# Advancing student and staff health using COVID relief funding

September 20, 2021
12:00 PM

PARTNERSHIP FOR CHILDREN & YOUTH

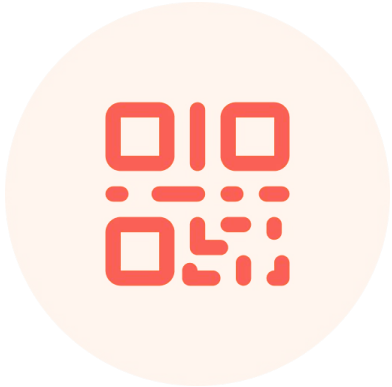
CALIFORNIA SCHOOL-BASED HEALTH ALLIANCE
Putting Health Care Where Kids Are

KAISER PERMANENTE®

# Agenda

- Welcome and introductions
- Overview of federal COVID relief funds
- Implementation guidance from the ground
  - Napa County Office of Education
  - Placer County Office of Education
  - California School-Based Health Alliance
- Q and A

slido



# Join at slido.com
# #115872

ⓘ Start presenting to display the joining instructions on this slide.

slido

# Who is in the "room?"

ⓘ Start presenting to display the poll results on this slide.

# ESSER Basics

- Planning and coordination with public health
- Programs, outreach, and services
- Mental health services & integrated student supports
- Summer learning & supplemental after-school programs
- Supplies/training to ensure sanitation & minimizing spread
- Planning/coordination during long-term closures
- Improving distance learning & addressing learning loss
- Facility repairs & improvements to reduce risk of virus transmission

# Strategic Planning for Sustainable Impact

- **Short Term Projects (0-12 months)**: Planning for school reopening, immediate response/restorative restart, initial planning
- **Mid-Term Projects (0-24 months)**: Planning and executing sustainability strategies, including staffing, partnerships, capacity building
- **Long-Term Projects (0-36 months)**: Health and wellness systems and infrastructure; continuous improvement systems and staffing; partnership and coalition building strategies
- **Forward Thinking (36 months+)**: What funding sources can be leveraged to continue this work after COVID relief funds are spent?

| Student and Staff Wellness Priorities | Short-Term Project (0-12 months) Planning for school reopening, immediate response/restorative restart, initial planning | Mid-Term Project (0-24 months) Planning and executing sustainability strategies, including staffing, partnerships, capacity building | Long-Term Project (0-36 months) Health and wellness systems and infrastructure; continuous improvement systems and staffing; partnership and coalition building strategies | Forward Thinking... (36 months +) What funding sources can be leveraged to continue this work after COVID relief funds are spent? |
|---|---|---|---|---|
| COVID Prevention | Purchase personal protective equipment (PPE) for school staff<br>Hire staff or contract with organizations to facilitate testing and/or COVID vaccinations for eligible students<br>Purchase supplies to sanitize and clean facilities | Develop and implement procedures to prepare for future, extended school building closures<br>Invest in staff and time needed to establish community partnerships to ensure that eligible children have access to vaccinations, both for COVID and other viruses | Repair and improve school facilities, especially ventilation systems, to reduce exposure to COVID and environmental health hazards<br>Review policies, protocols, and lessons learned to inform crisis responses in the future | Title V Maternal and Child Health Services Block Grant Program (funding to local public health departments)<br>Medicaid (reimbursement for contact tracing, testing and vaccine administration)<br>Community benefit funding from local, nonprofit hospitals |
| Student Mental and Physical Health and Wellness | Engage students, families, school staff and community partners to understand needs and priorities<br>Conduct home visits to engage families and understand student needs<br>Universally screen students for unmet physical and mental health needs as they are returning, including trauma and stress<br>Fund school based health providers (e.g., nurses, social workers, psychologists) and community based health and wellness staff (e.g., community clinics) to conduct screenings and deliver school-based or school-linked services<br>Begin planning with community partners to develop or strengthen school-based wellness strategies, such as a school-based health center<br>Provide training and support for teachers and school partners on SEL, trauma-informed practice, stress management | Scaffold implementation of trauma-informed school practices to reduce the stress many students and staff members are experiencing<br>Implement and strengthen social and emotional learning programs<br>Create a peer health leadership/ mentorship program<br>Develop and implement mental health education curricula<br>Invest in school health equipment (e.g., vision and hearing screening equipment, AED and CPR equipment, diagnostic equipment)<br>Purchase an electronic health record system or other data platform to support tracking of student health issues and associate care<br>Invest in technology, training, and partnerships to establish and support a telehealth program<br>Assess facilities options for establishing or retrofitting designated school health spaces | Cultivate and strengthen staffing and sustainability strategies that include community partners, families, public agencies<br>Provide seed grants for implementation of school-based health centers | ESSA Title I, II and IV funding<br>Medi-Cal<br>USDA meal reimbursement<br>Federal grant funding (e.g. Project AWARE, School Climate Transformation Grants)<br>Community benefit funding from local, nonprofit hospitals<br>Funding from community partnerships and local philanthropy |
| Staff and Teacher Well-being* | Implement best practices for indoor air quality improvement (e.g., purchase new HVAC system, air purifiers) | Establish or renovate a designated staff wellness space<br>Establish processes that support collaboration and shared decision making among staff, teachers and administrators about their well-being | | ESSA Title I, II and IV funding<br>Funding from community partnerships and local philanthropy |

# CA FY ’21-22: Comprehensive Approach to Wellness

- $1 billion ongoing Proposition 98 and $753 million for **expanded learning time**;
- $52 million for professional development on **social-emotional learning & trauma-informed practice**; $10 million to support local education agencies (LEAs) in effectively **using Medi-Cal**;
- $4.4 billion to create a new **behavioral health system for youth ages 0 to 25**, with an emphasis on school-based services;
- $2.8 billion to expand **Full Service Community Schools**;
- $7 million in ongoing federal funding to expand **family empowerment centers**;
- $12 million to support **school climate surveys**;
- $50 million in one-time funds for **MTSS**;
- Breakfast and lunch for all students through the **Universal School Meals Program** by increasing state meal reimbursements by $54 million in the 2021-22 fiscal year and $650 million ongoing Proposition 98 funding beginning in 2022-23

