increases in the population of two or more races.

In 2010, the black population was the largest minority with 11.8% in Sangamon County and 18.5% in Springfield. About 2.2% of the population indicated that they were of two or more

racial groups. Small percentages of the population fell into the Asian (1.6% total) or Native Hawaiian and Other Pacific Islander (0.1%) categories.

	Sangamon County		Springfield	
	#	%	#	%
One Race	193,146	97.8	113,187	97.4
White	165,103	83.6	88,092	75.8
Black or African American	23,335	11.8	21,510	18.5
American Indian and Alaskan Native	394	0.2	239	0.2
Asian	3,220	1.6	2,555	2.2
Asian Indian	1160	0.6	1,160	1.0
Chinese	611	0.3	611	0.5
Filipino	347	0.2	347	0.3
Japanese	87	0.0	87	0.1
Korean	249	0.1	249	0.2
Vietnamese	271	0.1	271	0.2
Pakistani	146	0.1	146	0.1
Taiwanese	74	0.1	74	0.1
Thai	52	0.0	52	0.0
Other	117	0.0	117	0.1
Native Hawaiian and Other Pacific Islander	47	0.1	25	0.0
Native Hawaiian	9	0.0	4	0.0
Guamanian or Chamorro	13	0.0	3	0.0
Samoan	12	0.0	6	0.0
Other Pacific Islander	4	0.0	3	0.0
Some other race	1,047	0.5	766	0.7
Two or more races	4,319	2.2	3,063	2.6
TOTAL	197,465		116,250	

Although not a racial category, “persons of Hispanic origin” is a population subgroup of great interest, especially since it is one of the fastest growing subgroups in the country. In Sangamon County, there was a 74.0% increase in the number of persons of Hispanic origin between 2000 and 2010 and, in Springfield, a 73.9% increase. This represents an acceleration in the trends of population increase for persons of Hispanic origin since the last decade, when the subgroup grew by 57% in Sangamon County and 54% in Springfield. However, in both geographic locations, “persons of Hispanic origin” constituted 2% of the population or less (Table 19). This percentage is significantly lower than the 15.8% population of persons of Hispanic origin in the State of Illinois.

Racial diversity in Sangamon County has continued to increase over the past decade. From 2000-2010, the total population grew at a rate of 4.5%. The black, Asian, other, and two or more races population groups grew at rates far higher than this over the last decade. Those of two or more races experienced the greatest proportional increase as a percentage of population, with approximately 88% growth. Numerically, the group that grew the most was blacks, with an increase of 5,098. In contrast, whites, Native Hawaiians, and American Indians experienced population decreases. As a proportion of the total population of the county, blacks experienced the greatest increase in their population distribution. These trends are similar to those that occurred from 1990-2000, with accelerated rates of increase in racial diversity.

In contrast to the 2000 Census, 2010 data indicate that whites experienced both numerical and proportional decreases in the last decade, with a decline of 616 people, from 87.4 to 83.6%. Although the total population's growth rate in the City of Springfield was roughly the same as that for Sangamon County, racial trends were even more pronounced in Springfield. Whites experienced a 5.2% decrease in the proportion of the City's population they made up, and the black population proportion grew by 3.2%. In Springfield, the black population increased at a slightly lower rate than it did county-wide over the ten-year period, potentially a numerical effect of the larger population base in this decade than in the last. However, the Asian population increased at a higher rate within the city than it did elsewhere in the county.

Table 21: RACIAL COMPOSITION AND DISTRIBUTION
Sangamon County (total)

Racial Designation	2000		2010		# Change 2000-2010	% Change 2000-2010	% Change in Distribution
	Pop.	% Dist.	Pop.	% Dist.			
White	165,719	87.4%	165,103	83.6%	-616	-0.37%	-3.80%
Black	18,237	9.7%	23,335	11.8%	5,098	27.95%	2.10%
American Indian	397	0.2%	394	0.2%	-3	-0.76%	0.00%
Asian	2,082	1.1%	3,220	1.6%	1,138	54.66%	0.50%
Hawaiian	53	0.0%	47	0.1%	-6	-11.32%	0.10%
Other	709	0.4%	1,047	0.5%	338	47.67%	0.10%
Two or More	2,294	1.2%	4,319	2.2%	2,025	88.27%	1.00%
Total	188,951		197,465		8,514	4.51%	
Hispanic	2,000	1.1%	3,480	1.8%	1,480	74.00%	0.70%

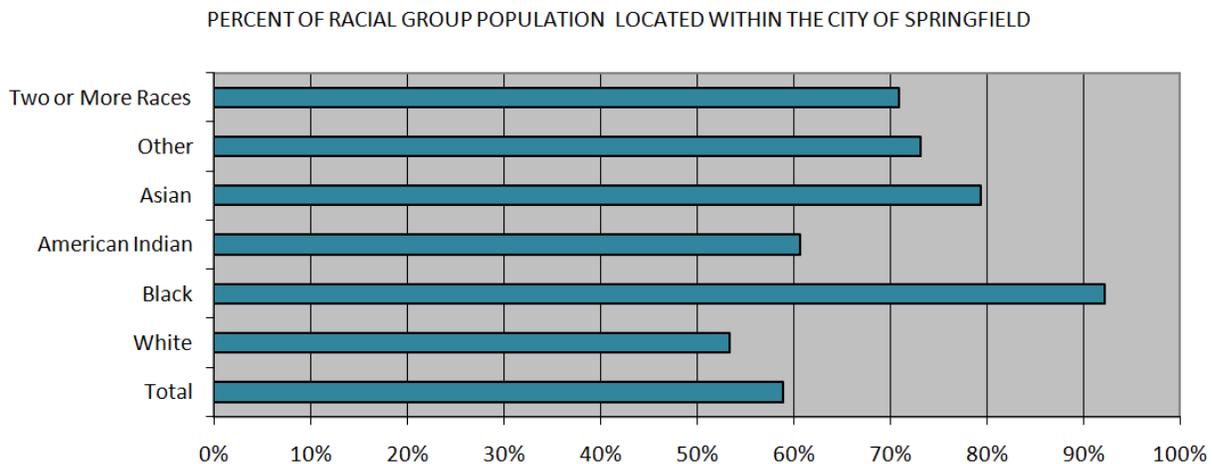
City of Springfield (total)

Racial Designation	2000		2010		# Change 2000-2010	% Change 2000-2010	% Change in Distribution
	Pop.	% Dist.	Pop.	% Dist.			
White	90,287	81.0%	88,092	75.8%	-2,195	-2.4%	-5.2%
Black	17,096	15.3%	21,510	18.5%	4,414	25.8%	3.2%
American Indian	231	0.2%	239	0.2%	8	3.5%	0.0%
Asian	1,620	1.5%	2,555	2.2%	935	57.7%	0.7%
Hawaiian	34	-	25	0.0%	-9%	-26.5%	
Other	525	0.5%	766	0.7%	241	45.9%	0.2%
Two or More	1,661	1.5%	3,063	2.6%	1,402	84.4%	1.1%
Total	111,454		116,250		4,796	4.3	
Hispanic	1,337	1.2%	2,325	2.0%	988	73.9%	0.8%

Distribution

As indicated above, minority racial groups in Sangamon County are concentrated in the City of Springfield. Approximately 59% of the Sangamon County's total population lives in Springfield. However, 92% of the black population and 79% of the Asian population, the two largest minority groups, reside within the City (Figure 9). The population outside of Springfield is predominately white. Only 5.2% of the population outside of Springfield is not white. However, this represents an increase from 3.2% in 2010, indicating that racial diversity in the county is becoming slightly more dispersed.

**Figure 9: RACIAL POPULATION DISTRIBUTION- WITHIN CITY OF SPRINGFIELD
Sangamon County 2010**



The 2010 Census suggests that the patterns of increased dispersion of the black population from the 2000 Census have continued in the last decade. Fifty percent of the total black population lived in only the nine tracts with the highest concentration of blacks in 2010, which included Tracts 15, 16, 17, 19, 23, 24, 25, 28.02, and 30 (Table 22, Figure 10), all in east Springfield. In contrast, fifty percent of the black population could be found in only six tracts in 2000. This effect comes from the increases in the dispersion of the black population living in Tracts 19, 25, 28.02, and 30, accompanied by proportional decreases in the other most heavily concentrated tracts. The tract with the highest concentration of black population was Tract 17 with 78%. Rural tracts in Sangamon County maintained concentrations under or around 1% black.

