



Santa Clara County
School-Linked Services

2012



"No thoughtful person would dispute that one's productivity and prosperity as an adult are founded to a significant degree on one's education as a child. However, the schooling of many children is significantly compromised by health and social problems that require services beyond what their parents are able to provide."

(School-Linked Services, The Future of Children, Published by the Center for the Future of Children, The David and Lucile Packard Foundation, Volume 2, Number 1, Spring 1992)

"The proposed School-Linked Services model must have as its foundation, family and community engagement, active dialog and participatory decision-making to address those institutional practices that undermine the capacity of children to succeed in school and life"

(School-Linked Services Advisory Committee December 2011)

"The School-Linked Services model is an outstanding way to better serve Santa Clara County children and families by bringing the services to where the families are while informing and engaging the school community in the range of support that is available."

(Dr. Charles Weis, Superintendent Santa Clara County Office of Education)

Table of Contents

Tabl	e of Contents	
Spec	ial Acknowledgements	
Lette	er of Introduction	
SAN	TA CLARA COUNTY SCHOOL-LINKED SERVICES PLAN	
I.	Introduction	11
II.	Background	13
	Board of Supervisors Referral	13
	History of School-Linked Services in Santa Clara County	14
	The School-Linked Services Planning Process	15
	Concerns and Outcomes Desired of a New SLS Model	16
	Parent and Teacher Perspectives on SLS	19
	Review of Promising Models of SLS	21
III.	Rationale: Why Link Schools and Public Services?	25
	Joining Public Missions: The Imperative of School-Linked Services	25
	Addressing Institutional Determinants Impacting Child and Family	26
	Health and Well-Being	
	Structural and Transformative Systems Change	27
	Addressing Socio-Economic Challenges in Santa Clara County	30
	Increasing School Engagement	39
IV.	The Emerging Plan	42
	Approach and Rationale: Building on Existing Excellence	42
	Evaluation Framework	47
V.	The Proposed Plan Summary	51
VI.	Implementation	57

57

Initial School-Linked Services Funding Partners

Implementation Oversight	62
Proposed Administration	62
Proposed Programs and Budgets	63
Implementation Timeline	63
Attachments	
Attachment A. Planning Logic Model	64
Attachment B. Community Schools Rationale and Results Framework	65
Attachment C. References	77



Special Acknowledgements

School-Linked Services Advisory Committee Co-Chairs

Hon. Dave Cortese, President, Santa Clara County Board of Supervisors Hon. George Shirakawa, Vice-President, Santa Clara County Board of Supervisors Dan Moser, Superintendent, East Side Union High School District

Santa Clara County Board of Supervisors

Hon. Dave Cortese, District 3, President Hon. George Shirakawa, District 2, Vice President Hon. Mike Wasserman, District 1 Hon. Ken Yeager, District 4 Hon. Liz Kniss, District 5

County Executive
Dr. Jeffrey Smith

Staff

Santa Clara County Mental Health Department

Nancy Dane Peña, Ph.D., Director Sherri Terao, Ed.D., Director of Family and Children's Services Lien Cao, M.S., School-Linked Services Consultant Lily Huynh, M.A., Prevention Program Analyst

Santa Clara County Probation Department Laura Garnette, Deputy Chief Probation Officer Mike Simms, Probation Manager

Santa Clara County Social Services Agency Gina Sessions, Ph.D., Deputy Director, Operations Jaime Lopez, Deputy Director, Department of Family and Children's Services

Offices of the Santa Clara County Board of Supervisors

Supervisor Dave Cortese Rabia Chaudhry, Chief of Staff Michelle Osorio, Interim Chief of Staff Enrique Flores, Policy Aide

East Side Union High School District Jennifer Klassen, District School Social Worker

Presenters

Marybeth Affleck-Nacey, Franklin-McKinley Children's Initiative
Brenda Carrillo, Coordinated School Health
Jennifer Klassen, East Side Union High School District
Mario Maciel, Multi-Disciplinary Team, Safe School Campus Initiative
Rachael Millican, MHSA PEI Project 2
Nancy Peña, Ph.D., MHSA PEI Project 2
Sandra Portasio, Redwood City Community Schools
John Porter, Ph.D., Franklin-McKinley Children's Initiative
Lisa Pruitt, PBIS
Larry Soto, MHSA PEI Project 2
Sherri Terao, Ed.D., MHSA PEI Project 2

Breakout Group Facilitators

Patricia Chiapellone
Melanie Daraio
Enrique Flores
Jaime Lopez
Jennifer Klassen
Don McCloskey
Rachael Millican
Nancy Peña
Mike Simms
Jolene Smith
Sherri Terao
Lisa Vieler

Breakout Group Recorders

Jeffrey Bornefeld
Dana Bunnett
Lien Cao
Thanh Do
April Kihara
Rachael Millican
Carolyn Verheyen

Other Acknowledgements

Jolene Smith, Chief Executive Officer, FIRST 5 Santa Clara County
Dana Bunnett, Director, Kids in Common
Carolyn Verheyen, MIG
Jean McCorquodale

2011 Santa Clara County School-Linked Services Advisory Committee Members

Dolores Alvarado

Community Health Partnership

Rev. Deacon Sal Alvarez

The Harvard Study - Consensus Process, Convened by La Raza Round Table de California

Linda Batton

Diocese of San José

Stephen Betts

Santa Clara County
Department of Alcohol and Drug Services

Nancy Birenbaum

South East Consortium for Special Education

Dana Bunnett

Kids in Common, a program of Planned Parenthood Mar Monte

Patricia Chiapellone

Alum Rock Counseling Center

Hon. Dave Cortese

Santa Clara County Board of Supervisors

Laura Garnette

Santa Clara County Probation Department

Jaime Lopez

Santa Clara County Social Services Agency

Yvonne Maxwell

Ujima Adult and Family Services

Don McCloskey

San José Unified School District

Chief Christopher Moore

San José Police Department

Rev. Jethroe Moore, II

NAACP and the

Black Leadership Kitchen Cabinet

Dan Moser

East Side Union High School District

Nancy Peña, Ph.D.

Santa Clara County

Mental Health Department

Gina Sessions, Ph.D.

Santa Clara County

Social Services Agency

Hon. George Shirakawa

Santa Clara County

Board of Supervisors

Mike Simms

Santa Clara County

Probation Department

Jolene Smith

FIRST 5 Santa Clara County

Charis Subil

Santa Clara County

Public Health Department

Michele Syth

Special Education Local Plan Area

Sherri Terao, Ed.D.

Santa Clara County

Mental Health Department

Lisa Vieler

California Teachers Association

Charles Weis, Ph.D.

Santa Clara County

Office of Education

Jason Willis

San José Unified School District

Craig Wolfe

EMQ Families First

LETTER OF INTRODUCTION

To the Residents of Santa Clara County:

School-Linked Services (SLS) is not a new idea. The original SLS program in Santa Clara County was designed and implemented in 1994-95; we had the pleasure of observing the positive impacts its services had on the success of participating youth. Unfortunately, however, the financial support for SLS waned as governmental revenues declined.

Nevertheless, even in this current period of continuing budget shortfalls, it is our belief that we can't afford not to reinstitute SLS. We are challenged to do more with less, and we believe we can rise to this challenge. County government is the level of government charged with the provision of most public health and human services, and the correlation between children and families with unmet needs and utilization of the County's justice, welfare, drug and alcohol treatment, mental health and other systems is well documented.

Fortunately, there is growing recognition that the traditional boundaries between education and human services are not in the best interests of children and families, and new pragmatic boundaries are yielding to integrated approaches that better serve children and communities. SLS recognizes and addresses problems through collaborative partnerships on school campuses and utilizes schools as a logical and convenient point of entry for youth and their families into preventive and supportive services. These efforts take many forms but almost all involve joint planning, shared service delivery, and effective coordination. Many models also stress parental participation and family involvement.

In the years since SLS was launched in Santa Clara County, evidence-based and promising models have been developed and now can be utilized to launch a new SLS program. Whatever the model, it will contain strong data maintenance and evaluation components that will demonstrate the program's impact and help to support continuing program expansion.

The alternative to SLS for many youth is continuing high rates of school drop-outs, low educational achievement, gang involvement, mental health and substance abuse

problems, teen pregnancies, unaddressed health problems, unemployment, family violence, and crime. The well documented correlation between school failure and public safety by itself provides a compelling case for early intervention into issues affecting school readiness, school attendance, school behavior, and school success.

SLS addresses the "opportunity gap" and helps to "level the playing field" for children and youth who are burdened with economic, social and/or a range of other inequities. In order to make meaningful progress in eliminating the achievement gap, we must first focus on the opportunity gap.

Our vision is that all young people will gain the knowledge, skills, and attitudes necessary to ensure their healthy transition to successful adult roles and responsibilities. We are committed to continue working toward a future in which all young people in Santa Clara County graduate from high school with the foundation necessary for college or a career, and for economic self-sufficiency, healthy family and social relationships, civic and community involvement, and life-long learning.

We, along with the many faithful participants in the eight months of our planning meetings, hope this document will serve as the starting point for the next steps toward collective action. We thank the other members of the Board of Supervisors who supported this planning effort, along with the leadership and staff of Mental Health, Social Services, Probation and other departments who provided strong support for this important initiative.

We invite you to join us and our key partners in the community to improve the outcomes for children, youth and families.

Sincerely,

Hon. Dave Cortese President, Board of Supervisors Supervisor, District 3

Hon. George Shirakawa Vice-President, Board of Supervisors Supervisor, District 2 Dan Moser Superintendent East Side Union High School District

SANTA CLARA COUNTY SCHOOL-LINKED SERVICES PLAN

I. Introduction

The School-Linked Services Advisory Committee (SLSAC) and contributing meeting attendees are pleased to submit the following School-Linked Services (SLS) Plan for

consideration by the Board of Supervisors. This plan was requested during the FY12 budget planning process.

The following plan is submitted with a strong belief by the SLS planning group that the children of Santa Clara County deserve the very best in educational, developmental and social nurturance; that the evidence shows that we are not achieving these expectations; and that by not modifying our childserving systems to better deploy existing resources

SLS Vision

Children are thriving at home, in school, and in their communities through the care and nurturance of families who love them; and through responsive, effective, and coordinated support available from the schools, system services, and community resources that surround them.

and to better engage and include families, schools, and community agencies in the work we do, we are failing in our duty as public servants. We also firmly believe, given the talent and partnerships in Santa Clara County, and the resilience and demand for improvement from the families and communities that make Santa Clara County their home, that the vision of the SLS Plan is within reach if we rise to the calling as outlined in the following SLS Plan.

The proposed SLS Plan embodies an approach to the delivery of services that is supported by current work in the field of education and student supports. This work indicates that when academic and support services are provided through integrated models built around school communities, students thrive, parents are more engaged in their children's education, families have better access to community services, and students achieve better academic outcomes.

The goal of the SLS Plan is to offer a well-designed model for the delivery of coordinated and effective health and social services on school campuses and in their neighboring communities that will meet the needs of students and their families in order for children to achieve success in school and in life.

The proposed SLS model provides coordinated county services (and hopefully other services funded through venues such as cities and grants) to schools and surrounding communities through coordinators that establish and manage a range of coordinated services. In the proposed model, the provision of county resources for the SLS Coordinator and county-funded services to districts and schools is contingent on four things: 1) the establishment of formal agreements between the county and districts; 2) the commitment of district and campus leadership to support and participate in the SLS model; 3) the development of inclusive school *collaboratives* that engage parents, providers, education and other key stakeholders; and 4) the commitment of all partners to participate in oversight, planning and evaluation to insure quality and to measure the impact of the services and SLS structure on children and their families.

The SLSAC recognizes that we are in extremely challenging economic times; and that the SLS Plan must build upon current efforts to improve public service delivery, utilizing current resources and new and renewed partnerships across multiple sectors. It is understood that the path to implementation of the proposed SLS Plan will take time, and if approved will be launched in a time where resources may be diminishing rather than increasing. Thus, the approval of the SLS Plan will signal a commitment to the model of SLS, and will mark a new beginning for the shaping of relevant County child-serving resources into the improved model of service delivery. To that end, it will charge County child serving delivery systems to strengthen partnerships across departments, and with education, community organizations and local businesses, in order to align and leverage our mutual work.

The plan presented here is the result of the input of scores of individuals with experience in the field of public children's services, as parents and educators, community members, community-based organization managers and staff, and public health and human service administrators and providers. It is organized to offer the reader an understanding of the following:

- The background to the current planning, the history of SLS, and an overview of the 8-month SLS planning process;
- **The rationale** and evidence that supports school-related health/behavioral health, social services, and juvenile justice services;
- The framework of the proposed SLS Plan; and
- Preliminary implementation recommendations following SLS Plan approval.

Upon approval of the SLS Plan, County departments will develop an implementation plan to be considered in the context of the FY13 budget planning process.

II. Background

Board of Supervisors Referral

During the FY2011 State of the County address, the Board of Supervisor incoming President Dave Cortese requested that the Social Services Agency, Mental Health Department, Public Health Department, Valley Medical Center, Department of Drug and Alcohol Services, and Probation Department work together to develop recommendations for reestablishing School-Linked Services. This request was made as part of the Supervisor's commitment to put a renewed focus on the well-being of the children of Santa Clara County.

In response, County departmental leaders met to examine the successes and challenges of the former School-Linked Services (SLS), to identify critical lessons learned, and to formulate recommendations for implementing a new SLS effort. The fundamental premise, reflected in the recommendations put forward by departmental leaders, was that a new SLS initiative should be borne from the alignment of self-identified needs of schools, County departments, parents, and community partners. Unless these partners share the vision, philosophy, resource contribution, and leadership of the initiative, it was surmised that a new effort would face a significant risk of failure.

The departmental leadership group identified a set of tenets, outlined below, to which it was believed that future schools/County endeavors should adhere. The tenets are based on the experience of the group members in creating and administering the SLS of the past as well as the group's collective knowledge about emerging best practices for cross-systems collaborative initiatives.

The following seven tenets were identified as guidance for any future SLS effort:

- 1. SLS should emerge from/represent the mission of County programs;
- 2. SLS should be a natural consequence of the school's and families they serve self-identified goals;
- 3. Best and promising culturally relevant practices should be identified and used;
- 4. Programs should be outcomes driven and these outcomes must be jointly designed, measured and reported;
- 5. Programming should be wellness oriented and focused on prevention;

- 6. Program staffing models should support teaming and effective collaborative processes;
- 7. Financing and sustainability should be planned from the beginning of the program.

The recommendations also included the proposal that a SLS Advisory Committee be convened, to be resourced by the Mental Health Department and co-chaired by the Board President and a leader from the field of education, for the purpose of developing a plan to be completed and presented to the Board of Supervisors before the end of 2011.

