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Pasadena Unified School District
Application to the Full-Service Community Schools Program

NARRATIVE

(A) QUALITY OF THE PROJECT DESIGN

(1) Description of the Applicant and the Target Community

The Pasadena Unified School District (PUSD), in collaboration with a network of community partners, proposes to create Centers for Student and Family Services to provide comprehensive academic, social, and health services to students attending two elementary and two middle schools as well as to the students’ family members and to members of the community in the schools’ surrounding neighborhoods. In each year of the grant, the project will serve about 1,800 students and 500 family members, caregivers, and adult members of the community, the majority of whom are socio-economically disadvantaged.

The mission of the Pasadena Unified School District is to provide a caring, engaging, challenging educational experience for every student, every day in partnership with our families and communities, so that each child will thrive. PUSD strives to be the first choice in education for families and students who seek academic excellence, innovation, and diversity in programs and students. The Graduate Profile states that students will graduate from PUSD as critical thinkers, creative and innovative individuals, and effective communicators and collaborators. They will be prepared for success in college and career, be culturally competent citizens, and have healthy minds and bodies.
PUUSD is a mid-size district located in the County of Los Angeles, California about ten miles northeast of the City of Los Angeles city center. PUSD serves students in grades TK-12 and their families from the communities of Pasadena, Altadena, and Sierra Madre. There are seventeen elementary schools, five middle schools, one K-8 school, one 6-12 school, three high schools, one continuation high school, one alternative education program, eight Transitional Kindergarten sites, and four Children's Centers serving children in pre-school. Eighteen of PUSD schools are Title I schools.

PUUSD serves the communities of Pasadena, Altadena, and Sierra Madre with a total population of almost 200,000 residents. The total enrollment (non-charter) of the school district is 16,340 students in grades K through 12. As shown in the chart below, the demographics of this community reveal deep socioeconomic and cultural divides between the general population and the students of PUSD and their families.

**Table 1: Demographics of the PUSD Service Area: All Residents v. Student Population**

<table>
<thead>
<tr>
<th>All residents: Pasadena, Altadena, Sierra Madre (Source: US Census, 2017 estimates)</th>
<th>PUSD 2018-19 Student Population (Source: California Department of Education)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Socio-economically disadvantaged(^1)</td>
<td>14.1%</td>
</tr>
<tr>
<td>Persons with disabilities</td>
<td>5.8% of persons under age 65</td>
</tr>
</tbody>
</table>

---

\(^1\) The Census uses federal income levels to define poverty. The California Department of Education uses eligibility for free and reduced-price meals as the definition of socio-economically disadvantaged, up to 185% of federal poverty level.
<table>
<thead>
<tr>
<th>Ethnicity:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>African-American</td>
<td>12.6%</td>
<td>11.7%</td>
</tr>
<tr>
<td>Asian/Filipino/Pacific Islander</td>
<td>14.1%</td>
<td>7.3%</td>
</tr>
<tr>
<td>Latino</td>
<td>31.0%</td>
<td>60.0%</td>
</tr>
<tr>
<td>White</td>
<td>39.5%</td>
<td>17.1%</td>
</tr>
<tr>
<td>Other/Two or More/Not Stated</td>
<td>2.7%</td>
<td>3.9%</td>
</tr>
</tbody>
</table>

More than 30% of school-age children living in the PUSD service area attend private or parochial schools, about three times the national average. The majority of these children are from middle- and upper-income families.

The project design recognizes that there exists a myriad of factors in this community that can contribute to or can impede a student’s success. Research has shown that circumstances outside of school can have detrimental effects not only on students’ health and well-being, but on their academic progress. These include economic, social, and environmental circumstances such as poverty (US Department of Education, 2001), poor health as a result of lack of access to health services (Ickovics, Carroll-Scott, Peters, et. al., 2014), food insecurity (Faught, Williams, Willows, et al. 2017), exposure to violence and other traumatic experiences (Longhi, 2015), and lack of parent engagement in their children’s education (Bempechat and Shernoff, 2012). Many students in PUSD are challenged by multiple issues.

Throughout PUSD, there are persistent disparities in the levels of student achievement and student engagement, particularly among students who are socio-economically disadvantaged, students with disabilities, English learners, homeless students, and foster youth.
This is particularly the case at the two elementary schools and two middle schools targeted by the proposed project. At each, the proportion of these sub-groups in the total school population is significantly higher than at other schools in PUSD, as shown on Tables 2. and 3.

**Table 2: Demographic Characteristics of Schools Targeted by the Proposed Project**

<table>
<thead>
<tr>
<th>School / Grades / Total # of Students</th>
<th>Socio-Economically Disadvantaged</th>
<th>English Learners</th>
<th>Students with Disabilities</th>
<th>Foster Youth</th>
<th>Homeless</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pasadena Unified School District / K-12 / 16,340</td>
<td>61.6%</td>
<td>15.8%</td>
<td>14.5%</td>
<td>1.6%</td>
<td>2.4%</td>
</tr>
<tr>
<td>Madison Elementary K-5 / 401</td>
<td>92.8%</td>
<td>54.4%</td>
<td>12.2%</td>
<td>1.0%</td>
<td>8.7%</td>
</tr>
<tr>
<td>Washington Elementary K-5 / 494</td>
<td>88.5%</td>
<td>32.4%</td>
<td>7.9%</td>
<td>1.4%</td>
<td>2.4%</td>
</tr>
<tr>
<td>Washington Middle 6-8 / 454</td>
<td>86.8%</td>
<td>20.7%</td>
<td>16.7%</td>
<td>3.7%</td>
<td>3.7%</td>
</tr>
<tr>
<td>Eliot Middle / 6-8 / 513</td>
<td>74.7%</td>
<td>14.0%</td>
<td>19.5%</td>
<td>4.1%</td>
<td>4.1%</td>
</tr>
</tbody>
</table>
The project is designed to increase the capacity of the schools and the community to respond to the holistic needs of children, youth, and families. By creating hubs of services, called Centers for Student & Family Services, at schools located in chronically underserved neighborhoods and conducting extensive culturally-informed outreach, improving access to and equity in the delivery of services, and expanding participation of students, parents, and teachers in evidence-based programs, the Pasadena Unified School District, as part of a collaborative network of community partners, will improve the academic, social, and health outcomes for students and their families. The project design uses as a model Multi-Tiered Systems of Support (MTSS), an integrated, comprehensive framework that focuses on core instruction, differentiated learning, student-centered learning, individualized student needs, and
the alignment of systems necessary for all students’ academic, behavioral, and social success. The MTSS framework includes universal screening of all students, multiple tiers of instruction and support services, and an integrated data collection and assessment system to inform decisions at each tier.

The project addresses the following *Competitive Preference Priorities* of the grant program:

- **Broadly Representative Consortium.** This project has been developed by a consortium that includes multiple departments within the Pasadena Unified School District (i.e., Child Welfare, Attendance, & Safety; Health; Curriculum, Instruction, & Professional Development; Early Childhood Education; Adult Education; and Family & Community Engagement); parents, teachers, and principals; local government agencies in the City of Pasadena and the County of Los Angeles, non-profit organization partners dedicated to improving access to health and education for underserved communities, and program providers with demonstrated records of success in improving outcomes for students and families.

- **History of Effectiveness.** This consortium has been addressing the needs of the Pasadena Unified School District community for more than a decade with effective programming and intervention. Through collaboration, it has provided vital services for the community’s most vulnerable populations, including homeless students and their families, children and youth living in foster care, and low-income students in need of medical and mental health services whose families lack insurance. These efforts, discussed in greater detail in section (b) Quality of the Project Services, have improved
academic, health, and social outcomes on a number of indicators, from lower drop-out and suspension rates, a nearly 100% student immunization rate, and a steady decrease in obesity. The project design is also based on multiple lessons learned through an ongoing cycle of continuous program assessment and improvement. In previous years, PUSD operated several congruent student and family support programs to service each sub-group of disadvantaged students. PUSD found that most students served were part of more than one sub-group and had more than one indicator of need (e.g., students who had no stable place to live were also prone to chronic absenteeism). A consolidation of the congruent support programs into strategically located Centers for Students and Family Services, piloted in the current school year, has begun to improve the expediency and efficiency of meeting the multiple needs of the target population.

- *Evidence-Based Activities, Strategies, or Interventions.* As described in section (2) Quality of the Project Services, the project design incorporates strategies, programs, and interventions that have shown to be promising with the target population in PUSD as well as in studies in schools and districts with similar populations.

(2) Needs of the Target Population

(a) *Student Achievement and Engagement*

Students in the four target schools have among the lowest levels of achievement in English Language Arts and Mathematics in the district as measured on the California Assessment of Student Performance and Progress (CAASPP) in 2018 and shown in Tables 4 and 5 below.
The data in Table 4 illustrates that, although the two schools have similar populations, the test results for Washington Elementary were significantly better than those for Madison. This is not the only area where there were notable differences among the four target schools’ indicators for achievement and engagement in 2017-18, as shown below.