In a comparison of Census 2000 and 2010, with very few exceptions, census tracts generally experienced moderate to large increases in the percentage of their population that was black. The tracts that experienced decreases were those that previously had the highest proportions of black population, such as Tracts 15, 16, and 17. However, these tracts still represent the highest concentrations of the black population, which cluster on the east side of Springfield (Figure 10). The continued increases in the black population (28%) over the last decade account for these trends of dispersion and increased areas of concentration. Regardless of this variation among specific census tracts, however, it is important to note that overall patterns related to the geographical distribution of various racial groups in the City of Springfield remained similar to prior years' patterns and perhaps became even more entrenched as more white residents moved to areas outside the City of Springfield. For example, Springfield experienced a decline of 2.4% for white residents while experiencing a 25.8% increase in its black population.

As Table 24 suggests, there are no overwhelming areas of population concentration for other racial minorities in Sangamon County. Since so few members of these populations live in Sangamon County, the reliability of trends for populations is limited. One exception may be the Asian population, which appears more likely to live in the southern and western parts of the City of Springfield. Nearly 50% of the Asian population in Sangamon County lives in Tracts 10.04, 28.02, 29, 30, 31, 36.03, 36.04 (Table 24).

Noteworthy Trends—

In a trend similar —though perhaps of less magnitude— to the one occurring throughout the nation, Sangamon County's population became more diverse in the past decade. Black and Asian populations grew and became slightly more dispersed throughout the City of Springfield and Sangamon County. However, the highest concentration of black residents remains in East Springfield, as has been the historical pattern. The population of Hispanic origin also increased.

Households

Household Growth

By Census definition, a household is all the people who occupy a housing unit. Throughout the past two decades, the number of households has increased in Springfield, Sangamon County, and Illinois (Table 25). The growth rate of households exceeded the rate of population growth from 2000 to 2010. Particularly in the City of Springfield, household growth far surpassed population growth.

The continued trend of smaller household size contributed to the higher household formation rate. Several smaller household types that have experienced increases may have contributed to this trend, including increased numbers of single-person elderly households and single-parent families (see dependency ratio discussion on page 21). The tendency of young adults to marry and form shared households somewhat later than in prior decades may also be contributing to higher individual household formation rates, as well as lower average numbers of persons per household.

Growth in the number of households from 2000-2010 varied in different portions of the county. The sharpest declines in households occurred in the north and east parts of the City of Springfield. The single greatest change in households occurred in Tract 17, with a 33% decrease, and Tract 32.01, with an 84% increase. The largest increases in households were on the west and south sides of Springfield.

Throughout the region, growth trends for number of households paralleled those for population. Households tended to have sharper changes in percentage increases and decreases, which would be expected due to the lower total number of households (Table 26). The only tract where this pattern of parallel trends did not hold true was Tract 9 on the northeast side of Springfield.

Noteworthy Trends— One-person households have increased by 8.3% in the past decade and are concentrated in the central east part of the City of Springfield. Policymakers should consider the implications of this trend, which could point to aging residents, increased likelihood for younger generations to postpone forming families until later in life, or some other pattern with potential to impact service needs and preferences.

Generally speaking, there has been a dramatic change in the distribution of certain family types that make up households in Sangamon County. Between 1980 and 2010, there was a 23% decrease in married couples with children, but an 84% increase in female-headed households with related children and a 66% increase in other family types, including grandparents caring for children. These family types can often be correlated with lower incomes, increased difficulty in providing childcare when children are not in school, and other challenges.

It is therefore also important for policymakers to consider this trend, which represents not just a change in the nature of households, but a transformational change in how our region thinks about family as part of its social fabric.

Noteworthy Trends—The percentage of households with children in which a married couple is the head of the household has decreased over the last decade. Increases have occurred in the region and within the City of Springfield for female-headed households and other household types with children. Female-headed households with *their own* children increased by 14%, whereas female-headed households with any related children increased by 30% over the last decade. Though these percentage increases are smaller as a proportion of the total families with children, this is due to an overall decline in the number of families with children. In contrast to female-headed households with children, married families with their own children experienced an 18% decline in the last decade.

This represents a fairly dramatic increase in female-headed households, concentrated on the east side of Springfield. Changes in family structure can be correlated with changes in income, educational opportunity, and other matters of key concern for both residents and policymakers. These trends are significant for policymakers to monitor in the coming decade.

Noteworthy Trends— Vacancy rates in the region remain elevated as compared to the ideal standard for community mobility. This is particularly true for the City of Springfield, where vacancy is higher than in the Sangamon County region as a whole, and higher than that of the state. Tracts with the most vacant properties are on the near east side of the City of Springfield.

Noteworthy Trends— Public administration continues to decline as an industry in Sangamon County. With a decline of approximately 6% over the last decade as a proportion of total employment by industry. This is a reversal of the trend of the prior several decades, when it increased from 13% in 1970 up to 20% in 2000, and is likely tied to cuts in state employment or transfer of some functions of state government to locations outside the capital. This shift in labor force distribution across industries may have significant impact on numerous factors in the Sangamon County region.

Conclusions

Census data is a valuable resource for leaders in the Sangamon County region. Particularly in terms of on-going trends and their policy implications, demographic factors can and do have a significant impact on the nature of how residents live. Throughout this analysis, SSCRPC staff has summarized several significant and relevant trends revealed by the data. A thoughtful analysis of census data from the past decade leads to significant and provocative questions for the decade to come. Should present trends continue, the impact of some noteworthy demographic factors will only continue to intensify in coming years:

Sangamon County will continue to see increased proportions of its population becoming dependent on a proportionately smaller labor force. As Baby Boomers reach retirement age in the next decade, but continue to see longer life expectancy horizons because of improvements in medical care, a substantial portion of the population, up to approximately 25%, will be in the 55 to 74 year age cohort in 2020 and the 65 to 84 year cohort in 2030. At the same time, most areas in the region have experienced a decline in the percentage of children that will be reaching working age during this time.

Sangamon County will continue to develop a different orientation toward the concept of “family.” The traditional household of a married couple with their own children has decreased as a proportion of total households and may continue to do so. Single-person households, female-headed households, and other nontraditional family types will potentially increase proportionately in the coming decade, which may bring challenges as communities face a changing social fabric and the policy implications of those trends.

Sangamon County will continue to observe both its positive and negative trends clustering in different geographical centers in the region. It is of great significance that many observed trends in family size and type, vacancy, income, and population increases versus decreases have not occurred consistently or on an equally dispersed basis throughout the region. Instead, geographical disparities in the direction and intensity of certain trends have sharpened over the last decade. “Bedroom communities,” for example, have experienced notable increases in population while the City of Springfield and some smaller and more distant rural communities have seen declines. For many areas, population growth appears to be slowing in comparison to previous decades. Several of the family type trends discussed above are also particularly prevalent in low-income areas in Springfield, and some trends facing the eastern portion Springfield also appear to be expanding slightly northward.

As suggested throughout this analysis, many of the trends observed in Sangamon County, including those highlighted above, parallel statewide and national trends. However, this does not minimize the significant potential they have to impact the Sangamon County region, nor the attention that should be paid to these demographic trends by local leaders and policymakers. The social fabric of our community, the types of jobs that our region can attract, the provision of adequate healthcare for residents, the appropriate application of social service models, the challenges facing our education system, and the potential for residential development in our region—each of these critical aspects of community well-being are among the overwhelming number of factors that can ultimately be traced back to census data.

VII. Key Findings and Summary of Quantitative and Qualitative Data That Supports Each of Them.

Table:

- A. Poverty Profile
- B. Income Profile
- C. Employment Profile
- D. Transportation Profile
- E. Public Benefits
- F. Food Security
- G. Education Profile
- H. Child Care Profile
- I. Housing Profile
- J. Health Profile

2013 Sangamon County Poverty Profile *Community Commons Platform US Census Data Appendix 5				
Poverty Estimates*	29,639 households (10,737 households)	13% of total households in Sangamon Co.		
Poverty Rate Change*	Increase of 5.7% from 2000-2013	National increase was 4.5%		
Population in Poverty by Race*	White: 10.52% 17,134 people	Black: 36.25% 8,472 people	Other: 35.84% 2,053 people	
Households in Poverty by Family Type*	Married: 2.3% 1,200 couples	Male Provider: 1.6% 842	Female Provider: 6.5% 3,391	

