

2024

Kane County Health Department
**COMMUNITY HEALTH
IMPROVEMENT PLAN**



Contents

Executive Summary..... 3

Access to Healthcare..... 4

Behavioral Health..... 7

Food Access..... 13

Housing 16

Executive Summary

The Kane County Health Department (KCHD) Community Health Improvement Plan (CHIP) presents a comprehensive set of strategies designed to address the four critical priorities identified through the 2024-2027 Community Health Assessment (CHA) process and improve the overall health and well-being of Kane County residents. These four priorities of Housing, Food Access, Access to Healthcare, and Behavioral Health serve as the foundation for the plan's development and provide a targeted framework for addressing health challenges within the county.

The development of the CHIP was a collaborative process with input from KCHD leaders, the Kane Health Counts executive committee and a diverse group of community partners that are experts in each priority area. Over the course of two months, ten meetings were held with subject matter experts from various sectors, where common themes and challenges were identified and discussed. The resulting challenges and areas for improvement were then presented to an internal committee for further review and refinement, ensuring that the strategies outlined are aligned with the needs and assets of the community.

A key feature of the strategies and objectives included is the emphasis on community participation and collaborative leadership. This model empowers local community partners and strengthens the overall effectiveness of the plan by ensuring those with expertise in each area are driving the approach. The resources and assets necessary to support the successful implementation of this plan are on our resource page at <https://kanehealth.com/Pages/Resources.aspx>. Resources are continually being identified and added as the CHIP evolves. Community partners play a key role in recognizing additional assets as objectives advance throughout the cycle.

To track progress, KCHD leaders will monitor the advancement of the CHIP across all four priority areas. The progress will be managed through the Vision Mission Services Goals (VMSG) dashboard, with updates provided on a quarterly basis. This approach will allow for ongoing evaluation and potential revisions throughout the 2024-2027 CHA/CHIP cycle, ensuring that the CHIP remains responsive to emerging needs in the community. By making adjustments as necessary, the plan will continue to effectively address the health priorities and work toward improving the health outcomes for the residents of Kane County.

Access to Healthcare

Access to healthcare is essential for maintaining and improving individual and community well-being. It ensures that people can receive preventive care, manage chronic conditions, and seek timely treatment, ultimately reducing the burden of disease and healthcare costs. However, gaps in healthcare access can lead to worse health outcomes and financial strain for families. Addressing disparities requires policies that make healthcare more affordable and accessible, particularly for populations that have historically faced the most barriers. Factors such as vehicle availability, internet access, and regular healthcare visits play a crucial role in determining access to care. Limited transportation can make it difficult for individuals to reach medical appointments, especially in areas with few public transit options. Internet access has become increasingly important for telehealth services, appointment scheduling, and accessing health information, yet disparities in digital connectivity can further limit healthcare access.

A shortage of healthcare providers also reduces the availability of timely care, particularly in rural areas of Kane County. Compared to Illinois (89.6) and the United States (88.8) overall, Kane County has significantly fewer primary care providers per capita (42.9)¹. Additionally, being uninsured is a significant barrier to accessing healthcare due to high out-of-pocket costs. While 7.9% of Kane County residents are uninsured, disparities exist among racial and ethnic groups, with 9.2% of Non-Hispanic Black individuals, 16.27% of Hispanic individuals, 16.40% of Non-Hispanic Native American individuals, and 42.45% of Non-Hispanic Hawaiian individuals lacking insurance, compared to 2.98% of Non-Hispanic White individuals².

Other systemic factors contribute to healthcare access challenges. The rural nature of parts of Kane County may limit the presence of healthcare providers. Employment in low-wage or contract work often lacks employer-sponsored health insurance, leaving workers with limited options for coverage. Additionally, navigating public health insurance programs such as Medicaid can be complex, discouraging eligible individuals from enrolling. Expanding healthcare access requires addressing these systemic barriers through policy changes, outreach, and infrastructure improvements.

Healthcare access was identified as a key crosscutting issue necessary for the success of all priority areas in the State Health Improvement Plan (SHIP). Expanding internet access is a major focus, particularly to enhance telehealth services in areas with provider shortages or for individuals facing transportation and childcare challenges. Additionally, increasing the diversity of public health workers and improving outreach efforts can help bridge healthcare gaps for underserved populations. Ensuring equitable access to healthcare services is critical to improving overall health outcomes and reducing disparities within Kane County and beyond.