### Table 4: Achievement Levels: All Students, PUSD and Target Schools, Grade 3, 4, and 5

<table>
<thead>
<tr>
<th>ENGLISH LANGUAGE ARTS</th>
<th>MATHEMATICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard =&gt;</td>
<td>Exceeded</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>PUSD</td>
<td>25.9%</td>
</tr>
<tr>
<td>Madison Elementary</td>
<td>5.2%</td>
</tr>
<tr>
<td>Washington Elementary</td>
<td>12.1%</td>
</tr>
</tbody>
</table>

### Table 5: Achievement Levels: All Students, PUSD and Target Schools, Grade 6, 7, and 8

<table>
<thead>
<tr>
<th>ENGLISH LANGUAGE ARTS</th>
<th>MATHEMATICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard =&gt;</td>
<td>Exceeded</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>PUSD</td>
<td>12.4%</td>
</tr>
<tr>
<td>Eliot Middle</td>
<td>6.2%</td>
</tr>
<tr>
<td>Washington Middle</td>
<td>2.3%</td>
</tr>
</tbody>
</table>
Table 6. English Learner Reclassification, Chronic Absenteesism, and Suspensions, All Students

<table>
<thead>
<tr>
<th></th>
<th>Redesignated Fluent English Proficient</th>
<th>% of Students Chronically Absent</th>
<th>Suspension Rate</th>
<th>Change in No. of Suspensions 2017 to 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUSD</td>
<td>25.0%</td>
<td>11.1%</td>
<td>4.9%</td>
<td>none</td>
</tr>
<tr>
<td>Madison</td>
<td>24.9%</td>
<td>19.1%</td>
<td>4.8%</td>
<td>+2.6%</td>
</tr>
<tr>
<td>Washington Elementary</td>
<td>34.4%</td>
<td>15.3%</td>
<td>6.8%</td>
<td>+1.7%</td>
</tr>
<tr>
<td>Eliot</td>
<td>14.0%</td>
<td>10.7%</td>
<td>20.0%</td>
<td>+0.9%</td>
</tr>
<tr>
<td>Washington Middle</td>
<td>21.4%</td>
<td>18.1%</td>
<td>17.1%</td>
<td>-2.7%</td>
</tr>
</tbody>
</table>

Clearly, there are lessons to be learned from investigating the causes of these differences. In the first year of evaluation, the independent evaluator will document and assess the programs, practices, and out-of-school factors at each site that may be contributing to these differences. (See e. Quality of the Project Evaluation.)

b. School Readiness

In 2017, the City of Pasadena Office of the Young Child partnered with the Pasadena Unified School District and the UCLA Center for Healthier Children, Families, and Communities to
complete an assessment of the well-being of entering PUSD kindergarteners using the Early Development Instrument (EDI). EDI indicates whether children are “on track” for Kindergarten in five domains: 1) physical health and well-being; 2) social competence; 3) emotional maturity; 4) language and cognitive development; and 5) communication and general knowledge.

The study revealed that the children with the greatest need live in Northwest Pasadena, the low-income community served by the target schools. 48% of children in these areas were “not on track” for school readiness, based on their vulnerability in three or more domains.

A follow-up study published by the City of Pasadena in August 2018, “Findings and Recommendations: Stakeholder Convenings on EDI Results,” identified the factors that contribute to this problem, including:

- Lack of quality time spent together by parents and children due to long work hours, stress/fatigue, multiple responsibilities, and limited communication/parenting skills
- Limited financial resources
- Lack of safety
- Racial discrimination and immigration status
- Lack of knowledge of child development among parents/caregivers
- Need for personal development among parents (self-confidence, literacy, etc.)
- Difficulty finding and accessing programs
- Lack of needed programs.
The report recommended that the school district, the City of Pasadena, and community organizations undertake the following actions, which have been incorporated into the proposed project:

- Use EDI results to raise awareness and motivate parents/caregivers.
- Educate parents/caregivers on the importance of their role in the intentional development of Kindergarten readiness.
- Take a strengths-based, empowering approach with parents/caregivers.
- Work with organizations with close ties to parents/caregivers and develop new approaches to recruitment and engagement.
- Offer services and programming for children at community hubs in order to engage parents/caregivers.
- Address access barriers so that programs can effectively reach and serve families (language, financial, computer-literacy, location/transportation, schedules, cultural sensitivity).
- Draw from the expertise of direct service providers (and educators), and involve them in future efforts.
- Address EDI vulnerabilities through early learning and elementary school programs with curriculum and collaboration across levels.
- Obtain financial resources to enhance Early Childhood Education, allowing them to open additional slots, offer more hours of service throughout the year, and increase family engagement.
c. Health, Wellness, and Access to Care

12.3% of the total population under the age of 65 in the PUSD service area do not have health insurance, according to the latest U.S. Census data. In PUSD, the percentage of uninsured students is estimated to be at least 15% and as high as 20% at the target schools. This means that about 2,000 to 3,000 children and their families face barriers to adequate health care.

The issue of access to care is compounded by a rise in physical and mental health problems, especially among vulnerable students. About 1,300 PUSD students have asthma. 42% of students screened last year were overweight or obese. Approximately 200 students are medically fragile. Through the 2018-19 school year to date, the district is on track to record more than 200 substance abuse code violations and more than 500 mental health service referrals made by the staff of the PUSD Office of Child Welfare, Attendance, and Safety. This reflects a pattern of increase over the last several years. In addition, 412 students are classified as homeless using the criteria established by the McKinney Vento Act, i.e., individuals who lack a fixed, regular, and adequate nighttime residence.

In 2016, the City of Pasadena Public Health Department and the Huntington Hospital (both partners in the proposed project) published the Community Health Needs Assessment (CHNA) for Greater Pasadena. The report describes findings from a systematic, year-long process that was conducted collaboratively in order to provide insight into the health status and

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2 The CHNA includes data on two neighboring communities in the hospital’s service area that are not part of the PUSD service area and are more uniformly middle- and high-income than the service area of PUSD. The communities served by PUSD include areas of disparate wealth and poverty, often with a mile of each other. The report also includes data on students living in the district’s service area who do not attend PUSD schools and tend to be from more affluent families.
needs of the residents of the Greater Pasadena area. The following is a summary of the report’s significant finding as identified by key informants:

Top Health Needs (from highest to lowest):

- Mental Health
- Affordable Housing
- Healthy Foods and Access to Care
- Dental Care

Top Barriers to Addressing Health Needs

- Limited Access to Information
- Insufficient Health Literacy
- Bureaucracy in Local Government
- Challenging Social-Political Environment
- Lack of Funding for Health

Groups At-Risk for Lower Quality of Life

- Spanish Speakers and Persons of Colors
- People Living in Poverty
- Residents Living in Northwest Pasadena (aka North Central Pasadena)
- Medi-Cal and Denti-Cal Patients
- Children/Youth
● People Exposed to Trauma or with Mental Health Conditions

The report also cited statistics that demonstrate the need for this project, including:

● Cost of Living: “In Pasadena, a single-parent adult with one preschooler and one school-age child would need to earn approximately $30.92 per hour in 2015. For an hourly, full-time worker that is equivalent to $64,313 per year.”

● Dental Care: “In 2013-2014, 68.2% of San Gabriel Valley Children (ages 2-11) visited a dentist within the last year, compared to 78.7% of California children.”

● Youth Nutrition: “For the 2013-2014 measurement period, 54% of children and teens in San Gabriel Valley ate at least two servings of fruit in the previous day, which is lower than for children and teens in California (63%).”

● Food Environment: “In [low-income] areas where there is no grocery store or market within walking distance (0.5 mile), there is an opportunity to increase access to fresh foods and vegetables. Neighborhoods with a scarcity of markets with fresh fruits and vegetables result in limited affordability of, and access to, healthy food options. These areas are sometimes known as ‘food deserts.’”

d. Student Welfare, Attendance and Safety

Despite a steady decline in the PUSD suspension rate since the implementation of schoolwide Positive Behavior Interventions and Supports began in 2012 throughout the district, the PUSD suspension rate (4.9%) remained unchanged from 2017 to 2018 and is higher than the
State of California (3.5%). The following statistics are a greater cause for concern that progress in the area of student safety and well-being has slowed or even reversed:

- As shown in Table 6 above, at three of the four target schools the number of suspensions increased from 2017 to 2018 and the suspension rate at the two middle schools remains significantly higher than the district average.

- After a decline from 2016 to 2017, the number of incidents of aggressive behavior and bullying increased in 2018 across the district and at three of the four target schools.

- In the 2017-18 PUSD Report from the California Healthy Kids Survey, 21% of 5th graders who responded said they felt safe at school only some of the time or never. 14% of 7th graders who responded disagreed with the statement “I feel safe at school.” 27% of 7th grade students said they had been bullied or cyberbullied, and 29% reported having feelings of chronic sadness or hopelessness in the last year. These figures correspond to an increase over the last three years in the number of referrals for mental health services made by the staff of the PUSD Office of Child Welfare, Attendance, and Safety, from 487 in 2016-17 to 511 in 2017-18 to 540 anticipated in 2018-19.

e. Parent Engagement.

There are multiple opportunities in PUSD for parents and caregivers to be actively engaged in their children’s schools in a variety of ways. Each of the target schools has a Parent Teacher Student Association, an English Learner Advisory Committee, and a School Site Council where parents meet regularly with school and district staff and representatives of community organizations to raise and discuss issues, advocate for their
children, and monitor progress. Three of the target schools also have African-American Parent Councils. At the district level, parents and caregivers are members of the Foster Youth Guardians, Parents and Advocates Council, the Community Advisory Council for Special Education, the District English Learners Advisory Committee, and the Local Control and Accountability Plan Parent Advisory Council. Parents and caregivers participate regularly in meetings of the Board of Education. Parents are also engaged in CollaboratePASadena (www.collaboratepasadena.org), a school-city-business-community organization focused on collective impact to improve the lives of children and families in the district service area. Through these avenues, PUSD parents and caregivers have a strong voice in the development of policies, decisions about spending, and the direction of this community’s public schools.

Despite these opportunities (and the dedication and commitment of those parents who are deeply engaged) parent involvement at the target schools as a percentage of the total population is low. The number of parents/caregivers who regularly participate in the on-site council meetings ranges from 10 to 15 at each school, only 2% to 4% of the total family population. Many more participate in events - student performances, open houses, cultural celebrations, festivals, etc. - but even so the level of engagement only rises to 16% to 33%. There are a number of reasons the majority of parents remain detached from the school, teachers, and staff. They include lack of information and unreliable communication; lack of time and scheduling conflicts; lack of access to child care for other children in the family; language and cultural barriers; and transportation barriers. Physical access can also be a barrier. Washington Elementary and Washington Middle Schools are adjacent to each other on one enormous campus covering about three square
city blocks. For someone coming to either school for the first time, finding where they need to go can be a challenge. Many parents do not know where to find information and resources about their children’s school and are understandably intimidated when they have to navigate the district’s systems. This is especially true of single-parent, low-income, and immigrant families.

(2) Goals, objectives, and outcomes.

As shown on the chart on the following pages, the goals, objectives, and outcomes of the proposed project are designed to address the specific needs described above and are measurable.

