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Table	of	Contents

I.	Propo	sal Introduction	2					
II.	Narrative to Address Selection Criteria							
	A. Need for the Project							
	1.	Magnitude and severity of the problems	5					
	2.	Definition of geographic area	15					
	3.	Identification of gaps or weaknesses	15					
	B. Q	uality of Project Design	17					
	1.	Implementation plan to create a complete continuum of solutions	17					
	2.	Proposed solutions are evidence-based	25					
	3.	Identification of existing neighborhood assets and programs	40					
	4.	Evaluation methods	42					
	5.	Strong program theory	47					
	C. Q	uality of Project Services	48					
	1.	Likelihood of academic improvement	48					
	2.	Creation of partnerships	54					
	D. Q	uality of the Management Plan	56					
	1.	Plan for working with the neighborhood and residents	67					
	2.	Collection, analysis, and use of data	69					
	E. A	dequacy of Resources	72					
	1.	Reasonableness of project costs	72					
	2.	Commitment and resources to project sustainability	74					
III.	Narra	tive to Address Competitive Preference Priorities	77					
IV.	Propo	sal Conclusion	85					
Pag	ge 1							

Project Narrative

I. Proposal Introduction

On behalf of the Camden Promise Neighborhoods partnership, Center For Family Services, Camden, New Jersey's largest nonprofit human service agency, is submitting this proposal to the US Department of Education for a Promise Neighborhoods (PN) implementation grant under **Absolute Priority 1**. CFS requests that the Department also consider this proposal for *all four Competitive Preference Priorities*, which are addressed following the Selection Criteria.

A once bustling commercial hub and home to the nation's largest shipbuilders, Camden, New Jersey, like many other urban communities nationally, has become a ghost of its former self. However, since 2010 when Camden leadership first coalesced to address the deep, systemic challenges borne out of decades of poverty, collaborative efforts led by Mayor Dana Redd and Center For Family Services (CFS) have made significant inroads toward improving the quality of life for Camden's children, youth, and families. For example, this work has included a Choice Neighborhoods planning grant as well as a National Youth Forum on Violence Prevention, which resulted in the Camden's first-ever citywide plan for reducing youth violence.

CFS and its impressive coalition of partners joined forces in 2010 to launch Camden Promise Neighborhoods (CPN), a holistic, long-term service delivery model focused on accomplishing this vision for children and families living in Camden's most distressed neighborhoods. Under the leadership of CFS, and with funding from a Promises Neighborhoods planning grant, this cross-sector coalition completed an 18-month strategic planning effort that engaged community residents in assessing needs, identifying neighborhood-based assets, and building a continuum of solutions that is data-driven, evidence-based, and research-informed.

Given Camden's highly publicized struggles with pervasive violence and failing schools, CFS is proud to be a part of the citywide and neighborhood-based cross-sector partnerships, which have provided the momentum for the competitively awarded Camden Urban Promise Zone initiative. Awarded in April 2015, the Camden Urban Promise Zone represents a 10-year shared vision and cross-sector collaborative roadmap for transformative change across the city's most distressed sectors (housing, education, economic opportunity, public safety, and child health). Just one month later, President Obama recognized Camden "*as a symbol of promise to the nation*."

CFS serves as the backbone organization for the CPN partnership, which includes the City of Camden, Camden City School District, KIPP Cooper Norcross Academy, Camden County Police Department, Camden Housing Authority, Camden Coalition of Healthcare Providers, resident leaders, Southern New Jersey Perinatal Cooperative, Rowan University, Camden County College, Cooper University Hospital, Cooper Medical School at Rowan University, and Rutgers University. CPN partners are committed to using key principles of collective impact, data-driven decision-making, and results-based accountability to level the playing field for Camden's most distressed children and families.

As documented throughout this proposal, CFS is requesting funding on behalf of the CPN partnership to target an expanded footprint comprised of four contiguous Camden neighborhoods (Cooper Lanning, Bergen Square, Centerville, and Liberty Park) and to launch a comprehensive Camden Promise Neighborhoods service delivery model that will feature:

Evidence-based solutions: A comprehensive, multi-partner pipeline of effective programs for children (birth though college graduation) that includes wraparound supports for families;

- *Authentic community engagement*: Active and meaningful engagement of residents, institutions, and other stakeholders in all aspects of the work (from planning to delivering and evaluating solutions) to create the environment necessary for a child's healthy development;
- *Data-driven decision-making*: A ground-breaking longitudinal data system that will support the evaluation of program outcomes, assessment of performance measures and creation of a data feedback loop to help our collective leadership improve and refine program solutions; and
- *Collective impact*: A strong infrastructure and capacity that is necessary to intentionally align and refine operational systems, use a results-driven approach, hold partners accountable, leverage resources for long-term sustainability; advocate for policy and systems change, and communicate well the work of the CPN partners.

II. Narrative to Address Selection Criteria

To address *Absolute Priority 1*, the following sections describe:

- The needs of the target neighborhoods (Section A)
- The theoretical framework and proposed strategy to build the CPN cradle-to-career continuum with strong schools at the center (Sections B and C)
- The capacity of CFS to provide the infrastructure needed for partners to achieve the Promise Neighborhoods results and transformative change (Sections D and E)

A. Need for the Project

1. Magnitude or severity of problems the project will address

One of the poorest cities in the nation, Camden City is located in southwestern New Jersey in Camden County directly across the Delaware River from Philadelphia. Joblessness, poverty, family instability, and crime have become an indelible part of life in Camden, no doubt contributing to the city's steady population decline since the 2000 Census.

The four-neighborhood service area for the Camden Promise Neighborhoods (CPN) has an estimated population of 14,442 for 2016 (The Nielsen Company), including 3,930 children ages 18 and younger. The racial/ethnic composition of the target neighborhoods is largely African American (44%) and Hispanic (32%), followed by white (19%). During 2015-16, five public schools served 2,257 school-age children in the CPN neighborhoods, which show substantial racial and economic segregation in comparison to schools statewide (Table 1).

- KIPP Cooper Norcross Academy (KCNA), the state's first renaissance¹ school launched in 2014 (497 students in grades K-1 and 3-8), which will expand to grades 2-4 in fall 2016, enrolling students previously served at Whittier Family School
- Wiggins College Prep School (457 students in grades pre-k-8), a traditional district school, which serves the greatest concentration of English language learners among all CPN schools
- Whittier Family School (122 students in grades 2-4), a traditional district school that closed in spring 2016 after falling into a dangerous state of disrepair that will re-open in the coming school year as a KIPP operated renaissance school
- Camden Academy Charter High School (497 students in grades 9-12)

¹ The 2012 Urban Hope Act allowed for the creation of renaissance schools, which are publicly funded privately managed hybrid charter-public schools. However, unlike charter schools, renaissance schools guarantee enrollment for every child in the school's neighborhood and must operate in a new or renovated building.

• Camden High School (684 students in grades 9-12), a traditional district school with a very high proportion of special needs students (nearly 37%)

	KIPP Norcross Academy	Whittier Family School	Wiggins College Prep	Camden Academy Charter HS	Camden HS	CCSD	New Jersey
Total enrollment	497	122	457	497	684	9,924	1,368,930
						Prek-	
Grades served	K-1, 5-8	2-4	Pre-k-8	9-12	9-12	12	Prek-12
Students of color	99.0%	97.5%	99.3%	99.8%	99.1%	98.2%	41.8%
Students receiving special education	17.1%	16.4%	10.9%	11.1%	36.8%	19.0%	NA
English language learners	5%	2%	10%	6%	1%	10%	4%
<i>Students from low- income families</i>	90.0%	68.0%	66.5%	71.6%	59.8%	60.2%	32.6%

Table 1. 2015-16 School Demographic Profile

Sources: NJ Department of Education; and KIPP Cooper Norcross Academy

Early Learning Needs

While there are multiple early care and learning programs available within the CPN target neighborhoods, including two Head Start programs (one co-located at KCNA and the other located in Centerville), there is a low level of participation in these programs among residents with young children. The 2013 Promise Neighborhoods resident survey, for example, showed that only one-third of families with infants and young children (up to age 5) used an early learning center/program, family childcare provider, nursery school, daycare center, or other preschool for more than 10 hours per week. Another 1 in 5 families regularly used relative care, though this was substantially more likely for Latino vs. African American families. The needs assessment found that several factors impede families from taking advantage of available early care and learning programs, including a low level of awareness of program options, cost, insufficient evening hours for child care, lack of parent support for children's enrollment and consistent attendance in these programs, and/or mixed opinions about program quality.

Based on results of a 2014 standardized literacy assessment (STEP Literacy Assessment), only 4% of incoming kindergarten children were school ready, and only 25% of the remaining children entered with the early literacy skills of a preschooler, clearly identifying a need for strengthened, high quality early learning opportunities. In addition, regarding early childhood readiness (grades K-3 combined), the 2015 Measures of Academic Progress (MAP) results showed fall-to-winter growth rate of 85% for KIPP, which was substantially higher than Whittier (43%),Wiggins (50%), and the district schools as a whole (46%) (Camden City School District).

Education Needs

Currently in its fourth year of state control, the Camden City School District (CCSD) remains one of New Jersey's poorest and lowest performing school systems. Despite modest recent successes many believe are attributable to the reforms launched by Superintendent Paymon Rouhanifard in January 2014 as part of his ambitious reform plan known as the Camden Commitment, the most recent ratings show 22 of 26 district schools as either under-performing or in need of improvement (NJ State Education Department). As of July 2016, the NJ State Education Department classified *three of the five schools that serve CPN children as priority schools*, meaning these schools are among the lowest-performing five percent of Title I schools in the state over the past three years (Table 2). Wiggins College Prep Lab School uses the transformation model and Camden High Schools is a turnaround school.

Tabl	le 2.	20	15-16	Acad	emic I	Perf	ormance
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	KCNA ²	Whittier Family School	Wiggins College Prep	Camden Academy Charter HS	Camden HS	CCSD	New Jersey
Total enrollment	497	122	457	497	684	9,924	1,368,930
School							
classification		Priority	Priority		Priority	NA	NA
Student mobility	9%	11%	9%	1%	15%	10%	NA

² ELA and math data for KCNA represent grades 5-8.

	KCNA ²	Whittier Family School	Wiggins College Prep	Camden Academy Charter HS	Camden HS	CCSD	New Jersey
Student attendance	94%	91%	92%	94%	79%	91%	
Chronically absent	17%	NA	24%	NA	54%	31%	10%
At least one suspension	0%	NA	6%	NA	43%	15%	NA
ELA proficient Grades 3-8	28%	5.0%	7.1%	NA	NA	6.4%	49.6%
Math proficient Grades 3-8	11%	3.1%	4.0%	NA	NA	4.3%	39.0%
ELA proficient Grades 9-11	NA	NA	NA	20.4%	2.1%	7.3%	39.1%
Math (Algebra I) proficient Grades 9-11	NA	NA	NA	8.3%	0.0%	3.4%	36.0%

Sources: NJ Department of Education; Camden City School District and KCNA

All target schools show higher rates of chronic absenteeism than schools statewide (*Table 2*). During the last school year, chronic absences occurred for 17% of students at KCNA, nearly one fourth of all students at Wiggins (24%), and more than half of all students at Camden HS (54%). Chronic absence–missing excessive amounts of school for any reason–can cause students to fall behind academically. Moreover, chronic absenteeism at the early grades is associated with lower reading proficiency by grade 3 (Advocates for Children of New Jersey, 2015) and at the middle school grades is a key determinant in the successful transition of a student from middle school to high school (Kieffer, Marinell, & Stephensen, 2011).

There is a substantial achievement gap between students at the CPN schools and that of their peers statewide on the New Jersey state reading and math assessments. For example, students from Whittier were almost 10 times less likely to meet grade-level expectations in reading compared to students in the same grades statewide. In math, the disparities were even greater: none of the students at Camden HS achieved proficiency in Algebra I, compared to over one-third of their peers statewide. Residents associated many factors with these poor outcomes, such as inadequate preparation for graduation and post-high school success; insufficient

academic rigor and support, such as study skills classes, college prep courses, and Advanced Placement courses; and a lack of accurate assessments.

Student mobility rates at Camden HS are high in comparison to the district (15% vs. 10%, respectively). According to a 2014 study that examined the impact of student mobility in New Jersey, high mobility has significant adverse effects on academic achievement and graduation rates (Ross, 2014). This report also cited Camden HS as one of the state's three high schools with the lowest graduation rate and highest percentage of poverty. Studies show that children of color and students from low-income families are highly mobile, and the increased risk of dropping out of school is even greater (Caref & Jankov, 2012).

With over half of all students not attending school regularly, 43% of students with at least one suspension, and less than 10% reading at grade level, it is not surprising that Camden HS showed a four-year graduation rate of just 46.6% in 2015-16. This is 17 percentage points below the district rate (63.6%) and substantially lower than the state (87.9%). According to America's Promise Alliance, one in four African American and nearly one in five Latino students still attend high schools where graduating is not the norm. Graduation rates are disproportionate among high school students, depending on racial and ethnic background, family income, disability, and English language proficiency (America's Promise Alliance, 2013).

Family and Community Support Needs

Poverty: Camden City is an extremely ethnically diverse city with one of the highest rates of people living in poverty in the nation (39%). The CPN target neighborhoods are far more racially segregated, more likely to have families led by single-women, substantially less educated, and exhibit greater concentrations of poverty, in comparison to the City of Camden, all of Camden County, and New Jersey (Table 3). For example, residents of the target

neighborhoods have a very low rate of college education – just 11.5%, compared to the county and state averages of 29% and 36%, respectively. In addition, the estimated 2016 median family income in the target neighborhoods (\$17,793) is significantly low relative to the county and state.

	CPN Target Area	Camden City	Camden County	New Jersey
Total population	14,442	76,330	509,759	8,985,147
Total population of children	3,651	23,002	118,087	2,000,499
Percent Black residents	50.3%	44.2%	19.6%	13.8%
Percent female-led families with children	70.4%	61.6%	27.6%	20.8%
Median household income	\$17,793	\$24,586	\$61,650	\$72,173
Percent families with children in poverty	74.3%	57.9%	19.5%	13.9%
Percent adults with a college degree	11.4%	8.5%	28.9%	36.4%
Percent unemployed	24.0%	22.5%	11.0%	9.5%

Table 3. Demographic & Economic Profile, 2016 Census Estimates

Source: The Nielsen Company

The 2016 estimated poverty rate for families with children in the target neighborhoods (70.4%) is more than triple the state average (20.8%) and two and a half times higher than Camden County (27.6%). In that same year, the target neighborhoods also showed a substantially higher unemployment rate (24%) in comparison to the county and the state (11.0% and 9.5%, respectively). From the perspective of Camden residents, employability is poor largely because local employers are unwilling to hire Camden residents or only offer them lower level positions. Community stakeholders interviewed also believed that Camden business owners would not hire residents, and that as a result, the drug market has become the city's largest employer.

Violent Crime: Suffering from decades of severe public safety issues, in 2015, Neighborhood Scout, a web-based neighborhood resource, once again ranked Camden City as the most unsafe city in the country. To explain its ranking, Neighborhood Scout cited the city's overall crime rate of 57 per 1,000 residents as the "highest in America compared to all communities of all sizes, from the smallest of towns to the very largest cities." Moreover, violent crime in

Camden is more than five times the national average, with rates of 0.43 homicides, 0.93 rapes, 6.87 robberies, and 12.09 assaults per 1,000 people (www.neighborhoodscout.com). In Camden, one's chance of becoming a victim of violent crime is a staggering 1 in 49, compared to 1 in 383 for New Jersey as a whole.

