

# 2017 Promise Neighborhood Implementation Grant Application

## PROMISE HEIGHTS

A Promise Neighborhood in West Baltimore



Where hope takes root



UNIVERSITY of MARYLAND  
SCHOOL OF SOCIAL WORK

# PROMISE HEIGHTS PROMISE NEIGHBORHOOD

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**PROMISE HEIGHTS PROMISE NEIGHBORHOOD ABBREVIATION LIST**

<b>ABBREVIATION</b>	<b>ORIGINAL</b>	<b>PAGE 1ST FOUND</b>
PHPN	Promise Heights Promise Neighborhood	1
UMB	University of Maryland Baltimore	1
US ED	United States Department of Education	1
PN	Promise Neighborhoods	1
UMB SSW	University of Maryland School of Social Work	1
PH	Promise Heights	1
U/DH	Upton/Druid Heights	1
BCHD	Baltimore City Health Department	1
MSDE	Maryland State Department of Education	2
21st CCLC	21st Century Community Learning Centers	2
DOJ	United States Department of Justice	2
BCJI	Byrne Criminal Justice Innovation	2
BHB	B'more for Healthy Babies	3
ReCAST	Resiliency in Communities After Stress and Trauma	3
BCPS	Baltimore City Public Schools	3
PSR	Promoting Student Resilience	3
DFC	Drug Free Communities	5
CCDFCC	Cecil County Drug Free Communities Coalition	5
WWC	What Works Clearinghouse	5
NIRN	National Implementation Research Network	7
BNIA	Baltimore Neighborhood Indicators Alliance	7
SY	School Year	11
Pre-K	Pre-kindergarten	11
FARMS	Free and Reduced Meals	11
EM	Eutaw-Marshburn Elementary School	12
FLT	Furman L. Templeton Preparatory Academy	12
HSCT	The Historic Samuel Coleridge-Taylor Elementary School	13
BTW	Booker T. Washington School Middle School for the Arts	13
RA	Renaissance Academy High School	14
KRA	Kindergarten Readiness Assessment	14
PARCC	Partnership for Assessment of Readiness for College and Careers	15
AYP	Adequate Yearly Progress	15
BCDHCD	Baltimore City Department of Housing and Community Development	19

TCB	The Community Builders	20
PROMIS	Promise Heights Management Information System	23
OST	Out of School Time	24
BELL	Building Educated Leaders for Life	24
ACEs	Adverse Childhood Experiences	24
CSC	Community School Coordinator	24
UWCM	United Way of Central Maryland	27
MTSS	Multi-Tiered System of Support	32
PARENT U-1	Parent University - 1	37
PARENT U-2	Parent University - 2	37
MHC	Mental Health Consultant	37
IEP	Individualized Education Plan	39
ILED	Instructional Leadership Executive Director	43
SSC	Student Service Coordinator	45
ELC	Early Learning Coordinator	45
CCC	College & Career Coach	45
SEFEL	Social Emotional Foundations of Early Learning	45
SOP	Seeds of Promise LLC	46
GPA	Grade Point Average	46
BCCC	Baltimore City Community College	54
UMBC	University of Maryland Baltimore County	55
FPP	Family Prosperity Program	57
CFUF	Center for Urban Families	58
STRIVE	Pre-employment program	58
LINKS	Multi agency data linking project in Maryland	60
MLDSC	Maryland Longitudinal Data System Center	61
MSA	Maryland School Assessment	66
MLDS	Maryland Longitudinal Data System	76
RBA	Results Based Accountability	76
CLAS	Culturally and Linguistically Appropriate Services	78
MOU	Memorandum of Understanding	86
SPO	Sponsored Projects Office	87
CITS	Center for Information Technology Services	93
BUDA	Baltimore University Data Alliance	97
MHEC	Maryland Higher Education Commission	101
DLLR	Department of Labor Licensing and Regulation	101
MMSR	Maryland Model for School Readiness	102
R4K	Ready for Kindergarten	102
ROI	Return on Investment	106

## **PROMISE HEIGHTS PROMISE NEIGHBORHOOD**

### **I. INTRODUCTION**

On behalf of the *Promise Heights Promise Neighborhoods* (PHPN) partnership, the University of Maryland, Baltimore (UMB), Maryland's only public health, law, and human services university, is submitting this proposal to the US Department of Education (US ED) for a Promise Neighborhoods (PN) implementation grant under **Absolute Priority 1** (non-rural and non-tribal communities). UMB requests that the Department also consider this proposal for **Competitive Preference Priorities 1, 2, and 3**, which are addressed prior to the Selection Criteria.

The University of Maryland School of Social Work (UMB SSW) is the lead entity for the cradle-to-college-and-career place-based initiative called *Promise Heights* (PH) since 2009. Alongside community residents and partners, we have spent the last eight years planning, creating, and implementing a place-based strategy to significantly improve the educational and developmental outcomes of children and families in the West Baltimore neighborhoods of Upton/Druid Heights (U/DH). At the beginning, a small group of community residents, ministers, researchers, social workers, and educators met to review the educational and health data for students who attend the five public schools in U/DH, located less than one mile from UMB SSW. The data showed that U/DH was ranked 55<sup>th</sup> of Baltimore City's 55 neighborhoods for many of the indicators tracked by the Baltimore City Health Department (BCHD). The initial group agreed one organization could not significantly improve the academic and developmental outcomes and agreed to create a sustained, coordinated commitment to a collective impact process to serve vulnerable children and their families.

They formed Promise Heights to spearhead the efforts and to be the backbone organization and fiscal agent for the program. The award of the Promise Neighborhood Planning Grant in 2012 from US ED jumpstarted efforts and has led to a laser-like focus on providing youth with access to quality schools and strong systems of family and community support that will prepare them for college and career.

We made progress towards creating an integrated pipeline of services from cradle-to-college-to-career. All partner organizations agreed to be guided by the best available data and use a data management information system that link services and helps guide the provision and continuous improvement of family and community supports.

During the past several years, the PHPN has brought significant resources and programs to the five schools (three elementary, one middle and one high) and to children and their families. We have successfully braided federal, state and local funds to advance efforts across the pipeline. These efforts are supported by (1) US ED and the Maryland State Department of Education (MSDE) for 21<sup>st</sup> Century Community Learning Centers (21<sup>st</sup> CCLC) to implement full-service community schools that integrate academic support with health, youth development, expanded learning opportunities, and family and community support; (2) the Corporation for National and Community Services for an AmeriCorps program on multi-tiered student supports; (3) the US Department of Justice (DOJ) **Byrne Criminal Justice Innovation Program (BCJI)** for West Baltimore Youth Violence Prevention; (4) the Family League of Baltimore City (our local management board); and (5) substantial private philanthropy.

Some additional highlights from the last few years are listed, here.

- Resident-driven planning efforts have identified priorities for the U/DH community.

- PHPN's *B'more for Healthy Babies* (BHB) has reduced infant mortality in U/DH to include no sleep-related infant deaths for the past four years.
- 150 families graduated from Parent University with measured, overall increases in responsive parenting behavior.
- After the death of Freddie Gray (a neighborhood resident) in 2015, Promise Heights partnered with BCHD to apply for and win SAMHSA's *Resiliency in Communities After Stress and Trauma* (ReCAST) grant which focuses on community-based youth and trauma supports. Promise Heights is leading the work of extending the partnerships and supports in our five community schools to the full cohort of 13 ReCAST schools.
- During the same time frame, we worked with Baltimore City Public Schools (BCPS) to obtain US ED's *Promoting Student Resilience* (PSR) grant which allowed BCPS to hire additional social workers for our five schools and eight surrounding schools to address mental health services, including suicide prevention and teacher training about social emotional supports. Promise Heights is leading the Restorative Practices training and implementation taking place in each of our five community schools.
- Advocacy efforts led to successfully keeping Renaissance Academy High School open which led to a \$1.5M contribution from the Baltimore Ravens, complemented by four additional foundations, to renovate the school and maintain the requisite array of supportive services.
- The physical environment of U/DH was improved by leading and building five playgrounds in a community that did not have any playgrounds in 2009.
- Our ability to operate a successful place-based initiative was showcased by US governmental agencies during four site visits, conferences, webinars, and master classes.

We have been asked by local, state, and national agencies to share our expertise related to community schools, place-based initiatives, and supportive mental and behavioral health services in schools with groups from the US and Canada. This includes hosting a site visit in March 2017 by US ED for recent Promise Zone grant awardees and a presentation to US ED Senior Administrators in August 2017.

- PHPN has been awarded almost \$10 million for from federal, state and local governments, private foundations, and individual donors.

In preparation for this application, Promise Heights worked with residents and community partners to conduct key informant interviews; collect and analyze results of 13 needs assessments conducted by partner agencies; update quantitative community, health, and education data; and review resident association strategic plans. Information learned during this process formed the foundation of the proposed solutions and strategies detailed herein. As set forth in Section A, significant gaps and needs remain in Upton/Druid Heights. The Promise Neighborhood implementation grant would significantly deepen our work and accelerate our efforts to scale up effective strategies by enabling more seamless coordination of activities among partners.

## **II. NARRATIVE TO ADDRESS COMPETITIVE PREFERENCE PRIORITIES**

### ***Competitive Preference Priority 1 (Byrne Criminal Justice Innovation [BCJI] Program)***

As documented in Appendix H, UMB was awarded a FY16 BCJI grant award on September 26, 2016. The award is for October 1, 2016 through September 30, 2019. The Promise Heights Promise Neighborhood footprint is completely within the footprint of the UMB BCJI project. Promise Heights is the lead entity for the work on youth violence prevention.

### ***Competitive Preference Priority 2 (Drug Free Communities [DFC] Support Program)***

As documented by a memorandum of understanding attached in Appendix H, UMB is partnering with the Cecil County DFC Coalition (CCDFCC) to address opioid abuse prevention within the Promise Heights Promise Neighborhood. Cecil County was awarded a DFC Support Program grant award for the period from October 1, 2014 through September 30, 2019. UMB has long partnered with Cecil County on programs to address the social, health, and educational impact of poverty—especially via the UMB pediatric dental clinic established there in 2009. We have also trained their public child welfare workforce in trauma-informed care. We welcome this additional partnership to strengthen our DFC.

### ***Competitive Preference Priority 3 (Evidence-Based Activities, Strategies, or Interventions)***

As documented in Appendix G (Evidence and Logic Model), UMB will carry out evidence-based activities, strategies, and interventions that, based on information included in this application, are supported by promising evidence. This proposal relies heavily on evidence-based strategies, in part, because this is a hallmark of UMB. In Section B1, our solutions and strategies tables note that 11 of the 16 proposed solutions meet the What Works Clearinghouse (WWC) standards without reservations.

## **III. SELECTION CRITERIA FOR ABSOLUTE PRIORITY 1**

### **A. NEED FOR PROJECT**

#### **A.1. Severity of the Problem**

The West Baltimore communities of Upton/Druid Heights (U/DH) face many challenges—some have been building for decades and some have arisen since the widely televised civil unrest in April 2015, after the death of Freddie Gray. West Baltimore, and these neighborhoods, was filmed as residents expressed anger over years of oppression and trauma by

private and public interests. Rocks were thrown, buildings were burned, and wounds (physical and mental) were left exposed.

According to the American Community Survey 2011-2015, 62% of U/DH children live below the poverty line, about 28% of adults lack a high school diploma or the equivalent, and nearly six out of ten adults are either unemployed or not in the work force. In stark contrast to these negative indicators, U/DH community members have pride in their rich history as the first African American community in Baltimore—where civil rights leaders, artists, and musicians helped build Baltimore, gain civil rights, and change the face of American music, art, literature, and politics. Despite its historic prominence, the neighborhood now faces numerous struggles—high rates of poverty and crime, students with low academic achievement, residents with poor health and high rates of unemployment.

In 2009, residents, non-profit organizations, faith-based institutions, and the UMB SSW established the Promise Heights initiative (PH) to improve the educational outcomes for youth and ensure families are healthy and successful. PH's mission is to create a comprehensive child, family, and community building model in U/DH that provides children and youth aged 0-24 with educational, social, physical, and economic opportunities and which allows them to thrive and succeed in school, work, and family life. From the inception, all partner organizations have been and continue to be committed to finding solutions to meet the needs of vulnerable families (as described more fully in Section E3). That commitment also involves building a continuum of evidence-informed services from the beginning of life through college and career, implementing evidence-based practices to improve PH socioeconomic indicators, sharing data on program effectiveness, and meeting on a regular basis to monitor outcomes. As demonstrated throughout this Promise Neighborhood proposal, we have more work to do. The partnerships developed and

accomplishments achieved through PH over the past seven years demonstrate our shared commitment to continuing to improve outcomes and positively affect children and families in U/DH through a robust continuum of solutions. As further discussed in Section B3, we will use the National Implementation Research Network (NIRN) framework to guide PN progress.

The U/DH neighborhood is near the center of Baltimore City, about one mile from the UMB SSW, 1.5 miles from the City’s Inner Harbor (a renown waterfront commercial and residential area), and 1.25 miles from the Orioles and Ravens stadiums. The community served by PH reflects educational and health disparities. **It is home to approximately 1,998 families, 723 of which include children under the age of 18. U/DH is made up of 10,071 residents—32% of whom are children** (US Census Bureau, 2016). There is much disadvantage but little racial and economic diversity in the community: 93% of the population is African-American and 44% of households have an income less than \$15,000 (US Census Bureau, 2016).

***Exhibit 1: Upton/Druid Heights, Baltimore City, Maryland, and US Comparisons (2015)***

	Upton/ Druid Heights	Baltimore City	Maryland	US
Infant Mortality Rate (per 1,000 residents)	10.0*	9.9*	6.7**	5.8***
Single Parent Families	41%	28%	19%	27%
<u>Children Living Below the Poverty Line</u>	62%	34%	13%	22%
<u>Educational Attainment</u>				
Less Than HS graduate or GED	28%	17%	11%	13%
HS graduate or GED	33%	30%	26%	28%
16 yrs. or older and not in labor force	46.6%	30.3%	33%	37%
16 yrs. or older and unemployed	12.6%	9.3%	5.5%	6.3%
Violent Crime Rate (per 1,000 residents)	30.3*	16.1*	4.7^	3.7^^
<b>All numbers from American Community Survey, 2011-2015, except * from Baltimore Neighborhood Indicators Alliance (BNIA), ** from Maryland Vital Statistics, *** from CDC, ^ from Governor’s Office of Crime Control &amp; Prevention, and ^^ from FBI National Press Office.</b>				

Exhibit 1 documents the high rates of single parent households, violent crime, and poor educational attainment in the U/DH neighborhood as compared to Baltimore City as a whole, the state of Maryland and the entire United States. Despite the fact that infant mortality has been improving in Baltimore and U/DH, neighborhood women and children still have significant health challenges, as discussed further, below. Reflecting the community's overall economic distress, home ownership rates are some of the lowest in the City. The number of federally subsidized housing units is one of the highest in city. Within U/DH are four large adjacent public housing complexes—McCulloh Homes, Spencer Gardens, Pedestal Gardens, and Marshall Gardens—whose residents suffer even greater difficulties than those in the surrounding community. These housing complexes are home to 1,352 residents, 614 (21%) of whom are children. The median family income is under \$9,000 and 45% of adult residents are unemployed. About 880 Section-8 housing units are also in U/DH.

**Community Health.** U/DH rates among the lowest of all 55 neighborhoods in Baltimore for many critical indicators: (1) life expectancy for the community is 68.2 years as compared to 73.6 years for Baltimore City (BNIA, 2015); (2) residents have less access to healthy food, so-called *food deserts* (BNIA, 2015); and (3) more access to fast food outlets, so-called *food swamps* (BNIA, 2013).

**Maternal and Child Health.** Good health begins with babies born healthy. As detailed more extensively in the Project Design section, the PH program B'more for Healthy Babies (begun in 2010) has made a significant positive impact on infant mortality in U/DH in the past six years. Significant deficits still remain, however, for maternal and infant health in the neighborhood. Although the U/DH infant mortality rate is now 10.0 per 1,000—just barely higher than the city-wide rate of 9.9—U/DH continues to lag behind white middle and upper

class Baltimore neighborhoods like Greater Roland Park (3.6) (BNIA, 2015). Only 38% of births in U/DH were ones for which mothers received prenatal care during the first trimester of her pregnancy as compared to 50% city-wide (BNIA, 2015). We are determined to close the health gap with other city neighborhoods.

Another indicator of community distress is the high teen birth rate in U/DH. Although, the teen birth rate is declining nationally and locally, the teen birth rate in U/DH is 39.5 per 1,000 females aged 15-19 as compared to 22.9 nationally. The negative effects of early childbearing affect the health, education and employment opportunities of the mothers; poverty is a frequent outcome. The long-term implications for offspring include lack of opportunity, risks of poor health, and adverse developmental outcomes.

Access to preventative health care is critical, yet U/DH residents have poor access to preventative health care and are, therefore, more susceptible to illness and preventable disease that can become life-threatening. Asthma rates in U/DH are among the highest in the city. In Baltimore, asthma is the leading cause of school absenteeism and the top reason children visit the emergency room (University of Maryland Medical Center, 2012). In U/DH, asthma is responsible for over 60% of emergency room visits by children, and, among students who miss five or more days of school per year, 40% report asthma as the reason (Pat McLaine, UMB School of Nursing, personal communication). While the number of children who were hospitalized for asthma decreased citywide during the last year, there was an increase in the number of children hospitalized for asthma in U/DH. During our planning grant survey, we learned that 25% of children in U/DH do not have a medical home.

**Drugs and Substance Abuse.** Last year, 2,089 people died of drug overdoses in Maryland—more than twice as many as two years ago. More than half of those deaths were from

fentanyl. The problem is particularly dramatic in Baltimore, where 694 people died from overdoses last year. Of those overdoses, 419 were from fentanyl. About 19,000 people in Baltimore use heroin, according to city estimates (Maryland DHMH, 2017). In U/DH the overdose death rate of 1.84 per 1,000 residents is an increase from 1.06 in 2015 (BNIA, 2015). Undoubtedly, drugs help to fuel the violence and crime in the city. Our partnership with Cecil County Drug Free Coalition Collaborative will assist in addressing this crisis with our students.

**Violence and Crime.** Each year, thousands of Baltimore children and youth are exposed to violence as both victims and witnesses. All too often, children exposed to violence undergo lasting physical, mental, and emotional trauma, decreases in cognitive functions, and may be more prone to aggression, delinquency, further victimization, and involvement with the juvenile justice system. The impact of very high rates of involvement with the police in West Baltimore, as recently shown by the DOJ finding (United States, Department of Justice, Office of Public Affairs, 2016), is also stressful for community members and disruptive to family life and child development.

Baltimore has consistently had one of the nation's highest murder rates. In 2016, Baltimore City had 344 homicides—nearly 90% were shootings of black males and more than half of victims were between the ages of 18 and 30. The homicide count in Baltimore, with a population of about 620,000 was nearly the same as New York City, with a population of 8.4 million. There have been 235 murders in the 243 days of 2017. In U/DH the violent crime rate is nearly double that of Baltimore City. The part 1 crime rate (homicide, rape, aggravated assault, robbery, larceny, and auto theft) is 98.3 per 1,000 compared to 65.1 per 1,000 for Baltimore City (BNIA, 2015). The non-fatal shooting rate in U/DH is double that of the City (6.8 per 1,000 residents vs. 3.2) (BNIA, 2015). Parents of children in PH schools and alumni of our schools

have been murdered on a too regular basis.

Baltimore was the first school system in the country to have multiple schools identified as “persistently violent” based on the number of suspensions and/or expulsions for fighting or other interpersonal violence (The United States Department of Justice, 2011). In School Year (SY) 2015-2016 at Renaissance Academy, U/DH’s only high school, a male student stabbed another male student during the school day in a classroom full of students. The victim later died of his injuries and our former student likely to be incarcerated for many years. In fact, within a 120-day period, four of our male students aged 13-17 were murdered. Five lives forever altered and secondary trauma for countless others. The coalition of partners working together under the BCJI grant awarded to Promise Heights is in the process of creating an implementation plan to address youth violence prevention in U/DH.

### **PROMISE HEIGHTS SCHOOLS**

There are five public schools in U/DH which serve children from Pre-kindergarten (Pre-K) through 12<sup>th</sup> grade. All U/DH schools have higher than average rates of low-achieving students, chronic absenteeism, truancy, and academic failure. These five schools have been designated as *Priority Schools* by MSDE and are the focus of this proposal. The students of all three elementary schools and the middle school are over 95% Free/Reduced Price Meals (FARMS) and the high school is above 87% FARMS. All five schools have student populations that are essentially all African-American. In Baltimore, public elementary schools are zoned by neighborhood, and most children in U/DH walk to school. BCPS has “Middle and High School Choice” which allows students to submit a preference list for those schools, some with and some without entrance criteria. In U/DH, most of our middle and high schools students are neighborhood children, as families report unease with crossing neighborhoods, or express the

need to have older children stay close to watch younger children either before or after school. A brief description of each school follows.

**Eutaw-Marshburn Elementary School (EM)** had 300 students in SY16-17 from Pre-K to 5<sup>th</sup> grade and is our newest PH school. SY15-16 was Principal Tiffany Cole's first year as a principal and her first year at EM. There is a new Judy Center in the school to serve neighborhood families with children aged birth to five (further discussed in Section B1). There is a Head Start co-located on school grounds. The school is in the northern



Eutaw-Marshburn Elementary School #11

**Principal Tiffany Cole**  
Began SY15-16

300 Students (PK-5th)  
2 PK & 2 K

Joined Promise Heights  
in SY14-15

most part of the neighborhood and sits across the street from Pedestal Gardens public housing.

**Furman L. Templeton Preparatory Academy (FLT)** is a year-round public charter which received permission to continue to serve neighborhood zoned students (non-lottery). In SY16-17 they had 512 students from Pre-K to 5<sup>th</sup> grade. They have robust early education



Furman L. Templeton Preparatory Academy #125

**Dr. Evelyn Perry**  
Began SY15-16

512 Students (PK-5th)  
2 PK & 2 K

Year-Round  
Public Charter

Joined Promise Heights  
in SY09-10

partnerships, licensed day care, and a

Head Start in the building. FLT was

the first school in the PH initiative,

partnering with us since SY09-10.

UMB SSW Dean Richard Barth helped

to write the program plan to become a

public charter school and still sits on

their charter board. Their principal, Dr. Evelyn Perry, returned in SY15-16 after having previously been principal from SY2002-2006.

**The Historic Samuel Coleridge-Taylor Elementary School (HSCT)** was our second PH school and in SY15-16 Principal Bettye Adams began her time there as their fifth new principal in six years. Last year they had 352 students from Pre-K-5<sup>th</sup> grade and also have a strong early learning component with a Head Start and 3 year old special education classroom. The former PH Community School Coordinator at HSCT (Henriette Taylor, LGSW, now PH Director of Community Schools) has testified in front of the US Senate and the Maryland General Assembly on the Promise Heights community school strategy and the school has hosted numerous site visits with federal, state, and local officials. In June 2014, PH facilitated a playground build with KaBOOM! to bring residents and partners together to build the first full size playground in U/DH.



**The Historic Samuel Coleridge-Taylor Elementary #122** Joined Promise Heights in SY10-11

**Principal Bettye Adams**  
Began SY15-16

352 Students (PK-5th)  
2 PK & 2 K

2015 National Community School Award for Excellence

**Booker T. Washington Middle School for the Arts (BTW)** was the first middle school for African-American children in Baltimore. It is the only arts-focused middle school in BCPS and the only middle school in U/DH. In SY16-17 they had 258 students in 6<sup>th</sup>-8<sup>th</sup> honing their



**Booker T. Washington Middle School for the Arts #130**

**Principal Misha Scott**  
Began SY17-18

258 Students (6th-8th)

Only arts-focused middle school in the District

Joined Promise Heights in SY13-14

artistic skills in dance, theater, choir, band, and visual arts, in addition to regular academic classes. They also have a new principal for SY17-18—Principal Misha Scott, new to Baltimore City—and their fifth principal in five years. The

school occupies the first two floors of a large old building and the high school sits on the third floor. There are separate entrances for the two schools.