[The remainder of this page is intentionally blank.]
<table>
<thead>
<tr>
<th>GOAL</th>
<th>SERVICE</th>
<th>OBJECTIVE</th>
<th>OUTCOMES</th>
<th>BASELINE</th>
</tr>
</thead>
</table>
| Improve coordination of and access to services. | Establish, furnish and promote Centers for Student and Family Services on two new campuses.  
Hire and train two new Coordinators and two part-time Community Advocates.  
Increase integration of academic, social, and health services at existing Center, including expanded role for partners. | Students, families, and community members have greater access to coordinated, integrated services. | At Madison Center, increase by 10% annually the number of students and adults served, including case management.  
At Eliot and Washington Centers, serve 40 students and 40 adults in Year 1 at each site and increase by 10% each year thereafter. | 100 children and 100 adults will have been served in 2018-19; 75 families are receiving case management.  
New program sites; no baseline |
<table>
<thead>
<tr>
<th>GOAL</th>
<th>SERVICE</th>
<th>OBJECTIVE</th>
<th>OUTCOMES</th>
<th>BASELINE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase academic achievement of students attending the target schools.</td>
<td>Early education and parent education programs</td>
<td>Children enter Kindergarten prepared developmentally and socially for school.</td>
<td>Increase by 5% annually the number of children who are “on track” for Kindergarten.</td>
<td>2017 Early Development Instrument: 48% “on track”</td>
</tr>
<tr>
<td></td>
<td>Balanced Literacy and and Leveled Literacy Interventions</td>
<td>Increase students’ English language reading and writing fluency</td>
<td>Increase by 5% annually the number of students meeting or exceeding standards on CAASPP ELA/literacy standardized tests.</td>
<td>Madison: 24.5% Wash. Elem: 35.6% Eliot: 22.6% Wash. Middle: 17.6%</td>
</tr>
<tr>
<td></td>
<td>PasadenaLEARNs after school and summer programs</td>
<td>Improve students’ academic skills in core curriculum</td>
<td>Increase by 5% annually the number of students meeting or exceeding standards on CAASSP Math standardized tests.</td>
<td>Madison: 13.4% Wash. Elem.: 35.4% Eliot: 13.0% Wash. Middle: 12.3%</td>
</tr>
<tr>
<td>GOAL</td>
<td>SERVICE</td>
<td>OBJECTIVE</td>
<td>OUTCOMES</td>
<td>BASELINE</td>
</tr>
<tr>
<td>------</td>
<td>---------</td>
<td>-----------</td>
<td>----------</td>
<td>----------</td>
</tr>
<tr>
<td>Students in the target schools are safe, attending school regularly, and supported positively and equitably.</td>
<td>Social-Emotional Learning: Mindfulness, Leader in Me, Second Step</td>
<td>Improve student self-awareness and self-regulation, resulting in a reduction in disruptive behaviors.</td>
<td>Decrease number of suspensions by 5% annually at each school for all student sub-groups.</td>
<td>Madison: 24 (4.8%) Wash. Elem: 40 (6.8%) Eliot: 114 (20.0%) Wash. Mid.: 92 (17.1%) California Dashboard Suspension Reports for each target school.</td>
</tr>
<tr>
<td></td>
<td>Trauma-Informed Professional Development and Practice</td>
<td>Increase knowledge among all teachers and staff of the effects of trauma on student behavior and achievement, resulting in fewer disciplinary actions.</td>
<td>Decrease disparities in disciplinary action among student sub-groups.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Schoolwide Positive Behavior Interventions &amp; Supports (PBIS): Playworks, Response to</td>
<td>Improve student and staff safety and security</td>
<td>Decrease by 10% annually the number of incidents of aggressive behaviors and bullying.</td>
<td>2017-18 total violations, all four schools: 46</td>
</tr>
</tbody>
</table>
### Intervention, Agression Replacement Therapy, Cognitive Behavioral Therapy, Good Behavior Games

- Decrease by 10% annually the number of students who do not feel safe at school.
- Decrease by 10% annually the number of students who report having been frequently harassed or bullied.

### Attendance Counseling

- Increase outreach, engagement and counseling of parents of chronically absent students.
- Decrease by 5% annually the number of students who are chronically absent.

### The following data from the California Healthy Kids Survey is districtwide:

- 5th graders: 21%
- 7th graders: 14%

- Madison: 19.1%
- Wash. Elem.: 15.3%
- Eliot: 10.7%
- Wash. Middle: 18.1%
<table>
<thead>
<tr>
<th>GOAL</th>
<th>SERVICE</th>
<th>OBJECTIVE</th>
<th>OUTCOMES</th>
<th>BASELINE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students and their families are healthy.</td>
<td>Health Screenings</td>
<td>Expand vision, hearing, dental, and weight screenings of students</td>
<td>Expand screening to all students in grades 1 and 6. Increase by 5% annually the number of students who receive treatment or referrals for previously undiagnosed health problems.</td>
<td>Students screened in grades K, 2, 5, 7, 8. 30 students referred for treatment.</td>
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<tr>
<td>Support for enrollment in health and wellness programs</td>
<td>Increase access to and participation in health care, healthy food resources, nutrition education, and physical activity</td>
<td>By the end of the grant period, 100% of eligible families will be enrolled in private or public health insurance programs and will visit</td>
<td>80% of students have health insurance.</td>
<td></td>
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<td>Referrals for direct physical and mental health care, counseling, and education.</td>
<td>Increase treatment of unmet health needs, especially for uninsured and underinsured students and families.</td>
<td>Increase by 6% annually the number of students and family members who receive direct services from health</td>
<td>50 medical referrals in 2018-19</td>
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<td>80% of eligible families will be enrolled in the public food assistance program (CalFresh)</td>
<td>50 high-risk students and family members will participate each year in targeted health education and counseling.</td>
<td>40% of eligible families are enrolled in CalFresh New program; no baseline.</td>
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<td>Parents are actively engaged in their children’s education and their family’s advancement; and community members from the surrounding neighborhoods use the resources offered by each school</td>
<td>Parent &amp; Community Education</td>
<td>Improve parent/caregiver understanding of how to support their child’s education and development, and how to use services provided by PUSD and partners. Provide parents/caregivers and community members with education and care providers and counselors. Decrease by 10% annually the number of students who report chronic sadness or hopeless feelings.</td>
<td>Increase by 5% annually the number of parents/caregivers and community members from the schools and neighborhoods who participate in classes, workshops, and education programs each year. The following data from the California Healthy Kids Survey is districtwide: 7th graders: 29%</td>
<td>209 parents/caregivers and community members</td>
</tr>
</tbody>
</table>
| **Parent Engagement** | Increase parent involvement in school activities and associations. | Increase by 5% annually the percentage of parents/caregivers who participate in a school activity. | Madison: 16%  
Wash. Elem: 20%  
Eliot: 33%  
Wash. Middle: 25% |
|----------------------|---------------------------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| **Leadership Development** | Empower parents/caregivers and community members to become advocates for their children, their families, themselves, and their communities. | 20 parents/caregivers and community members graduate from Leadership Development program in Year 2.  
They then mentor 10 additional parents in each subsequent year. | 10 to 15 parents are currently active on School Site Councils and Advisory Committees at each school. |
The project design is supported by district policy. In 2017 the PUSD Board of Education became one of the first school boards in California to adopt a specific Mental Health Policy (BP 5141.51) in conjunction with the Student Wellness Policy (BP 5030, adopted in 2006) to provide educational services through a trauma-sensitive and trauma-responsive lens. This policy aims to increase understanding and awareness of common mental health issues impacting students and serves to alert staff to early warning signs. The policy aims to describe the responsibility that all staff have in promoting the mental health and well-being of students and linking students to sources of professional support. The policy mandates a whole-school, trauma-informed approach to student mental and emotional health so that all staff have the knowledge and training to recognize and identify warning signs and symptoms that indicate a student is experiencing mental health or emotional well-being issues.

(B) QUALITY OF PROJECT SERVICES

(1) **Strategies for ensuring equal access and treatment**

The following strategies will ensure equal access and treatment of all participants including those who are members of traditionally underrepresented groups:

- Placement of Centers for Student and Family Services in schools and communities based on the following criteria: the high concentration of economic, social, and environmental factors affecting student and family outcomes and a lack of adequate accessible services to address needs; commitment of the principals and staff; accessibility of the site; available space.
Culturally-informed outreach and engagement to ensure that information and resources are accessible to all segments of the community and that individuals feel welcome and supported at the target schools and at the offices of the program partners.

A holistic and coordinated approach to addressing students and family needs.

Professional development for all teachers and staff to ensure that academic and pro-social programs and interventions are implemented in all grades and classrooms as appropriate, and all students are treated equitably.

Parent empowerment and leadership development to ensure that parents and caregivers have an integral role in defining their needs and the needs of their children and families, determining the services to address these needs and how they are delivered, and evaluating their effectiveness.

(2) The likely impact of the services on the intended recipients.

The proposed programs and services have been integrated into the project because they (a) have been implemented and resulted in positive outcomes for the target population or similar populations within the district, or (b) have been shown to have significant benefits for similar populations in other districts or schools as demonstrated in studies that meet What Works Clearinghouse (WWC) standards as well as WWC Practice Guides.

(a) Improved Coordination, Integration and Access to Services

• Promising Evidence: In Fall 2018, PUSD established a pilot program site at Madison Elementary School using the elements of the proposed Full-Service Community Schools
project design. The pilot Center for Student and Family Services consolidated services previously provided at multiple sites by the PUSD Health Office, Families in Transition (the district’s support program for homeless students), and the Office of Child Welfare, Attendance and Safety. The program is housed in a free-standing building on the Madison campus and is directly accessible to the community. The program focuses on lessening the academic and socio-economic barriers of disadvantaged students, i.e., low-income, homeless, foster youth, English learners, recent immigrants, and students with disabilities. Services provided at the Center include: communicating with students’ teachers and advocating on their behalf with other departments in the district and with social service agencies; emergency basic needs assistance; referrals for medical, dental, and mental health services, family counseling, and homeless shelters and programs; assistance or referrals for enrolling in government programs; parent education classes; case management; crisis intervention; and other services as necessary. Community partners include Young & Healthy, Options for Learning-Head Start, and the City of Pasadena Public Health Department. The Center operates year-round including during the two months of summer break. (Because the Madison Center provides a variety of needs-specific services to the district’s population of 412 homeless students and their families, staffing requirements at this location are greater than at the proposed two new sites. In addition to the Center Coordinator, the Senior Community Advocate and Community Advocate, two full-time Community Advocates dedicated to the homeless population work out of the Madison Center throughout the year.)