During needs assessment focus groups, most youth expressed fear and uneasiness while attending Camden schools, but also noted that increased police presence in schools has provided some optimism that past violence would not reoccur. Data from the most recent district School Climate Survey (2015-16) showed that the proportion of students who felt unsafe outside of their school varied among CPN schools: 25% at KIPP (N=178), 42% at Whittier (N=48), 50% at Camden HS (N=280), and 59% at Wiggins (N=152). In addition, across the CPN schools, almost 17% of students reported feeling unsafe on their way to and from school. Research shows children who live in violent communities, where they experience continuous physical fighting as well as more disturbing violent incidents (such as murder and rape), are more likely to manifest symptoms of post-traumatic stress disorder (PTSD) (Steele & Kuban, 2011).

Because of gang activity, highly visible drug trafficking, and substance abuse in Camden neighborhoods, many children and youth in Camden frequently witness violence in their families and in the community. According to multiple partners and stakeholders, a high percentage of Camden residents of all ages have a history of adverse childhood experiences (ACEs), which can result in mental health issues. ACEs include not only domestic violence but also such serious family stressors as homelessness and insecure housing, incarceration or death of a parent, lack of food, and mentally ill or substance abusing family members. As such, the CPN service delivery model will use a trauma-informed approach to serving target children and families.

Food, Nutrition, and Health: Designated by the USDA as a food desert, Camden City struggles with virtually no healthy, affordable food options for residents citywide. With only one supermarket (that just recently opened in 2015) and limited public transportation, Camden has a serious food accessibility problem. CPN neighborhoods are saturated with corner stores, and fast food, and carry-out establishments that provide few healthy options and quickly drain families' limited food budgets. Residents food shop mostly at neighborhood bodegas (small neighborhood convenience stores), though these were described as having poor quality food and produce–namely rotten, expired, and inconsistently available.

Moreover, the needs assessment revealed that one in five families confront food insecurity on a frequent basis, which is high compared to food insecurity rates for the county (14%) and state (15%), as reported by the 2015 County Health Rankings. Specifically, more than 22% of CPN families worried often about running out of food within the past 12 months, while another 48% reported this occurred sometimes. Additionally, another two thirds (67%) reported there were at least some times when they had no money to buy food for their families during the past year. Research shows that students who regularly eat a low-quality diet are more likely to perform poorly on assessments (Florence, 2008), and youth who experience severe hunger are more likely to be plagued by chronic illness and PTSD (Weinreb et al., 2002).

According to the NJ Department of Health, in 2014, New Jersey had the highest rate of low-income childhood obesity in the nation, with 14.2% of the state's poor children under the age of five reported as obese. Among the 425 two-, three-, and four-year olds enrolled in the two Camden Head Start programs in the CPN target neighborhoods, the rate of overweight or obese children was almost double the state rate (27.8%) (Head Start Program Information Report, 2015). Among the state's school-age children, nearly one in four elementary students (24.7%)

and high school students (23.0%) were overweight or obese. CPN needs assessment data showed that only 27% of high school youth engaged in regular exercise or physical activity. According to youth, in addition to being afraid to leave their homes, there are few reasons to do so because of the lack of clean parks, recreation centers, community centers, green areas, or safe places to sit and relax.

The 2015 America's Health Ranking report for New Jersey cites the state's top health challenges as low immunization coverage among children (ranked 40th) and large disparities in health status (ranked 40th). The report also highlighted the state's overall low per capita public health funding. In the past five years, public health funding decreased 17% from \$69 to \$57 per person. According to the Camden Coalition of Healthcare Providers, one-half of Camden's total resident population visits at least one of the city's hospitals annually (Camden Coalition, 2016). Health services data for young children in the target neighborhoods showed that while 82.5% had a medical home, less than half had accessible dental care (48.2%). In addition, almost 18% of Head Start children were not up-to-date on all age-appropriate immunizations and over one in 10 received treatment for asthma (10.4%). Among all 525 CPN families with children in Head Start programs, half (50.5%) identified health education as a need for their family.

Teen Births: While there has been a steady decline in teen pregnancy and birth rates nationally for all groups (The National Campaign to Prevent Teen and Unplanned Pregnancy, 2014), racial and ethnic disparities still exist for rates of unintended pregnancies and sexually transmitted infections among teens (Kaiser Family Foundation, 2014). While New Jersey ranked 5th in the nation in 2015 for teen birth rates (14.8 births for every 1,000 girls), the rate for Camden County was twice as high (34.0), translating to 4,151 babies born to teenage mothers. The most recent data for Camden City (2014) showed an adolescent birth rate of 35.1 per 1,000

girls (NJ Health Department). Teens living in environments like Camden City that expose them to poverty, inadequate or overcrowded housing, low educational attainment, low literacy levels, family violence, gang involvement, and crime are most at risk for becoming pregnant or causing a pregnancy (youth.gov, 2016).

Housing Conditions: Vacant and blighted property has emerged as a crisis for many economically vulnerable communities across the nation, denying local governments of desperately needed tax revenues, consuming millions of tax dollars, eroding the value of nearby homes, posing health and safety risks, and complicating already challenging neighborhood revitalization efforts (National Vacant Properties Campaign, 2005). Decades of declining population and industry in Camden has left behind blighted and burned-out homes, boarded-up factories, and abandoned properties, which, in addition to being safety hazards, are hotbeds for crime, squatters, and drug users. A two-year study showed approximately 15% of properties in Camden in 2014 occurred in abandoned buildings. (Center for Urban Research and Education, 2014).

Data from the 2014 American Community Survey provide telling information about the dire housing conditions in Camden. Approximately 6% of housing units in Camden lack complete plumbing facilities and 7.1% lack complete kitchen facilities. These rates become even more significant when compared to the entire state of New Jersey, where the average of just 0.8% and 1.0%, respectively. In addition, the city's Housing Authority serves 4,000 residents annually in an affordable housing inventory that includes a combination of public housing and assisted living for seniors and the physically challenged. In the agency's most recent operations and management plan, it identified the following major deficiencies in its housing strategy: a

16% vacancy rate in older sites, high unit turnaround times, and high crime and drug incidents in comparison to surrounding communities.

2. Definition of target geographic area

The target geographic area for the CPN is four adjacent neighborhoods, including Cooper Lanning, Bergen Square, Liberty Park, and Centerville (Figure 1). Together, these neighborhoods make up





census tracts 6104, 6103, 6004, and a portion of 6016 and most of zip code 08103.

While the CPN neighborhoods face many challenges (as described in the preceding paragraphs), they also remain a beacon of hope for Camden because of many inherent advantages, recent attention, and investment. The CPN target area is headquarters to Cooper University Hospital and the new Cooper Medical School at Rowan University, making a network of high quality health and social service providers available to residents. The four neighborhoods are also the home of active resident association groups, and contain the main Broadway Corridor, an essential part of the downtown South Revitalization Plan.

3. The identification of gaps or weaknesses in services, infrastructure, or opportunities and how they will be addressed

Results of the comprehensive needs assessment and segmentation analysis showed that CPN residents live with the ramifications of neighborhood blight. In addition to reporting needs

for neighborhood clean ups, rehabilitation of abandoned city-owned buildings, and spray paint and graffiti removal, residents cite needs related to better food options, transportation, and economic development (e.g., job training, entrepreneurial training). Across stakeholders, there is a clear need to address and eradicate feelings of hopelessness and nihilism among adults: "Many people are not taking care of themselves and have lost hope." A target youth resident explained that it was hard to feel optimistic when they see adults in Camden walking around looking and feeling hopeless. Many youth want to see change and they are desperately waiting for that to occur.

A key component of the city's Promise Neighborhoods planning grant was to conduct a comparative gap analysis that examined needs assessment findings, the compilation of assets and existing neighborhood-based programs, services, and activities, and a review of evidence-based practices currently in place in the target neighborhoods. This analytic process identified gaps and weaknesses in services and infrastructure, which partners used to develop plans to address the gaps along the various parts of the pipeline and create the plan for infrastructure development to ensure CPN success. A summary of those gaps and weaknesses include the following:

- Constrained resources limit the number of children and families served by individual programs/partners, which leads to pockets of success rather than neighborhood-level change
- Too few opportunities for extended learning exist in the target neighborhoods for children and youth across all segments of the educational pipeline
- While valued by CPN partners, use of multiple and complex data systems has deterred the systematic use of shared data to inform quality of service delivery, assess outcomes, and ensure partner accountability

- Despite several cross-sector initiatives, neighborhood programs and services remain too fragmented and dispersed to move the needle on our greatest challenges
- The CPN collaborative requires capacity building and infrastructure development to be most effective in its work for target families

This work also examined participant-level costs and other infrastructure-related data to determine how to fill out the continuum and plan for taking the overall effort to scale. The CPN leadership will continue to work to identify gaps between what resources the CPN partners have and what it needs and work collaboratively to identify funding and other resources needed to fill gaps in services.

B. Quality of Project Design

1. Implementation plan to create a complete continuum of solutions that will reach scale over time without gaps in time and resources.

History of CPN Initiative

Since taking office in 2008, Camden City Mayor Dana Redd has mobilized an unprecedented effort based on collaboration and communication that has resulted in a multidisciplinary strategy to achieve positive change in the city from a structural, physical, and human capital perspective. Camden has made significant strides with respect to breaking down silos between public, private, and nonprofit organizations in order to achieve a more focused impact for neighborhoods and people living in the city. Under Mayor Redd's tenure, achieving the Promise Neighborhood vision and approach – a seamlessly linked cradle-to-career pipeline of programs, services, and supports – that can eventually reach all Camden children and families became a high priority. This priority now permeates across the leadership organizations and partners, propelling Camden toward making this promise a reality.

In 2010, CFS launched a multi-partner comprehensive effort to improve educational and developmental outcomes for children and families living in the Cooper Lanning neighborhood of Camden City. Since the start of the CPN partnership in March 2010, partners adopted a collective impact approach to guide their work in the assessment of needs and strengths, identification of gaps, streamlined reorganization, and/or integration of services, and shared resources - all in an effort to change educational outcomes and break the cycle of poverty for Cooper Lanning families. In January 2013, resources from a Promise Neighborhoods planning grant supported an 18-month, data-driven, cross-sector strategic planning effort. During this time, CPN partners engaged the community in a comprehensive and systematic assessment of needs and assets within Cooper Lanning and its surrounding neighborhoods, conducted segmentation and gap analyses, strengthened cross-agency capacity for data sharing and resultsbased accountability, researched and reviewed evidence-based programs and practices, and started to build the cradle-to-career pipeline. The result of this collaborative planning process was a thoughtful plan for pilot implementation of key solutions with a cohort of Cooper Lanning children and families.

During the 2015-16 academic year, CPN partners used rapid-time performance data and lessons learned from the Cooper Lanning pilot, to identify key enhancements critical for the next stage for Camden Promise Neighborhoods, which would include:

- An expanded footprint aligned with the CPN target school catchment areas that would allow for successful scale-up and sustainability and alignment
- Addition of target neighborhood schools committed to improved academic outcomes
- More formal mechanisms for providing wraparound support and case management

- Development of a longitudinal database that would facilitate real-time data sharing and performance evaluation
- Strengthened capacity of partners to practice key principles of collective impact

As described below, CPN partners developed a comprehensive, long-term CPN plan to respond to Mayor Redd's call for transformative change—for a renewed, stronger Camden.

CPN Design Framework

The CPN service delivery model is a coordinated cradle-to-career continuum of solutions for families with young children (birth to age 5) and school-age children (ages 6-18) and young adults (ages 19-24) that will promote kindergarten readiness, increased high school graduation, college and job success, and healthy, safe, and stable conditions for children and families. With strong schools at the center, multiple partners will strategically align their work across this comprehensive continuum to deliver specific research-informed and evidence-based solutions (see Appendix F).

The CPN service delivery model will have three key entry points for participating families. At the start of the pipeline, a team of specially trained Early Learning Allies will recruit and screen prenatal and pregnant moms and families with young children for solutions, such as Nurse Family Partnership, Healthy Families, Baby's Best Start, or Early Head Start, assist with program enrollment, and coordinate early learning and other continuum family support services. The Early Learning Allies will use door-to-door canvassing and other proven neighborhood-based outreach strategies to build family and community trust and increase community awareness of and engagement in the CPN model.

The second point of entry will occur at the target CPN schools focused on the K-12 and college and career segments of the continuum. CPN Academic and Social Services Managers

(see Management Plan section) will work closely with the grant-funded licensed clinical school social workers and target school staff to lead the child/family assessment and enrollment processes. Specifically, multi-disciplinary, school-based teams will use a data-informed process to identify children in need of intensive services, assess family strengths and needs, and refer families to the most appropriate set of CPN services.

The Promise Neighborhood Family Success Center will serve as the CPN third point of entry focused on community enrollment and supports, including primarily children and families who live in the target neighborhoods but do not attend one of the target schools. Staff will receive special training on the CPN continuum and its solutions and will provide both intake and referral services.

Moreover, the CPN service delivery framework includes three pillars that will ensure these interventions occur in ways that meet the multi-dimensional and complex needs of Camden's children and families:

- Pillar 1 Trauma-informed approaches at the system, school, and family levels
- Pillar 2 Wraparound family and community support to create a culture of health, safety, and stability
- Pillar 3 Intensive educational supports to ensure academic excellence at every stage

Pillar 1 – Trauma-informed approaches

There is substantial evidence that childhood trauma has direct negative impacts on the ability of a child to learn (Education Law Center, 2015). Because of the high level of violence experienced by target residents, recognizing and addressing the impact of adverse childhood experiences (ACEs) with trauma-informed therapeutic services must be a cornerstone of the CPN service delivery model. Because so many adults in Camden suffer from PTSD (many of them

experiencing ACEs when they were children) and the impact of trauma on well-being is an intergenerational issue that spans many age groups, there is a growing cross-sector, citywide interest in trauma-informed care (Center for Healthcare Strategies, Inc., 2016). Trauma-informed care is an emerging, promising approach to addressing trauma and violence affecting children and adults across service systems (Hopper, Bassuk, & Olivet, 2010). Preliminary outcomes include a decrease in program participants' emotional reactions and enhanced sense of safety (Steele & Kuban, 2011).

The CPN partners are proposing to implement trauma-informed approaches at all stages and phases of implementation through every involved staff member and solution. To be most effective in achieving the CPN vision for target children and families, the service delivery model must both understand the role of traumatic exposure in the lives of children and engage resources and interventions that address child and family traumatic stress. Building on developed partnerships between CCSD, the Camden Coalition of Healthcare Providers (CCHP), Hopeworks, and CFS, CPN will provide in-depth professional development in trauma-informed care and ACEs for school-based teams, school leaders, partners, and residents. These CPN partners have content expertise in trauma-informed care and are skilled both in training adults who work with students experiencing trauma, as well as providing direct services to students and families in trauma. Ultimately, the goal is to develop a CPN service delivery model that comprehensively addresses the needs of the highest risk students and families within the target neighborhoods, ensuring that they can succeed in school and in life.

Pillar 2 – Wraparound family and community supports

All students can succeed academically but those impacted by trauma benefit from intensive wraparound supports in order to reach the levels they are capable of achieving. CPNfunded licensed clinical social workers will have a critical role in the CPN service delivery model to remove barriers to learning by providing holistic, culturally-competent, traumainformed therapeutic services and case management so that all children can successfully access their education and grow to their highest potential. Clinical social workers will address the mental health, wellness, and academic need of students at KCNA, Wiggins College Prep Lab School, and Camden High School. Schools will use a data-driven approach to identifying students for case management as part of the district's early warning system (EWS), a composite indicator of student absences, suspensions, and course grades.

Licensed clinical social workers will lead case management teams in the schools, supporting the use of trauma-informed approaches, and serve as the school-based linkage to continuum social and health services. CPN clinical social workers will receive special training to conduct home visits with families in a way that will help uncover the root causes of issues impeding school success. Following an initial home visit and assessment, CPN clinical social workers will work with students and families to develop strengths-based individualized service plans (ISPs) inclusive of goals, action steps, and wraparound support services. Following ISP development, CPN clinical social workers will conduct weekly home visits, provide intensive inschool mental health counseling for students, and track solutions provided for each student and family. Additionally, social workers will participate in school-based case conferencing and planning among school staff and providers to ensure service coordination and data sharing, and follow-up on service referrals to ensure enrollment and help address barriers to participation.