**Renaissance Academy High School (RA)** is the only high school in U/DH and is relatively small at only 286 students (9<sup>th</sup>-12<sup>th</sup>) (SY16-17). The school was founded in 2005 using the Noble Street Charter School (Chicago) model which aims to provide low-income students



Renaissance Academy High School #433

**Principal Nikkia Rowe**  
Began SY13-14

286 Students (9th-12th)

Law, Justice, &  
Government Focus

Mentoring

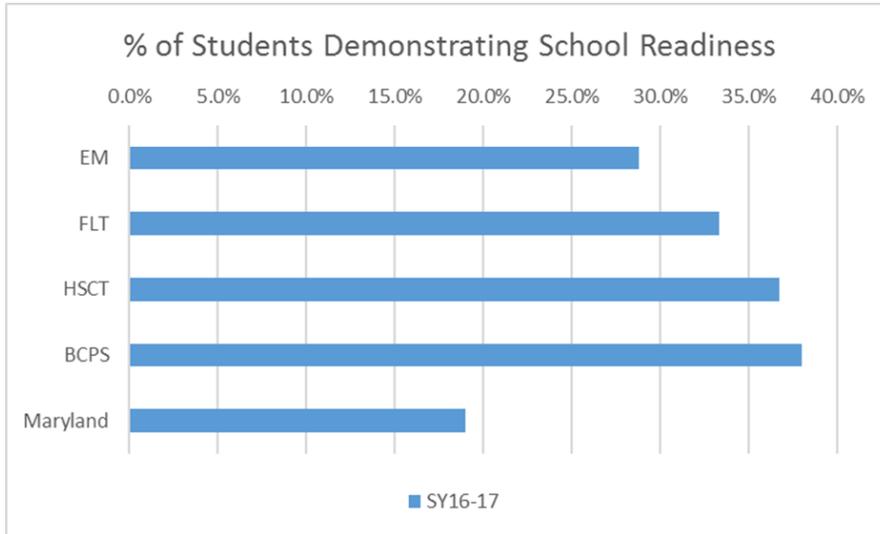
Joined Promise Heights  
in SY13-14

with an education, assist them in enrolling in and graduating college, and encourage them to positively impact their communities. Principal Nikkia Rowe began in SY13-14 and adjusted the focus to law, justice, and

government, after noting that her students were seeking a social justice focus to and understanding of their lives, education, and community. Principal Rowe realized that her male students were at a critical low point and so she created Seeds of Promise—an intensive one-on-one and group male mentoring initiative (discussed further in Section B1)—to provide students with the deep interpersonal connections they are missing in their lives. For SY16-17, she will begin Blooms of Promise to provide group mentoring to her female students.

**Academic Need.** Each year, incoming kindergarten students in Maryland are being assessed on school readiness skills and knowledge using the Kindergarten Readiness Assessment (KRA). In SY16-17, the school readiness skills of entering kindergarteners for HSCT were comparable to their peers in BCPS and all three schools outperformed students state-wide (see Exhibit 2). However, even with this accomplishment, we note that 60-70% of students at the three elementary schools are not able to demonstrate school readiness in kindergarten.

**Exhibit 2: School Readiness**



**Adequate Yearly Progress (AYP)** scores have consistently been below state goals in all U/DH schools, as shown in Exhibit 3. Although school-wide AYP proficiency scores have increased very slightly, none of the schools in U/DH is performing well.

**Exhibit 3: Promise Heights, BCPS, and Maryland School Data**

SY15-16		# of STUDENTS	% AYP READING		% AYP MATH		% FARM	% SPED
			SY14-15	SY15-16	SY14-15	SY15-16		
Pre-K - Elementary	Maryland	337,858	39.4	33.8	32.3	34.6	48.9	11.4
	BCPS	33,540	14.1	12.6	11.6	13.8	71.6	12.8
	EM	333	1.3	5.03	1.3	17.5	91.3	11.8
	FLT	512	6.0	9.8	1.7	8.1	85.4	14.8
	HSCT	390	3.3	5.0	3.3	5.3	86.7	22.7
Middle	Maryland	192,683	40.9	31.6	40.9	23.2	43.4	11.6
	BCPS	16,960	14.1	12.9	14.1	7.5	75.2	18
	BTW	309	*	*	*	*	91.5	30.6
High	Maryland	253096	39.7	28.8	25.7	33.0	37.8	10.9
	BCPS	21,746	28.0	17.4	7.5	13.1	71.4	17.8
	RA	312	*	*	*	*	89.6	30.1

(Retrieved from [www.reportcard.msde.maryland.gov](http://www.reportcard.msde.maryland.gov)) In 2015 Maryland implemented the new Partnership for Assessment of Readiness for College and Careers (PARCC) state assessments in reading and mathematics. The new assessments replace the Maryland School Assessments in English and Mathematics in grades 3-8, and replace the High School Assessments in Algebra and English 10 for all students not graduating in 2015. Note: An asterisk (\*) denotes no students or fewer than 10 students in category, or (\*) indicates the percentage for the category is either ≤5 or ≥95 and the corresponding counts have been suppressed.

In 2000, FLT was one of the three lowest-performing schools in Maryland and became an EdisonLearning™ school, serving Pre-K through 5<sup>th</sup> grade students. Seven years later the school did not achieve AYP goals and in 2010 was converted to a year-round public charter in an attempt to prevent summer learning loss. Since that time the school has become a year-around school, a technology school (with a computer lab, weather station, and TV broadcast equipment), and undergone substantial building and school climate improvements. Yet, HSCT has also not achieved AYP in either reading or math. Per the school’s performance plan, AYP was not met because of a lack of appropriate and sustained interventions for students performing below grade level; weak parent volunteerism and classroom support; teachers who were not using evidence-based practices; and high student absences, tardiness, and exposure to trauma.

Currently, BTW middle school students are also in academic distress. Approximately 29% of the students are receiving special education services and 25% of students are over-age. Fewer than 3% of students scored proficient in reading and math. RA, our high school, also has a large proportion of students with special needs: 30% of the students are in special education and, like BTW, about 25% are over-age. Fewer than 10 students, or less than 5%, were proficient in reading and math.

**Priority School Designation.** Since SY15-16, our three elementary schools and our middle school have been designated by MSDE as Priority Schools (see Exhibit 4). Each state designates five percent of their Title I schools that are the lowest achieving on standardized tests. These schools have not reached AYP standards in reading and mathematics for the “all students” subgroup, not just for low-performing subgroup populations. Priority schools will take an additional measure of attention and support, therefore, it is expected that these schools will implement multifaceted plans for school reform including recruiting staff, enriching instructional

programs, professional development, and developing a system of accountability that will help turnaround models and intervention measures (Maryland State Department of Education, 2016.). RA was not designated as a Priority School because of a graduation rate higher than 67%, however, it was noted as needing additional Academic Strategic Support. Within this application, in our Project Design section (B1), we will address Pre-K-12 strategies.

***Exhibit 4: MSDE Priority Designations***

School	SY15-16 Priority	SY16-17 Priority SY17-18 Priority	Academic Strategic Support
EM		X	
FLT		X	
HSCT		X	X
BTW	X	X	X
RA			X

**Attendance and School Climate.** All the schools in U/DH have mobility rates at two or three times higher than the state and city rates (see Exhibit 5). Families are under-resourced and unstably housed which results in frequent moves, couch surfing, doubling up with family and friends, and homelessness. Older students are at particular risk as families struggle with additional behavioral issues and students seek independent housing. As noted in Section B1, under the family and community solutions, we have recently added a staff member to work with families on housing stability, with the ability to provide financial resources in addition to financial education and case management for up to a year, so as to help stabilize mobility and increase student attendance.

Almost 32% of BTW’s students were suspended in SY16 and half of those were suspended more than once. Thirty-five percent of the students missed 20 or more days of school last year. At RA about 10% of students have involvement with the juvenile justice system. The suspension rate is lower than that at BTW at 27%, with only 7% of students having been

suspended more than once in SY16. The graduation rate hovers at 70% for the 4-year cohort and 78% for the 5-year cohort. Approximately 60% of the students miss over 20 days of school.

**Exhibit 5: Attendance and Mobility**

		ATTENDANCE*		CHRONIC ABSENTEEISM*	STUDENT MOBILITY**
		SY 15-16	SY16-17	SY 15-16	SY 15-16
Elementary	Maryland	96.6%	95.0%	7.3%	19%
	BCPS	93.7%	92.9%	17.9%	31.2%
	EM	90.7%	95.7%	28.4%	49.8%
	FLT	91.6%	90.5%	27.0%	34.8%
	HSCT	89.1%	88.9%	37.2%	39.3%
Middle	Maryland	95.1%	94.6%	10%	15.5%
	BCPS	92.3%	91.5%	19.7%	27.6%
	BTW	86.5%	80.3%	35%	53.4%
High	Maryland	92.4%	91.3%	19%	16.9%
	BCPS	82.4%	76.6%	39.1%	32.4%
	RA	71.5%	56.4%	60.1%	89.4%

\* At Elementary level, Attendance and Chronic Absenteeism are calculated for Grades 1-5 only.

\*\* At Elementary level, Mobility is calculated for Grades K-5 only.

**A.2. Geographic Description**

**Upton/Druid Heights stretches one mile along Pennsylvania Avenue from its intersection at Martin Luther King Boulevard to the northern boundary at North Avenue and eastward to Eutaw Place** (see map, below). Since the 18<sup>th</sup> Century, U/DH has included African American churches, businesses and job placement centers, and places for leisure-time activities. Baltimore’s African American churches serve as places of worship, but also as places of empowerment and incubators for organizing and planning. The oldest and largest African American churches are active partners to PH and include Bethel AME (1780s); Union Baptist (1852); Douglas Memorial Community Church (1925); and Pennsylvania Avenue AME Zion (1977).

The implementation of the National Housing Act (1934) which created the Federal Housing Administration designated large swaths of land for public housing. This resulted in 29 buildings spread over five blocks including McCulloh Homes, one of the largest public housing projects in Baltimore.

Intended to address the problem of crowded homes and poor conditions throughout U/DH, it resulted in rapid in-out mobility for residents. Single parents and the elderly continued to pour into the area and the housing stock was decimated. To rejuvenate the community, residents joined together and the Baltimore City

Department of Housing and Community Development (BCDHCD) secured Federal approval in the early 1970s to

designate 168 single street blocks as the City's largest Urban Renewal area. Fifty percent of the projected new construction was never completed. HCD has worked with PH for the past five years on the CHOICE Neighborhood FY2010 Planning grant (awarded 2011) and the FY2014

### Promise Heights Footprint Assets



#### Promise Heights Assets

- |  |  |   |
|--|--|---|
| <p><b>Types</b></p> <ul style="list-style-type: none"> <li><span style="color: green;">●</span> Educational Assets</li> <li><span style="color: blue;">●</span> Low/Moderate-Income Rental</li> <li><span style="color: red;">●</span> Public Housing</li> <li><span style="color: purple;">●</span> Mixed-Income Properties</li> <li><span style="color: pink;">●</span> Other Footprint Assets</li> <li><span style="color: blue;">■</span> Metro Subway Stations</li> <li><span style="border: 2px solid red; display: inline-block; width: 10px; height: 10px;"></span> Promise Heights</li> <li><span style="border: 1px solid black; display: inline-block; width: 10px; height: 10px;"></span> Neighborhoods</li> </ul> | <p><b>Educational Assets</b></p> <ul style="list-style-type: none"> <li>1: Little Flowers Day Care</li> <li>2: Union Baptist Head Start</li> <li>3: Eutaw-Marshburn Elementary</li> <li>4: Furman L. Templeton Preparatory Academy</li> <li>5: The Historic Samuel Coleridge-Taylor Elementary</li> <li>6: Booker T. Washington Middle School for the Arts</li> <li>7: Renaissance Academy High School</li> </ul> <p><b>Low/Moderate-Income Rental Properties</b></p> <ul style="list-style-type: none"> <li>1: Pedestal Gardens</li> <li>2: Orchard Mews</li> <li>3: McCulloh Homes High Rises</li> <li>4: Charles R. Uncles Senior Plaza</li> </ul> <p><b>Public Housing</b></p> <ul style="list-style-type: none"> <li>1: McCulloh Homes</li> </ul> | <p><b>Mixed-Income Properties</b></p> <ul style="list-style-type: none"> <li>1: Baker View</li> <li>2: New Argyle Avenue Housing</li> <li>3: McCulloh Place</li> </ul> <p><b>Other Footprint Assets</b></p> <ul style="list-style-type: none"> <li>1: Robert C. Marshall Recreation Center</li> <li>2: Marshall Gardens</li> <li>3: Midtown Hospital</li> <li>4: Druid Heights CDC</li> <li>5: Druid Heights CDC Project</li> </ul> |
|--|--|---|



Implementation grant application (Finalist). Both the awarded Planning grant and the Implementation application were for the renovation of the Pedestal Gardens housing project in U/DH and both included three PH schools (EM, BTW, and RA). In the awarded Planning grant, PH was a part of the Education Partner team. In the Implementation grant application, PH was the Lead Education Partner. The renovation plan for Pedestal Gardens is moving ahead under The Community Builders (TCB) and PH continues to partner with them to offer programming for residents (see, TCB Letter of Support, Appendix D).

### **A.3. Nature and Magnitude of Gaps in Services, Infrastructure, or Opportunities.**

In preparation for this application, we began with a review of the data collected during our 2012 Promise Neighborhood planning grant. At that time, PH used qualitative techniques, specifically 10 focus group discussions, 10 key informant interviews, and conducted a comprehensive 76 question survey among 355 community residents. Of the 355 completed surveys, 292 were able to be analyzed. Surveys were completed during community events (block parties, community association meetings, and door-to-door). Secondary data collection was gathered through sources such as the U.S. Census, American Community Survey, MSDE, BCPS, BNIA, Baltimore City Health Department, and the Baltimore City Police Department. Using this data, segmentation analyses were conducted and provided information on residents, health and wellness conditions, employment status, transportation usage, resources in the community, and knowledge and use of various programs. This information helped the PH data team understand the needs of residents and students and to better plan for the pipeline of services.

We then reviewed more recent data, **collected since the civil unrest in 2015**, by Promise Heights and by neighborhood partners. After Freddie Gray's death in April 2015, a number of city agencies, non-profit organizations, and PH conducted 13 different needs assessments to

identify gaps and assets in health, mental health, education, trauma, violence, housing, employment, and community environment. Over 200 community residents participated in various surveys and those answers were analyzed and compared to responses received during the planning phase (summary in Appendix J).

In 2017, the Baltimore City Health Department released Neighborhood Health Profiles for all 55 neighborhoods in Baltimore City. They were created through a segmentation analysis conducted in three parts: (1) an overall geographic density and spatial analysis of need (poverty, educational attainment); (2) child and student need by educational segment; and (3) school need by target site. (Report attached in Appendix J.)

**Geographic Segmentation** helped to identify where highest needs are by mapping density of need through neighborhood spatial analysis. Geospatial analysis Esri's ArcGIS 10.1 was used to carry out all geocoding, geoprocessing, and geospatial analysis. According to the spatial analysis, Upton/Druid Heights is ranked 54th of Baltimore's 55 neighborhoods for the lowest median income, percentage of families with children in poverty, and the second highest number of children and youth 18 years and under.

**Children and Student Need** was examined by age grouping—for example, children in Pre-K and K had the highest absenteeism rates in all three elementary schools. To obtain additional information on this finding, parents of Pre-K and K children were asked about causes and potential solutions. Students were interviewed in their schools, to provide feedback on school climate and community safety.

**School Need** was determined via focus groups, interviews with principals, and a review of school data by Promise Heights staff. In addition, the PH leadership team met with each of the principals and Instructional Learning Teams to obtain information on school-based needs.

Information learned in the BCHD Neighborhood profiles, interviews, and the 13 needs assessments completed by residents, and updated quantitative data (discussed in Section A1), led to the identification of eight main areas of need. Data collected in SY16-17 from principals and educational staff confirmed that while progress has been made, the gaps and needs identified in 2012 have not been eliminated.

**Child Development and Early Education Supports.** Only 38% of pregnant women in U/DH begin prenatal care in the first trimester of pregnancy, approximately 40% of children from birth to age five are in early childhood education programs, parents have a lack of knowledge about healthy child development (and unrealistic expectations), and parents may not understand the importance of early childhood education on child development. There is an insufficient supply of quality center-based early childhood programs. Despite two schools in U/DH having done slightly better than the City as a whole, more than 50% of children still present as not prepared for kindergarten. Elementary school educators report a need for increased numbers of high quality early childhood education settings that have an aligned curriculum and high trained providers. Kindergarten students who did not attend Pre-K located in a public school, score lower than their peers on the KRA. They also noted the need for parental education around child development and milestones and the importance of high quality early childhood education. They discussed the lack of transition supports from Head Start and other licensed programs to their schools. Head Start records provide a wealth of information on the child and family that would be helpful to the school, however, student files are not provided by early education providers to elementary schools. An opportunity exists to form an early childhood education coordination committee with members from the three Head Start programs and the early child development program to create a transition process and provide a forum for the

programs and the schools to discuss other education issues including curriculum alignment, professional development, and resource sharing.

**Pre-K/K Attendance.** Second, the elementary school educators also commented on the poor attendance of children in Pre-K and K classes. Last year, Pre-K and K students were chronically absent between 25% – 30% at the schools. An opportunity exists for the newly funded PromiseCorps (AmeriCorps members) to support school attendance efforts. The process is already beginning with 10 Promise Corps members starting at the five schools in September, 2017. Their role is to work with teachers, principals, Community School Coordinators to identify students who are absent, develop a plan to impact chronic absenteeism, link the students and families to services, monitor referrals, and make mid-course corrections if needed. All data will be entered in the Promise Heights Management Information System (PROMIS) (outlined in Section D2).

**Family Engagement.** The difficulty with family engagement was another concern of the principals and was noted in the several of the community assessments. Many PH families work more than one job, and nearly 70% of those employed commute to work outside of Baltimore City (BNIA, 2015). They rely on public transportation which is unreliable and slow. The majority of parents reported wanting their children to attend college and to get “good jobs” as adults. Promise Heights will build on the hopes and dreams of parents and will develop different ways to engage families in the schools from volunteer opportunities to paid parent aides positions we will explore those options.

**Tutoring Services.** All principals reported gaps in tutoring. Only one elementary school, has an organized tutoring program using volunteers from a nearby church. Approximately 20 students are tutored in reading and most showed significant gains according to standardized tests.

**Out-of-School-Time (OST) Slots.** A dearth of after-school slots was noted. After-school programs that offer academic enrichment, homework help and recreational activities are provided at all five PH schools, however there are only 460 slots for the 1,900 students in the PH schools. Opportunities exist to expand after-school programming by increasing the number of slots purchased by PH with Building Educated Leaders for Life (BELL), Additional tutoring services will be provided by AARP ExperienceCorps in all the K-3<sup>rd</sup> grade classrooms in PH schools.

**Teacher Professional Development.** Principals expressed a need for assistance in providing professional development to teachers on topics of social emotional learning, behavioral health, Restorative Practices, trauma, etc. Topics will be suggested by the Principals' Council to assist teachers with classroom management.

**Student Mental and Behavioral Health Supports.** The community needs assessment, and all five principals identified gaps in mental health services for students. Adverse Childhood Experiences (ACEs) screening revealed that many students in Baltimore City had suffered at least one traumatic experience. Despite the fact that our Community School Coordinators (CSCs) are licensed social workers, they are not able to meet the needs of all the students, and teachers. Over the past two years, six students or former students of PH schools were murdered leaving students, parents, and teachers grieving and trying to cope with the aftermath. CSCs facilitate support groups, grief counseling services, and bring in other supportive services. Last year, BCPS received additional support from US ED through the PSR program for additional school-based social workers, suicide prevention trainings for teachers, Restorative Practices implementation, and mindfulness training for staff. This proposal adds needed mental health staff to fill remaining gaps in school-based programs.

Youth Development. Additionally, youth focus group participants discussed the lack of recreational facilities and activities in the community. There was only one recreation center which operates on limited hours. (We advocated for a second rec center to be re-opened, which was done this summer at Eutaw-Marshburn Elementary.) The need for education that leads to job training and certificate programs that would enable youth to obtain jobs after high school graduation was also repeated in focus groups, during key informant interviews, and in survey responses. Youth report that they believe youth violence stems from a combination of a dearth of safe spaces for them during non-school hours and a lack of money for basic needs. Older youth, particularly, note that they feel responsible for their own financial well-being and, often, for contributing to the entire household income.

**Increasing Protective Factors.** Indeed, Baltimore is the toughest place in the country for poor children to escape poverty. A recent study (Chetty & Hendren, 2016), on the effects of neighborhoods on intergenerational mobility indicates that children in Baltimore City have the lowest rate of percentage of change from spending an additional year of one's childhood in that city—in this case, nearly a 1% decrease in earnings (compared to their parents) per year. Neighborhoods matter more for Baltimore's boys than girls--every extra year of childhood exposure to Baltimore reduces earnings by 1.39% for low income boys and only 0.27% for girls—but is adverse for both. Educators note the need for positive adult role models, to improve the community environment, to increase the number of supportive partnerships for schools, and create deeper relationships between students, families, and community members.

Our eight years of work through PH has given us a very clear sense of momentum, opportunities for change, and pathways for implementation that will change the educational

culture and outcomes in this beloved neighborhood. Each of these identified gaps/needs are addressed with strategies specified in the Project Design.

## **B. QUALITY OF PROJECT DESIGN (30 POINTS)**

### **B.1. Implementation Plan to Create a Pipeline of Services**

The **vision** of Promise Heights is to implement a comprehensive community building model that supports residents of U/DH with educational, social, physical, and economic opportunities which provide them with the necessary tools to thrive in their schools, families, and careers. We will further that vision through this Promise Neighborhood proposal. As demonstrated through this proposal, the PH partners are committed to intentionally coordinate services, strategies, goals, data, and accountability, and use technology to seamlessly communicate and connect in a way that drives performance.

Promise Heights is both a strategy and an organization—we use the Promise Neighborhood strategies to improve outcomes for children and families and we employ licensed social workers and community residents to lead several of the initiatives and provide direct services. Since 2009, PH has attended or facilitated close to 1,000 meetings or events with the community: school-based, neighborhood-based, faith-based, city council, city-wide providers, and collaboratives focused on school-based mental health, school climate, and attendance. Our Community Board is Co-Chaired by the Senior Pastor of neighboring Union Baptist Church. Our City Councilman is a fierce advocate with city agencies for our work and a regular visitor to our schools. Mayor Catherine Pugh christened our reopening of the recreation center. We hire parents and community members as peer coaches and leaders as they graduate from PH programming, because we believe that they are the most authentic role models for their similarly situated peers. Our work alongside residents, community partners, parents, students, BCPS staff,

and our principals, provided the foundation upon which we created a mission, robust theory of action, and theory of change to guide the Promise Heights initiative.

The leadership of PH has been consistent from the beginning. This has allowed for long-term planning and implementation without interruption and speaks to the UMB SSW's commitment to moving the work forward under this PN proposal. The pipeline of solutions within PH started with work in 2008 after a visit to the Harlem Children's Zone by the BCPS CEO, Baltimore City Deputy Mayor, UMB SSW Dean Barth and Assistant Dean Mayden, United Way of Central Maryland (UWCM), and representatives from community-based organizations. After the visit, and after many visits to resident associations and multiple discussions with faith-based leaders, the UMB SSW agreed to lead the group in working with residents to significantly improve the educational and developmental outcomes of children and families in the U/DH community.

