



# Community School Financing:

Aligning Local Resources  
for Student Success

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**Barbara Kronick**

Director, Integrated Support Services, Sacramento City Unified School District

**Leslie O'Hare Sorensen**

Resource Specialist, Student & Family Support Services, Ontario-Montclair School District

**Shelly Masur**

Board Trustee, Redwood City School District

**Tanya Perry**

Healthy Start Student Support Program Supervisor, Bear Valley Unified School District

**Sandra Portasio**

Director of School-Community Partnerships, Redwood City School District

**Joan Reynolds, MSW**

Healthy Start Director, Lake County Office of Education

**Lawrence Shweky**

Coordinator, Integrated Support Services, Sacramento City Unified School District

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For questions or more information, please contact Deanna Niebuhr, Senior Director of Community School Initiatives at the Partnership for Children & Youth: [deanna@partnerforchildren.org](mailto:deanna@partnerforchildren.org)



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## Table of Contents

▶ Acknowledgements .....	2
▶ Community Schools: A Definition .....	4
▶ Overview: Understanding How Community School Efforts are Funded Governance and Infrastructure as the Foundation .....	4
▶ Collaboration Among Partners: The Foundation for Financing .....	4
▶ Funding Principles: Focus on Alignment of Existing Funding .....	6
▶ Community Profiles with Sample Budgets .....	8
➤ Sacramento City Unified School District Youth and Family Resource Centers .....	9
➤ Ontario-Montclair School District Student and Family Support Services .....	12
➤ Bear Valley Unified School District Bear Valley Healthy Start .....	15
➤ Redwood City School District / Redwood City 2020 Redwood City Community Schools .....	18
➤ Lake County Office of Education Lake County Healthy Start .....	21
▶ Appendix Descriptions of Funding Streams .....	24

### Background Information:

The purpose of this guide is to help school districts and their partners understand some basics about financing community school initiatives. Four school districts and one county office of education are profiled, including their initiative-wide budgets, to provide a comprehensive, but digestible, view into mature initiatives and how financing works. These profiles provide a look at both the staffing infrastructure as well as services and programs offered, along with the funding streams being utilized.

Data for these budgets was pulled in 2010. While the Local Control Funding Formula was not yet in play during the research phase, this guide covers funding streams that are still available and should be maximized when building comprehensive student support systems, before districts dip into their LCFF funding.

## Community Schools: A Definition

A **community school** is the result of intentional collaboration between a school district, local government, and community partners. These agencies join forces and align their resources and expertise to make sure every child has access to the necessary academic, developmental, health, and social supports. Through this approach, agencies recognize that the needs of the whole child must be met in order for students to succeed. Agencies work together to identify and understand the needs of children and their families, and to coordinate and leverage the necessary resources to address those needs.

*A community school is not a program. It's a way of doing business—a collaborative approach to supporting student success* that includes components such as after school and summer programming, family engagement and support services, physical and mental health services, and more. With the ultimate goal of ensuring student success, a community school strives to be a full-spectrum resource for families and children, reflecting the needs and assets of the community—and becoming a center of community life.

## Overview: Understanding How Community School Efforts are Funded Governance and Infrastructure as the Foundation

Partnering at the local level to support student success makes good sense, and it is not a new idea. What's not so obvious is how to make these partnerships truly effective and then, how to pay for them.

**This brief describes how community school efforts are financed—primarily, how local government agencies partner to align existing resources.** Aligning resources often means redeploying them, which are not small or easy decisions to make. In order to make significant decisions, partnerships need to have formal governance structures in place and an infrastructure to support the decision-making work. This brief does not simply list potential funding streams, but instead starts with the key to financing—the nature of the partnerships and the governance structures behind these efforts. The brief outlines common characteristics of successful and sustained community school initiatives, and profiles five efforts to illustrate the critical role of coordination and intentional collaboration between partners.

The examples—see the *Community Profiles* section—provide insight into the depth of partnerships required for such efforts and an overview of the types of funding streams that can be used to make such collaborations possible. While not a technical “how-to” guide, this brief provides evidence and ideas from successful efforts that school districts, counties, cities, non-profit organizations, and other public entities can use to begin exploring how to form community school partnerships that support student success.

Many communities are seeking highly competitive grants, such as the Full Service Community Schools or Promise Neighborhoods grants, to get their efforts started. While startup money may be helpful or necessary, we hope this paper provides communities with ideas about how to begin partnering and aligning resources, even in the absence of a special grant or seed funding. Readers should note that many community school efforts have been launched in response to severe budget situations.

## Collaboration Among Partners: The Foundation for Financing

The guts of community school financing rests on partner agencies aligning existing resources through a well-built collaborative. Through a coordinated delivery system, a community school offers more effective programs and services than any one of its partners could offer on its own. Partners in community schools see greater benefits for children and families, with increased accessibility, scope, quality, and effectiveness of services delivered; and for themselves by

harnessing fiscal efficiencies through economies of scale and eliminating duplicative efforts. To effectively redeploy and align resources, a community must first establish a cross-agency collaborative designed to make substantial systems change possible.

Adopting a community school approach means all partners adopt a new way of doing business. While the ability for each partner to achieve its mission will be enhanced, partners need to commit to shared decision-making and put real resources on the table. **The success of a community school effort is directly correlated with the strength of the infrastructure supporting its partnerships.**

Time and resources must be devoted to establishing working relationships among partners and creating systems that allow these partners to collaboratively assess needs, share resources, and make decisions. While developing these relationships and systems takes time—especially in the face of pressing needs in the community—it is a critical initial step in developing community schools. Discussions about filling service gaps, and determining which services should be offered, need to take place after each partner understands the purpose and role of the collaboration. In other words, *decisions about **how** to work together are made before decisions about **what** to do.*

Successful and sustained community school efforts share some important characteristics in terms of what their governance infrastructures look like and how the collaboratives function:

- ❖ **Partners work as a team to design the collaborative infrastructure.**  
Partnering entities act as a collective team to design the infrastructure and the systems to support the collaboration. While one or more partners may take the lead in bringing the group together, all must contribute to building the collaborative. Together partnering entities set common goals and priorities, assess needs and assets, re-allocate existing resources or re-deploy existing services or programs, track efforts and results, and continually improve implementation using data-based decision-making.
- ❖ **Coordination and teamwork at each level of decision-making.**  
To ensure the sustainability of the collaborative, the partnering entities should ensure buy-in and develop coordination strategies at three levels: policy, management, and school site. Addressing coordination and working as teams at each of these levels helps to institutionalize the collaborative so it can function effectively and endure through leadership, personnel, and budgetary changes. For example, a community school effort typically has a steering committee with elected officials and other local leaders involved in policy decisions, an executive team to manage the overall operation of the initiative, and a site team to execute the day-to-day service delivery, referral, and coordination. Each team has representatives with the appropriate decision-making authority from each partnering entity.
- ❖ **Partners share resources for coordination and services.**  
Partnering entities share resources for both the necessary coordination and the delivery of services. In most cases, community school efforts have been started with little to no new resources, but rather through partners re-deploying and re-allocating existing resources. While partners may not physically pool their respective funds in one joint bank account, they work collaboratively to adjust the resources under their respective domains to meet the needs identified by the collaborative. Indeed, many services are provided on an in-kind basis. (A more detailed discussion of funding appears on page 4.)
- ❖ **Partners use schools as access points to reach students and families more effectively.**  
A key element of the community school approach is using schools as access points for delivery of or referral for support services. Since children are at school every day, county and city agencies may increase their exposure to target populations by co-locating services at schools. In addition, children and families may be more likely to utilize service providers on-site, and the normalizing and de-stigmatizing effect of offering more universal and preventive services.