Pillar 3 – Intensive educational supports

The CPN continuum includes an evidence-based suite of intensive educational solutions that will address the varying level of academic needs of all students and support their educational transitions along the pipeline. These include:

Special needs and services – The early intervention solution provided by the Southern NJ Perinatal Cooperative identifies and provides services for infants and toddlers from birth to three years old that have developmental delays or disabilities and are in need of special support for their families. CFS and the district's Preschool Child Study Team assesses children between the ages of three to five suspected of having a disability. CPN partners will work with private providers, district pre-kindergarten teachers, Head Start teachers, and families to conduct assessments, develop individualized education plans (IEPs) for children when needed, and collaborate with the district to provide comprehensive services to support young children with disabilities.

Extended learning time – KCNA currently provides extended learning time, including a school day that ends at 4pm and an extended school year (approximately three weeks longer than traditional public school in Camden). With PNI funding, all of the CPN target schools will offer an enhanced extended learning solution (e.g., after-school, summer, and/or Saturdays). This solution will provide high quality intensive academic support, educational enrichment, and college and career preparation opportunities.

Transitional supports – Based on KIPP Through College (KTC), all three CPN schools will offer a college promise solution (Wiggins Moving Up, Camden HS Through College) designed to provide critical support for students as they transition from middle school to high school and from high school to college. These supports will match CPN students with coaches/mentors that assist with the transition, including helping plan for college entry,

identifying scholarship and financing options, advising students on academic and social challenges, and connecting them to deeper academic and counseling resources when necessary.

Intensive reading/literacy support – The CPN service delivery model includes intensive reading and literacy focused interventions across the continuum, beginning with Born to Read, which will serve children in the early learning segment through grade 3. Focused on grades 3-8, CPN-funded Literacy Specialists will work at both KCNA and Wiggins College Prep School to provide on-site training and in-classroom support focused on substantially increasing reading levels.

CPN Service Delivery Model

The CPN service delivery model consists of 28 partners providing 37 different solutions to families with children ages birth to 18 and to young adults ages 19-24 throughout four highneed Camden neighborhoods (Cooper Lanning, Bergen Square, Liberty, and Centerville) (Figure 2, CPN Continuum of Solutions).

The CPN continuum is designed to be holistic, seamless, and reflective of the varying levels and intensity of needs of children and their families at different junctures along the pipeline. CPN partners will deliver a full continuum of solutions using a strengths-based approach and taking into consideration the circumstances of students and their families. (This is reflected in Appendix F, which shows larger enrollment goals for solutions that will capture the majority of children, such as the extended learning programs, and lower enrollment capacity for more intensive services, such as Multi-Systemic Therapy, targeted for youth with challenges that put that child/youth's success at greater risk.)

Figure 2. Camden Promise Neighborhoods Cradle to Career Continuum

	Strategy 1:	Strategy 2: Successfu	l Students and Scho	ols	Strategy 3:	Strategy 4:
	School Readiness (birth to age 5)	Elementary (ages 6-11)	Middle School (ages 12-14)	High School (ages 15-18)	College & Career	Community & Family Supports
Lead Partners	Southern NJ Perinatal Cooperative, CFS CCSD private providers, Campbell Soup, Rowan University	CCSD KIPP I Have A Dream Foundation Cooper Hospital, CFS Campbell Soup Food Bank of Southern NJ	CCSD KIPP Rowan University, CFS Food Bank of Southern NJ I Have a Dream Foundation Cooper Hospital	CCSD Rowan University I Have a Dream Foundation CFS HopeWorks	CCSD, Rowan University, City of Camden, CFS, Camden County College	Rowan University, CFS, Camden County College, CCSD. City of Camden, Camden County Police Department
Solutions	Baby's Best Start Nurse Family Partnership Early Intervention Service Coordination Camden Healthy Start Healthy Families Parents as Teachers Camden Early Head Start and Head Start Born to Read School Readiness Corps Second Step Healthy Lifestyles	Born to Read Second Step Healthy Lifestyle <i>Cooper Learning</i> <i>Summer Institute</i> Extended Learning Qrew's Nest Positive Behavioral Interventions and Supports School-Based Health Centers Safe Corridors Treatment Alternatives for Children at Risk	Extended Learning Positive Behavioral Interventions and Supports School-Based Health Centers Safe Corridors GEAR UP: CHAMP Family Link Wiggins Moving Up	Promise Prep Extended Learning Safe Corridors GEAR UP: CHAMP Family Link Hope through School Multi-Systemic Therapy Upward Bound for English Language Learners College and Career Readiness Gateway to College	College and Career Readiness: KIPP Through College; Camden High Through College Gateway to College Camden Corps Plus Pathways to Success PowerCorps Camden	Family University Together Across Generations PN Family Success Center Cure4Camden Healthy Routes/Camden Food Access Street Outreach Services Adult Basic Skills GED

The CPN continuum includes multiple program options and services for students and families and it will embrace an individualized and flexible approach to decide which solutions are appropriate for every family. Our approach is to build family relationships and be nimble in our capacity to deliver services based on the individual and changing needs of families.

Plan to Scale Over Time

Using the Promise Neighborhoods Institute tool, *A Developmental Pathway for Achieving Promise Neighborhoods Results*, CPN partners developed a thoughtful and strategic plan to implement and scale the CPN continuum of solutions during each year of implementation (and beyond). As shown below (and detailed by and across solutions in Appendix F), the proposed continuum will serve and/or provide access to increasing percentages of children from the target neighborhoods who attend the three target schools, as well as children from CPN neighborhoods who do not attend the target schools, and those from other Camden neighborhoods who attend one of the target schools.

Continuum Segment	CPN total population	CPN children at target schools	CPN children at non-target schools and/or home schooled	Non-CPN children at target schools	By Year 3–Full Implementation (at least 50%)	By Year 5– Scale (at least 65%)
Birth – age 5	1,290	787	503	269	645	838
Ages 6 – 11, grades K-5	1,172	641	531	56	586	762
Ages 12 – 14, grades 6-8	528	275	253	38	264	343
Ages 15 – 18, grades 9-12 college/career	940	404	536	269	470	611
Ages 19–24, college/career	1,761	NA	NA	NA	880	1,145

Table 4. Plan to Achieve Full Implementation and Reach Scale

CPN partners based the plan to scale over time on the intended target population for each solution. By design, some continuum solutions would be appropriate for children across the

footprint like the PN Family Success Center, which offers programming for all segments of the continuum, while other solutions CPN partners based the plan to scale over time on the intended target population for each solution. By design, some continuum solutions would be appropriate for children across the footprint like the PN Family Success Center, while other solutions would serve as a more targeted population, such as Street Outreach Services, which provides services to homeless youth.

To accomplish the plan for scale-up, the CPN service delivery model includes a threepronged approach to entry into the system (described earlier). Neighborhood families will be recruited at the earliest possible stage regardless of where children attend school. The community-based access and entry point (the PN Family Success Center) will ensure recruitment and support for those who live in the neighborhood but might not attend one of the target schools. The CPN comprehensive and multi-dimensional portfolio of family and community supports will also help CPN leadership achieve its ambitious goals for expansion and scale-up.

2. Documentation that proposed solutions are evidence-based

Partners designed the school readiness and successful students and schools strategies to include the solutions they believed would significantly improve the educational outcomes and the healthy development and well-being of children and youth across the four target neighborhoods. As described below, these strategies include 37 solutions selected based on the best available evidence and research. (Appendix G provides additional information for the solutions with moderate and strong evidence of effectiveness.)

Strategy 1: School Readiness

Solution 1-1 Baby's Best Start will use the Active Parenting home-based curriculum. Active Parenting is a national model with *moderate evidence* of impact based on numerous

quasi-experimental and correlational studies across multiple states that examined impact of the parenting curriculum on supporting positive outcomes for youth. A review of 13 experimental studies reported improvements in a range of outcomes areas across the studies, including positive parenting and responsiveness, effective discipline strategies, safety of home environment, and reduction in child abuse and neglect (Sanders, Markie-Dadds, Tully, & Bor, 2000; Gross, Fogg, Webster-Stratton, Garvey, Julion, & Grady, 2003; Olds, et al., 2004).

Solution 1-2 Nurse Family Partnership (NFP) is a home visitation program with *strong evidence* for first-time pregnant women with positive benefits on the health and well-being of mothers and their babies (Carabin, Cowan, Beebe, Skaggs, Thompson, & Agbangla, 2005). Research from the RCTs show that compared with non-participants, NFP mothers smoked less tobacco during pregnancy, decreased pregnancy-induced hypertension, had fewer preterm births, less infant deaths, and fewer closely spaced second births within 24 months. Additionally, participation in NFP led to reduction in abortions, fewer preterm births, increased incidence of breastfeeding, and higher likelihood for enrollment in Medicaid or TANF (Miller, 2015). Furthermore, children showed gains in early learning in the areas language, executive functioning, and behavioral adaptation (Olds et al., 2004).

Solution 1-3 Early Intervention Service Coordination offers IDEA-required service coordination for infants and young children experiencing developmental delays or disabilities and their families. Research has shown that if service coordination is high quality, families are more likely to experience outcomes such as being able to: communicate their child's needs, make informed decisions about services, participate in services that are coordinated and individualized, and experience enhanced health and development for their child (Bruder, 2010). While studies on the impact of early intervention service coordination are very limited, the

literature suggests it is associated with improved access to services, improved family satisfaction with care, improved child health and development, and improved family well-being (Champions for Inclusive Education, n.d.).

Solution 1-4 Camden Healthy Start is based on the national Healthy Start model. Multiple RCT and quasi-experimental studies have examined Healthy Start programs across the country, providing *strong evidence* of the model's impact on child and parent outcomes (Giffin, Curry, & Sullivan, 1998; Stabile & Graham, 2000; O'Campo & Caughy, 1997). Results of the studies in Florida and Baltimore, for example, showed that participants in the treatment groups had more positive birth outcomes, including fewer incidences of low birth weight and low Apgar scores and fewer preterm births than the control group, even after adjusting for demographic and risk factors (Stabile & Graham, 2000; O'Campo & Caughy, 1997).

Solution 1-5 Camden Healthy Families is based on the national Healthy Families America (HFA) model for which there is *strong evidence* of impact on promoting maternal and child health, family economic self-sufficiency, school readiness, and other essential outcomes. At least 12 RCT studies have demonstrated benefits of HFA participation in six domains: family economic self-sufficiency, maternal and newborn health, child injury/maltreatment prevention, school readiness, reduction in crime or domestic violence, and linkages and referrals (Anisfeld et al, 2004; LeCroy & Krysik, 2011; Mitchell-Hetzheld, et al., 2005; Landsverk, et al, 2002; and Lee, et al. 2009).

Solution 1-6 Parents as Teachers is supported by *strong evidence*. Parents as Teachers is a national program that delivers parent education through home visitation and group meetings to connect parents with knowledge and resources for preparing their young children to enter school ready to learn. Researchers across the country have conducted more than 12 outcomes

studies, including several that have used RCT designs, to show statistically significant effects of the program on a variety of outcomes, including school readiness and health and wellness (Wagner et.al., 2002; Drotar, et.al., 2009; Haire-Joshu et.al., 2008). Across studies, researchers collected and examined outcome data for more than 16,000 program participants (www.parentsasteachers.org; Schacter & Jo, 2005).

There is *strong evidence* of the positive impacts of a child's participation in Solution 1-7 Head Start and Solution 1-8 Early Head Start programs on cognitive and socio-emotional learning. Several studies have used RCT designs to examine the impact of these programs on student and family outcomes (Gelber & Isen, 2012), the studies show participants scoring higher of tests of vocabulary and oral comprehension than non-participants and demonstrating beneficial social-emotional outcomes, including positive relationships with parents. Favorable impacts were also found for specific subgroups of high-need children, including children with special needs, children of parents with no depressive symptoms, and children from high-risk households (Puma et al., 2010).

Solution 1-9 Born to Read will incorporate *Reach Out and Read* (ROR), an evidencebased literacy model in which trained providers use a children's book as a clinical tool, encourage parents to read to their children, and give children new books to take home after visits. A large body of research provides *strong evidence* of effectiveness for ROR, including increases in parents reading to their children and increases in children understanding and speaking compared to their non-served peers (High, LaGasse, Becker, Ahlgren, & Gardner, 2000; Mendelsohn et al., 2001). Born to Read will also use Strategic Teaching and Evaluation of Progress (STEP), an assessment used in numerous urban school districts and networks across the country. In Chicago, schools using STEP had twice as many third graders meet grade level

literacy standards relative to district peers. Similarly, schools using STEP outperformed peers in New York City, New Haven, New Orleans, and Newark (UChicago Impact, n.d.).

Solution 1-10 School Readiness Corps follows the Americorps model that provides classroom support for individualized, one-on-one instruction. Several rigorous evaluations have tested the impact of the Reading Corps model (Markovitz et.al. 2014; Markovitz et al, 2015). These studies, which used either RCT or quasi-experimental designs, provide *strong evidence* of the impact of the model, including statistically significant and sizeable positive effects on the reading abilities of 4 and 5 year-old and K-1st grade participants compared to the control group.

Solution 1-11 Second Step Early Learning is the preschool component of a violence prevention curriculum that has been rigorously evaluated in numerous schools and states, providing *strong evidence* of its impact on reducing problem behaviors (Low, Cook, Smolkowski, & Buntain-Ricklefs, 2015; Espelage, Low, Polanin, & Brown, 2013; Espelage, Polanin, & Rose, 2015). An RCT of 7,300 students in 61 schools across six states, for example, reported significant improvements in social-emotional competence and behavior among treatment students (Low, 2015). While studies have not evaluated Second Step with preschoolers, the curricula's early learning program is research-based and teaches children skills proven to promote school readiness, including self-regulation, empathy, emotion management, and friendship skills and problem solving (Committee for Children, 2011).

Solution 1-12 Healthy Lifestyles includes the Campbell Healthy Communities (CHC) program which focuses on four strategic areas: ensuring access to affordable and fresh foods, increasing physical activity in a safe environment, supporting healthy lifestyles through nutrition education, and forming community partnerships to advance positive social change. An evaluation of the CHC program in five pilot sites in Camden showed an increase in the number

of venues selling healthy foods (from 0 in 2011 to 36 in 2013). It also revealed positive changes in students' eating habits (e.g., greater fruit consumption) and improved knowledge of student nutrition and attitudes about the healthfulness of what they eat and drink (Food Trust, 2013).

Strategy 2: Successful Students and Schools

Solution 2-1 Cooper Learning Center Summer Reading Institute is supported by *strong evidence* that summer reading programs are effective in reducing summer reading loss and achievement gaps for economically disadvantaged students. Multiple randomized control trials have found that programs and initiatives that provide reading instruction, academic support, and access to books to low-income students during summer months are effective in increasing the number of books read and improving literacy and academic achievement among elementary school students. Outcomes of program participants were higher than for non-participants, with statistically significant results (Borman & Dowling, 2006).

Solution 2-2 Extended Learning/Promise Prep features the "I Have a Dream" model for after school and summer programs, which researchers have evaluated in numerous locations across the country using RCT and quasi-experimental research designs. Studies provide *moderate evidence* of its impact on youth outcomes (Kahne & Bailey, 1997; Davis, Hyatt, & Arrasmith, 1998; Hayman, 1997). A summary of the research indicates that the program model has produced positive impacts on school achievement, school attendance, community behavior, graduation rates, and on reducing dropout rates. Similarly, a national evaluation of the model using a non-equivalent comparison design provided large-scale results about the positive impacts of the program (Rhodes, Truitt, & Martinez, 2006).

Solution 2-3 Qrew's Nest is a peer-mentoring program. There is a strong body of evidence highlighting the positive impacts of mentoring programs on the academic and social-

emotional development of children. The research organization Child Trends has released a review that shows mentoring programs have produced statistically significant improvements for participants (Lawner, Beltz, & Moore, 2013; Jekielek, Moore, & Hair, 2002), including school attendance and performance, self-efficacy and confidence, and reduction in participation in risky behaviors.

