



FY26 STRATEGIC PLAN OUTLINE

Lake County ROSC Council

Lead Agency: Northern Illinois Recovery Community Organization (NIRCO)

Date: 12/30/2025

COUNCIL MISSION

Creating a community that embraces and cultivates recovery while reducing the stigma of substance use disorders and mental health.

COUNCIL VISION

A recovery-ready community where every individual and family has equitable access to prevention, recovery support, wellness, and long-term stability.

NEEDS ASSESSMENT

Community Demographics

Lake County, IL: 708,760 residents

- Age: 22.9% under 18; 16.5% age 65+
- Race/Ethnicity:
 - White: 79.6%
 - Black: 7.6%
 - Asian: 9.4%
 - Latino/Hispanic: 25.1%
- Language: 31% speak a language other than English at home
- Education: 90.6% HS diploma; 47% bachelor's+
- Veterans: 27,341
- Schools: 122 elementary, 42 middle, 21 high schools

Overdose Data from the Service Area

Level	Year	Key Data	Source
National	2023	105,007 drug overdose deaths in the U.S.; majority involved opioids, particularly fentanyl	CDC – National Center for Health Statistics
National (Provisional)	2024	Approximately 80,000 overdose deaths nationally, representing a significant decline from 2023, but still well above pre-pandemic levels	CDC (Provisional Data, 2024–2025)

State (Illinois)	2023	3,502 total overdose deaths; 8.3% decrease from 2022; opioid-related deaths declined by 9.7%	Illinois Department of Public Health (IDPH)
State (Illinois)	2024–2025	Fentanyl and synthetic opioids remain the primary drivers of overdose deaths, often in combination with other substances (polysubstance use)	IDPH / CDC SUDORS
Local (Lake County)	2023	138 fatal overdoses	Lake County Coroner's Office Overdose Dashboard
Local (Lake County)	2024	125 fatal overdoses (9.4% decrease from 2023)	Lake County Coroner's Office Overdose Dashboard
Local (Lake County)	2025 (YTD)	50 fatal overdoses recorded so far in 2025; represents approximately 40% of the total fatalities recorded in 2024 (partial year)	Lake County Coroner's Office Overdose Dashboard

While national and state overdose deaths show modest declines, fentanyl and polysubstance use continue to drive overdose risk (Centers for Disease Control and Prevention [CDC], 2024; Illinois Department of Public Health [IDPH], 2025). Locally, Lake County continues to experience persistent overdose fatalities, averaging more than two deaths per week based on recent annual totals (Lake County Coroner's Office, 2023–2025). Public health surveillance and research consistently show that transition points such as release from incarceration, hospital discharge, treatment exit, and housing instability are periods of heightened overdose risk. These findings underscore the critical need for Warm Handoff protocols, peer navigation, and coordinated recovery supports to ensure continuity of care during these high-risk moments (Centers for Disease Control and Prevention [CDC], Statewide Unintentional Drug Overdose Reporting System [SUDORS]; Substance Abuse and Mental Health Services Administration [SAMHSA]).

Qualitative Data Themes

Voices of Lake County

The following priorities reflect themes consistently identified through the Lake County Community Needs Survey and sustained community engagement/outreach conducted between July 2025 and December 2025.

- Earlier intervention for youth, “I want a place that is safe for my children to hang out.”
- Clearer pathways to recovery support- “Transitions are where people die. We need someone to follow up.”
- Real-time guidance and human connection- “We don't know where to go or who to trust.”
- More resources for justice-impacted families- “I don't want to lose my kids; I need help safely, not punishment.”

Community Needs Survey Gaps & Findings (867 Responses)

The findings from Lake County ROSC Community Needs Survey show that Lake County is ready for recovery-oriented solutions. Most respondents support evidence-based treatment, harm reduction, and overdose prevention, with **76.4%** believing Medication-Assisted Recovery is effective, **79.8%** believing harm reduction reduces risk, and over **80%** supporting public Narcan availability and expressing confidence in its use. Additionally, more than **82%** of respondents believe people impacted by substance use and mental health challenges deserve respect, reflecting a strong foundation for expanding peer-led, stigma-reducing approaches and community-based prevention efforts.