- ❖ **Coordination is key; co-location of services on school sites is not enough.**  
While co-locating services at school sites is important, this alone is not enough to be effective. Community school partners must coordinate across services and fully integrate them into school systems. This may require major adjustments in existing service delivery and referral systems, particularly to ensure that each partner shares information about clients who are also served by other partners. This cross-agency sharing of information is highly beneficial because it allows for increased responsiveness to clients' evolving needs. By meeting the full spectrum of needs, the effectiveness of any single support service is enhanced. Increased effectiveness along with decreased duplication of services frees up resources for more preventative services to be provided.
- ❖ **Partners equally share responsibility for collectively achieving results.**  
While the collaborative's ultimate outcome goals are related to school success, all partnering entities—whether a county public health department, a city parks and recreation department or a school district—share responsibility for collectively achieving results and reaching identified outcomes. One partner may play a lead role in making progress toward a specific outcome, but all partners contribute to the success of reaching that outcome. For example, while a school may play the largest role in increasing students' academic learning, the county health department understands how its mental health consultant assigned to the school site helps students address challenges that inhibit their ability to attend and focus during class.

### **Funding Principles: Focus on Alignment of Existing Funding**

Funding for community schools comes from its partners, not from a specific grant or funding stream. A community school effort can be started and sustained without new funding, as long as its partners are willing to re-deploy and re-allocate their existing resources. The *Community Profiles* in the following section contain budget matrices that summarize the alignment that has been achieved. The funding matrix in each profile lists the funding streams being utilized, the source and use of the funding, and the percentage of the overall budget represented by the funding source.

While the design of each community's efforts is unique to that community's assets and needs, some common principles regarding funding should be noted:

#### **What alignment of resources means**

The core tenet of the community school approach is that partnering entities combine resources. This includes not just funding but also time, personnel, or other assets. Indeed, partner agencies are not just handing over their funding, but they **are** allowing the collaborative to have a say about how the funding they control is utilized. In addition, funding is not always the most important asset a partner has to offer. For example, by sharing buildings and other facilities, a partner agency can make a significant contribution to the resources available to help meet the collaborative's goals.

Finally, decisions about how existing staff are utilized—versus adding new staff—are critical in terms of achieving maximum impact. For example, having a county-deployed mental health worker join the school's teaching staff in the Student Study Team process could significantly increase the impact of the mental health services provided—even though it would mean giving up an hour of time working directly with students each week.

#### **Getting started without new / additional funding**

Many community schools get started with a single public agency partnering with a school district to expand its reach to a certain population. Once an effective partnership is established around one type of support service, the agency and school might identify another service to integrate into the school site that will help both the agency and the school meet their goals. Positive results from the partnership attract other entities with complementary services to join the collaborative

so that they too can reach their goals—and a community school is born. While re-deploying or re-allocating services or resources to a school site can be challenging, it does not necessarily require new funding.

For example, Redwood City 2020—a formal partnership between San Mateo County, Redwood City, the Redwood City School District, the Sequoia Union High School District, private funders, and community-based organizations—was formed when key players from each of these entities realized that they were meeting multiple times about different issues affecting the same children and families. By establishing Redwood City 2020, the partner organizations created a vehicle for having more comprehensive conversations, setting priorities more strategically, and ultimately implementing programs with greater impact. Redwood City’s community school effort is an initiative of Redwood City 2020 and represents a pooling of partner resources. Despite declining budgets during the recession, Redwood City 2020 maintained support for its community schools, citing the significant return on investment they see each year.

In the recent era of tight public agency budgets, the community school approach has offered a strategic method for making tough budget decisions—making the most of existing resources.

### **This is not just up to school districts**

A common misconception about community schools is that this work is the school district’s responsibility—when schools and their teachers are already stretched to their limit. On the contrary, the community school approach is about school districts turning to the community (especially county and city agencies) to help provide services and programs outside the expertise and beyond the resources of schools.

The funding matrices in the *Community Profiles* section will show that school districts are contributing much less than 50% of the total resources in play. For example, in Sacramento City Unified School District, 85% of the overall budget consists of resources for services that come from partners or outside grants. Each profile contains a leveraging ratio, which represents the amount of outside resources brought in by the investment of one dollar of district-controlled funding. The most common ratio is three dollars leveraged for every education dollar invested. But this ratio goes as high as almost \$17 leveraged, in the case of Redwood City.

### **Investment in coordination is key**

To ensure that a comprehensive and integrated set of services and programs is developed and functions well, the collaborative must make an investment in coordination. In addition, this investment in coordination must be made at both the management and site levels. Without staff in charge of coordinating, it is not possible to maximize the resources brought together by the partner organizations.

While most service delivery costs can be addressed by re-deploying existing resources, many community school efforts struggle to identify the necessary funding to cover the costs of coordination. Typically, schools do not have personnel dedicated to the coordination of support services, especially coordination across multiple partnering entities. Very few public funding streams are dedicated to such coordination; although several federal, state, and local public funding streams can be used for such costs (refer to the *Community Profiles* below for examples of funding streams most commonly used to pay for coordination and administration, including Medi-Cal Administrative Activities (MAA), Title I, and general funds). These funding streams, however, like most public resources, face competing demands and may be difficult to re-direct to community school coordination. Some successful community school efforts have pieced together cash and in-kind resources from each of the partners to cover the costs associated with coordination. To ensure adequate coordination is in place, community school efforts should prioritize obtaining policy and fiscal commitments from each partnering entity.

## Community Profiles

The budgets provided in these profiles were built on data from 2010. Percentages, instead of total funding amounts, are provided to facilitate comparison and understanding of basic financing principles across districts of varying size.

The community profiles that follow include: a description of the community school initiative; the services, supports, and opportunities being provided; the history; the governance structure and the nature of the partnerships; the funding sources; and the results achieved. The following communities are highlighted:

- ❖ Sacramento City Unified School District – Youth and Family Resource Centers
- ❖ Ontario-Montclair School District – Student and Families Support Services
- ❖ Bear Valley Unified School District – Bear Valley Healthy Start
- ❖ Redwood City School District / Redwood City 2020 – Redwood City Community Schools
- ❖ Lake County Office of Education – Lake County Healthy Start

### Note to Counties

Redwood City's profile may be of particular interest to county health and human services agencies. Redwood City's community schools are supported by a formal partnership between the school district, the city, and the county, called Redwood City 2020. While Redwood City School District is the lead agency in the community school initiative, the partners in Redwood City 2020 jointly own and support the initiative.

The Lake County Healthy Start profile may be of particular interest to rural counties. To maximize limited resources and reach as many families as possible with support services, Lake County Healthy Start is administered by the County Office of Education. This way all seven of the County's school districts can participate and administrative costs are kept to a minimum.

### Note to Cities

Cities wishing to understand the role they can play in a community school approach may be most interested in the profile for the Ontario-Montclair community. In their effort, the school district and the City of Montclair partner to provide the resources necessary for administration and basic infrastructure.

Also of interest to cities, Redwood City 2020, the body that holds the partnerships supporting their community school initiative in the Redwood City School District, is an initiative housed in the city manager's office.

### Note to School Districts

A common misconception among school districts is that a community school initiative will require a special start-up grant or major ongoing commitment of funding from the district. The community profiles that follow demonstrate that successful community school initiatives rely on a relatively small amount of district funding. Indeed, most efforts leverage a majority of their resources from partner agencies and many require no commitment from the district's general fund.