Solution 2-4 Positive Behavioral Interventions and Supports (PBIS) is a proven school-wide strategy. There is *strong evidence*, including more than a dozen rigorous research studies, of the impact of school-wide PBIS on a variety of student and school –level outcomes (Horner, Sugai, & Lewis, 2015). For example, a 2009 RCT study of PBIS in elementary schools (Horner, Sugai, Smolkowski, Todd, Nakasato, & Esperanza, 2009) found PBIS linked to improved perceptions of school safety and associated with improved reading scores for 3rd grade students. Another RCT study found PBIS implementation relates to reductions in discipline referrals and suspensions from school among elementary school children and improved 5th grade academic performance (Bradshaw, Mitchell, & Leaf, 2010). Additionally, a quasi-experimental study concluded that PBIS is linked to improved perceptions of school safety (Sprague, Walker, Golly, White, Myers, & Shannon, 2002).

Solution 2-5 School-Based Health Centers stems from the research-based CDC Coordinated School Health Program (CSHP) model of which key model components are evidence-based. A number of quasi-experimental studies found a positive relationship between the availability and/or actual use of an SBHC with at least one academic indicator, and provide *moderate evidence* for the proposed program (Webber, Carpiniello, Oruwariye, Lo, Burton, & Appel, 2003). Comprehensive integrated nutrition services in schools will improve the nutritional status, health, and academic performance of students and SBHCs are filling a health

care gap for over two million children who do not have any form of health insurance (ADA, SNA, & SNE, 2010).

Solution 2-6 Safe Corridors stems from the safe routes program first introduced in 1997. Today, there are more than 17,000 safe route programs across the county (Lieberman & Zimmerman, 2015) as well as an emerging body of evidence of the impact of these programs, including improved attendance, reduced dropout rates, increased health and physical activity, and reduced threats of injuries to children by motor vehicles (Liebermann & Zimmerman, 2015). An evaluation of Chicago's Safe Passages Program, for example, found that the program had led to a crime reduction in target low-income neighborhood of 0.15 standard deviations, with a large effect size (Curran, 2014).

Solution 2-7 Treatment Alternatives for Children at Risk (TAFCAR) program provides in-home intensive education, counseling, and support services to prevent the abuse and neglect of children and case management for families to gain stability. Research on interventions aimed at reducing abuse and neglect has shown that parental education can change parenting attitudes among participants; making them more nurturing after the intervention (Cowen, 2001).

Solution 2-8 CHAMP is a US Department of Education GEAR UP early college awareness and preparation program that serves low-income, minority, and first-generation college students. There is *moderate evidence* of the impact of GEAR UP on promoting college and career readiness and supporting persistence in postsecondary education. Numerous studies with quasi-experimental designs have used statistically matched comparison groups to show higher achievement and college enrollment, of GEAR UP participants compared with nonparticipants. Several studies found that GEAR UP students showed greater preparedness for college than the matched comparison group (Bausmith & France, 2012; American College Testing, 2007; Alderete & Coneway, 2007; Tillery, 2013). In the Chicago GEAR UP Alliance, the college enrollment rates of participants exceeded the national average among low-income students by 14 percent points (Stack, forthcoming).

Solution 2-9 Family Link provides intensive therapeutic services for at-risk youth. A study of promising practices for young offenders from three large-scale efforts concluded that prevention and early intervention programs have the largest impact in reducing juvenile offenses (Snyder, et al., 2003). Studies have also found that delinquency prevention programs are a cost-effective solution (http://www.wsipp.wa.gov/BenefitCost).

Solution 2-10 Wiggins Moving Up is a new research-informed solution to promote high school graduation and college entry based on a number of predictors of secondary success and postsecondary readiness at the middle school level, such as low absenteeism, receiving no unsatisfactory behavior grades, and passing ELA and math courses and exams (AIR, 2013). The program is informed by others that provide similar services, such as ALAS. ALAS connects middle and high school students with counselors/mentors who monitor attendance, behavior, and academic achievement and provide case management and advocacy for their students. There is *moderate evidence* that ALAS positively impacts participants' staying and progressing in school (Larson & Rumberger, 1995).

Solution 2-11 Hope through School, a program designed to keep youth at-risk for dropping out in school by offering technology training and job opportunities, coupled with academic support for students, is informed by studies of industry-based education and training opportunities such as the oft-cited Career Academies. There is *moderately strong evidence* that Career Academies, which focus on specific careers alongside academic coursework and connect students to internships and work experience, reduce dropout rates among at-risk students (Kemple & Snipes, 2000) and increase the long-term earnings of participants, especially young men (Kemple & Willner, 2008).

Solution 2-12 Multi-Systemic Therapy (MST) has been rigorously evaluated by multiple states and countries, providing *strong evidence* of program impact on reducing criminal behavior and out-of-home placements and increasing family functioning, especially among juvenile offenders (Henggeler, Melton, & Smith, 1992; Borduin et al., 1995; Timmons-Mitchell, Bender, Kishna, & Mitchell, 2006). A meta-analysis of 22 studies showed that participants demonstrated small but significant reductions in delinquency, psychopathology, substance use, and out-of-home placements compared to their counterparts, and small but significant increases in family factors (e.g., family functioning, parenting skills) and peer factors (e.g., peer delinquency) (van der Stouwe, Asscher, Stams, Dekovic, & van der Laan, 2014). A school-based study of participants in self-contained behavior intervention classrooms showed that participants demonstrated reductions in externalizing behavior and absenteeism (Weiss et al., 2013).

Solution 2-13 Upward Bound for English Language Learners (UBELLS) provides fundamental college prep support to low-income English language learners (ELLs) in Camden high schools who are first generation college-bound with the goal to increase secondary education enrollment and completion rates. There is a *strong body of evidence-based research* on the impacts of Upward Bound program on the intended outcomes based on a nationally representative sample of projects (Myers, Olsen, Seftor, Young, & Tuttle, 2004; Seftor, Mamun, & Schirm, 2009). While an RCT study of Upward Bound found no significant impact on high school completion, college enrollment, or college credits earned, the program did show a positive significant impact on four-year college attendance for first-generation students. In addition, the program increased the rate of postsecondary enrollment and likelihood of receiving a degree or credential among students with low academic expectations.

Solution 2-14 College and Career Readiness (KIPP Through College) is based on research showing high school predictors of postsecondary success. KIPP's own recent study highlighted five critical factors for KIPP alumni who graduated high school in the last 10 years: academic readiness, a powerful set of character strengths, the right match with one's school, social and academic integration, and college affordability and financial understanding (KIPP, 2011). Programmatic data show that KIPP alumni are outperforming students nationally: as of fall 2015, 44 percent of alumni who had finished 8th grade at KIPP 10 or more years ago had earned a four-year college degree, compared to a national average of 34 percent among all students and 9 percent among students from low-income communities (KIPP, n.d.).

Solution 2-15 Gateway to College is a scholarship program for the city's student dropouts, ages 16-20, who have a desire to get back on track at school. The program is supported by extensive rigorous research on reengaging high school dropouts (Bloom, & Haskins, 2010). A few RCT studies provide *strong evidence* that high school dropouts receiving similar services were substantially more likely than their control group counterparts to earn a GED or another credential, and also demonstrated significant increases in employment or earnings in the short term (Bloom, 2010; Bloom, Gardenhire-Crooks, & Mandsager, 2009; Jacobson, & Mokher, 2009).

Strategy 3: College and Career Readiness

Solution 3-1 Camden Corps Plus stems from effective mentoring practices and workforce development strategies for youth and young adults. Findings of a meta-analysis of mentoring studies, some of which used experimental and/or quasi-experimental designs, support

the effectiveness of mentoring for improving youth outcomes across behavioral, social, emotional, and academic domains (DuBois, Portillo, Rhodes, Silverthorn, & Valentine, 2011) (DuBois, Holloway, Valentine, & Cooper, 2002). Rigorous studies on youth-focused workforce development programs also suggest that occupational training and internships have positive impact on youth skill development (Olenik, Fawcett, & Boyson, 2013).

Solution 3-2 Pathways to Success is informed by rigorous evaluations of "second chance" programs—programs such as Job Corps, JOBSTART, and New Chance that help put dropouts back on a path to further education and labor market success (Bloom, Thompson, & Ivry, 2010). These have shown *strong evidence* that participants are more likely to earn their GEDs or other credentials than randomly assigned non-participants (Schochet, Burghardt, & McConnell, 2008; Millensky, Bloom, Muller-Ravett, & Broadus, 2011). Furthermore, compared to control groups, Job Corps participants showed increased rates of employment and increased earnings in the short-term (Schochet et al., 2008; Millensky et al., 2011).

Solution 3-3 Camden PowerCorps replicates the best practice PowerCorpPHL, which is part of a national study. While its connect to the field of green infrastructure is fairly new, there is significant and strong evidence that supports similar models that engage economically disadvantaged youth with significant environmental and economic benefits for the participants and their communities. PowerCorps Camden meets the *moderate evidence* level with two studies: a non-experimental study of a similar program named MillionTrees NYC Training Program (Maddox, Aucoin, Hawkins, Zanin-Pereira, & Monaco, 2010), and a non-experimental study conducted on PowerCorps_PHL (PowerCorpsPHL, 2016).

Solution 4-1 Family University is based on research shows that enhanced family literacy benefits parents and children. A review of evaluations of family literacy programs showed that adults who participated in family literacy programs demonstrated improved reading, writing, oral communication, and math skills. Children experienced positive school readiness outcomes as well as long-term academic and social benefits, including higher rates of high school graduation and college enrollment, fewer criminal arrests, and higher earnings (Padak, Sapin, & Baycich, 2002). In addition, analyses of the Early Childhood Longitudinal Study showed that children from homes with high home literacy demonstrated stronger reading and literacy skills in kindergarten, regardless of poverty status (National Center for Education Statistics, 2003).

Solution 4-2 Together Across Generations is a research-based program that supports grandparents raising school-age children. A review of promising practices in the Brookdale Foundation Group's Relatives as Parents Programs showed that support networks for grandparents raising children benefitted both the caregiver and the child (National Association of Area Agencies on Aging, n.d.). For example, grandparents supported through the program reported that they were better able to cope with their feelings because of their participation, and relative caregivers reported that the support group meetings helped them to feel more control over their lives, grow in confidence in their caregiving roles, and build supportive friendships.

Solutions 4-3 PN Family Success Center, funded by the NJ Department of Children and Families, is part of a statewide network of Family Success Centers—one-stop shops that provide wrap-around resources and supports for families before they find themselves in crisis (NJ Department of Children and Families, n.d.). The PN Family Success Center offers services based on NJ Standards for Prevention Programs and principles of Family Support America, which promote the acquisition of knowledge and skills that increase family competency, strengthen

family functioning, emphasize family strengths, and partner with families to mobilize social and community resources. It also reflects research on Protective Factors, the Strengthening Families approach, the CDC's Essentials for Childhood, and the Adverse Childhood Experiences Study (NJ Task Force on Child Abuse and Neglect, n.d.)

Solution 4-4 Cure4Camden replicates the evidence-based Cure Violence model used in more than 12 cities nationally. Just one year after West Garfield, the most violent community in Chicago, launched Cure Violence in 2000, there was a 67% reduction in shootings. By 2004, Illinois expanded Cure Violence from five to 15 communities in Chicago, which yielded a 25% decline of homicides. Since then, studies have shown *strong evidence* that the model reduced violence in Chicago, Baltimore, and New York (Picard-Fritsche & Cerniglia, 2013; Skogan et al., 2008; Webster, Whitehill, Vernick, & Parker, 2012). For example, time series analyses of pre- and post-program shooting rates between seven Chicago sites and comparison areas showed that all sites experienced significant declines in shooting rates; three of the program sites experienced declines that were larger than those of the comparison areas (Skogan et al., 2008).

Solution 4-5 Healthy Routes Neighborhood Delivery is a research-based solution designed to increased access of CPN families to healthy food options. In low-income census tracts, like Camden, consumers report higher food prices and greater use of convenience stores (Laxy et al., 2015). With the advent of the Internet, many grocers now offer home delivery services, which research supports can be an effective option for people living in food deserts. For example, Peapod, the largest online grocer, is used widely by residents living in Chicago food deserts (Lang, 2014). However, to ensure that an online grocery option is not limited by Internet accessibility, communities nationwide have ensured that computers were made available in neighborhood-based locations, such as schools and public libraries (Babcock, 2014). This

program has users order their groceries online and delivered to set, convenient locations. Other programs strive to be flexible, accepting cash, credit, debit, or EBT/SNAP with no additional delivery charge (Baltimarket, 2015).

Solution 4-6 Street Outreach Services is a street-based outreach program offering crisis intervention, counseling, advocacy, and prevention services for homeless, runaway, or couch-surfing teens. Research supports this approach for helping youth exit homelessness. For example, one study shows that positive contact—including engagement with pro-social peers, maternal social support, and attending school—promoted exiting homelessness to familial housing and maintaining exited status (Milburn, N. et al., 2009). A randomized control trial of the Support to Reunite, Involve, and Value Each other (STRIVE) model, which provides family reconciliation support, showed that the program successfully reunited youth with their families and prevented repeat homelessness (Sloane, Radday, & Anne, n.d.)

Solution 4-7 Adult Basic Skills GED stems from research that supports providing adult basic education classes as a CPN solution. For example, a quasi-experimental study of the Washington State Board for Community and Technical Colleges' Integrated Basic Education and Skills Training (I-BEST) showed that students experienced positive impacts on education outcomes, including college credits earned, certificate or degree attainment, and gains on basic skills tests (Zeidenberg, Cho, & Jenkins, 2010). In addition, students reported increased academic confidence and interest in pursuing additional college education (Wachen, Jenkins, Belfield, & Van Noy, 2012)

3. Identification of existing neighborhood assets and programs that will be a part of the continuum of solutions

The comprehensive needs assessment and strategic planning accomplished through the Promise Neighborhoods planning grant included a community asset study that identified opportunities for leveraging and integrating existing, high quality programming and services – supported by both private and public investments – as well as existing neighborhood-based assets as part of the CPN continuum of solution. This work continued as part of the city's Promise Zone planning teams and among the CPN leadership partners where the focus narrowed. These efforts culminated in a final list of neighborhood assets and programs and funding streams (federal, state, local, and private) that will support the CPN continuum of solutions and overall service delivery model, as shown below and detailed in Appendix F.