Since October 2018, Center has enrolled 75 families into case management; held 6 health screenings, 35 health insurance outreach sessions, 42 ESL classes, 2 early
childhood parent education sessions, 6 ServSafe/nutrition classes, and 10 backpack meal sessions. From Thanksgiving to Christmas, there were 2 family dinner events and 3 distribution events of donated toys and basic necessities. The Center Coordinator has attended all meetings of the Madison Elementary School Site Council and English Learner Advisory Committee and communicates regularly with the school’s Principal, Assistant Principal, School Nurse, Office Manager, and teachers.

- **Relevance to the proposed project:** Based on the successful implementation of the pilot project and its impact on its targeted population, it is likely that the continuation of programs at this site and the establishment of two new Centers for Student and Family Services will result in an increase in coordinated services to children, families, and community members at the target schools.

- **Implementation plan and timeline:** Programs and services at the Madison Center will continue throughout the entire grant period. The exact location for the Eliot and Washington Centers will be selected in Year 1, during which time new staff will be recruited and trained and the Centers will be furnished and equipped. (Washington Elementary School and Washington Middle School are adjacent to one another on one very large, multi-level campus. The Center will be placed on the middle school campus at a location that is accessible to students and parents from both schools.) The two new Centers will begin providing services at the end of Year 1 and continue throughout the project period.

The staff of all three Centers will participate in professional development staff provided by the Center for Equity & Community Inclusion at Pacific Oaks College in
Pasadena. In Year 1 there will be six 2-hour sessions and in subsequent years four 2-hour booster and enrichment trainings. Topics will include trauma-informed practice, culturally-appropriate communication and response, crisis management, personnel stress management, and training as requested by Center staff and the project leadership team.

b. Increased Academic Support, Intervention, and Training

i. Leveled Literacy Interventions. In each of the targeted schools beginning in Year 2 of the project, PUSD will implement the Leveled Literacy Intervention system, an intensive, small-group, supplementary literacy intervention for students who find reading and writing difficult. The goal of LLI is to lift the literacy achievement of students who are not achieving grade-level expectations in reading. All teachers in grades K-5 and teachers of English and selected other subjects in grades 6-8 will participate in three days of professional development delivered by Fountas & Pinnell. The intervention will build upon the Balanced Literacy initiative launched in all PUSD elementary schools in 2015-16 and designed to develop a love of reading and the skills to be successful through teacher professional development, leveled-reading libraries at all schools, and readers and writers workshops.

- What Works Clearinghouse Citation: Evidence of the impact of Leveled Literacy Interventions on student achievement is found in Ransford-Kaldon, C., Flynt, E. S., Ross, C. L., Franceschini, L., Zoblotsky, T., Huang, Y., & Gallagher, B. (2010). Implementation of effective intervention: An empirical study to evaluate the efficacy of Fountas & Pinnell’s Leveled Literacy Intervention system (LLI). Memphis, TN: Center for Research in Educational Policy, University of Memphis.
• **Rating**: This study meets WWC standards without reservations because it is a randomized controlled trial with low attrition.

• **Significant outcomes**: The study took place in five rural elementary schools in Georgia and for suburban elementary schools in New York among 427 students in grade K-2. The intervention group received 30-minute daily small group LLI sessions in addition to their regular classroom literacy instruction. The comparison group receive regular classroom literacy instruction but no supplemental instruction. Intervention teachers received professional development using the instructional materials and techniques. The study found that the intervention had statistically significant positive effects on reading achievement and reading fluency outcomes.

• **Relevance to the proposed project**: The characteristics of the student sample and the target population of the proposed project are similar, with 84% of the students in the study identified as low-income and 13% as English learners. The students were also ethnically diverse. While the study examined the effectiveness of the program only in grades K-2, these are the critical years for the development of literacy and the intervention is likely to have an impact on students who are struggling with reading in all targeted grades. Additional studies have shown the positive outcomes of the intervention in grades 3-5 (Kaldon, Lee, Sharpe, et al., 2017) and in urban school districts (Ransford-Kaldon, Ross, Lee, et al., 2013).

• **Implementation plan and timeline**: Purchase of LLI curriculum materials and teacher professional development will take place at the end of project Year 1, and the program will be implemented in all four schools in beginning in Year 2 and continuing throughout the grant period.
ii. Early Education.

- Promising Evidence: The creation of the City of Pasadena Office of the Young Child in response to the troubling results of the 2014 Early Development Instrument is evidence that the community recognizes the need to address the lack of high quality, evidence-based early education programs, especially for the underserved, low-income families in Northwest Pasadena targeted by this proposal. With increased funding from the State of California, PUSD has established half-day preschool programs at ten elementary schools (including Washington and Madison, where the program shares the building that houses the Center for Student and Family Services) and four full-day programs (including Washington). Options for Learning-Head Start, a partner in the proposed project, recently began offering bi-lingual early education classes for children and parents at the Madison Center. At this time, however, services for children ages 0-5 and their parents remain fragmented.

- Relevance to the proposed project: By using a collective impact model, the project will have a likely impact on the delivery and quality of early education programs for children and parents/caregivers. Improved collaboration with the City of Pasadena Office of the Young Child and all the community organizations that provide services to this population will result in an agreed-upon set of program standards and evaluation protocols, sharing and adoption of best practices, and ensure that barriers to participation for the target population are removed and services are not duplicated.

- Implementation plan and timeline: In Year 1, the Coordinator of the Office of the Young Child and the PUSD Director of the Early Childhood Education Department
will become members of the School/Community Project Leadership Team (see Management Plan).

iii. Out-of-school time academic and enrichment programs

• **Promising evidence**: For more than 15 years, PasadenaLEARNs has provided after school and summer school programs at all PUSD schools that offer engaging enrichment, leadership, and developmentally appropriate learning opportunities for K-8 students at the target schools. Activities complement the school day, and include homework help, leadership, visual and performing arts classes, structured recreation, academic enrichment activities, and literacy development. At the target schools, internal data comparing the 2018 CAASPP test results in English Language Arts and Mathematics of LEARNs participants versus non-participants showed that at Washington Elementary School and Washington Middle School, the percentage of LEARNs participants who met or exceeded standards in Mathematics was significantly higher that the percentage for non-participants (39.1% vs. 32.1% and 15.3% v 11.2%, respectively). The initial assessment into the higher scores at these schools indicates that LEARNs staff there adapts instruction to the academic needs of individual and small groups, an approach recommended with a moderate level of evidence in the WWC Practice Guide: Structuring Out-of_School Time to Improve Academic Achievement.

• **Relevance to the proposed project**: Based on the success of the program at improving math achievement at two of the target schools, it is likely that additional students at the target schools will benefit from participation in PasadenaLEARNs.
• **Implementation plan and timeline:** In Year 1, the PasadenaLEARNs director will work with PUSD staff to determine best practices used by LEARNs instructors at the Washington Elementary and Washington Middle program sites, and train instructors at the other two target schools in these practices. Staff of the three Centers for Student and Family Services, will begin recommending and facilitating enrollment in PasadenaLEARNs afterschool and summer programs at their respective school sites in Year 1.

c. **Student Safety, Attendance, and Support in School**

   i. **Schoolwide Positive Behavioral Interventions and Support**

   • **Promising Evidence:** In 2012, PUSD revised discipline practices and began to implement policies and procedures that focused on in-school suspensions rather than punitive measures and out-of-school suspensions that caused lost classroom time. At the same time, principals, teachers, and staff advanced through Positive Behavior Interventions & Supports (PBIS) training. Staff at all district schools were trained and had fully implemented Tier 2 by the end of the 2017-18 school year. Professional development in PBIS and multi-tiered systems of support is being provided in the current school year by the Los Angeles County Office of Education. As part of schoolwide PBIS, PUSD has implemented several evidence-based interventions to support students’ social-emotional learning and increase their sense of safety and support at school, including: Response to Intervention (RtI), Safe School Ambassadors, Peace Over Violence, Second Step, Cognitive Behavioral Therapy, and
Aggression Replacement Training. As a result, the suspension rate in the district decreased by a total of 60% over five years. In 2016-17, for example, 301 students were referred to in-school suspension as an alternative to traditional out-of-school suspension.


• **Rating:** This study meets WWC standards without reservation because it is a randomized controlled trial with low attrition.

• **Significant outcomes:** The study took place over four years in 37 elementary schools in rural and suburban Maryland and examined more than 12,000 students in grades K-5. Staff and teachers at 21 of the schools received initial and annual booster training in schoolwide PBIS. They received support from district staff and behavior support coaches. Schools in the control group did not implement PBIS during the trial. The study found that implementation of schoolwide PBIS had statistically significant positive effects on external behavior outcomes, specifically in the reduction of disruptive behaviors.

• **Relevance to the proposed project:** The sample in the study was 49% low-income and almost equal proportions of African-American (45%) and White (46%) students. 13% were students with disabilities. The study does not appear to have analyzed data for other sub-groups prevalent in PUSD, e.g., English learners and foster youth.
Nevertheless, the conclusions of the study support the internal findings of PUSD over the last six years of schoolwide PBIS implementation.

- **Implementation plan and timeline:** Throughout the grant period, PUSD will continue to implement schoolwide PBIS at the four target schools, including Response to Intervention (RtI), Aggression Replacement Therapy, and Cognitive Behavioral Therapy. The most at-risk students at the target schools will be identified through universal screening and have Personalized Support Plans designed to meet their specific needs by the school Response to Intervention coach and the Center for Student and Family Services Coordinator and Community Advocate in consultation with the Principal and teachers. Plans will include school-based interventions and services provided for both students and their parents/caregivers by the Center and community partners. The Full Service Community Schools grant will also fund two new evidence-based programs:

  a. **Good Behavior Games (K-5).** In Year 1, PUSD will implement Good Behavior Games, a classroom management strategy that helps children learn how to work together to create a positive learning environment, at the target elementary schools. The program promotes positive interactions by rewarding students for appropriate behavior, such as following directions and being polite and helpful to each other. The program is cited in the WWC Practice Guide: Reducing Behavior Problems in the Elementary School Classroom, specifically under Recommendation 2: Modify the classroom environment to decrease problem behavior (Level of evidence: Strong), and has been the subject of a longitudinal study that demonstrated the long-term positive effects of implementation in the
early grades. (Ialongo, et al. 2001). Teachers will participate in three days of professional development and receive curriculum materials. Classroom materials will be replenished in each year of the grant and teachers will receive ongoing coaching and support from district staff.

b. Playworks (K-5). In Year 2, PUSD will introduce Playworks at the target elementary schools. Playworks helps schools to create organized play environments in class and during recess that encourage student pro-social behaviors. A study of the program (Bleeker, James-Burdumy, et al., 2012) that meets WWC standards without reservations found that the program had a substantively positive effect on external behavior outcomes. Teachers will receive two consecutive years of professional development and coaching from Playworks staff. Selected teachers will then become mentors and coaches for students, staff, and other teachers at their school to continue to implement the program through the end of the grant period.

ii. Social Emotional Learning.