At the same time, the data clearly indicate that access—not willingness—is the primary barrier. Nearly **71.9%** of respondents report difficulty finding mental health and substance use treatment, while **66.3%** report difficulty accessing Medication-Assisted Recovery providers and harm reduction services. Equity gaps are evident, with fewer than **50%** of respondents believing Latine residents have equal access to mental health (**48.3%**) and substance use services (**49.4%**). Additional barriers related to housing (**50.6%**) and transportation (**48.3%**) further compound challenges for individuals and families seeking recovery support. Youth prevention resources also remain limited, with only **44.9%** believing youth have access to prevention programming and just **41.6%** reporting sufficient safe, substance-free spaces.

Taken together, these findings demonstrate that Lake County’s priority is not persuading individuals to seek help, but ensuring that help is available, coordinated, and accessible at critical moments. Strategic efforts must focus on strengthening Warm Handoff and transition supports, expanding peer navigation and overdose prevention, addressing inequities in access, investing in youth prevention and safe spaces, and continuing to build compassionate, non-judgmental systems that actively support individuals and families throughout their recovery journey.

COUNCIL OUTREACH & COMMUNICATION PLAN

Purpose

To increase awareness, strengthen partnerships, reduce stigma, and ensure equitable access to recovery supports across Lake County.

Objectives

The objectives of the Lake County ROSC Council’s communication plan are to:

- **Promote ROSC activities, services, and resources** to ensure community members and partners are aware of available recovery supports and system initiatives.
- **Engage partners and community members** through consistent communication that encourages participation, collaboration, and shared accountability.
- **Reach priority populations**, including justice-impacted individuals and families, youth, and underserved communities, with targeted and accessible messaging.
- **Increase transparency and build trust** by providing clear, accurate, and timely information about ROSC goals, activities, and outcomes.

Target Audiences

Audience	Why	What	How
ROSC Council Members	Coordination, decision-making, system alignment	Agendas, minutes, project updates, data, training opportunities	Email, Zoom meetings, shared documents
Lived-Experience Community	Empowerment, leadership, trust, access to services	Recovery resources, peer support, events, Narcan trainings	Social media, peer outreach, newsletters, community events
Justice-Impacted Individuals & Families	Support during re-entry, reduce risk, increase service access	Re-entry resources, peer navigation, family supports	Direct outreach, partner referrals, jail/prison collaboration
Youth-Serving Organizations	Strengthen prevention and youth recovery pathways	Youth resources, education opportunities, events	Email, meetings, school/community partnership outreach
Behavioral Health & Hospital Systems	Improve transitions, strengthen Warm Handoffs	Protocols, peer support availability, trainings	Provider meetings, email updates, case coordination
Shelters & Housing Providers	Reduce housing instability and transition-related relapse	Peer outreach info, recovery navigation, referral coordination	Direct contact, meetings, email
Faith-Based Organizations	Expand community support and reduce stigma	Recovery resources, trainings, volunteer opportunities	Email, announcements, meeting outreach
Marginalized & Underrepresented Communities	Ensure equity, culturally responsive engagement	Bilingual materials, peer services, overdose prevention	Culturally relevant outreach, bilingual messaging, partnerships
Media & Public Stakeholders	Transparency, awareness, community education	Public updates, events, prevention messaging	Press releases, social media, newsletters

Key Messages

- **Recovery is a community responsibility**—and together, we create pathways where hope, healing, and long-term wellness are possible for everyone.
- **Collaboration is our strength.** No single agency can meet every need, but united, we can build a system where no one falls through the cracks.
- **Lived experience leads the way.** The voices of people in recovery guide our decisions, shape our strategies, and keep us accountable to real community needs.

