### **California Healthy Start**

Seed Funding to Build Partnerships for Student Success

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### **California Healthy Start** Seed Funding to Build Partnerships for Student Success

This report highlights the promise of utilizing schools as access points for a range of critical services for children and their families in California's low-income communities. We showcase six (former) California Healthy Start grant recipients that have successfully built robust partnerships among the school district, local government, and community-based agencies. These success stories suggest that providing seed funding for planning and coordination of learning-support services is a worthwhile investment in communities—one that contributes to sustained partnerships, programs and services, and ultimately better outcomes for children and families.

The authors approached more than 30 communities and asked them to share the history, structure, and outcomes of their efforts to provide services through cross-agency collaboration and partnerships. Each community was known to be currently engaged in interagency partnerships focused on meeting the needs of children and families and to have, at some point, received a Healthy Start grant(s). The featured communities were chosen based on the following criteria:

- Each partnership is well established in the community, having sustained operations between 12 and 19 years.
- Each attributes the origins of its current operations to a Healthy Start grant(s).
- Each was able to expand its efforts beyond the number of school sites originally funded by Healthy Start grant(s) or sustain a district-level effort to serve the school sites with the greatest need.
- Each was able to provide details about the amount of additional resources it has been able to leverage as well as the impact of its efforts.
- Each collects evaluation data.

#### California Healthy Start History / Intent

California Senate Bill 620, the Healthy Start Support Services for Children Act (SB 620), was passed in 1991. Led by Governor Pete Wilson and Senator Robert Presley, the bill was a bipartisan effort to promote educational success by removing barriers to student learning. Rather than prescribe specific services, SB 620 provided one-time seed money to local education agencies (LEAs) to help children and their families gain access to a comprehensive array of learning supports provided through a combination of communityschool partnerships and school-linked services.

Through this process, California policymakers supported local capacity to align the needs of individual students with critical and often under-utilized community assets. After the three-year funding period ended, LEAs were accountable for sustaining partnerships, programs and services on their own. (Note: Many LEAs received multiple Healthy Start grants because each site is funded as part of a new cohort.)

#### **The Efficacy of California Healthy Start** Expansion Beyond Initial Healthy Start Sites and Funding Leveraged Through Partnerships

A number of local partnerships initiated by a Healthy Start grant(s) continue to provide the students and families they serve with resources that advance the academic achievement of traditionally under-served populations. Many of the former grantees have expanded their reach beyond the number of originally funded sites, in some cases developing districtwide systems and strategies.

These programs are characterized by well established cross-agency partnerships and their ongoing ability to utilize the combined resources of families, communities, counties, cities, nonprofit organizations, businesses, school(s), and district(s). Each of the six communities showcased in this report were able to first leverage Healthy Start dollars to establish the collaboratives and to then go on to leverage additional resources (both monetary and in-kind) to further develop and expand the services students and families need to be successful. **Table 1** (below) shows the extent to which the six communities included in this report have sustained or expanded beyond their original Healthy Start grants, as well as the degree to which they are currently able to leverage resources (both monetary and in-kind).

There is variation across the partnerships, but available information clearly suggests that these six communities

have been successful in leveraging the original Healthy Start seed money to sustain or increase the range of learning supports available to children and families within their communities.

Table 1: Healthy Start Seed Funding: Impact and Leveraging					
Name of Partnership	Local Education Agency (LEA)	<b>1st Year Healthy Start</b> <b>Grant Awarded</b> (total years in operation)	# School Sites in LEA that Received Healthy Start Grant Funding (# school sites served by partnership in 2010)	Leveraging Ratio	
Community Agencies for Caring Connections	Bellflower USD	1992 (19 yrs)	5 (15)	1:16	
Youth and Family Resource Centers	Sacramento City USD	1992 (19 yrs)	14 (19)	1:6	
Lake County Healthy Start	Lake County Office of Education	1994 (17 yrs)	9 (20)	1:3	
Redwood City Community Schools	Redwood City SD	1995 (16 yrs)	4 (12)	1:17	
Family Solutions Collaborative / Montclair Community Collaborative	Ontario-Montclair SD and City of Montclair	1997 (14 yrs)	12 (32)	1:3	
Julian Pathways Center for Family, Schools and Community	Julian USD	1999 (12 yrs)	1 (2)	1:9	

#### Notes:

The first column identifies the Healthy Start grant recipients being showcased, and the second column identifies the LEA (school district) served by that partnership.