The SLS Advisory Committee convened in April 2011 and continued over a series of monthly meetings held from April through November 2011, co-chaired by President Cortese, Supervisor George Shirakawa and Superintendent Dan Moser, East Side Union High School District, and staffed by the Mental Health Department. The final Plan was reviewed multiple times by committee members, resulting in the draft presented below.

History of School-Linked Services in Santa Clara County

The original SLS program in Santa Clara County was designed and implemented in 1994-95 in concert with Healthy Start grants secured by local schools. A primary goal of this program was to prevent violence and a strong focus was on creating and maintaining an environment that is safe for students, staff and the surrounding community. This goal has been maintained in the City of San José's Safe School Campus Initiative. It is supported by the City's Department of Parks, Recreation and Neighborhood Services, Youth Intervention Services, San José Police Department Community Services Division, Santa Clara County Probation Department and District Attorney's Office. It utilizes multi-disciplinary teams which are trained in the prevention, identification and control of juvenile crime. Staff includes a Police School Liaison, Community Coordinator, and Youth Outreach Worker.

It was envisioned that the SLS program would implement a comprehensive system of health and human services linked with schools as a cross systems, school-based, best practice program, financed by multiple funding streams. The sustainability plan assumed a strong level of billing to balance the use of general funds. The three tiers of programming included various levels of community-based organizational activity and the partnership of non-County health care providers.

The early SLS program was implemented as a cross-systems program with representatives from multiple County departments serving at each school site with

different constellations of service providers, i.e. health, mental health, public health, social services, and alcohol and drug services, depending on the particular needs of the school and the surrounding community. The school sites were chosen based on the identification of Child Poverty Zones and clusters of risk factors that indicated high student and family need.

Over time, the program shifted and became located in one County department, and the funding streams narrowed. At the stage of discontinuance, it was primarily a County General Fund program and so became a casualty of the harsh budget reduction process of the last several years.

Many of the SLSAC representatives had participated in the original program, so the historical information became an important aspect of planning for the proposed SLS model.

The School-Linked Services Planning Process

The School-Linked Services Advisory Committee (SLSAC) was convened by Supervisor Dave Cortese, along with co-chairs Supervisor George Shirakawa and ESUHSD Superintendent Dan Moser. It consists of a 27+ member, broad-based group of community leaders and representatives of education and school administration, law enforcement, juvenile justice, behavioral health, social services, youth-serving programs, children's advocates, the faith community, public officials, and many others.

Members of the public have attended all the meetings and their participation was welcomed in all discussions and deliberations, including the "break-out" sessions which typically occurred at each meeting. Over the course of the initial SLS planning meetings the SLSAC began to outline the framework for the SLS plan, beginning with the articulation of a charter, vision, aim, and

plan, beginning with the articulation of a charter, vision, aim, and values statements, in addition to the SLS tenets outlined by former SLS departmental leaders.

Early meetings reviewed what worked with earlier versions of SLS, what should be retained, and what has changed since the mid-1990's. Between meetings, the Mental Health Department staff completed the research, meeting and speaker arrangements, produced the informational materials, and maintained the communication links between the SLSAC members, staff and the public.

SLS Charter

To convene a time-limited School-Linked Services Advisory Committee (SLSAC) to develop a plan to improve health, behavioral health, and social services provided to school-aged children in Santa Clara County.

SLS Aim

To improve the accessibility, efficiency and outcomes of multi-agency services provided to children in Santa Clara County schools through improved coordination, design and implementation of services provided by schools, public agencies and community-based organizations.

The following are some of the comments made by SLSAC members about past SLS efforts.

SLSAC Perspectives on Past SLS Efforts

What was great about SLS? What were the fundamental elements of success?

- Teachers were engaged; services were coordinated; school staff was trained to see problems and refer for assessment
- Probation officers were on school ground; wraparound services were available; dialogues between functions
 were ongoing; there was flexibility in functions; adult role boundaries were blurred.
- There was an emphasis on restorative justice
- · Concerns were with the holistic health of students, including all factors that affect school success
- Support groups on campus were phenomenal
- Families viewed schools as safe
- Schools were eager for the services

What did not work?

- · There was insufficient sustainability planning, not just in funding, but in skills and ownership
- There was a need to braid funding
- There was little or no outcome data, only anecdotal success stories
- Coordination required more time and resources to do well

Concerns and Outcomes Desired of a New SLS Model

SLSAC participants identified key concerns related to children, families, schools, community, and the service systems. Subsequently, they selected the issues they considered to be of greatest seriousness that must be addressed through the new SLS initiative. The overarching concern expressed by the large majority of those who participated in the exercise was "low expectations, resignation, and hopelessness". Members voiced deep concerns that our children and youth are losing hope about what life has to offer them. This concern was felt most deeply for children of color and those living in impoverished and high risk neighborhoods and where families and communities are most burdened with the stress of risk factors that arise when resources are scarce or non-existent, and opportunities for positive change are diminishing.

The following table summarizes the concerns that SLSAC members consider a priority focus for the SLS Plan.

Needs/Concerns School Linked Services Should Address				
For the Children and Youth	For their Families			
Low expectations, resignation, hopelessness	Lack of self-sufficiency			
Behavioral and emotional challenges	 Distractions of Substance abuse 			
Lack of school engagement	 Incidents of child abuse/domestic violence 			
Readiness to learn when they start school	 Lack of stable housing/multiple moves 			
Exposure to trauma	 Stress of immigration 			
Substance use/abuse	 Involvement and participation in schools 			
Risk of juvenile justice involvement	 Cultural welcoming and relevance 			
Health/obesity/chronic diseases	 Poor access to healthy food and healthcare 			
Pregnancy	 Lack of capacity to influence schools and services 			
Learning disability				
Child welfare involvement				
For their Schools	For their Communities			
Teacher emotional/social development competency	 Lack of faith and broader community involvement 			
Parent involvement	 Child safety 			
Suspensions and expulsions	 Disparities in access to healthy food/ healthcare 			
Violence on campus	 Poor access to recreation, sports and cultural events 			
Attendance	 Exposure to community violence and crime 			
Graduation rates				
For the Systems that Serve Them				
Lack of accessibility to services				
Lack of cultural competency				
Disproportionate ethnic/racial representation				
Disproportionate ethnic/racial representation				
Lack of family involvement				

As the table shows, SLSAC identified critical concerns in multiple dimensions of the social ecological systems that touch children, revealing a collective view of need that is complex and multi-faceted, with issues faced by the child, his/her family, the surrounding community, and the service delivery system. Additional comments are provided below, made by participants during this session, offering further illustration of the issues that SLSAC members are concerned about:

Additional Concern Statements Expressed by SLSAC Members

- There needs to be more continuity between programs serving middle school students and high school students. Yout who received services in middle school should be flagged for screening and assessment when they reach high school to determine if they have continuing unmet needs;
- More attention should be paid to capacity building for parents and the involvement of churches and the faith community;
- The discontinuity of services for students during the summer school break should be addressed;
- Special effort may be needed in some schools to overcome negativity as a result of previous experiences, such as utilization of unskilled and inexperienced interns, high turnover of interns and staff, etc.;
- It may be necessary to modify the models selected for SLS based on the differences and differing needs of the various areas in the county;
- The plan should include the availability of flexible funds to meet the specific needs of children and families, such as the high cost of participating in extracurricular activities—a positive alternative to gang membership and other delinquent behavior;
- If SLS staffing is accomplished by redeployment of existing staff, from where will they be moved? The plan should address that;
- Safety and safe neighborhoods are a big issue;
- Structure is needed for SLS;
- Asset mapping should be a part of the process;
- The SLS governance needs to agree on a threshold of features;
- There needs to be "buy-in" at the superintendent, school board and principal/school levels;
- Parents, youth, the Latino community and others potentially affected by SLS should be asked how they feel and what they want;
- Overrepresentation of Latino and African American youth in the juvenile justice and child welfare systems must be addressed by this initiative;
- The planning groups should have more representation from the faith community;
- There should be more emphasis in the selected SLS model on parent involvement in school planning, parent education and capacity-building;
- A broader range of community-based organizations need to be brought into the current collection of County-contracted service deliverers.

Parent and Teacher Perspectives

In response to SLSAC members' desire for parent and family input about needs and concerns that should be addressed by the SLS Plan, the staff team conducted focus groups with approximately 30 Latino parents and facilitated focus groups and meetings with school and community representatives from the four high need planning regions that were involved in the Mental Health Department's Prevention and Early Intervention (PEI) "Strengthening Families" project. This input is not intended to provide a thorough solicitation of feedback from the community as the model proposed emphasizes that each school in SLS needs to engage families and neighboring communities in providing input as to what concerns are most pressing in a particular school and community. Nonetheless, it does provide insight as to how education staff and families may think about the needs of children and their experience in school settings.

Representatives from two high schools and one middle school provided the following input:

Comments on resource conditions

- Due to budget cuts, school principals are overloaded and preoccupied with budget and personnel issues
- Administration of new projects and initiatives, no matter how desirable, are not an option due to current demands on school personnel
- Times are nothing like they were when earlier SLS efforts were in place
- The Multi-Service Team (MST) coordinator function to manage referrals from teachers and link to various service providers is stretched at best or non-existent
- Counselors and educational support staff are greatly reduced
- Teachers do not have the time or bandwidth to address the multiple student concerns that they encounter in their students

Ideal SLS conditions

- Sustained long term focus to achieve real change
- Dedicated on-site service coordination staff to manage provider services
- Emphasis on adaptability of services to particular needs of the student population; service needs to be tailored to school needs
- Engagement and inclusion of parents and attention to family issues
- Non-stigmatizing age and culturally appropriate strategies to engage kids
- Ability to serve all kids and not just those who "qualify" (one stop for all)

- Services need to be integrated rather than provided by multiple agencies that provide different types of "counseling" services
- Effective strategies to insure good communication with school personnel and support services
- Training for all (parents, students, teachers, school personnel)

Comments from Latino Parents Focus Groups

Overall impression about this SLS idea

- Parents are unaware of the SLS planning, but believe it is a good idea
- They are concerned about their children receiving equal access to these services

Services students need most at school

- Academic assistance
- Physical and emotional safety
- Counseling

Top issues parents face at all school levels

- Teachers and school officials often do not speak Spanish; are often "short" with parents, responding that their children are "doing fine," later finding out that their children were failing academically and falling behind, then get sent to a continuation school to catch up on credits
- Losing their homes and needing to change schools
- Unable to help them with homework

Top issues students face at the elementary level

- Language barriers
- Kids need more individual help
- Hurtful words by other children

Top issues students face at the middle school level

- Peer pressure to go against their own values
- Gangs
- Bullying

Top issues students face at the high school level

- Insufficient college guidance counseling, (i.e., financial aid options, undocumented options)
- Stress to help family financially
- Babysitting responsibilities

Recommended solutions

- More teacher and parent communication
- Parents need interpreters available at all the school sites
- School staff needs cultural sensitivity training

Solutions recommend to teachers and principals

- Meet with each student's family
- Match students with a classmate who can work with them and assist them academically
- Find a school staff person to interpret, and write down the resolution on paper so both parents and schools can sign about what each commits to do
- The school should also offer counseling and conflict resolution among students, instead of simply suspending or expelling students from school

Review of Promising Models of SLS

The next step in the SLSAC planning process involved a review of current models of school-based and school-related services being provided in Santa Clara County. The review included presentations by local districts and providers as well as review of available related literature about the models. The models are briefly described below. More detailed information is available here.

1. SLS Pilot Programs (Mental Health Services Act Prevention and Early Intervention Project 2)

The MHD is embarking on a project funded through the Mental Health Services Act (MHSA) called "Strengthening Children and Families". This project will implement prevention and early intervention programs in four highly targeted, high-risk areas of the county called Investment Communities. The MHD identified zip codes with the highest rate of ten key mental health risk factors such as poverty, graduation rates, mental health and substance abuse utilization. It then grouped these zip codes into four Investment Communities. Planning Teams of community members selected by the community convened to develop implementation plans for each region. Each Investment Community will receive a share of funds based on need and number of children. The strategies that are focused on children and families include: 1) intensive, direct interventions for parents and children to address severe, emerging behavioral and emotional problems and depression resulting from trauma; 2) direct therapy and support for the whole family when a child is experiencing severe emerging behavioral and emotional problems; 3) focused prevention and early intervention strategies for parents, teachers and students in school settings to enhance protective factors and decrease risk factors; and 4) a program for parents, especially of young children and pre-teens, to improve parenting skills and provide support for emerging behavioral needs.

2. School-Based Services Pilot Programs

To immediately start addressing the needs of schools and students, the County and its education partners implemented three 18-month (January 1, 2011 through June 30, 2012) pilot projects in the Investment Communities. The primary goal of the pilot programs is to address students' socio-emotional issues through early mental health interventions. A secondary goal is to use lessons learned from the pilot programs to develop recommendations on how to increase effective and sustainable health, behavioral health and social services for school-aged children.

The Santa Clara County Office of Education (SCCOE) was funded in this Pilot program to outreach to partner school districts and to implement universal prevention strategies through School-Wide Positive Behavior Supports (SWPBS). SWPBS is an evidence-based approach to helping school-aged children achieve academic success and appropriate social development. Effective implementation of SWPBS, as a universal prevention program, lays the foundation for effective implementation of and reduced need for selective prevention and early intervention programs.

The San José Unified School District (SJUSD) is offering selective prevention services designed to help at-risk students address minor behavioral and emotional problems by improving skills and reducing risky behaviors. Early intervention services are offered to students who are exhibiting the early signs and symptoms of behavioral and emotional disorders, including depression and anxiety. Intervening early with low-intensity therapeutic services can help students rapidly overcome their problems and avoid unnecessary suffering.

The East Side Union High School District (ESUHSD) is offering selective prevention and early intervention mental health services similar to the services offered in San José Unified. These interventions are being offered in schools that have not yet implemented SWPBS. In this approach, secondary and tertiary interventions are implemented first so that students who would be identified as needing additional services have access to them. Proponents of SWPBS often recommend implementing the more intensive interventions first in order to avoid "identifying" needs, but not being able to address them. For this pilot program, ESUHSD decided to provide targeted services to at-risk incoming 9th graders and their families.

3. Safe School Campus Initiative

Known as the Safe Schools Campus Initiative, Multi-Disciplinary Team (MDT) model, this model is a collaboration of the City of San José's Department of Parks, Recreation and Neighborhood Services, Youth Intervention Services, and Police Department Community Services Division, Santa Clara County Probation Department and District Attorney's Office. Schools utilize safety officers to achieve the models primary purposes of reducing youth violence and creating and maintaining an environment that is safe for students, staff and the surrounding community. It features three levels of response by a police school liaison, community coordinator, or youth outreach worker.