- **Transitions should never happen alone.** Warm, peer-supported connections save lives and reduce risk during the moments that matter most.
- **Equity and inclusion are non-negotiable.** Every individual—regardless of race, language, income, or background—deserves access to compassionate, culturally responsive care.
- **Transparency builds trust.** We believe in open communication, shared progress, and collective ownership of outcomes.
- **Partnerships create impact.** When providers, peers, families, and community organizations work together, the entire system becomes stronger, safer, and more recovery-ready.
- **Accountability drives change.** We monitor our progress, listen to feedback, and adapt to ensure that our actions align with the needs of the community.

Communication Channels & Frequency

The Lake County ROSC Council will use multiple communication methods to ensure consistent engagement, timely information sharing, and broad community reach. Communication efforts will be coordinated by NIRCO as the Lead Agency, with support from ROSC Council members and peer leaders.

Channel	Purpose	Frequency	Responsible Party
Monthly Newsletter	Share updates, events, training opportunities, success stories, and partner resources.	Monthly	NIRCO Communications Lead with ROSC input
Monthly ROSC Council Meetings	System planning, partner coordination, progress updates, and shared decision-making.	Monthly	NIRCO & ROSC Council Leadership
Weekly Social Media Posts	Promote Recovery events, Narcan training, resources, partner highlights, and public education.	Weekly	NIRCO staff with peer support
Email Updates & Partner Communication	Share time-sensitive updates, meeting reminders, referrals, and collaboration opportunities.	As needed	NIRCO & designated ROSC coordinator
Outreach Flyers (Digital & Print)	Promote community events, trainings, recovery services, and education opportunities.	As needed	NIRCO & Outreach Partners
One-to-One Engagement	Build trust, connect individuals to services, and support follow-through during transitions.	Ongoing	Peer recovery support staff & partner agencies

Community Presentations & Outreach Events	Increase public awareness, reduce stigma, and educate about recovery and overdose prevention	Quarterly and as requested	NIRCO, ROSC, Peer Leaders, and Community Partners
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Roles & Responsibilities

ROSC Council Coordinator

The ROSC Council Coordinator is responsible for the day-to-day coordination and implementation of ROSC activities. Key responsibilities include organizing monthly ROSC meetings, preparing agendas and minutes, coordinating partner communication, supporting outreach and engagement efforts, managing peer and partner collaboration, and ensuring progress toward strategic goals. The Coordinator also serves as the primary point of contact for community partners and supports implementation of the Re-Entry ROSC and Warm Handoff initiatives. In addition, ROSC serves as a countywide Referral Hub, connecting individuals and families with appropriate services—including treatment, recovery support, harm reduction, housing, and social service resources—ensuring timely, person-centered linkage to care across Lake County.

ROSC Council Supervisor

The ROSC Council Supervisor provides oversight, leadership, and accountability for the ROSC Council. Responsibilities include providing program guidance, supporting strategic direction, monitoring progress toward goals, ensuring compliance with IDHS requirements, and approving major communications and reporting. The Supervisor also supports staff development, problem-solving, and system-level relationship building.

ROSC Council Data Analyst

The ROSC Council Data Analyst is responsible for collecting, tracking, analyzing, and reporting ROSC performance data. Responsibilities include maintaining participation records, tracking referrals and Warm Handoff activity, monitoring outcome measures, preparing quarterly and annual reports, supporting data-informed decision making, and ensuring data accuracy for IDHS reporting and community transparency.

Evaluation & Feedback

- Social media insights
- Newsletter open/click rates
- Attendance at meetings
- Quarterly communication reviews
- Survey feedback from partners

COUNCIL GOALS, OBJECTIVES & OUTCOME MEASURES

Goal #1 – Year 1

By June 30, 2026, Lake County will establish a fully operational Re-Entry ROSC system with at least 5 active partners and peer leaders to improve coordinated recovery supports for justice-involved individuals.