¹ Health Resources & Services Administration: Area Health Resources Files (County and State level data), 2021

² U.S. Census Bureau: American Community Survey (ACS) (Tables B27001, C27001), 2019-2023

Group:	Access to Health Services	CHIP 2024-2027		
Goal	Improve equitable access to quality and affordable health services			
Implementation Plan				
SMART Objective By September 2027, increase the amount of insured Kane County residents by 2% by developing a workplan and sustainable budget by September 2026 to hire two Community Health Workers (CHWs) who will provide navigation services to community members.		*Outcome/Impact Indicator Baseline: 7.9% (2023) ⁷ Goal: 9.9%	Objective Lead:	
			Objective Team Kane County Health Department	
Activities		Target Dates for completion	Performance Metrics	Activity Leads
1. Review 1115 Waiver to understand requirements for CHWs		April 2025 - June 2026	Summary of 1115 requirements completed	Kane County Health Department
2. Establish budget for hiring CHW and sustainable funding source		April 2025-July 2026	Completed budget and funding source Completed internal presentation of findings	Kane County Health Department
3. Develop job description for CHWs including but not limited to transportation for medical appointments, assistance in finding providers, insurance and food assistance navigation		July 2026-August 2026	Completed description Completed internal briefing	Kane County Health Department
4. Hire a CHW		September 2026-October 2026	CHW hired	Kane County Health Department
5. Assess success of CHW within context of 1115 waiver		September 2027	Number of individuals referred and applied for benefits	Kane County Health Department

Group:	Access to Health Services	CHIP 2024-2027		
Goal	Improve equitable access to quality and affordable health services			
Implementation Plan				
SMART Objective By September 2027, the Kane County Health Department will analyze existing primary data and source secondary data to identify at least two key barriers and recommendations for improving access to quality healthcare for vulnerable populations.		*Outcome/Impact Indicator Impact	Objective Lead:	
			Objective Team Kane County Health Department	
Activities		Target Dates for Completion	Performance Metrics	Activity Leads
1.	Work with stakeholders to identify vulnerable populations to include on the assessment	June 2025-September 2025	Number of stakeholders engaged	Kane County Health Department
2.	Identify Access to Health Services questions from Community Health Assessment to include, as well as various secondary data sources	June 2025-October 2025	Number of survey questions, secondary sources, and focus groups completed	Kane County Health Department
3.	Analyze primary data and synthesize with secondary data	November 2025-March 2026	Completed assessment	Kane County Health Department
4.	Use findings from assessment to develop recommendations aimed at improving access for these populations	April 2026-January 2027	Completed plan	Kane County Health Department
5.	Promote findings with partners	January 2027-September 2027	Presentations at external meetings	Kane County Health Department

Behavioral Health

Behavioral health encompasses the connection between an individual's actions and their overall well-being, including mental health conditions, substance use, stress management, and lifestyle choices. It involves addressing and treating conditions such as depression, anxiety, PTSD, and substance use disorders while also promoting healthier habits like improved sleep, nutrition, and coping strategies. Mental health conditions and substance use disorders can significantly reduce quality of life, affecting daily functioning, relationships, and long-term health outcomes.

Stigma remains a major barrier to care, preventing individuals from seeking the help they need. In focus groups conducted during the Community Health Assessment, participants highlighted concerns about both internalized stigma and systemic challenges in accessing mental health care. One community member stated, "I think insurance and the cost of things is a huge, huge barrier that we have, and the stigma that is so attached to mental health and drug addiction," emphasizing the financial and social obstacles that deter individuals from seeking treatment. Adverse childhood experiences (ACEs) such as abuse, neglect, exposure to violence, or having an incarcerated family member also increase the likelihood of developing mental health and substance use disorders. Among Community Health Assessment survey respondents with children under 18, 12.56% of women, 5.89% of men, and 14.59% of those who preferred not to disclose their gender reported exposure to a traumatic event in the past year³.

Social isolation and lack of community support further contribute to poor behavioral health outcomes by reinforcing stigma and limiting access to help. Survey data shows that 7.04% of Kane County residents report feeling alone often or very often, with some areas experiencing loneliness rates as high as 20.04%. Geographic disparities exist in behavioral health outcomes as well. In census tract 8524.03, the percentage of residents experiencing depression (21%) exceeds the county average (19.6%), and loneliness rates are also elevated at 12.97%⁹. Addressing these challenges requires community-wide efforts to reduce stigma, increase access to care, and strengthen social support systems that promote mental and emotional well-being.

