

Los Angeles Unified School District, Los Angeles, CA

Over the 1990s, LAUSD pioneered a variety of efforts to move student supports in new directions. For a variety of reasons, the work stalled. There are still important vestiges of new directions in place and many lessons to share.

In the mid 1990s, the Division of Student Health and Human Services took the lead in developing a plan for improving "learning supports." The Division proposed: to (a) restructure the central office administrative organization to place all programs related to Learning Supports (including Special Education) under the leadership of one administrator and (b) incorporate a substantial focus on the Learning Support Component into all stakeholder development activity. To these ends, they adopted a seven area framework to guide coordination and integration of existing programs and activities. The seven areas were:

- C Classroom Learning Support,
- C Learning Environment and School Culture,
- C Support for Student Transitions and Mobility,
- C Parent Involvement,
- C School and Community Safety (prevention and crisis intervention),
- C Health and Social Services
- C Community and Volunteer Assistance.

And they encouraged all clusters and schools to support development of Cluster/Complex Resource Coordinating Councils and School-Site Resource Coordinating Teams "because such teams provide key mechanisms for enhancing the Learning Support component by ensuring resources are mapped and analyzed and strategies are developed for the most effective use of school, complex, and District-wide resources and for appropriate school-community collaborations."

In 1998, the District's Board passed a policy resolution endorsing the concept of LEARNING SUPPORT to "break down the barriers to student achievement." The resolution stated that: "a component to address barriers to student learning and enhance healthy development [should] be fully integrated with efforts to improve the instructional and management/governance components and be pursued as a primary and essential component of the District's educational reforms in classrooms, schools, complexes/clusters, and the central office level."

Evaluation of the Student Health and Human Services Structuring Process



Submitted to:
Student Health & Human Services Division
Los Angeles Unified School District

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Evaluation and Training Institute
Los Angeles, California

**Policy Resolution Proposed to and Passed by the
Los Angeles Unified School District's Board of Education in 1998**

Whereas, in its "Call to Action", the Los Angeles Unified School District has made clear its intent to create a learning environment in which all students succeed;

Whereas, new governance structures, higher standards for student performance, new instructional strategies, and a focus on results are specified as essential elements in attaining student achievement;

Whereas, a high proportion of students are unable to fully benefit from such reforms because of learning barriers related to community violence, domestic problems, racial tension, poor health, substance abuse, and urban poverty;

Whereas, teachers find it especially difficult to make progress with the high proportion of youngsters for whom barriers to learning have resulted in mild-to-moderate learning and behavior problems;

Whereas, many of these youngsters end up referred for special services and often are placed in special education;

Whereas, both the Los Angeles Unified School District and various community agencies devote resources to addressing learning barriers and initial processes have been implemented to reform and restructure use of their respective resources including exploring strategies to weave District and community efforts together - in ways that can overcome key barriers to student achievement;

Whereas, a comprehensive, integrated partnership between all District support resources and community resources will provide the LEARNING SUPPORT necessary to effectively break down the barriers to student achievement; now, therefore, be it Resolved, that the Board of Education should adopt the following recommendations made by the Standing Committee on Student Health and Human Services:

1. The Board should resolve that a component to address barriers to student learning and enhance healthy development be fully integrated with efforts to improve the instructional and management/governance components and be pursued as a primary and essential component of the District's education reforms in classrooms, schools, complexes/clusters, and at the central office level.
2. In keeping with the California Department of Education's adoption of the unifying concept of **Learning Support**, the Board should adopt this term to encompass efforts related to its component for addressing barriers to student learning and enhancing healthy development.

(cont.)

3. In adopting the concept of **Learning Support**, the Board should adopt the seven area framework currently used by the Division of Student Health and Human Services to guide coordination and integration of existing programs and activities related to school, home, and community
4. The Board should direct the Superintendent to convene a working group to develop a plan that promotes coordination and integration of the **Learning Support** component with instruction and management reform efforts at every school site. This plan would also clarify ways for complex/cluster and central office operations to support school site efforts (e.g. helping schools achieve economics of scale and implement practices that effectively improve classroom operations and student learning). The plan would also focus on ways to further promote collaboration with communities at the classroom, school, complex/cluster, and central office levels. Such a plan should be ready for implementation by Spring 1998.
5. To counter fragmentation stemming from the way programs are organized and administered at the central office, the Board should restructure the administrative organization so that all programs and activity related to the Learning Support including Special Education are under the leadership of one administrator. Such an administrator would be charged with implementing the strategic plan developed in response to recommendation #4.
6. The Board should direct those responsible for professional and other stakeholder development activity throughout the District to incorporate a substantial focus on the Learning Support component into all such activity (e.g. all teacher professional education, training activity related to LEARN, the Chanda, Smith Special Education Consent Decree, early literacy programs).
7. To facilitate continued progress' related to the restructuring of student health and human services, the Board should encourage all clusters and schools to support the development of Cluster/Complex Resource Coordinating Councils and School-Site Resource Coordinating Teams, Such Councils and Teams provide a key mechanism for enhancing the **Learning Support** component by ensuring that resources are mapped and analyzed and strategies are developed for the most effective use of school, complex, and District-wide resources and for appropriate school-community collaborations.

I. Executive Summary

This report presents an assessment of the restructuring process underway within the Student Health and Human Services Division of the Los Angeles Unified School District. The purpose of the report is to document the factors that explain and contribute to the effective implementation of the Restructuring Plan for Student Health and Human Services at three levels district, cluster or complex and school.