The PH leadership team consists of **Executive Director Bronwyn W. Mayden, MSW (and UMB SSW Assistant Dean)**; Assistant Director, Rachel K. Donegan, J.D.; Richard P. Barth, PhD (Dean, UMB SSW); Reverend Alvin C. Hathaway, Sr., D.Min, PhD., Senior Pastor Union Baptist Church, and Chairperson, Community Churches for Community Change; Kyla Liggett-Creel, PhD., Director, Research and Evaluation; Nick Peters, B.S., Director, Data Management; and Henriette Taylor, MSW, Director, Community Schools. Additional information on members of the PH leadership team is in the Quality of Management Services (Section D1).

Using the Data Sharing Agreement signed by BCPS as a foundation (see Appendix C), we will create a data sharing plan for all partners to utilize evidence-based services and to link the interventions to services provided to children and families. All partners are committed to

working with the National Evaluator to ensure that all data is collected with fidelity and to engage in productive dialogue between partners and the National Evaluator.

The PH community partners' *theory of change* asserts that change for children and families must involve mobilization of an extraordinarily broad and diverse range of resources: families, religious groups, media, community and neighborhood associations, PTAs, the business and philanthropic communities, and public and private agencies in the areas of education, health, social services, and training and employment. Change involves transforming the inputs that children receive to ensure that all children achieve the early and intermediate outcomes needed to ultimately realize higher education and employment success. Beyond mobilizing public and private resources, there must be sustained and coordinated planning, program and policy developments, service delivery, and monitoring.

Our *theory of action* is that by connecting residents (adult and youth) more authentically to the collaborative coalition of neighborhood service providers, those providers will strategically change the way they work together and consequently refocus their efforts to achieve measurable education and health outcomes for children and families in the community. We understand that success for children in U/DH requires integration of family services, educational programs, wrap-around supports, and community systems to create quality responsive programming. Only then can we truly document what works, make modifications to increase success, and collaborate the supportive efforts between all entities interested in the success of children.

PH and our partners are in agreement that the work of this project will be framed by the **indicators** that we have jointly identified for each of the following **results**.

**Exhibit 6. Results and Indicators**

<b>PROMISE HEIGHTS RESULTS &amp; INDICATORS</b>	
<b>Results</b>	<b>Indicator</b>
<b>EDUCATION</b>	
<b>1.</b> Children enter kindergarten ready to succeed in school.	<b>1.1.</b> Number and percentage of children in kindergarten who demonstrate at the beginning of the program or school year age-appropriate functioning across multiple domains of early learning as determined using developmentally-appropriate early learning measures.
<b>2.</b> Students are proficient in core academic subjects.	<b>2.1.</b> Number and percentage of students at or above grade level according to State mathematics assessments in at least the grades required by the ESEA (3rd through 8th grades and once in high school).  <b>2.2.</b> Number and percentage of students at or above grade level according to State English language arts assessments in at least the grades required by the ESEA.
<b>3.</b> Students successfully transition from middle school grades to high school.	<b>3.1.</b> Attendance rate of students in 6th, 7th, 8th, and 9th grade as defined by average daily attendance.  <b>3.2.</b> Chronic absenteeism rate of students in 6th, 7th, 8th, and 9th grades.
<b>4.</b> Youth graduate from high school.	<b>4.1.</b> Four-year adjusted cohort graduation rate.
<b>5.</b> High school graduates obtain a postsecondary degree, certification or credential.	<b>5.1.</b> Number and percentage of Promise Neighborhood students who enroll in a two-year or four-year college or university after graduation.  <b>5.2.</b> Number and percent of Promise Neighborhood students who graduate from a two-year or four-year college or university or vocational certification completion.
<b>FAMILY AND COMMUNITY</b>	
<b>6.</b> Students are healthy.	<b>6.1.</b> Number and percentage of children who consume five or more servings of fruits and vegetables daily.
<b>7.</b> Students feel safe at school and in their community.	<b>7.1.</b> Number and percentage of children who feel safe at school and traveling to and from school as measured by a school climate survey.

	<b>7.2.</b> Number and percentage of students who are involved in the Department of Juvenile Services. <i>(added by PH)</i>
<b>8.</b> Students live in stable communities.	<b>8.1.</b> Student mobility rate (as defined in the notice).
<b>9.</b> Families and community members support learning in Promise Neighborhood schools.	<b>9.1.</b> Number and percentage of parents or family members that read to or encourage their children to read three or more times a week or reported their child read to themselves three or more times a week (birth–8th grade).  <b>9.2.</b> Number and percentage of parents/family members who report talking about the importance of college and career (9th–12th grade).
<b>10.</b> Students have access to 21 <sup>st</sup> century learning tools.	<b>10.1.</b> Number and percentage of students who have school and home access to broadband internet and a connected computing device.

The development of the pipeline of services is well underway in PH. This PN proposal will provide the opportunity to deepen the quality of the interventions that have been put in place, consider their expansion, and, driven by the updated segmentation analysis, develop additional elements needed for a gapless continuum of support. These steps will help provide excellent educational opportunities and high achievement milestones for the young people of U/DH from birth to college and career.

Using the four domains of **early learning, Pre-K-12, college and career, and family and community**, we have identified nine solutions which when variously applied across the four domains, will produce positive change in the sixteen identified indicators.

PH has been implementing a series of evidence-based programs and facilitating high quality partnerships for the benefit of U/DH residents and schools (further outlined in Appendix G). This work has been happening slowly, as we have grown one program and one partner at a time. While we are able to show positive results in varied areas throughout out pipeline, Promise

Neighborhood implementation funds will allow us to broaden our reach and fill in gaps as mentioned in the Need section.

Our pipeline of services covers four domains: **early learning, Pre-K-12, college and career, and family and community**. Early learning consists of pre- and post-natal programs, parenting education, and early education programs so that families receive early interventions. We believe that the first step to college and career success is a healthy pregnancy and birth. This domain includes a two-generation approach, giving parents and caregivers a lot of support. Our Pre-K-12 domain focuses heavily on data for both academic interventions and student supports. The domain of college and career showcases our belief that our middle and high school students need additional academic supports such as tutoring, mentoring, mental health services as well as access to wrap-around supports, including income, in order to stay focused on academic outcomes. Finally, our family and community domain recognizes that the trauma of poverty can be debilitating for families and requires a trauma-responsive approach to all of our work. Detailed implementation plans, including costs, can be found in Appendix F. A full explanation of evidence-based services can be found in Appendix G.

### **Intake, Assessment, and Linkages**

The PH service delivery model is a coordinated, comprehensive pipeline of solutions that begins at pregnancy and continues through college to career. Although families will inevitably enter the PH pipeline through many doors, there are three main points of entry. **The first is through the BHB Resource Parents** who conduct aggressive outreach using door-to-door, word of mouth, and other methods to build family and community trust and increase community awareness in PH program. Their goal is to locate every pregnant woman and make an offer for service, conduct a comprehensive assessment, and develop a strengths-based service plan.

**The second point of entry is at the PH schools with the CSCs as part of the Multi-Tier System of Support (MTSS) activities.** MTSS is a systemic, continuous improvement framework in which data-based problem solving and decision making is practiced across all levels of the educational system for supporting students. The MTSS framework uses evidence-based instruction, intervention and assessment practices to ensure every student receives the appropriate level of support to be successful (further detailed in Appendix G). In the PH schools, the principals and teachers will identify students who are chronically absent ( $\geq 20$  days in a school year) and rank them into universal, targeted, and intensive service tiers. Based on need level, students will meet for an assessment and goal setting sessions with the CSC, PromiseCorps, and teachers. The students in need of intensive supports will work the PH CSC, teachers, and parents to create a plan of action. The CSC and the PromiseCorps will be responsible for monitoring and entering data into the PROMIS data management system. The students needing targeted supports will work with MSW interns who will work to connect services to families and monitor the outcomes and enter data. The rest of the students will benefit from universal or school-wide interventions such as creating bulletin boards, school wide programs and attendance celebrations will be the responsibility of the PromiseCorps members.

**Finally, the third access point will be through PH Family Prosperity program.** Staff conduct an assessment of the family's strengths, needs, and resources and linking them to services within the pipeline. These services may be provided by PH staff or staff from partner organizations. All organizations will use the PROMIS data system to enter family assessment, case notes, plans of action, referral sources, and timelines.

## EARLY LEARNING

**Need.** Early childhood (birth to three) is a critical developmental period for brain development (Noble, et al., 2015) which is especially vulnerable for children growing up poor. Through focus groups, surveys, interviews with principals, and other data gathering methods, we learned that families in U/DH are not fully participating in the early childhood interventions that could provide access to medical, educational, and social services to support healthy pregnancies, deliveries, and early learning. To address the early learning needs discussed in Section A, we aim to improve early learning and development outcomes across one or more of the essential domains of school readiness (see Exhibit 6 on page 28) for children from birth through age five. These efforts will focus on improving the coordination and alignment among early learning and development systems and between such systems and elementary education systems, including coordination and alignment in engaging and supporting families and improving transitions for children along the early learning continuum.

PROMISE HEIGHTS EARLY LEARNING SOLUTIONS				
Need	Solution	Evidence	Strategy	Direct Service Staff
Child Development and Early Education	Expectant families will receive pre- and post-natal supportive services (school- and community-based).	Meets WWC Standards without Reservations	<ul style="list-style-type: none"> <li>• Enroll expectant families in pre- and post-natal supportive services.</li> <li>• Connect pregnant women to reproductive medical home.</li> </ul>	BHB Resource Parents
Early Education Increasing Protective Factors	<b>Provide opportunities for families to acquire the skills to promote early learning and child development and increase</b>	Meets WWC Standards without Reservations	<ul style="list-style-type: none"> <li>• Enroll families with children ages birth to five in multi-family parent education groups.</li> <li>• Connect children to a medical home.</li> <li>• Complete Toddler Family Check Up with</li> </ul>	Early Childhood Mental Health Consultants  Early Learning Coordinators

	<b>responsive parenting skills.</b>		families with two-year-olds.	
Child Development and Early Education  Increasing Protective Factors	<b>Ensure appropriate diagnostic assessments and referrals for children with disabilities and children aged three through five experiencing developmental delays, consistent with the Individuals with Disabilities Education Act, where applicable.</b>	Meets WWC Standards without Reservations	<ul style="list-style-type: none"> <li>• Complete Protective Factors Survey and Safe Environment for Every Kid Questionnaire with participants in Parent University I &amp; II.</li> <li>• Complete Ages and Stages Questionnaire with participants in Parent University I &amp; II and Judy Center.</li> <li>• PK and K teachers complete Devereaux Early Childhood Assessment.</li> <li>• Make referrals to clinical partners as needed.</li> </ul>	<p>Early Childhood Mental Health Consultants</p> <p>Early Learning Coordinators</p> <p>Judy Center Staff</p>
Early Education	Increase early learning education slots.	Meets WWC Standards without Reservations	<ul style="list-style-type: none"> <li>• Advocate at systems level for simplified voucher process and additional slots for children under age three.</li> <li>• Reduce barriers to PK enrollment.</li> </ul>	<p>Early Childhood Mental Health Consultants</p> <p>Early Learning Coordinators</p>
Early Education	Increase quality of early learning education.	Meets WWC Standards without Reservations	<ul style="list-style-type: none"> <li>• Provide Mental Health Consultants and Student Service Coordinators for Judy Centers at each school.</li> <li>• Align early learning curriculum to PK/K curriculum.</li> <li>• Provide professional development to early learning centers, Judy Centers, and PK/K staff.</li> </ul>	<p>Early Childhood Mental Health Consultants</p> <p>Early Learning Coordinators</p> <p>Judy Center Staff</p>

**SOLUTION: Expectant families will receive pre- and post-natal supportive services (school- and community-based).** We will ensure families enroll in our pre- and post-natal supportive services, **B'more for Healthy Babies**, Specific program components include the following.

1. *Resource Moms and Resource Dads* – Resource Parents are lay community health workers who conduct community outreach, spread messages about healthy pregnancies, and lead parent groups. They identify pregnant women, assess their needs and link them to needed services. They will work closely with partners in other community-based programs such as home visiting. Resource Parents are trained in trauma-informed care and will receive Baby Basics training to lead Mom's Clubs.
2. *Prenatal Mom's Clubs* – Seven sessions for pregnant women using Baby Basics, an evidence-informed, comprehensive health literacy program that helps underserved pregnant women understand and act upon pregnancy information. Topics include healthy lifestyles, nutrition during pregnancy, preparing for labor and delivery, depression, intimate partner violence, healthcare 101, and coping with stress. At the completion of the seven sessions, participants receive baby gear and supplies.
3. *Breastfeeding Transition Support* – Support groups for new mothers delivering at University of Maryland Medical Center will provide additional breastfeeding assistance and encouragement in the hospital with emphasis on transitioning to home.
4. *Postpartum Mom's Clubs* – Sessions focus on child health (e.g., immunizations, safe sleep, child development, effective discipline, nutrition), injury prevention (safety at home, child abuse prevention, intimate partner violence), self-care (exercise, stress, post-

partum depression, substance use/abuse), and household management (budgeting, credit, housing, resume writing).

5. *Circle of Security* – An evidence-based early intervention program intended to develop secure attachments between children and parents.
6. *Community-based breastfeeding support* – Resource Moms are certified lactation counselors and a breastfeeding education room in Upton/Druid Heights.

Resource Moms and Resource Dads provide case management, social support, home visiting, and health education so that parents can care for their infants in a healthy manner. They will conduct community outreach and lead group-based education groups. Through case management, they will connect pregnant women to a reproductive medical home and a pediatrician. Resource Parents will provide transportation subsidies and attend appointments as needed. Families will stay with BHB through the child's third birthday.

**SOLUTION: Provide opportunities for families to acquire the skills to promote early learning and child development and increase responsive parenting skills.** Our evidence-informed parenting programs use peer groups to provide support through the developmental process. We will expand enrollment of families with children ages birth to five in multi-family parent education groups. These groups include parent-child interaction, parenting education, dialogic reading, and social networking. **Parent University 1&2.** Parent University 1 was developed in 2011 as our cornerstone parent education program created from the common components of evidence-based parenting programs to increase parental knowledge of child development, build social supports, and increase responsive parenting behaviors and early language (Barth & Liggett-Creel, 2014). We subsequently added the Chicago Parent Program as Parent University 2 for additional supports for Pre-K families. Families with children ages birth

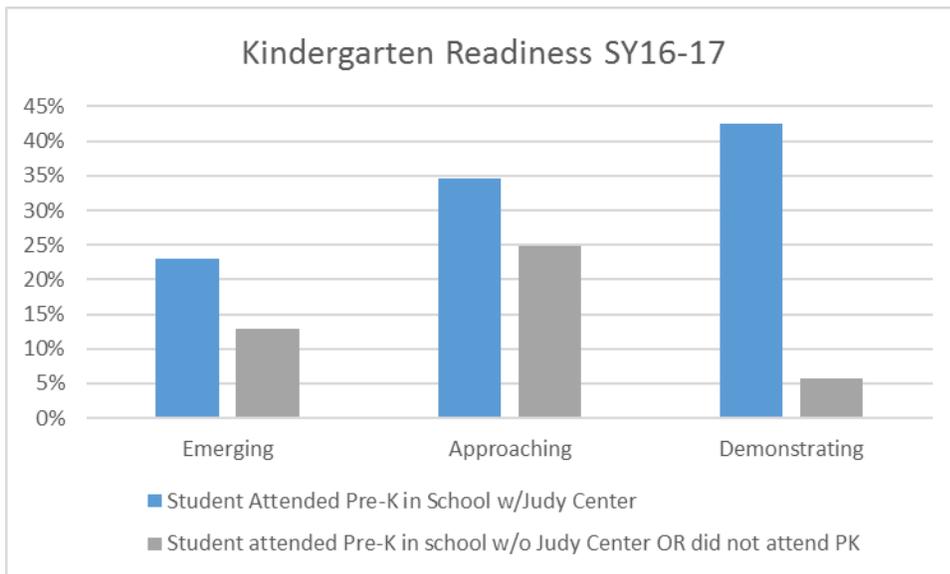
to three (Parent U-1) and four to five (Parent U-2) participate in a multi-week course with their children and peer families. Several graduates of Parent University have been hired to be Parent Mentors and served subsequent cohorts. Presently we offer two cohorts of Parent University per year. Implementation funds will allow us to offer up to four cohorts per year (reaching 100 families per year), and add the *Family Check Up* curriculum for home visiting families with two year olds (Leijten, et al., 2015). **Initial outcomes include:** over 150 families residing in U/DH have now participated; outcomes on the first few cohorts show significant increases in responsive parenting behaviors; and 24% of participants shifted from the “clinical/problematic” range in responsive parenting behaviors to the “non-clinical” range (Liggett-Creel, Barth, Mayden, & Pitts, 2017).

**Parent University** includes evidence-based models such as Circle of Security and Chicago Parent Program, the latter of which is also used by BCPS with Pre-K parents. Children will be connected to a medical home via the case management portion of BHB, Parent University, and the Family Service Coordinator in the Judy Center. The Judy Center Mental Health Consultant (MHC) may also refer a child to a specialist as needed. We will complete Toddler Family Check Up with families with two-year-olds. This rigorously evaluated model program (Lunkenheimer, et al., 2008) involves a three-session assessment; follow-up parent training and support; and annual check-ins.

**Judy Centers.** Created by MSDE, these school-based community centers offer a wide range of services for children age birth through kindergarten and their low-income families. They use a whole-child approach in addressing the many factors that determine a child’s readiness for kindergarten. Parent education and adult education courses are also offered. There is one Judy Center in U/DH (at Eutaw-Marshburn Elementary) and PH employs a licensed social worker as

the MHC who assesses individual children, facilitates social-emotional learning groups in classrooms, supports Pre-K and kindergarten teachers with classroom management strategies, and leads parent education groups at two sites. Funding is required to hire two MHCs at the other two elementary schools and to hire two Student Service Coordinators for home visiting and group social skills interventions at the three sites. **Initial outcomes include:** children who accessed Judy Centers and then took the KRA in 2015 scored in the Demonstrating range for the language and literacy domain more often than their peers (41.8% vs. 37.8%) as well more often scoring in the Demonstrating range for the social foundation domain (49.1% vs. 43.5%) (Maryland State Department of Education, 2015). On average, for the three PH elementary school, children who accessed Judy Centers and then took the KRA in SY16-17 scored in the Demonstrating range overall significantly more often than their peers (42% vs. 6%) (Maryland State Department of Education, 2017) (see Exhibit 7).

***Exhibit 7: Kindergarten Readiness for Judy Center Participants***



**SOLUTION: Ensure appropriate diagnostic assessments and referrals for children with disabilities and children aged three through five experiencing developmental delays, consistent with the Individuals with Disabilities Education Act, where applicable.** Children living in PH will receive valid and reliable developmental screening and assessment between the ages of birth to eight. All children enrolled in the Judy Center have the Ages and Stages Screening completed and those who are determined to have delays or at risk of delays are referred to Infants and Toddlers early intervention services through the city of Baltimore. All children enrolled in Parent University I and II have Ages and Stages completed as well and referrals are made as needed. Children enrolled in Pre-K and Kindergarten have Work Sampling completed by teachers as well as the Devereux Early Child Assessment and the Devereux Students Strengths Assessment. Referrals to Individualized Education Plans (IEP) services are made as appropriate. The Community School Coordinators and the MHC's work with Infants and Toddlers and the IEP team to ensure that children who are experiencing developmental delays receive services consistent with IDEA.

**SOLUTION: Increase early learning education slots.** We anticipate needing to continue to work at a systems level to address some of the gaps in services for families. Here, we will advocate at systems level for simplified voucher process and additional slots for children under age three. Families report having numerous difficulties accessing and working with the state provider of child care vouchers, and receiving vouchers in a timely manner. There are 480 Early Head Start slots in Baltimore City, but none in U/DH. There are approximately 450 children aged 0-2 in U/DH, but only 12 attend a licensed childcare center in the neighborhood. Our Accountability Board (discussed in the Management section) will help us address these issues, by providing access to the Department of Health and Mental Hygiene, state policy

makers, and regulators and providing the necessary training for childcare centers in U/DH to become Early Head Start providers. Families also report needing assistance to reduce barriers to Pre-K enrollment, including knowing how to enroll, having the required paperwork, completing immunizations, and needing resources for school participation (uniforms, backpacks, etc.). The Director of Early Learning will work with Head Starts, Judy Centers, and licensed day cares to provide parents with information about the process. Early Learning Coordinators will host workshops and connect parents to resources.

**SOLUTION: Increase quality of early learning education.** As previously discussed, 50-58% of children in U/DH did not demonstrate school readiness in SY14-15. At the three elementary schools, we will hire Mental Health Consultants and Early Learning Coordinators to conduct individual assessments to more children to make sure all developmental needs and social-emotional learning is addressed. Children who access the Judy Center perform better on the KRA than their peers. Social-emotional group learning curricula such as Second Step and Learning Parties will be implemented in Pre-K and kindergarten classrooms. MSW interns will work with staff to assist in case management. Early learning curriculum should be aligned to Pre-K and kindergarten curriculum. Elementary schools will work with the Head Starts co-located on school grounds to align curriculum for a seamless transition from Head Start to public school. PH staff will work with Head Start and licensed day cares to introduce graduating families to the elementary schools and create transition plans for students. Mental Health Consultants will provide professional development to early learning centers, Judy Centers, and Pre-K/K staff on social-emotional learning and trauma-informed classroom management skills.

**PRE-K-12**

**Need.** All the schools in U/DH are under-performing, high-need, and students are not meeting school readiness or AYP goals. As noted in Section A1, MSDE has designated all five PH schools as Priority Schools, in need of additional strategic supports.