Social–emotional skills—in the form of understanding one’s own emotions of those of others, regulating emotions, controlling attention, problem solving, and engaging in prosocial behaviors—operate alongside and in conjunction with cognitive skills to facilitate school success. Research has shown that students' social–emotional skills are a better predictor of future academic performance than is their prior academic performance (Malecki & Elliot, 2002). Proper implementation of social-emotional curriculum also
supports the reduction of disproportionate discipline and increasing equity in schools (Top, Liew, et al., 2016).

a. Trauma-Informed Care and Practice

• **Promising Evidence**: By the end of the 2018-19 school year, all principals, administrators, and teachers at the four target schools will have been trained in trauma-informed education and practice training by Young & Healthy in partnership with the district and the Huntington Hospital, funded by a major grant from the UniHealth Foundation. In addition, kindergarten and transitional kindergarten teachers will have also received training in mindfulness techniques to deploy in their classrooms, using the trademark SCHOOL Kids Yoga & Mindfulness Teacher Training Curriculum, developed by Smiling Calm Hearts Open our Learning, Inc. (SCHOOL). The mindfulness curriculum is founded on four cornerstones — calm body, calm brain, calm breathing and calm heart — and prepares teachers to incorporate activities including movement, calm breathing, positive affirmations, songs and story telling in order to engage their entire classroom. The curriculum is research-informed, secular in nature, aligned with Common Core and California Department of Education physical and health education standards, and has been used successfully in public classroom settings.

The internal evaluation in 2017 of the pilot phase of this program showed that, with a small amount of training, 100 percent of responding teachers were able to successfully implement in-class mindfulness activities — and did so regularly. Importantly, the majority of teachers believed the project benefited their students,
most especially in terms of social and emotional development. Teachers who responded to the evaluation survey also noted significantly improved attendance rates. While the evaluation did not include a statistical analysis of students’ academic performance, some teachers reported their belief that mindfulness activities had improved their students’ performance. As might be expected, teachers also pointed to improvements in their students’ physical well-being as a result of the active movements and physical exercises they incorporated in their mindfulness sessions. Among positive behavioral changes, the most significant was students’ increased ability to self-regulate, with almost three out of four respondents (73.3 percent) noting an improvement in this regard among their students. Additionally, several teachers noted that students had begun to implement mindfulness techniques independently — and were applying the techniques not only to self-regulate, but also to help their peers.

Other positive changes reported by participating teachers included increased kindness and empathy, and higher levels of calm and focus, among their students. Teachers themselves also reported personal benefits, including increased calm in stressful classroom situations, enhanced patience, increased patience, and greater empathy for their students — including those they had previously found most challenging to work with.

- **Relevance to the proposed project:** Based on the successful implementation of the pilot project and its impact on its targeted population, it is likely that the continued implementation of trauma-informed practice in the classrooms of the
targeted schools will result in improved student self-awareness and self-regulation, more productive and positive interaction among teachers, staff, students, and parents, and fewer disciplinary actions.

- **Implementation plan and timeline:** Teachers will continue to be supported in the implementation of trauma-informed care and practice by PUSD staff, Young & Healthy staff, and by coaching and continued professional development and support from the University of Southern California School of Social Work. PUSD will continue to implement the Second Step social-emotional learning program that has been used effectively in PUSD middle schools by providing more kits to the two target middle schools and additional professional development for teachers and staff. (This is being supported by a California Department of Education Student Support and Academic Enrichment grant ending in September 2019.)

b. **Leader in Me**

   The Full-Service Community Schools grant will also fund the implementation of a new social-emotional learning program, Leader in Me, for teachers and students in grades K-5 at the target elementary schools. The program is designed to empower students to lead their own learning by developing skills that support academic achievement and personal development in such areas as Self-Discipline, Vision, Initiative, Communication, Relationship Building, Goal Achievement, Public Speaking, Global Awareness, Teamwork, Listening Skills, Time Management, Leading Projects, Self-Directed Learning, Valuing Diversity, and
Problem Solving. In order not to overload teachers with professional development, teachers of grades K-5 will participate in two consecutive years of professional development beginning in Year 3. The program has been found to lead to lower instances of student discipline in elementary schools where teachers participated in two years of training and coaching. (Humphries, Cobia & Ennis, 2015.)

iv. Attendance Counseling.

- **Promising Evidence**: Through a 3-year grant from the California Department of Education Learning Communities for School Success program, PUSD hired an Attendance Advocate in 2018 who works with staff, teachers, and parents at schools with greater than 10% of students who are chronically absent, i.e., are absent 10% or more of the total days in the school year. The list includes the four schools targeted by the proposed project. The Attendance Advocate, who works out of the Madison Center for Student and Family Services, is dedicated to communicating with families whose children are identified as chronically absent. In this capacity, the Advocate meets with principals, teachers, and RtI coaches and district staff to learn more about each student and his or her academic, health, social, or environmental challenges. The Advocate makes phone calls, has face-to-face conversations, develops attendance incentives, and helps to educate parents about the importance of attendance. When health, housing, or other issues are identified, the Advocate engages the other staff of the Center to address the family’s needs.
• **Relevance to the proposed project:** By the end of the first year of this work, the Attendance Advocate will have had more than 300 conversations with parents and caregivers of chronically absent students. While there is not yet reliable data to assess the impact on attendance, this is a new approach that is likely to have an impact not only by reducing chronic absenteeism and increasing attendance, but by helping to identify students and families that may need additional coordinated services.

• **Implementation plan and timeline:** The Attendance Advocate position is fully funded through the 2020-21 school year by the above-referenced grant. Funding from the Full-Service Community Schools grant will fund the position at 50% in Years 3 through 5 to continue to engage families at the four target schools.

d. **Ensuring the Health and Well-Being of Students and Families.**

The negative effects of poor health on student outcomes are well documented. (Ickovics, Carroll-Scott et al., 2014). In PUSD, the physical and mental health challenges students face can manifest themselves in low attendance, chronic absenteeism, low levels of academic achievement, and behavioral problems.

i. **Health Screenings.**

With funds from the California Department of Education Student Support and Academic Enrichment grant, PUSD is in the process of purchasing digital equipment that will enable school nurses to screen more children for vision, hearing, and other potential health problems that can adversely affect their academic achievement. The new vision
and hearing screening devices will be portable, allowing school nurses to examine students at almost any location. Spot vision screeners give indications within seconds of five conditions and prepare for export a one-page screening result certificate for each student to encourage follow-up care. No eye charts are needed, which allows for easier examination of all students including those with special needs. The digital audiometer is similarly portable and effective. The devices capture meaningful results and data in a much shorter time and with greater accuracy, which will allow many more students to be screened. One of each - vision and hearing - will be purchased for the 12 schools nurses who serve the entire district. To measure students’ weight and body-mass- index (BMI), PUSD is purchasing a Professional BMI Digital Scale for each campus. In 2017-18, 6,985 students in grades K, 2, 5, 8 and 10 were screened for vision and hearing, and 4,642 students in grades 5, 7 and 9 were screened for BMI. 210 (3%) students were found to have problems with their hearing and vision, and 35 were referred for services. Young & Healthy also conducts dental screening for all PUSD students in grade 2 and provides referrals for free dental services.

- **Relevance to the proposed project:** By screening more students the target schools with equipment that produces more accurate results, this activity is likely to have an impact by reducing unaddressed health needs in the target population.

- **Implementation plan and timeline:** Beginning in Year 1 and continuing throughout the project period, health screenings at the target schools will be expanded to include all students in Grades 1 and 6. Parents of students who are identified as in need of further medical examination or treatment will be notified to consult a physician or specialist. Those who do have access to medical care
will be referred to Young & Healthy which will arrange for doctor visits and
hearing devices at no cost. Vision2Learn, one of the partners in this project, will
assist with screenings and provide free prescription glasses to any student who
needs them.

ii. Enrollment in Health and Wellness Programs

• **Promising Evidence:** Since 2013, the number of families of PUSD students who
have health insurance through private insurance, Covered California, and Medi-
Cal has increased dramatically through the partnership with Young & Healthy.
This has led to better health outcomes across the district, including a reduction in
serious unaddressed conditions in students. The partnership with the City of
Pasadena Public Health Department has also led to an increase in the number of
eligible families who are enrolled in Cal Fresh, California’s food and nutrition
assistance program for low-income families. The Nutrition Education and Obesity
Prevention program, also a partnership with the City of Pasadena, and the
district’s federally-funded Farm to School program has led to a documented
increase in consumption of fresh fruits and vegetables by students and families
and a steady decline over the last five years in the percentage of PUSD students
who are overweight or obese.

• **Relevance to the proposed project:** By focusing continued efforts in this area on
the four target schools, this program is likely to have an impact on the target
population by increasing parent and caregiver awareness of these benefits and
assisting them in enrolling, staying enrolled, and using them effectively to benefit
themselves and their families.
• **Implementation plan and timeline:** PUSD and its partners will continue to provide these existing services throughout the grant period.

iii. **Referrals for Direct Care**

• **Promising Evidence:** PUSD’s well-established partnerships with Young & Healthy, the organizational members of the Pasadena Mental Health Consortium, and the City of Pasadena Public Health Department and Los Angeles County Department of Mental Health enable more than 700 students -- the majority of them from low-income, uninsured and underinsured families -- to receive direct medical, dental, and mental health care services from professional providers every year. PUSD School Nurses also refer about 800 students to their own physicians each year. PUSD is also one of the few districts in Southern California to employ a full-time Asthma Resource Nurse and a full-time Substance Abuse Counselor (both funded by private foundation grants) who provide training for teachers, staff, and nurses and direct services for students and families.