Child Poverty Rate*	21.7% Increase of 7.6% from 2000-2013	Ages 0-4 Increase of 12.88%	Ages 5-17 Increase of 5.8%		
Senior Poverty Rate*	6.3% 1,717 people				
Income Profile*					
Less than <u>\$10,000</u> 6.9%	<u>\$10,000-</u> <u>\$24,000</u> 14.8%	<u>\$25,000-</u> <u>\$49,000</u> 23.6%	<u>\$50,000-</u> <u>\$99,000</u> 32.1%	<u>\$100,000-</u> <u>\$149,000</u> 14%	<u>\$150,000-</u> <u>Over</u> 8.5%
Median Household Income - \$55,255					
Employment Profile*					
Unemployment	May, 2015 4.3%	January, 2015 6.04%	January, 2014 7.47%	January, 2013 8.58%	January, 2012 7.97%
Transportation*					
Workers 16+ 95,972	Percent Drive Alone 82.9%	Percent Carpool 9.2%	Percent Public Transportation 1.4%	Percent bicycle or walk 2.4%	Percent Taxi or other .09% Percent work at home 3.2%
Average Community Time - 18 minutes					
Public Benefits*					
Free and Reduced Lunch 30,820 (41.29%)	Households receiving SNAP Benefits 9,816 (11.85%)	Households Receiving SNAP below income poverty level 5,673	Households Receiving SNAP above income poverty level 4,143	Federally Qualified Health Centers 2 @ 6 sites	Persons receiving Medicare 30,251
Food Security – Appendix 16					
Food Insecurity Rate 14.2% (28,150 people)	% below 130% of poverty 50 %	% between 130% and 180% poverty 12%	% above 185% poverty 38%	# children on free and reduced lunch in Sangamon County: 13,832 of 28,403	
Educational Profile*					
Educational Attainment	No HS Diploma: 7.95%	HS Only: 28.3%	Some College: 22.9%	Associates Degree:8.4%	BS/BA:20.3% Bachelors +: 12.2%
Adult Literacy	7% lacking				

	literacy skills						
2014 Child Care Profile – Appendix 18							
Families Connected to Providers 410	Children Connected to providers 664	Of the total of children needing care in Sangamon County 44% were under the age of two.	<u>Most common problems in searching for care:</u> <ol style="list-style-type: none"> 1. Not enough openings: 34 of 102 (33%) 2. Schedule: 17 out of 102 (17%) 3. Cost: 15 out of 102 (15%) <p>For a single working parent living in Sangamon County, working full-time, making minimum wage (\$8.25.hr.) with an infant in child care, they would either pay</p> <ul style="list-style-type: none"> ❖ 59% of their income before taxes, if their child was in a child care center ❖ 42% of their income before taxes, if their child was in a child care home. 				
AVERAGE WEEKLY CHILD CARE TUITION INFORMATION							
This is Full Time Weekly Rates charged by providers for Day Shift. Tuition Rates	Infant	Toddler	2's	3-4's	5's	School-age Before/After	School-age Summer
Family Child Care Center-based Child Care Overall Average (all providers)	\$137.31	\$135.68	\$132.11	\$127.61	\$123.97	\$78.98	\$120.02
Percent of Average Weekly Income	24%	23%	23%	22%	21%	12%	20%
Housing Profile*							
Owner Occupied Homes in 2012 58,753 65.27%	Vacant Residential Addresses 4,645 of 99,866 (4.7%)	Occupied housing units without plumbing 146 (.18%)					
Health Profile – Identified Priority Needs in Sangamon, Logan and Christian Counties							

Appendix 14			
Identified Priority Needs			
1. Cancer (Multiple Types), 2. Diabetes, 3. Asthma, 4. Mother/Baby, 5. Mental Health, 6. Access to Healthcare, 7. Obesity, 8. Cardiovascular, 9. Immunization/flu/pneumonia			
Final Selected Priorities			
Improving Access to Care	Cardiovascular Disease	Diabetes	Obesity
Institute Triple Aim: <ul style="list-style-type: none"> • Improve Care of Individuals • Improve the Health of Populations • Reduce Waste, Variation and Cost 	Available Community Assets	Available Hospital Assets	

2015 Community Action Plan

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Community Action Plan for FY 2016

Submitted to the Community Resources County Oversight Committee and CSBG Advisory Council – July, 2015.

I. INTRODUCTION

In 1964, Congress passed the Economic Opportunity Act to begin America's War on Poverty. As a result of this initiative, a network of Community Action Agencies sprang up all over the country to alleviate the impact of poverty at the local level and to support people with low incomes to improve the quality of their lives. Today, all Community Action Agencies are overseen by a state agency designated by the Office of Community Services of the Administration for Children and Families, U.S. Department of Health and Human Services. In Illinois, this state agency is the Department of Commerce and Economic Opportunity (DCEO). A federal requirement, every three years, all Community Action Agencies must conduct a thorough needs assessment of their service area and create a Community Action Plan.

In 1965, Springfield-Sangamon County Community Action was designated as the agency to carry out anti-poverty work in Sangamon County, Illinois. The first program was Head Start. As the needs of the region changed and new funding opportunities became available, the agency changed and grew tremendously. In 1985, the County of Sangamon was then designated as the Community Action Agency for Sangamon County, and changed the legal name to the Sangamon County Department of Community Resources (SCDCR). SCDCR manages a wide array of over 15 programs three departments. The agency has an annual budget of over 4 million, 15 employees, and serves over 6,000 households and 15,000 individuals each year.

This Community Action Plan describes the needs of people with low incomes from our service area. It states SCDCR's programs for January 1, 2016 to December 31, 2016. A Strategic Planning Committee oversaw the process and consulted with stakeholder group survey responses while delineating these needs and developing the plan. We heard from the staff, other organizations, and hundreds of community residents with low incomes. Other research was done into secondary sources of information about our region. Hundreds of survey responses were analyzed from three different surveys completed by staff, community organizations, and adult constituents with lower incomes.

This Community Action Plan is simply a "snapshot in time" of an active process that continues all year round. Each year, assessment and planning do not stop with the publication of this Plan. As conditions in our communities change, routes we take may be adjusted to reach the goals we have set for the agency. However, the initial set of goals and activities in the 2016 Community Action Plan creates a clearer path for us to follow, and as a result, better services are offered to our participants while achieving better outcomes for them.

SUMMARY OF THE COMMUNITY ACTION PLAN (CAP)

With the assistance of funding provided by the Community Services Block Grant, SCDCR provides the community with access to services and service gaps from results of the Community Needs Assessment, Strategic Planning, Inter-agency customer surveys, staff, board and stakeholder survey data, census data and poverty data. Examples of programs created in response to the surveys include

educational scholarships, GED test funding, funding for Certified Nurses Training, financial literacy workshops, rental, dental and prescription medications assistance. In addition, when critical emergencies arise in the community, other agencies often call SCDCR agency for assistance to address situations such as house fires and medical and dental needs in order to avert homelessness, illness, and suffering. The partnership with the SUL Head Start program for a pediatric dental anesthesia program for children, ages 3 to 5 years is such an example. In this case, twenty children were suffering from baby bottle tooth decay. The partnership resulted in paid relief for these children who had suffered daily from extreme dental pain. Now free of pain, these children can learn, enjoy classes and the parents can now move forward, undistracted.

SCDCR also offers programs that assist clients with energy assistance: The Low Income Home Energy Assistance Program (LIHEAP), the Percent of Income Payment Plan (PIPP) and the Illinois Home Weatherization Assistance Program (IHWAP). LIHEAP is designed to assist households in paying for winter energy service. At this time, the months of September and October are reserved for appointments for senior citizens, disabled individuals, disconnected households and households with children under age 6. All other families with low incomes are served in November through May. For the 2015 (PY '16) program year, LIHEAP funds may be reduced by 1/3. The LIHEAP/ Percent of Income Payment Plan (PIPP) program will also be discontinued should LIHEAP State funds not be received in the fall of 2015.

Weatherization or IHWAP provides energy conservation services (such as attic and wall insulation, storm windows, caulking, glazing, weather stripping and furnace repair etc.), to income eligible clients based on income for all members in the household for the preceding twelve months. Furnace tune-ups, retrofits and repairs are included with dollar limits for all work done. This dollar amount is reached by performing a computerized energy audit to determine services that can be applied within the spending limit. The number of homes weatherized in 2015-16 PY '16) is yet unknown. The waiting list for service can be up to three years.

On June 1, 2011 a Low-Income Sewer Rebate Program (LISAP) was initiated for customers of the Springfield Metro Sanitary District. For the 2015-16 program, residents are eligible for a benefit of \$75.90 credited to their sewer accounts if they submit an application, their utility bill (containing a sewer charge) and are determined to be at the 150% or less of the federal poverty level like LIHEAP. For program year 2015, 1,886 benefits are available, down from 1,983 (-96) in 2014.

The CSBG Advisory Board is responsible for overseeing services and helping to design programs that address the needs of the community. The fifteen-member board is diverse and offers a variety of perspectives at each quarterly board meeting and through feedback from monthly updates sent by email. The tripartite board consists of five elected officials, six representatives of the poor and four representatives of major groups and interests in the community. During meetings, the director reports on the number of clients served and expenditures for the CSBG programs as well as other agency programs and activities during the quarter. Monthly report updates are emailed to the Council to help them keep up with agency activity and future approval items. Committee discussion takes place around activities for that quarter, ways to streamline services, evaluation of agency progress toward meeting the Organizational Performance Standards and the ways in which programming will change due to the updated ROMA Goals and NPI's. The departmental budget is also discussed each quarter. As a result, the board is able to determine if the CSBG work programs are best serving the needs of clients. In addition, SCDCR receives monthly oversight from the Community Resources Committee, which

consists of five members of the County Board. Based on monthly reports, oversight committee members ensure funds are being utilized appropriately.