# The Foundations

| | |
|---|---|
| Equitable engagement | Engage caregivers, youth, and community members to identify concerns/priorities. |
| Identify priorities | Use accessible health data and community knowledge to inform priorities. |
| Map your assets | Identify existing health/wellness assets in your school and community that can be leveraged and amplified with COVID relief funding. |
| Spend strategically | Choose interventions to meet identified needs. |
| Plan for sustainability | Identify mechanisms for sustainable funding and programming |

NAPA COUNTY OFFICE OF EDUCATION

Joshua Schultz
Deputy Superintendent / CBO
jschultz@napacoe.org

# Funding Timelines

| | |
|---|---|
| In Person Instruction Grants | 8/31/2022 |
| Expanded Learning Opportunities (AB 86) | 8/31/2022 |
| ESSER I | 9/30/2022 |
| Expanded Learning Opportunity Prog YR 1 | 6/30/2023 |
| ESSER II | 9/30/2023 |
| ESSEER III | 9/30/2024 |
| CA Community Schools Partnership Act | 6/30/2028 |
| MTSS | ? |
| LCFF | No deadline* |

# Give Yourself Permission to Think Strategically

- Start with the plans you already have - LCAP, Strategic Plans
- Don’t recreate the wheel (even if you are being asked to do so... )
  - AB130 - Special Education Funding/Plan(s) - SELPAs (10.01.21)
  - ESSER III Safe Return to In-Person Instruction and Continuity of Services Plan (revise at least every 6 months until 09.30.23)
  - ESSER III Expenditure Plan (10.29.21)
  - AB130 - Educator Effectiveness Block Grant (12.30.21)
  - AB130 - A-G Completion Improvement Grant (01.01.22)
  - AB130 - LCAP "One Time Supplement" (present by 02.28.22)
  - AB130 - CA PreK Planning & Implementation Grant (06.30.22)
  - AB130 - New LCAP template being developed by 01.31.22 (06.30.22)
- Do take the opportunity to stop doing things that were not working before the pandemic.

# One Time Funds

- Not for ongoing costs (i.e., things that eat)
- Think flexibly (but know the rules)
- One time investments with a long term payoff
  - Capacity building / PD
  - Infrastructure
- Criteria for success for new investments? Timeline for reevaluation?