## Sacramento City Unified School District

### Youth and Family Resource Centers

#### Overview

Sacramento City Unified School District's (SCUSD) Office of Integrated Support Services (ISS) operates 19 Youth and Family Resource Centers (YFRCs) at schools throughout the district to provide support to students who are struggling socially, emotionally, behaviorally, and/or academically. At each center, social workers, family advocates, interns, and community partners work directly with students and families to address issues of concern, drawing on school and community resources for additional support.

#### Services Provided

SCUSD's YFRCs provide a spectrum of integrated support that spans the areas of youth development, family services, academic enrichment, health, and mental health. Targeted primarily to low-achieving students, YFRC services address critical student needs that pose barriers to learning. Services include:

Student Services	Family Services	School Services
<ul style="list-style-type: none"><li>• Advocacy</li><li>• Counseling</li><li>• Classroom Support</li><li>• Conflict Resolution</li><li>• Dental Screening</li><li>• Mentoring</li><li>• Recreational Activities</li><li>• School Supplies/Uniforms</li><li>• Tutoring</li><li>• Youth Development Activities</li></ul>	<ul style="list-style-type: none"><li>• Case Management</li><li>• ESL and Citizenship Classes</li><li>• Health Insurance Enrollment</li><li>• Home Visits</li><li>• Immunization Clinics</li><li>• Parenting Classes</li><li>• Parent Leadership</li></ul>	<ul style="list-style-type: none"><li>• Attendance Services</li><li>• Community and School Safety</li><li>• Crisis Intervention</li><li>• SARB<sup>1</sup> Participation</li><li>• Student Study Team Support</li><li>• Suicide Risk Assessment</li><li>• Translation Services</li></ul>

In addition to the services at the 19 YFRCs, ISS provides support and consultation to administrators and staff at SCUSD's other 65+ schools on specific students, as well as program and policy issues related to social and emotional support. ISS also publishes a community resource directory, manages the SCUSD online resource directory, and has recently launched a resource line related to LGBTQ student issues.

#### History

SCUSD's Youth and Family Resource Centers (YFRC) began in 1992 with support from the California Healthy Start program. Between 1992 and 2009, when the last Healthy Start grants were awarded, SCUSD received 14 operational grants to establish YFRCs at 26 schools. Of these, 19 YFRC sites remain funded and operational, including sites at 15 elementary, two middle, and two high schools.

#### Governance / Partnerships

Each YFRC is governed by a combination of site-level management, district-level management, and a collaborative composed of school and community stakeholders. At each site, a YFRC coordinator works closely with the principal to identify students and families in need of support (generally through the Student Study Team process), and to identify strategies for addressing these needs. The YFRC coordinator directly supervises YFRC staff and interns, manages relationships with community partners, and sits on each school's Site Council.

<sup>1</sup> Student Attendance Review Board

SCUSD's YFRCs are managed centrally through the Department of Integrated Support Services, which also coordinates a wide array of support services including foster youth, homeless services, mental health services and others. ISS staff are also called upon frequently to address policy issues within the school district and county, as well as to provide input on state and national legislation.

More than 100 community partners—which include community non-profits, city and county agencies, interns, and volunteers—contribute to the success of SCUSD's YFRCs and provide over \$3 million annually in services. Though provided in-kind, community partners represent the most significant source of funding for YFRC support services. This is made possible in part because the YFRCs provide partners with access to students, confidential working space, and general assistance. Without this mutually supportive partnership, many of these services would fail to reach the students.

### **Results**

SCUSD YFRC evaluation data provides evidence of the close connection between social-emotional support and academic achievement. For example, data from the SCUSD Village Project (2004-05) demonstrated the following successes for students receiving YFRC services who had presented with poor grades, chronic truancy and/or extreme behavior problems:

- ❖ Over 77% (N = 705) of students at high risk of academic failure referred by teachers to SCUSD YFRCs maintained or improved their math and English scores on the California Standards Test.
- ❖ Of students referred by teachers for academic challenges who were functioning below basic proficiency in English or math, 33% improved their language skills and 27% increased their level of math proficiency.
- ❖ Of those referred to the YFRCs for behavioral challenges who were functioning below basic proficiency in math (N = 355) or English (N = 394), 30% increased their level of math proficiency and 28% improved their language skills.

### **Funding**

YFRC services are funded through many different sources, including grants, LEA Medi-Cal dollars, school-site contributions and leveraged funding through community partners.

Approximately six dollars in partner services are leveraged for every one dollar of direct YFRC funding. The YFRCs are funded without a single dollar from the school district general fund. In-kind resources that the YFRC infrastructure is able to leverage for school sites include: social work interns, community mental health providers, substance abuse services, language assistance and cultural brokerage, legal aid, and health advocacy.

The following matrix shows the various funding sources and the activities and services they pay for:

<b>Funding Sources / Types</b>	<b>Service Funded</b>	<b>Percentage of Total Funding</b>
<p><b><u>School Site Funding</u></b><sup>2</sup></p> <ul style="list-style-type: none"> <li>• Title I (main source)</li> <li>• EIA (Economic Impact Aid)</li> <li>• QEIA (Quality Education Investment Act)</li> </ul>	<ul style="list-style-type: none"> <li>• Family resource center coordination</li> <li>• Social work and case management services</li> <li>• Intern supervision</li> </ul>	7%
<p><b><u>School District</u></b></p> <ul style="list-style-type: none"> <li>• LEA Billing Option (Medi-Cal)</li> <li>• TIIBG (Targeted Instructional Improvement Block Grant) (AB 825)</li> <li>• McKinney-Vento<sup>3</sup> (CDE)</li> </ul>	<ul style="list-style-type: none"> <li>• Family resource center coordination</li> <li>• Social work and case management services</li> <li>• Intern supervision</li> <li>• Administration</li> <li>• Outreach and support for homeless youth and their families</li> </ul>	4%
<p><b><u>Education Related / Competitive Grants</u></b></p> <ul style="list-style-type: none"> <li>• Healthy Start (CDE)</li> <li>• School Community Violence Prevention (CDE)</li> <li>• Lifeline Mentoring (federal – OJJDP)<sup>4</sup></li> </ul>	<ul style="list-style-type: none"> <li>• Healthy Start site administration</li> <li>• Violence prevention</li> <li>• Peer mediation</li> <li>• Conflict resolution</li> <li>• Youth development services</li> <li>• Bullying prevention</li> <li>• School health centers</li> </ul>	4%
<p><b><u>Local Government / Partner Agencies</u></b></p> <ul style="list-style-type: none"> <li>• Sacramento County Mental Health/EPSTD<sup>5</sup></li> <li>• CSUS Dept. of Social Work (interns provided in-kind)</li> <li>• Over 120 community partners providing a wide range of services and supports</li> </ul>	<ul style="list-style-type: none"> <li>• School-based mental services</li> <li>• Social work and counseling services</li> <li>• Wide range of social, emotional, academic, health, youth development and family support services</li> </ul>	85%
<p><b><u>Private Donors/Foundations</u></b></p>		Less than 1%

<sup>2</sup> Sources of school site contributions vary by school site. Title I represents the main source of funding. However, some school sites contribute funds from EIA and QEIA to a lesser degree.

<sup>3</sup> McKinney-Vento Homeless Education Assistance Act.

<sup>4</sup> Office of Juvenile Justice and Delinquency Prevention.

<sup>5</sup> Early Periodic Screening, Diagnosis, and Treatment – the Medi-Cal / Medicaid program for children.

