



Kane County Recovery- Oriented System of Care Council Strategic Plan: FY 26-28

A three – year framework to strengthen recovery support, reduce stigma,
expand access to care, and advance equity across Kane County

Executive Summary

This strategic plan establishes the Kane County ROSC Council's priorities for FY26 through FY28. The plan responds to community-identified needs related to stigma, access to Medication-Assisted Recovery and harm reduction services, culturally and linguistically responsive care, and coordinated warm handoffs to community partners. It provides a formal framework for aligning Council activities with statewide ROSC goals, strengthening partnerships, measuring progress, and advancing equitable access to recovery support throughout Kane County.

Strategic Planning Framework

Plan Element	Description
Planning Horizon	FY26 through FY28, covering July 2025 through June 2028.
Strategic Focus	Reducing stigma, expanding access to recovery support, strengthening culturally responsive care, improving service coordination, and prioritizing equity.
Guiding Framework	Alignment with the five Illinois Statewide ROSC Goals: Reducing Stigma, Promoting Medication-Assisted Recovery, Promoting Harm Reduction, Ensuring Effective Service Delivery, and Prioritizing Equity.
Implementation Approach	Partner collaboration, measurable objectives, community education, targeted outreach, warm handoffs, and quarterly review of progress indicators.

I. Vision Statement

The Kane County ROSC Council envisions a community in which recovery from substance use challenges is attainable, actively supported, and meaningfully celebrated. The Council strives to serve as a beacon of hope, health, and sustained wellness for all individuals and families residing in Kane County.

II. Mission Statement

The mission of the Kane County ROSC Council is to champion, coordinate, and support a person-centered, strength-based, and fully integrated Recovery-Oriented System of Care (ROSC). This system is designed to foster strong community partnerships, address gaps across the continuum of care, and empower individuals in recovery, as well as their friends, families, and loved ones.

III. Environmental Scan and Needs Assessment

Kane County, Illinois, with an estimated population of 531,000 residents, is a diverse community within the greater Chicago metropolitan area. Key demographic and mortality data from the Kane County Coroner's Office (2024) and community testimony identify three interconnected challenges that guide this strategic plan:

Challenge	Summary
Stigma as a Barrier to Care	A Q1 FY26 community survey found that 90% of respondents believe stigma prevents individuals from seeking help for substance use and mental health challenges. Stigmatizing language remains common across media, healthcare, and community settings.
Limited Access to Medication-Assisted Recovery (MAR) and Harm Reduction Services	As of Q1 FY26, Kane County had only four identified MAR and harm reduction service providers. The county lacks sufficient sober living homes, MAR prescribers, and harm reduction access points, particularly in western Kane County. Unsheltered individuals living in tent communities face additional barriers, including lack of transportation, medication storage, and connection to harm reduction services.
Systemic Gaps in Culturally and	With 23.5% of residents speaking a language other than English at home, there is a significant need for Spanish-language

Linguistically Responsive Care	materials and materials in Polish, Russian, and Arabic based on local demographics. Bilingual peer support and culturally competent providers remain critical gaps. As of Q1 FY26, no formal translation services or bilingual peer network existed.
--------------------------------	--

Special Priority Populations: The Council has identified two intersecting priority populations requiring targeted focus: older adults who are often isolated and experiencing pain management-related substance use challenges, and unsheltered individuals living in tent communities who lack consistent access to harm reduction, MAR, and recovery support services.

ROSC Role as Initial Contact and Warm Handoff: The Kane County ROSC serves as an initial point of contact for community members seeking recovery support. When an individual reaches out, the ROSC assesses their needs and completes a warm handoff to the appropriate partner organization. This function is central to the Council's work and positions the ROSC as a bridge between community members and direct service providers.

Statewide ROSC Alignment: The needs identified in this section directly align with the five Illinois Statewide ROSC Goals: Reducing Stigma, Promoting Medication-Assisted Recovery, Promoting Harm Reduction, Ensuring Effective Service Delivery, and Prioritizing Equity.

IV. Outreach, Communication, and Stakeholder Engagement Plan

Purpose: The Kane County ROSC Council Communication Plan establishes a structured, efficient, and engaging way to communicate with members, ensuring that all members, partner organizations, and volunteers remain informed, engaged, and aligned with the Council's mission.

Objectives: Facilitate seamless information flow among council members, committees, and workgroups; inform and involve community partners in council work; promote ROSC principles, events, and new programs; and provide timely internal communication during unexpected events.

Target Audiences and Key Contacts

Communications are tailored to specific audience segments. Below are the audience segments, key organizations or representatives, and primary contact methods. This directory is maintained and updated regularly. All 15 community sectors identified by DBHR are represented below.