4. Coordinated School Health

Presented by Brenda Carrillo, Student Health and Safety Coordinator for the Santa Clara County Office of Education (SCCOE), the aim of this model is to comprehensively address student health and related needs in order to benefit student learning and well-being. Provided on the school campuses, Coordinated School Health includes eight key components: health education, family and community involvement, healthy school environment, physical education, nutrition services, health promotion for staff, psychological and counseling services, and health services. (Please click here Coordinated School Health for further information.) The model requires strong involvement of administration, school health councils, staff, students, families and community. The outcomes include improved school performance and test scores, positive behavior, attendance, physical fitness, positive school culture, staff morale, and sustainable system changes.

5. Positive Behavior Interventions and Supports (PBIS)

Presented by Lisa Pruitt, Program Director of District and School Support Services at SCCOE, this model focuses on improving academic and behavioral outcomes by implementing a framework to guide selection, integration and implementation of academic and behavioral practices. Multi-level efforts are conducted at all grade levels. (Please click here PBIS for further information.)The model addresses social culture and school climate and establishes behavioral expectations. To utilize this model, training is provided by the SCCOE to all school staff. PBIS is currently being implemented in 20 SJUSD schools. Outcomes include reductions in expulsions, suspensions, and discipline referrals, reduced involvement in the juvenile justice system, increased attendance, enhanced school connectedness, and improved staff morale.

6. Franklin-McKinley Children's Initiative

Strongly influenced by the Harlem Children's Zone (click here <u>Harlem Children's Zone</u> for further information), this model was created and initiated by the Franklin-McKinley School District (FMSD) in one of its neighborhoods of highest need. The aim is that all children in the targeted geographic area will graduate from high school as a result of the establishment of a continuum of collaborative "cradle to grave" child and family supports.

Presented by Dr. John Porter, Superintendent of the FMSD, and Marybeth Affleck-Nacey of Catholic Charities, this model is a focused, block by block intervention strategy. Its aim is to adopt and implement a unifying system of learning supports (a comprehensive, continuum of family and child assistance) and management supports (governance, resources and operations) to improve children's success in schools. To achieve this, new systems of collaborations among government, schools and the community are required, and success depends upon the shared commitment and efforts of schools and community agencies. The model is structured around three work groups, self sufficient families, safe neighborhoods, and education cradle to career.

7. Redwood City Community Schools (UCLA model of Learning Supports)

This model, presented by Sandra Portasio, is a collaborative of schools, the community, and local agencies and is modeled after the UCLA Model of Learning Supports (click here UCLA for further information). It focuses on the adoption and implementation of a unifying system of academic learning and learning supports (a comprehensive continuum of family and child supports) and management support (governance, resources and operations). Its design is based on three primary elements, partnerships, shared leadership, coordination and integration. Its strategies include immigrant integration and community building, (including local leadership development and direct public engagement), health promotion (including daily physical activity and access to nutritious food), and youth development (including youth-adult partnerships, extended learning, tutoring and academic support, counseling and family engagement). It utilizes a continuum of evidence-based strategies such as family engagement (parent leadership, parent education, parent volunteerism), extended learning (afterschool activities, youth leadership opportunities), and support (counseling, family assistance).

III. Rationale: Why Link Schools and Services

There are many determinants – economic, social and institutional – that impact children's health and well-being, and their ultimate success in school. These determinants include poverty and economic self-sufficiency, hunger and food insecurity, housing and neighborhood conditions, homelessness, discrimination and immigration.

Children do not leave their family's burden at the door when they arrive at school. While teachers, administrators and other staff strive to address the needs and issues students bring to school, shrinking financial resources, larger class sizes and reductions in the number of counselors and school nurses, make it is increasingly difficult to create an educational environment that welcomes them and supports them to do well in school and at home. "School systems are not responsible for meeting every need of their students. But when the need directly affects learning, the school must meet the challenge."
Carnegie Council on Adolescent Development (1989)

There is a great deal of literature that supports the need for a stronger relationship between education and public child-serving systems in order for each to achieve their separate and distinct mandates and goals. Success in learning is closely tied to a child's emotional well-being and family's self-sufficiency and stability. Creating partnerships between the school, social service agencies and community based organizations presents an opportunity to serve the broader needs of families and communities by connecting families with needed resources, supports and services before a crisis arises which may impact a child's educational trajectory.

Joining Public Missions: The Imperative of School-Linked Services

At the center of the rationale for the value and importance of School-Linked Services are four key factors:

- Education and child-serving systems serve common children and families;
- The two systems hoped for outcomes are dependent on the success of one another;
- School-Linked Services offers opportunities to leverage financial and community resources, to engage families in more meaningful ways; and
- School-Linked Services offers opportunities to improve the collective efforts of these systems as an example of the total being greater than the sum of its parts.

School-Linked Services represents a joining of the public missions of school districts and the county in order to benefit children and families in need. In addition to addressing system-related obstacles and weaknesses through more formal collaboration and service delivery, these services will also respond to increasing socio-economic challenges and burdens faced by many families in Santa Clara County.

A Comprehensive Intervention Framework for Equal Opportunity for Success in School

Recent work by the Center for Mental Health in Schools at UCLA provides the theoretical and research-based construct for the School-Linked Services approach. The following is an excerpt from a February 2011 <u>policy brief</u> entitled: "Moving beyond the Three Tier Intervention Pyramid toward a Comprehensive Framework for Student and Learning Supports."

"The evolving intervention framework generated by our Center's research (a) conceptualizes levels of intervention as a full continuum of integrated intervention subsystems and emphasizes the importance of weaving together school-community-home resources and (b) organizes programs and services into a circumscribed set of arenas reflecting the content purpose of the activity. In keeping with public education and public health perspectives, the intervention framework encompasses efforts to enable academic, social, emotional, and physical development and to address behavior, learning, and emotional problems in the classroom and school wide at every school and in every community."

... As one facet of establishing, over time, a comprehensive, multifaceted, cohesive approach, we conceive a continuum of interventions that strives to:

- *Promote healthy development and prevent problems*
- Intervene early to address problems as soon after onset as is feasible
- Assist with chronic and severe problems.

Addressing Institutional Determinants Impacting Child and Family Health and Well-Being

In the forward of Toni Morrison's novel, The Bluest Eye, she writes, "The death of self-esteem can occur quickly, easily in children, before their ego has "legs," so to speak. Couple the vulnerability of youth with indifferent parents, dismissive adults, and a

world, which in its language, laws and images, re-enforces despair, and their journey to destruction is sealed."

Research has shown that external causes such as racism, discrimination, lack of opportunity and/or inappropriate service models or modes of delivery have significantly contributed to unequal contact of some groups with the justice and dependency systems.¹ This has been a topic of long-standing concern by Santa Clara County government. It has a Disproportionate Minority Contact Work Group that functions as a part of its Juvenile Justice System Collaborative. Similarly, the Social Services Agency prepares an Annual Report on Disproportionality of Children of Color in Child Welfare. Both have found that "disproportionate minority contact" with juvenile justice and child welfare systems remains a significant problem, even after nearly 20 years of federal, state and local attention.

A persistent correlation has been found between poor academic performance and delinquency. Santa Clara County Judge Margaret Johnson, who for many years served on the Juvenile Justice Court bench, noted that virtually all youth who came before her in court had failed in school and been expelled or dropped out, with the exception of a small number who were in alternative schools. Seconding this observation and confirming the importance of school participation as an antidote to criminal involvement, Juvenile Justice Court Presiding Judge Patrick Tondreau once noted that "A community cannot arrest its way out of delinquency."

Structural and Transformative Systems Change

The Probation Department's aggressive efforts to address the disproportionate representation of children and youth of color began in 2002 through Juvenile Detention Reform (JDR). Under JDR, decision-making in the Probation Department became more objective and a collaborative decision-making process became the standard practice. However, despite the efforts made through JDR, data analysis shows that youth of color continue to be disproportionately represented in the juvenile justice system in Santa Clara County.

Latino youth and African American youth represented 31% and 2.94%, respectively, of all youth in Santa Clara County, according to 2009 California Department of Finance reports. However, in the same year, Latino youth ages 10 through 17 made up 62% of all juvenile arrests in Santa Clara County and 70% of all juvenile hall bookings. Furthermore, African American youth made up 8% of arrests and 11% of all bookings in FY09.

Latino youth arrests rose from 9,709 to 12,741 between FY 05 and FY 09. The Relative Rate Index data showed that Latino youth were three times more likely to be arrested while African American youth were six times more likely to be arrested than Caucasian youth. Data also showed that both African American and Latino youth were twice as likely to be committed to Juvenile Hall, the ranches, or the California Department of Juvenile Justice.

In 2009, a study was commissioned by La Raza Round Table to assess whether a consensus building process is needed to more effectively address Latino overrepresentation in the justice and dependency systems in the City of San José and Santa Clara County. Titled "Conflict Assessment Regarding Latino Overrepresentation in the Criminal Justice, Juvenile Justice and Juvenile Dependency Systems within San Jose and Santa Clara County, it is locally referred to as "The Harvard Study" (please click on link for full report). The process it recommends is designed to build capacity of participating stakeholders to reach consensus on transformative, multi-systems structural change by training participants to use principled, interest-based negotiation skills for successful collaboration. To date, the facilitated consensus building process has been utilized in a number of departments, including the San José Police Department, the Social Services Agency, and the Probation Department. Additional participants include leaders from the County, City of San Jose, Superior Court, the Diocese of San Jose, state legislators, and local educators. The consensus process has been a significant contribution to the variety of deliberate efforts of the County to address disproportionate contact of disadvantaged children and children of color. Further, its framework of conflict resolution has contributed to the planning of School-Linked Services.

In March 2010, the Probation Department's Disproportionate Minority Contact Work Group began meeting. In December 2010, the first focus group was held with parents of the East Side Union High School District to present the ABC's of juvenile justice and to hear the priorities of juvenile justice involved youth and families. Approximately 22 participants attended the focus group. The primary concern expressed by the parents was the lack of availability of services for youth and families before the youth are arrested.

Similarly, the Social Service Agency, Department of Family and Children's Services (SSA/DFCS) has employed multiple approaches to eliminate bias-based disproportionality since 2003. In 2007, SSA/DFCS adopted the first "Plan to Address Ethnic Disproportionality in Child Welfare Services" and pledged to submit updated plans annually. In 2011, the NAACP and other individuals and organizations have

worked with the Santa Clara County Social Service Agency on its Cultural Dialogues series and Best Practices Committee, as well as in focus groups that were a part of an Institutional Analysis of factors affecting placement stability and permanency for youth in long-term foster care, with specific focus on African American children and youth.

SSA/DFCS has been making meaningful progress. In February 2011, 1030 children were in out-of-home care, a 61% drop in 11 years. While reasons for this decline are various, many credit an emphasis on finding alternatives to children entering the child welfare system in the first place, such as the Differential Response Program. Similarly, SSA/DFCS has been making significant strides in reducing racial bias disadvantageous to African American and Latino families in decision-making that led to entries to care.

However, much work remains to be done. For example, an analysis of last year's data show:

- Cases for African Ancestry and Latino children overall appear to remain open longer than those of otherwise similar White children. Duration seemed to be longer for African Ancestry children across all allegation types. Latinos experienced longer durations than Whites for most allegations except for Caretaker Absence and Emotional Abuse. Asian children experienced shorter durations than all other groups, including Whites.
- African Ancestry children removed at early ages have longer placement episodes consisting of more placement changes, which is an indicator of lack of placement stability.
- African Ancestry children are more likely than all other groups to end their placement episodes in guardianship, whereas White and Latino children were more likely than African Ancestry and Asian children to end placement episodes through reunification or adoption.

Some sociologists have stated that disproportionate representation of a racial/ethnic group in justice and child welfare systems is principally caused by internal factors or a deficit model of the Latino or African-American family, thereby indicating the type of neighborhood (crime/gang activity), poverty, family structure, or educational deficiency of parents.

However, critical research has shown that external causes such as racism, discrimination, lack of opportunity, glass ceilings due to the structural order of society and/or inappropriate service models or modes of delivery have significantly contributed to disproportionate contact.ⁱⁱ The former, based on internal causation, effectively blames and alienates the relevant child, family, or community, while the

latter, based on systemic failures, often fosters a non-creative, defensive environment among service providers.

Institutional policies and practices that negatively impact child and family well-being are difficult to confront and change. The proposed School-Linked Services model must have as its foundation, family and community engagement, active dialog and participatory decision-making to address those institutional practices that undermine the capacity of children to succeed in school and in life.

Trust among parents, education and service system participants must be embraced as paramount in the new SLS model. Both education and service system stakeholders must be willing to examine and address policies that interfere with children and families feeling welcomed and supported to succeed. Successful partnerships and responsive services through School-Linked Services must be navigated with sensitivity and appropriate skills such as those outlined in the Harvard Study Assessment of Santa Clara County.

Addressing Socio-Economic Challenges in Santa Clara County

Inequities related to social and economic status or racial, ethnic, and sexual identity can create devastating problems for children. For example, the income gap between rich and poor has grown over the past 20 years, clearly contributing to growing social problems. More Americans than ever before are poor. The U.S. poverty rate of 15.1% is the highest it has been since 1993, and middle-class incomes have fallen to their lowest point since 1997. As a result, parents who are struggling to make a living may find it difficult to spend time with and actively champion their children's positive development. Many are working long hours or juggling time demands of more than one job. A lack of English fluency, insufficient education and job skills, the high cost of living, and unavailability of affordable dependent care for children and elders are just a few of the daunting barriers that often complicate the task of parenting for many Santa Clara County residents.

Poverty and Economic Self-Sufficiency

Income is an important determinant of the health and well-being of children and families. Those with more income have easier access to resources that promote better outcomes, including access to insurance and preventive health care, nutritious food, safe housing and nurturing neighborhoods. Those living in poverty face a number of

hardships and low-income children are more likely to suffer poor health affecting their ability to do well in school. iv

Hunger and Food Insecurity

Food insecurity and hunger are strongly associated with many negative outcomes for children, including:

- Maternal depression that has an impact on a young child's social-emotional development,
- Susceptibility to illness and infection;
- Increased school absences, repeating a grade, suspensions and higher rates of tardiness;
- Depressive disorders and suicidal behaviors in teenagers;
- A greater likelihood of dropping out of high school;
- Greater rates of overweight and obesity.

Housing and Neighborhood Conditions

When considering housing and neighborhood conditions in Santa Clara County, there are five major areas of concern: lack of affordable housing, overcrowding, foreclosure and homelessness, neighborhood safety and crime. According to the Public Health Department, "Lower-income families who are persistently exposed to poor living conditions have higher odds of suffering from serious illness." Poverty is usually at the root of poor living conditions. Poor living conditions include structural problems, pest infestations, mold and toxins in the home, overcrowding and noise. Additionally, residents living in low-income areas are more likely to be exposed to the harmful effects of pollution in their neighborhoods. Crime and other safety concerns also impact a child's sense of well-being and his or her ability to get exercise by playing in neighborhood parks or walking to school.