Column 3 of the matrix indicates the first year the LEA was awarded a Healthy Start grant, followed by the approximate number of years the partnership has been in existence (in parentheses).

The first number in Column 4 shows the total number of school sites within the LEA that were awarded a Healthy Start grant and the second (in parentheses) indicates the total number of school sites involved in the partnership in 2010 (i.e. the expansion of the effort beyond the original Healthy Start grant(s)). For instance, between 1992 and 2010, Bellflower Unified School District drew upon Healthy Start seed funding to provide learning support services at five of its school sites. In 2010, the partnership, Community Agencies for Caring Connections was providing learning supports to 15 of the district's school sites.

The final column is based on information provided by the partnerships and provides a ratio that shows the estimated value of leveraged services. See Appendices A and B for more detailed information about how the ratios of education funding to other sources were calculated.

## A Closer Look at the Six Showcased Partnerships

#### Bellflower Unified School District / Caring Connections

Bellflower Unified School District's Community Agencies for Caring Connections benefited from five Healthy Start grants received between 1992 and 2006 (Bellflower has a currently funded Healthy Start site). As a nonprofit organization, Caring Connections focuses its efforts on providing case management and comprehensive resource and referral services for students and families at each of Bellflower's 15 school sites. The partnership between Caring Connections and Bellflower enables the district to leverage \$15.67 in support of coordinated health and social services for every education dollar it invests.<sup>1</sup> This high leveraging ratio is possible because the school district invests in the cost of 15 case managers that connect students and families to a wide range of services. The value of those services, offered in-kind by partner organizations, are captured in this leveraging ratio.

#### Sacramento City Unified School District

Sacramento City Unified School District's Office of Integrated Support Services operates 19 youth and family resource centers at schools throughout the district. The resource centers are managed centrally, a feature which allows the district to coordinate a wide array of support services, take on policy issues within the school district and county, and to provide input on state and national legislation. This district was particularly successful in securing Healthy Start grants (a total of fourteen grants were awarded between 1992 and 2009). They currently leverage \$6.00 in partner services for every dollar of direct Youth and Family Resource Center funds. This leveraging ratio captures both grant funding secured as well as resources provided in-kind at school sites, including social work interns, community mental health providers, substance abuse services, language assistance, legal aid, and health advocacy.

#### Lake County Office of Education / Lake County Healthy Start

The Lake County Healthy Start program is unique in that the LEA is a County Office of Education (LCOE)

rather than a school district. In 2009, this program served over 2,500 students and their families at 20 schools across all of Lake County's seven school districts. This countywide approach started with a single Healthy Start grant at an elementary school in 1991. LCOE has received Healthy Start funding for nine school sites in all. For every dollar in education funding spent, this effort leverages an additional \$3.00 from other sources. LCOE pays for central administration, including a director and an administrative support person, and leverages services via grants and in-kind contributions through the County's First 5 Commission, the County Social Services Department, and a myriad of other community-based service providers.

#### Redwood City School District / Redwood City Community Schools Initiative

Redwood City School District received its first Healthy Start grant in 1995 and now has four sites with schoolbased family resource centers and an additional eight sites offering extended day programs. Two of these additional sites are being developed as full service community schools. The effort is now referred to as the Redwood City Community Schools Initiative with the district as the lead agency and the district's partners formally organized as Redwood City 2020, a community collaborative comprised of representatives from city government, two school districts, county agencies, and local nonprofit organizations. For every education dollar invested, the Redwood City Community Schools initiative leverages \$16.91 in other sources. Redwood City's leveraging ratio captures grants secured and the fiscal contributions made by each partner organization including the city, county health and human services, the county sheriff's department, and funding for afterschool programs from the district itself.