## Ontario-Montclair School District

### Student and Family Support Services

#### Overview

The Ontario-Montclair School District's vision is to ensure all students are prepared for success in school and life. This is achieved through focused academic programs and a continuum of support services for students and families in need. These supports are especially important in Montclair and Ontario where 85% of students live in poverty, 49% of students are English Language Learners, and 39% of parents lack a high school diploma. To implement these services the Ontario-Montclair School District (OMSD) (K-8) established the Family Solutions Collaborative and Montclair Community Collaborative to serve all 32 schools in the district through outreach staff and a network of family resource centers.

#### Services Provided

Outreach consultants at each school site link students and families to comprehensive case management and other services. Case management includes both crisis intervention services and coordinated access and referrals to a range of supports including: housing, food, clothing, domestic violence supports, children's health insurance enrollment, health care, legal services, counseling, transportation supports, and more. Families can directly access: lice and immunization clinics, counseling services, and primary care medical services for children and adults either free or at low cost. In addition, families are offered parent education and school readiness supports.

Students from targeted schools participate in Promise Scholars, a multi-year universal college readiness program, which has successfully helped students navigate the path to post-secondary education opportunities beginning in the 5th grade. Promise Scholars provides early college awareness, aspirations, and access to students with limited resources.

#### History

Together, the Family Solutions Collaborative and Montclair Community Collaborative have received eight Healthy Start Planning and Operational grants since 1997. As stated above, services are now provided to all 32 schools in the district.

In the winter of 2011, OMSD will be opening a new family resource center with Mental Health Services Act – Prevention and Early Intervention funds and a donated building by the City of Montclair using redevelopment funds. In addition, OMSD will be starting a school-based mental health clinic. Services in the new mental health clinic will be paid for via the children's Medi-Cal program, Early Periodic Screening Diagnosis, and Treatment (EPSDT).

#### Governance / Partnerships

OMSD provides district-wide coordination of the outreach consultants at each school site. The outreach consultants are OMSD staff who link students and families to the comprehensive case management and other services.

Case management is provided through a multi-disciplinary team with a lead case manager and as needed, a mental health professional, public health nurse, domestic violence shelter staff, child protective service case worker, code enforcement, etc. Case management referrals are made by outreach consultants after students have been served through either the Student Study Team or the Coordination of Service Team at the school site.

OMSD Student and Family Support Services Department coordinates ongoing community assessments and strategic planning processes that support the overall service and support system. In addition, the district organizes monthly agency partner and school staff meetings and in-

service trainings. The Family Solutions Collaborative and Montclair Community Collaborative are responsible for the administration and operation of the network of family resource centers.

The City of Montclair is a key partner and has provided general fund money for a portion of a case manager since 1999. The city has aligned and coordinated its recreation programs, medical clinic, and other human services with the efforts of OMSD since the founding of the Montclair Community Collaborative in 1996. In addition, they are donating the use of a house for the new family resource center in Montclair.

## Results

Student and Family Support evaluation data shows improvements for families and students, especially regarding school attendance:

Students served by intensive OMSD Case Management Services in 2008-09 attended school on average 3.3 more days than before the intervention (N=380).

- ❖ Families served through case management services in 2008-09 exhibited the following changes:
  - 24% improvement in parent skills;
  - 17% improvement in employment and income;
  - 13% improvement in mental health;
  - 19% increase in access to community supports; and
  - 13% improvement in access to basic needs supports (as measured by the Life Skills Progression assessment tool).
- ❖ Students served by the OMSD counseling program in 2008-09 attended school on average 3.3 more days than before the intervention (N=729).
- ❖ 64.9% of students served by the OMSD counseling program showed significant improvement in mental health outcomes (as measured by the Child and Adolescent Functional Assessment Scale).
- ❖ Since 1999, over 4,200 students have experienced increased awareness of and aspirations to attend college. Students in the Promise Scholars program attend school an average of 8.5 more days a year, have higher GPA, higher CAHSEE scores, and are more likely to attend college compared to matched/equivalent students not in the program. Approximately 54% of Promise Scholars enroll in college following high school graduation compared to 38% of equivalent non-participants.

## Funding

The Student and Family Support Services system is funded by cash commitments from OMSD and the City of Montclair. These funds pay mostly for coordination, administration, staff training, assessment, and ongoing service delivery system development. Support services are largely provided by in-kind contributions made by partner agencies.

For every education dollar invested (including but not limited to a current Healthy Start grant and Title I) \$2.70 is leveraged from other sources to support students. This leveraging calculation is based on amounts of cash-in-hand invested by OMSD or its shared fiscal agent, the City of Montclair. It does not include resources committed in-kind by agency partners—amounts that represent the vast majority of resources committed to the effort.

In the past, Healthy Start and Safe Schools/Healthy Students grants, as well as contributions from a private foundation, funded service and systems development.

The following matrix shows funding sources committed by the district, the city, and the other partners:

<b>Funding Sources / Types</b>	<b>Service Funded</b>	<b>Percentage of Total Funding</b>
<b><u>School District</u></b> <ul style="list-style-type: none"> <li>• General Fund</li> <li>• Title I</li> <li>• McKinney-Vento (CDE)<sup>6</sup></li> </ul>	<ul style="list-style-type: none"> <li>• Administration/ coordination</li> <li>• Case management</li> </ul>	27%
<b><u>Education Related / Competitive Grants</u></b> <ul style="list-style-type: none"> <li>• Healthy Start (CDE)</li> <li>• MAA (Medi-Cal Administrative Activities)</li> <li>• LEA Billing Option (Medi-Cal)</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Outreach consultants at each site</li> <li>• Administration/ coordination</li> </ul>	34%
<b><u>Local Government / Partner Agencies</u></b> <ul style="list-style-type: none"> <li>• City of Montclair</li> <li>• First Five</li> <li>• Early Mental Health Initiative</li> <li>• Mental Health Services Act</li> <li>• Early Periodic Screening, Diagnosis and Treatment (EPSDT)</li> </ul>	<ul style="list-style-type: none"> <li>• Infrastructure / administration</li> <li>• Case management/parent education/health service access</li> <li>• In class behavior services</li> <li>• Case management/ counseling/social emotional learning curriculum and activities</li> <li>• Mental health services for students</li> </ul>	38%
<b><u>Private Donors/Foundations</u></b>	<ul style="list-style-type: none"> <li>• Supplies</li> </ul>	Less than 1%

<sup>6</sup> McKinney-Vento Homeless Education Assistance Act.

## Bear Valley Unified School District

### Bear Valley Healthy Start

#### Overview

Bear Valley Healthy Start and the Bear Valley Unified School District (BVUSD) serves students and families of the Big Bear community which includes the City of Big Bear Lake and county unincorporated areas. Big Bear is a rural community with a population of approximately 20,000 people scattered throughout a 12-mile long valley at the 7,000 foot elevation in the San Bernardino Mountains. The community is 45 miles of mountain roads from the nearest city. Healthy Start serves over 2,700 students at three elementary schools (K-6), one middle school (7-8), one high school (9-12), one continuation high school, and a single one-room schoolhouse (1-6) located approximately 50 miles from the Big Bear Lake. The Bear Valley Healthy Start Collaborative is committed to improving student and family success at home, school, and in society by maximizing access to community resources.