Homelessness

Children in families experiencing homelessness show high rates of acute and chronic health problems, missed days in school and changes in schools, and sometimes, effects from exposure to violence. In addition, homeless children are more likely to have emotional and behavioral problems than children with consistent living accommodations. Among Santa Clara County homeless school-aged children identified in the 2011 Census and Survey, 6.4% are not in school. Of those in school, likely many arrive hungry. It may be that the free school lunch becomes their only meal of the day. Sometimes students starting the day without adequate nutrition become inattentive and

anxious. In turn, they may be disciplined for their lack of focus and labeled as trouble makers or they may become quiet and withdrawn.

Race and Ethnicity

Santa Clara County is one of the most ethnically diverse and culturally rich counties in the nation. As of the 2010 Census children in Santa Clara County are:

- 35.5% Hispanic
- 29.3% Caucasian
- 27.8% Asian
- 4.9% multiracial
- 2.1% African American
- 0.3% Native American

America's history of racial discrimination continues to have an impact in Santa Clara County, as evidenced by disparate outcomes for children of Latino and African-American heritage in our education, child welfare and juvenile justice systems. Potential barriers can appear early and can be found in the following sets of data:

- Differences in early access to prenatal care and children getting their immunizations on time.
- Differences in access to health care and quality early care and education.
- Differences in access to early developmental screening which can help identify learning and developmental issues.
- Attendance at schools with fewer financial resources, leading to increased class sizes, less access to state of the art educational materials and less access to other supports that enrich learning.
- Fewer opportunities for extended learning experiences after school and in the summer.
- Teachers unprepared to address the different learning styles that children from varied backgrounds bring to the classroom.
- Families who are unable to or don't know how to engage in their children's school experience.
- Higher rates of suspension of Latino and African American children than other children, starting as early as Kindergarten and the primary grades.

- Higher rates of reported harassment: according to the California Healthy Kids Survey, 18 percent of ninth graders reported harassment on school property at least one time in the previous 12 months related to race, ethnicity or national origin.
- Higher high school drop-out rate: the overall adjusted, four-year derived drop-out rate for Santa Clara County students is 14.4 percent; 24.3 percent of Latino students and 20.5 percent of African American students drop-out, while only 8.3 percent White and 5.4 percent of Asian students drop out.
- Failure to complete required coursework to enter the UC/CSU system (countywide, 48.9 percent of graduating students complete the coursework. 31.8 percent of African American students and 29.6 percent of Latino students complete this coursework, while 70.8 percent of Asian students and 57.1 percent of White students complete the requirements.

Immigration

U.S. Census data indicates that 36.8 percent of Santa Clara County residents were born in other nations and the public schools report that 25.9 percent of enrolled children are English language learners. Immigrant children are more likely to live in poverty, forgo needed medical care, drop-out of high school and experience behavioral problems. In "Immigrant Children" published in spring 2011 by The Future of Children (Princeton Brookings) it is noted that "on most social indicators, children with immigrant parents fare worse than their native-born counterparts."

Immigrant families face many risks. The migration itself may separate parents from their children. Many immigrant families have mixed legal status and unauthorized parents may be fearful of deportation and unwilling to seek public benefits to support their children. Mixed legal status can also mire families in poverty and perpetuate unstable living arrangements.

Violence, loss and separation experienced in the country of origin may also result in trauma that influences the children and adults in the family and lead to behavior issues. Last, considerable public debate related to immigrant health care, work policies, college attendance by students who are not citizens (but who have lived in the United States since they were young) and English-only laws can heighten the sense of threat felt by many immigrants, poverty and factors related to poverty have been demonstrated to have a profound impact on a myriad of social and health issues. Parents who are struggling to make a living may find it difficult to spend time with and actively champion their children's positive development. Many are working long hours or juggling time demands of more than one job. A lack of English fluency, insufficient

education and job skills, the high cost of living and unavailability of affordable dependent care for children and elders are just a few of the parenting challenges.

Key findings from research conducted by the National Center for Children in Poverty (NCCP) describe a relationship between low family income and family stability. Findings show higher risk factors such as depression, substance abuse and domestic violence. NCCP recommends promising strategies that include integrating family support systems, early childhood education, substance abuse prevention and mental health services. Viii

Abuse and Neglect

Child victims of abuse or neglect or children who have witnessed violence in the home are more likely to suffer from depression, suicidal thoughts, substance abuse, and learning and behavioral difficulties in school. They are also more likely to commit crimes, mistreat their own children and become involved in domestic violence as adults. Recent neuroscience research reveals that physical abuse and neglect dramatically affect the structure and chemistry of the developing brain. Separation from the primary caregiver can also be traumatic for a child under the age of six, resulting in difficult decisions for social workers and others who have the responsibility to protect children who may be abused or neglected.^{ix}

Once children enter the foster care system due to abuse and/or neglect, national education statistics indicate that many will experience significant educational challenges:

- Less than 50 percent of foster students obtain a high school diploma;
- 30 to 50 percent of foster students receive special education services;
- 50 percent of foster students are retained a grade; and
- Less than one percent of foster students receive a four-year college degree.

In addition, foster youth in out-of-home care in 7th grade are at least two grade levels behind their same-aged peers, which is due in large part to their high rates of transiency. Research has consistently demonstrated that students who change schools are four to six months behind academically, each time they transfer schools.^x

Differential response has been one successful strategy in Santa Clara County, contributing to the 54 percent decrease in the rate of substantiated cases of child abuse (from a rate of 7.2 per thousand children in 2005 to 3.3 per thousand children in 2010).

Differential response strives to provide interventions and supports that prevent family stress and other issues from rising to the level of abuse. By differentiating the level of risk among families, community-based services can be provided to at-risk families without further involvement by DFCS.

Violence and Trauma

In recent years, there has been a growing understanding of the impact that exposure to violence and trauma can have on a child's development and well-being. The biological effects of trauma could be one reason why many children in the child welfare system have behavioral and learning problems. Studies such as the Adverse Childhood Experiences Study (ACEs) show "that stressful or traumatic childhood experiences such as abuse, neglect, witnessing domestic violence, or growing up with alcohol or other substance abuse, mental illness, parental discord, or crime in the home, are a common pathway to social, emotional, and cognitive impairments that lead to increased risk of unhealthy behaviors, risk of violence or re-victimization, disease, disability and premature mortality."xi More than a third of all adults in Santa Clara County report that crime, violence and drug activity are a problem in their neighborhood and that it is causing them fear and stress.xii

Substance Abuse

A substance-abusing environment can significantly affect children's behavioral, emotional, and cognitive functioning. They often exhibit low self-esteem, a sense of shame and poor social skills. Many children who live in substance abuse homes exhibit attachment disorders, which occur when parents or caretakers fail to respond to children's basic needs or do so unpredictably. Symptoms of attachment disorder include the inability to trust, form relationships and adapt to change.

Nationally, substance use by children is being reported at increasingly younger ages. Approximately 85 percent of adults in need of substance abuse treatment started their use in adolescence. Within Santa Clara County:

- 5.4 percent of 5th graders had consumed alcohol within the previous month (2006). Among seventh graders, alcohol use within the previous month increased to 9 percent.
- Marijuana use four or more times a month by 7th, 9th and 11th graders increased from 8.8 percent in 2003 to 13.2 percent in 2006.

• Use of other drugs (cocaine, methamphetamine, psychedelic drugs, sedatives and PCP, at least once) by 7th, 9th and 11th graders increased from 6.6 percent in 2003 to 17.5 percent in 2006.

Juvenile Justice System Involvement

There is a persistent correlation between poor academic performance, disengagement from school, truancy and delinquency. Engagement in the juvenile justice system is often an indicator of youth struggling with the same issues of poverty, abuse and neglect, exposure to violence and substance abuse. In 2005, nationally known justice expert, Bobbie Huskey conducted an analysis of youth who were detained in Juvenile Hall (JH). She found:

- More than 78 percent reported high levels of trauma leading to post-traumatic stress.
- More than 60 percent admitted to JH in 2004 were identified as having a brain disorder as identified by the Massachusetts Youth Screening Instrument (MAYSI). The MAYSI is used upon entry into JH and is used to screen for bipolar, attention deficit, non-verbal learning and conduct disorders.
- One third of the minors reported having a serious thought disturbance which may be linked to childhood developmental traumas and deficits that impair critical thinking skills.
- Just over 69 percent reported high levels of alcohol and drug problems.
- Nearly 66 percent smoked marijuana in the previous 30 days and 45 percent reported daily use of marijuana. Forty-three percent ingested some form of methamphetamine.
- Youth in the County's JH and Ranches are between three to five grades behind in their reading and math competencies.

Physical and Developmental Needs

Many children may have unaddressed physical problems. For example, according to the National PTA, "It is estimated that more than ten million children (ages 0-10) suffer from vision problems that may cause them to fail in school." A study at UC San Diego has recently pointed toward a link between Attention Deficit Hyperactivity Disorder (ADHD) and vision problems. One of the concerns raised by this study is that the vision problem causes symptoms that could easily be mistaken for ADHD.xiii This new research appears to support numerous optometric studies showing a close connection between vision and

learning. Some studies have shown that a significant age of children with learning disabilities have some type of learning-related vision problem.xiv

Developmental Assets

Santa Clara County's Project Cornerstone identified 41 developmental "assets" that promote youth success and resiliency. These include the children's own values and competencies, as well as positive developmental experiences that provide children with support, empowerment, boundaries, proper expectations and opportunities for constructive use of their time. Among all age groups, youth with the highest numbers of developmental assets engaged in the lowest percentage of risk behaviors. Conversely, those with the lowest numbers of developmental assets engaged in the highest percentage of risk behaviors.

In a survey administered to over 38,000 students in more than 200 schools and 25 districts throughout Santa Clara County, (2011) Project Cornerstone found:

- The average number of assets of students increased from 18.8 to 20.8, higher than the national average of 18.6 assets.
- The percent of youth in the "Optimal Zone" (having 30+ assets) increased from eight in 2005 to 12 in 2011.
- The percent of youth in the "At Risk Zone" (having only 0 to 10 assets) decreased from 15 in 2005 to 11 in 2011.

While progress is being made, we still have too many students who are not in the Optimal Zone and too many in the "At Risk Zone."

Social Emotional Development

Social-emotional development involves acquiring a set of skills children can use to learn from teachers, make friends, cope with frustration and express thoughts and feelings. Important among these skills is being able to:

- Identify and understand one's own feelings
- Accurately read and understand the emotional states of others
- Manage strong emotions in a constructive manner
- Have empathy for others
- Establish and sustain relationships^{xv}

In contrast, when social-emotional skills are undeveloped serious problems can result, such as difficult and disruptive behavior in child care, pre-school, and school. Teachers may find it harder to teach these children and see them as less socially and academically competent. Consequently, teachers may provide less positive feedback. Peers may reject them, resulting in the children receiving even less emotional support and fewer opportunities for learning from their classmates. Faced with rejection by both teachers and peers, children may grow to dislike school and learning, disengage from school and have poorer school outcomes.

Social Isolation and Loneliness

For many children, the outcome of inadequately addressed educational, family or peer problems is withdrawal and social isolation. The resulting loneliness makes these young people vulnerable to victimization. They often feel excluded—a feeling that can be damaging to their self-esteem. Loneliness also has been linked with depression, and thus is a risk factor for suicide, and loneliness and social isolation can play a part in alcoholism and substance abuse.^{xvi} Moreover, early childhood experiences that contribute to loneliness may predict loneliness during adulthood.

Bullying and Sexual Harassment in School

According to the CHKS (2007-2009), 45 percent of Santa Clara County 7th grade students reported being pushed, shoved, hit, etc. at least one time at school in the previous 12 months. Forty-one (41) percent of 9th graders reported that (in the past 12 months) at least one time mean rumors were spread about them.

Sexual harassment is another pervasive problem in America's middle and high schools. According to a very recently released study by the American Association of University Women, during the 2010-2011 school year, 48 percent of U.S. students in grades 7 through 12 experienced some form of sexual harassment.**vii In Santa Clara County, 42 percent of 11th grade students reported to the CHKS that in the previous 12 months sexual jokes, comments or gestures were made to them at least one time.

Lesbian, gay, bisexual, and transgender (LGBT) students are especially targeted and report more bullying compared to heterosexual students. Effects of LGBT discrimination range from self-isolation based on potential bullying, name calling and physical abuse. The result is frequently depression, poor grades and sometimes self-medication and/or running away.

Suicide

Nationally, suicide is the fourth leading cause of death among children between the ages of 10 and 14 years. *viii Suicide is the third leading cause of death among teenagers ages 15-19 in Santa Clara County as well as in the U.S. Of 7th, 9th and 11th graders in Santa Clara County, 16.3 percent reported they had seriously considered and 8.2 percent reported they had actually attempted suicide during the previous year. *xix*

On August 24, 2010, the Board of Supervisors adopted a county-wide Strategic Plan for Suicide Prevention, created by the Suicide Prevention Advisory Committee, a 36 member, broad based, culturally diverse group of professionals, experts, community and family members. The primary objectives are to reduce suicide attempts and deaths; empower residents to identify and refer at-risk individuals to appropriate resources; and improve the quality of life for individuals and their loved ones who are dealing with mental illness.

Increasing School Engagement

The National Center for School Engagement (NCSE) defines school engagement as: "students, their families, and the entire school staff being engaged in active learning at school and school cultures that actively support the best conditions for that learning." It involves school, family and community partnerships working together to promote *attendance*, *attachment* and *achievement*.

"Promoting **Attendance** involves the design and implementation of evidence-based strategies to reduce excused and unexcused absences.

Promoting **Attachment** involves establishing meaningful connections with youth and their families through caring, support, and mutually-defined expectations. It includes developing positive school climates, student-centered instruction, family and community outreach, and student-focused programs and activities that facilitate academic, social and emotional growth.

Promoting Achievement involves ensuring that students have the tools, resources and support to complete coursework, experience academic success, accomplish academic goals tied to students' vision of their future and successfully graduate from high school."

Poor student attendance and truancy have a myriad of causes, many already described in this section. The imperative for School-Linked Services to address truancy and other aspects of students disengaging from school is apparent in the following data points:

- Local truancy rates range from one percent to an alarming 40 percent.
- Truant students are at higher risk of involvement in drug and alcohol use, violence, and gang activity.
- A high proportion of youth crimes are committed during school hours.
- Truancy creates funding problems for schools with poor attendance (loss of ADA state financial aid).
- Habitual truant behavior is the key indicator to dropping out of school: A total of 2,328 students dropped out of middle and high schools in San José during 2006-2007.
- Santa Clara County had a 14 percent overall drop-out rate for grades 9-12 in the 2009-2010 school year.
- Compared to high school graduates, dropouts have higher rates of criminal behavior and incarceration, increased dependence on public assistance, poorer health and higher rates of mortality.xx

Regarding "attachment," on the California Healthy Kids Survey, 13 percent of 9th graders responded "Not at all true" to the statement: "At my school there is a teacher or some other adult who really cares about me. Twelve responded "Not at all true" to the statement, "At my school, there is a teacher who notices when I am not there." Twenty-seven percent responded "Not at all true" to the statement "I do things that make a difference at school."