Table 5. Assets, Programs, and Funding Sources that Support the CPN Continuum of

Existing Assets and Programs	Existing Funding Sources
Early Learning (Birth-5)	NJ Department of Children and Families
• Head Start at KCNA and Centerville, Baby's	NJ Department of Health
Best Start, Born to Read, and School Readiness	 NJ Department of Human Services
Corps (CFS)	• US Health Research and Services Administration,
• Early Head Start, preschool, and pre-	Maternal and Child Health Bureau
kindergarten (CCSD, private providers)	• US Department of Health and Human Services
• Nurse Family Partnership, Early Intervention,	Corporation of National and Community Service
Parents as Teachers (Southern NJ Perinatal	United Way of Greater Philadelphia & Southern
Cooperative)	NJ
 Second Step (CCSD) 	Camden County
· Second Step (CESD)	Private foundations (Ann E. Tolcott Fund)
	 Local businesses (Campbell Soup Company,
	Holman Automotive Group, State Farm)
Successful Students and Schools (K-12)	 US Department of Education
Cooper Summer Reading Institute (Cooper	 NJ Department of Children and Families
University Health Care)	 NJ College Bound Grant Program
• Qrew's Nest, Treatment Alternatives for	 Camden County Youth Services Commission
Children at Risk, Family Link, Multi-Systemic	Private foundations (Cooper Foundation, Subaru
Therapy, Camden Corps Plus (CFS)	Foundation, Bodman Foundation, Frances L. and
Safe Corridors Initiative, PBIS (CCSD)	Edwin L. Cummings Memorial Fund, Charles
• GEAR UP, Upward Bound (Rowan University)	Hayden Foundation)

Solutions, by Strategy

Existing Assets and Programs	Existing Funding Sources
KIPP Through College (KIPP NJ)	Private donations
Gateway to College (Camden County College)	
College and Career Readiness	Corporation of National and Community Service
• Pathways to Success (CFS)	 Camden County Municipal Authority
PowerCorps Camden (City of Camden)	City of Camden
	Local businesses (American Water Company)
Family and Community Supports	US Department of Justice
Family University, Together Across	• US Department of Health and Human Services
Generations, PN Family Success Center, Street	 NJ Department of Children and Families
Outreach (CFS)	• CPAC
 Healthy Routes/Camden Food Access, 	 Local businesses (American Water Company)
Cure4Camden (City of Camden)	
Adult Basic Skills/HS Completion Program	
(Camden County College)	

4. Evaluation methods use objective performance measures aligned with outcomes

CFS is proposing to contract with Metis Associates, a national research and evaluation firm with special expertise in the evaluation of community collaboration efforts and educational reform initiatives, as well as a long-history of supporting cross-sector partnership work in Camden, to lead the evaluation team of the CPN service delivery model. The multi-partner evaluation team will include Metis Associates, the CPN Director of Research and Evaluation, the Center for Access, Success, and Equity (CASE) in the College of Education at Rowan University, and the Camden Coalition of Healthcare Providers (the Coalition). The evaluation team will work closely with the CPN Data Governance Board (co-chaired by the Coalition) to plan and carry out annual theory of change evaluations of the CPN service delivery model. Each year, the evaluation design will examine clear and measurable annual performance targets and (Table 6), as well as implementation and process outputs, short-term, intermediate, and longterm outcomes at the individual, neighborhood, and systems level (as fully described in the CPN logic model, Appendix G).

Table 6. CPN Long-Term Outcomes (Results), Performance Measures, and 5-Year

Long-Term Outcomes	Performance Measures	Base -line	Y1	Y2	Y3	Y4	Y5
Strategy 1: School Readiness							
High quality early learning options	Caregivers/teachers with strong knowledge and skills	NA	65%	70%	75%	80%	85%
Children prepared for kindergarten and	Children (at age 3 and school entry) with age-appropriate functioning	59%	62%	65%	68%	71%	74%
school success	Presence of medical home	82%	84%	87%	89%	91%	94%
senoor success	Enrollment in center-based early	33%	42%	51%	60%	69%	78%
	learning programs	5570	1270	5170	0070	0770	1070
Strategy 2: Successful		1	1	1	1	1	1
<i>Students are</i> proficient in core	Enrollment in extended learning programming (grades K-12)	25%	35%	45%	50%	57%	65%
academic subjects	Attainment of grade-level expectations in reading (grades 3-8)	6%	8%	9%	11%	12%	15%
	Attainment of grade-level expectations in math (grades 3-8)	4%	5%	7%	8%	10%	11%
	Attainment of grade-level expectations in high school literature	2%	4%	5%	7%	8%	10%
	Attainment of grade-level expectations in high school math	0%	2%	3%	5%	5%	7%
Students feel safe at	Students feeling safe at school	83%	85%	86%	88%	89%	91%
school and in their community	Students feeling safe traveling to and from school	56%	58%	60%	62%	64%	66%
Successful transitions from middle school to high school	Students chronically absent (grades 6-9)	31%	28%	26%	23%	21%	18%
Students graduate from high school	High school graduation rate	47%	50%	53%	56%	59%	62%
Strategy 3: College an	d career readiness						
Successful transitions	Enrollment in 2- and 4-year college	30%	33%	36%	41%	45%	50%
to concrete post- secondary option Disconnected youth earn high school diplomas or GEDs	College graduation/completion rates		25%	28%	31%	35%	40%
	Attainment of high school equivalency diplomas		65%	68%	71%	75%	80%
Graduates obtain a college degree or career certification without remediation	Attainment of Camden HS alumni who graduate from college or obtain a professional certification with needing remediation	15%	17%	19%	21%	23%	25%
Strategy 4: Community & Family Support							
Stable CPN neighborhoods	Decreased student mobility rates	11%	10%	10%	9%	9%	8%
nergino or no ous		I	1	1	I	1	28%

Performance Targets

Long-Term Outcomes	Performance Measures	Base -line	Y1	Y2	Y3	Y4	¥5
and show positive	among high school youth						
social behavior and	Families have greater food security	20%	28%	31%	36%	40%	45%
low mental distress	Students engaging in at least 1 hour of physical activity daily	27%	31%	36%	40%	44%	49%
	Students eating 5 or more fruits and vegetables daily	32%	35%	38%	41%	44%	50%
Families and communities are fully	Parents/families reading to their child 3 or more times a week	67%	70%	72%	74%	75%	77%
supportive of CPN schools	Parents/families encouraging their child to read outside of school	90%	91%	94%	94%	96%	97%
	Parents/families talking with their child about college and career	78%	80%	81%	84%	85%	87%
Full accessibility to 21st Century learning tools	Students have school and home access to broadband internet <i>and</i> a connected computing device	73%	75%	77%	80%	83%	86%
Strategy 5: CPN Syste	ems Change						
CPN service delivery model is sustainable	Attainment of resources leveraged beyond annual match commitments		15%	20%	25%	35%	50%
	Attainment annual goals for scale-up		65%	72%	79%	86%	93%
	Number of investment, policy, or practice changes		5	8	11	13	15
	Partners and residents are regularly		TB	TB	TB	TB	TB
	using data from Camden ARISE		D	D	D	D	D
	Parents/residents engaged in decision-making		65%	68%	71%	74%	77%

While the final evaluation scope will be determined annually with members of CPN Leadership Council and Data Governance Board, below are questions that will likely guide the first year evaluation.

- To what extent does the CPN system engage parents and other community members in authentic and sustained ways in planning, implementation, and evaluation?
- To what extent do partners and residents share commitment to the vision and pillars of the CPN service delivery model and practice collective impact principles?
- What barriers or impediments to implementation do CPN partners encounter, including federal, state, or local policies, regulations, or other requirements?

- To what extent does the CPN impact investments, leveraged resources, policies, and structures to support success for children and families and continuum sustainability?
- To what extent does the CPN model achieve its annual performance targets, intended outcomes, and long-term results areas?

To address the evaluation questions, the evaluation team used the Urban Strategies Data Guide to develop a comprehensive plan for annual data collection (Table 7) that includes both qualitative and quantitative data and multiple methods across multiple respondent groups. At the start of each year, the Metis team (directed by managing senior associate Donna Wilkens) will be responsible for securing IRB approval to ensure the protection of participating individuals, including the development and use of consent protocols in English and Spanish. In addition to managing the overall evaluation timeline, workflow, and budget, Metis will serve as the lead for instrument development, data analysis, and preparation of all written deliverables.

Evaluation Component	Data Sources/Methods	Data Collection Schedule
Implementation	Document review	Quarterly (All Years)
and Process	Observations (e.g., Leadership Council meetings, partner training, extended learning implementation)	Quarterly (All Years)
	Stakeholder interviews	Bi-annually (Spring/Fall, All Years)
	CPN Partner/Provider and Staff Surveys	Annually (All Years)
	Administrative data (Camden ARISE):	Quarterly (All Years)
	- Student/family enrollment and participation	
	data	
Annual	CPN Neighborhood Family Survey	Annually (Years 1, 3, and 5)
Performance	CCSD School Climate Survey (all grades)	Annually (All Years)
Targets	CPN Alumni Survey	Annually (Years 1, 3, and 5)
	Administrative data (Camden ARISE):	Quarterly and/or Annually (All
	- Measures of Academic Progress (MAP) (age appropriate functioning)	Years)
	- Partnership for Assessment of Readiness for	
	College and Careers (PARCC) (proficiency in academic subjects)	
	- Attendance, mobility, suspension, college	
	enrollment, and graduation rates (school	

Evaluation Component	Data Sources/Methods	Data Collection Schedule
	records)	
	- Provider-tracked outcomes (e.g., GED attainment)	
Short-Term,	Stakeholder interviews/focus groups	Bi-annually (Spring/Fall, All
Intermediate,		Years)
and Long-Term	Administrative data (Camden ARISE) (see above)	Quarterly and/or Annually (All
Outcomes		Years)
	CPN Partner/Provider and Staff Surveys	Annually (All Years)
	CCSD Parent Survey	Annually (All Years)
Systems Change	Document review	Quarterly (All Years)
	Stakeholder interviews	Bi-annually (Spring/Fall, All
		Years)
	CPN Partner/Provider and Staff Surveys	Annually (All Years)
	CCSD Parent Survey	Annually (All Years)

CASE/Rowan University will support

fieldwork (administration of CPN Neighborhood Survey), qualitative data collection, such as observations and focus groups with stakeholders, participate in evaluation team meetings, contribute to protocol development, and oversee and train student researchers. CASE is a multidisciplinary effort dedicated to addressing issues related to access, success, and equity in education, which will bring to the CPN evaluation team the experience and expertise of faculty and graduate students from across the college.

CASE/Rowan will recruit a cadre of undergraduate, graduate, and doctoral students of color enrolled in one of three academic programs. These will include Project Impact, which aims to increase the representation of males from racially and ethnically diverse backgrounds in teaching; the master's program in urban education and community studies; and the Holmes Scholar program, which prepares and places underrepresented doctoral students in higher education and leadership positions.

The Camden Coalition will facilitate administrative data acquisition/collection to support the work of the evaluation team and the annual CPN evaluation through Camden ARISE, the multi-sector, integrated data system the Coalition launched for Camden in 2015. Described in detail in Section D, Management Section, through the CPN effort, the Coalition will expand Camden ARISE to serve as a fully integrated, unit-record longitudinal data management system for the CPN partnership. By Year 4, this groundbreaking system development effort will allow the evaluation team to design and conduct a more holistic and robust evaluation of the CPN service delivery model. In fact, Camden ARISE provides the potential for a more discerning, comprehensive experimental design study, which is particularly exciting for Camden and holds great promise for contributing to the evidence base of effective Promise Neighborhood solutions and practices for low-income urban children and families. The Coalition will also support CFS in securing current detailed data sharing agreements focused on the CPN.

During each evaluation year, the multi-partner evaluation team will establish a process and schedule with the CPN Leadership Council for regularly sharing data and formative evaluation findings. Given the impressive analysis expertise of the evaluation team partners, the plan is to make data available on a consistent basis in order for CPN staff and partners who work with students and families to have the data they need to continuously improve their services. This process will entail building trust between the evaluation team and CPN stakeholders and complying with federal (FERPA and HIPAA) laws that regulate how data can be shared.

The evaluation team and CPN partners are committed to working with the USDOE and a national evaluator to ensure data collection and program design are consistent with plans to conduct a national evaluation of Promise Neighborhoods and the strategies and solutions of individual grantees. The CPN MOU includes a commitment from all partners to work with the

evaluator for data sharing, including administrative and program and project indicator data. CFS will also develop, in consultation with the national evaluator, an evaluation strategy including a credible comparison group, and a plan for identifying and collecting baseline data for both program participants and the comparison group of non-participants. CFS will set up data reporting requirements for CPN partners to report to the evaluator on a quarterly basis or as requested.

5. **Project alignment with strong theory**

Since its inception in 2010, CPN partners have worked together to develop a theory of action (Appendix G, CPN Logic Model) and a research-based theory of change informed by the collective impact framework, best practices identified by nationally recognized place-based initiatives (e.g., Harlem Children's Zone, Strive Together), as well as lessons learned from our own experiences with cross-sector collaboration. The CPN theory of change consists of four key principles that we believe, together with the CPN continuum of solutions, will drive the intended outcomes at the child, family, community, and systems levels. These include:

- 1. Shared community vision, including a cross-sector Leadership Council with an articulated accountability structure
- 2. Evidence-based decision-making that includes annual outcomes and targets, assessment of baseline conditions, ongoing data collection across the CPN pipeline, and accessible and shared data
- 3. Collaborative action, including engaging all members of the CPN communities in using data to focus on CPN outcomes and ensuring community/resident voice

4. Investment and sustainability, including CPN infrastructure development, allocation and alignment of resources to support the continuum of solutions and the partnership, and partner capacity building

C. Quality of Project Services

1. Likelihood that project services will lead to improved academic achievement

Creating strong, high-quality neighborhood schools capable of addressing decades of unequal access to education for all CPN students is at the core of the CPN service delivery model. With the support and leadership of Superintendent Rouhanifard and Mayor Redd, CPN partners will break down silos and facilitate the systems change needed to undertake major transformation of the lowest-performing CPN schools so that they achieve the same impressive outcomes as more affluent neighborhood schools statewide. As the Superintendent declared in March 2015, "*Camden's kids can't wait any longer for the opportunity to attend a safe, successful, neighborhood public school.*" The CPN-funded intensive academic supports will advance the existing districtwide and school-based education reforms by addressing barriers to success at every level and across multiple domains (e.g., mental health, physical health), addressing unmet needs (e.g., after-school and summer academic support), and ensuring seamless transitions and strong articulation from one school level to the next.

With Promise Neighborhoods funding, CPN partners will build capacity of target schools to improve substantially student learning while simultaneously addressing the family and neighborhood context in which the schools operate. To support the attainment of these dramatic improvements in academic achievement, the CPN partnership will establish a cohesive and consistent approach that place the schools as neighborhood hubs for community, family, and social supports (see Box 1). For example, to promote healthy weight and development in

children and increase access to healthy food options, target school families can participate in *Healthy Routes Neighborhood Delivery* (see Solution 4-5 in Appendix F). A partnership between CFS and ShopRite, *Healthy Routes Delivery* will allow CPN families to order healthy foods online at supermarket prices (including access to in-store discounts and specials online) and pick up their groceries at a target school or the PN Family Success Center with no registration or delivery fees.

School-based CPN-funded social workers. bilingual PN Intake Coordinators, CPN partners, and school staff will ensure students and families receive integrated and coordinated support services and that culturally competent and effective communication occurs at all levels (among partners, school-home, and school-community). Examples of mental health and stability solutions family available across the continuum include Treatment Alternatives for Children at Risk (Solution 2-7), Family Link (Solution 2-9), and Multi-Systemic Therapy (Solution 2-12).

Examples of CPN Family & Community Solutions:

- -Adult Basic Skills GED Program provided by Camden County College
- -Family University parentchild family literacy classes
- Street Outreach Services crisis intervention and support services for homeless youth
- Together Across Generations support services for grandparents raising CPN children

At the start of the pipeline, a team of school-

Box 1

based literacy specialists will provide instructional and in-classroom support for early learning teachers in CPN Head Start and pre-kindergarten classrooms and for early childhood teachers (grades K-1) at Wiggins. The literacy specialists will align the implementation and articulation of three key solutions across these early learning and early childhood classrooms to ensure the seamless transition of young children to elementary school:

- *Reach Out and Read*, an evidence-based literacy-focused curricular enhancement to the city's Born to Read initiative (Solution 1-9)
- Second Step Early Learning (Solution 1-11), a research-based social-emotional curriculum that promotes school readiness and school success
- *Healthy Lifestyles* (Solution 1-12), a nutrition education and physical education program

The CPN *successful students and schools strategy* will provide intensive academic supports (see Box 2 and Box 3 on the following pages) to build on early successes of the KIPP Cooper Norcross Academy (KCNA), Camden's first renaissance school established in August 2014, and support ongoing reforms at Wiggins College Prep School (transformation model) and Camden High School (turnaround). Together, these schools currently enroll more than 57% of the school-age children (grades K-12) and youth in the four target neighborhoods. Each has demonstrated a commitment to the CPN vision to improve substantially the educational outcomes of children and youth, to put into practice the three foundational pillars (described in Section B) critical to strengthening the social, communal, and familial infrastructures and to sharing and adopting effective practices.