#### Services Provided

Bear Valley Healthy Start works with several local and county organizations to ensure that the youth and families of this rural, isolated mountain community have the services they need. The Healthy Start collaborative strives to nurture happy, healthy families by working with children starting in pre-school through high school to address their emotional, developmental, and physical health needs. Services include:

- ❖ **Health Aides:** Health aides are on site at the three main elementary schools, middle school, and high school to provide basic health care services. Health aides provide vision, dental, hearing, and scoliosis screenings; and oversee daily medication management, injury, and health care for students at all schools.
- ❖ **Family Advisors:** Family advisors at the elementary, middle, and high schools work with students, their families, and staff to provide support and a link to community services. Family advisors also meet with students on either an individual or small peer group basis to discuss ways of dealing with difficulties at home and school, such as reaction to parents' divorce, a death in the family, bullying, self-esteem, and social skills building.
- ❖ **Peace Builders Program:** The elementary schools are promoting the Peace Builders philosophy to shift school culture to one of inclusiveness, responsibility, and support. Family advisors blend research-based Positive Action Curriculum with Peace Builders in classroom presentations that have reduced bullying and fighting on campus. Specially trained family advisors provide small group Positive Action sessions for students requiring particular assistance in developing social skills and self-management.
- ❖ **Student Assistance Program and Peer Assistance and Leadership Skill Building:** The middle school implemented the Safe School Ambassadors Program in conjunction with the Student Assistance Program to reduce bullying and improve school climate. These approaches have significantly empowered middle school students to intervene when they see tensions between peers begin. Students at the high school participate in a Peer Leadership skills training program provided by family advisors.
- ❖ **Case Management:** Case management is available for families with issues which require more intense intervention – such as, health insurance enrollment, basic needs, substance abuse, domestic violence, etc. Families are referred to appropriate local resources outside of the school district, and family advisors collaborate with these specialists to make sure that children don't "fall through the cracks."
- ❖ **Community Activities and Events:** Community-wide activities spearheaded by Healthy Start include clothing exchanges, Family Fun Night, and a holiday giving collaborative, among others.

## Governance / Partnerships

Bear Lake Healthy Start is administered by its Healthy Start Supervisor. With 12 part-time staff at five schools, Healthy Start provides coordination and oversight for the program, including: needs assessments, data collection and analysis, program and service evaluation, collaborative / partner coordination and fundraising.

Monthly multi-disciplinary team (MDT) meetings with Children and Family Services, mental health, law enforcement, and social services representatives ensure continuity in intensive case management services and coordination among services provided to children and families.

To provide a comprehensive range of services the Bear Lake Healthy Start Collaborative is made up of a broad group of partners:

- Lutheran Social Services
- DOVES
- Big Bear Recovery Services (OB)
- Bear Valley Healthcare District – MOM and DAD Project
- Soroptimist of Big Bear Valley
- Bear Valley Recreation and Parks District
- Hummingbird Project
- Big Bear Lake Branch Library
- Kiwanis Club of Big Bear
- Lions Club
- Bear Valley Firefighters Association
- City of Big Bear Lake
- Chamber of Commerce
- San Bernardino County Departments

## Results

On an annual basis, Healthy Start is able to realize the following outcomes that help ensure children make it to school healthy and ready to learn, including:

- ❖ Over 2,500 children assisted by family advisors to access community resources
- ❖ Over 5,300 Positive Action sessions conducted, with 80% of the students participating showing improvement in school-preferred behaviors
- ❖ Over 360 high school students participated in leadership skills training program

## Funding

Bear Lake Healthy Start is funded by a wide range of funding streams. Through public and private grants, school-based Medi-Cal, and in-kind services provided by partner organizations, Healthy Start is able to leverage six dollars in support services and programs for every education dollar invested in Healthy Start.<sup>7</sup> No general funds are contributed by the school district, except funds leveraged through the Medi-Cal Administrative Activities (MAA) program.

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<sup>7</sup> In calculating this leveraging ratio, reinvestments of Medi-Cal Administrative Activities (MAA) program funding as well as reimbursements for the LEA Medi-Cal Billing Option are considered leveraged funds, not education dollars.

The following matrix shows the funding streams and sources of these funding streams, the services they pay for, and the portion of the total program they make up:

<b>Funding Sources / Types</b>	<b>Service Funded</b>	<b>Percentage of Total Funding</b>
<b><u>School District</u></b> <ul style="list-style-type: none"> <li>• MAA (Medi-Cal Administrative Activities)</li> <li>• LEA Billing Option (Medi-Cal)</li> <li>• McKinney-Vento<sup>8</sup></li> </ul>	<ul style="list-style-type: none"> <li>• Healthy Start administration</li> <li>• Family advisors at each school site</li> <li>• Health aides at each school site / basic health services</li> <li>• Outreach and support for homeless youth and their families</li> </ul>	73%
<b><u>Education Related / Competitive Grants</u></b>		0%
<b><u>Local Government / Partner Agencies</u></b> <ul style="list-style-type: none"> <li>• City of Big Bear Lake</li> <li>• Community Development Block Grant</li> <li>• San Bernardino County Department of Health Services</li> <li>• Alcohol and Drug Services Grant</li> <li>• First 5 – as a sponsor for Family Fun Night</li> </ul>	<ul style="list-style-type: none"> <li>• Positive Action classroom presentations, parent supports and referrals to community services.</li> <li>• Substance abuse services, Peer Leadership, and Student Assistance</li> <li>• Covers expenses for Community Family Fun Night with 60+ vendors providing FREE food, information and activities to Big Bear children and family members</li> </ul>	20%
<b><u>Private Donors/Foundations</u></b>	<ul style="list-style-type: none"> <li>• Core support for Healthy Start administration and health aides</li> </ul>	17%

<sup>8</sup> McKinney-Vento Homeless Education Assistance Act.

## Redwood City School District / Redwood City 2020

### Redwood City Community Schools

#### Overview

Redwood City School District's (RCSD) **Community Schools** are a network of schools that unite the most important influences in children's lives—school, families, and communities—to create a web of support that nurtures their development toward productive adulthood. With its partners, the district operates four community schools with on-site family resource centers and offers extended day services at eight other sites. RCSD's community schools reflect a unique partnership between San Mateo County, Redwood City, the Redwood City School District, and community-based organizations, brought together as an initiative of Redwood City 2020 (RWC2020).

#### Services Provided

RCSD's community schools and extended day programs reach over 1,900 students each year with a wide array of services and programs:

- ❖ **Family Support Services:** Through the family resource centers, students and families have access to a comprehensive set of safety net programs. Case managers help families navigate the vagaries of rules and application processes related to the various programs. As with elementary-aged families, those with children ages five and younger have access to a home visiting program.
- ❖ **Parent Leadership and Involvement:** RCSD's community schools are committed to making sure that families are involved in meaningful ways and have the tools they need to partner with school staff and help their children navigate the education system. Families are offered parenting education as well as school transition support for pre-K to kindergarten, 5th to 6th grade, and 8th to 9th grade.
- ❖ **Extended Day Activities:** Students at 12 school sites participate in extended day enrichment activities which include literacy and science programs, sports, youth leadership, and parks and recreation activities.
- ❖ **Student Leadership / Youth Development:** A highlight of RCSD's community schools is their commitment to following youth development principles and offering students meaningful ways to engage in their school community. These activities include opportunities for apprenticeships, student government activities, peer mediators, and collaboration with the city for involvement in a middle school Youth Advisory Board.

#### History

RCSD's community schools began as Healthy Start sites in the early 1990s with family resource centers and were launched as an initiative of Redwood City 2020 in 2003. The original sites have grown into the fully operational community schools – two K through 5 schools, a K through 8, and a middle school. Two additional school sites are currently being developed as full service community schools.