Research has demonstrated that, second only to family, school is the most important, stabilizing force for young people. School-Linked Services has great potential to improve school engagement and increase attendance, achievement and attachment by addressing the issues that students have that get in the way of attendance, attachment and ultimately achievement by freeing teachers from the task of addressing student health and well-being needs and allowing them instead to focus on what will support student success.

In conclusion, experts point to a variety of factors that contribute to negative outcomes for children and youth. These range from:

- Poverty, hunger, homelessness, harassment, discrimination, zero tolerance policies in schools;
- Living in crime-ridden neighborhoods with higher populations of disadvantaged children and youth;

- Poor system integration and service delivery;
- Lack of available prevention opportunities overall and especially in economically deprived communities; and/or
- Lack of help and guidance for families and, sometimes as a result, lack of family involvement.

Children who are a focus of School-Linked Services are predominantly those who are marked by the consequences of poverty, inequality, social marginalization and discrimination. Until equality of opportunity can be achieved, supportive services are needed to mitigate social, emotional, behavioral, and health manifestations of inequities, which include school failure and delinquency, among others.

IV. The Emerging Plan

Approach and Rationale: Building on Existing Excellence

As a result of the Committee's review of lessons learned from the history of School-Linked Services, its review of current excellent efforts underway in Santa Clara County school, and its review of promising school-related models being recommended by current researchers, a model for the recommended SLS plan began to emerge. First and foremost, the Committee agreed that an effective SLS model must have an essential set of features, which include the following:

- A passionate vision of child developmental and academic success that includes thriving families, schools and communities around them;
- A clear aim to achieve defined goals and measurable success by addressing root child, family, and community needs;
- A unified perspective on academic instruction and support services;
- A robust continuum of culturally and developmentally appropriate supports, from promotion to intensive intervention, that extends out to families and communities and in to students, teachers and administrators and are targeted to identified child and family needs;
- The active engagement of families and surrounding communities in school life;
- A seamless service continuum that breaks down "silos" and eliminates redundancies and lack of coordination in service systems and providers;
- A model of governance that assures sponsorship, resources, stakeholder (family, child, education, provider, and community) engagement and accountability;
- An emphasis on data-informed practices and interventions and measured results; and
- Use of data and a clear evaluation framework to inform effective policy and practice.

The Committee was pleased to learn that great things are happening throughout the county despite extremely difficult financial times. Committee members learned of multiple local initiatives that are implementing many of the above essential elements of the most current "evidence based" strategies that are known to improve both academic achievement and the health and well-being of children and families. The Committee

agreed that the proposed SLS Plan should champion, support, leverage, and spread those strategies that are currently underway and should reward local excellence, maximize current resources, and minimize cumbersome inefficient bureaucratic processes.

The Committee members also agreed that in order for all schools to benefit from the SLS Plan, the SLS Initiative must meet schools where they are. Schools, counties and cities are experiencing tremendous need among their constituents at the same time they are facing tremendous loss of resources. To engage schools with the greatest needs, their need for infrastructure support must be recognized if they are to participate in SLS. The plan must include support for planning, needs assessment, stakeholder engagement, and services. It is acknowledged that some schools already will have more robust strategies in play, while others will be at the beginning of their efforts to achieve improved academic and learning supports. Therefore, our plan must be adaptable to support schools where they are, while insuring a strong commitment to quality and SLS principles. To that end, the Committee is recommending an overall approach to the SLS Plan that includes the following critical features:

Inclusive and Incremental Development – The ultimate objective is to achieve the vision, values and desired outcomes of SLS in every school in Santa Clara County. As long as the minimal requirements established and endorsed by the Implementation Task Force are met, all schools will be engaged. Schools will be supported to start where they are on their path to the SLS vision.

Range of Options –There are multiple, excellent school-linked academic and learning support models being implemented in Santa Clara County. The proposed SLS Plan would encourage schools to select from delineated model elements and would be supported to start with realistic achievable SLS components. Required elements must be selected from agreed upon SLS models and features viewed as reflecting SLS tenets, values, and programmatic quality.

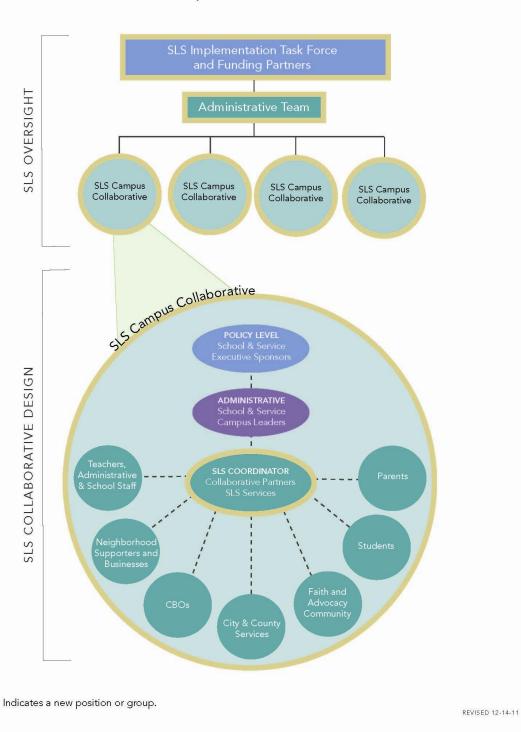
Collaborative Structure – Without formal partnerships and coordination agreements in place, it is clear that SLS efforts will be only minimally successful. At the heart of an effective SLS collaboration is the inclusion of parents, families, and the community. Their voice and concerns must guide the efforts of the collaborative. For support services to achieve desired results, they must be organized within a collaborative structure where education and provider system entities, in collaboration with families and community supporters, form partnerships to implement SLS models of services on school campuses.

Resources – Resources for SLS will come from funding organizations that join the SLS Initiative, referred to as Partner Organizations. Initial Partner Organizations will pledge existing or new resources to the SLS Initiative and will align those resources with identified SLS needs and concerns. Active recruitment of additional public and private funding partners will be an important function of the governance body of SLS. The resources that will be made available to participants in the SLS Initiative will include funded support services such as child and family counseling, parenting classes, benefit assistance, crisis intervention, health screening and medical services, tutoring and mentoring support, and health prevention and education. Technical assistance in the area of needs assessment, collaborative development, family engagement, and data and evaluation support services also will be available through the SLS Administrative Team. Resources available will be subject to restrictions and requirements of the funding entities.

Application Selection Process – It is envisioned that school districts will apply on behalf of specific schools that will be selected for SLS participation and resources. Schools may receive support for needs assessments and collaborative development; infrastructure development, and direct School-Linked Services. It is expected that the SLS Implementation Task Force will establish selection criteria and levels of SLS implementation for which districts may apply. The Task Force will also consider how to provide services to youth who are not linked to a school (foster care, juvenile justice, drop-outs, and others) and at-risk youth enrolled in charter schools which are not necessarily linked to a school district.

Governance and Oversight – The plan calls for an Implementation Task Force to be staffed by Partner Organizations through a SLS Administrative Team and overseen by an SLS Implementation Task Force of partner organizations, SLS schools, family and community leaders, and private and public sector advocates. Requirements will be established and endorsed by the SLS Implementation Task Force. Requirements will be based on current and emerging practices that yield the best outcomes for students, families, and schools, and current resources available through the SLS Initiative.

Santa Clara County School-Linked Services Implementation Structure



PHASE I: The initial phase of SLS will be made available to those 10 Districts/53 schools targeted in the MHSA

IPLEMENTATION TASK FORCE

1 LS Implementation tas

SLS Implementation task force (TF) informs School Districts (SD) of SLS opportunity.



TF reviews application. Upon application approval, AT discusses funding level for Coordinator function and level of TA to be provided to SD.



TF approves Services Plan for Implementation and SD is included as SLS School with access to SLS resources.



TF oversees new resource development, evaluation of SLS and annual SLS budget development, decisions regarding SLS expansion.

PHASE II: SLS Expansion



TF determines availability of resources for expansion, and agrees on eligibility criteria for either new Phase I districts/schools or to schools beyond Phase I regions.



SD decides to pursue SLS and request Technical Assistance (TA) if needed.



SD staffs SLS Coordinator function and develops collaborative.



When expansion is approved, TF proceeds according to the process outlined in Phase I.



The SLS Administrative team (AT) provides TA to SD to assist in SLS application process. (Applications will seek approval and funding for the first stage of SLS implementation: Collaborative development, Coordinator function, needs assessment, and plan development.)



AT supports new SLS school, assists with service coordination, data collection, training and access to new available services.



Collaborative conducts assessment, priority concerns and develops Services Plan.

Evaluation Framework

Proponents of School-Linked Services contend that achieving better outcomes for children and families requires at least three elements: comprehensive services, increased involvement of parents, and changes to make schools and agencies more responsive to children and families. However, whatever the goals and objectives, data collection and evaluation require clear identification in the plan of exactly what issues and concerns will be addressed, what changes are desired and intended to be produced,

and what measures or "indicators" will be utilized to track the achievements of the SLS Initiative. Regardless of size, experts agree on the vital importance for all School-Linked Services projects of collecting baseline information and then data indicating ensuing behavioral outcomes and systems changes.

The Community Schools Evaluation Toolkit offers a framework for designing an evaluation of school-based and school-linked services that is In recent years, the focus of education reform has been predominantly inside the school, focused on standards, testing, and teacher quality. It has all but ignored the external factors that influence student achievement such as family circumstances, poverty, health, cultural differences, student engagement, and others.

There is a tendency in education reform to

disregard the role of family and community.

Community Schools: Promoting Student Success- A Rationale and Results Framework

in alignment with the proposed SLS Plan. The full toolkit can be found at the Community Schools website at www.communityschools.org/evaluationtoolkit .

The toolkit is produced by the Coalition for Community Schools, an alliance of national, state and local organizations that focuses on K-16 education, youth development, community planning and development, family support, health and human services, government and philanthropy as well as national, state and local community school networks. Attachment B provides an overview of the rationale and evaluation framework for the community schools model for student success proposed by the Coalition. The framework centers around schools and communities creating "conditions for learning" that are believed to be associated with students being successful at "school and in life. " A graphic overview of the framework is presented on the following page.

The Evaluation Toolkit outlines nine results, five short term and four long term:

Short-Term Results

- Children are ready to enter school,
- Students attend school consistently,
- Students are actively involved in learning and in their community,

- Families are increasingly involved in their children's education, and
- Schools are engaged with families and communities.

Long-Term Results

- Students succeed academically,
- Students are healthy—physically, socially, and emotionally,
- Students live and learn in safe, supportive, and stable environments, and
- Communities are desirable places to live.

Specific indicators for measuring progress toward each result are proposed and are intended to represent a comprehensive list of the most important indicators being used currently by various community school initiatives and the most recent research.



Exhibit 2. Community Schools Framework for Student Success "Students Succeeding at School and in Life"

CONDITIONS FOR LEARNING	RESULTS	INDICATORS
	SHORT TERM	
Early childhood development is fostered through high-quality, comprehensive programs that nurture learning and development.	Children Are Ready To Enter School	 Immunization rates Blood lead levels Parents read to children Children attend early childhood programs Receptive vocabulary level Families connected to support networks/services Vision, hearing, and dental status
	Students Attend School Consistently	 Daily attendance Early Chronic Absenteeism Tardiness Truancy
The school has a core instructional program with qualified teachers, a		
challenging curriculum, and high standards and expectations for students.	Students Are Actively Involved in Learning and the Community	Students feel they belong in school Availability of in-school and after-school programs Students feel competent Schools are open to community Attendance at before- and after-school programs Partnerships for service learning in the school/community Post-secondary plans
Students are motivated and engaged in learning—both in school and in community settings, during and after	Schools Are Engaged with Families and Communities	 Trust between faculty and families Teacher attendance and turnover Faculty believe they are an effective and competent team Community-school partnerships
school.	Families Are Actively Involved in Children's Education	 Families support students' education at home Family attendance at school-wide events and parent-teach conferences Family experiences with school-wide events and classes Family participation in school decisionmaking
	LONG TERM	
The basic physical, social, emotional, and economic needs of young people and their families are met.	Students Succeed Academically	Standardized test scores Teachers support students Grades Teachers take positive approach to teaching and learning Graduation rates Dropout rates Reading by 3rd grade
There is mutual respect and effective collaboration among parents, families, and school staff.	Students Are Healthy Physically, Socially, and Emotionally	 Asthma control Vision, hearing, and dental status Physical fitness Nutritional habits Positive adult relationships Positive peer relationships
	Students Live and Learn In Stable and Supportive Environments	 Students, staff, and families feel safe Schools are clean Families provide for basic needs Incidents of bullying Reports of violence or weapons
The community is engaged in the school and promotes a school climate that is safe, supportive, and respectful and that connects students to a broader learning community.	Communities Are Desirable Places to Live	 Employment and employability of residents and families so by the school Student and families with health insurance Community mobility and stability Juvenile crime

COMMUNITY SCHOOLS: PROMOTING STUDENT SUCCESS

A Rationale and Results Framework

- 10 -

The CCS framework also offers what is referred to as "Indicators of Capacity," which offers participants in an SLS initiative a means to assess the capacity of their initiative to serve as "community hubs." Capacity indicators measure six dimensions:

- Leadership and Management
- Results and Data
- Relationships and Partners
- Planning and Decision Making
- Parent and Community Participation
- Sustainability

Each of the above dimensions is identified as an essential element or one of the six tenets of the proposed SLS Plan. It is recommended that the development of a full evaluation plan be completed as part of the implementation of the SLS initiative using the Community Schools model and toolkit as a guide.

V. The Proposed Plan Summary

Following the review of SLS models and identification of the essential elements to be included in the proposed plan, the SLSAC examined each element in detail, seeking SLSAC member and stakeholder input on the details of the plan. Group members spent several meetings considering the specific elements of the plan from the perspectives of family and community members, campus-level staff and partners, and policy-level leaders. The attached link provides a complete summary of all the input received relative to various elements of the proposed plan: Please click here Matrix of Advisory and Stakeholder Input to Plan Components for further information.

The following summarizes the final key components proposed for the new SLS Plan.