As part of the KIPP New Jersey network of schools dedicated to preparing students in under-served communities for success in college and in life, KCNA aims to instill in its students the desire and ability to succeed in college. To accomplish this vision, KCNA strives to ensure three characteristics are evident in all of their classrooms: content knowledge, lesson purpose and anticipation, and a college-ready bar for students. KCNA uses a balanced literacy framework and Common Core-aligned curriculum to teach both literacy and math to all students, including those with special needs.

Teachers use a variety of student data (e.g., homework completion, grade book data, attendance, etc.) to drive instructional practices. KCNA collects student data a daily, weekly, trimester, and annual basis using various assessment tools (e.g., unit assessments, blended learning systems, and MAP assessments). Data are tracked using different integrated systems and

databases connected by a visualization tool called Tableau, which creates dashboards accessible by teachers, coaches, and school leaders. After just one year, kindergarten students at KCNA showed dramatic improvements on the MAP. Despite entering school below grade level (e.g., the 38th median percentile) in reading in fall 2014, these kindergarten students far surpassed the national average (50th percentile) by spring 2015, scoring at the 64th percentile.

At the heart of the transformation of Wiggins College Prep School is the *Response to Intervention* (RTI) framework, launched in 2011 when the entire school committed to complete restructuring to produce long-lasting change for its students. At Wiggins, staff implement the RTI framework through several key features: rigorous, embedded professional development

Examples of CPN Academic Support Solutions, Ages 6-14:

- *Qrew's Nest*, a unique peer mentoring and academic program that will pair teens with upper elementary students from KCNA and Wiggins in need of academic and social reinforcement
- Wiggins Moving Up, a college-entry, academic support, and career coaching intervention for middle school students
- School-Based Health Centers will decrease time students miss school due to sickness or lack of proper medical care, supporting overall school success

Box 2

that centers on developing the principal as a model leader; an extensive data management, monitoring, and tracking system; and the lab/workshop model of teaching and learning.

To address the needs of their children who speak a language other than English, Wiggins provides 30 minutes of small group instruction daily in English as a second language (ESL). Students learn the listening, speaking, reading, and writing skills they need to be successful in the English-speaking classroom. Wiggins also has a bilingual teacher who provides Spanish-

speaking children with additional support. Other special services at Wiggins include speech therapy, a child study team, peer mediation, school-based parent center and parent coaches, and guidance and counseling.

Camden High School is one of two traditional high schools in the district and the feeder school into which the Wiggins College Prep School graduates articulate. CPN partners will work collaboratively with Camden HS leadership and teachers as they continue to implement the turnaround model and other educational reforms. As required by the turnaround model, teachers at Camden HS use student data to inform instruction and implement strategies to recruit and retain highquality staff. All of the school improvement efforts align with NJ State academic standards, and align vertically from one grade to the next to ensure

Examples of CPN Academic Support Solutions, Ages 15-18:

- Upward Bound for English Language Learners will provide ELL students in grades 9 and 10 with afterschool tutoring, summer classes at Rowan University, leadership training, and bilingual mentorship
- -*KIP Through College & Camden High Through College* will provide comprehensive support for CPN high school students, including individual counseling, academic support, crisis intervention, and post-secondary advisement

Box 3

continuous and consistent services throughout a student's high school experience. For the 2016-17 academic year, Camden HS will establish two academies to create smaller learning environments for students and will launch swipe-based attendance, which will allow closer

monitoring of attendance and enhanced communication between students, teachers, and families about attendance.

Importantly, the successful students and schools strategy at Wiggins and Camden HS will benefit from the *Camden Commitment* issued by the Superintendent in January 2014 to ensure that all Camden children and families have access to excellent and safe schools. For example, the district recently invested \$1.4 million to expand wireless coverage in schools and provide more than 2,300 laptops to support 21st century learning and launched Family Connection, a comprehensive web-based service to help students and parents explore and plan for college and career.

Another key district transformation strategy is the citywide Safe Corridors Initiative (Solution 2-6) to address the grave concerns of students and parents about community and school violence. The proposed PN implementation grant will support a half-time Safe Corridors coordinator/trainer to strengthen this initiative at the three target schools. The CPN continuum will offer comprehensive extended learning time programs (Solution 2-2) at all three target schools through a partnership with the I Have a Dream Foundation. By continuing the high quality education program for CPN children after-school and throughout the summer and focused heavily on post-high school preparation, CPN partners will be able to make great strides to bridge the educational gap between Camden City's children in poverty and their middle and upper class peers.

2. Creation of aligned partnerships and system that holds partners accountable for performance

As described earlier, the CPN is an established collaborative of aligned cross-sector partners formed in 2010 to transform Camden's most distressed neighborhoods and schools. The

CPN collaborative includes both service delivery partners and anchor institutions that guide the vision and determine strategic direction, support alignment of existing activities and resources, identify new partners when necessary, build public will with residents and other community and regional stakeholders, and mobilize resources to support implementation and sustainability. These partners include City of Camden, Cooper Foundation, Cooper Lanning Civic Association, Lanning Square West Residents in Action, Camden City School District, KIPP Cooper Norcross Academy, Rowan University, Rutgers University-Camden, Southern NJ Perinatal Cooperative, Cooper University Hospital and Medical School, and many others.

As documented in the attached signed MOU, as partners of the CPN collaborative, these institutions are fully committed to a common set of core values and partner responsibilities:

- 1. *All children and families have the potential to be successful*. CPN partners will be intentional in providing comprehensive services to families in a holistic way. CPN partners will identify overall family needs at time of intake and refer to appropriate services to ensure all needs are addressed.
- 2. Solutions will be family-focused, culturally competent, trauma-informed, and community-based. CPN partners will create localized opportunities for families living in the target area to receive services and access resources that promote overall family well-being. Programs and service provision will reflect the needs of families within the target area neighborhoods.
- 3. *Efforts will be data-informed, evidence-based, or evidence-informed practice*. CPN partners will serve the target population through programs and interventions based on moderate to strong evidence whenever possible. CPN partners will track performance and programmatic data as they pertain to the PN performance measures.

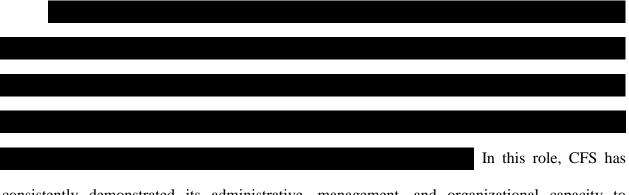
- 4. *Collaboration is necessary*. CPN partners understand that no single organization can meet the comprehensive needs of families in the target area. CPN partners recognize the benefit of working collaboratively and braiding resources to build a seamless continuum of services through which families can transition easily and successfully.
- 5. *Creating a culture of promise*. CPN partners commit to collaboratively provide opportunities for children and families in the target area and contribute to building a culture of possibility and attainment for all.
- 6. *Priority for CPN children*. CPN partners will give priority to supporting families in the four target neighborhoods when possible.

Moving from planning to full implementation, the principle of shared accountability will be the glue that holds together the CPN collaborative and helps partners produce desired results for target children and families. Led by CFS, collaborative partners adopted the use of resultsbase accountability (RBA) to hold each other accountable for performance and outcomes for CPN children and families. In fact, prior to receiving the Promise Neighborhoods planning grant, the Results Leadership Group (RLG) conducted a series of RBA 101 capacity-building sessions for CPN partners in spring and summer 2012. The training focused on the concepts of the RBA framework and strategies for applying RBA as a way of working within their respective agencies and as members of the CPN collaborative with a common vision and measureable results using the Promise Scorecard, a web-based tool based on the principles of the RBA framework and recommended by the Promise Neighborhoods Institute.

Piloted during the city's Promise Neighborhood's planning grant, CPN partners will use the Promise Neighborhood Scorecard and RBA principles and practices to facilitate partner accountability of performance. Led by the grant-funded CPN Director of Research and Evaluation, and supported by the Camden Coalition of Healthcare Providers (longitudinal data system lead) and Metis Associates (evaluation team lead), the CPN performance accountability system will strategically align partners to focus collectively on a subset of related-annual performance targets and will include regular use of results to support continuous improvement.

D. Quality of Management Plan

As noted earlier, CFS will serve as the lead applicant and backbone organization for the CPN collaborative partnership. As the largest social service agency in Camden, CFS has a 90year history of delivering social services in southern New Jersey, as well as an accomplished record of collaboration with neighborhood residents, the school district, the Mayor's office, other government leaders, and local service providers to improve the lives of the city's most vulnerable children, youth, and families. CFS provides more than 65 programs in community and behavioral health, early childhood education, family support and prevention, safe and supportive housing, substance abuse, and victim and trauma care.



consistently demonstrated its administrative, management, and organizational capacity to manage large, complex programs and grants. Moreover, CFS has extensive experience leading and facilitating large-scale, multi-partner reform efforts, including serving as the operational lead agency for the work of the 40-member Camden Youth Violence Prevention Forum Task Force,

leading the city's Promise Neighborhoods planning grant, and serving as the lead convener for the Camden City Promise Zone initiative.

CFS has a strong organizational structure headed by a Board of Trustees that meets monthly and comprises a diverse group of community members.

As a large, multi-service, nonprofit organization, CFS has strong administrative and organizational capacity that includes human resources, finance, development, public relations, and information technology departments that build, manage, and sustain, large agency and community-based initiatives. In fact, the NJ Association of Mental Health and Addiction Agencies selected CFS as the 2014 Provider of the Year based on our winning-record of "highly competitive federal and state-level grants that have allowed CFS to offer an even broader comprehensive, one-stop service delivery experience for children and families throughout southern New Jersey."

Governance Structure

As the CPN backbone organization, CFS will serve as the fiscal agent for the Promise Neighborhoods implementation grant, house and manage CPN staff (described in the next section), develop a shared infrastructure, and ensure the long-term sustainability of the CPN service delivery model. Specifically, as the CPN anchor agency, CFS will be responsible for:

- \checkmark Integration of academic and social solutions in the target schools and in the community
- ✓ Facilitation of the CPN Leadership Council

- ✓ Co-facilitation of the CPN Data Governance Board
- Implementation of collaborative processes and communication protocols
- ✓ Resource development functions for partners and collaborative efforts
- ✓ Leadership of data management and evaluation

The CPN Leadership Council leads the governance structure (Figure 5) and includes

committed leaders who will continue to drive the CPN vision and communicate the work to partners and communities. The CPN Leadership Council includes representation from key cross-sector partners and resident leaders, including City of Camden, Cooper Foundation, Camden City School District, KIPP Cooper Norcross Academy, Rowan University, Rutgers University-Camden, Square Resident Lanning Association, Bergen Lanning Residents in Action, and the Southern NJ Perinatal Cooperative. The CPN Leadership Council will convene regularly to discuss issues related to infrastructure, partner accountability, policy change, resident engagement, communication and messaging, fundraising, and sustainability.

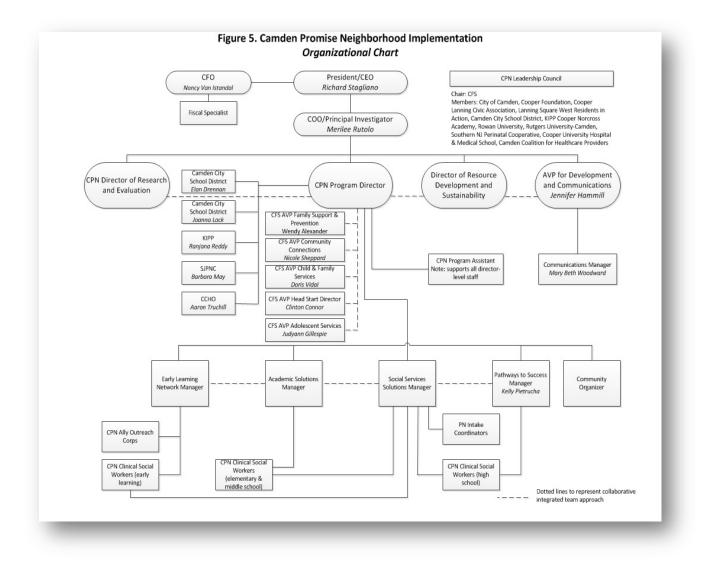
Governance Lessons Learned:

- Strong governance and long-term sustainability requires community buy-in, accomplished by consistent participation from a broad cross section of organizations that represent residents as well as residents themselves.
- A cross-sector, residentinvolved leadership structure has led numerous collaborative efforts citywide as early as 2010, including the National Youth Forum Task Force and the Camden Promise Zone Leadership Team.

Under CFS leadership and through the vehicle of the CPN Leadership Council, residents and partners will work collectively to build financial stability and sustainability by:

• Committing to the strategic allocation of existing resources, both financial and nonfinancial, in support of CPN solutions;

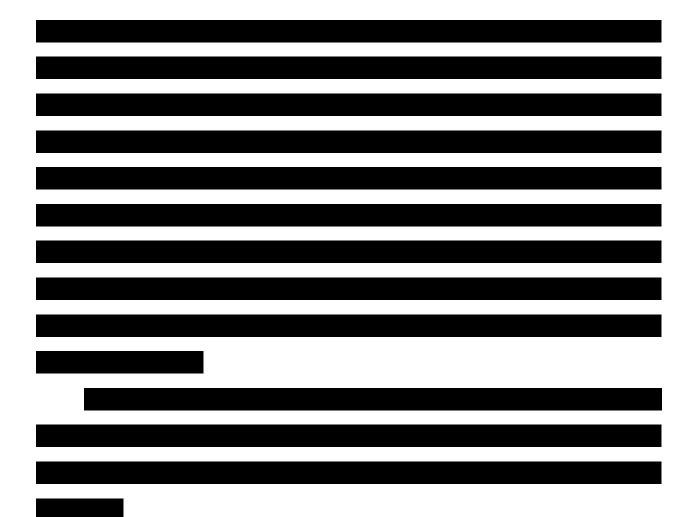
- Exploring options for repurposing existing and committed public and private dollars in order to support meaningful and effective service delivery and integration;
- Developing and submitting competitive grant proposals to public (state and federal) and private philanthropies to support CPN solutions and infrastructure;
- Coordinating the efforts of partners to engage in joint fundraising campaigns in support of CPN goals; and
- Engaging in systematic data collection and analysis of CPN solutions as they roll out or expand, including, in some cases, seeking funds to conduct rigorous evaluations of the



most promising practices in order to access additional funding streams.

CPN Management Team

I	



A full-time dedicated **CPN Program Director** will provide the day-to-day management of the CPN service delivery model, lead the convening of CPN partners, engage CFS staff in support of CPN,, oversee resident and community engagement, manage CPN program staff, and ensure the initiative's sustainability. The CPN Program Director will have at least 10 years of senior-level program management experience and will report directly to the Principal Investigator. Additional responsibilities of the Program Director will include:

 Monitoring Promise Neighborhoods implementation grant funds, sub-contractual agreements, work plans, and budgets

- Working with the CPN Leadership Council members and continuum of solution providers to ensure seamless implementation and partner accountability
- Collaborating with the CPN Director of Resource Development and Sustainability, AVP for Development and Communications, and CPN Director of Research and Evaluation to collaborate with program staff and partners to increase referrals to the CPN footprint report, and communicate results and performance
- Identifying and addressing barriers to planning, implementation, and sustainability
- Cultivating and sustaining relationships with CPN partners, residents of the target community, funders, and other stakeholders
- Building capacity, scaling, and expanding the CPN service delivery model over time
 A highly qualified management team will support the CPN Program Director, including a
 CPN Director of Research and Evaluation, Director of Resource Development and
 Sustainability, and Communications Manager.