On July 6 and 7, 2015, members of both of the CSBG Advisory Committee and agency staff, participated in the processes of updating the third year of the 5-year strategic plan. The facilitator was the Illinois Association of Community Action Agencies (IACAA) Vice President of Professional Development and a certified ROMA trainer who prepared the agenda and facilitated the process toward, setting priorities, gauging program outcomes using the ROMA Dashboard, developing strategies and identifying and developing resources. The process was engaging and revealed valuable information used to formulate programs and activities for the 2015 program year. Each year, until 2017, the plan will continue to be reviewed for progress and relevance to community needs.

One of the most significant outcomes of ROMA 2.0 and corresponding National Performance Indicators (NPI's) was around implementing programs and bundling services that better move families toward stability and self-sufficiency and also how to measure those results. In 2014-2015, in-person and web-based listening sessions, case studies of bundled services and learning communities have help move CA agencies closer to implementation of ROMA 2.0 in effect in 2015.

The Community Action Plan serves as the primary planning tool for CSBG programs. Feedback and results from the 2015 Inter-Agency Needs Assessment, Annual Needs Survey sent to community partners, board and staff, strategic planning updates, important partnerships with other social service partners are all included in the CAP to guide types of agency programs offered to meet needs in the community. The agency currently possesses written agreements with partner agencies to provide services to common households. Current Memorandums of Understanding in place include those with the Springfield Urban League, Lincoln Land Community College, the Springfield Community Federation, Urban League Headstart, and the Springfield Housing Authority Family Self Sufficiency program. A 2014-15 grant from the PNC Foundation enabled the agency to help fund five Destination Dinner Table Events with the Feitshans Family and Community Engagement program as well as assist the agency to meet multiple Organizational Performance Standards.

Less formal linkage agreements with Public Health, District #186, the Parent Help Line, the Regional Office of Education, Catholic Charities, Salvation Army, Springfield Housing Authority, Springfield Center for Independent Living, five different Banking institutions, are important and necessary to strengthen working relationships around customer referrals. Through Continuum of Care meetings, survey feedback from the recipients of agency benefits, community partners, boards and agency staff, the agency has been able to effectively address community needs.

II. NEEDS ASSESSMENT – See a) pp.13-14, b) pp. 3-5, c) see Appendices 2 and 3

III. SERVICE DELIVERY SYSTEM

The service delivery system for Sangamon County social services is through individual organization administrations, collaborative/partnership efforts and meetings of the Continuum of Care.

SCDCR is one of the main providers of human services in Sangamon County. Energy programs (LIHEAP and Weatherization are provided on a first come-first serve basis by telephone to set an

appointment). Walk-in appointments are held weekly at the Salvation Army and monthly at the same location for medication and dental assistance. Since the agency moved to the new location in 2010, services are now accessible by bus in the medically underserved area.

However, until community agencies convene around reduced funding and how to address inter-agency referrals and determine how to address families moving from agency to agency for assistance, the access landscape in our area will not change. The current delivery system is disconnected and significantly less effective likely due to the lack of common tracking software.

Local gaps in services, include transportation access and a rural transportation [system, especially for seniors who need to access groceries or attend medical appointments](#). As a result, family members, neighbors, helpers or case managers assist those in need of transportation to doctor appointments, shopping, etc. Unfortunately, the SMTD bus service does not yet reach the west part of the city, where many jobsites are located. Therefore, workers transport their bicycles on the bus and ride the rest of the way to their worksites.

Outreach to community groups, high rises and senior service agencies remains constant on a monthly or weekly basis, respectively by the CSBG and energy staffs.

For dental and medication outreach, agency personnel attend homeless health clinics at Kumler church and monthly at the Salvation Army Community Connections events to provide better homeless and/or struggling customer access. Agency pharmacy and dental vendors are also close in proximity to the homeless population near low-income neighborhoods.

CSBG appointments are taken by call in on a first-come-first served basis with the exception of referrals from community partners like the Springfield Housing Authority Family Self Sufficiency program with whom we work as partners to assist families toward self-sufficiency. The agency also works closely with school district parent educators and school social workers to identify students who's parents are struggling with, eviction notices and/or keeping children home from school due to lack of school uniforms. Agency personnel visit schools to meet parents for appointments for services when transportation is a challenge.

The customized agency C.N.A. program implemented at LLCC, has filled a gap in training and education for low-income single parents. Even before the 8-week C.N.A. module begins, a two-week "Academy" focusing on professionalism, teamwork and financial literacy is held to assist students with job retention. After, a pre-C.N.A. module consisting of concentration in math and reading prepares students for success in the C.N.A. module and the final exam. Of 22 students in the first two years who passed their state board exams, 22 became employed and each was working at the same C.N.A. job after at least 90 days. The combination of customized course work and case management provide by the SCDCR prepares students for success.

A robust scholarship program continues to be offered by SCDCR via a CSBG Scholarship Committee made up of diverse members including retired teachers, county board members, CSBG Advisory Council members and college or graduate students. If an applicant does not hold a "B" average, to be eligible for a scholarship award, he/she must hold a "C" average and be enrolled in training/education

in Illinois leading to a local high-growth job sector. Training that leads to employment will foster self-sufficiency for CSBG customers.

Prescription drug and dental services are provided year-round and offered to the public on a first come-first served call-in basis every two weeks. For 2016, SCDCR will again enlist the services of Toast Masters Members and Sangamon County Public Health to provide oral health education to parents of Early Head Start and Head Start Children at Head Start campuses. Pediatric dental anesthesia services are rendered for Head Start students ages 3-5 and made available on site at the Springfield Urban League and scheduled independently through a pediatric oral surgeon and the Head Start nurse.

Advocacy by SCDCR with households who are disenfranchised county residents is done in partnership with the Faith Coalition for the Common Good. The agency director is active as member of the Education Task Force, and 2014-15 development director, co-chair of the Anti-Bully committee as well a member of the District #186 Truancy Task Force.

To assist with homeless prevention, weekly financial literacy workshops are offered by PNC, UCB, Woodforest Bank, BOS and the Heartland Credit Union in the agency conference room. All callers for rent assistance are required to attend an agency financial literacy workshop and submit a certificate of completion prior to being eligible to call for an appointment for rental assistance. All applicants must show need within the previous 90 days with income and receipts as verification.

To address hunger and food insecurity, in partnership with District #186 and Senior Services of Central Illinois the agency can identify and serve children and seniors in greatest need of food. Children are more vulnerable on weekends (no free breakfasts and lunches) and in the summer. Shut-in seniors in poverty are vulnerable year-round and rely on the assistance of Senior Services case managers. Monthly, food boxes will be prepared by Humphrey's market and picked up by seniors' case managers or by them to supplement food stamps which may be depleted by the first two weeks of the month. SCDCR partnered with genHkids to determine the contents of the food boxes to assure nutritious food is being disseminated in boxes.

IV./V. LINKAGES AND COORDINATION OF SERVICES

To provide services to targeted populations, collaboration is necessary method to reach our customers. Linkages, partnerships and collaborations are effective methods to ensure individuals in need receive the services the agency provides.

As examples, the agency:

- Partners with the SUL to offer a pediatric dental anesthesia program to serve to 3-5 year olds enrolled in the Urban League Head Start program. Some children suffer from baby bottle tooth decay and require anesthesia not covered by Medicaid. Pediatric oral surgeons who accept the medical card have been identified by Central Counties Health Center dentists for the agency. Children must be transported to either Bloomington or Decatur. The partnership is an outgrowth of the Urban League Health Advisory Committee meetings, attended by the agency director.
- Provides funding, case manages participants and administers the C.N.A. program taught by LLCC.