Objectives/Strategies (Year One):

- Form the Re-Entry ROSC Council **by June 30, 2026**
- Recruit at least 5 cross-sector partners **by March 15, 2026**
- Conduct two re-entry system roundtables **by April 25, 2026**
- Identify the top five re-entry barriers by **May 15, 2026**
- Develop 3 shared system improvement goals **by June 1, 2026**
- Pilot cross-training at two provider sites **by June 30, 2026**

Progress Achieved:

During the FY26 planning year, the Lake County ROSC Council made measurable progress toward strengthening coordinated re-entry efforts across Lake County. Planning activities were completed to ensure Re-Entry ROSC Council is structured, partner-informed, and prepared to begin coordinated re-entry work in alignment with recovery-oriented system principles by **June 30, 2025**.

The Re-Entry ROSC Council will be led by Jessica Baynes, Project Manager of NIRCO's Justice-Impacted Families Project, whose leadership is grounded in both professional expertise and lived experience. Her role ensures that re-entry planning and coordination are informed by real-world understanding of system barriers faced by justice-impacted individuals and families. This leadership approach reinforces the Council's commitment to peer-informed, trauma-responsive, and recovery support services.

Cross-sector collaboration was successfully achieved through the Lake County ROSC Council, with partners representing behavioral health, housing, justice, healthcare, emergency response, and recovery support services. Active participating partners included NICASA Behavioral Health Services, Gateway Foundation, Lake County Jail, PADS Lake County, and multiple community-based organizations. This level of engagement met established participation benchmarks and strengthened coordination across systems serving justice-impacted individuals. Based on these existing relationships and sustained collaboration, there is strong potential for partner agencies and individuals to actively participate in the Re-Entry ROSC Council.

Next Steps

Expand partner engagement, strengthen referral pathways, and implement Year Two system improvements.

Outcome / Output Measures

Performance Area	Measure	FY26 Result June 30, 2026
Partner Engagement	Number of partners engaged	5 active partner agencies
	ROSC / Re-Entry meetings held	12 meetings conducted during FY26
System Mapping	Re-entry barrier analysis completed through round tables and other guided discussions	Barrier analysis finalized based on data from 2 structured roundtables

Workforce Development	Providers trained	3 providers trained on re-entry coordination and Warm Handoff concepts
Action Planning	Re-Entry Action Plan status	Re-Entry Action Plan finalized and approved

Goal #2 – Year 1

By **June 30, 2026**, Lake County will finalize a standardized, peer-informed Warm Handoff protocol with **at least five partner agencies**, preparing **three pilot sites** for FY27 implementation.

Objectives for Year 1

- Form a Warm Handoff workgroup
- Review discharge workflows
- Develop referral and follow-up protocols
- Conduct two peer/frontline reviews
- Complete pilot site readiness

Progress Achieved:

Development of the Warm Handoff protocol advanced through structured, multi-agency planning and coordination. Initial referral workflows, peer engagement processes, and follow-up timelines were drafted and refined based on partner and peer feedback, consistent with recovery-oriented systems of care principles. Pilot sites were identified, including PADS Lake County, the Eddie Washington Center, and Women’s Residential Services (WRS), with a Warm Handoff pilot successfully initiated at PADS to test workflow feasibility and coordination.

As part of this pilot, a certified peer support specialist and peer recovery support staff are embedded at PADS twice per month to provide direct recovery support services. These activities have include housing support, connection to recovery resources, distribution of care packages, and free haircuts as a self-esteem boost. This on-site presence allows peers to build trust, reduce barriers to engagement, and model how Warm Handoffs can move beyond referral to meaningful connection and follow-through.