• **Relevance to the proposed project:** By focusing continued efforts in this area on the four target schools, this program is likely to have an impact on the target population by increasing the number of students and family members who receive vital medical and mental health services. Students who are identified as having or at risk of developing certain serious conditions that interfere with their ability to attend school regularly and succeed academically, will be referred to specialized education, counseling, and support provided by the Huntington Hospital.

• **Implementation plan and timeline:** Beginning in Year 1 and continuing throughout the project period, PUSD in partnership with the Huntington Hospital
will provide a structured four-session diabetes education and prevention program at the Madison Center for Student & Family Services for students identified as obese and their families. It will include targeted education, nutrition and meal planning (including cooking demonstrations in the Center’s kitchen) and physical activity. Nurses from the Hospital will work with the PUSD Asthma Resource Nurse and School Nurses at the targeted schools to monitor students with asthma and reach out to parents caregivers as necessary.

e. Parent Engagement

Families and caregivers are essential players in a student’s academic achievement and have significant influence on whether or not they succeed. By empowering and educating the caregivers of ‘under-performing’ youth, a more stable and consistent support system is established for these students. Caregivers of these students can be active participants in their youth’s education and advocate for their needs, furthering their chances of academic success (Park, Holloway, 2017.)

i. Parent Education.

- Promising Evidence: Through its Adult Education Program and Family & Community Engagement Department, PUSD has offered a variety of classes for parents of students and members of the community at sites including the Madison Center for Student & Family Services and at Washington Elementary School for the past five years. At these sites alone, more than 200 adults participated last year in classes ranging from GED Preparation, English as a Second Language, CPR Certification, ServSafe (food handling) Certification, and career skills and
preparation classes in health care, and construction. Specific parent education classes included cyber safety, supporting children’s social-emotional needs, homework help, college prep, child development, and effective discipline.

- **Relevance to the proposed project:** The existing level of participation in these classes indicates that there is a high demand for parent and adult education among the targeted population, and that an expansion of these services to an additional site will have an impact on more parents and families.

- **Implementation plan and timeline:** Beginning in Year 1 of the project, PUSD offer parent and adult education classes at the Eliot Center for Student & Family Services, and will continue the existing programs at Madison and Washington. Also in Year 1, PUSD will implement the Incredible Years for Parents at the two target elementary schools. The program provides parents of children ages 3 to 8 with skills to better manage behavioral problems by creating a home environment that is conducive to positive social and educational outcomes. PUSD staff of the Office of Child Welfare, Attendance and Safety as well as the Center Coordinators will be trained by the provider staff to offer the program in subsequent years. Beginning in Year 1 and expanding in subsequent years, PUSD and Pacific Oaks College will implement Family Reading and Storytelling Events at the three Centers to engage parents and children in multiple forms of literacy in both their first language and in English. Books that support reading out loud at home, independent reading by both children and adults, and that are aligned to the Leveled Literacy Interventions will be distributed at these events.
ii. Leadership Development

- **Promising Evidence:** PUSD Parents and caregivers who are regularly active at their children’s schools through established councils and committees as well as informal parent groups report that they feel the schools and the district as a whole are responsive to their needs and the needs of their children. These parents also tend to be more engaged with their children’s education at home -- e.g., providing them with homework help and encouragement -- and are more likely to enroll their children in out-of-school academic support and enrichment programs.

- **Relevance to the proposed project:** The total number of parents and caregivers who are active at this level at the targeted schools is very low, with only 10 to 15 parents at each school. By providing additional parents at these schools with the opportunity to develop the knowledge and skills to become active and empowered advocates for themselves and their children’s education and well-being, the program will have a likely impact on the target population.

- **Implementation plan and timeline:** In Year 1, the Center for Community & Social Impact at Pacific Oaks College in partnership with the district will develop a leadership development curriculum and classes. The program will recruit 20 parents from the four target schools at the end of Year 1, who will participate in 18 two-hour sessions and then in fieldwork (i.e., participation in their children’s schools) and evaluation in Years 2 and 3. In Years 4 and 5 of the project, these parents recruit additional parents, whom they will train as peers and mentor, under the guidance and with the ongoing support of Pacific Oaks staff and faculty.
(C) ADEQUACY OF RESOURCES

(1) Relevance and commitment of the partners.

The majority of the partners in this project are currently providing existing services to the target population and will continue to provide the same level of services, expanding as necessary to address individual needs of students, families, teachers, and staff. Other partners have committed to expanding services, and these partners, their current and committed services, and the total value of their in-kind support are shown in the table below:

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>SERVICES</th>
<th>COMMITMENT</th>
<th>5-YEAR VALUE OF IN-KIND MATCH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young &amp; Healthy</td>
<td>Medical &amp; dental services; dental screening; student &amp; family health education; enrollment in health insurance; professional development and support in trauma-informed practice</td>
<td>Current partner; services will expand to meet demand as necessary.</td>
<td>$787,500</td>
</tr>
<tr>
<td>Pasadena Mental Health Consortium</td>
<td>Mental health services</td>
<td>Current partner; services will expand to meet</td>
<td>$250,000</td>
</tr>
<tr>
<td>For the target schools,</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
the specific members are Hathaway-Sycamores, Foothill Family Services

<table>
<thead>
<tr>
<th>Organization</th>
<th>Description</th>
<th>Current partner; services will expand to meet demand as necessary.</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Los Angeles County Department of Mental Health</td>
<td>Mental health services support and training.</td>
<td>$250,000</td>
<td></td>
</tr>
<tr>
<td>University of Southern California, School of Social Work</td>
<td>MSW interns to support staff and students; professional development and support for trauma-informed practice</td>
<td>$100,000</td>
<td></td>
</tr>
<tr>
<td>PasadenaLEARNs</td>
<td>After school and summer academic support and enrichment programs at all PUSD schools.</td>
<td>$245,700</td>
<td></td>
</tr>
<tr>
<td>Partner</td>
<td>Services</td>
<td>New partnership</td>
<td>Cost</td>
</tr>
<tr>
<td>--------------------------</td>
<td>--------------------------------------------------------------------------</td>
<td>-----------------</td>
<td>-------</td>
</tr>
<tr>
<td>Huntington Hospital</td>
<td>Education, counseling and support for students with or at risk of serious illness and their families; support for school nurses.</td>
<td>New partner and service</td>
<td>$125,000</td>
</tr>
<tr>
<td>Pacific Oaks College</td>
<td>Professional development for staff of Center for Student &amp; Family Services; Leadership Development Program for parents; Family Reading &amp; Storytelling Events</td>
<td>New partner and services, paid in part by the FSCS grant</td>
<td>$40,000</td>
</tr>
<tr>
<td>Vision to Learn</td>
<td>Assistance with vision screenings of additional students in target schools; free prescription glasses for students.</td>
<td>New partner and services.</td>
<td>$24,000</td>
</tr>
</tbody>
</table>

Memoranda of Understanding, Contracts for Services, and Letters of Commitment from all of the partners are included in the attachments.

(2) Costs are reasonable in relation to the number of persons to be served and to the anticipated results and benefits.
The project is expected to provide direct services a total of 1,800 students (unduplicated) and 500 parents, caregivers, family members and adult members of the community (also unduplicated) throughout the course of the grant period. The annual cost per recipient is $565, of which the federal share is approximately $217. The project also benefits students, parents, teachers and staff with professional learning, knowledge, and skills that will continue to benefit the target population and the community in general for years after the project has come to a conclusion. The project design coordinates many existing services that have been demonstrated to be effective and are supported by the PUSD budget and the in-kind support of the partners.

The staffing and management plan have been designed for the maximum benefit for the proposed budget. No new management positions will be required to implement the project. The proposed staffing additions all provide direct service to the target schools and population.

(D) QUALITY OF THE MANAGEMENT PLAN

It was recently estimated that staff at Pasadena Unified School District headquarters spend between 30% and 40% of their time in meetings dedicated to project management and administration. Therefore, the intent of management plan is not to create more structures and meetings, but to utilize the existing structures, meetings, and lines of communication to ensure that the project objectives are met on time and within budget and without duplicating other efforts.

PUSD has a proven track record of successfully managing and reporting on federal, state, and local government agency grants of this size and scope, and larger. These include two Magnet School Assistance Grants from the U.S. Department of Education as well multiple grants
from the California Department of Education, including Student Support and Academic Enrichment grant, Learning Communities for School Success, and After School Safety and Enrichment for Teens (ASSETs), and Educating Homeless Children & Youth; and the Community Development Block Grant administered by the City of Pasadena.

(1) Responsibilities, timelines, and milestones and plans for monitoring progress.

- The project builds on existing, highly functional programs and partnerships described elsewhere in this proposal. Staff who manage these programs already meet and communicate regularly to monitor progress and address problems.

- To establish protocol, milestones, and monitor progress, PUSD and its partners will establish a School/Community Project Leadership Team that will meet quarterly throughout the grant period to ensure that all services are aligned and meeting grant objectives and are within budget. It will include all PUSD management staff identified in this section, the three Center for Student & Family Services Coordinators, as well as key partners, including representatives of Young & Healthy, the City of Pasadena Office of the Young Child and Public Health Department, the Los Angeles County Mental Health Department, and Public Works, and the external project evaluator.

- There will be a work group at each of the Center for Student and Family Services comprised of center staff, principal(s), assistant principal(s), teachers and coaches.

- The staff of the three Centers for Student and Family Services will together meet monthly to monitor their specific objectives, share successes and challenges, and review the status of case managed students and families. Parents, local community
leaders and businesses will be engaged to ensure all stakeholders are represented in the project.

- Timelines, milestones and plans are outlined in the following chart and are discussed in detail as well in section (b) Quality of the Project Services.