Mental health and substance use disorder (SUD) were identified as key priorities in the State Health Improvement Plan (SHIP), particularly in the first goal focused on improving system infrastructure. This aligns closely with the Kane County Health Department's (KCHD) overarching goal to enhance behavioral health services. A growing need for improvements in the behavioral health workforce and the adoption of more culturally inclusive practices have been recognized within the system, and KCHD is committed to addressing these issues as part of its broader efforts to strengthen the behavioral health framework in the county.

³ Kane County Community Health Survey, 2023

Group:	Behavioral Health	CHIP 2024-2027		
Goal	Improve Behavioral Health System in Kane County			
Implementation Plan				
SMART Objective By December 2026, increase number of qualified behavioral health providers per 100,000 residents by 5%		*Outcome/Impact Indicator Baseline: 542.7 providers (2024) ⁴ Goal: 570	Objective Lead: Kane County Health Department	
			Objective Team Behavioral Health Council	
Activities		Target Dates for Completion	Performance Metrics	Activity Leads
1. Hire a Information and Resources Specialist to connect residents with local resources.		June 2024-September 2027	Hired & Serving Community	Kane County Health Department
2. Fund Kane County organizations via competitive notice of funding opportunity process to expand behavioral health staff and/or programming and integrate into various settings.		November 2024-December 2026	Agreements in place All funds exhausted Reported program metrics	Kane County Health Department Behavioral Health Organizations (20 funded projects)
3. Fund SDOH/prevention organizations to expand and/or integrate behavioral health into programming via beneficiary awards.		November 2024-December 2026	Agreements in place All funds exhausted Reported program metrics	Kane County Health Department Community Organizations (4 funded projects)

⁴ Centers for Medicare & Medicaid Services (CMS): National Provider Identifier Files (NPI), 2024

Group:	Behavioral Health	CHIP 2024-2027		
Goal	Improve Behavioral Health System in Kane County			
Implementation Plan				
SMART Objective By September 2027, improve quality of behavioral health care by increasing the amount of trained behavioral health professionals through providing at least 5 free trainings (including evidence-based interventions) per year to local behavioral health professionals via Kane County Health Department training series		*Outcome/Impact Indicator Outcome	Objective Lead: Kane County Health Department	
			Objective Team Behavioral Health Council	
Activities		Target Dates for Completion	Performance Metrics	Activity Leads
1. Create training series plan.		December 2024-February 2025	Completed Plan	Kane County Health Department Behavioral Health Council
2. Host trainings and provide CEU's.		April 2025-December 2026	Number of trainings completed Attendance tracking	Kane County Health Department Behavioral Health Expert Trainers
3. Evaluate trainings and continuing needs for QI and future workforce development.		December 2026-September 2027	Completed QI/Reflective Assessment document Plan for 2027	Kane County Health Department Behavioral Health Council

Group:	Behavioral Health	CHIP 2024-2027	
Goal	Improve Behavioral Health System in Kane County		
Implementation Plan			
SMART Objective By December 2026, increase public understanding and awareness of behavioral health issues, strategies to maintain positive behavioral health (self-help), and where/how to access support services when needed with engagement from at least 1000 individuals.		*Outcome/Impact Indicator Impact	Objective Lead: Kane County Health Department
			Objective Team Behavioral Health Council
Activities	Target Dates for Completion	Performance Metrics	Activity Leads
1. Implement Behavioral Health 360 self-help website and make available to all residents for free.	April 2025	Agreement signed Populate website live Number of users	Kane County Health Department Behavioral Health Council Opioid Task Force
2. Maintain and promote Behavioral Health 360 for use throughout the community.	April 2025-December 2026	Number of trainings completed Attendance tracking	Kane County Health Department Behavioral Health Council Opioid Task Force
3. Review and report on analytics and report recommendations.	December 2026	Engagement analytics Content analytics Final report w/ recs	Kane County Health Department Behavioral Health Council Opioid Task Force
4. Implement and monitor county-wide comprehensive behavioral health communications campaign to improve understanding of behavioral health issues, early detection, self-help, access to services, and reduce stigma related to BH issues and seeking help. Promotion of 988 Suicide and Crisis Lifeline.	June 2025-December 2026	Number of communication efforts Engagement analytics Content analytics Final report w/ recs	Kane County Health Department Behavioral Health Council Opioid Task Force