#### Governance Structure / Partnerships

Each of RCSD's community schools has a community school coordinator. The coordinator works closely with the principal and manages the school's partnerships and the related array of services and programs. This relationship ensures that the principal can focus on the core academics and that support services are given sufficient attention to be both effective and fully integrated into the academic plan. At the district level, RCSD's community schools are overseen by the Director of Community School Partnerships who secures funding and ensures coordination across the sites.

The partnerships created and sustained by RWC2020 make the community school initiative possible, and site level work is reflected in the executive and policy-setting teams of RWC2020. RWC2020 started as an 'umbrella' to address in a more coordinated way the multiple issues facing students and families in the city. In 1999, RWC2020 established a formal partnership between San Mateo County, the City of Redwood City, the Redwood City School District, and the Sequoia Union High School District. Over time, other partners have joined, including the John W. Gardner Center for Youth and Their Communities (Stanford University), and foundations as critical funding partners.

### **Results**

Taft Elementary School is RCSD's most established community school. The academic progress Taft has been able to realize shows what is possible when a commitment to providing comprehensive social-emotional supports is combined with a strong instructional program. 87% of Taft's students are eligible for free or reduced-price lunch and 64% are English Language Learners.

- ❖ Taft was one of only nine schools in California to exit "Program Improvement" status under No Child Left Behind (2009).
- ❖ Academic Performance Index rose to 784 in 2009, from 444 in 2000.
- ❖ 43% of English Language Learners are proficient or advanced on California Standards Test (CST) in English.
- ❖ 67% of Latino and socio-economically disadvantaged subgroups are proficient in math.

### **Funding**

RCSD's community schools leverage government, foundation, and partner funding as well as district general fund monies. While it is not captured in the matrix below, each of the Redwood City 2020 partners contribute \$25,000 annually to convene Redwood City 2020 and manage its initiatives.

Approximately \$16.91 in partner financial support and in-kind services are leveraged for every one dollar of core education funding committed.

The following matrix shows the various funding sources and the activities and services they pay for:

<b>Funding Sources / Types</b>	<b>Service Funded</b>	<b>Percentage of Total Funding</b>
<b>School District</b> <ul style="list-style-type: none"> <li>• General fund</li> <li>• Title I</li> </ul>	<ul style="list-style-type: none"> <li>• Community School infrastructure / administration</li> </ul>	6%
<b>Education Related / Competitive Grants</b> <ul style="list-style-type: none"> <li>• After School Education and Safety (ASES) program</li> <li>• 21st Century Community Learning Centers</li> <li>• School Violence Prevention Grant</li> </ul>	<ul style="list-style-type: none"> <li>• Community School infrastructure / administration</li> <li>• Comprehensive extended day learning opportunities</li> <li>• Family engagement activities</li> <li>• School resource officers</li> <li>• Youth development classes</li> </ul>	35%
<b>Local Government / Partner Agencies</b> <ul style="list-style-type: none"> <li>• San Mateo County Human Services Agency</li> <li>• Children’s Collaborative Action Team</li> <li>• City of Redwood City</li> <li>• Sheriff’s Office/Sherriff’s Activity League (SAL)</li> <li>• First Five</li> <li>• Differential Response</li> <li>• Early Mental Health Initiative</li> <li>• Health Department (Children’s Health Initiative)</li> </ul>	<ul style="list-style-type: none"> <li>• Community School infrastructure / administration</li> <li>• Sports and arts programming</li> <li>• Nurturing parenting program</li> <li>• Differential Response case management</li> <li>• Primary mental health intervention program</li> <li>• Mental health clinicians at the site</li> <li>• Family support services (safety net services)</li> <li>• Access to health coverage/benefits</li> </ul>	52%
<b>Private Donors/Foundations</b>	<ul style="list-style-type: none"> <li>• Community School infrastructure / administration</li> <li>• Safety net services</li> <li>• Family engagement services</li> </ul>	7%

<sup>9</sup> The Children's Collaborative Action Team (CCAT) is the designated Child Abuse Prevention Council (CAPC) of San Mateo County. CCAT/CAPC is an independent collaborative mandated by the California State Welfare and Institutions Code 18967. The CCAT fiscal agent is the San Mateo County Human Services Agency.

## Lake County Office of Education

### Lake County Healthy Start

#### Overview / History

Lake County Healthy Start started at one elementary school established with the support of a Healthy Start grant in 1991; and now serves 20 schools in all seven of the county's school districts. In the past school year, Healthy Start served over 2,500 students and their families, providing support, encouragement, and practical assistance to help strengthen the children and families of Lake County.

The primary focus of Lake County Healthy Start is to address barriers to learning and increase student success. A team of on-site professionals is committed to supporting children and helping to build personal strengths for families. Over 70% of students enrolled in public schools across the county live below the Federal Poverty Line, and that statistic increases to over 90% at select school sites. For families facing serious and multiple challenges associated with economic pressures, the Healthy Start team provides support in many ways, including:

- ❖ Increased access to health care for low-income families;
- ❖ Strengthening families through parent education and support;
- ❖ Providing families with concrete support in times of need; and
- ❖ Enhanced social and emotional supports for children and families.

#### Services Provided

Healthy Start partners provide a wide array of supports and services to ensure that children make it to school healthy and ready to learn. Services include:

- ❖ Focused educational support for foster children and youth
- ❖ Special outreach, identification, and services for homeless youth and their families
- ❖ Support services for families with school-age children delivered in the home, including referrals for a wide array of support services, parent education, basic needs for families, and access to health care
- ❖ Parenting classes county-wide, for parents of infants, toddlers, preschoolers, school-age children, and adolescents, offered in English and Spanish by many agency partners
- ❖ Dental screenings, oral health education for preschoolers and their parents, assistance in obtaining dental insurance, referral for dental treatment, and transportation to ensure access
- ❖ Lice eradication services for CalWORKS families; head checks at school sites to reduce absences due to head lice; home visits for selected households; and education for all families on staying lice free

The strength of Lake County Healthy Start comes from the diverse programs, and strong collaborations developed throughout the county. The entire Healthy Start team works together in a fluid manner to ensure each child and family receives the services ideally suited to meet their unique needs. This level of personalization offers a rare depth of service, and results in strong child and family outcomes.

## **Governance / Partnerships**

Lake County Healthy Start is administered by the Lake County Office of Education (LCOE). Oversight and direction of all Healthy Start programs are managed by the director and administrative support person, including: needs assessments, data collection and analysis, program and service evaluation, collaborative / partner coordination, and fundraising. Administering the Healthy Start program through the County Office of Education creates a unique opportunity to ensure efficient utilization of resources, and strong collaborations and participation among the county's seven school districts. This county-level coordination provides each district access to a much wider scope of services than each district would be able to provide on its own.

To provide a comprehensive range of services, Lake County Healthy Start has a broad group of partners:

- Lake County Public Health
- Child Protective Services
- Lake County Mental Health
- Lakeside Health Care Center
- Redbud Family Health Center
- Indian Child Welfare
- North Coast Opportunities
- Lake County Community Action Agency
- Lake County Health Services
- Lake Family Resource Center
- Easter Seals
- Migrant Education
- Redwood Children's Services
- Lake County Probation Department
- Redwood Coast Regional Center
- Lake County Tribal Health

The level of service integration and coordination at the site level is exemplified by the relationship between Healthy Start staff, the school, and the child welfare department in the design and implementation of a local Differential Response program. This program, Family PRO, has received state and national recognition for positive outcomes in increasing parenting knowledge and skills, increasing family access to local services, and creating safer and more stable home environments.