#### Ontario-Montclair School District / The Family Solutions and Montclair Community Collaboratives

The Family Solutions and Montclair Community Collaboratives serve the Ontario-Montclair School District. Together they have received eight Healthy Start grants since 1997. These two collaboratives collectively serve all 32 schools in the Ontario-Montclair School District through outreach staff and a network of family resource centers. Each school site currently offers or links to case management, mental health services, primary care services, afterschool programs, and parent education. For every education dollar invested, \$2.70 is leveraged from other sources. Ontario-Montclair did

<sup>&</sup>lt;sup>1</sup> Investments from a school district's general fund or special education and other categorical education funds directed to LEAs via a standing formula were counted as education funds.

not include the value of in-kind services in the calculation of their leveraging ratio; instead this figure captures only the value of education and mental health services grants and contracts the partnership has been able to secure.

#### Julian Union School District / Julian Pathways Center For Family, Schools and Community

The Julian Pathways Center for Family, Schools and Community serves the two schools that form Julian Union School District. The Center currently serves 368 students within the district's boundaries—a rural area of 600 square miles—providing a spectrum of integrated support that spans the areas of youth development, family services, academic enrichment, health, and mental health. Giving credit to a mutually supportive partnership, Pathways services are funded without a single dollar from the school district general fund. Community partners represent a significant source of funding for support services. For every dollar in education funding, Pathways leverages \$9.00 in additional support, primarily through grants and Medi-Cal LEA Billing Option funding.

#### **Improving Educational Outcomes**

Between 1992 and 2006, the California Department of Education awarded a total of 823 Healthy Start planning grants, 651 operational grants, and 19 combined grants. Over 1,500 school sites and more than 1 million students have been positively impacted (CDE Healthy Start Fact Sheet, 2009). A 1996 statewide longitudinal evaluation of the first three years (1991-94) of Healthy Start conducted by Stanford Research Institute (SRI) International reported improvements for children, including statistically significant improved reading and math test scores at both the school and individual student level. Additionally, student attendance data reveals that student mobility decreased significantly during the evaluation time period.

The SRI evaluation also provided several recommendations for strengthening Healthy Start local initiatives, including 1) Better integration of services with schools by including teachers in designing service plans of their students and providing teachers with better feedback about the students they refer; 2) Inclusion of parents and families on collaborative decisionmaking bodies; 3) Greater support for coordinator time to manage and lead local initiatives; 4) Better follow-up for integration of services into a comprehensive service plan that meets the needs of students; and 5) Recognition of the trade-offs between a single-school and a multiple-school focus, wherein the former affords a greater sense of ownership and inclusion of the school community and the latter is more likely to affect systemwide change.

In March 1999, the California Department of Education produced a profile from Healthy Start grantee annual evaluation reports, which suggested that academic results for students most in need increased. Test scores for schools in the lowest quartile improved substantially, with reading scores for the lowest performing elementary schools increasing by 25 percent and math scores by 50 percent. Individual students in the lowest quartile showed similar improvement.

In 2001, the University of California, Los Angeles (UCLA) released an evaluation that specifically addressed the issue of sustainability. At that time, it was reported that an estimated 80-84 percent of the Healthy Start programs remained active at some level beyond the initial funding period. The UCLA study also indicated that 24 percent of the currently funded and 56 percent of post-funding Healthy Start grantees reported having undergone additional evaluations.

To the authors' knowledge, no analysis of the collective results of those local evaluation efforts has taken place, making it difficult to draw reliable conclusions about the overall impact of Healthy Start seed funding at the partnership level. Because this analysis has not been done, no conclusions can be drawn about the success of the Healthy Start Support Services for Children Act (SB 620) in meeting its goals. Certainly, as the six partnerships highlighted in this report show, at least some of the communities who have benefited from Healthy Start seed funding have shown it to be a valuable investment that has led districts to find ways to sustain the partnerships, programs, and services created through the use of Healthy Start seed funding.

One example of a recent and ongoing local evaluation effort is the work being done by the Redwood City Community Schools partnership which is tracking the relationship between participation in supplemental community school programs and a variety of youth development outcomes to understand the extent to which community school programs are fostering growth in these desired areas. Early findings from this analysis show that the community school programs are reaching a large percentage of the youth enrolled in the community schools, as well as a large percentage of their parents. Further, students participating over two years had significantly higher gains on the speaking and writing subtests of the California English Development Test (CELDT), and supplemental program participants had higher school attendance rates.