SLS Proposed Plan Summary

Target Population

Children and youth, birth through Grade 12, and their families with needs across a full spectrum of child/family health and social necessities. Initial focus of SLS will be four regions of the county with the greatest risk factors impacting child and family well-being. Those schools with data indicators that demonstrate need for publically funded health and human services, some examples of which are underperforming test scores, poverty level of surrounding neighborhoods, dropout rates, crime citations, expulsions, suspensions and truancy rates, and health needs, will be the schools offered inclusion in the first phase of SLS.

Services

During the initial phase, SLS services currently available or planned to be available in the four identified regions include: parenting education and support, family resource centers and parent partners, mental health counseling services, crisis intervention, mobile health screening and treatment, referrals to more intensive health care services, food security services, substance abuse prevention, and truancy prevention. Services to be available are limited to the extent resources are "pledged" by local Partner Organizations.

Service Delivery Structure

SLS services will be delivered through a collaborative campus and community-based structure that incorporates features of several models currently implemented in Santa Clara County. Common elements of these models include campus collaboratives consisting of partnerships between schools, parents, service providers, and the community; a continuum of services (promotion, prevention, early and intensive intervention), and a SLS Coordinator who coordinates services and facilitates the collaborative. The SLS Coordinator and campus leadership will work with the collaborative to complete the assessment and prioritization of school needs and concerns, and to identify the assets, resources and services available on campus and in the neighboring community. CBO's, faith-based organizations and other organizations are encouraged to join and discuss campus needs and commit their services to the particular SLS Plan.

Oversight and Roles

There are several components of the SLS Plan that will establish and sustain the effective SLS leadership structure critical to the success of the SLS Initiative:

SLS Implementation Task Force - At the oversight level is a consortium of local leaders, to include parent and community advisory groups, partner organizations, and educational and service-sector leaders, to hold the vision and drive the course of the SLS Initiative.

Funding Partners - The scope of the SLS Initiative is dependent on policy and funding partners committed through binding contractual and operations agreements who are responsible for committing the resources that enable the implementation and administration of the SLS initiative infrastructure, services, and collaborative partnerships that assure the fulfillment of the mission of the SLS Initiative.

Campus Level - At the campus level is a district-sponsored leader (i.e., school principal) and a service-sector leader (i.e., County, CBO or other governmental leader) who are responsible for providing oversight and leadership support to the campus collaborative.

Collaborative - The development of a collaborative body that includes school staff, service providers, parents and families, community members, and system representatives will establish the SLS priorities for each SLS campus and will champion and support the integrated academic and learning support environment on their campus. This "community and school level" leadership is the essential foundation of the SLS Plan.

SLS Coordinator - At the service level, an identified service coordinator will engage families and service providers, manage referrals, provide consultations with school referring parties, facilitate parent-involved activities, and provide required documentation and accountability. The Coordinator will have oversight of service delivery and related processes and will have experience sufficient to provide consultation and management of mental health or other crisis situations that occur on campus. This position also will convene stakeholders (service providers, community groups, parents, etc.). The Coordinator will report to the organization that assumes responsibility for the position pursuant to an Operational Agreement or Service Agreement signed by involved organizations.

Administration

County administrative support staff will provide support to the governance group and for collaborative development, needs assessment, and contract services procurement and monitoring. The initial location of the SLS Administrative Team will be determined by the Santa Clara County Board of Supervisors in consultation with Partner Organizations that commit resources to the SLS Initiative. The SLS Administrative Team will develop policies and procedures agreed to by the SLS Implementation Task Force that outline parameters for initial implementation of SLS, to the roles and responsibilities and funding agreements among Partner Organizations to be delineated in Operational Agreements or Service Agreements between districts and the Partner Organization (e.g., County, cities, schools, etc.).

Phase I Services

For services funded by the County, County Departments committing to participate in the SLS Initiative will identify those that will be included under the umbrella of the SLS Plan and any new services they wish to include. It is expected that other government or funding jurisdictions will agree to the same.

Services do not have to meet scientific criteria for evidenced-based recognition; however, it is important that services funded and implemented demonstrate either performance outcome data or a design for measuring how the effectiveness of services will be demonstrated.

The SLS Plan will have the intent of covering the scope of birth through grade 12; and funding partners will be invited and encouraged to "integrate" their funded services into the SLP Plan. This will be accomplished through agreements contained in policy and Operational Agreements.

The SLS Plan at each school site will identify the specific needs and services to be addressed by the school-specific SLS Plan and will prioritize the desired services and interventions from prevention to intensive intervention that will be included.

In the initial phase of SLS, services will be made available to those 10 districts/53 schools targeted in the MHSA funded Strengthening Families prevention and early intervention project. This is proposed for two reasons: 1) the new Strengthening Families Project is targeted to four high risk regions of the county where needs identified in the SLS Plan are present; and 2) the MHD has aligned implementation of the new project, representing \$6.9 million in new services, with the structure proposed in the SLS Plan, and will make available funding to support the coordinator function, an essential SLS feature key to the development of the SLS infrastructure, when matched with school resource. While the MHD Strengthening Families project has a more limited service scope than the SLS Plan, it will provide critical foundational resources for the development of school collaboratives, needs assessment, and plan development, leveraging the impact of the Strengthening Families initiative and readying these high need schools for full SLS implementation. Given the limited resources for infrastructure support, the Implementation Task Force will set selection criteria for the initial SLS schools from the Phase I group.

Training

The SLS administrative and technical assistance activities will include training or access to training for both the SLS organizational model (planning, collaborative development, parent involvement, service coordination, outcomes management) and specific intervention models and practices endorsed by the SLS Implementation Task Force.

Data and Evaluation

Data will be used to inform effective SLS policy and practice. A SLS Evaluation Framework will be designed and approved by the SLS Implementation Task Force, drawing upon the evaluation toolkit developed by the Coalition of Community Schools and delineated in the SLS Implementation Plan. Schools or districts participating in SLS will be required to agree to collect and submit required data in order to determine and prioritize the service needs of their schools and to track the processes and outcomes of services provided. Policy agreements between those entities that have data will be included in each campus SLS Plan.

Funding

Funding will come from multiple sources (County General Fund, grants, MHSA, Medi-Cal, cities, private sector) committed by the SLS funding partners. In-kind contributions will be considered committed funding if memorialized in Service Agreements and/or Memoranda of Understanding. Partner organizations will identify programs and funding that can be directed to SLS. This will form the initial funding pool for SLS. In addition, schools and districts will be asked to match funding or commit in-kind contributions to the extent possible in order to establish the essential SLS Coordinator function. (A preliminary table summarizing the initial Partner Organizations and "pledged" resources is provided in the next section.)

Accountability

Accountability will be addressed at all levels of leadership within the SLS model through contractual and operational agreements and MOUs. The SLS collaborative structure will emphasize the importance of communication and teamwork at all levels of leadership; these levels will ensure that regulations are met while removing barriers that may impede program process or effective service delivery. During negotiations of formal Operational Agreements or Service Agreements between school districts and the County, the parties will need to identify their important issues such as confidentiality and sharing of information, funding parameters, etc.

Benefits to Stakeholders

Children and Families – The SLS Plan offers parents an opportunity for increased involvement in shaping and participating in campus and community-based activities targeted to address critical health and social needs that are known to impact child learning and success in school and life.

Schools – SLS benefits for education staff include the opportunity for on-campus services that will improve academic outcomes. Schools will receive technical and collaborative development assistance, support for family engagement, and inclusion in grant funding.

Service Provider – Providers will be included in the campus community as partners in strategic and local collaborative planning. Contracted services will be more consistently procured and coordinated, reducing bureaucratic inconsistencies on the part of funding organizations.

Community – The community will have more direct involvement in supporting services and contributing to the community and child educational success.

VI. Implementation

Following approval of the SLS Plan by the Board of Supervisors and direction to proceed with implementation planning, the SLS Planning Team will prepare a detailed Implementation Plan. This plan will outline the specific funding and related services that will be included in SLS, how the new initiative will be funded, how it will be overseen and administered, and the timelines involved.

Initial School-Linked Services Funding Partners

Currently, the SLS Planning Team is surveying County departments and other funding agencies and is seeking "pledges" and contributions of participation and resources from these Funding Partners. Using the following overview of critical concerns to be addressed in the SLS Plan, Funding Partners are being asked to identify those that are consistent with their organizational mission and are related to funding that will be directed to SLS in FY13.

The two tables below illustrate two perspectives on the resources that are being pledged by committed Funding Partners. First is an overview of the targeted focus of the pledged resource by funding organization. This perspective provides an understanding of the purpose and potential outcome areas that pledged Partner services will be targeted to. Given that most of the pledges in Phase I of SLS implementation will be from organizations that are pledging existing resources that are already targeted to specific services, this inventory will provide a good overview of what concerns will be addressed in the first phase of implementation of SLS. It will also allow the Implementation Task Force the ability to consider those areas that have little or no resource, which will assist in the prioritization process for future resource seeking efforts.

The second table will be used to provide more detail of the programs and services pledged by Funding Partners. This table will provide an inventory of service descriptions, allowing for further analysis and determination of the scope and extent of services that will be available during the initial phase of SLS. This will be important to describing the overall SLS Plan for FY13.

Overview of Targeted Needs by Partner Funders

SI S Noods /Conserve	lnv	ventory	of Targe	t Need	s Addres	sed by Fu	nding Par	tner Plec	lges
SLS Needs/Concerns	Social Services	Mental Health	FIRST 5	Public Health	Drug & Alcohol	Probation	Public Defender	District Attorney	Districts, Cities, etc
For Children									
Low expectations, resignation, hopelessness									
Behavioral and emotional challenges									
 School engagement 									
Readiness to learn when they start school									
Exposure to trauma									
Substance use/abuse									
 Risk of juvenile justice involvement 									
Health/obesity/chronic diseases									
Pregnancy									
Learning disability									
 Child welfare involvement 									
For Families									
 Lack of self-sufficiency 									
 Complications of substance abuse 									
 Incidents of child abuse/domestic violence 									
 Lack of stable housing/multiple moves 									
Stress of immigration									
Involvement and participation in schools									
 Cultural welcoming and relevance 									
 Poor access to healthy food and healthcare 									
 Lack of capacity to influence schools and services 									
For Schools									
 Teacher emotional/social development competency 									
■ Parent involvement									
Suspensions and expulsions									
Violence on campus									
Attendance									
Graduation rates									

SLS Needs/Concerns	Inv	ventory	of Targe	et Need:	s Addres	sed by Fu	nding Par	tner Plec	lges
	Social Services	Mental Health	FIRST 5	Public Health	Drug & Alcohol	Probation	Public Defender	District Attorney	Districts, Cities, etc.
For Communities	-						•		•
 Lack of faith and broader community involvement 									
■ Child safety									
 Disparities in access to healthy food/healthcare 									
 Poor access to recreation, sports and cultural events 									
 Exposure to community violence and crime 									
For Systems							•		•
 Lack of accessibility to services 									
 Lack of cultural competency 									
 Disproportionate ethnic/racial representation 									
 Lack of family involvement 									
 Fragmented and siloed services 									

SLS Progra	am Elements and Activities – Phase I (FY12- FY13)	Annual Funding				
Mental Health Department	 Planning Facilitation - Provide staff assistance in meeting design, preparation, facilitation research and written materials, including final proposed plan; 					
	2. SLS Pilot Programs - MHSA one-time funded 3 pilot programs (COE, SJUSD, EUHSD) – three 18-month pilot programs are being implemented in three districts: \$50,000 to COE for implementation of PBIS in 8 school sites; \$357,000 for selective clinical interventions in SJUD schools; and \$357,000 to ESUHSD for clinical support to schools that have not yet implemented PBIS. These pilots will inform future SLS intervention models;	\$764,000				
	 MHSA PEI - Strengthening Families RFP's - MHSA funded prevention and early intervention services will be implemented in four high need regions of the County and will bring services to 53 schools in 10 school districts through contracts with local community based organizations (CBO's). Estimated start date is March 2012; 	\$6,900,000				
	4. KidConnections - Early Childhood Assessments, Home visiting, and therapeutic services through county and contract	TBD				

providers, through FIRST 5 and mental health funding provides a system of assessment and services to young children;	
5. MHD considering additional programs to include.	TBD
6. Administrative Support - MHD is committing administrative staff (Prevention Program Analysts and contracts administrative staff) to the development of formal agreements with school districts and other partners for the delivery of MHD services in the 10 districts involved in #3 above.	TBD
Subtotal	

SLS Program E	lements and Activities – Phase I (FY12- FY13)	Annual Funding
Department of Alcohol and Drug Services	 Substance Use counseling at school sites. DADS funds County Staff and contract staff to provide treatment services at eleven school sites in Santa Clara County. 	\$475,000
	2. Substance Use Prevention Resources. DADS is able to provide prevention resources to schools: An informational DVD on the drug, ecstasy (identified as an emerging local problem); informational guides for parents; in-person, customized presentations to students, parents, and school personnel; technical assistance to develop and enhance substance use prevention efforts.	\$100,000
	3. Start-up funding for school-based implementation of the Seven Challenges, an evidence-based substance use early intervention and treatment model. DADS plans to pay for the initial costs for existing service providers to implement the Seven Challenges program: License fees, initial training, leadership training, cost of materials, technical assistance and site visits by the program developers.	\$150,000
	4. Training through DADS' Learning Institute. Registration fees will be waived for school personnel and school-linked partners to attend workshops offered through DADS. Workshops may also be provided in collaboration with schools.	\$25,000

SLS Program	Elements and Activities – Phase I (FY12- FY13)	Annual
		Funding
Social Services Agency	 Children's and Families County General Fund - This is the money from the SSA County General Fund pool that was targeted to be rebid to provide school linked services. RFP this year will determine services for FY2013. 	\$850,000
	 Children and Families Safety Net County General Fund - This is a discrete amount of money from the SSA County General Fund pool that is targeted to provide for emergency needs of families and children. RFP this year will determine services for FY 2013 	\$183,718
	3. STOP Funds - The purpose of STOP is to enable counties to expand treatment and support options for families with children returning from out-of-home placement or at risk of such placements. Types of services Counties may use STOP funds for: provide treatment such as group therapy and drug and alcohol program, for a wide variety of interventions such as recreation activities, including after school programs, respite care, independent living services, music therapy, and crisis intervention. This program is currently under contract and the FY2013 contract will be written to prioritize referrals from schools. The contract will be rebid for FY2014.	\$278,204 (subject to State funding availability for FY2013)
	 Mandated Reporter Training - DFCS provides mandated reporter training for schools. As a part of the SLS resource pool, DFCS will provide mandated reporter training as requested by school leadership. 	Dependent on use
	 Linkages to Safety Net Services to Families - SSA has relationships with various agencies that provide application assistance for public benefits. Linkage will be facilities to bring those resources to participating school communities. 	In Kind
	6. Emerging Scholars Program - SSA has an MOU with Silicon Valley Children's Fund, Santa Clara County Office of Education, and East Side Union High School District to support the Emerging Scholars Program. The program utilizes graduate school of social work interns to work with dependent foster youth to assess the youth's educational and psychosocial needs to create individualized educational plans. The interns will work with approximately 40 youth. Subtotal	In Kind

The SLS Planning Team will secure further pledges from other organizations to be included in the FY13 Implementation Plan. To date, many county departments have expressed their intent to pledge to SLS. A preliminary estimate of the amount pledged so far is close to \$10 million. It is expected that multiple county, city, and educational Partner Organizations will make pledges for the new SLS Initiative. This information will be included in the SLS Implementation Plan to be completed over the next several months, and will be presented through the FY13 budget planning process.