<b>PROMISE HEIGHTS PRE-K-12 SOLUTIONS</b>				
<b>Need</b>	<b>Solution</b>	<b>Evidence</b>	<b>Strategy</b>	<b>Direct Service Staff</b>
Teacher Professional Development	<b>Support rigorous, comprehensive, effective educational improvements, including high-quality academic programs.</b>	Meets WWC Standards without Reservations	<ul style="list-style-type: none"> <li>• Replace ineffective principals.</li> <li>• Create Principals’ Council.</li> <li>• Provide professional development to school-based staff on social-emotional learning.</li> <li>• Monthly professional development to school-based staff on effective instruction.</li> <li>• Provide coaching and materials for i-Ready assessments at all schools.</li> <li>• Implement research-based curricula at each school.</li> </ul>	<ul style="list-style-type: none"> <li>• PH Executive Director</li> <li>• PH Assistant Director</li> <li>• Director of Community Schools</li> <li>• Early Childhood Mental Health Consultant</li> <li>• BCPS Executive Director</li> <li>• Community School Coordinator</li> <li>• Student Services Coordinator</li> </ul>
Out-of-School-Time (OST) Slots  Increasing Protective Factors	<b>Increase access to expanded learning time.</b>	Meets WWC Standards without Reservations	<ul style="list-style-type: none"> <li>• Provide after-school and summer programming for students K-12, including academics, enrichment, healthy meals, and physical activity.</li> </ul>	<ul style="list-style-type: none"> <li>• Community School Coordinator</li> <li>• Student Services Coordinator</li> <li>• PromiseCorps</li> <li>• Building Educated Leaders for Life (BELL)</li> </ul>
Student Mental and Behavioral	<b>Support partnerships between schools</b>	Meets WWC Standards	<ul style="list-style-type: none"> <li>• Implement full-service community school strategy at</li> </ul>	<ul style="list-style-type: none"> <li>• Director of Community Schools</li> </ul>

Health Supports  Increasing Protective Factors	<b>and other community resources with an integrated focus on academics and other social, health, and familial supports.</b>	with Reservations	each public school, including high-quality partnerships with community-based organizations.	<ul style="list-style-type: none"> <li>• Community School Coordinator</li> <li>• Student Services Coordinator</li> <li>• PromiseCorps</li> <li>• Family Success Coaches</li> </ul>
Teacher Professional Development	Provide social-emotional learning supports.	Meets WWC Standards without Reservations	<ul style="list-style-type: none"> <li>• Provide training on social-emotional learning strategies to staff.</li> <li>• Provide group mentoring to male students in grades K-5.</li> <li>• Provide intensive individual mentoring to male students in grades 6-12.</li> <li>• Provide group mentoring to female students in grades 9-12.</li> </ul>	<ul style="list-style-type: none"> <li>• PH Assistant Director</li> <li>• Director of Community Schools</li> <li>• Community Schools Coordinator</li> <li>• PromiseCorps</li> <li>• MSW Interns</li> <li>• Seeds of Promise</li> </ul>
Student Mental and Behavioral Health Supports  Increasing Protective Factors	<b>Provide social, health, nutrition, and mental health services and supports, for children, family members, and community members within the school building.</b>	Meets WWC Standards without Reservations	<ul style="list-style-type: none"> <li>• Use Student Service Coordinators to complete individual assessment of each student (K-12) to determine appropriate tiered supports.</li> </ul>	<ul style="list-style-type: none"> <li>• Community School Coordinators</li> <li>• Student Service Coordinators</li> <li>• PromiseCorps</li> <li>• MSW Interns</li> <li>• Teachers</li> </ul>
Early Childhood Development and Education Supports  Student Mental and	<b>Support evidence-based programs that assist students through school transitions.</b>	Meets WWC Standards with Reservations	<ul style="list-style-type: none"> <li>• Facilitate transition program for families and students (a) from home and/or early learning centers to PK; (b) from home, early learning centers, and/or PK to Kindergarten; (c)</li> </ul>	<ul style="list-style-type: none"> <li>• Director of Early Childhood</li> <li>• PH Executive Director</li> <li>• Community School Coordinator</li> </ul>

Behavioral Health Supports			from elementary (5 <sup>th</sup> grade) to middle (6 <sup>th</sup> grade) school; (d) from middle (8 <sup>th</sup> grade) to high (9 <sup>th</sup> grade) school; and (e) from high school to postsecondary education.	<ul style="list-style-type: none"> <li>• Principals' Council</li> <li>• Teachers</li> <li>• Coppin State</li> <li>• Baltimore City Community College</li> </ul>
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**SOLUTION: Support rigorous, comprehensive, effective educational improvements, including high-quality academic programs.** When schools do not perform, school districts often replace ineffective principals. Each of the five PH schools have received new principals in the last two years. As part of the BCPS school reform work, all five new principals will be mentored and coached by Sonya Goodwyn, Instructional Leadership Executive Director (ILED) for Principal Support for BCPS (resume, Appendix B). In addition, we have created a Principals' Council, wherein the five principals meet quarterly so as to share knowledge, collaborate, and coordinate seamless and effective Pre-K-12 academic instruction. The Principals' council has also led to more sharing of resources between elementary and middle schools, transition programs in the summer after 5<sup>th</sup> grade for those moving on to Booker T Washington School, and improvements in understanding of family strengths and frailties. PH staff will provide professional development on social emotional learning, using a trauma-informed curriculum.

ILED Goodwyn will implement a monthly professional development training program on effective instruction, including proper use of the *i-Ready* assessment, Restorative Practices (behavior management), implementation of the Common Core Standards, related services, and how to effectively work with parents/caregivers to improve student achievement. Professional Development will offer a mix of experts from the University of Maryland School of Education and other local educational institutions. BCPS uses the i-Ready assessment to evaluate student

progress. However, schools do not have the resources to purchase the additional teacher materials and coaching assistance for all grades leaving teachers unprepared to effectively use student results to adapt classroom instruction. We will use implementation funds to provide coaching and materials for i-Ready assessments at all schools, so that academic instruction is more effective. ILED Goodwyn has identified several research-based curricula available for use at the five schools. During the Principals' Council, ILED Goodwyn will work with the principals to streamline curricula across grade bands.

**SOLUTION: Provide students access to increased learning time.** Having access to increased learning time which is aligned to regular day instruction and enables students to develop talents, form positive friendships, and connect with community, results in better academic performance. Building Educated Leaders for Life (BELL) will provide after-school and summer programming for students K-12, including academics, enrichment, healthy meals, and physical activity. Currently 460 K-12 students from the five PH schools attend OST. We will expand enrollment to 990 (or about 60% of all K-12 students). Tutoring will be provided by ExperienceCorps, and trained volunteers recruited by the PromiseCorps members.

**SOLUTION: Support partnerships between schools and other community resources with an integrated focus on academics and other social, health, and familial supports.** When children and families are supported outside the school, their performance will improve inside the classroom. Families who feel positively connected to the school community are more likely to have children who attend regularly and parents are more likely to work with the school to address issues as they arise. A **full-service community school** is a place and a set of strategic partnerships between the school and community resources integrated so as to focus on academics, health and social services, youth and community development, and community

engagement. Promise Heights is the lead partner for the community school strategy at all five of the schools. **Initial outcomes include:** after-school programming for 460 students (K-12); five KaBOOM! playground builds with over 950 volunteers; day care and Head Start classrooms at each elementary school with the beginnings of curriculum alignment; targeted tutoring services at two elementary schools; free health and dental services provided by UMB professional schools; and the aforementioned saving and refurbishing of the only high school in PH.

The PH model of community school includes hiring social workers as Community School Coordinators so that all partners, programs, interventions have a trauma-informed lens and the community's mental health needs are considered. Community school expansion is needed to conduct individual assessment of students to implement MTSS. Implementation funds will increase community school staff (PromiseCorps) in each building thereby deepening and broadening the reach of PH. This work involves bringing numerous partners (approximately 20 at each school) together to affect attendance, school climate (behavior), and parent engagement. Implementation funds will allow us to deepen the community school team at each site, to include Student Service Coordinators (SSC), Early Learning Coordinators (ELC), and a College & Career Coach (CCC) so as to broaden our scope not only to a greater number of families, but also to address a greater number of barriers.

**SOLUTION: Provide social-emotional learning supports.** Principals report that one reason schools have trouble meeting AYP goals is due to difficulties with classroom management in response to students' social-emotional conduct. PH has already begun to provide trauma-responsive training on social-emotional learning strategies to teachers, school staff, and school partners. Several PH staff have completed training in Social and Emotional Foundations of Early Learning (SEFEL) and at least one staff member is a certified trainer. SEFEL promotes

child social and emotional development and supportive environments. It helps support healthy development as well as communication, feeling identification, and important executive functioning. Dr. Kyla Liggett-Creel has modified the SEFEL lessons for older youth and added a trauma lens. Further professional development will focus on effective teaching instruction skills to address inadvertent triggering of stress and trauma in students, referral sources, and connection to mental health supports. BCPS ILED Goodwyn will train teachers in effective instruction and teaching paradigms.

**Seeds of Promise: Transforming Black Boys Into Men (SOP) Mentoring** was started in 2015 as a collaboration between Principal Rowe at RA and our PH staff (Community School Coordinator Hallie Atwater). Seeds of Promise is a professional intensive one-one-one and group mentoring model. SOP mentors lead a cohort of 20 male students using weekly goal setting, attendance check-ins, classroom support, and coaching to positively impact students' academic performance, mental health, substance abuse issues, employment needs, and family concerns. Restorative Practices principles (informal and formal processes that proactively build relationships and a sense of community to prevent conflict and wrongdoing) are used daily between administrative staff, mentors, teachers, students, and parents. Currently SOP mentors exist only at the high school level and only serve 80 students. The intense level of need shown by the boys between 9<sup>th</sup> and 12<sup>th</sup> grades has led us to believe that, not only do more boys need intervention, but they need it earlier as well. **Initial outcomes include:** improved grade point average (GPA) by 43% of participants; average increase in GPA of 48%; and RA graduated 82% of students in SY15-16, higher than the district average.



We have seen significant results in this model—improvement in participants’ GPA—and believe that younger students would benefit from a similar experience. Research has shown mentoring to be particularly promising for youth who face environmental risk factors such as poverty (Rhodes and DuBois, 2006). In SY17, Principal Rowe is piloting a female group



mentoring model using female teachers at the school. *Blooms of Promise: Strength in Sisterhood* will aim to provide similar supports to female students during the school day.

Implementation funds will allow us to provide services to more high school boys and to begin a group model in elementary school and an individual/group model in middle school. Additionally, we will hire RA graduates as Junior Mentors to provide workforce and gap year experiences for students. We will expand the SOP staff to provide mentoring to male students in grades K-5 using the group and social skills model. We will further expand SOP and Blooms staff to provide intensive individual mentoring to students in grades 6-12.

**SOLUTION: Provide social, health, nutrition, and mental health services and supports, for children, family members, and community members within the school building.** In high-need school districts like BCPS, students bring a multitude of family and community risk factors into the classroom which impede learning. Students will fall into three categories of need—universal, targeted, or intensive—and each tier will have a corresponding cluster of partners, programs, and interventions. We will use Student Service Coordinators to complete individual assessment of each student (Pre-K-12) to determine appropriate tiered supports, in categories such as academics, family, health, and behavior.

**SOLUTION: Support evidence-based programs that assist students through school transitions.** Preparing students, families, and schools to develop the skills, knowledge, and relationships to successfully move from one setting to another is critical to PH's success. When students and their families make the move to school for the first time (Pre-K or K) or move from one level to the next (elementary to middle to high to post-secondary), then they must adapt to new rules, new physical settings, new adults and peers, new routines and expectations, and new ways of learning. Effective transitions help ensure students make better behavioral and social-emotional adjustments, achieve academic success, and increase their family's involvement. Positive outcomes associated with effective transitions have been shown to be greater for low-income populations. In focus groups, our families told us that they were frustrated with the lack of support during times of educational transition.

In order to facilitate a transition program for families and students from home and/or early learning centers to Pre-K, PH early learning staff will work with the Judy Centers, Head Starts, and center-based child care programs to share student and family information, bridge curricula, and participate in joint professional development across the three elementary schools. Each elementary school will have a summer bridge program during which families will meet teachers, learn school rules and routines, and receive school supplies and home-based resources. As students move again from Pre-K to K and new students arrive at elementary school for the first time (Pre-K is not compulsory in Maryland), the PH early learning staff will meet again with those partners to create a smooth transition with summer bridge programming.

In Baltimore City, students are able to attend middle school city-wide, they are no longer bound by neighborhood boundaries. That can make the transition from 5<sup>th</sup> to 6<sup>th</sup> grade even more complex. In U/DH, most of our families choose to stay in the neighborhood and attend BTW for

several reasons, including (1) fear of having children far from home in unfamiliar neighborhoods; (2) lack of understanding of the process; and (3) families may want older children to care for younger ones after school and therefore need older students to be close to home. Consequently, to facilitate transition program for families and students from elementary (5<sup>th</sup> grade) to middle (6<sup>th</sup> grade) school, PH community school staff will work together to introduce families to BTW staff, create opportunities for elementary students to visit the middle school often, and align 5<sup>th</sup> grade learning to 6<sup>th</sup> grade expectations. A summer bridge program will also be created and staffed by BTW teachers. BTW students will create arts programs they can showcase at the elementary schools. The after-school provider is the same at several elementary schools and BTW, and they will create opportunities for older students to lead enrichment with the younger students.

Similar issues face our emerging high school students and many attend RA which is in the same building as BTW. PH staff will facilitate transition program for families and students from middle (8<sup>th</sup> grade) to high (9<sup>th</sup> grade) school, through a week-long program to address issues such as anxiety over academic expectations, discomfort with starting a new school program, and the need for increased support through mentoring. The SOP Junior Mentors (discussed below in College and Career) will specifically work with incoming freshmen to acclimate them to RA.

## **COLLEGE & CAREER**

PH has been working with RA informally for three years and has had staff in the school for two years. The goal is to support youth through high school and successfully into college or career, while maintaining a supportive relationship with graduating students. U/DH has a low rate of post-secondary achievement by adults and so, consequently, families do not have much

experience with the college application or enrollment process. Additionally, students report their high need for income while in high school and thereafter. We know this need for money to support themselves and their families drives some of the criminal justice involvement for students. We also know that students miss school in order to work in formal employment. These factors, and the expressed desire of students to remain connected to RA and PH staff after high school graduation, have influenced the creation of these solutions.

PROMISE HEIGHTS COLLEGE AND CAREER SOLUTIONS				
Need	Solution	Evidence	Strategy	Staff
Family Engagement  Tutoring Services  Student Mental and Behavioral Health Supports	<b>Create individualized student plans to prepare students for postsecondary education admissions and success.</b>	Meets WWC Standards with Reservations	<ul style="list-style-type: none"> <li>College &amp; Career Coaches work with students in grades 6-12 on individualized student plans for postsecondary success. (MTSS)</li> <li>Facilitate registration for standardized tests (PSAT, SAT, etc.).</li> <li>Facilitate completion of FAFSA.</li> <li>Assist with college applications.</li> </ul>	<ul style="list-style-type: none"> <li>PH Executive Director</li> <li>Director of Research</li> <li>Community School Coordinator</li> <li>Student Services Coordinator</li> <li>Family Prosperity Coordinator</li> <li>PromiseCorps</li> <li>Principals' Council</li> <li>Teachers</li> <li>Seeds of Promise</li> <li>Fraternities</li> <li>Coppin State</li> <li>Baltimore City Community College</li> </ul>
Youth Development	Expose students to career pathways through high school programming.	Meets WWC Standards without Reservations	<ul style="list-style-type: none"> <li>Develop partnerships with local businesses and trades to provide students with career exposure through</li> </ul>	<ul style="list-style-type: none"> <li>Community School Coordinator</li> <li>College and Career Coach</li> </ul>

			classroom-based projects and internships.	
Youth Development	<b>Expand access to postsecondary education courses and postsecondary education enrollment aid or guidance.</b>		<ul style="list-style-type: none"> <li>Facilitate partnership with Baltimore City Community College to create dual enrollment programming.</li> <li>Assist students in accessing Mayor's program for free tuition at BCCC and Coppin State University.</li> <li>Expand model to include other Baltimore City and Maryland postsecondary institutions.</li> </ul>	<ul style="list-style-type: none"> <li>PH Executive Director</li> <li>Community School Coordinator</li> <li>PromiseCorps</li> <li>RA Principal</li> <li>Mayor's Office</li> <li>Coppin State</li> <li>Baltimore City Community College</li> </ul>
Youth Development	Create a menu of bridge programs for students who need experiences prior to college enrollment.	Meets WWC Group Design Standards with Reservations	<ul style="list-style-type: none"> <li>Develop partnerships with programs to provide students with pre-college experience.</li> </ul>	<ul style="list-style-type: none"> <li>Community School Coordinator</li> <li>College and Career Coach</li> <li>Principal of RA</li> </ul>
Youth Development Increasing Protective Factors	Provide students with income prior to and beyond high school graduation.		<ul style="list-style-type: none"> <li>Develop partnerships to provide paid summer work, internships, apprenticeships, and bridge programs.</li> </ul>	<ul style="list-style-type: none"> <li>Community School Coordinator</li> <li>College and Career Coach</li> </ul>

**SOLUTION: Create individualized student plans to prepare students for postsecondary education admissions and success.** Under this PN proposal, PH staff at RA will be expanded from the current CSC to the addition of an SSC, additional SOP mentors, and a CCC. This team will work together to facilitate all the solutions under this strategy. The CCC is needed because the job of providing these services often fell on high school counselors and was added on top of their other responsibilities, thus constraining the ability to provide systematic and sustained support. They will work with students to create individualized plans for post-graduation experiences. This may include employment, community college, training programs, or a four-year college experience. Related to this process, they will communicate expectations and making sure parents and students understand the benefits of attending college, facilitate registration for standardized tests (PSAT, SAT, etc.), completion of the FAFSA, and assist with college or employment applications. BCPS students receive SAT prep by Princeton Review and allow students to take the SAT at no cost. Campus visits will be planned for students to tour the schools and sit in on freshman level classes. RA graduates who have gone on to attend and graduate college will visit students in the 9<sup>th</sup>-12<sup>th</sup> grades to talk about their college experiences. This will be facilitated by PH contacts with sororities and fraternities. Some of this work is already being done by the CSC and SOP mentors. PromiseCorps members will assist in expanding this work. PN implementation funds will allow us to reach more students.

Over 50% of BCPS high school graduates require remedial coursework in college (Goldstein, et al., 2016). Similarly, some RA students are overage and under-credited. As a part of MTSS, PromiseCorps will work with those students to obtain remedial education, tutoring, and credit recovery. They will work with each student to create an individual service plan to connect students to needed supports, including frequent benchmark assessments. They will have

advisory sessions to work on study skills, time management, and organizational skills with students.

**SOLUTION: Expose students to career pathways through high school programming.** RA students do not often have access to career pathways because of a lack of social capital, family connections, and access. We will develop partnerships with local businesses and trades to provide students with career exposure through classroom-based projects and internships. In SY15, Principal Rowe created a law, justice, and government focus to the school curriculum, largely as a way to create connections for students between their lives and their academic curriculum. Under this proposal we will purchase *Street Law* materials which use classroom and community programs to educate young people about law, government, civics, and social justice. *Communities United*, a current partner to the school, and a community organizing group which shows residents how to advocate for themselves and their community, will work with students to learn the principles of community organizing and will employ youth organizers. Additional partnerships will be created to provide entrepreneurial experiences for students, including *Real Food Farms* for urban farming, *Transition Kitchen* for culinary arts, and *Atwater's Farm* for bee-keeping.

**SOLUTION: Expand access to postsecondary education courses and postsecondary education enrollment aid or guidance.** The Maryland General Assembly passed the College and Career Readiness and College Completion Act of 2013, which included provisions to encourage high school students to enroll in college-level courses. So far, participation rates in the dual enrollment program have been low and minority and low-income students were less likely than their white and more affluent peers to take advantage of the program. It is clear that more needs to be done. PH CCCs will assist students and their parents in navigating the enrollment

process, develop college and career plans, and understand the risks and obligations of dual enrollment. One concern that has to be addressed is the need for RA teachers to be certified by community colleges to teach dual enrollment courses at RA for college credits. This will be addressed by the monthly professional development workshops provided to RA teachers and convened by ILED Goodwyn and Baltimore City Community College (BCCC).

Recently, Mayor Pugh announced plans to increase the number of community college graduates in a partnership between BCPS, BCCC and private philanthropy. The plan promises BCPS graduates free tuition to BCCC. While the details of the program have not been developed, the PH Director will reach out to the Mayor's Office and BCPS to be included in the workgroup. She will contribute her knowledge about non-traditional students including youth in the child welfare and juvenile systems; holistic assessment for strengths-based placement; and pre-enrollment support services. Coppin State University located in West Baltimore said they will offer free tuition to graduates of city public high schools who earn associate degrees from BCCC. The announcement was made on August 19, 2017 and came one week after Mayor Pugh agreed to make tuition free at BCCC for students who graduate from the city schools. This will provide a pipeline for RA students who earn associate's degrees to then pursue bachelor's degrees. CSCs will assist students and families to leverage these new opportunities.

**SOLUTION: Create a menu of bridge programs for students who need experiences prior to college enrollment.** Many RA students are not ready for a college experience right after high school. Not entirely an academic issue, this relates directly to their elevated need for social-emotional supports, mental health needs, and maturity. We have begun to partner with organizations which can provide "gap year" or "bridge programs" for high school graduates to better prepare them for post-secondary success. These partnerships will be expanded. *YouthBuild*

provides youth with a stipend, GED classes if needed, and on the job training in construction. *Year Up* offers skill development, college credits, mentorship, internships, a stipend, and assistance with job searches or college applications. *BridgeEdU* partners with the University of Baltimore and the Community College of Baltimore County to create an individualized learning plan for students, internships, and academic coaches. The *Choice Program* at the University of Maryland Baltimore County (UMBC) is an AmeriCorps program providing job-readiness classes and employment services to youth involved with DJS or DSS. The *UMBC Upward Bound Program* is a college preparedness program serving high school students whose parents do not have a bachelor's degree. *Civic Works Center for Green Careers* provides on the job training and industry-recognized certifications.

**SOLUTION: Provide students with income prior to and beyond high school graduation.** Several of the partnerships already discussed will provide paid summer work, internships, apprenticeships, and bridge programs. Our students are often burdened with the responsibility of providing for themselves or their families. We cannot ignore this pressing need. If students decide not to pursue postsecondary education or, worse yet, engage in violent activity because of a need for money and economic opportunities, then we must help them generate some income while also pursuing higher education. The Mayor's partnership with BCCC and Coppin will be a help.

## FAMILY & COMMUNITY

Supporting the success of youth requires that their entire family and community be supported. The addition of Student Service Coordinators to our existing continuum is designed to make sure that the supports can be more holistic and comprehensive and that more time and effort can be spent working with families who are the most difficult to engage. As proposed here,

seven SSCs will be hired to complement and support the CSC role. One will be placed at each school and two will concentrate on families with children under age five. They will help fuse the various support services into a strong network of coordinated and communicative entities allowing for the fluid movement, tracking, and support of individuals and families along the cradle to career pipeline. We will also expand our Family Stability program to include the hiring of residents who graduate from the program and can provide peer support to new participants.

<b>PROMISE HEIGHTS FAMILY AND COMMUNITY SOLUTIONS</b>				
<b>Need</b>	<b>Solution</b>	<b>Evidence</b>	<b>Strategy</b>	<b>Staff</b>
Family Engagement  Student Mental and Behavioral Health Supports  Increasing Protective Factors	Trauma-responsive systems of care for families, schools, and community partners ( <b>school- and community-based</b> ).	Meets WWC Group Design Standards with Reservations	<ul style="list-style-type: none"> <li>• Provide trauma-informed SEL training to schools and community partners.</li> <li>• Facilitate crisis response teams to schools and community partners as needed.</li> <li>• Educate parents as to signs, symptoms, and responses to trauma and toxic stress.</li> </ul>	<ul style="list-style-type: none"> <li>• Community School Coordinators</li> <li>• Student Services Coordinator</li> </ul>
Family Engagement  Attendance  Student Mental and Behavioral Health Supports  Increasing Protective Factors	<b>Provide services and education within the school building to increase family stability.</b>	Meets WWC Group Design Standards without Reservations	<ul style="list-style-type: none"> <li>• Enroll families in financial case management and education program.</li> <li>• Enroll adults in workforce development programming.</li> <li>• Enroll adults in education courses.</li> <li>• Hire Parent Leaders from each school for parent outreach.</li> <li>• Provide family case management.</li> </ul>	<ul style="list-style-type: none"> <li>• Family Prosperity Coordinator</li> <li>• Community School Coordinators</li> <li>• Parent Leaders</li> <li>• Center for Urban Families</li> </ul>

**SOLUTION: Create a trauma-responsive system of care for families, schools, and community partners (school- and community-based).** Many children, families, educators, and service providers in U/DH suffer from some form of traumatic response related to the extreme poverty and community violence present in the community. Although there are not always trauma symptoms present, trauma exposure can subtly or significantly affect the ability of teachers to teach, students to learn, and parents to engage. It is for this very reason that PH hires licensed social workers as CSCs—an uncommon community school strategy—because we believe that the work of partnership development, resource allocation, and referrals is best done through a trauma-responsive lens and with training on healing interventions. As discussed in the Pre-K-12 solutions section (on page 44), SEFEL promotes social and emotional development because when children have appropriate pro-social behavior they do better in school and in life. This curriculum was adapted by PH staff to be effective for all stakeholders and all ages. We will provide trauma-informed social-emotional learning training to schools and community partners. Families are in need of similar information as they learn effective parenting techniques for their children and their circumstances. PH school-based staff will provide workshops to educate parents as to signs, symptoms, and responses to trauma and toxic stress.

Unfortunately, SY16 brought additional lessons to the PH team around crisis response. In the wake of the deaths of several students, we were asked to create crisis response plans and staff crisis response teams to schools and community partners as needed. Consequently, BCPS and partners came to rely on our leadership during these times.

**SOLUTION: Provide services and education within the school building to increase family stability.** The PH Family Prosperity Program (FPP) is based on a model created by the Siemer Institute for Family Stability (<http://www.familystability.org/>). The FPP provides

financial literacy classes and financial case management (determining eligibility for insurance and social programs, accessing public and private financial resources, supporting improving credit or positive financial behaviors, advocating towards creditors, intervening to prevent eviction or loss of utilities, etc.) to families of students in the neighborhood. The goal is to reduce student mobility by helping stabilize their housing and to decrease economic-related stressors that students experience at home and might affect their academic achievement. We will enroll families in financial case management and education programs. PH staff will host neighborhood-wide workshops and arrange financial literacy lessons for students. As adults graduate from the FPP, they may be hired to be peer coaches for up to one year. This provides additional workforce experience.