Wentworth (2010) provides a second example of a recent evaluation effort that found positive results in academic outcomes at the program level. Her investigation of E. R. Taylor Elementary School's Healthy Start Room (San Francisco Unified School District) found

Table 2: Program I	Table 2: Program Level Data Collection and Outcomes			
Program	Type(s) of data collected and examples of outcomes			
SCUSD Youth and Family Resource Centers	<ul> <li>Academic and youth development data links presence of social/emotional support to academic achievement:</li> <li>Over 77% (N=705) of students at high risk of academic failure referred by teachers maintained or improved Math and English scores on the California Standards Test (CST).</li> <li>Of students referred for academic challenges who were functioning below basic proficiency in English or math, 33% improved their language skills and 27% increased their level of Math proficiency.</li> <li>Of those referred for behavioral challenges who were functioning below basic proficiency in math (N=355) or English (N=394), 30% increased their level of math proficiency and 28% improved their language skills.</li> </ul>			
Redwood City Community Schools	<ul> <li>Program participation data linked to positive academic outcomes:</li> <li>Taft Elementary school participants had higher CST proficiency rates in both math and ELA in 2007-08 than nonparticipants.</li> <li>Students participating in community school programs over two years, particularly those with parents who participated in both years, had significantly high gains on the speaking and writing subtests of the CELDT.</li> <li>Community school program participants had higher attendance rates.</li> </ul>			
Family Solutions Collaborative / Montclair Community Collaborative	<ul> <li>Links program participation to positive academic and youth development outcomes including increased school attendance, increased access to learning supports and services, and improved mental health outcomes.</li> <li>Overall the District Academic Performance Indicator (API) has increased from 559 in 2001 to 740 in 2010.</li> <li>Students served by intensive case management services in 2008-09 attended school on average 3.3 more days than before the intervention (N=380). Students served by counseling program in 2008-09 attended school on average 2.2 more days than before the intervention (N=729).</li> <li>Families served through Case Management services in 2008-09 exhibited 24% improvement in parenting skills, 17% improvement in employment and income, 13% improvement in mental health, 19% increase in access to community supports, and 13% improvement in access to basic needs support.</li> <li>64.9% of students served by Counseling program showed significant improvement in mental health outcomes.</li> </ul>			
Julian Pathways Center for Family, Schools and Community	<ul> <li>Links social/emotional support to academic and youth development outcomes:</li> <li>Overall, the District Academic Performance Indicator (API) has increased from 731 in 1999 to 825 in 2010. API increased in 2010 for three subgroups: socioencomically disadvantaged, Latino or Hispanic students, and English learners.</li> <li>Disciplinary measures have decreased by 45% in the past three years.</li> </ul>			

moderate correlations between Healthy Start services and positive trends in student outcomes. E. R. Taylor received a Healthy Start grant in 1992. Since then they have seen significant increases in academic achievement including growth in API from 444 in 2000 to 784 in 2009; 43.3 percent of English Language Learners proficient or advanced on California Standards Test (CST) in English; and 67 percent of Hispanic/Latino(a) and socioeconomically disadvantaged subgroups are proficient on the mathematics CST. While careful not to suggest a causal relationship between the Healthy Start Room and changes in student achievement and behavior, Wentworth does note that Healthy Start was one of the school's main approaches to support student outcomes between 2005-2006 and 2008-2009.

The partnerships featured in this report do collect evaluation data. **Table 2** (above) provides an overview of the types of outcomes data being collected at four of the sites.

#### Recommendations

Based on the successes highlighted in this report, the authors make the following recommendations regarding state-level support for future efforts to build interagency partnerships on the local level.

#### **Grant Program Providing Seed Funding**

Given the results achieved by the communities highlighted in this report, reauthorizing funding for a Healthy Start-like grant program should be undertaken as soon as the state budget allows. Some fairly minor changes to the original Healthy Start guidelines to strengthen the program's catalyzing effects should be made, such as limiting grant funding use to planning and coordination activities versus direct service delivery; requiring greater commitment on the district level to expanding partnership strategies beyond individual or single sites; encouraging greater involvement on the part of county health and human service agencies; and requiring more intentional integration of plans for providing learning support services into the educational systems at the school site and district level. In addition, guidelines for tracking outcomes that allow comparison across communities, as well as better longitudinal tracking on a statewide level, are also recommended.