PCOE

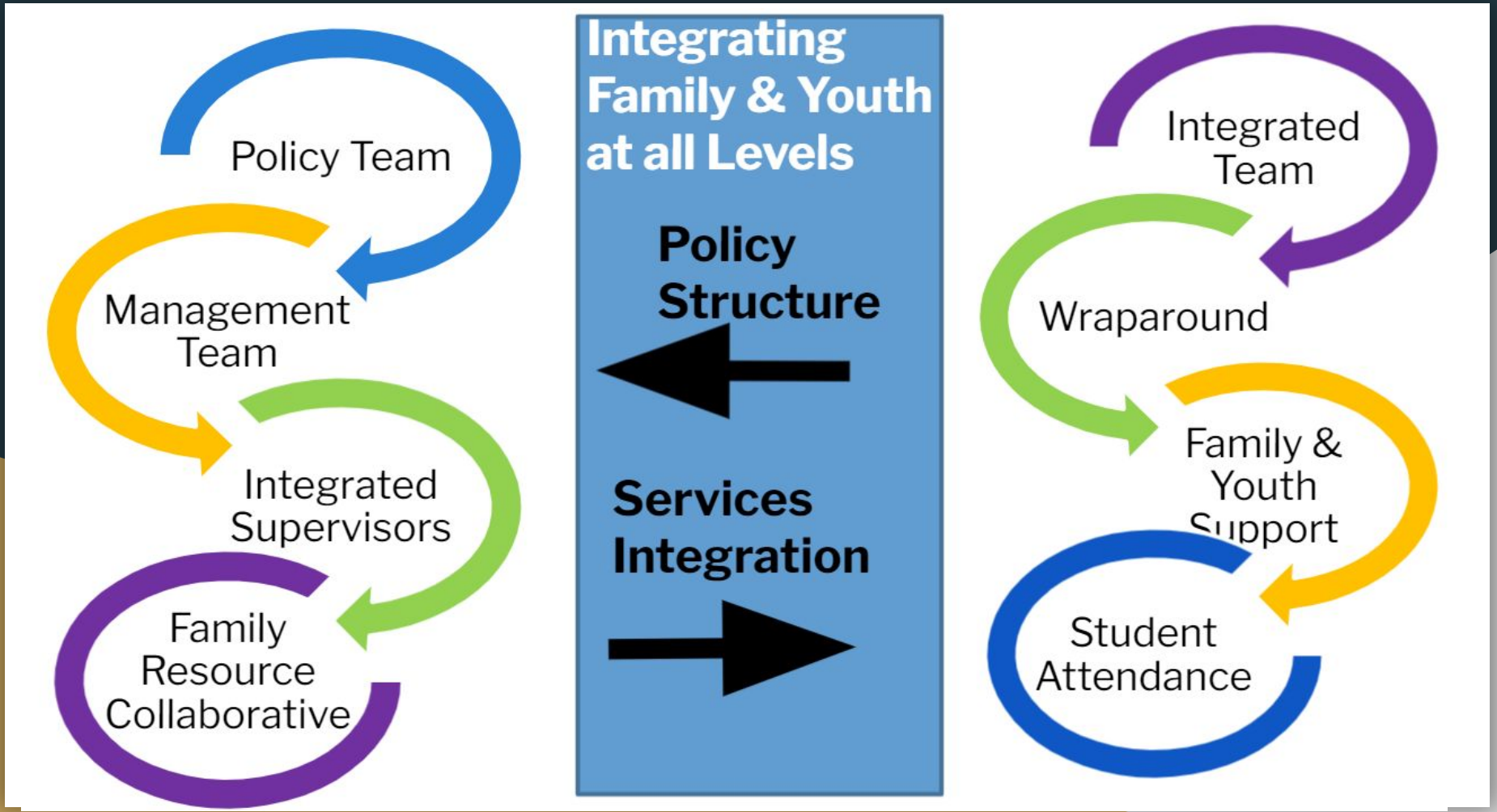
GOLD IN EDUCATION

**Gayle Garbolino-Mojica**
*County Superintendent of Schools*

"Alone we can do so little; together we can do so much."
-Helen Keller

**Michael Lombardo,**
***Executive Director***
***Prevention Supports and Services***
***mlombardo@placercoe.k12.ca.us***

COUNTY OF Placer®


Integrating Family & Youth at all Levels
Policy Structure
Services Integration
Policy Team
Management Team
Integrated Supervisors
Family Resource Collaborative
Integrated Team
Wraparound
Family & Youth Support
Student Attendance

# Integrating Multi-tier Support Between Public Agencies, Community Agencies and Schools

- Integrated **Collaborative** System of Care
- School based teams
- Nesting providers into school sites
- Coordinating connections between providers and schools