- Works closely with the Springfield Housing Authority through an MOU to provide services to families enrolled and making progress toward self-sufficiency and is a member of the SHA Program Coordinating Committee (PCC).
- Holds an established collaboration agreement with Springfield Public Schools Birth-Five program.
- Will continue Education Advocacy in partnership with the Faith Coalition Education Committee. The committee hosts events to assist parents of school children, i.e. truancy, expulsion, bullying and poverty simulations.
- Will continue to implement programs provided through funding from the PNC Foundation to increase agency capacity and focus on family development programming at Feitshans Grade School through the 21st Century after-school program in the Springfield School District.
- Offers GED test assistance in partnership with LLCC and Lawrence Education Center (LEC). LEC also scheduled an age-21+ class for adults to avoid work conflicts, etc. as a request of our agency.
- Attends SIU Homeless Healthcare Clinics at Kumler United Methodist Church in the evening to offer dental and prescription drug vouchers to homeless individuals.
- [Attend monthly Community Connections events at Salvation Army to offer dental and prescription drug vouchers.](#)
- Through the agency director, continue as a board member of Illinois Ventures for Community Action which creates wealth distribution to member Community Action Agencies to enhance their economic development capacity.
- Director is a board member of both the Illinois Community Action Development Corporation and of the Illinois Association of Community Action Agencies.
- Partners with five financial institutions to offer weekly financial literacy workshops. Partners include PNC Bank, UCB Bank, Woodforest Bank, Bank of Springfield and Heartland Credit Union.
- Visits outreach sites to ensure individuals in most need are receiving services, (i.e. LIHEAP, medications, dental anesthesia, school uniforms, summer school) so as not to “fall through the cracks”. Locations include Near North Hi-Rise, SCIL, Salvation Army, Kumler Church for SIU Homeless Health Clinic
- Serves as a worksite (host agency) for Capital Township Workfare members and older workers from the Lincoln Land Area Agency on Aging.
- Enjoys a Community Partnership Agreement with the Boys and Girls Club of Central Illinois.
- Works closely with District #186 parent educator coordinator and Compass to identify families of children in need of summer food boxes and/or school uniforms and to those in need of homeless prevention assistance. SCDCR director is a member of the District #186 Serving the Same Families Leadership Team.
- Works closely with CSBG Advisory Council member, Pastor Silas Johnson who is also the President of the Ministerial Alliance in Springfield to fill gaps in services.
- Is a member of Springfield Urban Agriculture planning.
- Collaborates with training institutions, MTI and ITT, to identify low-income students with student loans to encourage application to the CSBG Scholarship program.
- Children in Poverty Conference at UIS, with UIS and IACAA.

In addition to community collaborations, Sangamon County and other social service agencies trade written linkage agreements to assist households with low-incomes. Agencies include Fifth Street Renaissance, The Parent Place, Youth Service Bureau, etc. In addition to written linkages, monthly or quarterly attendance at meetings of the Providers' Council, Continuum of Care, and advisory councils of Springfield Housing Authority PCC and the Head Start Health Advisory Council keep the agency linked and informed of activities within the community. In addition to surveys, strategic planning and outreach, the agency is better able to identify service gaps in the system and as a result, clients benefit from agency networking. New in 2016, focus groups will be held with low-income heads of household at District #186 schools through the agency's Serving the Same Families membership.

Community Resources also participates in many service provider fairs through out the county. Staff participates in outreach at informational fairs at Madison Park Place, Brandon Court Springfield public school open houses, senior citizen conferences, job fairs, etc.

Until 2013, Community Resources performed LIHEAP outreach to 23 locations to provide on-site intakes. Due to reduced funding for 2013, LIHEAP outreach site personnel work with their constituents by assisting with applications and mailing them to the agency for processing. As always, staff is available to take applications over the phone or mail applications to applicants for LIHEAP and the Sewer Rebate Program to eligible residents who are elderly and/or have no transportation. Outreach continues to be performed by staff at SCIL once, Near North twice, and to Salvation Army once each week.

For services not offered by SCDCR, paper referrals are given to clients to the many food pantries and clothing providers in the county. A separate food pantry informational flyer was created by SCDCR staff for customers and other walk-in clients. (Area food pantries together share an efficient computer system to determine if clients are being served fairly and that residents are not abusing the system.) SCDCR LIHEAP staff cross refers customers to the agency GED, WIOA and school uniforms programs but equip all customers with an agency resource guide and department overview.

A significant change occurred on October 1, 2008, when Community Resources WIA (WIOA) Staff was relocated to the workNet located at 1300 South 9th Street. This change was done to centralize the LWA 20 staff from 5 counties into one location. [Community Resources has continued the referral process to WIOA for clients seeking job assistance. In 2016, the WIOA Sangamon County Liaison will provide a consistent, direct connection to WIOA services for SCDCR clients and will follow up with the Family Support Specialists.](#)

The Community Resources service delivery system is comprehensive and partners with numerous other local agencies to assist clients to ensures the best possible service to county residents in need.

V. Innovative Community Initiatives

Community Resources of Sangamon County continues to participate in many innovative community and neighborhood-based programs. At times, the agency is approached for funding support when other agencies wish to partner toward initiatives which must also be proven unmet needs in the community.

- Community Resources has been able to assist with some of these programs such as the School Uniform Program, Summer School Tuition and GED Test Assistance for all Sangamon County schools.
- The tailored C.N.A. program will again be offered in partnership with LLCC to income-eligible, unemployed and selected individuals. In 2016, the program will again assist at least 20 individuals with education and training costs, required uniforms, transportation assistance, employability skill instruction and test expenses for certification in the quest for employment to earn a living wage.
- In 2013, the agency began a partnership with the Springfield Urban League (SUL). Local and central Illinois oral surgeons were recruited to provide dental anesthesia to 3-5 year olds enrolled in Head Start in need of full-mouth dental services under anesthesia for baby teeth in decay.
- In 2015, the agency formed collaborations with local providers of services to vulnerable populations; Springfield Urban League (Male Involvement program), Springfield Housing Authority (Family Self-Sufficiency program). The director worked with liaisons at training institutions offering education in local high-growth job sectors (MTI, ITT and LLCC) to identify low-income students in need of financial assistance. The agency director gave outreach presentations at each of these institutions to better explain agency educational and other programs.
- Summer school tuition assistance for low-income students who need courses to graduate to be more qualified to enter the workforce.
- A 12-hour Money Smart Financial Education module for C.N.A. students and Urban League Man Camp participants with the potential incentive of opening their own savings account, 100.00 for the account and up to a \$50.00 match if the individual saves up to \$50+.
- Working directly with the Senior Services and District #186 to identify food insecure families and provided food boxes once or twice each month.
- Customer evaluations from customers of food box and financial literacy programs
- Partnering in self-sufficiency with the existing SHA FSS program to add capacity with services to SHA households making progress toward self-sufficiency.
- In 2016, callers for dental assistance will again first attended an oral health workshop offered monthly on Thursday before call-in day on the 2nd and 4th Fridays of each month. At the time of appointment, all customers received a dental hygiene kit and enough tooth brushes for all family members.
- Follow up on paper referrals given to CSBG customers and updating the file copy with information. When customers returns for service, referral forms are reviewed for progress.

VII. YOUTH

In addition to summer foodbox assistance, GED, summer school tuition and school uniform assistance, rent assistance for families with school-aged children, WIOA youth programs operate under the provisions of Title I of the federal Workforce Investment Act of 1998 serving the at-risk youth population. Populations considered being the neediest youth include, but are not limited to: youth aging out of foster care, youth in the juvenile justice system, children of incarcerated parents, or other barriers that hinder youth from successfully completing their education or attaining employment.

XIII. OUTCOMES

This Community Action Plan is reflective of the needs of the low-income population, described services available, and identified gaps in services. Below is a list of problem statements for each work program and the outcome measures expected for each program. Outcome measures will be monitored on the agency dashboard, client and board survey responses, feedback from other agencies and follow-ups on client progress.

Problem statements, work programs and outcome measures are listed in the order of the CSBG work programs in the 2016 Grant.

EDUCATION AND TRAINING

Problem Statement – The unemployment rates in Sangamon County as of July, 2014 were 6.1%. In May, 2015, the rate dropped to 4.3%. This rate was qualified with a footnote that the drop could be due to job seekers no longer looking for work. However, according to James Glassman, a former senior economist at the Federal Reserve Board in Washington, D.C., millions of part-time and young workers have been left out of an otherwise remarkable recovery following the worst recession in decades. He stated that the national unemployment rate of 6.1 percent in August would be closer to 9 percent if 4 million part-time workers, and 2.5 million to 3 million 23-28 year olds unable to find work out of college were added. Technology has also left millions of workers without the skills to compete.

1.6 Employment Through Education

Provide job placement/employment through education activities to up to 20 CSBG eligible individuals resulting in their employment and retention in un-subsidized employment through a Pre-C.N.A./C.N.A. program in partnership with LLCC. *In 2016, a computer repair certificate course as well and a food handler certificate course will be offered to up to 20 additional individuals and each will also contain a job-ready, soft-skills module to better prepare students with skills to get and keep jobs.* Agency will also fund limited student travel expenses. A two week College Ready Academy was added in 2015 to evaluate student potential through attendance, group exercises and individual participation during classes.

1.6-5 General Job Skills/Resume Writing

(Although not a separate CSBG work program, the C.N.A. and Food Handlers and Computer Repair curricula includes the above outcome for students who complete program course work)

(Mod 1/Pre-C.N.A of C.N.A. Course) 10 weeks of employability skills, teamwork, computer skills, Aleks Math and reading comprehension are covered for C.N.A. students by LLCC instructors.