These crucial partnerships were formed to focus on the common goal of reducing child abuse and neglect in Lake County and stabilizing families so children could attend school and be successful. Lake County Child Welfare Services, Lake Family Resource Center, Robinson Rancheria and Healthy Start joined together to develop a unique Lake County Differential Response Project. Cross trainings for all staff included: Motivational Interviewing, Family Team Meetings, Substance Abuse 101, etc. A new Multi-Disciplinary Team (MDT) to review students and families with multiple agency involvement, with a focus on prevention, was developed and includes: SELPA, AODS, CWS, Regional Center, Easter Seals, Probation Department, Mental Health Dept., County Office of Education, Healthy Start, and others.

Several of these Healthy Start and Partners initiatives (Children's Oral Health Project, Delinquent Diversion Differential Response, Foster Youth Consortium, Nurturing Parenting Project) have created a process for open and honest communication between agencies, and trusting relationships—which result in a reduction in duplication of services and improved services for families. When families are more stable, children are healthier and come to school ready to learn.

## **Results**

Outcomes that help ensure children make it to school healthy and ready to learn include, annually:

- ❖ Almost 400 children transported to dentist and corresponding decrease in dental disease
- ❖ Just under 11,000 head checks for lice at school sites and corresponding improved attendance
- ❖ Over 200 parents taking Nurturing Parent classes

## Funding

Lake County Healthy Start is supported by a wide range of funding streams. Through public and private grants, school-based Medi-Cal, and in-kind services provided by partner organizations, LCOE is able to leverage three dollars in support services and programs for every education dollar invested in Healthy Start. No general funds are contributed by the participating school districts, except funds leveraged through the Medi-Cal Administrative Activities (MAA) program.

The following matrix shows the funding streams and sources of these funding streams, the services they pay for, and the portion of the total program they make up:

<b>Funding Sources / Types</b>	<b>Service Funded</b>	<b>Percentage of Total Funding</b>
<b><u>School Districts</u></b> <ul style="list-style-type: none"> <li>LEA Billing Option (Medi-Cal)</li> </ul>	<ul style="list-style-type: none"> <li>Healthy Start services</li> </ul>	6%
<b><u>County Office of Education</u></b> <ul style="list-style-type: none"> <li>MAA (Medi-Cal Administrative Activities)</li> </ul>	<ul style="list-style-type: none"> <li>Healthy Start administration</li> </ul>	7%
<b><u>Education Related / Competitive Grants</u></b> <ul style="list-style-type: none"> <li>Foster Youth Services (CDE)</li> <li>McKinney-Vento<sup>10</sup></li> </ul>	<ul style="list-style-type: none"> <li>Educational support for children in foster care</li> <li>Outreach and support for homeless youth and their families</li> </ul>	25%
<b><u>Local Government / Partner Agencies</u></b> <ul style="list-style-type: none"> <li>First 5 – Local and State</li> <li>Nurturing Parenting</li> <li>Children’s Oral Health Project</li> <li>Lake County Department of Social Services</li> <li>Differential Response (Child Protective Services)</li> <li>PAL Program</li> <li>Local Hospital District</li> </ul>	<ul style="list-style-type: none"> <li>Family support services</li> <li>Parenting classes</li> <li>Dental screening, education, referral for services and transportation</li> <li>Family support services</li> <li>Lice eradication services for Cal WORKS families. Head checks at school sites.</li> <li>Healthy Start services</li> </ul>	62%

<sup>10</sup> McKinney-Vento Homeless Education Assistance Act.

## APPENDIX

### Descriptions of Funding Streams

The descriptions of funding streams below are arranged under the following categories:

- ❖ Education Funding Sources – Formula / Entitlement
- ❖ Education Funding Sources – Competitive Grants
- ❖ Funding Sources from Partner Agencies

Under these categories funding sources appear alphabetically.

#### **Education Funding Sources – Formula / Entitlement (federal / state)**

##### **Economic Impact Aid (EIA) (state / formula)**

A program supporting compensatory educational services for educationally disadvantaged students and bilingual education services for English language learners.

*For more information:* Economic Impact Aid, California Department of Education at <http://www.cde.ca.gov/fg/aa/ca/eia.asp>

##### **Foster Youth Services (state / formula)**

Foster Youth Services funding supports schools in improving foster youth’s educational performance and personal achievement by increasing interagency support. Among other things, Foster Youth Services funding is used to determine gaps in the provision of educational and social support services and then to provide those services, either directly or through referral to collaborative partners. Schools can use Foster Youth Services funding to provide counseling and mentoring to foster youth, to refer them to outside providers, and to coordinate services.

*For more information:* Foster Youth Services, California Department of Education at <http://www.cde.ca.gov/ls/pf/fy/>

##### **Local Educational Agency (LEA) Medi-Cal Billing Option (federal funding through CA Health Care Services Dept. / fee for service)**

Because Local Educational Agencies (LEAs) provide medical services to students covered by Medi-Cal, they are eligible for federal reimbursement for the cost of certain services. Specifically, LEAs can be reimbursed for the cost of medical services that they provide to special education students when those services are required by students’ Individualized Education Programs (IEPs). Reimbursement funding must be spent on health and health-related services for students, and there are no restrictions on the types of health services provided or students served. Reinvestments in Medi-Cal outreach, enrollment and referral activities are counted as health-related and are allowed. A local interagency group decides how funding is spent.

*For more information:* LEA Medi-Cal Billing Option, California Department of Health Care Services at <http://www.dhcs.ca.gov/provgovpart/pages/lea.aspx>

##### **Title I-A of ESEA (federal / formula)**

Title I-A, the largest ESEA formula grant program, supports schools and school districts with high numbers or percentages of disadvantaged students in improving academic outcomes and closing the achievement gap. Title I-A grants are relatively flexible, and schools can use their funding to bolster student support services, including school health services and centers.

*For more information:* Title I-A, California Department of Education at <http://www.cde.ca.gov/sp/sw/>

### **Medi-Cal Administrative Activities (MAA) (federal funding through CA Health Care Services Dept. / time study)**

Because staff at Local Educational Agencies (LEAs) spend time helping students and families use the Medi-Cal program (e.g., conducting outreach, facilitating applications), LEAs are eligible for reimbursement for the cost of that time. Reimbursements through the Medi-Cal Administrative Activities (MAA) program can be used to support any community school activities. Reimbursements return to the district's general fund and there are no restrictions on how funding is utilized.

*For more information:* School-based Medi-Cal Administrative Activities program, California Department of Health Care Services at <http://www.dhcs.ca.gov/provgovpart/pages/smaa.aspx>

### **McKinney-Vento Homeless Education Assistance Act (state / competitive)<sup>11</sup>**

The McKinney-Vento Homeless Education Act facilitates the enrollment, attendance, and success in school of homeless children and youth. Schools can use McKinney-Vento funds to provide student health and support services to homeless and other at-risk students, as well as to coordinate services and facilitate student referrals to community health providers.

*For more information:* Homeless Children & Youth Education, California Department of Education at [www.cde.ca.gov/sp/hs/cy/index.asp](http://www.cde.ca.gov/sp/hs/cy/index.asp)

### **Quality Education Investment Act (QEIA) (state / formula based on API)**

Assists the lowest performing schools, schools with a valid 2005 Academic Performance Index (API) that are ranked in deciles 1 to 2, to increase student achievement.