# First and Foremost

## It’s Collaboration

## Not Clobberation

# Braid Funding Sources to Maximize Impact of Services

Core/DA

ESSER

Medi Cal

Restricted

Stronger Outcomes & Sustainability

# Braid Funding Sources to Maximize Impact of Services

Core/DA

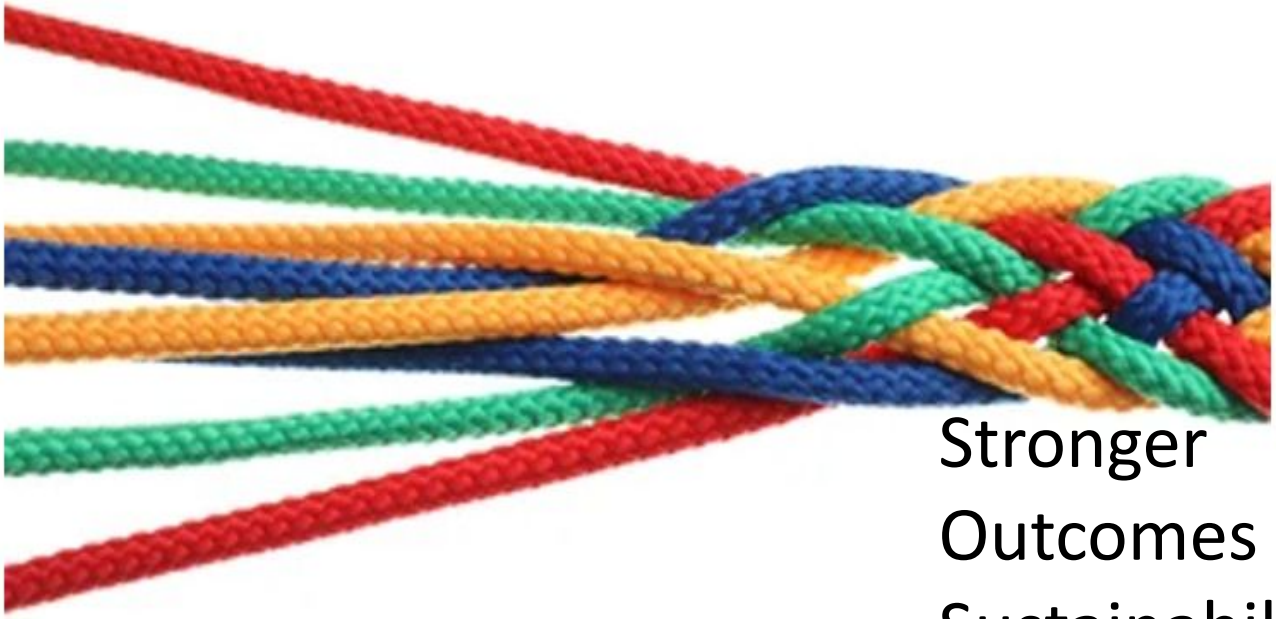
ESSER

Restricted

Medi Cal

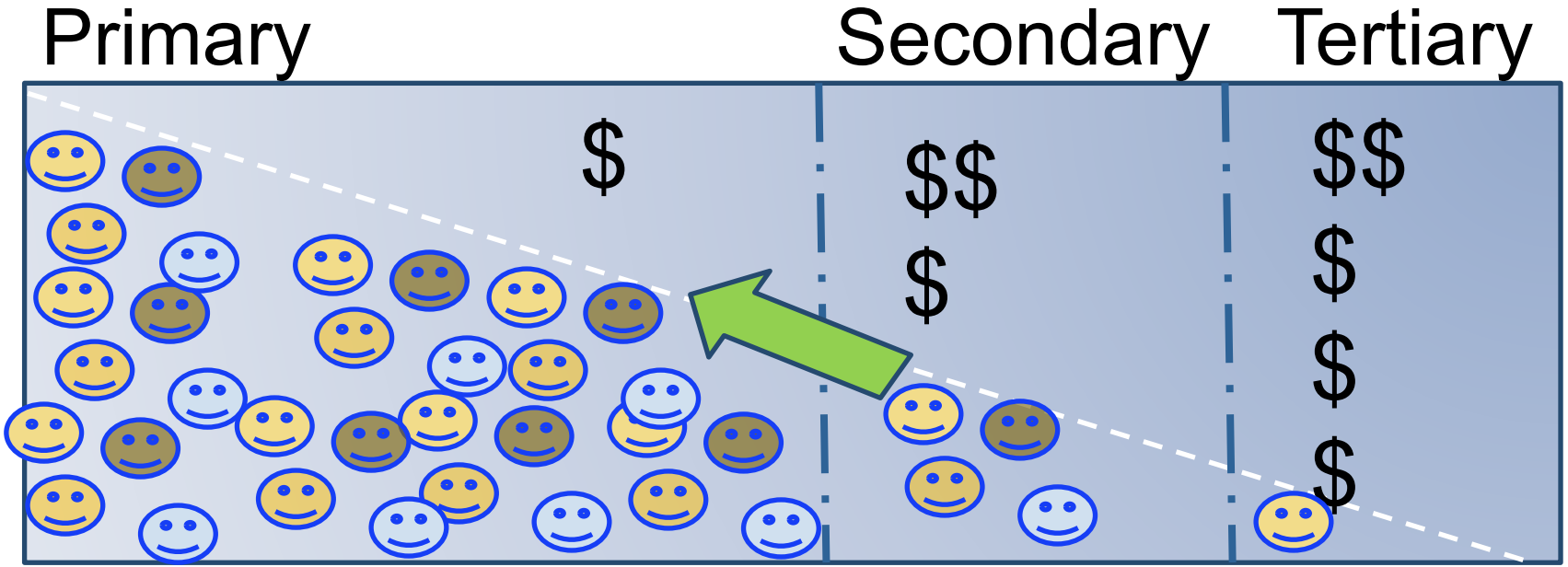
Local MHSA

Philanthropy / Grants

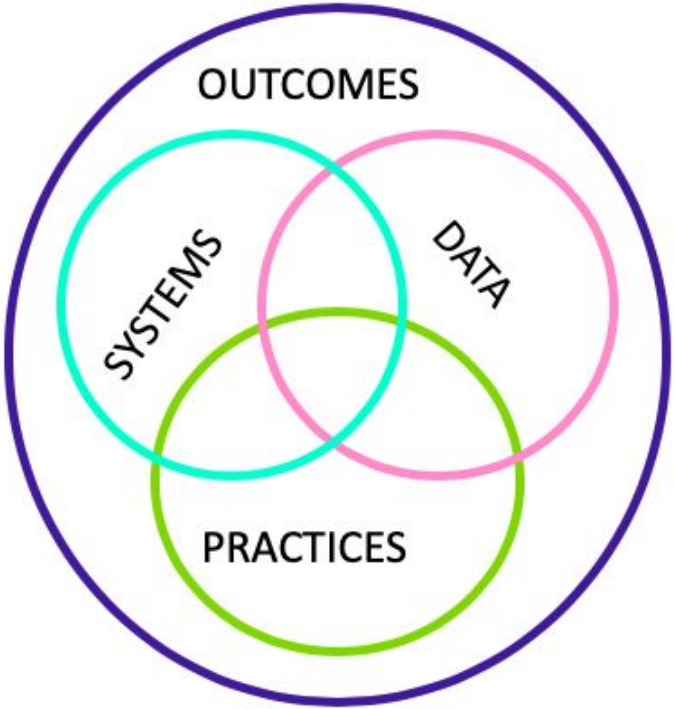


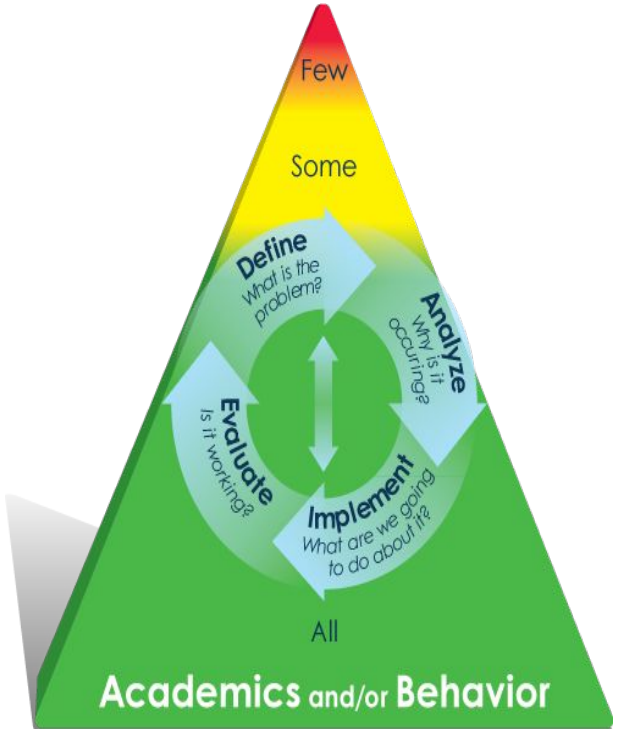
Stronger Outcomes & Sustainability

# Primary prevention helps more students with lower cost…

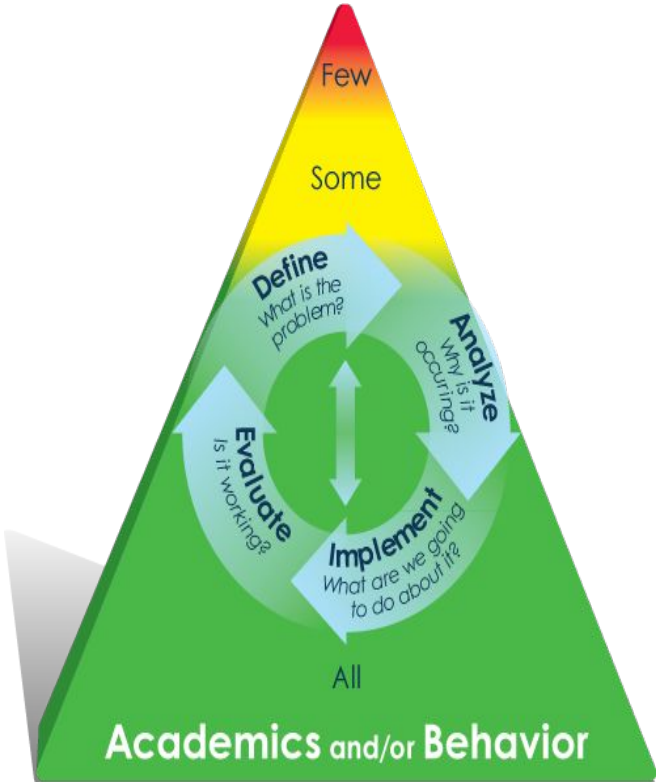


# Organize Supports



# Use Multi Tier System of Support (School)




**Tier III: Individual Practical Behavior Plan**

**Special Education**

**Wraparound**

**Applied Suicide Intervention Training**

**Incredible Years**

**Tier II: Check In Check Out**

**Check and Connect**

**Second Step  Teaching Pro-Social Skills**

**Steps to Respect**

**Mental Health First Aid**

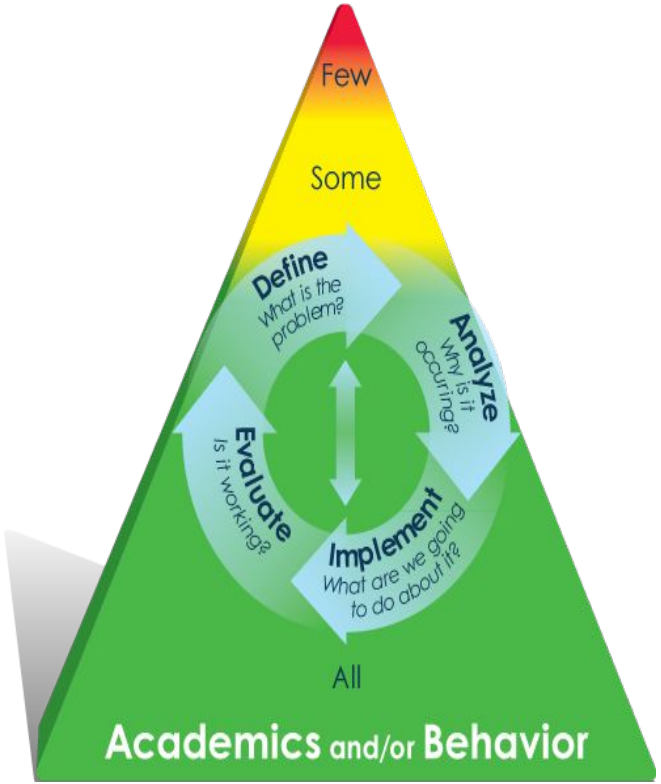