Sector	Key Organizations or Representatives	Primary Contact Methods
Person with Lived Experience	PLE Council representatives, peer recovery specialists, individuals in recovery	Peer networks, support meetings, accessible formats
Recovery Supports	Kane County Rx Conservatory Foundation ; Oxford House representatives; Hope Haven of Aurora; Live4Lali Kane County; 12-step and other recovery groups	Email, resource directories, collaborative events
Faith-based Groups	Local pastors, ministerial alliances, faith-based recovery programs	Email, community forum invitations, collaborative events
Family/Parents	Family support groups, parent organizations, family advocates	Support meetings, accessible formats, community forum invitations
Service Providers	Serenity House Counseling Services; Association for Individual Development; harm reduction programs; programs for unhoused individuals; employment programs	Email newsletter, partner meetings, direct liaison communication

State/Local/Tribal Government	Kane County Board; City of Aurora and Elgin Mayor's Offices; IDHS/SUPR Region 2; Kane County Re-entry programs	Formal reports, grant updates, scheduled calls
Substance Use Treatment Organizations	Gateway Foundation; Ecker Center; Kenneth Young Center; hospital programs; withdrawal management programs	Email newsletter, partner meetings, direct liaison communication
Healthcare	Kane County Health Department; Presence Mercy and Rush Copley Medical Centers; MAR prescribers; healthcare providers	Email newsletter, partner meetings, direct liaison communication
Law Enforcement	Kane County Sheriff's Office; Aurora, Elgin, and St. Charles Police Departments; Illinois State Police; State Attorney's Office	Formal email, briefings, memorandum communications
Judicial	Kane County Drug Court; Probation; Public Defender's Office	Formal email, briefings, memorandum communications
Volunteer/Civic Organizations	Drug-free coalitions, community service organizations, civic groups	Email newsletter, community forum invitations
Education/Schools	School District U-46; Elgin Community College; Aurora University; GED programs; local K-12 schools	Presentations, educational materials, joint initiatives
Youth-Serving Organizations	Local prevention providers, youth outreach programs, after-school programs	Presentations, educational materials, joint initiatives
Media	Aurora Beacon-News, Daily Herald, local radio, online community forums	Press releases, media kits, social media

Business	Local businesses, Chamber of Commerce, business owners	Email, collaborative events, formal outreach
----------	--	--

Key Messages: Recovery is real, collaboration is essential, community drives the work, and hope and support are available.

Roles and Responsibilities

Role	Responsibility
Council Chair	Provides final approval of major external communications and serves as the primary media spokesperson.
Project Coordinator	Oversee execution of the communication plan and ensure alignment with strategic goals.
Communications Lead	Manages the content calendar, coordinates communication channels, and drafts newsletters and press releases.
Social Media Lead	Creates and posts content, engages with followers, and monitors comments and insights on social platforms.
Committee and Workgroup Leads	Provide regular updates from their groups to the Communications Lead.
Crisis Communication Lead	Activates crisis protocols and coordinates urgent internal and external messaging.

Tools and Platforms

Tool or Platform	Primary Use
WhatsApp	Facilitates real-time internal communication, file sharing, and referral assistance as needed.

Canva and Adobe	Support the creation of social media graphics, flyers, and simple reports.
Facebook, YouTube, TikTok, and Instagram	Support social media scheduling, publishing, and monitoring.
Zoom	Supports virtual meetings and public webinars.

Evaluation and Feedback

Frequency	Evaluation Activity
Monthly	Review social media engagement metrics and website traffic to assess communication effectiveness.
Biannually	Assess alignment and reporting for DBHR Strategic Plan requirements.
Annually	Conduct a comprehensive communication audit, review feedback trends, and update the plan as needed.

V. Strategic Priorities, Goals, Objectives, and Milestones

The Kane County ROSC Council will focus on **two goals** that directly address the community challenges identified in the Needs Assessment and align with the five Illinois Statewide ROSC Goals. Each goal includes specific, measurable objectives with clear timelines and milestones for FY26 and FY26--FY28.

Strategic Priority 1: Reduce Stigma and Expand Culturally and Linguistically Responsive Care

Alignment with DBHR Goals: Reducing Stigma, Ensuring Effective Service Delivery, Prioritizing Equity

12-Month FY26 Plan (July 2025--June 2026)

Objective	Description	Progress as of Q3 FY26
Objective 1.1	By May 31, 2026, launch a county-wide "Language Matters" stigma reduction campaign that includes distribution of a "Language Matters" guide to at least 10 partner organizations, publication of at least five social media posts on stigma-reducing language, and one community event featuring lived experience voices, with all materials translated into Spanish.	All ROSC meeting materials, outreach emails, and public messaging have been revised to remove stigmatizing language. The campaign is being launched countywide with invitations sent to GRASP, Kane County Health Department, and the Into Light Project. A Family Support Panel Discussion is scheduled for February 4, 2026, and a subcommittee is being formed to finalize the campaign plan.
Objective 1.2	By June 30, 2026, formalize partnerships with at least three professional provider organizations to enhance culturally competent care, and translate at least three key recovery support resources into Spanish using professional and volunteer translation.	The Council has formalized two partnerships through memoranda of understanding with Greater Family Health and the Kane County Health Department. Three key resources have been translated into Spanish through community-led translation. Active discussions continue with a Latino organization to become the third partner, and all materials and services provided through Serenity House are now available in Spanish.