The full-time **CPN Director of Research and Evaluation** will oversee all data collection, tracking, and analysis efforts and ensure that the design and implementation of the CPN continuum of solutions and service delivery practices reflect the best available evidence to generate positive outcomes for children and families. In addition to serving on the CPN evaluation team, the role of the Director of Research and Evaluation will include:

- Working closely with Camden Coalition to develop and launch Camden ARISE and cochair the CPN Data Governance Team
- Developing partner data confidentiality and sharing agreements
- Overseeing compliance with partner data commitments

- Providing training for CPN program staff and others that will enter data into Camden ARISE, Promise Scorecard, and other CPN systems
- Continuously assessing needs of the target neighborhoods, including segmentation analyses
- Reviewing indicators of success and adjusting annual targets as needed
- Maintaining the CPN Promise Scorecard, including reporting out to partners and the community

A full-time **Director of Resource Development and Sustainability** will ensure the sustainability of the CPN initiative by continually working to secure cash and in-kind donations from a wide range of sources. Reporting to the CPN Program Director, the Director of Resource Development and Sustainability will develop and maintain a multi-year sustainability plan to ensure the CPN continuum continues beyond the five-year federal grant. This will include working closely with existing match partners and funders to track and receipt commitments; diversifying revenue streams by soliciting donations from various sources, including individuals, foundations, and corporations; collaborating with the Communications Manager (see below) to promote giving opportunities; and overseeing solicitations of major gifts, applications for government and foundation grants, donor recognition efforts, and outcomes reporting.

A full-time Communications Manager

The Communication Manager will be responsible for developing, implementing, and evaluating a system-wide communications strategy that uses both traditional and social media outlets on behalf of the CPN initiative (e.g., conveying goals, solutions, and outcomes of the CPN effort to partners and residents of the target neighborhoods, among other

audiences). The Communication Manger will also oversee public relations, social media, branding, and customer service related to the CPN effort. This will include creating, distributing, and maintaining print, audio, visual, and digital communications materials; generating CPN-related content for the CFS website; developing annual progress reports; and promoting and protecting the brand and reputation of the CPN service delivery model.

CPN Service Delivery Team

Working directly under the CPN Program Director, the multidisciplinary service delivery team will include:

A full-time **Early Learning Network Director** that will oversee the implementation of the CPN Early Learning Network (see Section III) and manage the work of the Neighborhood Early Learning Ally Corps and clinical social workers based in the Head Start classrooms (also described fully in Section III).

A full-time Academic Solutions Manager responsible for working with the school district and schools within the CPN footprint to oversee and coordinate all K-8 academic programs, services, and activities; ensure seamless transitions of services across the pipeline; and identify and address programming gaps. The Academic Solutions Manager will also work closely with the Social Services Solutions Manager (see below) to ensure full integration of academic and social supports for target children and families and convene regular meetings with CPN academic partners and residents to use data to assess educational outcomes, solicit feedback, and support continuous quality improvement. In addition, the Academic Solutions Manager will co-manage the school-based clinical social workers (described in Section B) and supervise four CPN-funded **literacy specialists** that will support the literacy curriculum

implementation and provide in-classroom support in Head Start classrooms, private provider preschool teachers, and kindergarten and first grade classrooms at Wiggins.

A full-time **Social Services Solutions Manager** will oversee and coordinate all family and community programs, services, and activities events within the CPN continuum of solutions. Working closely with the other CPN managers, the Social Solutions Services Manager will ensure integration of social supports across the continuum. This individual will also coordinate all family support referrals, including regular meetings of partners that deliver these solutions, and use data to identify gaps in services, inform quality improvement, and provide updates to the community on CPN progress related to family and community support.

In addition, the Social Services Solutions Manager will co-manage the school-based social workers and oversee the work two full-time **Promise Neighborhood Intake Coordinators** (one bilingual) that will serve as centralized CPN navigators and liaisons for the target neighborhoods to ensure that children and families move seamlessly through the continuum. Housed at the PN Family Success Center, the PN Intake Coordinators will be the principal resources for solution partners, school staff, and families, including enrolling new families, helping address specific needs, connecting students with appropriate resources, and advising on continuum solutions. To support the CPN culture-based approach, one of the two PN Intake Coordinators will be bilingual in English and Spanish, ensuring that true meanings of family communication and information are not lost in translation and family members can emotionally process easier in their first language. Working closely with the CPN Academic and Social Services Managers, the PN Intake Coordinators will ensure students and families receive the supports and resources they need for children to stay on track at school.

Dedicated to the high school and transition to college and technical career pathways segments of the CPN continuum, the full-time **Pathways to Success Director** will manage the high school solutions designed to promote college entry and oversee the College and Career Readiness strategy. The Pathways to Success Director will ensure integration and coordination services across the high school and college/career readiness continuum. In addition to supporting solutions such as KIPP Through College, Camden HS Through College, PowerCorps, and CamdenCorps, this individual will work with local higher education partners to build relationships and support for our CPN youth and young adults. This work will include creating supportive transitions, identifying barriers to success, and helping youth overcome them (such as housing, costs, etc.).

The primary role of the full-time **Community Organizer** will be to design and implement strategies for engaging community residents in meaningful conversations around data, services, and community needs to inform continuous improvement and implementation processes. The Community Organizer will also be responsible for engaging increasing numbers of CPN families and community members in Promise Neighborhood events and empowerment activities. The Community Organizer will be a grant-funded position with candidate searches that give priority to target neighborhoods and/or Camden City residents.

The **CPN Program Assistant** will support the work of the CPN initiative and will report directly to the CPN Project Director. The Program Assistant will have a critical role in communication on behalf of the CPN Leadership Council partners, helping to support transparent communication across partners and with neighborhood residents and community members by sharing summaries of monthly meeting discussions and decisions and by creating and distributing quarterly initiative newsletters. 1. Plan to work with the neighborhood and its residents and schools

Critical to the success of the CPN service delivery model and the long-term vision of neighborhood transformation is authentic and active resident engagement. To implement solutions that can drive sustainable change on a large scale, youth, families, and other neighborhood residents will continue to have multiple opportunities for leading, owning, and contributing to the effectiveness of the continuum, including governance, decision making, as well as strengthening their own family during the CPN implementation period and beyond. Partners and residents will determine community priorities, identify real-time trends occurring within the neighborhood, discuss what services really work, and strategize how families might better access these services and remain

Community/School Engagement Lessons Learned:

- Families need a central neighborhood-based place to come together to prevent feelings of isolation and support parent engagement.
- Silos exist among Camden neighborhoods. The Head Start Policy Council served as an effective vehicle for stimulating crossneighborhood resident collaboration around early learning and provided a significant voice around tangible objectives.
- The Mayor also launched the Congress of Community, Faith-Based and Resident
 Organizations, which increased resident involvement and the integration and communication across
 Camden neighborhoods.

enrolled for maximum benefits. To accomplish this, the CPN partnership remains firmly committed to setting a broad table that includes a variety of stakeholders from across the target neighborhoods, especially those traditionally disenfranchised community residents, in actively deciding the community's future.

Partners will draw from and continue to build the resident leadership pipeline that has emerged since the start of the city's Promise Neighborhoods planning grant in 2012. CFS will also continue to engage parents and other residents through the Early Head Start and Head Start parent-elected Policy Councils, which have significant responsibility for short- and long-term program planning, community outreach and advocacy, and policy development. Their connections and reach to parents and families of children at the earliest entry points to the CPN continuum will support community engagement efforts.

A full-time CPN Community Organizer (see Management Section) will be responsible for continuing these initial resident and community engagement, maintaining strong partnerships with the target schools, engaging neighborhood business leaders, recruiting neighborhood youth, and launching new and innovative strategies for engaging residents and other community stakeholders in meaningful ways to support ongoing planning, implementation, and evaluation of the CPN effort. Another key responsibility of the Community Organizer will be to work with CPN partners to design and offer leadership training for interested community members and youth representatives to cultivate, develop, and build capacity in the skills needed to serve as advocates for their neighborhoods. This training will include topics such as holding productive meetings, recruiting and training volunteers, working with elected officials, developing advocacy campaigns, and obtaining in-kind donations from local businesses.

Residents (youth and parents) will serve on the CPN Leadership Council, working alongside key partners and anchor institutions in the footprint. Parents and residents will also play a key role in the Early Learning Network, supporting recruitment/outreach through Early Learning Allies, advising providers on how programs are working, recommending new features/services, and suggesting changes. Parents and members of grassroots organizations who represent the community voice will serve on Advisory Boards across the CPN continuum strategies to oversee and evaluate implementation services during the 5-year period. CPN leadership will seek ongoing feedback from Advisory Board members regarding continuum implementation and program goals, objectives, and outcomes as they are assessed each year.

2. Plan to collect, analyze, and use data for decision-making, learning, continuous improvement, and sustainability, including the use of an LDS

As mentioned earlier, the Camden Coalition of Healthcare Providers (Camden Coalition) will serve as the CPN lead partner for data management and longitudinal data system (LDS) development. The Camden Coalition has been at the forefront of the national movement to integrate administrative data for the purpose of improving service quality and analyzing multi-sector service utilization patterns. With support from the Laura and John Arnold Foundation, in 2015, the Coalition launched a multi-sector, integrated data system for Camden known as Camden ARISE. Through this project, the Coalition is already building partnerships across human service domains (including many key CPN partners, including the Southern NJ Perinatal Cooperative, Camden County Police Department, and CCSD) and integrating data from health care, criminal justice, education, housing, and other systems. Because the purposes of Camden ARISE align perfectly with the CPN effort, including neighborhood-level needs assessment, program evaluation, multi-sector collaboration to improve the health and well-being of Camden

residents, and contribution to the knowledge base on the value of integrated datasets in addressing large-scale social change, the system is a natural starting point for a CPN data system.

At the start of Year 1, the Camden Coalition will work with the CPN Director of Research and Evaluation to launch a Data Governance Board representative of partner agencies, target schools, and community residents. The CPB Data Governance Board will inform and guide the expansion of Camden ARISE to serve as a unit-record case management and data tracking system that would provide CFS (backbone agency) and partners with access to real-time data to support both reporting and continuous improvement. The Camden Coalition and the CPN Director of Research and Evaluation will co-facilitate bi-monthly meetings of the Data Governance Board throughout Year 1 and quarterly during Years 2-5 to oversee policies and procedures related to data use, data integrity, data security, and future goals for Camden ARISE. The Data Governance Board will facilitate data sharing agreements, support the use of results-based accountability (as described earlier), and develop well-defined protocols for data collection and management so that operational outputs, outcomes, and performance indicators (as defined in the CPN logic model) are collected routinely to allow for ongoing data management, processing, and analysis.

Supported by the work of the Data Governance Board, the Coalition will undertake a comprehensive and systematic approach to building out Camden ARISE to meet the needs of the CPN partnership, including:

- Tracking individual-level, school-level, and neighborhood-level data
- Facilitating ongoing data collection and analysis for CPN partners to drive decisionmaking, continuous learning, quality improvement, and sustainability
- Sharing results of the CPN partnership with the community

As detailed below, the LDS development plan includes building out the legal data infrastructure required to expand Camden ARISE, upgrading the system's technological data infrastructure, development of the CPN data collection framework and processes, modifying the Promise Score Card to interface with Camden ARISE, and creating a web-based tool for sharing CPN results with the community.

Table 7. Camden ARISE Data System Development Plan

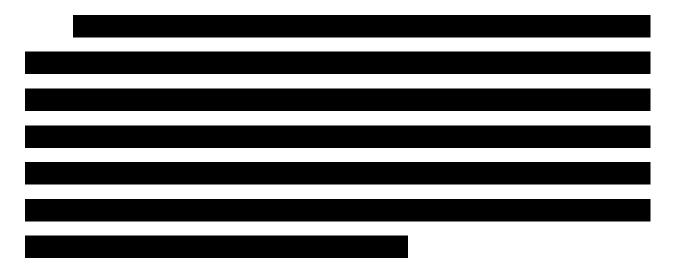
Work Area and Key Milestones	
Build out legal data infrastructure to expand and maintain the integrated data system	
— Create a data map of potential datasets (Quarter 1, Year 1)	
— Develop timeline for data acquisition and integration (Quarter 1, Year 1)	
— Scope legal parameters of data needs and data use cases (Quarter 1, Year 1)	
 Create privacy, security, and ethical use policies compliant with legal and ethical regulations at the federal, state and local level (Quarter 1, Year 1) 	
— Negotiate/execute MOUs and data sharing agreements (Quarter 1, Year 1)	
— Initiate conversations with CPN partner for Phase 1 data sets (Quarter 1, Year 1)	
— Initiate partnerships for Phase 2 data sets in Year 2 and for Phase 3 data sets (Years 3-5)	
Build out technological data infrastructure	
— Enhance secure database that will hold new data sets (Quarters 2-4, Year 1)	
— Determine data specifications in partnership with IT partner staff (Quarter 2, Year 1)	
— Clean and standardize new data sets for integration into database (Quarter 2, Year 1)	
 Conduct a probabilistic match to identify common individuals across data sets (Quarter 2, Year 1) 	
— Develop methodology to identify family units in and across datasets (Quarter 3, Year 1)	
— Geocode address-level data to allow for geospatial (GIS) analysis (Quarter 3, Year 1)	
— Map relevant variables across data sets (Quarter 3, Year 1)	
— Develop a data dictionary to codify integration and analysis processes (Quarter 4, Year 1)	
Develop framework to collect required PN performance measure/outcome data	
 Work with CPN evaluation team to finalize data collection plan and quality assurance processes (Quarter 2, Year 1) 	
— Develop system to capture data (Quarters 2-4, Year 1)	
 Develop data system and analytic training curriculum and capacity building plan for CPN partners (Quarters 3-4, Year 1) 	
 Begin partner- and school-based visits and capacity building workshops (Quarter 4, Year 1, Year 2) 	
— Administer and manage data capture platform to document program outcomes (Years 2-5)	
— Implement assessments to ensure data quality and completeness (Years 2-5)	
— Continue site-visits and workshops for building data, analytics and reporting capacity of staff	

	Work Area and Key Milestones
	in partner organizations (Years 2-5)
Modify ARISE	Promise Score Card performance tracking and reporting tool to interface with Camden
	Interview CPN leadership partners to understand the CPN service delivery model and continuum of solutions (Quarter 1, Year 1)
	Design and develop a web-based data capture platform for programmatic partners to document on-going program activities in real-time (Quarters 2-3, Year 1)
	Develop training, documentation, and data dictionary on use of the revised performance tracking database (Quarter 4, Year 1) and conduct partner training and modify over time (Quarter 4, Year 1, Years 2-5) as needed
	Launch the enhanced performance tracking platform (Quarter 4, Year 1)
	Implement monthly data reporting reminders and data quality assessments with CPN service delivery partners (Years 2-5)
	Analyze and aggregate data on a semi-annual basis (Years 2-5)
	Produce a monthly Promise Scorecard to track progress toward program activities (Years 2-5)
Develo	p and facilitate the review and use of data by community stakeholders
	Develop a template for a high-quality slide deck with data visualizations (Year 2)
	Develop a Tableau dashboard that captures PN metrics in a way that is comparable over time (Year 2)
	Work with the CPN evaluation team to develop/implement plan for actionable use of summary reports, data visualizations, and PN scorecard data (Year 2)
	Support partner staff with data, analytics, and reporting as needed (Years 3-5 and beyond)

In addition, as described earlier, the Camden Coalition will serve as part of the CPN evaluation team (along with Metis Associates and Rowan University). The CPN evaluation team will present formative evaluation findings, including data on the annual CPN performance measure targets, by PN results area at the monthly Leadership Council meetings so that partners can use data to inform the overall management of the initiative (e.g., making mid-course corrections when needed). This will include the development of quarterly written reports summarizing key data findings for use beginning in Year 2.