**Tier I: Universal Interventions – All Students**

**Second Step  Kognito At Risk**

**Simulation Steps to Respect**

**NAMI On Campus High School**

# Use Multi Tier System of Support (Community)



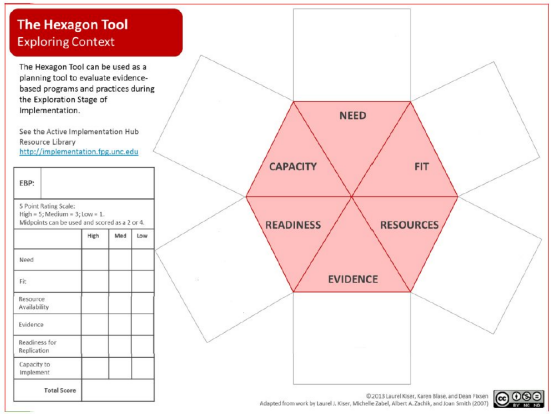

**Tier III: Functional Family Therapy**
**Wraparound**
**Parent Child Interactive Therapy**
**Incredible Years  Maternal Depression**
**Trauma Focus Cognitive Behavior Therapy**

**Tier II:  A2Y Mentor Program**
**Active Parenting**
**Teaching Pro-Social Skills**
**White Bison**
**Native Art/Drumming**
**Parent Project/Parent Project Latino**

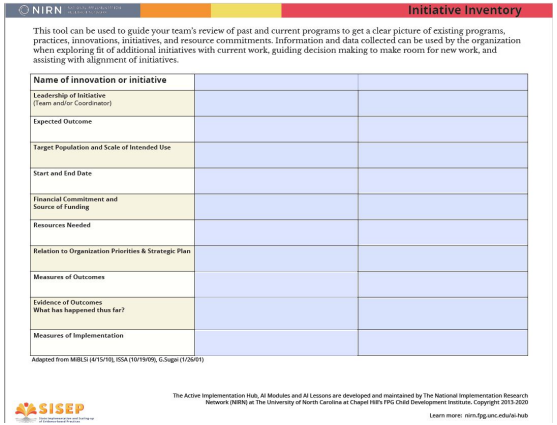
**Tier I: Universal Interventions – All Students**
**Network of Care / 211 Resources**
**Sierra Native Alliance**
**Latino Leadership Council**