1.7-1 Equipment/Uniform/Supplies for employment – Report as Annual Outcome

(Although not a separate CSBG work program, the C.N.A. and Food Handlers and Computer Repair curricula includes the above outcome for students who complete program course work)

C.N.A. students who pass the pre-C.N.A. module are provided with all C.N.A. equipment and uniforms including scrub tops and bottoms, shoes, watch, and gait belt.

1.7-2 Transportation to Employment Training

C.N.A. and Food Handler students are provided with a \$7.50 stipend for each day of class attendance. Forms to verify attendance are required to be signed by instructors. Transportation support is also available under the Employment Supports program.

Licensing or certification for employment - Report as Annual Outcome

(Although not a separate CSBG work program, the C.N.A. and Food Handler curricula includes the above outcome for students who complete take the State board test)

C.N.A. students are provided with fees required at the time of certification exam.

1.7-3 Licensing or certification for employment - Report as Annual Outcome

(Although not a separate CSBG work program, the C.N.A. and Food Handler curricula includes the above outcome for students who complete take the State board test)

C.N.A. students are provided with fees required at the time of certification exam.

1.7-6 Employment Supports

Providing one-time assistance per household for rent, car payment, car repair, license plate sticker, uniform required by the job, or a child care co-pay as necessary to retain employment. Assistance can be up to \$500.00 for employed individuals (at least 25 hours per week), to better assure they can retain stability/self-sufficiency. [Clothing vouchers to Goodwill for Springfield Urban League Male Involvement graduates to obtain clothing necessary for interviews.](#)

EDUCATION

Problem Statement

Graduating from high school is one of the first steps in moving toward individual self-sufficiency. Not graduating from high school can be an automatic barrier to employment if the individual cannot pass the GED. In 2014, the GED test was significantly revised and became more difficult, more expensive and only computer-based. For low-income students who would require a course to graduate and offered in summer school, tuition assistance would provide significant benefit to them and their families.

Work program 2.6-1

Youth education/achievement

Outcome NPI 1.2.A

2.6-1 Summer School

Many students miss school due to illness or truancy may be in need of fees to attend summer school in order to graduate from high school. With the increased difficulty and cost of the GED, finishing high school and earning a high school diploma reduces barriers later for students who do not graduate. In district fees are based on a reduced fee schedule for low-income students.

Problem Statement

Many individuals are striving for their GED certificate to achieve eligibility to enter either vocational training or college. In 2014, in Illinois, the GED testing process will become more expensive, more difficult, and implemented only by computer. In order to assist individuals toward earning their GEDs the agency will again provide vouchers up to \$120.00 for testing or a lower amount for re-testing in

order to remove the barrier of the lack of available cash to use for the test. Lawrence Education Center has agreed to offer a night GED class for students 21 and older on Tuesdays and Wednesdays from 5:00 – 8:00 pm.

2.6-3 Adult Basic Education (ABE) GED Instruction or other instruction

Provide funding in the form of vouchers to students who have passed the GED on-line practice test to take the actual test at the ROE. The new 4-part test is computer-based, aligns with employment potential costs \$30-\$40 per modules (4) up to a total cost of \$120. Students instructed by GED programs by LLCC or Lawrence Education Center (LEC) are eligible for vouchers.

Problem Statement

Lack of education continues to be a problem for low-income people. Many people in poverty lack funds to continue their education and realize their potential of higher living wages. The scholarship program meets the goal of improving the conditions in which low-income people live by presenting them with the opportunity to continue their education in areas of high-growth job sectors. Recipients may re-apply for further scholarship assistance to attain diplomas for Associates or Bachelor degrees.

2.7 Scholarship Program

Information about the CSBG scholarship program is sent to all colleges, universities, high school deans, churches, libraries and newspapers in the Sangamon County area. Local service providers and staff are emailed the press releases in order to communicate dates, deadlines and eligibility information. Again in 2016, applicants who hold a “B” average are eligible to apply and be enrolled in training/education of their choice. Applicants with at least a “C” average must enroll in coursework leading to employment in high growth job sectors. Community Resources will attempt to ensure all eligible low-income residents of the county have the opportunity to apply for CSBG scholarships if their chances of employment after graduation are likely. If a client is determined ineligible for a CSBG scholarship, he/she is referred to the WIA program.

Problem Statement

Many youngsters do not begin school on the first day due to household lack of income to obtain required clothing to be admitted. Truancy is already a significant problem in SPS #186. By reducing the barrier of lack of clothing, grade schools and middle schools have the option of contacting the agency for uniforms for families in need.

Work Program 2.9-1

School Uniform Program

Outcome Measure 6.3B5

Child development improved

2.9-1 School Uniform Program

For the uniform vouchers in 2016, items eligible to obtain with voucher include shoes, socks and underwear in addition to pants and shirts. Able-bodied parents or guardians who are not working may receive a voucher but will also receive a referral to education and employment. For subsequent years, for any CSBG service, parent/guardian must be able to show progress toward self-sufficiency or will be ineligible for services until at which time progress can be verified.

Employment Asset Enhancement and Utilization

Problem Statement

Households with low-incomes many times must choose between which basic needs to satisfy. The ability to manage money is important so as not to fall behind and risk a reduction in their credit. In addition, a housing counseling program will be offered to address homeless prevention and foreclosure assistance.

3.1-2 Financial Literacy/Debt Counseling

All applicants who request appointments to receive rental assistance in 2016 will again be required to complete a financial education/debt reduction workshop offered weekly in the agency prior to becoming eligible to call for a rent appointment. Each workshop presenter will provide a dated a certification of course completion. For customers who work during the day and time of the workshops, on line coursework will also be made available to participants with a certificate of completion. Participants who keep a 90-Day budget approved by their instructor are eligible for a \$25 gift certificate.

All agency C.N.A. enrollees and any other education modules offered in the agency must complete the financial education class in order to receive transportation assistance.

Outcome Measure 1.3 E

Individuals opening a savings account

Outcome Measure 1.3 D/1.3B.1

Demonstrated ability to maintain a budget for 90 days and or opening a savings account after a 12-hours Money Smart Course and adding to the savings account

3.1-3 Savings Plan/Account

The 12-hour Money Smart Financial Workshop will again be offered to both agency C.N.A. students and Springfield Urban League Male Involvement participants. Participants who complete the course will receive \$100.00 to open a savings account with their banker instructor. If the participant adds to the account in the first 90 days, the agency will again match the participants increase up to \$50.00. Any one not eligible for a savings account will have the option of the agency sending \$100.00 to either their utility or landlord.

3.1-3 Housing Counseling

Sangamon County Community Resources is a recipient of Illinois Attorney General's National Foreclosure Settlement Funds. Sangamon strives to improve the quality of life of low-income residents in our county. Sangamon will use NFS to expand their financial literacy services to a HUD-approved Housing Counseling program. HUD sponsors housing counseling agencies throughout the country that can provide advice on buying a home, renting, defaults, foreclosures, and credit issues advice on

buying a home, renting, defaults, foreclosures, and credit issues. Once we are HUD approved, we will partner with the Sangamon County Court system to receive referrals to council households that have been in foreclosure no more than 60 days. We will also partner with Habitat for Humanity to receive referrals for housing counseling as well as partner with the Springfield Housing Authority so as not to duplicate Housing Counseling services in Springfield and Sangamon County.

Energy Assistance

Problem Statement

Many low-income families rent or own housing that is not energy efficient resulting in utility bills are high enough to force families to choose between food and heating their homes.

Work Program 1.2

Home Repair/Rehabilitation/(Weatherization)

Outcome Measure NPI 1.2K

Emergency Car or Home Repair (structural, appliance, heating system)

4.3 Home Repair/Rehabilitation/(Weatherization)

Applicants call for appointments and are called in order of call in to attend appointments. Once all documents are in the Weatherworks system, an assessment is performed and construction services provided to homes of low-income applicants. This assistance assist in the reduction of high utility bills enable families to better afford food, clothing and other basic needs.

Problem Statement

Due to the high price of utilities, many time, low-income families' utilities are in arrears and/or disconnected. Assistance is needed to enable families to catch up and/or be re-connected to heat their homes. Many of these family members include children who are also lacking food support. Utility assistance enables parents to purchase food for their families.

Work Program 5.3

Emergency Energy Support (LIHEAP)

Applicants call for appointments in priority order. The LIHEAP program is designed to assist low-income households pay for winter energy services. A one-time benefit is provided to eligible households to be used for energy bills. Community Resources served approximately 4000 households in program year 2015 with LIHEAP and furnace assistance.