Group:	Behavioral Health	CHIP 2024-2027	
Goal	Improve Behavioral Health System in Kane County		
Implementation Plan			
SMART Objective By September 2027, reduce behavioral health hospitalization rate due to mental health conditions and SUDs by 5% through social equity, harm reduction, preventative care, treatment strategies, and 20 free trainings provided.		*Outcome/Impact Indicator Baseline: 309 per 100,000 ⁵ Goal: 294 per 100,000	Objective Lead: Kane County Health Department
			Objective Team Behavioral Health Council
Activities	Target Dates for Completion	Performance Metrics	Activity Leads
1. Support communities in establishing and growing systems for supporting all families impacted by OUD/SUD and connect them to relevant services.	May 2025-September 2027	Attendance and output from Opioid Task Force Meeting Number of OUD/SUD providers using collaborative referral tool (IRIS) Establish support groups for loved ones of those experiences OUD/SUD	Kane County Health Department Opioid Task Force Behavioral Health Council
2. Increase public access to naloxone and other harm reduction supplies.	September 2024-September 2027	Number of boxes of naloxone distributed Number of naloxone vending containers placed in public places Number of leave behind kits distributed	Kane County Health Department Opioid Task Force Behavioral Health Council
3. Increase public knowledge of naloxone and how to administer.	September 2024-September 2027	Number of Naloxone trainings provided to the community	Kane County Health Department Opioid Task Force Behavioral Health Council
4. Increase access to Medication Assisted Recovery (MAR) for people with OUD/SUD.	May 2025-September 2027	Number of physicians trained to prescribe buprenorphine Number of/reach of communications about MAR NOW	Kane County Health Department

⁵ Illinois Department of Public Health (IDPH): Illinois Department of Public Health (IDPH), 2022

5. Decrease stigma by conducting coordinated educational communications campaign.	June 2025-December 2026	Agreement with communications company campaign analytics Your story matters website analytics	Kane County Health Department Opioid Task Force Behavioral Health Council
6. Effectively identify system gaps and innovative community-specific overdose prevention and intervention strategies by creating, coordinating and facilitating an Overdose Fatality Review Board that meets regularly.	May 2025-December 2026	1 staff hired to manage program Implement review board	Kim Peterson, Michelle Meyer, Staff Opioid Task Force Kane County Coroner's Office Behavioral Health Task Force

Food Access

Food access refers to the ability of individuals and households to obtain enough nutritious food without compromising other basic needs. It is influenced by economic, physical, and social factors that determine whether people can consistently acquire and prepare healthy meals. Economic access depends on financial resources, food prices, and support programs that help low-income households afford food. Physical access considers proximity to grocery stores, markets, and transportation options that enable people to reach food sources. Social access involves cultural norms, policies, and other societal factors that shape food availability and distribution. Ensuring equitable food access is essential for improving nutrition, reducing health disparities, and supporting overall community well-being.

Lack of access to nutritious food is a significant risk factor for obesity, diabetes, and other diet-related health outcomes. Individuals facing food insecurity often experience poor diet quality, leading to increased risks of chronic disease.

Food affordability and household income play crucial roles in determining access to healthy food. In 2022, Kane County faced its highest recorded annual food budget shortfall at \$43.4 million⁶. This shortfall represents the additional funds required to help individuals and families afford an adequate diet. The median household income in Kane County is \$100,678, but disparities exist⁷. Non-Hispanic Black households have a median income of \$66,998, and Hispanic or Latino households have a median income of \$83,604. Food insecurity disproportionately affects Non-Hispanic Black (20%) and Hispanic or Latino (17%) populations, compared to the overall population rate of 10.2%⁵.

Stigma, cultural barriers, and lack of education about available food assistance programs contribute to lower enrollment in resources like the Supplemental Nutrition Assistance Program (SNAP). Kane County has a higher percentage (67.1%) of households in poverty that do not receive SNAP benefits compared to Illinois (52.7%) and the United States (59.4%)⁸.

Food insecurity is a key focus of the State Health Improvement Plan (SHIP) and is addressed across multiple priority health areas, including chronic disease and emerging diseases such as COVID-19. Expanding the availability, affordability, and accessibility of nutritious food is critical to improving health outcomes and reducing disparities across Illinois.