Three-Year Strategic Plan (FY26-FY28)

Fiscal Year	Strategic Milestones
-------------	----------------------

FY26 (Year 1)	Launch the "Language Matters" campaign with Spanish translations; formalize three memorandum of understanding partnerships; translate three key resources into Spanish; and host one community stigma-reduction event.
FY27 (Year 2)	Expand campaign materials to include Polish, Russian, and Arabic translations based on local demographics; convene a learning collaborative of five partner organizations to adopt stigma-reducing communication; and facilitate a community survey on stigma using the FY26 baseline.
FY28 (Year 3)	Promote the "Language Matters" guide as a standard for partner agency onboarding; work with local media to encourage recovery-affirming language; and maintain bilingual capacity at all ROSC public events.

Strategic Priority 2: Expand Access to MAR, Harm Reduction, Peer Recovery Support, and Warm Handoff Services

The Council will prioritize underserved populations, including older adults, unsheltered individuals living in tent communities, Spanish-speaking residents, and justice-involved individuals. The ROSC will serve as an initial point of contact by assessing individual needs and providing warm handoffs to appropriate partner organizations.

Alignment with DBHR Goals: Promoting MAR, Promoting Harm Reduction, Ensuring Effective Service Delivery, Prioritizing Equity

12-Month FY26 Plan (July 2025--June 2026)

Objective	Description	Progress as of Q3 FY26
Objective 2.1	By June 30, 2026, increase the number of identified MAR and harm reduction service providers in the community resource list by 25%, from a Q1 baseline of four providers	The Council has increased the number of identified MAR and harm reduction service providers by 150%, growing from four to ten providers. The comprehensive MAR resource list now

	<p>to at least five providers, and host at least two community education events on the availability and effectiveness of these services, with targeted outreach to unsheltered tent communities.</p>	<p>includes a statewide resource, bilingual service providers, and transportation services. A Transportation Access Guide is being distributed to networked providers, including outreach partners serving tent communities.</p>
<p>Objective 2.2</p>	<p>By June 30, 2026, establish and maintain a weekly bilingual CRSS peer support drop-in center operating at least once per week, launch a Men's Re-Entry Fellowship program in partnership with Serenity House, expand the program to co-ed by the end of the fiscal year, and develop targeted outreach connections to unsheltered individuals in tent communities.</p>	<p>The weekly bilingual CRSS peer support drop-in center in Geneva launched in Q2 FY26 and operates every Tuesday. The Council has identified and invited CRSS students from Elgin Community College and College of DuPage to provide services at the drop-in resource lounge. The Men's Re-Entry Fellowship has been expanded to a co-ed program in partnership with Serenity House. A Council meeting was held at Elgin Community College in January 2026 to engage educational partners and build awareness.</p>
<p>Objective 2.3</p>	<p>By June 30, 2026, identify, highlight, and connect at least two dual-language peer support specialists to community networks; present CRSS program information at all monthly Council meetings; and conduct at least one listening session or outreach event for unsheltered individuals in tent communities to document gaps in harm reduction and recovery supports.</p>	<p>The Council has connected with CRSS programs at Elgin Community College and College of DuPage and highlighted these connections at Council meetings. CRSS program information is shared at every monthly meeting. The Council is actively identifying dual-language CRSS volunteers and exploring partnerships with street outreach teams to reach tent communities.</p>

Objective 2.4	By June 30, 2026, convene an Older Adult Workgroup, host two listening sessions at older adult community centers to document gaps in pain management and recovery supports, and identify at least two evidence-based programs that exist elsewhere to advocate for bringing to Kane County.	The Older Adult Workgroup has been initiated following Cheryl Crier's testimony at the inaugural Council meeting. Planning for listening sessions at older adult community centers is underway.
Objective 2.5	By June 30, 2026, establish the Kane County ROSC as an initial point of contact for community members seeking recovery support, with a structured process for assessing needs, identifying the appropriate partner organization, and completing a warm handoff. Track individuals served through this process, with a target of 25 individuals by the end of FY26.	The ROSC has begun operating as a central intake and referral hub, with the weekly bilingual drop-in center serving as a key access point. Community members receive an initial needs assessment and are connected directly to the appropriate partner organization. Warm handoffs are conducted in person whenever possible, with follow-up by the ROSC coordinator. The ROSC is actively building its partner directory to expand referral options.