The *Center for Urban Families* (CFUF) has placed a licensed social worker from their Economic Success program at one of our schools to connect unemployed and underemployed parents to pre-employment services (STRIVE), job retention and advancement programs, training and certificate programs, career case management, and work-related benefits such as transportation subsidies or clothing assistance. Parents work with the case manager for six to nine months. The case manager carries a case load of 25 families. More families need access to workforce development or soft skills as 27.6% of those 16 or older are unemployed and 53.5% are not in the workforce at all. **Initial outcomes include:** Parents have graduated from STRIVE and found permanent employment. This partnership focuses on workforce development programming with PH families. This may mean resume building, soft skills, reduction of employment barriers (transportation, criminal history, etc.), or enrolling in job readiness programs. Through a partnership with the Judy Centers, we are able to enroll adults in education courses in the same schools in which their children attend. Communities United will hire 10

parents (two from each school) to be Parent Leaders from each school for parent outreach. These parents will work with the CSCs and SSCs to engage parents to be more involved in the schools, to learn how to advocate for their children’s education, and to organize around community issues. Finally, family case management will happen at all levels of PH programming, by BHB staff, Judy Center staff, community school staff, and Family Stability staff. The *Promise Heights Management Information System (PROMIS)* (discussed in Section D2) will allow PH staff to help families move through the pipeline without losing information gained from one stage to the next. PROMIS will also allow for longitudinal research and evaluation.

## **B.2. Evaluation**

### **Process Study**

The long-term success of PHPN depends on the understanding of whether outcomes improve over time as well as on “how” and “why” various outcomes and trends exist. This deeper understanding of the outcomes will come from the detailed process study conducted by the Urban Institute (our external evaluator). This formative evaluation will provide information to PHPN on a regular and timely basis, allowing the organization to make adjustments to program plans incrementally. Urban will document any changes resulting from recommendations made by the Urban Institute. The key components of the process study are provided below.

**Interviews** with key staff and stakeholders to document their thoughts on PHPN’s major accomplishments to date, the development of PHPN’s programming plan and partnerships, and the main challenges and opportunities that lay ahead. Urban plans to conduct roughly 35-40 staff interviews with PHPN leadership and a sample of PHPN’s 50 major partners and stakeholders, including school principals.

**Focus groups** with residents to better understand their perceptions and experiences with individual programs and services and with PHPN as a whole. Focus groups will also be used as a tool for resident engagement/outreach as well as for dissemination of information about the initiative and work. Urban plans to hold 4 focus groups; two of these groups will include youth while the other two will include adults, one of which that will be restricted to adults with children. Each focus group will include 8-12 participants and last about 1.5 hours. Adult participants will receive a \$50 incentive; youth will receive \$25.

**Urban Institute Program Observations and Staff Notes** from meetings and processes related to the design, implementation and coordination of PHP's various data systems, including the LINKS data collaborative, the school gathered testing data, case management data, and the school climate assessment, as needed for the implementation as well as observations of Promise Heights programming and events. These notes will be included in annual process study reports.

### Deliverables

The final deliverable will be a final process study report that will summarize information from all of the sources above. The Urban Institute team will combine findings into a single process study. The report is due at the end of the contract (Years 1-5). Regular site visit memos that provide timely summaries of site visits that will allow PHPN to make incremental adjustments to programs and plans (Years 1-5).

### Neighborhood Survey

The Urban Institute will support PHPN in administering the Neighborhood Survey by reviewing a draft survey instrument and developing a sampling strategy. Based on Urban's expertise in designing similar surveys, including for the *DC Promise Neighborhood*, Urban will review the survey developed by PHPN and provide feedback on content and questions. The

survey will cover relevant topics, including housing, neighborhood amenities and supports, food access, neighborhood conditions and safety, adult education and employment, public assistance, child health and education, and adverse childhood experiences. We will develop a sampling plan to ensure a representative random sample of adults age 18 or older from the neighborhood are selected as survey respondents from within the public housing communities and the larger U/DH neighborhood. If no complete address list exists from which to randomize a sample, other strategies will be considered including sampling occupied housing units within each census tract block group in the U/DH neighborhood.

The survey itself will be developed by PHPN, based on their previous resident survey conducted during the planning grant. It will be administered biannually in the field by their trained staff and volunteers using their own software and data collection devices. PH will also clean, analyze, and report on survey outcomes.

### Deliverables

Urban will review the Neighborhood Survey instrument in the initial year (Year 1) and again prior to subsequent administrations in Year 3 and Year 5. Urban will develop sampling strategy (Year 1), and amend/supplement as needed in Year 3 and Year 5.

### Assessing Student Outcomes: Alumni Survey

An alumni survey will be used to document students' post-graduation plans and track the longer-term impacts of the PHPN intervention for students graduating from Renaissance Academy. (The Alumni Survey will complement the PN outcome data about post-RA education, training, and employment accessed from the administrative records of the Department of Labor, Licensing, and Regulation and from the Maryland Higher Education Commission contained in the Maryland Longitudinal Data System Center [MLDSC: described in Section D2].) The Urban

Institute will create a protocol for tracking students graduating from RA, documenting their post-graduation plans, and following up with them via an online survey. Urban will create a survey instrument based on questions from existing Promise Neighborhood alumni surveys and develop a methodology and implementation plan that can be conducted by PHPN on an annual basis. The survey can include questions in the following domains.

- Graduation date
- Post-Graduate Plans
  - Enrollment in two-year or four year colleges
  - Enrollment in vocational or technical schools
  - Employment Plans
- Placement into college-level mathematics and English courses
- Gap Year Alternatives
- Criminal Justice outcomes
- Life trajectories (having children, getting married, etc.)
- Requests for updates contact information (i.e., new address, links to Twitter, Facebook or LinkedIn profiles, updated email address or telephone number)
- Requests for contact information of family or friends

Urban will tailor these domains and questions to fit the needs of the promise neighborhood. The survey will take no more than 30 minutes to complete. Those who complete the survey will receive a \$25 gift card. Urban will support data cleaning and analysis of the alumni survey. The alumni survey will be used to contribute to the data collection requirements stated by **GPRA 5.1** (number and percentage of Promise Neighborhood students who enroll in a two-year or four-year college or university after graduation) and **GPRA 5.2** (number and percent

of Promise Neighborhood students who graduate from a two-year or four-year college or university or vocational certification completion).

### Deliverables

Urban will complete the survey instrument (Year 1). Urban will use Qualtrics to field the web survey (Years 1-5). Urban will clean and analyze the alumni survey data (Years 1-5).

### **Assessing School Outcomes: Enhanced School Climate Survey**

Urban will support PHPN staff and partners to implement a supplement to the Baltimore City school climate survey that is administered on an annual basis for each of the middle and high schools within the Promise Heights footprint. This supplement will be a stand-alone document and will only be administered in schools in the PHPN footprint. Urban will draw from experience in other Promise Neighborhoods and will provide technical assistance on survey instrument design and implementation strategies. The school climate survey supplement will include questions that are in accordance with the reporting requirements set forth by the U.S. Department of Education. The school climate survey supplement will be used to inform **GPRAs 6, 7.1, 9.1, 9.2, and 10** (see Exhibit 6 on page 28).

### Deliverables

Urban will provide technical assistance to support PH staff and partners to develop and field a school climate survey instrument (Year 1). Urban will clean and analyze supplemental data (Years 1-5) and will send analysis of school climate survey data and information to complete PHPN's reporting as required by US ED by deadline (Years 1-5).

### **Impact Assessment**

The research team will assess student data from across the district, using the Maryland Longitudinal Data System Center (MLDSC). The MLDSC has student-level data on

demographics, attendance, test scores, coursework, grades, and attainment. In addition, a link to the National Student Clearinghouse allows Urban to track students into post-secondary education and training. Urban Institute researchers will supervise the analysis of this data by University of Maryland School of Social Work faculty.

MLDSC data will form the basis for a summative assessment of the impact of the Promise Heights, but the data also offer a means of formative assessment over the five years of implementation. Yearly analysis of administrative data will allow researchers to understand which schools and programs within PH are seeing the most progress, providing the opportunity to allocate resources to the programs having the largest impact.

The centerpiece of the analysis of MLDSC data will evaluate the overall impact of the Promise Heights on student- and school-level outcomes. The quantitative analysis of student outcomes will draw on quasi-experimental research methods to bring the best possible evidence to bear on the likely causal impact of the interventions.

A preliminary analysis of publicly available school-level data from Maryland indicates that a quasi-experimental research design based on propensity-score matching at the student level is likely to produce credible results that would meet the WWC's evidence standards with reservations (the highest possible rating for an evaluation that is not based on a randomized experiment).

The key challenge to making valid causal inferences in this context is the fact that the Promise Heights schools are some of the highest-need schools in Baltimore. When identifying matched comparison students and schools in Baltimore City, it is critical that Urban find groups of students and schools that are as similar as possible. In our preliminary evaluation of publicly-available school-level data, Urban identified a set of six closest-match schools, which were all

traditional (non-community) schools. Because the Promise Heights intervention is a community schools treatment, Urban has also matched to five other community schools in the city.

Exhibit 8 shows the demographic characteristics and academic performance of the four Promise Heights elementary and middle schools, alongside data for matched non-treated traditional schools and matched non-treated community schools in Baltimore City. The matching was carried out using a nearest-neighbor match based on a logistic propensity score model that identified schools based on the student demographics and test score data. Except for the percentage of Hispanic students in the control community schools, none of the differences in average characteristics between the treated and matched non-treated schools are statistically different at the 10 percent level.

**Exhibit 8: Demographics of Treatment and Control Schools**

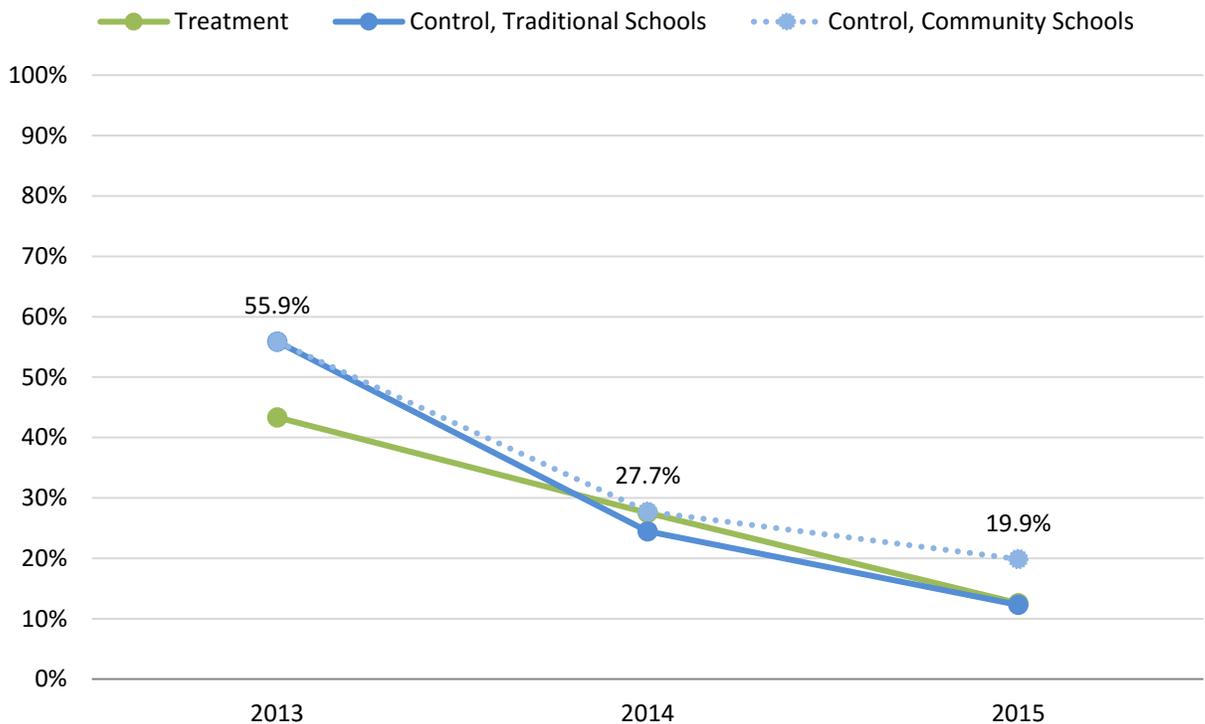
	Treatment (4)	Control Traditional Schools (6)	Control Community Schools (5)	All Non- Treated Schools (78)
<b>Percent Black Students</b>	97.2%	97.4%	90.9%	82.9%
<b>Percent Hispanic Students</b>	0.7%	0.8%	2.4% *	5.6%
<b>Percent Students with Limited English Proficiency</b>	0.1%	0.1%	3.8%	3.8%
<b>Percent Students with Disability Under IDEA</b>	16.6%	15.4%	15.4%	15.7%
<b>Average Enrollment</b>	393	405	466	414
<b>Percent Students Eligible for Free and Reduced Price Lunch</b>	96.2%	96.2%	95.4%	86.5%
<b>Percent Scoring 3 or Higher on Math PARCC</b>	12.6%	12.3%	19.8%	30.8% **
<b>Percent Scoring 3 or Higher on Reading PARCC</b>	15.9%	19.6%	22.5%	37.8% **

\*Statistically different from treatment group at the 10% level. \*\*Statistically different from treatment group at the 5% level.

The final column of the table shows characteristics for all non-treated schools in Baltimore. The typical non-treated school tends to serve a smaller proportion of black students, and tends to have statistically higher PARCC scores than the PH schools, showing how important it is to identify appropriate comparison groups for evaluation purposes.

The assumption underlying a matched comparison analysis is that the matched non-treated students provide an appropriate counterfactual for the outcomes that would have been observed in the treated students in the absence of treatment. One indirect test of this assumption is to examine the pre-treatment trends in outcome variables. Exhibit 9 shows strikingly similar levels and trends in the percent of students achieving a proficient math score on the Maryland School Assessment (MSA) (20013 and 2014) and the PARCC test (2015)—the drop in scores of both groups is due to the adoption of new proficiency cutoffs. Results for the Maryland standardized test in reading are not shown, but demonstrate similar trends.

**Exhibit 9: Treatment and Control Schools (3 year trends in student math achievement)**



While Urban has carried this initial match out only for the elementary and middle schools in PH, they would perform a similar match for Renaissance Academy, identifying similar high schools in Baltimore City for the purposes of matching students with similar academic trajectories and demographic characteristics. Given initial findings, we are confident that Urban can find sufficiently-similar control students (whether in traditional or community schools) to perform a propensity-score match with treatment students.

### Student-Level Matching

The data analysis at the student level will use restricted-use, MLDS data to compare the outcomes of students in treated schools to those matched in non-treated schools, controlling for a rich set of student characteristics available in the administrative data (including race/ethnicity, gender, special education, free lunch eligibility, and English language learners). In the first year of the evaluation, Urban will also estimate models that control for students' test scores from the prior year. In the ensuing years of the evaluation, Urban will control for pre-treatment test scores to the extent that is possible (i.e., if there are a sufficient number of students for whom we have data from a pre-intervention year). All models will be estimated using student-level data, with standard errors clustered at the school level.

Student outcomes examined will include: test scores in math and reading, attendance, high school graduation, and post-secondary outcomes. In addition to the overall treatment effects, Urban will also estimate effects for subgroups of students broken down by characteristics such as gender, race/ethnicity, special education, and English language learner.

### School-Level Matching

Urban will also estimate models based on school-level data on the results of the annual Baltimore City School Climate survey, which is administered to students, teachers, and parents.

To conduct this school-level analysis, Urban will rely on a propensity-score match at the school level, similar to the preliminary match we demonstrated above. In addition, they will explore the use of synthetic control methods, which allow the reweighting of control schools to provide a better comparison match to the treatment schools.

School outcomes examined will include: perceptions of school administration, perceptions of school environment, school climate and safety, and parent satisfaction. This analysis, while more limited in scope, will allow a better understanding of the impact of Promise Heights on these more intangible outcomes, relative to similar schools.

### Deliverables

The Urban Institute team will combine findings from the impact study in summary-form into a single study. The report is due at the end of the contract (Years 1-5).

**Neighborhood-Level Effects of PN.** Indicators of neighborhood change from PN will be gathered with use of publically available indicators of community characteristics (from BNIA and the ACS) as well as from the representative bi-annual neighborhood survey. Every two years we will, with the assistance of statisticians at the Urban Institute, draw a representative sample of PN residents (ages 18 and older) to complete survey items that capture the views of neighborhood members about their experience in Upton/Druid Heights and with the Promise Heights initiative. The survey will build on the work done in our original PHPNP survey—tapping the key domains that our Community Advisory Board thought to be most germane and yielded informative results: (1) about you (2) about your community; (2) about your child(ren); (3) your children’s health and wellness; (4) employment and transportation. We will also review the Aspen Institute’s (2012) work and the community surveys they identify as the most salient source of survey items (e.g., PCHDN, Making Connections) to understand neighborhoods and

improve practice in comprehensive place-based change efforts. This may offer innovation that we did not include in our earlier work. We will also work with Urban to identify other areas that have proven telling in repeated, representative neighborhood surveys.

**Exhibit 10. Annual Indicator Goals**

<b>Promise Heights Promise Neighborhood Proposal Annual Indicator Goals</b>						
<b>PH Indicators</b>	<b>Planning Year (Baseline)</b>	<b>Annual Goals: Year 1</b>	<b>Annual Goals: Year 2</b>	<b>Annual Goals: Year 3</b>	<b>Annual Goals: Year 4</b>	<b>Annual Goals: Year 5</b>
(1.1) Age Appropriate Functioning	46.8% (KRA Proficient)	50%	55%	60%	65%	70%
(2.1) Math Proficiency Grades 3-9	3-5 Math: 2.1% n=11 6-8 Math: * 9 Math: *	3-5 Math: 7% 6-8 Math: 5% 9 Math: 5%	3-5 Math: 10% 6-8 Math: 7% 9 Math: 7%	3-5 Math: 15% 6-8 Math: 10% 9 Math: 10%	3-5 Math: 20% 6-8 Math: 15% 9 Math: 15%	3-5 Math: 30% 6-8 Math: 25% 9 Math: 25%
(2.2) English Language Arts Proficiency Grades 3-9	3-5 Reading: 3.5% n=15 6-8 Reading: * 9 Reading: *	3-5 Reading: 8% 6-8 Reading: 5% 9 Reading: 5%	3-5 Reading: 10% 6-8 Reading: 10% 9 Reading: 10%	3-5 Reading: 15% 6-8 Reading: 15% 9 Reading: 15%	3-5 Reading: 20% 6-8 Reading: 20% 9 Reading: 20%	3-5 Reading: 30% 6-8 Reading: 30% 9 Reading: 30%
(3.1) Attendance Grades 6-9	82.0%	84.5%	87%	89.5%	92%	95%
(3.2) Chronic Absenteeism Grades 6-9	35%	30%	25%	20%	15%	10%
(4.1) 4-year Adjusted Cohort Graduation Rate	69.8% N=44	73%	76%	79%	82%	86%
(5.1) Post-Secondary Education Enrollment	21	23	25	28	31	34
(5.2) Post-Secondary Education Graduation	not collected for planning year	10% increase over baseline	20% increase over baseline	30% increase over baseline	40% increase over baseline	50% increase over baseline
(6.1) Consume 5+ Fruits and Veggies	20.0%**	30%	40%	50%	60%	70%
(7.1) Students Feel Safe at School/ Traveling To and From School	53.5% 66.0%	60% 75%	70% 85%	80% 95%	90% 99%	99% 99%
(7.2) DOJ Involvement	201	180	160	140	120	100
(8.1) Student Mobility	43.5%	38%	33%	28%	23%	18%
(9.1) Parents Read to Children (Birth to 8 <sup>th</sup> Grade)	74.7%**	80%	85%	90%	95%	99%
(9.3) Parents Talk to Children About College (Grades 9-12)	not collected for planning year	10% increase over baseline	20% increase over baseline	30% increase over baseline	40% increase over baseline	50% increase over baseline

Promise Heights Promise Neighborhood Proposal Annual Indicator Goals						
(10.1) Computer and Internet Access	91.5%**	93%	95%	97%	99%	99%

\* An asterisk (\*) denotes no students or fewer than 10 students in category, or indicates the percentage for the category is either  $\leq 5$  or  $\geq 95$  and the corresponding counts have been suppressed. \*\* Indicates this data was self-reported through a 2014 Promise Heights Promise Neighborhood Planning Grant Survey, N=292.

### B.3. Strong Theory

**Theory about the impact of poverty and trauma on children.** The PHPN approach is based on strong theory and data regarding the choice of solutions, and how they fit with the challenges in this neighborhood, as well as a strong implementation framework. Theory rests on the undebatable impact of poverty on children’s future. As noted in Section A3, Baltimore is the toughest place in the country for poor children to escape poverty. The theoretical underpinnings rest on an understanding of how growing up in neighborhoods with high levels of poverty and social and family adversity help to explain poor health, academic achievement, education, and employment outcomes (Hair et al., 2015; Yoshikawa, Aber, & Beardslee, 2012). We believe that a reduction in social and family adversity and greater and early engagement of parents in more responsive parenting styles will help address sources of educational disadvantage.

The evidence also shows a myriad of factors to consider in understanding the influence of poverty on life success. One that is key to our work is the pivotal role that school and individual connectedness has in mediating those negative outcomes (Niehaus, Rudasill, & Rakes, 2012). Our array of interventions is intended, from the very earliest years, to bring families and children into positive contact with their local elementary school through early education programs; community schools and family navigators in all schools; and, in the latter years, to engage students in the arts (PH middle school) and with mentors (PH middle and high schools). Further, that each of our proposed solutions endeavors to address one or both levels of connectedness—

institutional and interpersonal. This approach recognizes that students who have both kinds of connectedness are most likely to progress but that either form of connectedness can be beneficial (Nasir, Jones, & McLaughlin, 2011). Thus, *Toddler Family Check Up* as well as our Student Service Coordinator initiatives are explicitly about keeping families connected to services. The Community School program has a major emphasis on developing personal connections among family members and the schools, and connecting students as they make transitions across grades and schools.

Improving the transitions between programs and services are especially relevant because these have been shown to interrupt student growth and achievement with the greatest impact on low-income and special needs children (Akos, Rose, & Orthner 2015). Transitions from elementary to middle school may, especially, trigger higher affiliation with deviant peers (Rudasill, Niehaus, Crockett, & Rakes, 2014). Connectedness across transitions can be achieved through intentional program design that demands that quality transitions are made, whenever possible, between services, teachers, schools, summers and academic years, and changes in family make-up.

We also recognize that the impacts of poverty also include food insecurity, residential stability, and homelessness. This results from, and contributes to, adverse childhood experiences that have been worsened by a lack of access to preventive and early intervention services and in place of more punitive and correctional encounters. In U/DH, despite its long and storied history of leadership, institutional racism has also resulted in high rates of residential and educational segregation.

Our theoretical model also recognizes the link between childhood exposure to trauma and adverse academic and social performance. Research done in West Baltimore (Collins, et al.,

2015) evinces the high rates of exposure to trauma among children here, and also the potential for reducing behavior problems with trauma-responsive interventions. These interventions endeavor to understand the additional sensitivities that arise with trauma and to build a relationship that can recognize ways to give children a sense of control over their emotions and actions. Although the evidence-based practices that we are now implementing and are proposing to implement through this PN proposal are not originally designed with trauma-responsive components (an exception is SEFEL), we have experience bringing the perspective of trauma informed services into our work whenever possible.