Implementation Oversight

It is proposed that during the first phase of implementation of the SLS Plan, an Implementation Oversight Task Force be formed to establish the specific SLS participation criteria, to finalize the implementation plan, and to secure final FY13 pledges for SLS. The Implementation Oversight Task Force members will be comprised of Partner Organizations pledging Phase I funds, educational leaders, CBO representatives, family, and community, business and faith leaders. The Chairs of the Implementation Oversight Task Force will be selected by the Board of Supervisors and county Superintendents.

Proposed Administration

The initial period of SLS implementation is proposed to be FY12 and FY13, ending in June 2013. During this phase it is proposed that administrative support to the SLS is provided through the Mental Health Department (MHD), utilizing resources and staff supporting the MHD Prevention and Early Intervention (PEI) Strengthening Families Project, which is one of the initial major programs to be pledged to the SLS Initiative. The MHD staff has provided current support to the SLS planning process and will be the team working on the provider selection process and implementation of school-focused mental health prevention services in four high need regions that are proposed to be the initial focus of the new SLS Initiative.

While additional support staff will be required to implement the broader array of SLS services as they are pledged for the new initiative, these staff can be available to serve as the initial core of the SLS administration. It is recommended that the SLS Implementation Task Force recommend the ongoing, Phase II, administrative structure of the new SLS Initiative. It is likely, however, that during Phase I, Partner Organizations will be asked to contribute to the administrative support of the new SLS Initiative.

Proposed Programs and Budgets

As indicated above, the initial SLS Partner Organizations will be confirmed and included in the SLS Implementation Plan. Each organization will be asked to pledge the specific programs and resources from their organization and to identify for which needs their pledge will be targeted, as well as any further limitations or parameters that will govern their SLS contribution. For example, Partner Organizations frequently are funded through federal or state programs, or even local programs, that are restricted to specific activities or interventions and must be administered under specific conditions.

Partner Organization pledges and the terms that govern them, will be delineated in a SLS Memorandum of Understanding or other formal agreement each fiscal year. The formal agreement will clearly outline the services or other resources, the conditions that pertain to the resources, and any administrative support that will be contributed by the Partner Organization. The annual SLS Plan will summarize all resources and their restrictions and will form the foundation for the services offered each year.

Implementation Timeline

Following the approval of the SLS proposed plan, the SLS Planning Team will complete an implementation plan which will be completed in time for inclusion in the FY13 County budget planning process. In the meantime, the MHD will move forward with the implementation of the PEI Strengthening Families Project, anticipated to be completed by July 2012. Other programs also will be implemented according to predetermined timelines and will be incorporated into the SLS Initiative as agreements are negotiated and formalized.

Attachment A Planning Logic Model

Learning and

Orientation and

School Linked Services Strategic Planning Process Overview - Revised 5/26/11
Logic Model to Define New SLS Target Population, Desired Results and Service Delivery Model

Understanding

What interventions the Current State Engagement Do stakeholders What changes How will we Visioning Who needs to will achieve the Where do we Why are we measure our agree with the plan? should we make to What results do approve the plan? results we want? stand now? here? improve the plan? success? we want? **Meeting Objectives** #4 #1 April 11, 2011 April 28, 2011 May 26, 2010 June 9, 2011 August 25, 2011 September 20, 2011 October 26, 2011 November 22, 2011 1. Identify and prioritize target > Sponsors outline purpose 3. Prioritize target pop and 5. Review current SLS models 8. Review resource inventory of 11. Hold focus groups and town Review changes and agree 16. Review final plan; and desired result - done population and key results needs to be addressed in and results being achieved current services provided; hall sessions to seek input on final plan budget and desired from the plan to be new SLS plan; nationwide; and Identify gaps, on the draft plan; recommended 17. Finalize plan distribution and Members understand task completed; done duplication, and other issues implementation; communication plan; 4. Identify child, family and 6 Review current available related to current service 12. Summarize feedback and and process for completion and commit to participate 2. Draft vision and values that school, community and data on how kids are doing in delivery system. proposed changes. 15. Agree on final plan format; 18. Celebrate! and undertake the steps service measures and school and in other critical will drive the plan. done identified for the next 7 indicators to track domains (health, family, 13. Finalize draft plan, budget Select service model most meetings: done community safety). and implementation outcomes. likely to address needs and approach. achieve desired results; 7. Determine criteria for how new delivery model and 10. Agree on plan to seek specific services should be stakeholder input on draft decided. **Draft Meeting Agendas** Welcome and Purpose 1. Welcome/Agenda Review 1. Welcome/Agenda Review 1. Welcome/Agenda Review 1. Welcome/Agenda Review 1. Welcome/Agenda 1. Welcome/Agenda Review 1. Welcome/ Agenda Group Introductions 2. Quick Review/Ramp Up 2. Final Plan Review 2. Review of SLS History and 3. Presentation on San Jose Finalize priority populations 3. Review SLS models 3. Review resources, gaps and 3. Review Draft Summary of 3. Finalize Draft Plan 3. Outline next Steps Tenets School program; and Needs 4. Discuss SLS Model Selection system needs Plan to Date 4. Interim Work 4. Thanks and Congratulations 4. Review Stakeholder Input **Review Planning Process** 4. Reflections on SCC Desired Consider measures and 4. Agree on priority SLS models 5. Next Meeting Agenda Criteria 5. **Review Process and** Results indicators 5. Interim Work 5. Discuss and Recommend Summary and Agree on Participation Guidelines Review Vision & Values 6. Next Meeting Agenda Stakeholder Input Plan Changes Interim Work Next steps and closing Interim Work 6. Next Meeting Agenda 6. Next Meeting Agenda 5. Interim Work 7. Next Meeting Agenda 6. Next Meeting Agenda **Meeting Materials** Agenda Agenda Agenda Agenda Agenda Agenda Agenda Agenda Power point handout Power point handout Power point handout Power point handout Final Plan · Power point handout · Power point handout Power point handout Summary of last meeting: Draft Final Plan Invite letter · Summary of last meeting: SLS Summary of last meeting: Summary of last meeting: · Summary of plan to date List of members planning purpose and vision, values, desired Model handouts priority needs, success Summary of stakeholder Planning Overview background outcomes, key elements of measures, intervention SLS Transmittal to CSFC Presentation handout new SLS criteria

Defining Success

Setting the Course

Vetting the Plan

Finalizing the Plan

Completing the Plan

COMMUNITY SCHOOLS: PROMOTING STUDENT SUCCESS

A Rationale and Results Framework





ABOUT THE COALITION FOR COMMUNITY SCHOOLS

The Coalition for Community Schools is an alliance of national, state and local organizations in education K-16, youth development, community planning and development, family support, health and human services, government and philanthropy as well as national, state and local community school networks. Our mission is to advance opportunities for the success of children, families and communities by promoting the development of more, and more effective, community schools. The Coalition for Community Schools believes that strong communities require strong schools and strong schools require strong communities. We envision a future in which schools are centers of thriving communities where everyone belongs, works together, and succeeds. The Coalition is housed at the Institute for Educational Leadership in Washington, DC.

COALITION FOR COMMUNITY SCHOOLS STAFF

Martin J. Blank, President, Institute for Education Leadership, and Director, Coalition for Community Schools;

Maame Ameyaw Shital C. Shah Reuben Jacobson

ORDERING INFORMATION

The full report is available for download free of charge at www.communityschools.org.

The Coalition for Community Schools c/o Institute for Educational Leadership 4455 Connecticut Avenue, NW, Suite 310 Washington, DC 20008

T: (202) 822 8405 F: (202) 872-4050

E-mail: ccs@iel.org

Web site: www.communityschools.org

PURPOSE

he purpose of this document is twofold:

- To outline a rationale for the community school as a primary vehicle for increasing student success and strengthening families and community
- ◆ To define specific results that community schools seek both in terms of how they function and in relationship to the well being of students, families, and communities.

The information in this document reflects the work of community school advocates and practitioners at the national, state, and local levels. It is intended as a resource for local policymakers and practitioners who wish to explore or implement a community school strategy. It is not a prescription; each community school initiative and individual community school must define and explain the results it is seeking to its constituency in terms that reflect its unique conditions and circumstances.

The Community School Vision

A community school is both a place and a set of partnerships between school and community. It has an integrated focus on academics, youth development, family support, health and social services, and community development. Its curriculum emphasizes real-world learning through community problem solving and service. By extending the school day and week, it reaches families and community residents. The community school is uniquely equipped to develop an educated citizenry, to strengthen family and community, and to nurture democracy in the twenty-first century.



RATIONALE

here is a tendency in education reform to disregard the role of family and community. In recent years, the focus of education reform has been predominantly inside the school, focused on standards, testing, and teacher quality. It has all but ignored the external factors that influence student achievement such as family circumstances, poverty, health, cultural differences, student engagement, and others.

THE PROBLEM

While the public recognizes the importance of these non-school factors, school reform efforts have ignored them. The recent 38th Annual Phi Delta Kappa/Gallup Poll of the *Public's Attitudes Toward the Public Schools* indicates that 70 percent of Americans blame societal factors for the achievement gap and high dropout rates while only 22 percent fault the schools. Public Agenda's *June Reality Check 2006*, a set of public opinion tracking surveys on key public education issues, showed that:

"...key segments of the public increasingly see standards and testing as a 'Johnny-one-note approach.' They are concerned about...school climate, family support, and social problems that are seeping into the school."

Research published by the Educational Testing Service confirms these public perceptions. *Parsing the Achievement Gap* by Paul Barton identified eight factors before and beyond school that influence the achievement gap; among them are parent participation, student mobility, hunger and nutrition, lead poisoning, low birth weight, and television watching.

THE SOLUTION

Community schools recognize that many factors influence the education of our children. This is why they work to mobilize the assets of the school and the entire community to improve educational, health, social, family, economic, and related results.

COMMUNITY SCHOOLS: PROMOTING STUDENT SUCCESS

. 4 .

A Rationale and Results Framework

Community schools function as active agents of change in the lives of students, families and their communities. Leaders of community school initiatives know that success in school, strong families, and healthy communities are intertwined.

Partners pursue a balanced approach that recognizes the importance of academic and non-academic factors and the value of developing social capital to support young people.

Community schools achieve this balance by creating the Conditions for Learning (see below). These conditions, based on research from multiple fields, describe the comprehensive and supportive environment necessary to educate all students to high standards.

The experience of the Coalition for Community Schools suggests that fulfilling these conditions will enable public schools and their communities to more readily achieve the multiple purposes of public education—to help students develop the academic and social competencies to succeed in life and to prepare them to be productive participants in our democracy. The collective presence of these conditions, and the interaction among them, increases the likelihood of success for all.

The Conditions for Learning

- Early childhood development is fostered through high-quality, comprehensive programs that nurture learning and development.
- The school has a core instructional program with qualified teachers, a challenging curriculum, and high standards and expectations for students.
- Students are motivated and engaged in learning—both in school and in community settings, during and after school.
- The basic physical, social, emotional, and economic needs of young people and their families are met.
- There is mutual respect and effective collaboration among parents and school staff.
- The community is engaged in the school and promotes a school climate that is safe, supportive, and respectful and that connects students to a broader learning community.

To learn more about the conditions for learning, go to: http://www.communityschools.org/mtdhomepage.html Partnership is one of the most importance principles of effective community schools. No single entity can create all of these conditions, so community schools build partnerships between the school and other organizations and institutions, both public and private. Often, a lead organization coordinates the relationship between the school and its community partners, bringing new expertise to the school and reducing the burden on school staff. The lead organization can be a community-based organization, a public agency, or the school itself.

Community schools intentionally align resources and relationships toward specific results for students, families, schools, and the community. Both the school and community set priorities for action together.

COMMUNITY SCHOOLS LOGIC MODEL

To create a picture of what happens at a community school in order to achieve a set of results, the Coalition created a Community Schools Logic Model (see Exhibit 1 on page 9) that illustrates how community school activities can lead to desired results.

Guiding Principles for Community Schools

- Foster strong partnerships: Partners share their resources and expertise and work together to design community schools and make them work.
- Share accountability for results: Clear, mutually agreed-upon results drive the work of community schools. Data helps partners measure progress toward results.
- Set high expectations for all: Community schools are organized to support learning. Children, youth, and adults are expected to learn at high standards and to be contributing members of their community.
- Build on the community's strengths: Community schools marshal
 the assets of the entire community—including the people who live
 and work there, local organizations, and the school.
- Embrace diversity: Community schools know their communities.
 They work to develop respect and a strong, positive identity for people of diverse backgrounds and are committed to the welfare of the whole community.



RESULTS FRAMEWORK

he Community Schools results framework is divided into two parts. The first part focuses on the specific results in the Logic Model related to the learning and well-being of students, as well as their families and communities, and includes specific indicators for measuring progress toward these results.

The second part addresses the capacity of a community school to attain the results it desires and how to measure that capacity. The greater the capacity of the community school, the more likely it is to achieve its desired results for students, family, and community.

PART 1. RESULTS AND INDICATORS OF STUDENT SUCCESS

Exhibit 2 (see page 10) suggests nine results, both short and long term, that are essential for student success. Please note that interaction between the "conditions for learning" may contribute to more than one result.

Short Term Results

- Children are ready to enter school
- Students attend school consistently
- Students are actively involved in learning and in their community
- Families are increasingly involved in their children's education
- Schools are engaged with families and communities

Long Term Results

- Students succeed academically
- Students are healthy—physically, socially, and emotionally
- Students live and learn in safe, supportive, and stable environments
- Communities are desirable places to live

All of these results move community schools towards contributing to the larger impact of: students graduate ready for college, careers, and citizenship. Specific indicators for measuring progress toward each result are proposed in Exhibit 2. They represent a comprehensive list of the most important indicators being used currently by various community school initiatives and the most recent research. The Coalition

anticipates that local community school leaders will use this framework as a starting point for defining results and indicators that are responsive to their own challenges and circumstances.