⁶ Feeding America: Map the Meal Gap, 2022

⁷ U.S. Census Bureau: American Community Survey (ACS) (Table B19013), 2023

⁸ U.S. Census Bureau: American Community Survey (ACS) (Table B22003)

Group:	Food Access	CHIP 2024-2027		
Goal	Improve access to nutritious, local, affordable food			
Implementation Plan				
SMART Objective By December 2026, the number of individuals in Kane County experiencing food insecurity will decrease by 2% through expanding access to nutrition programs, increasing healthy food availability, and distributing funding through the Kane County Health Department’s Nourishing Lives Food Access Initiative to at least 3 community-based organizations supporting food access and nutrition programs.		*Outcome/Impact Indicator Baseline: 10.2% of residents are food insecure (2022) ⁴ Goal: 8.2%	Objective Lead: Kane County Health Department	
			Objective Team Kane County Health Department Batavia Interfaith Food Pantry Aurora Area Interfaith Food Pantry Food for Greater Elgin Northern Illinois Food Bank Marie Wilkinson Food Pantry	
Activities		Target Dates for completion	Performance Metrics	Activity Leads
1. Develop a comprehensive notice of funding opportunity framework and eligibility criteria		November 2024	Completion and launch of application	Kane County Health Department
2. Review and evaluate applications using work group and select program(s) aligned with application criteria		December 2024-January 2025	Number and amount of awardees	Kane County Health Department
3. Develop an ongoing evaluation system to track progress and outcomes of funded projects		March 2025-December 2026	Implement reporting system with awardees	Kane County Health Department

Group:	Food Access	CHIP 2024-2027		
Goal	Improve access to nutritious, local, affordable food			
Implementation Plan				
SMART Objective By September 2027 the Hunger Relief Network will expand collaboration across organizations affecting the food system by 20%. The Hunger Relief Network will consider updating its mission and goals to improve county-wide food access challenges. Additionally, the Hunger Relief Network will advocate for policy changes aimed at food insecurity based on assessment findings.		*Outcome/Impact Indicator Impact	Objective Lead: Kane County Health Department	
			Objective Team Kane County Health Department U of I Extension Hunger Relief Network	
Activities		Target Dates for Completion	Performance Metrics	Activity Leads
1. Review current meeting structure and mission		February 2025-July 2026	Updated mission and meeting schedule	Hunger Relief Network
2. Identify and recruit stakeholders from key sectors including food pantries, local agriculture, policy makers, nutrition experts, and community-based organizations.		January 2025-July 2026	Percent change in members of Hunger Relief Network	Kane County Health Department U of I Extension Hunger Relief Network
3. Develop goals and a workplan, and begin implementation		October 2025-July 2026	SMART Goals and workplan completed	Hunger Relief Network
4. Track progress in workplan and goals and report on results		September 2027	Completed report	Kane County Health Department

Housing

Housing insecurity and homelessness are significant public health concerns that affect individuals and families across communities. Housing insecurity includes a range of challenges, such as unstable or unaffordable housing, overcrowding, frequent moves, and the risk of eviction, while homelessness represents the most extreme form, leaving individuals without a safe or stable place to live. These conditions have profound and wide-ranging effects on health, increasing the risk of chronic illnesses, mental health disorders, substance use, and exposure to violence, infectious diseases, and extreme weather conditions. Without stable housing, individuals often struggle to access consistent medical care, maintain employment, and provide children with a stable education.

Housing insecurity and homelessness are risk factors for chronic disease and behavioral health disorders by increasing exposure to stress, poor living conditions, and limited access to healthcare. The gap between wages and housing costs reduces individuals' ability to afford stable housing. In Kane County, over 28% of households are cost-burdened, meaning they spend more than 30% of their income on housing expenses such as rent, mortgage payments, and utilities¹. In some census tracts, this burden is as high as 50%⁹. Additionally, 11% of households face severe housing cost burdens, spending over 50% of their income on housing¹. This financial strain limits access to essential needs such as food, healthcare, and transportation, further exacerbating health risks.

There is also a discrepancy between household sizes and available housing stock. While 22.1% of Kane County households are single-person households, only 10.1% of housing units are studios or one-bedrooms¹⁰. Conversely, 28.7% of households have four or more people, while 33.1% of housing units have four or more bedrooms². This imbalance can lead to limited affordable options, particularly for lower-income individuals and families.

The State Health Assessment (SHA) and State Health Improvement Plan (SHIP) process identify structural and social determinants of health as the root causes of health inequities. Housing is referenced in the 2028 priority areas, including COVID-19 and emerging diseases, maternal and infant health, and mental health and substance use disorder. Addressing housing insecurity and homelessness as public health issues is essential to improving overall health outcomes and reducing disparities within communities.