Cross-sector collaboration has also been established through the Lake County ROSC Council to support development and implementation of the Warm Handoff protocol, with partners representing behavioral health, healthcare, justice, emergency response, housing, and recovery support services. Active participating partners include NICASA Behavioral Health Services, Gateway Foundation, Lake County Jail, PADS Lake County, and multiple community-based organizations. This level of engagement has strengthened coordination across systems that regularly interact with individuals during high-risk transition points. Based on these existing relationships and sustained collaboration, there is strong potential for partner agencies and frontline staff to actively participate in Warm Handoff Workgroups and support protocol implementation across pilot sites.

Next Steps

Launch pilots in FY27 and expand countywide.

Outcome / Output Measures

Performance Area	Measure	FY26 Result June 30, 2026
Partner Engagement	Number of agencies participating	5 partner agencies
	Participation consistency	70%+ attendance across meetings and planning sessions
Protocol Development	Core components drafted	75 Warm Handoffs completed
	Core components drafted	Referral workflows, peer engagement steps, follow-up timelines
Feedback & Review	Number of feedback sessions	4 structured sessions
	Pilot partner participation	100% of pilot partners engaged
Pilot Sites	Number of pilot sites identified	3 pilot sites
	Pilot site locations	PADS (launched), Eddie Washington Center, Women's Residential Services (WRS)
Pilot Readiness	Sites fully operational	65% operational
	Implementation Readiness	80% implementation-ready

12-Month Plan

Establish a fully operational Re-Entry ROSC system and finalize a standardized, peer-informed Warm Handoff protocol, with at least 5 partners engaged and three pilot sites prepared for FY27.

Quarter 1 (July–September 2025) Focus: Launch both initiatives & establish infrastructure

Re-Entry (Goal #1) Activities

- Launch Re-Entry ROSC initiative
- Identify stakeholders and peer leaders
- Begin partner recruitment
- Draft governance structure and meeting schedule

Warm Handoff (Goal #2) Activities

- Form Warm Handoff Workgroup
- Identify Warm Handoff partner agencies
- Begin collecting discharge workflow documentation

Quarter 1 Output Measures

- Re-Entry ROSC Council framework drafted
- Warm Handoff Workgroup established
- Initial stakeholder and partner list
- Early workflow documents collected

Quarter 2 (October–December 2025)- Focus: Form councils, expand partnerships & begin protocol drafting

Re-Entry (Goal #1) Activities

- Hold first formal Council meeting
- Finalize membership structure
- Expand partner recruitment toward 25
- Collect pre-roundtable system data

Warm Handoff (Goal #2) Activities

- Review discharge workflows
- Draft referral and follow-up protocol components
- Gather feedback through ROSC engagement

Quarter 2 Output Measures

- Re-Entry ROSC Council formally established
- Partner roster expanded
- Pre-roundtable system data collected
- Initial Warm Handoff protocol framework drafted

Quarter 3 (January–March 2026)- Focus: Mapping, barrier identification, peer reviews & refinement

Re-Entry (Goal #1) Activities

- Conduct Roundtable #1 by January 31
- Identify early barriers by February
- Reach 5 partners by March 15
- Prepare for Roundtable #2

Warm Handoff (Goal #2) Activities

- Conduct Peer/Frontline Review #1
- Revise protocol
- Conduct Peer/Frontline Review #2
- Confirm pilot sites

Quarter 3 Output Measures

- Roundtable #1 summary completed
- Initial barrier list developed
- 25 partner participation goal met
- Two peer/frontline reviews completed

- Warm Handoff protocol revisions completed
- Pilot sites identified

Quarter 4 (April–June 2026)-Focus: Finalize barriers, goals, protocol & pilot readiness

Re-Entry (Goal #1) Activities

- Conduct Roundtable #2 by April 25
- Identify top five barriers by May 15
- Develop 3 system improvement goals by June 1
- Finalize Re-Entry Action Plan
- Pilot cross-training at two sites by June 30

Warm Handoff (Goal #2) Activities

- Finalize Warm Handoff protocol
- Complete readiness assessments for 3 pilot sites
- Prepare training and implementation materials