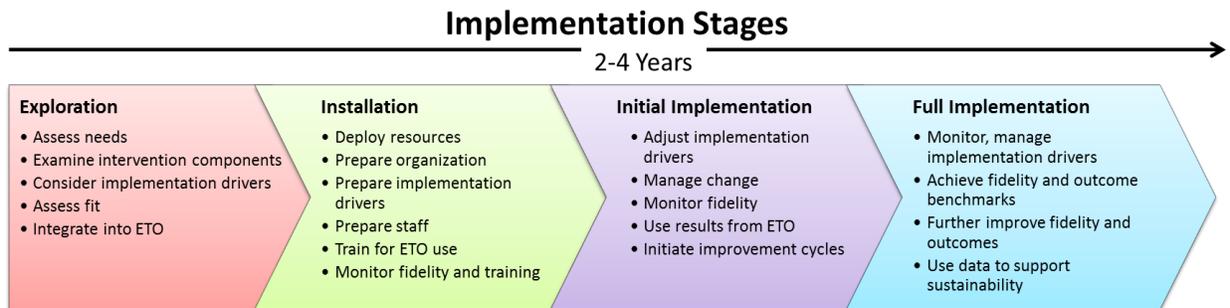
**Theory about the continuum of solutions.** Each of our solutions has been selected because of strong theory and, generally, on the basis of the strength of evidence in support of the intervention or very similar ones. We have endeavored to select interventions that have been evaluated with designs that support causal conclusions. We pride ourselves on understanding the strength of evidence and selecting interventions with the most substantive support, even if they have not arisen to the highest strength of evidence. (Barth is a national expert on evidence-based practice and sits on the Research Advisory Board of the California Evidence Based Clearinghouse for Child Welfare, the leading review group for child welfare related assessment, intervention, and implementation strategies.) This evidence is detailed in Appendix G which describes the research behind the specific interventions we have chosen.

**Implementation Theory.** PH recognizes that effective services are not easily embedded into new environments. We have worked extensively with the National Implementation Research Network (NIRN) framework. NIRN provides a map for making sure that interventions are implemented with fidelity and, then, sustained. This requires that we have three kinds of implementation drivers aligned: the competence to introduce the new practice methods, the

organizational supports to initiate and sustain them in new systems, and the leadership strategies for making decisions that support the functioning of all the engaged systems. Although NIRN is a model, not a theory, we use NIRN as we might a theory to guide us in the continuous conceptualization of how to increase the impact of our work. We focus this application on the implementation stages and the drivers.

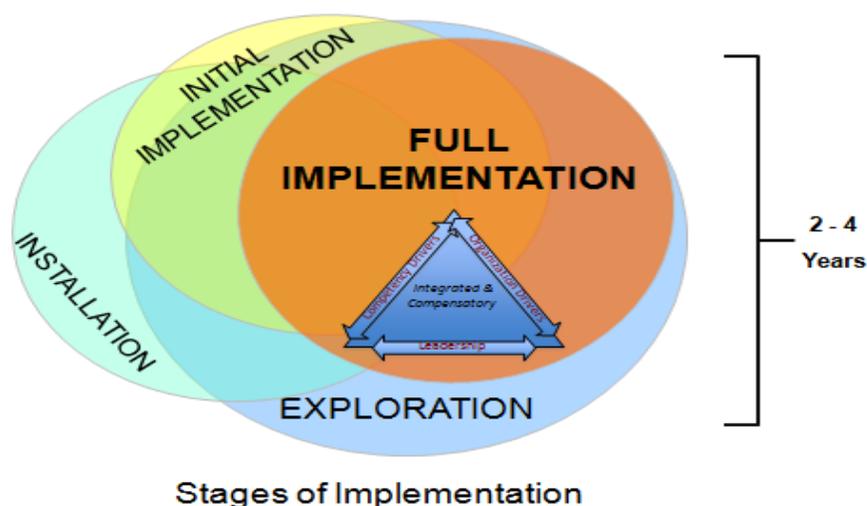
Implementation stages conceptualized in the NIRN framework, shown in Exhibit 11 below, from Bertram, Blasé, and Fixsen (2015), are already underway in Promise Heights. Indeed, given the planning process which helped to identify practices that built upon the segmentation analysis, we have completed much of the “Exploration” stage. Some solutions have been installed (e.g., Seeds of Promise (Mentoring) in RA), but are still needing more confirmatory work in other settings (i.e., Seeds of Promise in BTW). Some programs (e.g., PATH in FLT) have been installed but are not, now, running with sufficient fidelity.

**Exhibit 11. NIRN Implementation Stages**



However, our implementation process looks more like that in Exhibit 12 which shows overlapping stages of implementation for different components of an intervention (Bertram, Blasé, and Fixsen, 2015). To achieve our aspirations for this PN proposal, we will bring a disciplined approach to mapping out the implementation challenges and phases, and the drivers (and related barriers) for each program within each school and with each community organization.

*Exhibit 12. Bertram, Blasé, and Fixsen Stages of Implementation*



In all, the meta-theory behind our implementation is a blend of theories that help us understand the context of our services, to recognize the impact of poverty and trauma, and to address some of those by helping to reduce disruptive transitions and keep children and families connected to their community schools and to allied services. These theories support solutions with strong supporting evidence and acknowledge that these interventions will need staging, over a significant period of time, and with attention to competencies (and fidelity monitoring of trainers and trainees), organizational supports, and leadership support for our organizational leaders—including the leadership of Promise Heights.

Taken together, the strong theory undergirding the pipeline of services and implementation is also reflected in the **PHPN Logic Model** shown in Exhibit 13 (also in Appendix G). Although there are no longitudinal studies that have endeavored to track all of the services received by a cohort of children and families, there are promising examples that suggest that the theory of a continuum of solutions that begins before birth is sound. The venerable Abcederian Project (Campbell, et al., 2014), Chicago Child-Parent Center (Mersky, et al., 2011), Perry Pre-school (Wortman, 1995), and Nurse Family Partnership (Olds, et al., 2014) studies have all followed service recipients into adulthood and demonstrated sustained benefits. These

have recently been joined by similarly positive outcomes from the NLSY Head Start follow up study (Bauer & Schanzenbach, 2016) as well as the synthetic data project assembled by Sawhill and colleagues (2013) who have integrated the findings from intervention studies using evidence-informed practices at various developmental points and examined their odds of transitioning to middle class status by adulthood.

**Exhibit 13. Promise Heights Promise Neighborhood Logic Model**

	Early Childhood	Elem School	Middle School	High School	College & Career
<b>Resources Inputs</b>	Family Supports: Student Service Coordinators, Early Learning Coordinators, College & Career Coach, Family Stability Peer Coaches, Resource Parents, Parent Leaders				
	Promise Neighborhoods Accountability Board, Sustainability Board, Community Board, Drug Free Community Coalition, Byrne Coalition				
	Promise Neighborhoods office space (including rooms for program implementation)				
	Resource Coordination: Community School Coordinators, Mental Health Consultants, Trainers, Partners				
<b>Activities</b>	Strengthening family				
	Trauma responsive system of care for families, schools, and community				
	Facilitate academic alignment between early learning centers/neighborhood schools/post-graduation				
	Early intervention to prepare for school readiness (internet and computers, healthy eating, and additional recreation opportunities)	Full service Community Schools to support academic achievement, family stability and access to internet and computers (Implementation of MTSS)			
	Mentors provide SEL, academic, and violence interruption support, College and career preparedness				
<b>Outputs</b>	Community School Coordination, Student Service Coordination, Judy Centers Referrals, Family Check-up Home Visiting, B'more for Healthy Babies Case Management, Parent University Programming				
	Trauma Responsive System (Schools, Parents, Service Providers)				
	MTSS, Restorative Practices, Evidence-based Curricula				
	Mental health consultation	Mentoring, College and Career Coaching			

	Early Childhood	Elem School	Middle School	High School	College & Career
Short-term Results	Caregivers and community members understand the importance of education, healthy living and safety.				
Medium-term Results	Community will establish healthy living routines, cognitively rich learning environments, and a safe environment.				
Long-term Results	Youth are thriving in their physical, academic, social, and emotional lives				
	Families and community members support youth				
	Youth are developing in safe schools and community				

The **resources** obtained from local partners and the evidence-informed **activities** identified in our pipeline of services will focus on creating connectedness needed to serve children *early, often, and effectively* (Ludwig & Sawhill, 2009). The effectiveness of the services will be partly evinced by ensuring that they are programs selected with strong empirical support and, also, that they are provided with high fidelity. We will engage the seminal elements of implementation science in monitoring—and adjusting all of our **outputs**. We will also carefully measure the results of these resources and activities in the **short- and medium-term** with assistance from our research partners (who will collect and analyze both qualitative and quantitative data in order to provide a key independent view of our work), our own results-based accountability (RBA) process (described fully in D2); feedback from locally collected data (e.g., twice-a-year i-Ready scores); our data sharing agreement with BCPS; and Maryland’s unusually well integrated Maryland Longitudinal Data System (MLDS) which will capture **long-term** outcomes related to higher education, licensing, and employment. (We believe that we will also be able to link the records of our children and families, with consent, to TANF, child support, SNAP, child welfare, and juvenile justice—data systems now used by UMB SSW staff by the end of this five-year project although we do not yet have agreement for linking.)

## **C. QUALITY OF PROJECT SERVICES (20 POINTS)**

### **C.1. Equal Access and Treatment**

UMB has a long history of working with underrepresented groups, and has particularly focused on students who attend nearby Baltimore City Public Schools, 80% of whom are African-American. Each of the UMB professional schools engages the surrounding community to provide needed services. The mission for the UMB SSW, under which Promise Heights operates, is to “develop practitioners, leaders, and scholars to advance the well-being of populations and communities and to promote social justice.” In 2013, the UMB SSW created a strategic plan with six pillars—the fourth of which is focused on diversity with the goal to create an atmosphere that fosters cultural responsiveness within UMB SSW and community.

Since its founding in 1961, the UMB SSW has endeavored to prepare MSW students to work with diverse populations through recruitment of a diverse group of students (many from Baltimore City), open discussions of diverse points of view, and facilitating coursework with content related to the experiences of diverse populations. In addition, UMB SSW is creating and delivering interventions that are effective with diverse and underserved populations. MSW students work with African-American families in clinical settings and with African-American students in school settings through their community-based learning opportunities. The Positive School Center at UMB SSW trains BCPS educators on issues of cultural competency, equity, and opportunity related to school climate and school discipline. The work being done by Promise Heights in U/DH is heralded as a cornerstone initiative through which UMB serves West Baltimore, a primarily African-American neighborhood (as noted in Section A1).

We will employ an approach we have previously used in the UMB SSW for addressing disparities. This method relies on the National Standards for Culturally and Linguistically

Appropriate Services (CLAS) in Health and Health Care. The National CLAS standards were initially published in the Federal Register on December 22, 2000 and enhanced in 2010. The enhanced National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care are comprised of 15 Standards for implementing culturally and linguistically appropriate services that will advance health equity, improve quality, and help eliminate health care disparities. The 15 standards fall within the following three areas of focus: 1) Governance, Leadership and Workforce; 2) Communication and Language Assistance; and 3) Engagement, Continuous Improvement, and Accountability. PH will adapt this HHS framework to ensure that we adequately address disparities throughout our pipeline of services.

The quality and sufficiency of our strategies is more fully detailed in the Evidence Table in Appendix G, however we note a few prominent examples here.

1. Our **parent education program** is based on Chicago Parent Program, which is noted for its efficacy with **low-income African-American parents** of young children (Gross, Garvey, Julion, Fogg, Tucker, & Mokros, 2009).
2. Over 2,000 mostly **African-American low-income children** from birth to 30 months who were given **developmental screenings** such as the ASQ and DECA (detailed in our early learning solutions on page XX) were more likely to receive developmental services and receive them in a timely fashion than children who were not screened (Guevara, Gerdes, Localio, Huang, Pinto-Martin, Minkovitz, & Pati, 2013).
3. Evidence indicates that **effective principals in high poverty areas** have a direct effect on teacher retention and a significant indirect effect on average student achievement (Branch, Hanushek, & Rivkin, 2013).

4. A longitudinal study following almost 3,000 low-income, **ethnically diverse** elementary and middle school students found that students who regularly participated in **high-quality afterschool programs** showed significant gains in standardized test scores, work habits, as well as reductions in behavior problems among disadvantaged students (Vandell, Reisner, and Pierce, 2007).
5. Positive outcomes associated with **effective transitions** have been shown to be greater for **low-income populations** (Denver Education Compact, 2013).
6. In a randomized controlled trial of 2,740 youth in Chicago public schools, youth who received **mentoring** showed a reduction in violent-crime arrests by 44% and improved academic outcomes (Heller, Pollack, Ander, & Ludwig, 2013).

In addition, UMB SSW operates the National Quality Improvement Center on Tailored Services, Placement Stability and Permanency for Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ) Children and Youth in Foster Care (QIC) on behalf of the Children's Bureau (CB) and PH will use this expertise to ensure LGBTQ and SOGIE needs are met.

## **C.2. Rigorous Academic Standards**

UMB is Maryland's only public health, law, and human services university, dedicated to excellence in education, research, clinical care, and public service. UMB enrolls 6,500 students in six nationally ranked professional schools—medicine, law, dentistry, pharmacy, nursing, and social work—and an interdisciplinary Graduate School. The University offers 50 doctoral, master's, baccalaureate, and certificate programs and confers most of the professional practice doctoral degrees awarded in Maryland. Rigorous academic standards is core to the work of UMB and at the heart of not only our graduate programs, but also the primary education programs with which we partner, including evidence-based strategies as outlined in Appendix G.

**Prenatal.** A substantial array of studies, going back several decades, indicates that children who are born premature have higher risk of educational attainment—even reaching into young adulthood in the form of compromised career outcomes (Odd, Evans, & Edmond, 2016). The improvements in birth outcomes observed through B'more for Healthy Babies (BHB) improves the odds of children's achievement in the normal developmental range. Improved birth outcomes also lead to improved readiness for pre-school learning for parents and children. Parents of low-birthweight children may experience higher rates of problems with lactation and depression (Lau, Hurst, Smith, & Schanler, 2007). We provide lactation coaches through BHB and depression interventions in order to counteract some of these risks for all parents. Heightened parental stress can arise because of expectations of others based on their birth date (rather than their gestational age as different from their due date). Children with challenging births may not be ready for the developmental programs they are eligible for and in which they become enrolled. Birth spacing also has effects on later educational attainment (Crowne, Gonsalves, Burrell, McFarlane, & Duggan, 2012) and harsh parenting (Kitzman, Olds, & Sidora, 2000). Unpublished results from BHB indicate that birth spacing is being elongated (Rebecca Dineen, personal communication, August 17, 2016). We also rely on other evidence from colleagues in the UMB SSW and UMB School of Medicine that longer birth spacing can be predictably achieved with augmented pre- and postnatal involvement with parents (Barnet, Liu, DeVoe, Duggan, Gold, & Pecukonis, 2009).

**Parenting Education and School Readiness.** For many reasons, children in urban areas too often lack the language, literacy, and self-regulation skills needed to succeed. Children who develop good literacy skills early are likely to be good readers at the end of elementary school, and children who have weak literacy skills early in elementary school are likely to remain poor

readers (Duncan, et al., 2007). Current evidence indicates that intervention during the preschool period can help shape children's educational outcomes, particularly for children at-risk of later reading difficulties (e.g., Lonigan & Cunningham, 2013). In general, high cumulative risk during the infancy and the preschool years are strongly associated with poor pre-school readiness, weak self-regulatory skills, and problems with social behavior.

Parenting improvements lead to better social and emotional adjustment of children and better attendance which leads to better academic outcomes. Children who grow up in urban areas characterized by poverty and violence are at high risk for school difficulties. Over one-third of children enter school lack the cognitive and/or self-regulation competencies that are needed for positive adjustment and academic success (Ryan, Fauth, & Brooks-Gunn, 2006). Researchers have suggested that family strengths may provide a particularly critical source of resiliency under conditions of adversity (Mistry, Benner, Biesanz, Clark, and Howes, 2010). Recent analyses indicated that parent support for learning predicted growth in aspects of children's academic knowledge and executive functioning over time, controlling for children's prior skills and demographic risk factors. Promoting parent support for learning may be a promising strategy to enhance the school readiness of children at dual risk due to contextual adversity and, even more so, those also at risk of elevated aggressive-disruptive behavior (Abenavoli, Greenberg, & Bierman, 2015). For these reasons, PH now invests heavily in parenting programs from birth to age 5 and will double down on that investment in the future by increasing the availability of parenting support initiatives. PN implementation funds will allow us to run twice as many parenting cohorts as we do now. Parent University was recently evaluated and showed evidence that parents who participated had improved significantly on measures of parental responsiveness and that these improvements were maintained over time (Liggett-Creel, Barth, Mayden, & Pitts,

2017). We are also employing Deborah Gross’s Chicago Parenting Program (for children 3-5) which has shown evidence of improving maternal well-being and children’s behavior. The addition of the Toddler Family Check Up program will help to weave these programs together (beginning at age 2) and also includes exposure to a standardized parenting curriculum.

**Academics.** Children raised in communities with complex trauma, often exposed to cumulative risks and adversities, are at risk for educational failure. This is why we have a conviction that students must be ready to learn, focused, and have minimal distractions of peer conflict. This is good for troubled students, their less troubled peers, and teachers. Recent evidence from a large, urban school district (described as “high-risk” by the authors) implemented Promoting Alternative Thinking Strategies (PATHS) in 24 elementary schools. Students who were enrolled in the schools with PATHS demonstrated higher levels of basic proficiency in reading, writing, and math at some grade levels—findings that held across race, gender, and socioeconomic status differences (Schonfeld et al., 2015). This recent study supports our continued use of PATHS in FLT and its possible expansion to HSCT and EM.

Children who are ready with developmentally appropriate language and social and emotional learning and supported by responsive parents must still **attend** school and must be exposed to **high quality academic instruction**. Improved attendance is a critical component of the PH continuum of solutions. Even school breakfast programs may be used to increase attendance (Anzman-Frasca, et al, 2015). Getting to know parents through BHB and Parent University also increases the likelihood that our Community School Coordinators and allied staff can reach out to parents whose children miss even a single day of school to find out what can be done to help avoid repeated absences. Our mentoring programs also reach out and locate tardy students and, sometimes, walk them to school.

**Improved academic assessment and instruction** (via i-Ready) will lead to improved academic achievement. i-Ready is an adaptive on-line assessment tool in regular use in by BCPS, although this use is primarily for milestone grade testing and often is not used for every grade and is not accompanied by the Toolkit which matches up to the diagnostic information. Evidence from the publisher (Curriculum Associates, 2014) indicates that i-Ready is a reasonably valid and predictive measure of the PARCC proficiency rates (with average correlations for Math of .81 and ELA of .78). i-Ready scores also track well with PARCC proficiency assessments. More importantly, the results are readily available and they link up to the Toolkit that gives teachers a way to rapidly address the specific academic shortcomings of students, early in the year and immediately, so that interventions can be developed in time to achieve academic gains. This tool fits very well with our MTSS approach. i-Ready has won CODiE and BESSIE Awards in the last few years.

The number of students testing at proficient has doubled at FLT since starting to use i-Ready in spring of 2015. The proportion of students at greatest risk was halved. We expect similar impact in other schools. We expect that the Principals' Council will help to spread the word about the greater capacity of i-Ready to help with instruction and will use PN implementation funds to purchase the Toolkit for all schools which will also help achieve greater levels of academic proficiency.

Improved financial capability and related improvements in family circumstances lead to better academic outcomes. PN implementation funds will be used to increase family case management and financial education as fully discussed in Section B1. Similarly, mentoring leads to improved attendance and higher expectations for academic achievement, and greater self-

efficacy about the possibilities of success. PN implementation funds will allow greater access for students from grades K-12 to a mentor.

### **C.3. Partnerships**

Promise Heights began because a group of community based organizations, faith based institutions, the UMB SSW, residents, students, and principals came together to try to alleviate the problem of low academic achievement, poor child health outcomes, and the lack of family well-being in U/DH. Through a series of meetings, work groups, focus groups, surveys, key informant interviews and review of numerous data points, it was decided that one organization could not solve all the problems alone, and only a coordinated commitment to a comprehensive, incremental, long term program could begin to make the change needed in the community. The need for much stronger interagency, public/private coordination, at the state and local levels, was consistently identified as a major problem. Combatting these issues must involve a mobilization of an extraordinarily broad and diverse range of resources: families, religious groups, media, community groups, business community, public and private agencies in education, health, mental health, social services and employment and training. Beyond increasing public awareness and mobilizing public and private resources, there obviously must be sustained and coordinated planning, program and policy development, service delivery and monitoring. To that end, our approach is founded upon both formal and informal partnerships cemented in a shared vision and commitment to the solutions set forth in the Project Design.

As discussed in the Introduction, UMB, community partners, and residents came together to address neighborhood needs. We have been working together since 2009 and through this new application, we are launching the scaling up of our implementation work, by increasing staff, formalizing partnerships and governance, creating our own data system, and expanding the

number of students and families served by the Promise Heights Promise Neighborhood. This structure and will consist of three Boards made up of residents, service providers, students, and teachers/principals that deliver services to families in U/DH. These Boards (Accountability, Sustainability, and Community) have agreed to work together to increase school readiness, attendance rates, high school graduation rates, and rates of completion of postsecondary degrees or vocational certificates. Using a dual generation approach to work with parents, the partners commit to increase educational attainment, parenting skills, and workforce readiness.

The **Accountability Board** is a high-level problem-solving board made up of city and state leaders who can assist PH leadership in removing barriers to providing effective and efficient services to U/DH residents. These will be issues around policy, rules, and regulations; for example, community members are struggling with the new service provider hired by the State of Maryland to process child care vouchers and, consequently, fewer families are enrolling their children in formal early learning. This is an issue with which the Accountability Board could assist during its **bi-annual meetings**. The **Sustainability Board** membership is comprised of leaders of partner organizations, foundations, and UMB who will advise PH leadership on funding opportunities and strategic planning as it relates to the operational process. This board is chaired by UMB SSW Dean Richard P. Barth and will meet **quarterly**. The **Community Board** membership is comprised of residents, schools, and direct service provider partners. This is where the partnerships will be assessed and held accountable. In using a community-building model, residents of U/DH together with PH leadership (Executive Director, Assistant Director, and Directors of Programs) will use Results Based Accountability strategies (as discussed in D2) to evaluate progress towards indicators and results and partner performance. Residents and PH

leadership will decide if partners need to revise their strategies or be replaced. This board is co-chaired by the PH Executive Director and Rev. Alvin C. Hathaway and will meet **monthly**.

The executed **Memorandum of Understanding** (MOU) (Appendix C) contains a shared vision, theory of change, and theory of action. It states that partners will agree to work together to coordinate services, strategies, goals, data, and accountability to use data and use technology to seamlessly communicate and connect in a way that drives performance. They agree to use the data sharing plan to allow all partners to utilize evidence based services and to link the interventions to services provided to children and families. The monthly review of data during the Community Board meetings will reveal areas that may need mid-course corrections and the partners agreed to work together to regularly exchange information and discuss relevant policy and program issues. The MOU also details the membership of all three Boards.

The **Memorandum of Understanding** and the **Letters of Commitment** (Appendix C) from partners detail the pipeline of services within the framework addressed in the Project Design section. Across initiatives, PH and partners have developed an aligned vision for school transformation and aligned theories of change/action which formed the foundation of the solutions described herein. There is an understanding among all PHPN partners of steps necessary to carry out the action plan as documented in the MOU. Partners provided financial support, programmatic support, as documented in the narrative, the MOU, and the Letters of Commitment.

Partners will be held accountable for performance in accordance with the MOU through execution of partner subcontract agreements which include number of participants served, timelines for getting services started, tracking of lapsed time until enrollment, invoicing based on careful records, and supporting data entry and analysis. Partners will also participate in various

committees and the participation level will be closely monitored. If deliverables are not met, partners will meet with the Executive Director and other members of the PH Leadership Team to troubleshoot, and to ensure improvements. The partner will submit a program improvement plan and if the deliverables are not met, the contract will be terminated. PH already works within formalized partnerships with the organizations described below and will continue to do so under this implementation grant. (We have noted, below, if a listed community organization is also a partner in our Byrne Criminal Justice Initiative grant.)