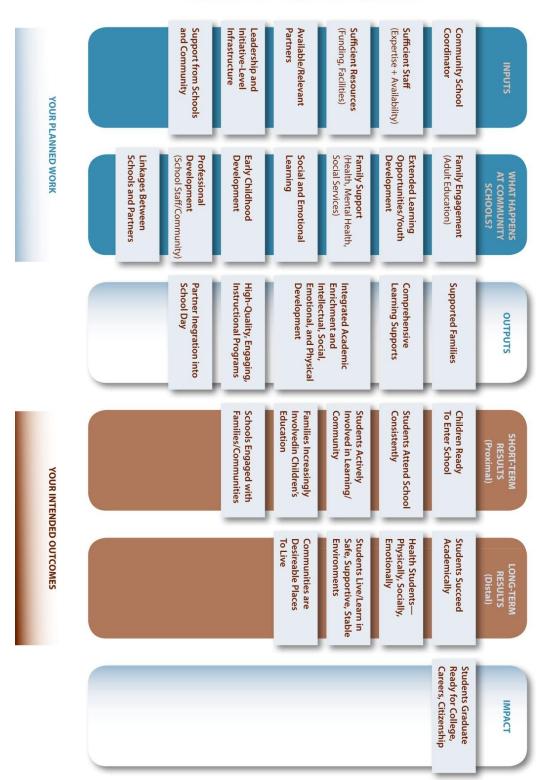
To complement this results framework, the Coalition has prepared a Community Schools Evaluation Toolkit that will assist you in the design and evaluation of your community schools initiative. You can access the toolkit at the Coalition's website: www.communityschools.org.

PART 2. SCHOOLS FUNCTION FULLY AS COMMUNITY HUBS

Student success relies on the effective operation of community schools—interpersonally and organizationally. Strong leadership and management, alignment of resources to achieve specific results, and strong relationships among students, parents and families, school personnel, and community partners are all pivotal. Together they create a solid infrastructure and the capacity to build student success.

Exhibit 3 (see page 11) includes a set of indicators for determining whether the community school has the capacity to function effectively as a hub of the community. These indicators reflect the operating experience of community school practitioners and advocates. Use the form as a tool that key actors at individual community schools can use to assess progress against each of these indicators. Dialogue about the assessment data is vital for improving performance.

Exhibit 1. Community Schools Logic Model



COMMUNITY SCHOOLS: PROMOTING STUDENT SUCCESS

-9-

A Rationale and Results Framework

COMMUNITY SCHOOLS LOGIC MODEL



Exhibit 2. Community Schools Framework for Student Success "Students Succeeding at School and in Life"

CONDITIONS FOR LEARNING	RESULTS	INDICATORS
	SHORT TERM	
Early childhood development is fostered through high-quality, comprehensive programs that nurture learning and development.	Children Are Ready To Enter School	Immunization rates Blood lead levels Parents read to children Children attend early childhood programs Receptive vocabulary level Families connected to support networks/services Vision, hearing, and dental status
The school has a core instructional	Students Attend School Consistently	 Daily attendance Early Chronic Absenteeism Tardiness Truancy
program with qualified teachers, a challenging curriculum, and high standards and expectations for students.	Students Are Actively Involved in Learning and the Community	Students feel they belong in school Availability of in-school and after-school programs Students feel competent Schools are open to community Attendance at before- and after-school programs Partnerships for service learning in the school/community Post-secondary plans
Students are motivated and engaged in learning—both in school and in community settings, during and after school.	Schools Are Engaged with Families and Communities	 Trust between faculty and families Teacher attendance and turnover Faculty believe they are an effective and competent team Community-school partnerships
SCHOOL.	Families Are Actively Involved in Children's Education	Families support students' education at home Family attendance at school-wide events and parent-teacher conferences Family experiences with school-wide events and classes Family participation in school decisionmaking
	LONG TERM	
The basic physical, social, emotional, and economic needs of young people and their families are met.	Students Succeed Academically	Standardized test scores Teachers support students Grades Teachers take positive approach to teaching and learning Graduation rates Dropout rates Reading by 3rd grade
There is mutual respect and effective collaboration among parents, families, and school staff.	Students Are Healthy Physically, Socially, and Emotionally	 Asthma control Vision, hearing, and dental status Physical fitness Nutritional habits Positive adult relationships Positive peer relationships
	Students Live and Learn In Stable and Supportive Environments	 Students, staff, and families feel safe Schools are clean Families provide for basic needs Incidents of bullying Reports of violence or weapons
The community is engaged in the school and promotes a school climate that is safe, supportive, and respectful and that connects students to a broader learning community.	Communities Are Desirable Places to Live	 Employment and employability of residents and families served by the school Student and families with health insurance Community mobility and stability Juvenile crime



Exhibit 3. Indicators of Capacity "Schools Function Fully as Community Hubs"

DIRECTIONS: Rate each of the following statements by circling the number that best represents your opinion.

KEY: 0=No opinion/information at this time; 1=Strongly disagree; 2= Disagree; 3=Somewhat disagree; 4= Neither agree/disagree; 5=Sp,ewhat agree; 6=Agree; 7=Strongly agree

	No opinion/ information		Disagree	Somewhat disagree ag	Neither ree/disagr	Somewhat ee agree	Agree	Strongly agree
Leadership and Management 1. Our principal provides supportive leadership.	0	1	2	3	4	5	6	7
A community school coordinator is present on a full-time basis.	0	1	2	3	4	5	6	7
 Our coordinator facilitates close communication between the principal, school staff, and community partners. 	0	1	2	3	4	5	6	7
 The community school coordinator is an active participant on the school leadership team. 	0	1	2	3	4	5	6	7
Key stakeholders have agreed upon a clear vision and guiding principles for our community school.	0	1	2	3	4	5	6	7
 Teachers view the efforts of community partners as supporting their work. Trust is present among school administrators, teachers, parents, family members, and community partners. 	0	1	2	3	4	5	6	7
Results and Data								
 Working with staff, families, and community partners, our community school has identified desired results. 	0	1	2	3	4	5	6	7
Our community school has identified baseline indicators for measuring students, family, and community progress.	0	1	2	3	4	5	6	7
 Our community school uses data-based methods to determine its priorities and assess progress regularly. 	0	1	2	3	4	5	6	7
 Our community school analyses data and reviews the results to adjust implementation strategies when appropriate. 	0	1	2	3	4	5	6	7
Relationships with Partners 1. Community partners see our school as an inviting and productive place to	0	1	2	3	4	5	6	7
provide programs and services. 2. Effective communications mechanisms are in place between school staff and		1	2	3	4	5	6	7
community partners. 3. Effective communications mechanisms are used regularly to inform parents,	0	1	2	3	4	5	6	7
families, and residents, as well as community leaders and the public about the accomplishments and needs of our community school.	Ü		2	,	7	,	0	,
Planning and Decision Making 1. A plan is in place for aligning and coordinating supports and opportunities								
from the school and the community in order to achieve specific results.	0	1	2	3	4	5	6	7
The plan demonstrates clear linkages between in-school and after-school curriculum. A florible decision making group guides the work of the community school.	0	1	2	3	4	5	6	7
 A flexible, decision-making group guides the work of the community school. The decision-making group's members represent all key stakeholders, 	U	1	2	3	4	5	6	7
including parents or family members, community residents, school staff, and community partners.	0	1	2	3	4	5	6	7
Parent and Community Participation	0	1	2	3	4	5	6	7
 Our community school welcomes diversity. The leaders of our community school facilitate honest conversations among 	0	1	2	3	4	5	6	7
students, families, and residents from different ethnic and racial groups. 3. Parents, family members, and community residents play active and effective	0	1	2	3	4	5	6	7
roles in our community school.4. Community residents use the school as a focal point for addressing community issues and challenges and for celebration.	0	1	2	3	4	5	6	7
Sustainability 1. Our community school has developed a long-range plan for financial	0	1	2	3	4	5	6	7
sustainability. 2. Our community school is the early stages of implementing a long-range financial plan.	0	1	2	3	4	5	6	7
•								

COMMUNITY SCHOOLS: PROMOTING STUDENT SUCCESS

-11-

A Rationale and Results Framework

Coalition for Community Schools



Because Every Child Deserves Every Chance

Coalition for Community Schools c/o Institute for Educational Leadership 4455 Connecticut Avenue, NW, Suite 310 Washington, DC 20008

Telephone: (202) 822-8405 ext 156

Fax (202) 872-4050 E-mail: ccs@iel.org

Web site: www.communityschools.org



STEERING COMMITTEE

Ira Harkavy, Chair Center for Community Partnerships, University of Pennsylvania

Lisa Villarreal, Vice Chair The San Francisco Foundation

Howard Adelman and Linda Taylor UCLA Center for Mental Health in Schools

Carlos Azcoitia Chicago Public Schools

Iris Bell

Oregon Commission on Children, Youth, and Families

Amanda Broun
Public Education Network

Nelda Brown National Service Learning Partnership

Daniel Cardinali Communities In Schools

Joan Devlin American Federation of Teachers

Joy Dryfoos Independent Researcher

Matia Finn-Stevenson School of the 21st Century, Yale University

Ayeola Fortune Council of Chief State School Officers

Josephine Franklin National Association of Secondary School Principals

Cathlin Gray
Evansville-Vanderburgh School Corporation

Merita Irby Forum for Youth Investment

Tawa Jogunisimi Mayor's Office, Chicago, IL

Clifford Johnson

National League of Cities

Linda Juszczak National Assembly for School-Based Health Care

Peter Kleinbard Youth Development Institute

John Kretzmann Asset Based Community Development Institute

Robert Mahaffey
The Rural School and Community Trust

Karen Mapp Harvard Graduate School of Education

Molly McCloskey Association for the Supervision and Curriculum Development

Phil McLaurin

National Education Association Mary Jo Pankoke Nebraska Foundation for Children and Families

Terry Peterson Afterschool Alliance

Jane Quinn Children's Aid Society

Brent Schondelmeyer Local Investment Commission

Sharon Adams Taylor American Association of School Administrators

Roger Weissberg Collaborative for Academic, Social, and Emotional Learning

Martin J. Blank, President Institute for Educational Leadership

Attachment C References

¹ E.g. see *An Evaluation of Factors Related to the Disproportionate Representation of Children of Color in Santa Clara County's Child Welfare System: Child Welfare Practices and Ethnic/Racial Disproportionality in the Child Welfare System, Phase 3, Final Report Submitted to the County of Santa Clara Social Services Agency Department of Family and Children's Services by The Child Welfare Research Team, College of Social Work, San Jose State University (Sept. 2, 2003, rev'd Nov. 17, 2003) at 3 - 4 (stating the study's five overall conclusions to include: "1.) Families belonging to each of the four racial/ethnic groups studied, including: African Americans, Hispanic/Latinos, Asian American/Pacific Islanders and Whites are characterized by unique constellations of risk factors. ... 4.) The services ordered for families of color are generally limited to a one-size-fits all approach and to a small array of available services. 5.) There is a need to involve multiple social service systems in a comprehensive and coordinated effort to meet the needs of children and families of color."). Other examples of external causes include the historical boundaries for delivery of related services, such as independent child maltreatment and spousal abuse service systems and the disconnect between care of foster care youth and mental health service delivery. Furthermore, service funding conduits have promoted the pathologic treatment of children and families of color, providing service reimbursement only for crisis intervention or response.*

- ii E.g. see An Evaluation of Factors Related to the Disproportionate Representation of Children of Color in Santa Clara County's Child Welfare System: Child Welfare Practices and Ethnic/Racial Disproportionality in the Child Welfare System, Phase 3, Final Report Submitted to the County of Santa Clara Social Services Agency Department of Family and Children's Services by The Child Welfare Research Team, College of Social Work, San José State University (Sept. 2, 2003, rev'd Nov. 17, 2003) at 3 4 (stating the study's five overall conclusions to include: "1.) Families belonging to each of the four racial/ethnic groups studied, including: African Americans, Hispanic/Latinos, Asian American/Pacific Islanders and Whites are characterized by unique constellations of risk factors. ...
- 4.) The services ordered for families of color are generally limited to a one-size-fits all approach and to a small array of available services. 5.) There is a need to involve multiple social service systems in a comprehensive and coordinated effort to meet the needs of children and families of color."). Other examples of external causes include the historical boundaries for delivery of related services, such as independent child maltreatment and spousal abuse service systems and the disconnect between care of foster care youth and mental health service delivery. Furthermore, service funding conduits have promoted the pathologic treatment of children and families of color, providing service reimbursement only for crisis intervention or response.
- iii Hunger is everywhere, so keep safety net strong, Kathy Jackson, *San Jose Mercury News* editorial, November 7, 2011
- iv Santa Clara County Public Health. *Health and Social Inequity in Santa Clara County, Executive Summary,* 2011, www.phd.sccgov.org,
- ^v Santa Clara County Public Health. Health and Social Inequity in Santa Clara County, Executive Summary, 2011, www.phd.sccgov.org.
- vi Santa Clara County: Demographics Kidsdata.org." Kidsdata: Data and Resources about the Health of Children. Web. 16 Oct. 2011. www.kidsdata.org.
- vii Immigrant Children, The Future of Children Princeton Brookings. Volume 21, Number 1, Spring 2011. viii Knitzer, Jane. "Promoting Resilience: Helping Young Children and Parents Affected by Substance Abuse, Domestic Violence and Depression in the context of Welfare Reform." *National Center for Children in Poverty*, 2000. Web. 23 October 2011. http://nccp.org/publications/pub 389.html .

 ix Building Young Minds: The Importance of Social and Emotional Development, Inform. Volume 4, Number 3, May 2006. Web. January 17, 2011

http://www.ndkidscount.org/publications/inform/4_3Inform.pdf

- * Middle School Education Court Report, submitted to the Santa Clara County Children, Seniors and Families Committee, April 20, 2011
- xi Adverse Childhood Experiences Study website. Retrieved 12/30/2010 at http://acestudy.org/
- xii Santa Clara County Public Health. Health and Social Inequity in Santa Clara County, Executive Summary, 2011, www.phd.sccgov.org
- xiii Students with Persistent Problems, The Visual Connection, Dr. Leonard J. Press, OD, FAAO, School Nurse News, September 2000
- xiv Ibid
- xv National Conference of State Legislatures, *Helping Young Children Succeed Strategies to Promote Early Childhood Social and Emotional Development*, Research and Policy Report, September 2005.
- xvi The Dangers of Loneliness Marano, Hara Estroff; Psychology Today Thursday 21 August 2003
- xvii Study: Sex harassment an epidemic, David Crary, San José Mercury News, 11/7/11
- xviii CDC. Suicide among children, adolescents and young adults—United States, 1980-1992. MMWR Morbidity Mortality Weekly Report 1995; 44(15):289-91
- xix Behavioral Risk Factor Survey, Santa Clara County 2004 Chartbook, Santa Clara County Public Health Department, 2004
- xx School Engagement Improvement Project Final Report, August 2011