Three-Year Strategic Plan (FY26-FY28)

Fiscal Year	Strategic Milestones
FY26 (Year 1)	Launch the English and Spanish resource guide with more than 10 MAR and harm reduction providers; operate a weekly bilingual drop-in center accessible to unsheltered individuals; launch the co-ed re-entry fellowship; formalize the CRSS student volunteer pipeline; form the Older Adult Workgroup and host two listening sessions; conduct one outreach event in a tent community; and

	establish the ROSC as an initial contact and warm handoff hub serving 25 individuals.
FY27 (Year 2)	Advocate for an older adult-specific recovery support group by presenting gap data to local providers; convene a harm reduction access mapping project that includes tent community locations; promote bilingual peer specialist training; establish a formal partnership with a street outreach team serving unsheltered populations; expand the warm handoff process to include phone and mobile outreach; and track 50 individuals served through the warm handoff process.
FY28 (Year 3)	Expand the resource guide to include Polish, Russian, and Arabic sections; facilitate a partnership between an older adult service agency and a recovery provider to pilot older adult services; document a 20% increase in service utilization among Spanish-speaking residents and unsheltered individuals, based on partner agency data; fully integrate the warm handoff process across all ROSC access points; and track 100 individuals served annually through the warm handoff process.

VI. Performance Measurement and Evaluation

The Council will use the following key performance indicators to monitor implementation, evaluate progress, and inform continuous improvement. Indicators will be reviewed regularly and used to guide decision-making, resource alignment, and partner engagement.

Stigma Reduction and Equity

KPI Area	Performance Indicator
Stigma Reduction	Number of "Language Matters" outreach to partners and the community.

Language Access	Number of resources translated into Spanish.
Language Access	Number of resources translated into Polish, Russian, and Arabic.
Equity and Representation	Number of bilingual members recruited.
Community Engagement	Number of attendees at stigma-focused events.
Evaluation	Results from pre- and post-event surveys.
Partnership Development	Number of formal memoranda of understanding with provider organizations.

Service Access: MAR, Harm Reduction, Peer Support, and Warm Handoff

KPI Area	Performance Indicator
Provider Access	Number included in the resource guide, with a baseline of four providers in Q1 FY26, ten providers in Q3 FY26, and a target of more than ten providers by FY26.
Harm Reduction Access	Number of harm reduction access points publicized, including those accessible to unsheltered tent communities.
Peer Support Access	Number of weekly drop-in center operating hours, with a target of weekly operation.
Workforce Development	Number of CRSS student volunteers engaged.
Re-Entry Support	Number of re-entry fellowship participants.

Community Education	Number of attendees at MAR and harm reduction community education events.
Unsheltered Outreach	Number of listening sessions or outreach events conducted in unsheltered communities.
Older Adult Support	Number of older adult listening sessions held.
Warm Handoff	Number of individuals served through the ROSC initial contact and warm handoff process, with targets of 25 by FY26, 50 by FY27, and 100 by FY28.

Council Engagement

KPI Area	Performance Indicator
Meeting Participation	Average meeting attendance, tracked quarterly.
Sector Representation	Number of sectors represented, with 16 sectors represented as of Q3 FY26.
Member Orientation	Number of new members oriented.

VII. Implementation, Governance, and Accountability

Implementation of this strategic plan will be guided by the Kane County ROSC Council, with support from Council leadership, workgroups, partner organizations, and individuals with lived experience. The Council will review progress toward goals and objectives on a regular basis, identify barriers to implementation, and adjust strategies as needed to remain responsive to community needs.

Accountability Area	Responsible Parties	Review Process
---------------------	---------------------	----------------

Strategic Plan Oversight	ROSC Council leadership and Council members	Review progress during Council meetings and adjust strategies based on community input and performance data.
Goal Implementation	Assigned workgroups, partner organizations, and project staff	Track milestones, document progress, and report updates to the Council.
Equity and Community Voice	Person with lived experience, family representatives, and community partners	Provide feedback on access, cultural responsiveness, language needs, and service gaps.
Performance Monitoring	Project Coordinator and Communications Lead	Compile KPI data, identify trends, and support continuous quality improvement.

VIII. Review and Continuous Improvement

This strategic plan is intended to be a living document. The Council will review progress annually and update strategies, partnerships, and performance measures as conditions change. Ongoing feedback from community members, partner organizations, and people with lived experience will inform implementation and ensure that the plan remains aligned with recovery-oriented principles and community priorities.