**University of Maryland, Baltimore's** organizational systems demonstrate effective control over and accountability for federal funds and program income, compare outlays with budget amounts, and provide accounting records supported by source documentation. UMB's organizational controls ensure timely and accurate submission of Federal Financial Reports to the OASH Office of Grants Management and Payment Management Services as well as timely and appropriate withdrawal of cash from the Payment Management System. (BCJI grantee)

The **University of Maryland School of Social Work's** grant administration is handled by the Sponsored Projects Office (SPO) Director and staff who have many years of pre- and post-award administrative and financial experience. In addition, eight accountants and accounting specialists provide financial expertise and assistance, assuring that structures are in place to pay employees correctly, to monitor time and effort reporting, to interact with the PI and staff to review expenditures of grant funds, to monitor and approve travel funding, and to provide grant reports to funders. The UMB SSW SPO works closely with UMB's Office of Research & Development, Sponsored Programs Administration, Sponsored Projects Accounting and Compliance, Human Resources Office, and Procurement Office to maintain compliance with human resources, financial, and administrative policies and procedures. (BCJI partner)

The **Office of the Mayor for the City of Baltimore** will work with PH to structure city services to build ongoing and sustained support; coordinate city agencies to support PHPN goals; assist with efforts to secure funds and organizations commitments to support neighborhood revitalizations efforts; participate in efforts to create effective tracking, data sharing, and evaluation system; and lead efforts to policy reform.

**Maryland State Department of Education** (MSDE) will bring appropriate resources to coordinate state educational programs to support PHPN goals and ensure that the availability of federal funding does not disadvantage PH when it comes to competition for MSDE community school funding.

**Baltimore City Public Schools** will assign an Instructional Lead Executive Director to work with the PHPN five schools to provide professional development; provide access to individual and aggregate student level data; all 5 principals will participate in PHPN committees and workgroups; and provide financial support for Community Schools, Mental Health Consultants. (BCJI partner)

**Baltimore City Health Department** will provide financial resources for BHB and ReCAST and provide staff to middle and high schools for dating violence prevention programs. (BCJI partner)

**Family League of Baltimore** will provide financial support for BHB, Community Schools, Extended School Time; and After-School Meals programs.

**United Way of Central Maryland** will provide volunteers at each of the five schools; funding for the Family Stability program; and, we expect from past experience, assistance from its emergency fund should we encounter additional civic unrest.

**Druid Heights Community Development Corporation** will offer programs such as adult basic education, GED classes and computer classes, home ownership, after-school programming, and summer camp. Staff will participate on the Community Board and the Youth Violence Prevention Leadership Committee. (BCJI partner)

**Community Churches for Community Development** will continue to provide Head Start services; crisis support for families for food, shelter, utilities payment; youth development programs such as day and residential camps, mentoring, chess club, technology club and tutoring; and free space for PHPN programs.

**AARP Experience Corps** will continue to work in FLT and will expand services into all PH elementary schools to provide tutoring, small group instruction, and mentoring.

**Baltimore Cash Campaign** will continue to provide free income tax preparation services; financial education workshops on budgeting, predatory lending; and information on savings bonds and mainstream banking opportunities.

**Building Educated Leaders for Life (BELL)** will continue to provide after school programming at five schools, but will scale up the number of slots.

**Seeds of Promise** will expand the male mentoring program to Booker T. Washington Middle School and continue to work in Renaissance Academy. (BCJI partner)

**Cecil County Drug Free Coalition Collaborative** promotes the existence of quality substance abuse prevention initiatives for Cecil County children, youth, and families to establish and strengthen community collaboration in support of local efforts to prevent youth substance use. CCDFCC will provide guidance in the core areas for a successful Drug-Free Communities coalition, including community engagement, sector membership and capacity-building, development of logic models, and the implementation of evidenced-based opioid abuse

prevention strategies promoted by the Center of Substance Abuse Prevention (CSAP) of SAMHSA (see Appendix H for MOU).

Promise Heights will continue to work with **elected leaders** to educate them about place based programs and to provide data on outcomes. We have working relationships with Senator Chris Van Hollen, Senator Ben Cardin, Congressmen Elijah Cummings, John Sarbanes, Dutch Ruppersberger, Mayor Catherine E. Pugh, and City Councilmen Eric Costello and Leon Pinkett.

## **D. QUALITY OF THE MANAGEMENT PLAN (20 POINTS)**

### **D.1. Timeliness of Project Tasks and Fiscal Responsibility**

UMB will serve as the lead applicant and backbone organization for the PHPN collaborative partnership. Since 2009, Promise Heights has worked with community based organizations, local schools, and faith-based institutions to build a pipeline of solutions for the students and families in U/DH. In our planning and initial implementation phases, we have been able to pilot programs, strategies, and services with a relatively small staff. We have demonstrated the ability to produce significant outcomes by conducting aggressive outreach and strategic partnership development.

### **Governance Structure**

As we move into deeper implementation and secure greater funding to bring in more partners and expand programming, this PN proposal will benefit from the more formal governance structure that PH is in the process of establishing. As discussed above, this structure will consist of three Boards made up of residents, service providers, students, and teachers/principals that deliver services to families in U/DH. These Boards (Accountability, Sustainability, and Community) have agreed to work together to increase school readiness, attendance rates, high school graduation rates, and rates of completion of postsecondary degrees

or vocational certificates. Using a dual generation approach to work with parents, the partners commit to increase educational attainment, parenting skills, and workforce readiness.

The **Community Board** membership is comprised of residents, schools, and direct service provider partners. This is where the partnerships will be assessed and held accountable. In using a community-building model, residents of U/DH together with PH leadership (Executive Director, Assistant Director, and Directors of Programs) will use Results Based Accountability strategies (as discussed in D2) to evaluate progress towards indicators and results and partner performance. Residents and PH leadership will decide if partners need to revise their strategies or be replaced. This board is co-chaired by the PH Executive Director and Rev. Alvin C. Hathaway and will meet **monthly**. The **Sustainability Board** membership is comprised of leaders of partner organizations, foundations, and UMB who will advise PH leadership on funding opportunities and strategic planning as it relates to the operational process. This board will be chaired by UMB SSW Dean Richard P. Barth and will meet **quarterly**. The **Accountability Board** is a high-level problem-solving board made up of city and state leaders who can assist PH leadership in removing barriers to providing effective and efficient services to U/DH residents. These will be issues around policy, rules, and regulations; for example, community members are struggling with the new service provider hired by the State of Maryland to process child care vouchers and, consequently, fewer families are enrolling their children in formal early learning. This is an issue with which the Accountability Board could assist during its **bi-annual meetings**. (A management plan timeline with milestones listed by quarter for each of the proposed five years can be found in Appendix J.)

## **Organizational Structure**

PH has a defined organizational and staffing structure (Exhibit 14, page 93). The PH ED and Assistant Director exercise oversight of program services, ensure core program objectives are achieved, and are accountable for all awarded PN funds. Direct services are administered by the Assistant Director who oversees all PN staff. The Director and Assistant Director meet weekly to review goals, objectives, and progress, using data provided by the data management team.

**The PH Executive Director, Bronwyn Mayden, MSW** was born and raised in West Baltimore and is the daughter of a BCPS teacher. She has an extensive history in program planning, policy development, community organizing, health promotion, and marketing in the public and non-profit arenas. She has experience in establishing programs in the areas of adolescent health and maternal and child health for the state of Maryland and City of Baltimore. Among other roles, Ms. Mayden has served as Executive Director of Campaign for our Children, Executive Director of the Governor's Council on Adolescent Pregnancy, Special Assistant for Medicaid of Maryland Department of Health and Mental Hygiene, and Deputy Director, Office of Human Development, Office of the Mayor, Baltimore.

**Assistant Director Rachel K. Donegan, JD**, worked as an attorney before beginning with PH in 2009, as they were creating their first intervention, B'more for Healthy Babies. Ms. Donegan has a particular set of skills, honed through her experience with legal matters, grant writing, and community work, which continue to be essential to the growth of PH infrastructure. Since 2009, she has helped to secure funding totaling nearly \$6M from the U.S. Department of Education, U.S. Department of Health and Human Services, other state and local governments,

and private entities. She oversees the community schools work, including hiring, program development, partnership development, and Principal liaison.

**Richard P. Barth, Ph.D., MSW, Dean and Professor at the UMB SSW**, is an active program developer and scholar in the areas of children's services and evidence-based practice. He is on the Programs and Outcomes Committee of UWCM and the Board of Directors of FLT. Dr. Barth has also written extensively about school social work, evidence-based practice, child abuse prevention, parent training, and a range of evaluation methodologies. He is the author of *Reducing the Risk* and *Safer Choices*, two curricula designed to reduce unprotected sexual intercourse that have been selected by the CDC as effective programs. He has received many academic honors and serves as the past-President of the American Academy of Social Work & Social Welfare. He is the Chief Research Advisor for PH and chairs the PH Sustainability Board. He has helped bring more than \$500,000 in gifts from the UMB SSW Board to Promise Heights.

**Kyla Liggett-Creel, PhD, Director of Research and Evaluation** is an Assistant Professor at the School of Social Work and the Director of Research and Evaluation for Promise Heights. Dr. Liggett-Creel has over 15 years of experience in providing trauma informed services to families in Baltimore City. Her area of expertise is research in trauma, child development, parenting, and place-based initiatives.

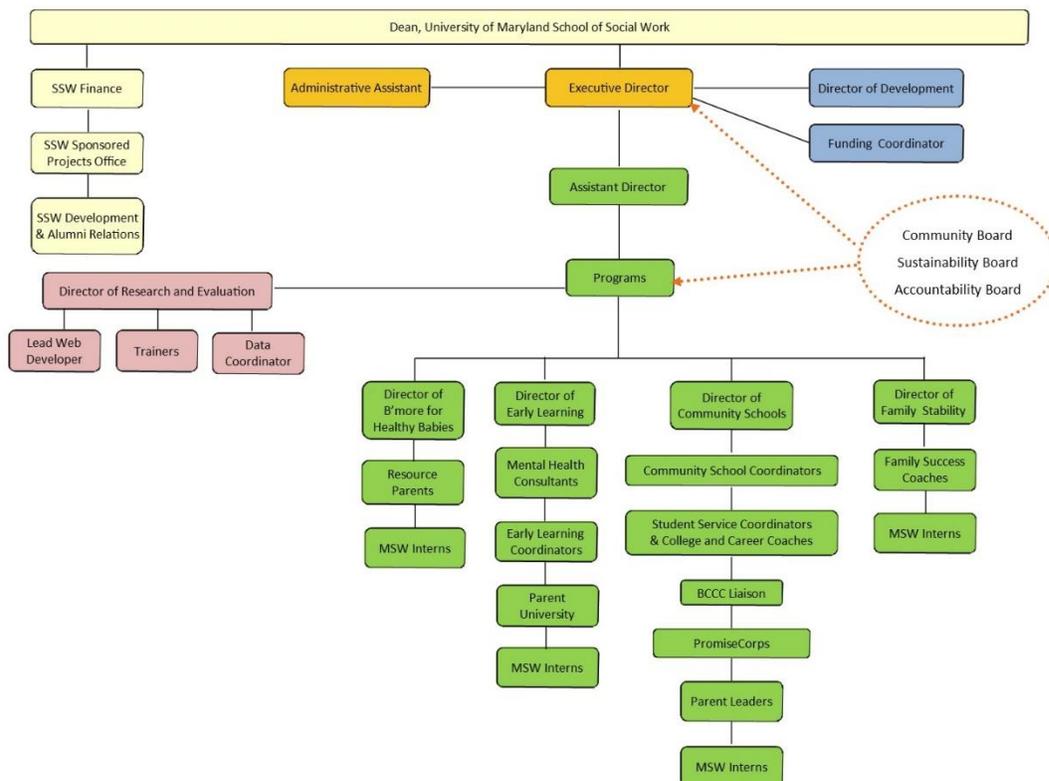
**Nick Peters, BS, CITS Lead Web Developer**, has been writing award-winning web applications for 16 years for the University of Maryland Baltimore and NASA Goddard Space Flight Center. His current focus is on case management and research-based Social Work applications for community organizations. He has a BS in Information Technology with a Computer Science and Database Management focus. Nick believes that social work clients and

organizations are under-served by technological resources, and strives to close that gap with his efforts.

**Henriette Taylor, MSW, LGSW, Director of Community Schools** has more than 15 years of experience and expertise in adolescent health, qualitative research, knowledge transfer, and program management. As the Director of Community Schools she builds community partnerships to enhance student academic achievement and improve family well-being.

**Reverend Alvin C. Hathaway, Sr., D.Min, PhD, Senior Pastor of Union Baptist Church, and Chairperson, Community Churches for Community Change**, is a community organizer and leading Baltimore activist. He is author of several publications on children’s mental health, school health services, and adolescent resilience. He is also the Chairperson of the Harvey Johnson Head Start Center located next to Union Baptist Church in U/DH. Reverend Hathaway serves as the Co-Chair of the PH Community Board with Ms. Mayden.

**Exhibit 14. PH Organizational Chart (also in Appendix B)**



## **Results Based Accountability**

Achievement of project goals will depend on an iterative and timely system of management. Implementation of an effective management plan will be enhanced by further development of our existing management information approach. PH will continue to manage its progress under the Results Based Accountability (RBA) process. RBA has been useful because it addresses population and performance results through using a common language, determining goals, establishing a shared understanding of the methods to achieve the identified goals, and agreeing on a shared responsibility in meeting those goals. PH will use RBA to assess progress in meeting agreed upon goals and to make modifications as needed. The PROMIS database management system will be used to enter, manage, track, and report data used to complete the RBA. We will use the Promise Neighborhood results and indicators, plus one indicator added by PH leadership (the number and percentage of children involved with juvenile justice). During our planning period we identified the key solutions that we have begun to implement and have identified for future implementation. Performance measures have been identified for each indicator.

PH staff and partners will continue with the RBA process by reporting data on a quarterly basis that answers four primary questions: (1) What was the quantity of services provided; (2) What was the quality of services provided; (3) What effort was used to serve the families; and (4) What was the probable effect of the services offered (Friedman, 2009). All data collected by PH staff and partners will be entered into PROMIS. Data entered into PROMIS will then be used to create a scorecard which is an essential element of the result-based accountability process. PH has been working with our Lead Web Developer to link PROMIS with the RBA scorecard. The purpose of the quarterly reports will be two-fold; they will help to improve services offered to

families and, also, help tell the “story” of how the programs are serving families to PH management groups (the Principals’ Council, the PH Accountability Board, the Sustainability Board, and the Community Board) and, finally, to governmental and private funders and stakeholders.

Once the data are collected, PH staff and partners will be given the results of data analysis and interpretation. Results of data collected will be discussed by relevant PH management groups (identified above) as well as comparing the results to our previous performance, the performance of other programs, and the goals set for the programs. Results of data analysis, as well as notes from the discussion by PH staff and partners, will then be shared with the Community Board. Meetings will be held on a quarterly basis and the following agenda items will be included: (1) new information about what interventions/programs are being implemented (discussions based on our implementation framework); (2) any new results about what solutions are showing to be their outcomes; (3) any stories behind the changes in data; (4) needed changes to the data collection strategy; (5) any implications from the data for other management procedures or budget.

Discussions and decisions made at the Community Board will then be shared with PH staff and partners to inform future implementation and necessary adaptations. If PH programs or partners are not meeting established and agreed upon goals, then management and budgetary changes may be made to improve performance and, failing that, to pursue other partners. This is another way to keep programs and partners accountable to the outcomes desired by residents.

## **D.2. Collecting, Analyzing, and Using Data**

PH’s primary goal for data collection is to continue to develop evidence to guide student learning, development, empowerment, and decision making—not just for PH students but for

every student in the United States who faces educational barriers and challenges. Stated differently, we will use state-of-the-art data collection, evaluation, and dissemination techniques and 21<sup>st</sup> century information technology to turn educational possibilities into reality and to communicate lessons learned for the advancement of tomorrow's learners and leaders. Our goal is ambitious yet achievable through a transparent, honest, innovative and engaging process for data collection and evaluation. This process will: (1) include individual-level data gathered from a range of sources and analyzed using advanced and quantitative techniques (e.g. multivariate analysis) and triangulation of data and analytic approaches; (2) be communicated to PH participants and stakeholders in a timely manner; and (3) use a results-based accountability process to re-integrate findings into improvements in programming as well as decision-making processes. PH staff and partners will contribute to data generation and interpretation to translate those bits and bytes into evidence-based performance results.

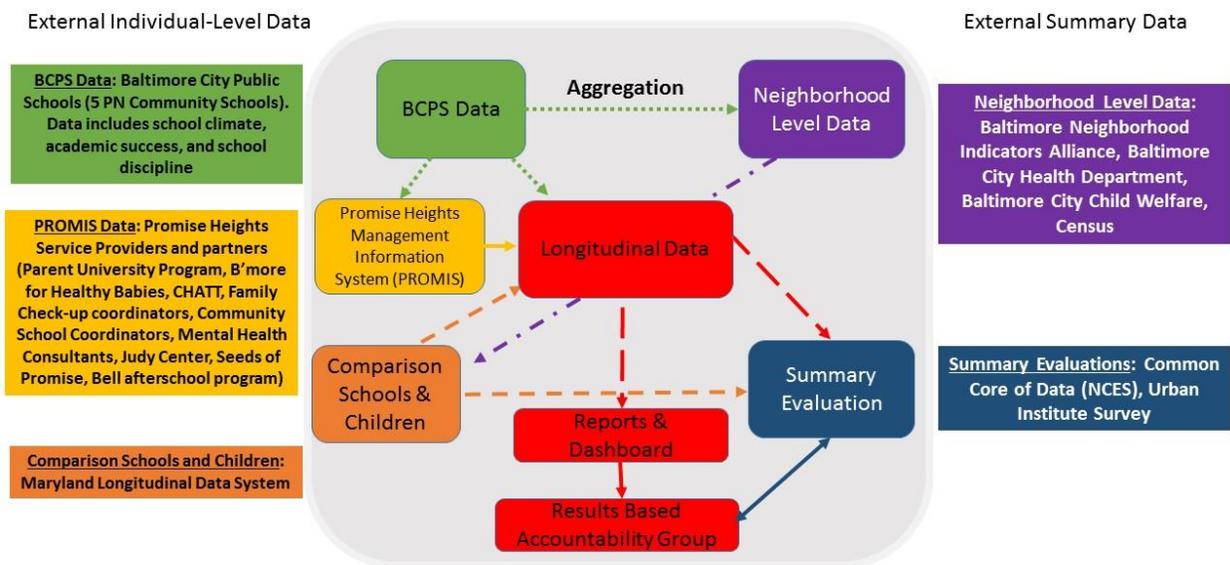
### **Data Collection and Use**

The success of this PHPN proposal will build on data gathered during our planning phase and ongoing. We will build onto our current PROMIS longitudinal data system by integrating information from our survey data, existing demographic data collections (including BNIA, the MLDS, and the BCPS data sharing described in our MOU with BCPS. We also have the possibility of adding data from Maryland LINKS (which includes TANF, Child-Support, SNAP, Child Welfare, and Department of Juvenile Services records) and the Baltimore University Data Alliance (BUDA: a partnership with Morgan State, University of Baltimore, Johns Hopkins University, and the University of Maryland School of Social Work). These data elements—other than LINKS and BUDA, because these are not certain—are each presented and strategies for

data integration for progress measurement and course correction are discussed. The PN Data System and general plan for data integration is depicted in Exhibit 15.

*Exhibit 15. Promise Heights Promise Neighborhood Proposal Data System*

### Promise Neighborhood Data System



**PROMIS.** PH used ETO® by Social Solutions for database management from 2012-2016 and is now transitioning to PROMIS. In December 2016, **PH administrative staff decided that to serve our families in a comprehensive and cohesive manner we needed a management information system that was developed specifically for PH.** UMB has developed databases for tracking and outcomes for more than 10 years. All of the data stored in ETO from 2012-2016 was retrieved from ETO and saved in the UMB online storage system.

UMB’s Center for Information Technology Services (CITS) department provides IT maintenance, support, and oversight. This includes IT security, database services, data storage web applications, project management, and training. CITS supports the entire UMB campus.

Beginning in January 2017, the Assistant Director and the Director of Research and Evaluation began discussions with Nicholas Peters (CITS, Lead Web Developer) to develop

what would become the Promise Heights Management Information System (PROMIS). Meetings have taken place on a weekly basis and focused on (1) uploading data; (2) tracking client information throughout the pipeline of services; (3) work flow; and (4) tracking outcomes.

Currently, in addition to our historical data from ETO, current individual student data retrieved from Infinite Campus (Baltimore City Public Schools database) has been uploaded to PROMIS. Beta testing for data entry will begin in October 2017. PROMIS will be fully functional by April 2018. During beta testing, PH staff will be entering data into Qualtrics (survey software used at UMB to collect data on services offered and analyze outcomes). This will allow for electronic capture and storage of current data. Data will be stored through Qualtrics until PROMIS is ready to be used at which time all data on Qualtrics will be uploaded into PROMIS so there will be no lapse in data management. (See Appendix I for screenshots of PROMIS.)

The next phase of development will focus on creating reports based on the Results Based Accountability model followed by the uploading and embedding partner data into the PROMIS database. By September 2018 the PROMIS database will be complete—including real-time data from PH staff, BCPS, and partners—with the ability to track children and families, measure outcomes, run reports, track GPRAs, and evaluate partners.

**PROMIS** will allow staff to monitor progress of families as a whole as well as parents and children individually. Reports will allow for data informed program development and implementation. PROMIS will allow staff, who are all HIPAA certified, to follow the parent and children's progress longitudinally. Data from partner programs will be uploaded into PROMIS so that the client's data will be up-to-date and holistic. PROMIS will allow staff to transfer clients to the next phase along the pipeline of services in a seamless and efficient manner. All PH staff

are being trained on PROMIS, which will be complete by December 2017. PH staff will continue to work closely with Nick Peters (CITS, Lead Web Developer) to modify the PROMIS system as we add measures and intervention elements, collect data, manage our collaborative services, and document outcomes. CITS is fully staffed with and able to step in with additional assistance should Mr. Peters be unavailable for any reason, thus ensuring steady progress on development, testing, and problem solving of PROMIS.

**BCPS Data Share.** We know that previous PN implementation sites have struggled with effective data sharing between backbone organizations and local school districts. PH leadership worked with BCPS over three years with two different District CEOs to have a data sharing agreement signed. In 2016, BCPS agreed to share individual-level data collected in the five PH schools (see Data Sharing Agreement in Appendix C). These data include four critical aspects of school processes and performance that can be compared over time: school climate, academic performance, school discipline (suspensions and expulsions), and attendance.

The **school climate survey** data is gathered from students, staff, and parents and is administered over an 8-week period. Community School Coordinators, the PH Community Board, and the Principals' Council will all use these indicators to help guide discussions about school climate and service improvement using the RBA process (see discussion below). BCPS has agreed to provide individual child-level scores for **academic performance** (GPA and PARCC scores) and, for older students, courses taken, to PH staff. The school data will also be used to show whether students are proficient in core academic subjects, successfully transition from middle to high school, and graduate from high school. By integrating academic performance data with PROMIS we will also be able to understand how offered programming affects academic improvement and how school-wide changes are related to academic progress.

BCPS has records of all **disciplinary actions** (school suspensions and expulsions) recorded at the student level as well as the school-level and have provided the PH research team with access to those through the BCPS data share (although we will not have access to those for comparison schools as they are not in the MLDS). Student **Attendance records** will be critical data to alert school-based PH staff as to issues which may be arising at home or in the community and which may prevent students from being present. Additionally, we will be able to see how offered programming may affect attendance.