<table>
<thead>
<tr>
<th>Plan</th>
<th>PUSD Departments</th>
<th>Partnerships</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination, Integration and Access to Services</td>
<td>Professional Development</td>
<td>Center Staff Health Office, Families in Transition Office of Child Welfare, Attendance and Safety</td>
<td>Center for Equity and Community Inclusion at Pacific Oaks</td>
</tr>
<tr>
<td>Academic Support, Intervention and Training</td>
<td>Leveled Literacy Intervention</td>
<td>Dir. Curriculum Instruction Center Coordinator Community Advocates Principal Teachers</td>
<td>Young and Healthy Options for Learning-Head Start City of Pasadena Public Health Dept.</td>
</tr>
<tr>
<td>Early Education</td>
<td>PUSD Director of Early Childhood Dept.</td>
<td>City of Pasadena Office of the Young Child</td>
<td>Year 1 – Address program coordination as members of the</td>
</tr>
</tbody>
</table>
| **Student Safety, Attendance and Support in School** | Schoolwide Behavioral Interventions and Support | Center Coordinator, Community Advocate, Principal Teachers | LA County Office of Education | Ongoing support of RtI, ART and CBT*  
Year 1 - Implementation of Good Behavior Games  
Year 2 - Implementation of Playworks |
|---------------------------------|------------------------------------------|----------------------------------------|-----------------------------|---------------------------------|
| **Social Emotional Learning**   | Social Emotional Learning                | Center Coordinator, Community Advocate, Principal Teachers | USC School of Social Work Young and Healthy | Ongoing support of trauma-informed care.  
Year 1 - Implementation Leader in Me for grades K-5* |
| **Attendance Counseling**       | Attendance Counseling                    | Attendance Advocate, Principals Teachers RtI Coaches District Staff |                             | Year 1 -5 – Outreach to families and coordination of services to reduce chronic absenteeism |
| **Health**                      | Health Screenings                        | PUSD Health Office                     | Young and Healthy           | Year 1 - Health screenings will expand to |
| Parent Engagement | Parent Education | PUSD Adult Education Program and Family & Community, Office of Child Welfare, Engagement Dept. Center Coordinators | Pacific Oaks College | Vision2Learn | all students grades 1 and 6

- Referrals for Direct Care
- PUSD Health Office, Asthma Resource Nurse, School Nurses
- Huntington Hospital
- Year 1 Diabetes education and prevention program for all students identified as obese and their families
- Increased monitoring of asthmatic students and reach out to caregivers as necessary

- Leadership Development
- Center for Community & Social Impact at Pacific Oaks
- Year 1 - 20 parents will participate in 18 2-hour training program.
- Year 2 - Field work and
College evaluation. Year 3 – 5 -Parents will recruit and train additional parents.

(2) **Time commitments of the project director and key personnel**

PUSD has clearly defined the responsibilities of the staff. The time commitment for each position included below represents time dedicated to the project.

- **Dr. Brian McDonald, Superintendent**, will provide oversight of the program and serve as the liaison between the district and the Board of Education, Executive Leadership Team, as well as all other external stakeholders.

- **Eric Sahakian, Assistant Superintendent, School Support Services will be the Project Manager** and responsible for the administrative and financial fidelity of the grant project, ensuring it is compliant with all federal, state and district policies. Mr. Sahakian will lead the team. He will supervise all project staff, including the external evaluator. Mr. Sahakian will make ongoing project information, findings, and products available to the to ensure sharing of knowledge gained from the efforts of the grant program. Mr. Sahakian will work closely with the external Evaluator to collect key program information helpful in assessing the extent to which the project activities and services are meeting their goals and objectives. Mr. Sahakian will spearhead the outreach and marketing efforts, both to ensure all interested parties within our community are aware of the services provided under the program, as well as the resources to provide mental health services to students and family members in need. Mr. Sahakian will spend 25% of his time on this grant project.
• **Ann Rector, Director of Health, Wellness, and Nutrition** (existing position), manages all of the PUSD’s health and wellness programs and will provide direct supervision to the Center Coordinators and Registered Nurse assigned to each school, as well as serve as a liaison with the Department of Health and community providers for health, including oral health, vision and hearing. Ms. Rector will work closely with the Director of Mental Health. Ms. Rector will spend 20% of her time on this grant project.

• **Lara Choulakian, LCSW, Director of Mental Health** (existing position), manages all aspects of PUSD’s mental health services, which include school psychologists, School Social Workers, and mental health interns. She is the liaison for the Department of Mental Health and all mental health agencies working in PUSD schools. She oversees evidence-based practices and curriculum related to mental health, including Youth Mental Health First Aid, and Cognitive Behavior Therapy. She will work closely with the Center Coordinators, Director of Health, Wellness and Nutrition and Center schools to access mental health services. Ms. Choulakian will spend 20% of her time on this grant project.

• **Helen Hill, Director of Curriculum, Instruction and Professional Development** (existing position), oversees curriculum and instruction, with a focus on English Language Arts, Literacy and Kindergarten Readiness. She will work closely with the Center Coordinators to provide additional support as needed. Ms. Hill will spend 20% of her time on this grant project.

• **Eric Alvarez, Coordinator, Center for Student and Family Services,** (one existing position) To be hired: two additional Center Coordinators (3 FTE). Mr. Alvarez and the other two Center Coordinators will be responsible for the coordination of pipeline services (existing and new) at their respective school sites. The coordinators will become part of the
leadership of the school to ensure the project is fully integrated into the operation and instruction of the school. Coordination will include maximizing applicable facilities, identifying and expanding partnerships within the community, community outreach and education, and case management on referrals. The Coordinators will model appropriate case management practices with students and families in need of assistance and work with school-based clinicians, school staff and/or referral resources to ensure coordination and communication to enhance appropriate student behavior and successful academic performance of students. Coordinators will model and maintain open communication and establishes working relationships with school staff, other community service providers working within the school community and to increase access and avoid duplication. Coordinators will manage all trainings, seminars, and lectures for parents and families, which will include securing guest speakers, registration, and attendance. The Center coordinators will spend 100% of their time on the grant project.

- **Vanessa Torres, PBIS and Evidence Based Interventions Coordinator** (existing and new position), manages the implementation and operation of Positive Behavior Interventions and Supports as well as oversees all PUSD pro-social evidence-based practices, which include Safe School Ambassadors, Safe Dates, Peace Over Violence, Response to Intervention, Restorative Practices, and Second Step. Ms. Torres will work closely with school sites for the training and implementation of the Social and Emotional curriculum and practices. Ms. Torres will spend 20% of her time on this grant project.

- **Center of Student Family Services Community Advocates** (3.5 existing positions) and two new full time positions to be hired (5.5 total FTE). Community Advocates work directly with school and district staff to identify low income students and families in need
of particular services to alleviate barriers to success; client identification and selection, intake and assessment; case management planning; referrals to services; advocacy, ongoing monitoring and evaluation, and reporting; assist teachers, administrative staff and other school personnel in providing liaisons with parents and students.

• **Stella Franco-Allen, Attendance Advocate** (existing position) 1 FTE Ms. Franco-Allen is responsible for providing guidance and advocacy to students to ensure they meet attendance requirements and help facilitate the concurrent enrollment process and improve student achievement and graduation rates. She will initiate phone calls and meeting with parents/guardians, students regarding attendance and tardinesses; meet with school principals and staff to support their efforts to improve student attendance. Ms. Franco-Allen will spend 50% of her time on the grant project.

(E) QUALITY OF THE PROJECT EVALUATION

(1) Methods of evaluation are thorough, feasible and appropriate

The proposed evaluation will combine both outcome and process measures that are incorporated in a comprehensive quantitative and qualitative evaluation of project implementation. The goal of the evaluation is threefold: (1) to use the baseline analysis of community needs identified at the four FSCS schools and the disparities in key measures within this group of schools to inform initial project implementation priorities, (2) to inform and involve project staff in ongoing reflection and improvement of project implementation, and (3) to measure the impact of project activities through quantifiable outcome measures. The evaluation will measure the impact of the FSCS program activities on student academic, health and well-
being; family involvement and community wellness; and school performance indicators aligned to the project’s goals.

Project goals include: 1) improved coordination of and access to services, 2) increased academic achievement of students attending the target schools, 3) well-attended, safe and supportive schools, 4) healthy students and families and 5) actively engaged parents and families in target schools. Qualitative data collection and process measures will provide the context to understand how FSCS program implementation is related to the observed, quantifiable and reported results. The key research questions for the evaluation incorporate the collection of data to assess the following three dimensions: 1) process (extent to which implementation has resulted in improved coordination of, access to and delivery of services at target school sites), 2) sustainability (extent to which evidence of systems change and reallocation of school and partner resources will support the continuation of the most effective components of service delivery and new practices at target school sites as a result of project activities), and 3) outcome measures (extent to which quantitative outcome measures can be connected to or associated with project activities and evidence of systems change at target school sites).

The quantitative outcome measures identified for the evaluation are aligned to the project’s goals and objectives related to the priority for FSCS initiatives to result in improved coordination and access to services for students and families attending the target school sites. The measures are listed in the table found below and include the source of data for each measure. This project design incorporates the use of the model Multi-Tiered Systems of Support (MTSS), an integrated, comprehensive framework that focuses on core instruction, differentiated learning, student-centered learning, individualized student needs, and the alignment of systems necessary
for all students’ academic, behavioral, and social success. With the placement of Centers for Student and Family Services at the target schools, which are in chronically underserved neighborhoods, this initiative intends to make implementation of the core components of MTSS (universal screening of all students, multiple tiers of instruction and support services, and an integrated data collection and assessment system to inform decisions) more universally available and accessible on site for both school and partner staff to be able to readily connect services with students and their families.

With the ultimate goal for schools to become neighborhood hubs that connect academic outcomes with family and community health and access to services, these core components of the MTSS model provide a natural framework for the evaluation to be embedded in project activities and implementation. The evaluator will be closely connected to and informed of developments in the integrated data collection and assessment system that supports the MTSS model, providing valuable information to the evaluation about how the Centers are providing opportunities to support both academic achievement and student and family health and wellness.