*For more information:* QEIA, California Department of Education at <http://www.cde.ca.gov/ta/lp/qe/>

### **Targeted Instructional Improvement Block Grant (TIIBG) (state / formula)**

Targeted Instructional Improvement Block Grant (TIIBG) program detailing AB 825 funding information.

*For more information:* Targeted Instructional Improvement Block Grant, California Department of Education at <http://www.cde.ca.gov/fg/aa/ca/tiibg.asp>

## **Education Funding Sources – Competitive Grants (federal / state sources)**

### **21st Century Community Learning Centers/ Title IV-B of ESEA (federal through CDE / competitive)**

Title IV-B of ESEA, the 21st Century Community Learning Centers program, supports school districts and communities with high percentages of disadvantaged students in improving academic outcomes and closing the achievement gap. 21st Century Community Learning Centers operate before and after school, as well as over the summer, and must offer academic assistance, enrichment, and family literacy services. Schools can use 21st Century Community Learning Center funding to support drug and violence prevention, counseling, and character education services, as well as parent involvement initiatives.

*For more information:* 21st Century Community Learning Centers, California Department of Education at <http://www.cde.ca.gov/ls/ba/cp/>

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<sup>11</sup> School districts must apply for funds through McKinney-Vento Homeless Education Assistance Act. However, schools districts are only very rarely denied funding. Therefore, this funding stream should be considered more like a formula-based funding stream.

### **After School Education and Safety Program (ASES) (state / competitive)<sup>12</sup>**

The After School Education and Safety (ASES) Program funds after school and before school programs to ensure that students in kindergarten through ninth grade have safe, constructive opportunities during non-school hours. ASES programs must provide academic support, including literacy support, as well as an educational enrichment component designed to complement the school's overall mission. The enrichment component is flexible, based on student needs, and can incorporate youth development and health/nutrition prevention activities. ASES grants can support schools that provide, or want to provide, health education, youth development, and service coordination.

*For more information:* After School Education and Safety (ASES) Program, California Department of Education at <http://www.cde.ca.gov/ls/ba/as/>

### **Early Mental Health Initiative (state funding through California Department of Mental Health / competitive)**

The California Early Mental Health Initiative (EMHI) are grants to support intervention and prevention services for students in kindergarten through third grade who experience mild to moderate school adjustment difficulties. The goals of EMHI are to enhance the social and emotional development of young students; increase the likelihood that students experiencing mild to moderate school adjustment difficulties will succeed in school; increase their personal competencies related to life success; and minimize the need for more intensive and costly services as they grow older. EMHI supports Local Educational Agencies (LEAs) as they collaborate with mental health providers to implement school-based programs to enhance school adjustment, mental health, and social/emotional development. Grant funding is provided for one three-year cycle to publicly funded elementary schools.

*For more information:* Early Mental Health Initiative, California Department of Mental Health at [http://www.dmh.ca.gov/services\\_and\\_programs/children\\_and\\_youth/EMHI.asp](http://www.dmh.ca.gov/services_and_programs/children_and_youth/EMHI.asp)

### **School Community Violence Prevention Program (state / competitive)**

The School Community Violence Prevention Program (SCVP) addresses school safety and violence prevention issues. Strategies for addressing school safety and preventing violence must be selected from a pre-approved list of research-based, science-based, or promising practices. SCVP grants can support schools in preventing violence through a variety of services, such as case management, counseling, and youth development.

*For more information:* School Community Violence Prevention Program, CDE at <http://www.cde.ca.gov/fg/fo/profile.asp?id=1211>

## **Funding Sources from Partner Agencies (local, state and federal)**

### **Community Development Block Grants (federal funding through local government entities / community input process – competitive)**

Community Development Block Grants are federal awards to local government entities to develop viable urban communities by providing decent housing, providing a suitable living environment, and expanding economic opportunities for low and moderate-income individuals. These grants are used to support community services and facilities related to those services, including family supports, after school, child care, and youth development programs. Most local entities utilize a public input process to determine how to use the funds, so interested applicants should advocate for their programs throughout the process, as well as submitting a formal application.

*For more information:* Review the directory of contact information for the local staff of large cities and counties that receive funding directly from HUD, known as entitlement entities, at <http://www.hud.gov/local/ca/community/cdbg/index.cfm>.

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<sup>12</sup> While school districts must apply for ASES funds, the applications are not competitive in nature. Instead, priority for funding is given first to schools with 50% or greater participation / eligibility for the free/reduced-price meal program.

**Differential Response (state and federal funding for child welfare services delivered by county Child Welfare Services Departments / counties as partner agencies provide services in-kind)**

Differential Response refers to an innovation in child welfare practice. Differential Response is an approach to ensuring child safety by expanding the ability of child welfare agencies to respond to reports of child abuse and neglect. Its focus includes a broader set of responses for working with families at the first signs of trouble, including innovative partnerships with community based organizations that can help support families that are in need – and before further problems develop. With Differential Response, social workers work with families to engage them in solutions and to provide focused services so that there is the best possible opportunity to make needed improvements. Differential Response was first piloted by eleven California counties in 2004 and is now an approach that can be offered by a county’s Child Welfare Services Department. That is, funding for these supports to families would be contributed in-kind by the county.

*For more information:* Contact your county’s Child Welfare Services Department or Children’s Network

**Early Periodic Screening, Diagnosis and Treatment (EPSDT) (Medi-Cal program administered by county mental health departments / entitlement with 5% county contribution)**

Early Periodic Screening, Diagnosis and Treatment (EPSDT) is the Medi-Cal program for individuals under the age of 21 who have full-scope Medi-Cal eligibility. This benefit allows for periodic screenings to determine health care needs. Based upon the identified health care need, diagnostic and treatment services are provided. In California, the term ‘EPSDT’ is often commonly used to refer to mental health services provided through the program. In some counties EPSDT-financed mental health services are provided by county mental health clinicians and in other counties many of these services are provided by community-based providers through a contract with the county.

*For more information:* Contact your county’s mental health or behavioral health care department.

**First Five (First 5) (Local commissions)**

First 5 California supports children from prenatal to age five by creating a comprehensive and integrated system of information and services to promote early childhood development and school readiness. First 5 funding can pay for health care and related services for children up through five years of age, as well as to support parent engagement and education strategies. Eighty percent of First 5 funding is allocated to county-level First 5 commissions.

*For more information:* California Children and Families Commission at <http://www.cffc.ca.gov/default.asp>

First 5 Association of California: An Association of County Commissions at <http://www.f5ac.org/>

**Mental Health Services Act (MHSA) (state funding administered by the Department of Mental Health / allocation of funds is planned and administered by each county)**

Mental Health Services Act (MHSA) passed in November 2004 as Proposition 63 on the California ballot, provides funding to expand and transform California’s county-based mental health care system for children, adults and seniors. Counties receive MHSA funds based on a formula and allocate those funds based on plans developed with community input. There were five components which counties included in their original plans. Prevention and Early Intervention, is a component of particular interest to schools and community school efforts. Guidelines from the state required that a portion of the PEI funds be utilized for 0 – 24 year old population. In addition, schools were one of the entities required to be included in the planning process.

*For more information:* California Department of Mental Health at [http://www.dmh.ca.gov/prop\\_63/mhsa/default.asp](http://www.dmh.ca.gov/prop_63/mhsa/default.asp)

To see your county’s current plan go to [http://www.dmh.ca.gov/Prop\\_63/MHSA/County\\_Plans\\_and\\_Updates.asp](http://www.dmh.ca.gov/Prop_63/MHSA/County_Plans_and_Updates.asp)