#### Children's Cabinet / Council – Improved Interagency Partnering at the State Level

Successful Healthy Start efforts made genuine partnerships with county health and human services agencies—tapping into critical sources of service funding and expertise. Better coordination at the state level between agencies and across program and service areas could help efforts to break down funding and program silos at the local level. A Children's Cabinet or interagency council should be charged with this work.

#### California Department of Education / Guidance Around Best Practices

Successful Healthy Start grantees report that the technical assistance they received, especially around the stages of the planning process, was invaluable in building the sustained systems change to support their interagency partnerships. To the extent possible, the California Department of Education should provide information regarding best practices and successful examples for any school district attempting to build interagency partnerships to provide learning support services—with or without a grant program.

#### Conclusion

Evidence from almost 20 years of awarding Healthy Start grants in California's schools as a strategy for seed funding local interagency partnership building suggests that California's neediest students have benefited through increased student learning and improvement in other developmental trajectories. While the collection of longitudinal grantee data-a design well beyond the scope of this report-would be necessary in order to draw more definitive conclusions, the authors' interviews of sustained Healthy Start grantees, as reported here, do strongly suggest a positive interaction between leveraging Healthy Start seed funding and increasing student outcomes. Similar approaches to interagency partnerships that utilize schools as core institutions of local communities should be adopted to align critical resources for supporting student success and community well-being.

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#### **Appendix A**

#### 'Education' / 'Other Sources' Leveraging Ratios: How They Were Calculated

For this report the authors asked each of the seven sites to calculate the value of leveraged services. They did this by reporting the ratio between the total "education" funding dollars received by their site in the 2009-2010 academic year and the total of "leveraged" resources – including both fiscal and in-kind resources.

**Table 3** (below) shows typical funding streams on either side of this equation. Investments from a school district's general fund or special education and other categorical education funds directed to LEAs via a standing formula were counted as education funds. Any exceptions to this method of calculating leveraging ratios for each community are noted in the descriptions of each partnership found on pages 3–4.

Primary sources of leveraged funds include: grants from local, state, and/or federal public agencies; LEA Medi-Cal Billing Option; Medical Administrative Activities (MAA) program; grants from private foundations; and in-kind contributions via services paid for or directly provided by partner agencies either through a local government entity or community-based organization. Afterschool funding via the California After School Education and Safety Program (ASES) or 21st Century Community Learning Centers Program were considered grants and therefore, leveraged funds. An exception was made for current Healthy Start grants. Those grants are factored in on the education funding side of the ratio.

Education Funding	Leveraged Funding Streams           Leveraged Funding	
	School-based, but generated by leveraging activities or applying for grants	
District general fund	MAA (Medi-Cal Administrative Activities)	
Title I	LEA Medi-Cal Billing Option	
AB 825 Targeted Instructional Improvement Block Grant (TIIG)	Grants from the federal Department of Education	
Quality Education Investment Act (QEIA)	Safe and Supportive Schools	
Economic Impact Aid (EIA)	School Community Violence Prevention	
State Compensatory Education (SCE) funds	Afterschool ASES	
School Safety Consolidated Grant Program) (SCVP)	21st Century Community Learning Centers	
McKinney-Vento Homeless Education Assistance Act <sup>1</sup>		
Foster Youth Services		
Healthy Start grant – current	Funding from community partner, e.g., other government entities / county (health and social services)	
	<ul> <li>First Five (School Readiness, Nuturing Parent program, etc.)</li> <li>Mental Health Services Act</li> <li>Early Periodic Screening, Diagnosis, and Treatment (EPSDT)</li> <li>Differential Response (Child Welfare Services)</li> <li>PAL Program</li> <li>Community Development Block Grant</li> <li>City / County Discretionary Funding</li> </ul>	
	Funding provided as in-kind services by partner agencies	
	Private donor / foundations	

<sup>1</sup>While **McKinney-Vento Homeless Education Assistance Act** funds are technically considered competitive, we understand that applications are very rarely denied. Therefore, we treated McKinney Vento funds like a formula-based education funding source.