Outcome NPI 6.2.B

Emergency fuel or utility payments funded by LIHEAP or other public and private funding sources

5.3 Emergency Energy Support/LIHEAP

Applicants call for appointments in priority order from October-March. The LIHEAP program is designed to assist low-income households pay for winter energy services. A one-time benefit is provided to eligible households to be used for energy bills. Community Resources served approximately 4500 households in program year 2015 with LIHEAP, furnace assistance and summer cooling. In 2016, with the lack of State LIHEAP funding, PIPP will not be offered and approximately 1,800 fewer households will be served and the PIPP program will not be an option any longer.

Emergency Assistance

Problem Statement

Many agency customers are described as “working poor”. These individuals have a difficult time meeting their living expenses while working, due to circumstances out of their control. Periodically, emergency assistance may be needed for rent or re-locating a family after a fire, flood or tornado.

Work Program 5.2

Cash Assistance for Emergency Services

Community Resources provides rental assistance through the Emergency Services program.

Outcome Measures NPI 6.2C, K, F

Have more resources to meet basic needs

Community Resources meets the CSBG goal of low-income people achieving their potential by strengthening family and other supportive systems, by measuring the number of people who stay in their homes. A survey was conducted again this year to determine how long a client, who has received help with rent, is able to maintain his place of residence.

5.2-3 Emergency Services

The **CSBG Rental Assistance program** provides emergency and non-emergency assistance to income-eligible clientele. Families with children under 18 years are the priority. For 2016, all parents including parents of children receiving disability will be required to submit documentation of need before assistance is rendered, attend a 3-hour agency Financial Literacy Workshop. Need is defined as verification of an event within the previous 90 days that occurred out of their control (i.e. death of a spouse, natural disaster, incarceration of parents of child, layoff, car accident medical bill, etc.) and verified with income statements and receipts.

If a parent provides verification of need and is able to work, case manager will refer parent to job search, education, agency programs, and community workshops to complete. If parent returns in future and does not have verification of increase in self-sufficiency, he/she will be ineligible for any future CSBG services until provides documentation thereof. To qualify in subsequent years, applicants must show verification of increase in self-sufficiency before considered for any CSBG assistance. Eligibility for rental assistance is every other year unless director approval granted.

As senior summer electric Fan Program and a School Uniform Program are also offered.

Problem Statement

Summer learning programs have the potential to help children and youth improve their academic and other outcomes. This is especially true for children from low-income families who might not have access to educational resources throughout the summer months and for low-achieving students who need additional time to master academic content. However, summer learning programs are often an afterthought of school districts or not offered at all, especially in restrictive funding environments.

6.3 Summer Youth Recreation

As indicated on the Inter-Agency Community Needs Assessment, there is a significant need to provide summer recreational opportunities for youth K-12. After an inventory of summer recreational

opportunities for school-age youth, it was discovered that camps for activities like YMCA, crafts, sports, art, music, games, reading, other education (museum), horse riding, youth employment through The Springfield Project.

Problem Statement

Summers are a difficult time for out-of-school children who may be food insecure and not able to travel to summer feeding sites. Many low-income seniors are affected year-round by food insecurity and hunger. Seniors are affected by reductions in Food Stamps/SNAP benefits and many households deplete their food benefits half-way through the month or before. Good nutrition is imperative to foster child physical development and continued learning in the summer months.

Work program 6.3-2

Food Boxes

Outcome NPI 6.2A

Emergency Food

6.3-2 Food Boxes

Families identified and referred by Senior Services, District #186 and are at or under a SNAP threshold as determined by the agency, will be eligible to receive food boxes once or twice each month to help maintain stability. Delivery may occur and is limited by staff capacity.

Problem Statement

Many elderly seniors are “shut in” and have experienced significant reductions in Food Stamps/SNAP. To help maintain stability through good health, adequate amounts of proper nutrition is important to continue to live independently.

Work program 6.4-1

Senior/Disabled Meals

Outcome NPI 6.4.F

Obtained Food Assistance

6.4-1 Senior Meals

Up to 13 seniors served by Senior Services of Central Illinois who are shut in will receive monthly food boxes to help them maintain stability. Farmers Market produce vouchers will also be available in warm months for pick and delivery with the food boxes. (see below)

Problem Statement

Seniors and children out of school for the summer and their families benefit significantly from nutrition from fresh foods and similarly can neither afford them nor travel to buy them.

Work program 6.7-4

Farmer’s Market Coupons/Vouchers

Outcome NPI 6.2.A and 6.2.F

Emergency food/medical care

6.7-4 Farmer’s Market Coupons/Vouchers

District #186 and senior households who receive above described monthly food boxes will also be eligible for weekly, seasonal Farmer’s Market agency vouchers valued at \$10.00-\$20.00.

Linkages-Outreach & Referral

Problem Statement

People with low-incomes are not always aware of services available or how to access them. Community Resources will address this problem through an informational resource guide referral forms and referrals when customers call the agency.

Work Program 7.1

Community Resources provides an extensive outreach and referral program by keeping staff informed of services available and by networking with other agencies at meetings each week. The agency has a formal MOU with SHA to accept referrals for families enrolled in the SHA FSS program and are making progress. The agency resource guide is kept current every quarter. Additionally, CSBG staff is mandated by DCEO to ask every client if child support is due and if so, if the family would like assistance in obtaining it. If so, a packet of information is offered and follow up done to determine if child support can and is being received. Internal referrals are done by all staff for individuals who are interested as reflected on their Needs Assessment Survey. A Senior Resource Guide is included in the Resource packet given to all senior customers.

Outcome Measure 6.5.E

Referred to/from other sources

7.1-1 Information and Referral (NPI 6.5.E)

Over 300 CSBG customers were formally referred to other agencies by forms during their appointments in 2015. Another 3700 were referred to other agencies by the receptionist through phone calls. Follow up on paper referrals given in case management program will be implemented in 2016 for 2015 customers who return and for all enrolled in the Family in Community Development program.

A strong linkage system with other agencies exists in the Sangamon County area to disseminate updated versions of the agency resource guide at least three times a year. In October, 2013, the agency made available a Senior Resource Guide for senior customers and residents of Sangamon County with the intent of helping this population identify resources in the effort to continue to be self-sufficient in their own homes.

Child and Family Development

Problem Statement

Households who have the desire to become self-sufficient and never have been, need guidance, services and referrals. Without knowledge of local resources available, contact people at local agencies and a realistic plan to work toward, a Family Support Specialist makes this goal much more possible for these households. Emerging from poverty to stability requires basic services (medical, dental, emergency rent assistance and utility assistance) while self-sufficiency is attained through Housing, Employment, Education/Training and Asset Accumulation.

Work Program 8.3

Self-sufficiency Counseling

Outcome NPI 6.3

Physical development improved as a result of adequate nutrition (food boxes), youth improve health and physical development (dental, meds), increase academic, athletic or social skills for school success, parents learn and exhibit improved parenting skills, and improved family functioning skills.

Work Program 8.5-1

Family Development/Intervention for Family Stability

Outcome 6.3

Physical development improved as a result of adequate nutrition (food boxes), youth improve health and physical development (dental, meds), increase academic, athletic or social skills for school success, parents learn and exhibit improved parenting skills, and improved family functioning skills.

Case Management

Problem Statement

Often time families experience a life-changing event out of their control which causes a **crisis** situation rendering them unstable or no longer self-sufficient. Examples include a house fire a house condemned, tornado or a catastrophic health event. When families have no resources and desire to work with a case manager to progress back to self-sufficiency, the agency will assist with bundled services and referrals as well as using the Missouri or Illinois Self-sufficiency scale.

Work Program 5.4-1

Crisis Intervention and Crisis Case Management

Outcome NPI 6.3.C.2

Case Management

Problem Statement

Often time families experience an event out of their control which causes a situation rendering them **unstable**. Examples include death of a spouse, illness, providing guardianship for incarcerated parents, loss of a job due to lay off or other events not in their control. When families have few resources and desire to work with a case manager to progress back to self-sufficiency, the agency will assist with bundled services and referrals and use either the Missouri or Illinois Self-sufficiency scale.

Work Program 8.5

Intervention for family stabilization

Outcome NPI 8.5-1

Intensive Case Management

8.5-1 Case Management/Intensive Case Management (New program)

An FCD certified employee will work with households working toward self-sufficiency and meet regularly to track progress and offer services (bundled) to help them in the process. Families must show they are making progress to continue in the program or graduate from the program. The SHA FSS program will also be a component of this program.

Health

Problem Statement

Many low-income people on Medicaid are unable to afford over-the counter medications doctors prescribe for short-term illnesses. Many clients are also unable to afford dental assistance. The need will continue in 2015 as Medicaid does not yet cover dental care charges. Lack of medication and dental care are barriers which keep low-income from maintaining their self-sufficiency due to health

problems and dental pain. Pediatric Anesthesia is not covered under Medicaid and therefore, children with baby-bottle tooth decay continue to suffer. Co-pay assistance has been re-added to this work program to assist those in need, especially specialist co-pay assistance.