**MLDSC.** The Maryland Longitudinal Data System Center is an independent unit of State government responsible for building and maintaining a statewide longitudinal data system that includes linked K-12, post-secondary, and workforce data. Housed at UMB SSW, the MLDSC is a collaborative effort of MSDE, the Maryland Higher Education Commission (MHEC), the Department of Labor, Licensing, and Regulation (DLLR), and the UMB SSW. The MLDSC has agreed to assist us in the evaluation of PH by providing data from the PH schools and comparison schools. (Our BCPS data and the MLDS data are linkable by student ID.) The MLDS is an unusually rich resource which includes the BCPS academic performance data, described above (without the school climate or discipline data) integrated with data from the MHEC (participation in any form of higher education in Maryland), the DLLR (which has information on licenses achieved and income [from the UI Wage Data]), and the United States Census. (The MLDS also includes basic information from the Maryland Motor Vehicle Administration.) The MLDS data begins in 2008, providing significant historical information that can be used to inform us about our PH schools and how they compare to other Baltimore City schools (see discussion under evaluation in section B2). The MLDSC has already developed extensive procedures for matching different identifiers (e.g. student ID, social security numbers,

and DLLR claims) into 220,000+ pairs. MLDSC staff have also worked to resolve and cleanse K-12 identities in the Master Data Management database. Nearly 90% of all high school graduates can now be linked to college and workforce data.

**MMSR and R4K Data.** Maryland is a national leader in collecting data on school readiness and has collected data using the Maryland Model for School Readiness (MMSR) for nearly a decade. This was replaced in 2015-16 by Ready for Kindergarten (R4K) which includes the KRA for all children 3-5 years of age. We have access to MMSR and KRA data for children in PH through the BCPS agreement. In PH we also collect Pre-K data on social emotional functioning and readiness for kindergarten using the Devereux Early Childhood Assessment, twice a year.

**Demographic Data for PH.** We anticipate the possibility that meaningful demographic changes may occur in PH during the five years. These may include the number and proportion of vacant properties, the violent crime rate, and the median income of the population. We will work with the Baltimore Neighborhood Indicator's Alliance to assist with the tracking of these and many other possible indicators of demographic change (typically based on Census tracts). We will also use zip code and census tract level data from our human service data bases (e.g., LINKS) to capture information about the population (depending on whether or not we have reliable street addresses). These methods will allow us to better understand the changing service, opportunity, and risk contexts for Promise Heights. This information will also help us to track our outcome that children live in stable communities.

**Longitudinal Analyses.** We will examine progress made by our PH children across the five years. The data will include restricted-use, student-level data to compare the outcomes of students in the treated schools to those enrolled in similar non-treated schools in Baltimore,

matched at the individual level using the rich set of student characteristics available in the administrative data (including race/ethnicity, gender, special education, free and reduced price lunch eligibility, and English language learners). We will base our work on the MLDS, augmented by additional data available from i-Ready or other sources, as they evolve.

In the first year, we will estimate models that control for students' test scores from the prior year (before the intervention began) to match students on prior academic ability as well as demographic characteristics. For students enrolled in grades 3 through 8, an assessment of academic outcomes, as measured on Maryland's state test, would occur each year. This annual evaluation would allow researchers to examine academic growth over time for both the treatment and matched control groups of students. For high school students, the comparison of academic outcomes would be assessed using the 10<sup>th</sup> grade test in English and Algebra I. Using the longitudinal database, researchers could also compare the likelihood of high school graduation amongst the treatment and matched control groups, and subsequent enrollment in higher education.

In addition to annual reports on academic outcomes, researchers may want to obtain data on non-academic outcomes such as bullying, risk-taking behavior, and other measures. School climate data is available as part of the BCPS data share. Using the MLDS, we will be able to obtain student-level data from control students in non-PH schools and use multi-level propensity score analysis (Root & Humphrey, 2014).

Various types of propensity score matching are possible (Barth, Guo, & McRae, 2008); we favor nearest neighbor matching for this analysis, with multiple neighbors selected if the matches are tight, in order to avoid significant loss of sample and power over time. Using this methodology, we will compare long-term student outcomes, including high school graduation

and enrollment in post-secondary education, for the PH and matched control groups. The Urban Institute and MLDS teams will work together to ensure that the data analysis are as rigorous, accurate, and timely as possible.

**Results Based Accountability.** As described in the management section (D1), Promise Heights will use RBA to manage project progress and goals. Case management data can ensure performance accountability across the pipeline, making population-level results much more likely to be achieved. By actively using case management data collected in PROMIS, we can verify whether sufficient numbers of individuals are receiving the specific interventions. Population-level change will only be achieved if we practice performance accountability and consistently reach significant numbers of our highest-need students and families.

**National Evaluator.** We will also share data that we collect in concert with the national evaluators. The UMB SSW has been involved in other multi-site national evaluations in the past (e.g., for a four year multi-site evaluation of *Family Connections*) and we are prepared to do so again. The Urban Institute, as our external evaluation partner, is similarly committed to contributing to an informative national evaluation. Any such data sharing for the national evaluation, along with our own local evaluation, will abide by all privacy laws and requirements and will be overseen by the UMB Institutional Review Board as well as the MLDS Administration and MLDS Governing Board.

**Challenges and Strategies for Addressing Community Participation.** Undergirding the entire process of collaborations between the PH community, UMB SSW, and our partners is a need to engage a broad array of stakeholders across the continuum of people, indicators, and solutions. This requires building and maintaining trust, which is an iterative process, open and transparent communication, and “being there” for each other. This is accomplished through

effective and strategic stakeholder engagement. One challenge is to assure that we fulfill the vision of authentic stakeholder engagement throughout the entire process. UMB researchers are experienced with addressing informational and psychosocial needs of youth and the PH community and to motivate and empower PH students and residents to actively participate. This process helps to assure cultural sensitivity and competence of the researchers and buy-in and accountability for all involved. PH residents will receive monthly newsletters, text message updates, tweets, and snapchat messages, as appropriate, to actively engage them in PH. This process was begun during our Planning Grant as we developed a common language for our conversations about evaluation (see Exhibit 16) and developed a newsletter format. We will briefly revisit these as we move forward into the next phase of our work.

***Exhibit 16: Results Based Accountability Common Language of Promise Heights***

Idea	Common Language
A system or process for holding people in a geographic area responsible for the well-being of the total population or a defined subpopulation	Promise Heights Review
A system or process for holding managers and workers responsible for the performance of their programs, agencies and service systems.	Agency Review
A condition of well-being for children, adults, families and communities	Success
A measure that helps quantify the achievement of a population result	Marker
A measure of how well a program, agency or service system is working	Performance measure
A measure of the quantity of effort	How much did they do?
A measure of the quality of effort	How hard are they trying? Are we giving help that feels like help?
A measure of quantity and quality of effect on client's lives	Help felt by community member's
Doing better than the forecast part of the baseline.	Improving
A person who directly benefits from service delivery	Community member

Idea	Common Language
A person (or organization) with a significant interest in the performance of a program, agency or service system or population quality of life effort.	Stakeholder
A person with a role to play in achieving desired ends	Partner
An analysis of cause and conditions that helps explain why a baseline looks the way it does.	Our Story
Coherent set of actions that has a reasoned chance of producing a desired effect	Strategy
A desired future level of achievement for a population indicator or performance measure	Goals for PH
A study or analysis of how well a program is working or has worked	Program evaluation (for one program) PH evaluation for all of Promise Heights

**E. ADEQUACY OF RESOURCES (15 POINTS)**

**E.1. Costs are Reasonable**

A hallmark of the PN framework is leveraging resources through effective partnership. PH leadership has continuously used this concept throughout the lifespan of PH programming— layering partnerships and programs such that services are not duplicated, families are not inefficiently served, and programs share participants and space. A few examples are provided here, with full tables for each of the four solution areas in Appendix F. We believe our costs are reasonable and our experience and research leads us to expect a hefty return on investment (ROI) relative to the cost.

A parent’s behavior, environment, and social circumstances (e.g. education, employment, and social support) affect her health and the health of her children (Shonkoff, et al., 2012). By improving birth outcomes and improving birth spacing, such untoward problems as child maltreatment and poor academic performance can be reduced (Kitzman, et al., 2000). The economic burden of child maltreatment in the United States has been estimated at \$210,012 for

non-fatal maltreatment (Fang, Brown, Florence, & Mercy, 2012). The average lifetime cost per fatal child maltreatment death is \$1,272,900; the cost of the suffering involved cannot be estimated. Medicaid expenditures are \$2,600 a month higher per year compared to children not maltreated (Florence, Brown, Fang, and Thompson, 2013).

According to the Center on the Developing Child at Harvard University (2010), when developing biological systems are strengthened by positive early experiences, children are more likely grow up to be healthy adults. Protection from toxic social and physical stress also provides a foundation for the construction of sturdy brain architecture and the achievement of a broad range of skills and learning capacities. We include **B'more for Healthy Babies and Parent University** in our continuum to strengthen the capacities of caregivers and communities to promote the health (psychological, emotional, social, and cognitive) of young children. Besides increasing the number of pregnant women who receive prenatal care, BHB has decreased the number of low birth infants, and decreased the number of infant deaths. The annual investment of \$250,000 appears to be yielding decreases in Neonatal Intensive Unit Costs (41% decreased in zip code 21217 in FY2013) (Harburger et al., 2014).

With new evidence emerging that the impact on the brain of social-emotional skills and related parenting practices begins as early as five weeks of age (Hurt & Betancourt, 2016), the emphasis toward earlier protective programs is clear. Early intervention begins by reducing the stressful external environment but also includes decreasing harsh parenting. The focus of Parent University on increasing responsive parenting offers an alternative. We expect that the implications of participating in the continuum of early childhood services including BHB, Parent University, Judy Centers, and Family Check Up would be more than the benefits shown by early education (Head Start) alone. We agree with the National Academy of Science's conclusion that

the rates of investment in human capital are a function of age when the investment was initiated (Knudson, et al., 2006).

**Community schools** transform schools into hubs of their communities by (a) aligning out of school time for students with in-class learning to expand upon classroom teaching; (b) bringing together the school, families, and community to work in tandem; and (c) coordinating academic and student resources to meet students' academic, emotional, and/or physical needs. Research shows that community schools can make a positive difference in student achievement, behavior, and attendance, family involvement, and community engagement with public schools (Children's Aid Society, 2011). The Community School model is a cost-sharing model as it relies heavily on businesses, nonprofits, and universities to underwrite service costs and provides financial match through multiple resource streams (e.g., free health services). Community schools typically cost between \$150,000 and \$200,000 per school for daily programming. The average cost per pupil is \$1,000 for standard programming or \$1,500 if medical or mental health needs are high in the school/community (The Federation for Community Schools, n.d.).

The University of Maryland Medical Center's *Breathmobile* (a pediatric asthma and allergy clinic on wheels that travels to three PH schools) is responsible for significant health improvements in participating children, including fewer lost school days, an increased use of preventative asthma medications, and fewer emergency room visits. The *Breathmobile* costs \$25,000 per school site but that cost is covered by the University of Maryland Medical Center.

Under this PN proposal, 990 school age youth will participate in **Out of School Time (OST)** programs that seek to ensure their safety, develop and nurture their talents, improve their academic behaviors and help them form bonds with adults and youth who are positive role models. The Wallace Foundation commissioned The Finance Project and Public/Private

Ventures to conduct a groundbreaking study of the full costs of quality OST programs. The report, one of the largest and most rigorous OST studies to date, is based on data from 111 programs distributed across the United States. Using their OST Cost Calculator, our costs are within their costs per slot range (between \$778 and \$2,865 per slot) for a program in Baltimore.

Another central strategy of our Promise Heights approach is **mentoring**—currently at RA and to be expanded to BTW and to the three elementary schools in U/DH. Evidence-based mentoring is a more recent addition to the education and career development landscape. The business case for mentoring is justified, in a seminal report by Ernst and Young LLP and Mentor (2015) as a means to address the implications of “one study (that) estimates that the human potential lost as a result of our educational achievement gap results in the economic equivalent of a permanent national recession” (Auguste, Hancock, & Laboissiere, 2009). We are confident that the approach we are taking to providing a continuum of solutions in West Baltimore can help avoid the personally and economically distressing costs of lost potential.

## **E.2. Sustainability**

Our success to date in sustaining and expanding the work of PH speaks to our ability to sustain this proposal after funding ends. Data will be used to show the ROI discussed in Section E1. As the backbone organization, we will be responsible for working with the schools and partners to lead the development and sustainability of the strategy. We bring a set of core competencies that enhance and complement those of the schools. In our roles as resource developer, we bring our previous successes and 50 years of institutional connections between our host institution (UMB) and City, State, and Federal partners. Using these tools we can facilitate the acquisition of public and private funding streams for which schools or other partners may not have the capacity or eligibility to apply. One of the main premises of this initiative is that

sustainable, population-wide change can be achieved when a broad group of stakeholders combines and directs resources towards creating a system to address a common goal. In our seven years of work in Promise Heights we have engaged many private and public partners. Each of the partners brings experience with fund development from their program's perspective. This enhances our chances for long-term sustainability. Thus, we have learned, together, about resources in housing, social services, parks and recreation, health, and policing as these strategies have been added and partners have become engaged.

From our first funded program in 2009 through today we have secured nearly **\$10M** to provide programs and services. In FY16 alone, we raised over **\$2.5M**. As discussed in Section E1, these funds have been used to offset the societal costs of premature births, child abuse and neglect from negative parenting practices, involvement with the juvenile justice system, and failure to graduate from high school. We will continue to expand our partnerships and have identified several additional funding sources including: US ED, HHS (SAMHSA and ACF, principally), Weinberg Foundation, Krieger Family Foundation, Wells Fargo, and others. In October 2016, a SAMHSA grant application in which we are partners was funded for **\$5M over five years** to provide trauma-responsive services to youth in U/DH and two other neighborhoods (*Resiliency in Communities after Stress and Trauma* [ReCAST]). The ReCAST partner grant through ED was also awarded to Baltimore, to support BCPS mental health services in 13 schools in the three neighborhoods (*Promoting Student Resilience* [PSR]).

We expect that our evaluation results will show the power of this collective impact strategy. The use of the MLDSC and powerful tools for comparing outcomes for all age groups will help to ensure that we can measure changes with unusual precision. We are working toward an integrated data system (LINKS) in Maryland which will allow us to follow children from

birth to young adulthood. Although not complete we have been successful in matching births to child welfare records, child welfare records to educational records, TANF records to child welfare records, child welfare records to juvenile services records, and juvenile service records to criminal justice records. During the next five years we are optimistic that we will be able to match and link these data by a single UMB SSW generated id number so that we can understand whether service programs we develop in PH can slow the negative trajectories and increase the positive ones. This would permit an economic analysis that would also make the case for sustainability, which we expect to be deserved by our results.

The B'more for Healthy Babies collaborative is working with expert consultants on Medicaid financing to achieve two goals: (1) to have BHB services recognized as reimbursable through Medicaid and (2) to increase the rate for services to those families who are most adversely affected by community and family poverty. Although neither of these is a sure way to improve sustainability, they signal a larger effort to reward interventions that can show evidence of benefit with greater support. One example of this is the proposed *Family's First Act* which would allow for the Title IV-E entitlement program to be used to pay (or at least match state dollars at the Medicaid rate) for in-home preventive services for up to one year. We also see growing national interest in community schools and are hopefully that these will become an essential component of school financing (as Title I is) rather than an annual local appropriation. We have begun discussing the possibility of inclusion in the state education budget with MSDE.

### **E.3. Neighborhood Assets and Programs**

As fully described in Section B1, PH leadership has worked in collaboration with community residents, non-profit organizations, faith-based institutions, governmental agencies, businesses, and philanthropic communities to leverage financial support for PH programs and to

advocate for increased programs and services in U/DH. These efforts have resulted in funding for a variety of programs and services that are part of the current continuum of solutions and are community assets. In addition, PH and partner organizations catalogued the various assets and major investments in U/DH. Major investments include the following.

Upton/Druid Heights is a historic African American community with more than 29 historic sites detailing the rich history of the community as an entertainment district, spiritual center (30 churches), and community social services agencies that became places of empowerment and incubators for social change. These faith based institutions and community based organizations along with the University of Maryland, School of Social Work collaborated to create the Promise Heights Initiative. Resources from federal, state, city and the philanthropic community has helped to provide services and programs to stabilize and improve the community's growth and development.

### **EARLY LEARNING**

**B'more for Healthy Babies** provides outreach, case management and social supports for pregnant women in the community assists pregnant women to access comprehensive prenatal and postpartum care. Over 75 women are served by annually. Funds are from the Maryland Department of Health and Mental Hygiene, Baltimore City Health Department, CareFirst and the Family League of Baltimore City.

There are three **child development programs** in the community including: Union Baptist Head Start, YMCA Head Start, and Little Flowers Child Development Center. These program serve 250 three and four year olds by providing comprehensive early intervention services to low-income children and their families. Head Start enhances children's health, nutritional, social, emotional, and intellectual development; supporting parents' efforts to fulfill their parental roles;

and helping parents to move toward self-sufficiency. Funding is a mix of federal funds from the Department of Health and Human Services, Baltimore City Department of Social Services, and local foundations.

**Parent University, Circle of Security, Infants and Toddlers and Early Childhood Mental Health Consultants** provide parenting education, information on parent child attachment, conducts developmental assessments and provide therapy, and social emotional supports for children, parents, and teachers. Funding sources include: Wright Family Foundation, Krieger Fund, Baltimore City Health Department, Pennsylvania Avenue AME Zion Church, and the US Department of Education.

One **Judy Center** provides children ages 0-5 and their families with early childhood information and parenting education. Funding is from the Maryland State Department of Education, Baltimore City Public Schools and the Baltimore City Community Foundation. Six **Pre-Kindergarten classrooms** are located in the three U/DH elementary schools for children ages 4 years old. These programs are full-day and the instruction is based on Maryland's Common Core Standards with instruction in literacy and numeracy and emphasis on social emotional skills. Funding is provided by Maryland State Department of Education, tuition, Baltimore City Public Schools and PH. **Judy Centers** are designed to eliminate the achievement gap, especially at Title I schools because they are available to the entire population of families with children ages 0-5 (fully described in B1). We have recently received \$150,000 from the University of Maryland MPOWER program for a program to supplement the Judy Centers with a curriculum (CHATT) to further support eliminating the thirty million word gap experienced by many children in urban areas like PH.

**Head Start, Mayor's Office of Human Services** operates two programs serving 243 children in 14 center based classrooms. One program recently celebrated 30 years of services.

### **PRE-K-12 STRATEGIES & SOLUTIONS**

**Extended Day.** There are five public schools (3 elementary, 1 middle and 1 high) in U/DH. Approximately 1,900 students attend. All of the schools have extended day programs, however they cannot serve all the eligible students. The programs provide academic support via tutoring, homework assistance; enrichment activities and dinner. Funding on the extended day programs are from the U.S. Department of Education, the Maryland State Department of Education, Baltimore City Public Schools and the Family League of Baltimore City.

**Tutoring.** Two elementary schools provide tutoring for students through volunteers organized by Brown Memorial Church, Experience Corps, and Literacy Labs. Depending on the school, different program models are used push in classrooms and pull out for individual and small group tutoring. Funding is from the Corporation for National and Community Service, Governor's Office of Volunteerism and Community Service, AARP, Brown Memorial Church, Pratt Library, and local foundations.

**Mentoring.** Renaissance Academy High School's Seeds of Promise and Blooms and Promise mentoring programs that meets the developmental need, helps students develop into their full potential and assists them with academic support, stimulates their emotional and cognitive development and model critical life skills. Funding is from Baltimore City Public Schools, Baltimore City Health Department, Maryland State Department of Education, Foundations, and Promise Heights. Recent gifts totaling more than \$1.5M from the Baltimore Ravens, Under Armour Foundation, Annie E Casey Foundation, and XXX have allowed the

remodeling of RA and extended support for mentoring and community school coordination at RA.

**Social Emotional Support and Counseling.** Following the 2015 unrest, several city agencies and non-profit organizations received funding to provide additional social/emotional services in West Baltimore schools and in the community. All five of the U/DH schools community received an additional half-or full-time Social Worker to assist students and families who have experienced trauma. Services are according to need and may be individual or small group counseling. Funding is from SAMSHA, U.S. Department of Education, and the U. S. Department of Justice.

**Supportive Partnerships for Family and Student Supports.** Community Schools, supported by the Family League, provide full-time social workers as community schools coordinators to provide partnerships to benefit students, families, and communities with a focus on increased attendance, improved school climate, and heightened family engagement. Promise Heights community schools are recognized as a best-practice model in Baltimore. Promise Heights staff participate in city-wide leadership circles on the BCPS community school strategy, including participation in a small group who wrote the BCPS community school policy.

## **COLLEGE & CAREER**

**Local Education Agencies.** Baltimore City Public Schools serves 82,354 students in 177 schools. The vision of City Schools is that “every student will graduate ready to achieve excellence in higher education or the global workforce.” Their mission is “excellence in education for every child at every level.” Dr. Sonja Brookins Santelises is the CEO and a firm believer in Promise Heights. Funding is from the U.S. Department of Education, Maryland State Department of Education, and Baltimore City government, national and local foundations.

**Institutions of Higher Learning.** There are three Institutions of Higher Learning in West Baltimore near the U/DH community: Baltimore City Community College (BCCC), Coppin State University, and the University of Maryland, Baltimore (UMB). All three are less than one mile from U/DH.

Baltimore City Community College is the only community college in Baltimore. It serves the residents of Baltimore city and is a State-sponsored, degree granting community college with one campus and several satellite locations throughout the city. Last year it served 250 BCPS high school graduates.

Coppin State University is a historically black college located in West Baltimore whose mission is to prepare its students to meet challenges associated with urban communities. Coppin, a liberal arts college, has produced teachers, social workers, nurses, law enforcement officers, scientists, and artists. Coppin gets more transfer students from BCCC than from any other public institution in the state. Eighty-eight students from BCCC transferred to Coppin in the 2014-15 school year. Funding is from the U.S. Department of Education, State of Maryland, local and national Foundations and alumni.

University of Maryland, Baltimore is Maryland's only public health, law, and human services university. Six professional schools are located on its downtown campus (less than one mile from U/DH) including: Medicine, Dentistry, Nursing, Law, Pharmacy and Social Work. The mission is to improve the human condition and serve the public good of Maryland and society at-large through education, research, clinical care, and services. Funding is from the U.S. Department of Education, State of Maryland, local and national Foundations and alumni.

## **FAMILY & COMMUNITY**

**Family Prosperity Program.** The Family Prosperity Program helps families' access housing, health, affordable food, and employment. Staffed by a PH Social Worker, families receive case management services, information and referral, financial assistance and benefits screening. Funding is from the United Way of Central Maryland, Baltimore CASH Campaign, Foundations, and Promise Heights.

**Workforce Development.** The Judy Center provides adult learning (GED classes), coordinates job seeker services and training, and labor market information to unemployed and under employed residents in U/DH. Summer jobs are to youth ages 14-21 by the YouthWorks program. Funding is from the Maryland Department of Labor, Licensing & Regulation, Mayor's Office of Employment Development, and Center for Urban Families, local businesses, and Foundations.

**Local Businesses.** The Baltimore Development Corporation manages the Baltimore Enterprise Zone. Enterprise Zones are intended to encourage investment in distressed areas by offering incentives to existing businesses to expand and helping to attract new companies, to invest and create jobs. They provide various tax credits to businesses and developers. Enterprise Zone and Focus Area tax credits encourage investment in U/DH by reducing real property, personal property, and income tax bills. The Pennsylvania Avenue Main Street in U/DH serves as liaison between business owners and city agencies to help facilitate public processes like zoning and permits; connects business owners with available commercial properties and projects, provides networking and technical support. Funds are from Baltimore City, federal and state governments, and foundations.

#### **IV. CONCLUSION**

We believe that our families, students, and schools will flourish with PN implementation. The community's vision of effective schools, healthy families, and robust opportunities for residents can be achieved with this significant investment in and endorsement of our Promise Heights Promise Neighborhood Proposal.