# Monitor and Selection of Best Practices

## **Selection** - Hexagon Tool




## **Monitor** - Initiative Inventory



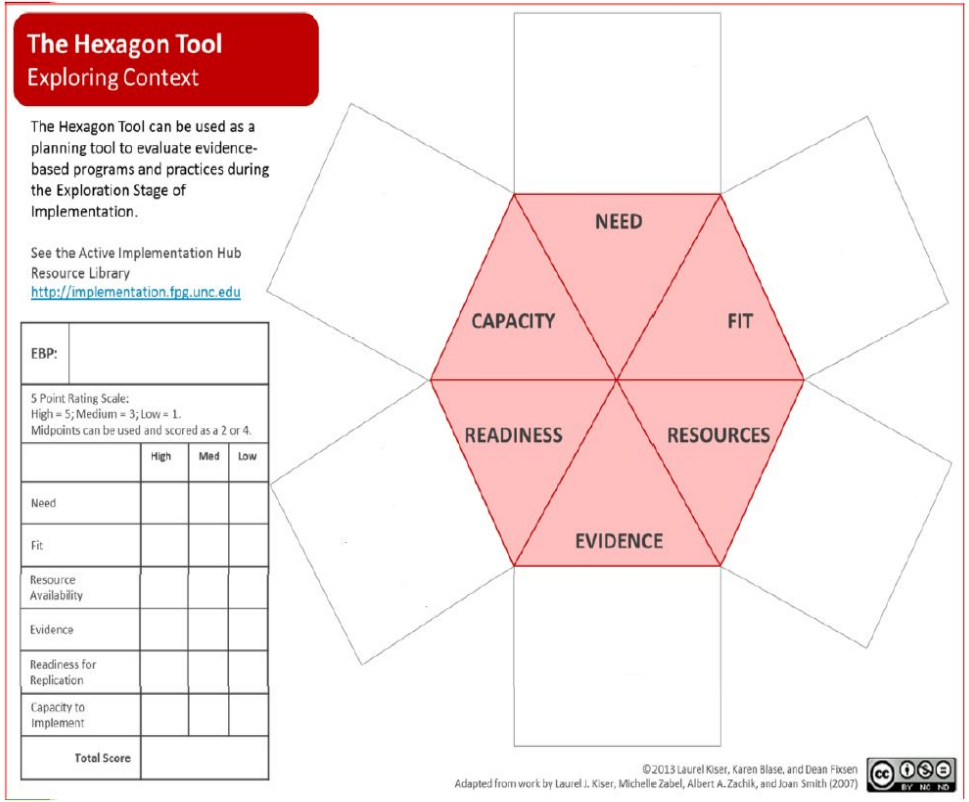

THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL

NIRN | NATIONAL IMPLEMENTATION RESEARCH NETWORK
FRANK PORTER GRAHAM CHILD DEVELOPMENT INSTITUTE

# Monitor and Selection of Best Practices

**Selection** - Hexagon Tool

https://nirn.fpg.unc.edu/resources/hexagon-exploration-tool



**The Hexagon Tool**
Exploring Context

The Hexagon Tool can be used as a planning tool to evaluate evidence-based programs and practices during the Exploration Stage of Implementation.

See the Active Implementation Hub Resource Library
http://implementation.fpg.unc.edu

| EBP: | | | |
|---|---|---|---|
| 5 Point Rating Scale: High = 5; Medium = 3; Low = 1. Midpoints can be used and scored as a 2 or 4. | | | |
| | High | Med | Low |
| Need | | | |
| Fit | | | |
| Resource Availability | | | |
| Evidence | | | |
| Readiness for Replication | | | |
| Capacity to Implement | | | |
| Total Score | | | |

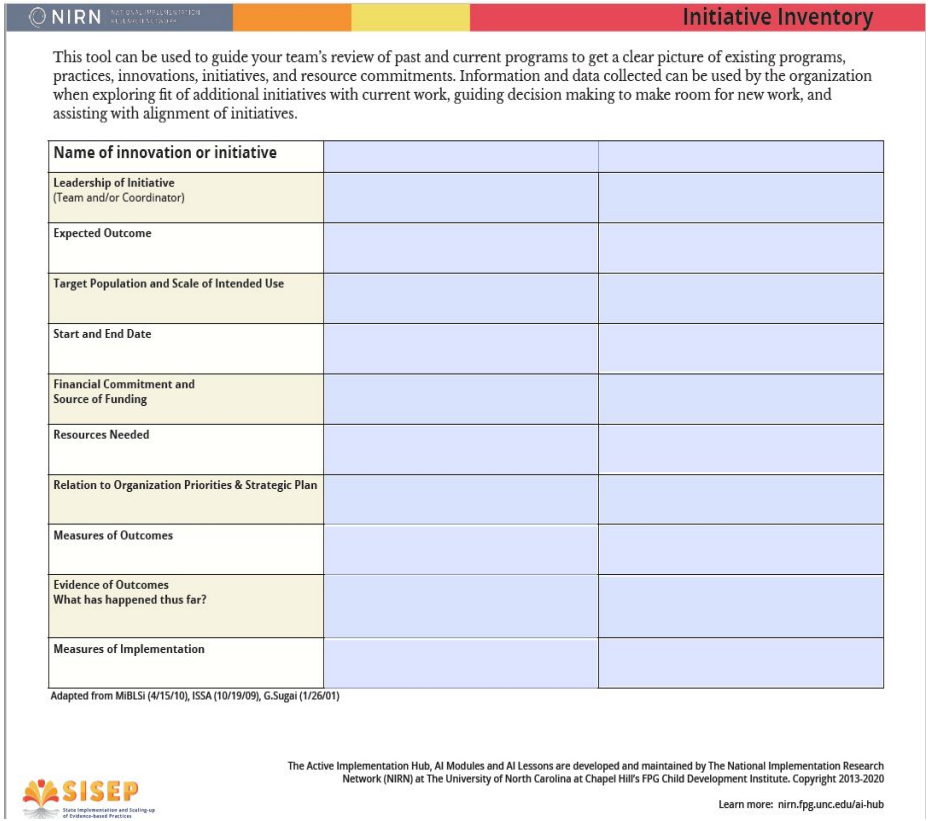


©2013 Laurel Kiser, Karen Blase, and Dean Fixsen
Adapted from work by Laurel J. Kiser, Michelle Zabel, Albert A. Zachik, and Joan Smith (2007)