Work Programs 9.2-1 (Dental Assistance), 9.2-2 (Prescription Drug Assistance) and 9.9-2 (Physician Co-Pay Assistance)

Community Resources provides low-income clients with prescription, dental, pediatric dental anesthesia and co-pay assistance so that they many continue to function in society and/or at their jobs and not miss wages.

Outcome Measures NPI 6.4.D (Dental) & 6.1.A (Prescription)

Children or adults whose health condition was improved due to access to emergency health and dental care services.

The CSBG goal of the conditions in which low-income people’s lives are improved is met when the people receive the prescription or dental assistance and are able to function at their jobs or other duties.

6.3.A Health Education (oral health)

Problem Statement

Medicaid does not cover the \$400-\$600 hospital fee to address extensive dental work under anesthesia for 3-5 year old children experiencing “baby bottle mouth”. Left untreated, the child’s overall body health is compromised and dental pain causes crying and inability to concentrate as school.

Work Program 5.2-9

Pediatric Dental Anesthesia

Outcome measure

Outcome Measure 6.2-F

Medical Care

9.10 Health

This program assists with emergency dental assistance and prescription drug assistance for individuals when Medicaid does not cover needed dental or prescription drugs. However, since most local dentists do not accept Medicaid cards, applicants are in need of assistance anyway from SCDCR. The agency works closely with Complete Care Pharmacy and local dentists in the area. Catholic Charities is also an active provider through the St. Clair Health Clinic. In addition, local pharmacists have been careful to ensure sure that clients get the best prices for medications.

The **Pediatric Dental Anesthesia program** provides assistance to children of families enrolled in Head Start who suffer from extreme dental pain due to lack of preventative care. Through referrals from the Head Start nurse, families receive a \$300.00 voucher to cover expenses not covered by Medicare in order to address extensive pediatric dental work in one visit while the child sleeps so as not to cause trauma due to potential pain and duration of the appointment. Should the child also need funding for dental service, the family also receives a dental voucher to cover expenses not covered.

In 2016, Sangamon County Public Health will again provide presentations for agency customers who wish to apply for dental vouchers and Early Head Start and Head Start parents of 0-5 year olds with education to help prevent baby bottle tooth decay.

In 2016, callers for adult dental assistance must again first attend an oral health workshop offered monthly on Thursday before call-in day on the 2nd and 4th Fridays of each month. At the time of appointment, all customers will receive a dental hygiene kit.

The Medication Assistance program for co-pay assistance will remain intact in 2016 to individuals in need of medical care from physicians specializing in what is determined the applicants' medical care requires. Vouchers would be categorized as either basic co-pays (up to \$20) or for specialist co-pays (up to \$75).

Other 2016 ROMA Initiatives:

Roma Goal 2 – CA joins with other community stakeholders to improve the conditions in which low-income people live.

- Children in Poverty Conference at UIS
- Summer Recreation opportunities for youth
- District #186 and Sangamon County professional development around Poverty. Use of Poverty simulations and Communication Across Barriers (Donna Beagle) workshop.
- Summer Food Box Program for District #186 and Senior Services families.
- Summer School Tuition Program
- Focus groups with FACE Families at Feitshans grade school
- Interview questions to pair with Inter-Agency Needs Assessment for Family Support Specialist to use at Intake appointments.

Roma Goal 3- People with low incomes own a stake in their community

- Chair FCCG development committee to ensure advocacy with low-income families can continue.
- Ensure Anti-Bully Policy updated in District #186 Student/Family Handbook.
- Obtain number of Anti-Bully Reports from District #186 and how handled and determine impact of new State law on problem
- Story Telling by staff of how agency services have impacted agency customers' lives in positive ways.

Roma Goal 4 – Agency increases capacity to achieve results.

- Advisory Council members (invited) and Staff (required) to participate in Poverty Simulation with District #186.
- CSBG and other staff increase professional development through FCD and Financial Literacy instruction.
- Invite Congressmen Davis and LaHood to visit after October CSBG Council meeting.

Roma Goal 5 – Agency increases capacity to achieve results

- All staff will review each household's Needs Assessment to determine if household needs to be referred to CSBG staff while in office.
- Families enrolled and active in FCD with a Family Support Specialists (FSS) may receive LIHEAP service during FSS appointment.

Community Action Agency Economic Development Program Integration with WIOA

As a result of the Re-Authorization of WIA to the new version re-named WIOA, beginning July 1, 2016, Illinois CSBG economic development programs will be technologically integrated to WIOA in order to assist in achieving state and local workforce's goals and to identify and address potential barriers to collaboration. Community Resources plans to carry out this integration per the following:

1. For the CSBG C.N.A. program or any other customized employment program, to **provide an electronic copy of our flyer to WIOA for WIOA case managers and staff to have available to use to call LLCC for customers they see who do not qualify for the WIOA C.N.A. program.** Case Managers would call the contact number for each appropriate customers and ask for them to and be placed on the list to be contacted to apply for selection for future CSBG C.N.A. cohorts. There would be no guarantee of selection of WIOA referrals as CSBG program criteria is already in place and approved by CSBG and CSBG income guidelines are firm at 125% of poverty .
2. For the Employment Supports program, an interagency referral form between CSBG and WIOA would be created and contain CSBG income guidelines, documentation required and criteria for services. The referral form would also include space for a required narrative describing the need for the service. If all CSBG criteria is met, priority for services would be given to WIOA referrals.

Continuing approach to CSBG services for 2016:

Because numerous customers return every year for services, programs in 2016 will again be written to better assist all customers to improve or gain self-sufficiency or stability. Providing services to those in most need due to circumstances out of their control and those who wish to participate in case management to achieve self-sufficiency will be the agency priority in 2016 and beyond.

Staff will offer eligible customers opportunities in the form of agency services and community partner referrals for them to use when a service is provided. Customers who do not follow through with referrals and obtain tools to progress toward self-sufficiency will be ineligible for services until they can verify progress. All services provided will be incentivized with opportunities for self-improvement through short term training, job-search workshops, financial literacy workshops, volunteer opportunities and mentoring in concert with a Family Support Specialist.

Programs to continue in 2016 to increase family self-sufficiency or stabilize families will include:

- All callers for rent appointments must have first attended the 3-hour financial literacy workshop for each year they call and are eligible. The next time they call and are eligible, they must show evidence of further progress toward self-sufficiency.

- In addition, Emergency Rental Assistance will be defined as households who face eviction due to extenuating circumstances out of their control within the 90-days prior to appointment. Examples are fires, floods, tornados. Families with children will be the priority for both emergency and non-emergency rent programs.
- Non-Emergency Rental Assistance will be defined as households who need rent if their circumstances have changed due that are out of their control (guardians of child whose parents are incarcerated, divorce, death of a spouse, job loss, bills from illness.)
- Parents of children who are on disability and are not working themselves will be required first to submit documentation of emergency/non-emergency need before assistance is considered. If parent is able to work, case manager will first refer parent to job search, education, organizations who need volunteers, financial literacy workshops, etc. programs to complete. If parent calls again and receives appointment, he/she must show evidence of a certificate(s) or other progress toward self-sufficiency to receive any rent. Otherwise, he/she will be ineligible for CSBG services until progress is verified by documentation. Progress is evaluated and determined by a Family Support Specialist.
- Employment Supports will continue as a program that provides support to working families who encounter situations out of their control which can or is causing a domino effect with resulting crisis. Providing one-time assistance per household for items needed to continue or begin work including test certification, rent, car payment, car repair, license plate sticker, uniform required by the job, to be able to retain self-sufficiency. Assistance can be up to \$500.00 (\$750.00 with director approval) for employed parents (working at least 25 hours per week), to better assure they can retain stability or self-sufficiency.
- a bundled services approach Family Support Specialist case management program with referrals and follow up (pilot program).
- an incentivized 12-hour Money Smart Financial Literacy module.
- Emphasis on credit repair in weekly 3-hour Financial Literacy workshops
- high school summer school financial assistance.

In addition, to address prevention of dental disease,

- an oral health workshop will be required for anyone interested in calling for a dental appointment. At the time of the appointment, a dental hygiene kit will be given
- to the family with enough tooth brushes for each family member to create a healthy family outcome.
- intensive and crisis case management including referral and follow up (pilot program).
- Medical co-pay assistance.
- Summer food box assistance to District #186 students referred by Parent Educator or Social worker.

- year-round senior (shut-ins) food box program in coordination with case managers of Senior Services of Central Illinois.
- Senior monthly food box pick up program
- monthly oral health workshops required prior to calling for dental appointments
- dental hygiene kits given to customers who receive dental appointments and receive a dental voucher.
- Quarterly oral health presentations by Public Health for parents of Early Head Start students 0-3.
- Employee Supports program for working families to assist with test recertification cost, car repair, car payment, rent, childcare co-pay, license plate sticker, uniform required by job.