E. Adequacy of Resources

1. Reasonableness of the costs in relation to the number of persons to be served and results and benefits to be achieved



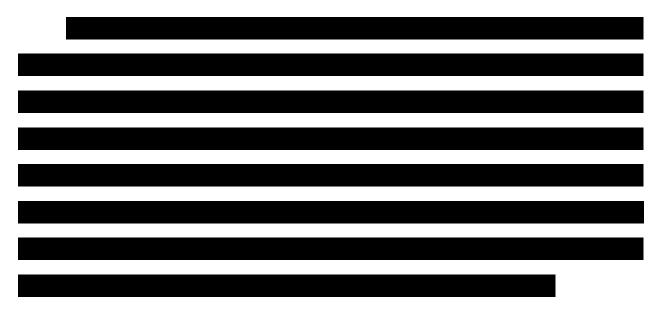
As show in the following table, the CPN service delivery model includes a strategic and deliberate plan to offer cost-effective solution that scale up over time so that 3,930 children (ages 0-18) and their families as well as 1,761 young adults (ages 19-24) who reside in the four neighborhood target area will be the direct beneficiaries of this grant.



In addition, as detailed in Sections B and C, in addition to the children and families participating in CPN solutions, a footprint-wide network of early learning providers, three target schools, 28 partners, and many other community members will benefit from the capacity building, training, knowledge sharing, and cross-sector collaboration that the CPN effort will accomplish.

The proposed capacity-building activities, which include cross-sector training, data system development, and data-related technical assistance, will ensure that the solutions and

approaches seeded by the PN implementation grant will be sustained well beyond the funding period, which represents a significant return on the USDOE's investment, as well as on the part of our matching funders. Moreover, given our extensive expertise in early childhood development, trauma-informed approaches, and culturally-competent social services for children and families, CFS will provide a significant portion of the training, ongoing coaching, and technical assistance for the CPN Early Learning Network, target schools (principals, teachers, and student support staff), and residents that will extend beyond what will be covered by the grant. The budget also includes funds that will support training and technical assistance delivered by two partners, including Rowan University (early learning, child development) and Camden Coalition (Camden ARISE, data-driven decision-making and continuous improvement).



2. Multi-year financial and operating plan (resources), partner commitment, and stakeholder support to sustain the project beyond the life of the grant

CFS will implement a sound multi-year plan for achieving both financial and operational success that will ultimately lead to a self-sustaining service delivery model. This co-

managed approach, coupled with a full-time fiscal analyst dedicated to the Promise Neighborhoods implementation grant, will ensure seamless and effective fund administration and management. As described earlier, CFS has the requisite experience and demonstrated capacity to lead the CPN partnership in a fiscally responsible way. Since 2000, CFS experienced unprecedented recent growth in its financial resources and programs, and successfully increased staff capacity increase of more than 30 times and a tripled annual operating budget. Since then, CFS has completed multiple mergers and affiliations, currently manages Head Start in Camden City and Camden County, successfully directed the city's Promise Neighborhoods planning grant, and currently serves as the Convening Partner for the city's Promise Zone initiative.

Central to CPN financial and operation plan, CFS will broaden the partnership between the CPN effort and the county's Community Planning and Advocacy Council (CPAC), which has worked closely with CFS and CPN partnership since its inception. The CPAC Covenant for Children and Families, a framework that identifies and supports neighborhood-based initiatives, is co-chaired by Mayor Redd and Freeholder Rodriguez and represents a combination of new and leveraged funding organized to support family success. As detailed in attached MOU, CPAC will formally identify the four-neighborhood service area of the CPN partnership as the priority signature neighborhoods for the Covenant. Through this vehicle, CPAC will use planning and allocation methods to leverage and commit existing and new funding and partners to support the CPN service delivery model. In other words, CPAC will leverage funds and services of other providers to support the CPN continuum of solutions.

With CPAC and other CPN partners, CFS will continue to integrate funding sources and maintain a diverse, stable funding base for the CPN partnership from public and private sectors that will support CPN solutions and services over the next five years and well beyond.

CFS uses Blackbaud financial software to help manage and integrate multiple funding streams and will draw on its special expertise in using large and diverse funding to support multi-partner service integration, break down silos to help families, and not be constrained in their efforts by any particular funding source. For example, as the Promise Neighborhoods planning grant fiscal agent, CFS successfully blended multiple funding streams from federal, state, and local public sources, as well as cash and in-kind support of universities, hospitals, businesses, and service providers. CFS effectively integrated funding sources to better direct resources at the neighborhood level in targeted and intentional ways.

In addition, CFS utilizes the accrual method of fund accounting and the agency maintains fiscal integrity through a series of internal and external checks and balances within the guidelines of Generally Accepted Accounting Principles (GAAP). CFS has 501(c)(3) status listed on the irs.gov July 15, 2015 updated listing and has received a full compliance letter with no deficiencies on its most recent audit dated November 11, 2015 for year ending June 30, 2015.



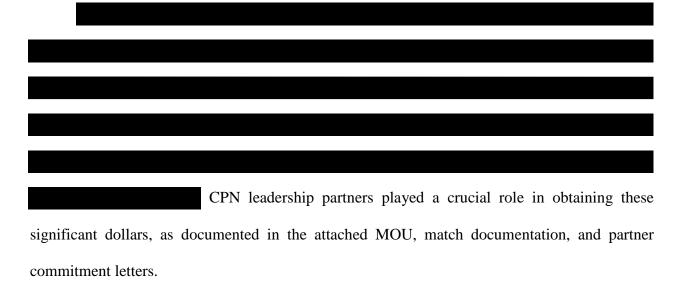


Table 9. CPN Match Commitments by Year

III. Narrative to Address Competitive Preference Priorities

Competitive Priority 1 (Early Learning)

The CPN needs assessment study revealed multiple early learning programs and supports available within the target neighborhood, which operate largely in isolation and in ways that are not widely known to families with young children. As a result, MAP data showed that the vast majority of CPN children entered kindergarten not school ready (KIPP Cooper Norcross Academy, 2015). In response to these needs, the CPN partnership is proposing to launch an Early Learning Network that will ensure that the beginning of the CPN pipeline provides a strong foundation for children prenatally through kindergarten and increase overall rates of school readiness and success at third grade across the target neighborhoods. Specific goals include:

- Creating an integrated system of solutions that addresses varying early learning needs of families (maternal and child health, early intervention, childcare, Early Head Start, pre-kindergarten, Head Start, and other family supports) and connects seamlessly to early childhood education (K-3)
- Increasing parent awareness and use of the early learning solutions and family supports available
- Substantially strengthening the quality of home- and center-based childcare and early learning service delivery within the footprint

CFS will serve as the lead partner for the Early Learning Network, building on early efforts to begin to integrate Camden's early childhood landscape. Under the leadership of a fulltime Early Learning Network Manager and advisement of a specially formed task force, the CPN Early Learning Network will feature two key strategies – development of a neighborhood-based

team of early learning allies and comprehensive, sustained training, coaching, and on sitesupport provided by early childhood experts from School of Education at Rowan University.

To accomplish this work,

the

Early Learning Network Manager will convene a task force comprised of early learning stakeholders and providers from within the footprint, across the city, and from the state. Representation will include Head Start, Early Head Start, Southern NJ Perinatal Cooperative, home-visiting and center-based providers, district early childhood managers, target school staff, the district's School-Based Youth Services, neighborhood parents, Grow NJ Kids, Rowan University School of Education, and Camden County Council for Young Children. The task force will bring the multiple perspectives needed to launch the Early Learning Network, identify possible hurdles to implementation of network strategies, and contribute to implementation planning and evaluation over time.

Neighborhood Ally Outreach Corps

The Early Learning Network Manager will recruit and specially train a cadre of at least five residents from across the four target neighborhoods to serve as part of the CPN Neighborhood Ally Corps. Serving as the cornerstone of community-based outreach and recruitment, the Ally Corps will ensure that all families/children within the footprint connect with the resources and supports that best meet their individual needs at the earliest possible stage. Support from a trusted and empathetic community member will help families who are unaware of, isolated from, or intimidated by the systems and services that can provide assistance to them and their children.

The Ally Corps will be responsible for conducting intensive door-to-door, block-byblock, and other neighborhood-based outreach to reach and engage families with young children.

CPN Ally Corps members will cultivate trusting relationships with neighborhood families to promote awareness and understanding of the different early learning solutions available within the CPN continuum. Once enrolled, Ally Corps members will guide families through the early learning solutions (e.g., Nurse Family Partnership, Healthy Families, Baby's Best Start, Early Head Start, Head Start, and Parents and Teachers) and screenings and referrals for early intervention services, home-visiting programs, and other supports they might need to ensure the overall health and academic success of the child.

To continue to build family relationships and provide ongoing support, another key role of the Ally Corps will be regular home visits with CPN-enrolled families. Since the Southern NJ Prenatal Cooperative leads many of the early learning solutions, the Ally Corps will work closely with their Central Intake to facilitate onsite referrals to programs while in the home. Members of the Ally Corps will also help families address immediate basic needs, host forums and discussion nights at neighborhood locations, and facilitate community cafés (based on the Strengthening Families framework) to address topics related to school readiness.

The Ally Corps will be comprised of a combination of paid community residents, dedicated volunteers from the Cooper Medical School at Rowan University, and Civic Scholars students from Rutgers University. The Early Learning Network Manager and several CPN partners will provide in-depth training for all members of the Ally Corps so that they are fully steeped in the CPN service delivery model, solutions, research-informed outreach methods, and case management approaches.

Early Learning Quality Improvement

Rowan University, School of Education will implement a comprehensive, five-year professional development program for early learning teachers and administrators across the

network. Based on the framework of Rush & Sheldon (2011), the program will provide customized training and individualized technical assistance for early learning teachers and the directors/administrators across the participating programs and early childhood providers.

During each year of the implementation grant, the early learning training program will include four key phases. The initial stage will involve observation, needs and strengths assessment, and development of a general roadmap to increase quality. The second stage will focus on the creation of a quality improvement plan (QIP). Each participating provider/early learning program will receive a customized QIP plan based on the intensity of interventions needed and technical assistance resources requested. Technical assistance topics will be determined based on need but might include social emotional development, developmental delays/special needs, intellectual development, assessment, classroom interactions, reflective practice, and participation in New Jersey QRIS Grow NJ Kids.

During the third stage, Rowan educators will provide coaching based on the development of personalized action plans. This will include four personal visits/observations/discussions as needed with individuals or providers, four phone consultations in between each visit as followup, referrals or recommendations of additional services as needed, as well as follow-up of the coaching activities to ensure completion of action plans. The final stage will be designed to evaluate the effectiveness of the technical assistance activities, and identify revisions for the second year of implementation.

Competitive Priority 2 (Affordable Housing)

In October 2012, the US Department of Housing and Urban Development awarded the City of Camden a Choice Neighborhoods Planning grant, which was jointly managed by the Mayor's Office and the Housing Authority of the City of Camden (HACC). The purpose of this

grant was to revitalize public housing in three Camden neighborhoods: Whitman Park, Liberty Park, and Centerville. With this funding, the City, the HACC, residents, and other partners developed a comprehensive, community-based, and measurable transformation plan that addresses economic redevelopment, energy- and cost-efficient housing, transportation, employment, and healthy living. The Choice Neighborhood partners submitted an implementation proposal, which if awarded will be coordinated fully with CPN implementation.

Competitive Priority 3 (Promise Zone Priority)

As documented in the attachments, (Certification of Consistency with Promise Zone Goals and Implementation, HUD Form 50153), Camden City received the PZ designation in April 2015. The CPN footprint is completely within the footprint of the Promise Zone.

Competitive Priority 4 (Postsecondary Success)

While all students should have an intentional path to college and career, decades of unequal access to quality education and postsecondary and career development have left youth in the CPN target neighborhoods with reduced chance for life-long success. In 2015, Camden High School, the neighborhood public high school for CPN students, showed a graduation rate of just 47%. Among those that graduate, the likelihood of enrollment in postsecondary education was very low (30%) and this was largely in two-year colleges (86%). This is a stark difference from their more affluent peers statewide who show high postsecondary enrollment rates (nearly 79%) and mostly in four-year institutions (65%). To begin to address these pronounced disparities, the CPN partnership is proposing to establish a Pathways to Success Network that will ensure CPN students, beginning in 9th grade, receive the academic and other supports they need to graduate high school on time and college and career ready.

The Pathways to Success Network will ensure coordinated and integrated service delivery within and across the high school (ages 15-18) and college and career (ages 15-24) segments of the CPN continuum. Directed by a full-time manager and supported by a team of school-based clinical social workers, the Pathways to Success Network will build a college and career support system. Moreover, with three institutions of higher education as lead partners (Rutgers University, Rowan University, and Camden County College), the Pathways to Success Network is well-positioned to create this innovative approach to college and career readiness and to ensure Camden's young people are on a deliberate pathway for educational success, career readiness, and self-sufficiency.

Consistent with the overall underpinning of the CPN service delivery model (described throughout this proposal), the Pathways to Success Network design emanates from the immediate needs of CPN students and young adults, meeting them "where they are," and providing sustained support through college and career attainment. As such, we are proposing a multi-pronged approach to increase educational opportunity:

- 1. Provide intensive in-school and out-of-school time support that keeps students on track, in school, and on a post-secondary path
- Create smaller learning academies at Camden High School that will create rigorous learning environments that use curriculum, staffing, and community resources to enhance intellectual growth and address the diverse needs and circumstances of atrisk youth
- Re-engage youth disconnected from traditional school in meaningful and relatable work that matters to them and is translatable to the 21st century economy and workforce

4. Provide multiple pathways to college and career that transition youth successfully and quickly by integrating academic and vocational training so that post-secondary education and employment are realistic and attainable for youth

With a dedicated, grant-funded College Success Coach, the proposed Pathways to Success Network will provide an array of resources, options, and supports that meet the individual needs of in-school and out-of-school youth and young adults in the CPN footprint. In addition to strengthening school-based supports so that high school students stay in school and providing high quality coaching and educational resources, the CPN service delivery model will offer safe, age-appropriate, and effective extended learning opportunities (e.g., academic tutoring, SAT preparation, college tours, and application assistance, etc.). The district's recently launched early warning system (EWS), coupled with intensive school-based case management will be the primary strategy to ensure CPN high school students remain in school and on track for graduation. There is groundbreaking research that found if students are not doing well in any *one* early warning indicator (such as poor grades in reading and math, chronic absences, and major behavior infractions) they are at risk for not completing high school (Roderick, Kelley-Kemple, Johnson, & Beechum, 2014).

At the same time, the Pathways to Success Network will reengage disconnected youth so that they have viable opportunities to complete their education, gain critical workforce development and life skills, and complete technical training leading to a professional credential, and gain work experience. Our "no wrong door approach" will provide strong opportunities in school (especially with the reconfiguration of Camden High into two smaller, career-focused academies in the coming two years), as well as out-of-school programmatic solutions for disconnected youth (Camden Corps Plus). Camden County College, Rowan University, and

Rutgers University will provide a number of solutions (see Appendix F) that will prepare and help target youth transition to college. Beginning as early as 7th grade, CPN students will have the opportunity to accelerate their learning through dual credit programs, and youth who did not complete high school will have direct pathways to complete their education on college campuses and transition to college courses and vocational/career training upon completion.

At the system level, service delivery partners will convene regularly to facilitate case conferencing with the school-based social workers and to support integration of services and student success, developing partnerships with local businesses and employers, bridging the gaps between high school and post-secondary education, and providing credentialed occupational training.

IV. Proposal Summary

As documented throughout this proposal, the CPN partnership has both the capacity and strong foundation to realize our theory of change. In addition to our shared commitment to needle-moving change for children and families across the CPN four-neighborhood service area, the CPN partnership exemplifies and embraces the operating principles critical for cross-partner community collaboration success. We have cross-sector leadership partners committed to longterm and sustained involvement, the use of shared data to accomplish our bold agenda and improve over time, and meaningful engagement of residents as partners.

The PN implementation grant would provide CFS and our lead partners with the seed funding needed collaborative infrastructure and implementation support, and we are confident that our cross-sector, high-touch, cradle-to-career approach can begin to reverse decades of educational and social inequities, create high-quality neighborhood schools, and give every Camden child and family the best chance to learn and thrive.