# Monitor and Selection of Best Practices

**Monitor** - Initiative Inventory

https://nirn.fpg.unc.edu/resources/initiative-inventory



NIRN

Initiative Inventory

This tool can be used to guide your team's review of past and current programs to get a clear picture of existing programs, practices, innovations, initiatives, and resource commitments. Information and data collected can be used by the organization when exploring fit of additional initiatives with current work, guiding decision making to make room for new work, and assisting with alignment of initiatives.

| Name of innovation or initiative | | |
|---|---|---|
| Leadership of Initiative (Team and/or Coordinator) | | |
| Expected Outcome | | |
| Target Population and Scale of Intended Use | | |
| Start and End Date | | |
| Financial Commitment and Source of Funding | | |
| Resources Needed | | |
| Relation to Organization Priorities & Strategic Plan | | |
| Measures of Outcomes | | |
| Evidence of Outcomes What has happened thus far? | | |
| Measures of Implementation | | |

Adapted from MiBLSi (4/15/10), ISSA (10/19/09), G.Sugai (1/26/01)

SISEP State Implementation and Scaling-up of Evidence-based Practices

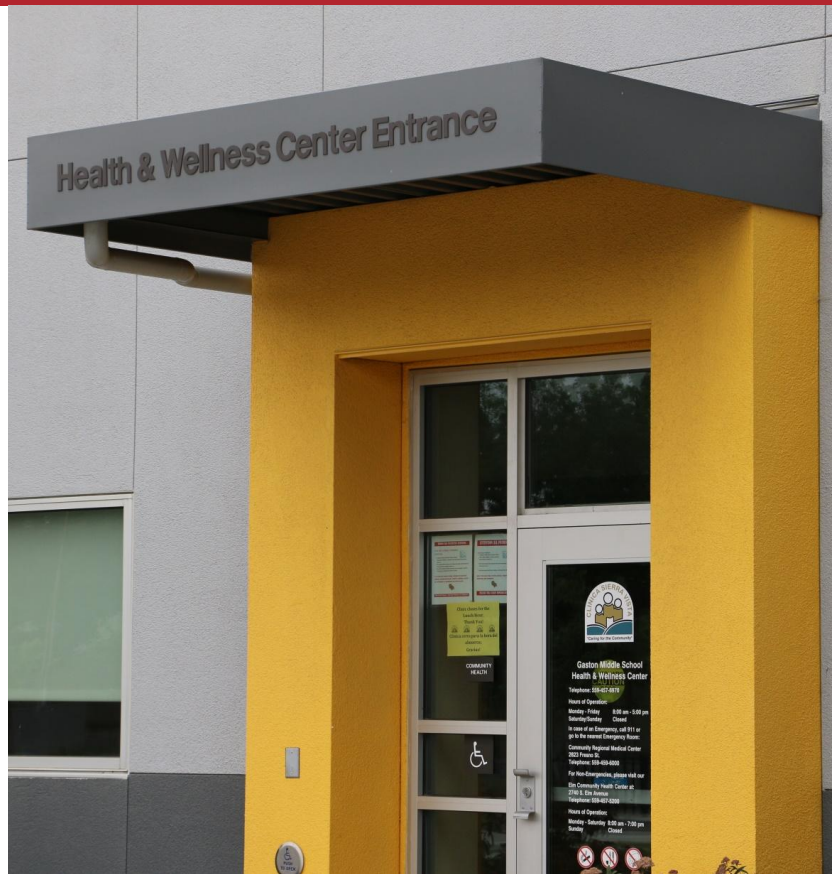
The Active Implementation Hub, AI Modules and AI Lessons are developed and maintained by The National Implementation Research Network (NIRN) at The University of North Carolina at Chapel Hill's FPG Child Development Institute. Copyright 2013-2020

Learn more: nirn.fpg.unc.edu/ai-hub

# Lisa Eisenberg

**Policy Director,**
**CA School-Based Health Alliance**
schoolhealthcenters.org

CALIFORNIA SCHOOL-BASED HEALTH ALLIANCE
Putting Health Care Where Kids Are



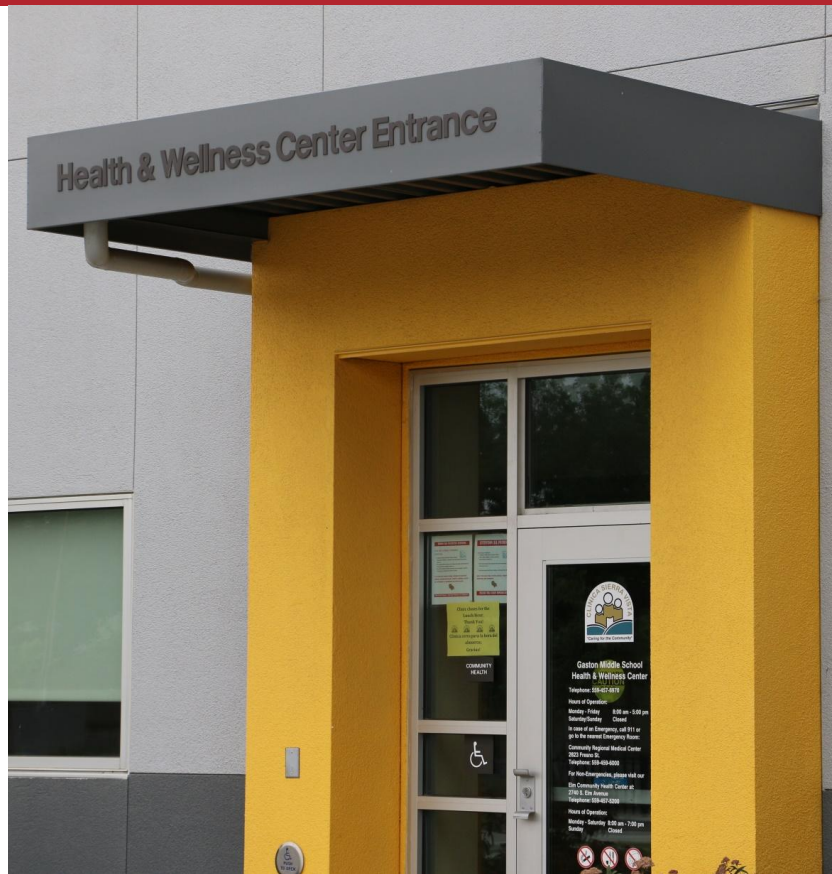
# Putting Health Care in Schools

The California School-Based Health Alliance is the statewide non-profit organization dedicated to **improving the health & academic success** of children & youth by **advancing health services in schools**.