Quantitative measures will be used to track the progress of students in the K-8 pattern of the four target schools including two elementary and two middle schools. The evaluation will also include information from the kindergarten readiness assessment as part of the baseline and for ongoing project implementation. At the outset of the project and during the planning, the evaluator will coordinate with project implementation staff and partners and the on-site Community Schools Coordinators at the Centers for Student and Family Services to establish data collection protocols and to develop a database for collection of information regarding activities and the provision of services provided through these centers. The project evaluator will
attend regularly scheduled progress meetings as implementation priorities and planning are
clarified and refined in order for the evaluation to ensure a close connection to on-the-ground
priorities. Where possible, the evaluator will connect with existing data collection systems for
health and wellness providers to provide information to the evaluation (for tracking of health
screenings, referrals and the like). In addition, the evaluator will connect this data collection
process with school site personnel so that information regarding implementation and data that is
already available is shared and understood by school and partner personnel. Where needed, the
evaluator will support data sharing and confidentiality protocols so that the project
implementation team can work together to confidently share critical information necessary to
assess program implementation while being mindful of student and family privacy. This is an
essential planning component of the evaluation as the information about project activities must
result in accurate reporting for the Annual Performance Report requirements and assess both
duplicated and unduplicated counts of involvement in various grant services as described in the
table that follows.

(2) Methods of evaluation include objective performance measures related to the intended
outcome of the project and produce quantitative and qualitative data

The primary evaluation method will involve analyzing and tracking the progress of
students, families and community members at the four target schools. The evaluation will track
changes in academic performance for students overall and disaggregated for relevant subgroups
(e.g. race/ethnicity, socio-economic status, English Learners, Students with Disabilities,
homeless and students in unstable housing, and foster care youth) using both data obtained from
public sources and PUSD. As shown in the table below, we have identified sources for all
quantitative outcomes from a variety of district, state and other governmental sources. In
addition, project activities will be tracked in a customized database established at project outset
for reporting and evaluation purposes. Survey data from the Healthy Kids survey collected by
PUSD to measure social and emotional well-being of students and parents will also be
incorporated in the project evaluation as a measure of overall school stakeholder well-being.
PUSD administers the Healthy Kids survey to parents and students. This survey will be
disaggregated and analyzed by the evaluator for the four schools identified for the FSCS grant so
that baseline measures specific to these schools can be established.

Each year, the evaluation will also incorporate an annual one-day site visit to each of the
participating school sites and Centers including interviews and focus groups of key personnel
and stakeholder groups. These school site visits will be augmented by interviews of key
stakeholders among the Consortium of partners regarding implementation and oversight of the
project. Instrumentation and protocols developed by the evaluator for these site visits will
incorporate key project goals and provide qualitative information regarding implementation
barriers and successes as the new Centers and initiatives roll out. The evaluator will work with
project staff to collect data for reporting on a quarterly basis after the database and data
collection protocols have been established. The evaluator will be available to develop additional
surveys or other tools to support the FSCS coordinators on site as needed in establishing and
understanding stakeholder feedback on new services and programming.

Full Service Community Schools Evaluation Plan Matrix
<table>
<thead>
<tr>
<th><strong>Quantitative Outcome Target</strong></th>
<th><strong>Data Sources</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective 1: Students, families, and community members have greater access to coordinated, integrated services</strong></td>
<td></td>
</tr>
<tr>
<td>Increase by 10% annually the number of students and adults served, including case management at existing Madison Center.</td>
<td>Project records-database</td>
</tr>
<tr>
<td>Serve 40 students and 40 adults in Year 1 at each Eliot and Washington Centers and increase by 10% each year.</td>
<td>Project records-database</td>
</tr>
<tr>
<td><strong>Objective 2: Children enter Kindergarten prepared developmentally and socially</strong></td>
<td></td>
</tr>
<tr>
<td>Increase by 5% annually the percentage of children who are “on track” for Kindergarten</td>
<td>Early Development Instrument</td>
</tr>
<tr>
<td><strong>Objective 3: Increase students’ English language reading and writing fluency</strong></td>
<td></td>
</tr>
<tr>
<td>Increase by 5% annually the percentage of students meeting or exceeding standards on CAASPP ELA/literacy standardized test</td>
<td>CAASPP/California Department of Education</td>
</tr>
<tr>
<td><strong>Objective 4: Improve students’ academic skills in core curriculum</strong></td>
<td></td>
</tr>
<tr>
<td>Increase by 5% annually the percentage of students meeting or exceeding standards on CAASPP Math standardized tests</td>
<td>CAASPP/California Department of Education</td>
</tr>
<tr>
<td><strong>Quantitative Outcome Target</strong></td>
<td><strong>Data Sources</strong></td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td><strong>Objective 5: Improve student self-awareness and self-regulation, resulting in a reduction in disruptive behaviors</strong></td>
<td></td>
</tr>
<tr>
<td>Decrease number of suspensions by 5% annually</td>
<td>PUSD Data/CALPADS California Dashboard</td>
</tr>
<tr>
<td><strong>Objective 6: Increase knowledge among all teachers and staff of effects of trauma on student behavior and achievement</strong></td>
<td></td>
</tr>
<tr>
<td>Decrease disparities in disciplinary action among student sub-groups</td>
<td>PUSD Data/CALPADS California Dashboard</td>
</tr>
<tr>
<td><strong>Objective 7: Improve student and staff safety and security</strong></td>
<td></td>
</tr>
<tr>
<td>Decrease by 10% annually the number of incidents of aggressive behaviors and bullying</td>
<td>PUSD Data</td>
</tr>
<tr>
<td>Decrease by 10% annually the percentage of students who do not feel safe at school</td>
<td>Healthy Kids Survey</td>
</tr>
<tr>
<td>Decrease by 10% annually the percentage of students who report having been frequently harassed or bullied</td>
<td>Healthy Kids Survey</td>
</tr>
<tr>
<td><strong>Objective 8: Increase outreach, engagement and counseling of parents chronically absent students</strong></td>
<td></td>
</tr>
</tbody>
</table>
### Quantitative Outcome Target

<table>
<thead>
<tr>
<th>Outcome Description</th>
<th>Data Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decrease by 5% annually the percentage of students who are chronically absent.</td>
<td>PUSD Data/CALPADS</td>
</tr>
<tr>
<td></td>
<td>California Dashboard</td>
</tr>
</tbody>
</table>

**Objective 9: Expand vision, hearing, dental and weight screenings of students**

Expand screening to all students in grades 1 and 6; increase by 5% annually the number of students who receive treatment or referrals for previously undiagnosed health problems. (project records/database)

**Objective 10: Increase access to and participation in health care, healthy food resources, nutrition education, and physical activity**

At end of grant, 100% of eligible families will be enrolled in private or public health insurance programs and will visit medical professionals regularly (PUSD/PPHD, project records/database).

By end of grant, 80% of eligible families will be enrolled in the public food assistance program (CalFresh) (project records/database).
<table>
<thead>
<tr>
<th>Quantitative Outcome Target</th>
<th>Data Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>50 high-risk students and family members will participate each year in targeted health education and counseling</td>
<td>Project records/Database</td>
</tr>
</tbody>
</table>

**Objective 11: Increase treatment of unmet health needs**

Increase by 6% annually the number of students and family members who receive direct services from health care providers and counselors.

<table>
<thead>
<tr>
<th>Objective 12: Improve parent/caregiver understanding of how to support their child’s education and provide training to become engaged citizens</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase by 5% annually the percentage of parents/caregivers who participate in classes, workshops, and education programs</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Objective 13: Increase parent involvement in school activities and associations</th>
</tr>
</thead>
</table>
**Quantitative Outcome Target** | **Data Sources**
--- | ---
Increase by 5% annually the percentage of parents/caregivers who participate in a school activity | Project records/Database

**Objective 14: Empower parents/caregivers and community members to become advocates for their children, families and community**

| 20 parents/caregivers and community members graduate from Leadership Development program in Year 2; Graduates mentor 10 additional parents in each year thereafter | School records/Advisory council information |

Annual performance targets for student, parent and community participation have been set in the goals, objectives and outcomes section of the Quality of Project Design. These performance targets will be tracked by project staff and collected by the evaluator for reporting on the Annual Performance Report as required by the USDE. In addition, the evaluator will produce an annual implementation report with additional qualitative data and survey analysis to inform and improve project implementation. These reports will provide key information to the school district and its partners as it establishes a sustainability plan in the fourth year of the grant. Regular meetings and facilitation of evaluation report data and findings are included in project implementation planning and will support ongoing reflection, improvement and sustainability of the key tenets of the MTSS framework at the four target schools, providing a model for the district in other high need locations.
(3) Methods of evaluation will provide valid and reliable performance data on relevant outcomes

Our proposed evaluator is Public Works, a 501(c)(3) non-profit research and evaluation firm headquartered in Pasadena with more than 20 years of education and related program evaluation experience. Public Works has a long track record of evaluation with PUSD and other local school districts and government agencies in a wide range of school improvement, social service and support programs and workforce development initiatives.

Public Works is committed to research and evaluation that helps to better understand and implement solutions that work. Through this commitment to research and practice, ten years ago Public Works founded an independent charter school in the Pasadena Unified School District specifically to better understand and serve the students in Pasadena who were struggling the most. Called Learning Works, this school works in partnership with PUSD to serve students who are no longer attending its schools experiencing multiple complications to re-enrolling and completing their education such as pregnancy, parenting, poverty, interactions with law enforcement and the juvenile justice system, homelessness, foster care and more. Over the past ten years, Learning Works developed its own community school model, which incorporates a set of principles and unique approaches to support the student population and has graduated nearly nine hundred students who have achieved a high school diploma. This experience has provided the organization with a valuable lens on the needs of the schools and community members that this project aims to serve.

Public Works evaluated the implementation of an FSCS grant in the San Fernando Valley of the Los Angeles Unified School District and has direct experience with the reporting and
evaluation requirements for this grant. In addition, Public Works evaluation experience includes the range of programs of interest in this proposal including counseling and mental health, graduation and dropout prevention initiatives, after school programming, Safe Schools/Healthy Kids, GEAR UP middle and high school transitions. Public Works has also evaluated the local implementation of new California initiatives to improve youth diversion and re-entry programs for incarcerated and probation youth and adults.

The PW research staff understands the complicated nature of implementation of FSCS initiatives and has worked collaboratively with the school district and many of the partners it has identified to support this project. Based on this understanding, PW’s experience with federal reporting requirements, California data systems and PUSD school improvement efforts, this project will be supported in its planning process so that data collection, analysis and reporting can begin immediately after the funding is awarded. In addition, the evaluation measures incorporate a range of valid and reliable instrumentation including state testing data and the Healthy Kids survey, used throughout California to support various reporting for different funding streams and the California Dashboard local measures under the ESSA legislation.
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