#### **Appendix B**

### Calculating Leveraging Ratios: Detail from Each Community

#### Bellflower Unified School District / Caring Connections

Fifteen case managers are paid for by the district through contribution of Medi-Cal Administrative Activities (MAA) funds—considered a leveraged fund (see Appendix A). The district also contributes office space. Other than a current Healthy Start grant, the district contributes no additional fiscal resources to the partnership. Case managers connect students and families to a wide range of support services (offered in-kind by partner organizations) the value of which are captured as leveraged resources in Bellflower's leveraging ratio.

#### Sacramento City Unified School District (SCUSD)

Each of the 19 participating school sites contributes funds for administrative activities. These contributions are comprised most commonly of Title I funding. The district contributes funding from the LEA Medi-Cal Billing Option, the Targeted Instructional Improvement Block Grant program, and the McKinney Vento Homeless Assistance Education Act. SCUSD included the LEA Medi-Cal Billing Option funds on the education side of its leveraging ratio, in exception to the matrix found in Appendix A. In addition, SCUSD did not include afterschool program grants in its calculation. On the leveraged resources side of SCUSD's leveraging ratio, a conservative estimate was made for the services delivered in-kind at school sites including social work interns, community mental health providers, substance abuse services, language assistance and cultural brokerage, legal aid, and health advocacy.

#### Lake County Office of Education / Lake County Healthy Start

There is an exception in the calculation of Lake County's leveraging ratio – that is, Lake County counted its contribution of Medi-Cal Administrative Activities (MAA) funds as education funding instead of leveraged funds. Lake County also contributes McKinney Vento and Foster Youth Services funding to the leveraged funding and services from its other partners-including First 5, the County Social Services Agency, and the local hospital district. The seven districts provide funding for services via the Medi-Cal LEA Billing Option. These funds are not used for administration and are counted as leveraged. No other financial contributions are made by the local school districts. In-kind contributions are made through the County's First 5 commission, the County Social Services Department and a myriad of other communitybased service providers. A conservative estimate of the dollar value of these services was made in calculating Lake County's leveraging ratio.

#### Redwood City School District / Redwood City Community Schools Initiative

Redwood City School District contributes general funds as well as Title I funds for administration of its community schools initiative. With those education funds, the district leverages funding through education-related grants, including After School Education and Safety (ASES) and 21st Century afterschool program grants and a School Violence Prevention grant; and fiscal and in-kind resources from its core partners including Redwood City, San Mateo County's Human Service Agency<sup>1</sup>, the County Sheriff's Office, San Mateo County's First 5 commission, San Mateo County's Children's Health Initiative, and an Early Mental Health Initiative grant<sup>2</sup>.

#### Ontario-Montclair School District / The Family Solutions and Montclair Community Collaboratives

Ontario-Montclair School District's leveraging ratio is based on amounts of cash-in-hand invested by the district or its shared fiscal agent, the City of Montclair. It does not included resources commit-

<sup>&</sup>lt;sup>1</sup> The city and county contribute fiscal resources for community school administration and Redwood City 2020 infrastructure. In addition, the County contributes funding from the County Child Welfare Department for services through the Differential Response program.

<sup>&</sup>lt;sup>2</sup> The Early Mental Health Initiative makes grants available to elementary schools for mental health services.

ted in-kind by agency partners—amounts which represent the vast majority of resources committed to the effort. Leveraged resources include funding from the local First 5 commission, an Early Mental Health Initiative grant, Mental Health Services Act, and Early Periodic Screening, Diagnosis and Treatment (EPSDT) – the children's Medi-Cal program.

#### Julian Union School District / Julian Pathways Center For Family, Schools and Community

Julian Pathways' leveraging calculation does not include the district's afterschool program grants. If those funds were included in the calculation, the leveraged amount per education dollar would be approximately \$10.43. Julian Pathways has over 100 partners helping to offer services. Their leveraging ratio is based on a combination of actual values provided by partners, estimated costs of the school district having to provide the service itself and conservative best estimates—i.e., services are not accounted for in this ratio if no good estimate could be made.





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