**Learn more:**

schoolhealthcenters.org

CALIFORNIA SCHOOL-BASED HEALTH ALLIANCE
Putting Health Care Where Kids Are



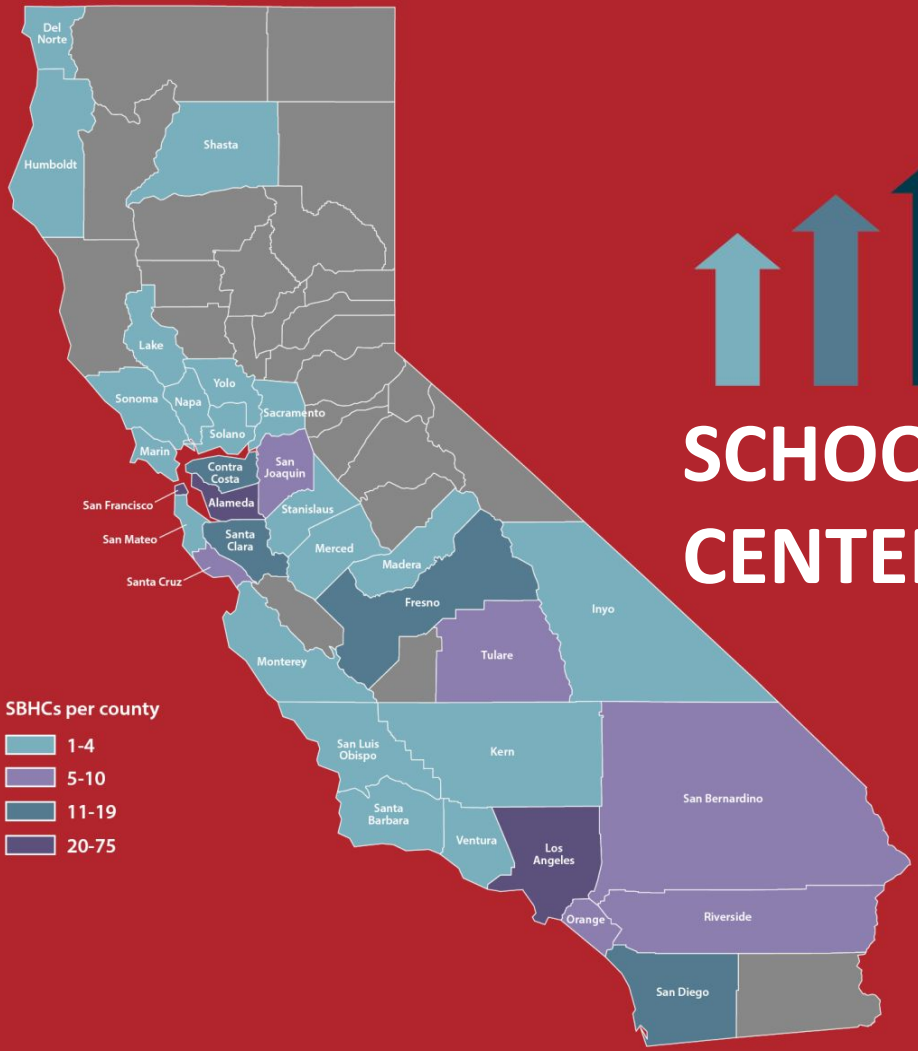
# WHAT IS A SCHOOL-BASED HEALTH CENTER?

**Delivers primary medical care PLUS**

**Located on or near a school campus**

**Serves students** and sometimes siblings, family members, and the community

**Promotes school-wide health**




# 293

## SCHOOL-BASED HEALTH CENTERS AND GROWING

# WHY SBHCS?

# Short → to → Long-Term Strategies

| | | |
|---|---|---|
| Leverage existing SBHCs or partner with community-based health providers to conduct screenings, test for COVID, and address unmet health needs.<br><br>Convene a planning group to develop or strengthen school-based wellness strategies, such as planning for an SBHC. | Create a student/peer advisory group to assess student health needs and recommend strategies for improving access to school-based health services.<br><br>Assess facilities options for establishing or retrofitting designated school health spaces, such as an SBHC. | Develop MOUs and referral protocols with community-based and school- based health providers.<br><br>Provide seed start-up/ facility funding for SBHCs.<br><br>Leverage community providers to sustain services through health care & Medi-Cal reimbursements. |

# Next Steps & Considerations

## Preliminary needs assessment: what exists already? what are the health care needs of students?

- California Healthy Kids Survey
- Free and reduced price meal rates, Medi-Cal rates
- County public health indicators
- School indicators like chronic absence, drop-out

## Build a network of champions

School leadership, school nurses, county resources, other community providers, students, parents

## Create a “runway” to sustainability

Even reimbursable health services do not immediately generate revenue to cover the costs

slido

# Audience Q&A Session

ⓘ Start presenting to display the audience questions on this slide.

slido

# What additional tools, supports or resources would strengthen your efforts to best use ESSER funding?

ⓘ Start presenting to display the poll results on this slide.