⁹ U.S. Census Bureau: American Community Survey (ACS) (Tables B25070/B25091), 2023

¹⁰ Chicago Metropolitan Agency for Planning (CMAP) Housing Market Analysis, 2024

Group:	Housing	CHIP 2024-2027		
Goal	Improve housing stability, reduce homelessness, and increase preparedness			
Implementation Plan				
SMART Objective By December 2025, the Kane County Health Department will support the Chicago Metropolitan Agency for Planning in completing Kane County Housing Readiness Assessment report by attending 5 stakeholder meetings, and engaging at least 5 community partners in the process. Following the assessment, the Kane County Health Department will communicate policy recommendations aimed at improving housing accessibility, potentially including advocating for zoning law changes that allow for the development of affordable housing.		*Outcome/Impact Indicator Impact	Objective Lead: Chicago Metropolitan Agency for Planning	
			Objective Team Chicago Metropolitan Agency for Planning Kane County Health Department	
Activities		Target Dates for completion	Performance Metrics	Activity Leads
1. Identify potential stakeholders and partners such as homeless shelters, landlords, affordable housing developers, food pantries, FQHCs, law enforcement, libraries to be involved in steering committee, key-person interviews, and focus groups.		December 2024-April 2025	Number of organizations engaged in steering committee	Kane County Health Department, Chicago Metropolitan Agency for Planning
2. Develop survey design for municipal leader and resident survey		January 2025-May 2025	Two published surveys Number of responses	Chicago Metropolitan Agency for Planning
3. Provide in-person market analysis engagements to engage residents and stakeholders in findings and explore potential next steps and recommendations.		June 2025-August 2025	Number of events	Chicago Metropolitan Agency for Planning
4. Analyze data and complete housing readiness checklist		December 2025	Completed housing readiness checklist and open house event	Chicago Metropolitan Agency for Planning
5. Promote assessment findings and spread awareness		December 2025-ongoing	3-5 Social media posts	Kane County Health Department, Chicago Metropolitan Agency for Planning

Group:	Housing	CHIP 2024-2027		
Goal	Improve housing stability, reduce homelessness, and increase preparedness			
Implementation Plan				
SMART Objective By September 2027, the Kane County Health Department will collaborate with community partners to ensure homeless individuals and agencies serving those individuals are included in access and functional needs plans and training.		*Outcome/Impact Indicator Impact	Objective Lead: Kane County Health Department	
			Objective Team Office of Emergency Management Local organizations	
Activities		Target Dates for Completion	Performance Metrics	Activity Leads
1. Identify and engage potential stakeholders and partners such as homeless shelters, landlords, affordable housing developers, food pantries, FQHCs, law enforcement, libraries		March 2025-May 2025	Number of organizations engaged	Kane County Health Department
2. Collaborate with community partners to identify strategies and gaps and incorporate into countywide emergency response and functional needs plans.		March-December 2025	Completed plan	Office of Emergency Management, Kane County Health Department
3. Incorporate updated access and functional needs strategies into emergency response training opportunities		December 2025- ongoing	Number of trainings Number of participants involved in trainings	Kane County Health Department, Office of Emergency Management

Group:	Housing	CHIP 2024-2027		
Goal	Improve housing stability, reduce homelessness, and increase preparedness			
Implementation Plan				
SMART Objective By December 2026, Kane County Health Department Safe Spaces, Healthy Minds Affordable Housing Initiative Program will distribute funding to community-based organizations that expand affordable housing solutions and resources for low-income Kane County residents and reduce the percentage of Kane County residents experiencing homelessness by 5%.		*Outcome/Impact Indicator Baseline: 461 Homeless individuals (2023) ¹¹ Goal: 438	Objective Lead: Kane County Health Department	
			Objective Team Kane County Health Department City of Elgin Hesed House Two Rivers Head Start	
Activities		Target Dates for Completion	Performance Metrics	Activity Leads
1. Develop a comprehensive notice of funding opportunity framework and eligibility criteria		November 2024	Completion and launch of application	Kane County Health Department
2. Review and evaluate applications using work group and select program(s) aligned with application criteria		December 2024-January 2025	Number and amount of awardees	Kane County Health Department
3. Develop an ongoing evaluation system to track progress and outcomes of funded projects		March 2025-September 2026	Implement reporting system with awardees	Kane County Health Department

¹¹ U.S. Department of Housing and Urban Development, 2023.