Quarter 4 Output Measures

- Roundtable #2 completed
- Barrier analysis finalized
- 3 system improvement goals documented
- Re-Entry Action Plan completed
- Cross-training pilots completed
- Warm Handoff protocol finalized
- Three pilot sites fully prepared for FY27

Year 1 Outcome / Output Measures (For Both Goals Combined)

- Number of partners engaged
- Number of Council & Workgroup meetings
- Barrier analysis completed through roundtables
- Two cross-training pilots completed
- Warm Handoff protocol finalized
- Three pilot sites ready for FY27 launch
- Re-Entry Action Plan finalized
- Number of peer/frontline reviews completed
- Number of partners participating in workflow mapping

VII. 3-YEAR STRATEGIC DIRECTION (FY26–FY28)

YEAR 1 – FY26 (July 1, 2025 – June 30, 2026)

Strategic Focus: Build the foundation — governance, mapping, protocols, pilot readiness.

Goal	Objectives / Strategies	Measurable Outcomes
Goal 1: Establish Governance &	Lake County will Form Re-Entry ROSC Council, Formalize	• Council established with 5 participating Organizations/individuals 6/30/26

Council Infrastructure	governance structure & membership And Establish Warm Handoff Workgroup	• Warm handoff Workgroup meets 1 a month by 6/30/26 • Governance structure for Re-entry ROSC approved by 6/30/26 • 75% partner attendance 6/30/26
Goal 2: Complete System Mapping & Barrier Identification	• Lake County will Conduct two re-entry roundtables, Identify top five barriers and Document workflow gaps	• 2 roundtables completed by 4/19/26 • Top five barriers documented 4/19/26 • System map completed by 5/30/26 • 8 participants engaged in round table 4/19/26
Goal 3: Design Warm Handoff Protocol & Prepare Pilot Sites	Lake County will Review discharge workflows, Develop referral, follow-up, peer steps and Complete 3 pilot readiness assessments	• Warm Handoff Protocol finalized by 6/15/26 • 3 readiness assessments completed 6/30/26 • 2 peer reviews completed 2/15/2026 • 3 agencies confirmed for FY27 pilot 6/30/26

YEAR 2 – FY27 (July 1, 2026 – June 30, 2027)

Strategic Focus: Test and refine — launch pilots, build peer workforce, strengthen pathways.

Goal	Objectives / Strategies	Measurable Outcomes
Goal 1: Launch Re-Entry Pilot Initiatives	Lake County will Implement FY26 improvements and Test workflows at pilot sites	• Pilots running at 3 sites 1/15/27 • 15 individuals supported 6/30/27 • Pilot evaluation completed 6/30/27
Goal 2: Launch Warm Handoff Pilot & Strengthen Provider Capacity	Lake County will Activate protocol at 3 pilot sites and Train frontline & peer staff Collect baseline referral data	• Protocol active at 3 sites 6/30/27 • 4 staff/peers trained 6/30/27 • Data collected at all sites 6/30/27
Goal 3: Expand Peer & Workforce Capacity	Provide cross-training and Develop peer referral pathways	• 4 cross-trainings completed 6/30/27 • Peer pathways draft ready by 4/1/27 • 75 individuals receive peer support 6/30/27

YEAR 3 – FY28 (July 1, 2027 – June 30, 2028)

Strategic Focus: Full integration — countywide implementation and long-term sustainability.

Goal	Objectives / Strategies	Measurable Outcomes
Goal 1: Countywide Integration of Re-Entry Improvements	Lake County will maintain and update fully operational Re-Entry ROSC system to improve coordinated recovery support for justice-involved individuals.	• 75 individuals served annually 6/30/28
Goal 2: Countywide Warm Handoff Implementation	Lake County will implement a peer-informed Warm Handoff protocol	• Protocol implemented in 5+ agencies 6/30/28