Overview

In April 1995, the LEARN implementation Task Force on Social Services submitted a plan to the Board of Education to restructure educational support programs and services in the Los Angeles Unified School District. The focus of the plan was to reduce barriers to student learning and performance by addressing the social, medical, and mental health needs of students and their families. To further the restructuring process, LAUSD applied for and received Elementary and Secondary Education Act (ESEA) Title XI waiver funds to hire an Organization Facilitator for each cluster. The Organization Facilitator's role is to provide technical assistance to all high school complexes and to help phase in the Student Health and Human Services component of education reform.

To date, LAUSD is the one of only a few school districts in the country to undergo such a comprehensive restructuring of health and human services. The district is also unique in that it established the Assistant Superintendent for Student Health and Human Services position, and a division dedicated to Student Health and Human Services.

Restructuring at the District Level

At the district level, the Board of Education Standing Committee on Student Health and Human Services provides broad level guidance for ongoing development of the restructuring effort. Committee members have diverse backgrounds and experience and as a result, they bring to the Committee their extensive expertise and viewpoints regarding coordinated health services issues. In particular, committee members represent organizations such as the LA County Board of Education, the Los Angeles Unified School District, United Teachers Los Angeles, the LA County Medical Association, LA County Department of Health Services, United Way, the Commission on Children, Youth and Families and the Children's Planning Council, among others.

In addition, members of the Student Health and Human Services Division staff represent the District at a variety of meetings at the local, county, state, and national levels. For example, Division staff regularly attend meetings of the Children's Planning Council, Healthy Start, the Commission on Children, Youth, and Families and the Organization of Chief State School Officers. The District's presence and participation in these local, state, and national meetings on

student health and human services serves to increase the awareness of individuals outside LAUSD to the Student Health and Human Services restructuring process.

Restructuring at the Cluster and School Levels

Currently, there are 27 Organization Facilitators throughout the District, one for each cluster. One of their main objectives as Organization Facilitators is to, act as agents of change for the restructuring process at the cluster and school levels. Among their responsibilities is helping establish Resource Coordinating Teams (RCT) at the school level and Resource Coordinating Councils (RCC) at the cluster level.

At the school level, the Resource Coordinating Team is responsible for the planning and implementation of school-based Health and Human Services Programs, including asset mapping and need assessment for their school community. At the cluster or complex level, the Resource Coordinating Council (RCC) is the decision-making body that implements and evaluates complex-based Health and Human Services programs at all levels, pre-Kindergarten to 12.

Central to the work done by the RCC and RCT is the amount and depth of collaborative efforts among the schools, cluster, district and outside agencies and organizations. To this end, the Organization Facilitators work to establish links among community organizations, district services and schools.

Summary of Findings and Key Recommendations

The following section summarizes the findings and key recommendations of our evaluation of the Student Health and Human Services restructuring process at the district, cluster or complex, and school levels.

District Level Findings

Unanimous adoption of the Learning Support' concept by the Board of Education is a significant step toward recognizing the role of coordinated services in improving student achievement. District support of the effort to coordinate services is crucial in order to bring the concept of Learning Support to the forefront of the dialogue regarding student achievement. It is hoped that the Board's unanimous recognition of Learning Support will be followed by a resolution to allocate the resources necessary to implement the Learning Support concept within the clusters and schools. In particular, the Learning Support concept should be included in district-wide staff development as well as regional and school site plans.

*Learning Support is a unifying term that refers to efforts to address barriers to student learning and enhance healthy child development. Learning support uses a seven area framework to guide coordination of programs related to school, home, and community.

The Board of Education's recognition of the Learning Support concept indicates that the District is ready to move beyond the elements outlined in the LEARN social services component and develop a strategic plan to link instruction, management, and health and human service issues District-wide. The concept of a coordinated services restructuring plan was generated by the LEARN reform efforts. By including a social services component in the LEARN plan, District officials acknowledged the conclusions of national research on educational reform and recognized the importance of restructuring and coordinating health and human resources within the District to ensure that all students are able to receive the Learning Support needed to succeed in the classroom. However, at this time, the coordinated services restructuring plan is moving beyond the ideas set forth in the LEARN document. The Board of Education unanimously adopted the concept of Learning Support. This concept seeks to link health and human service issues with efforts to improve instruction and management/governance at all levels of the District. As stated above, we believe this is a positive step toward recognizing the role of coordinated services in improving student achievement.

The Board of Education Standing Committee on Student Health and Human Services serves as a valuable resource to the Board of Education as well as Student Health and Human Service Division staff with regard to coordinated service issues. The Standing Committee on Student Health and Human Services brings in individuals with noted expertise in a variety of health and human service areas and the committee is unique in that it consists of several "outsiders" to LAUSD. This "outside" perspective is invaluable because it encourages Student Health and Human Services staff to critically examine and re-evaluate their efforts to coordinate and restructure services in the District. The committee operates under the leadership of two members of the LAUSD Board of Education and has a diverse membership including noted academicians, individuals from community organizations, and school district staff, among others.

Involvement in the Los Angeles County Service Plan Areas' (SPA's) has brought LAUSD closer to Los Angeles County agencies and has allowed for greater coordination of services. Organization Facilitators in the clusters have become very involved in the SPA's in order to help address service gaps in their geographic areas. In particular, several Organization Facilitators noted that their work with the SPA has helped them develop relationships with key players in the county and establish partnerships between county agencies and the clusters. For example, some Organization Facilitators mentioned that they were able to bring in needed mental health services to the clusters through their work and contact with individuals from the county Mental Health Department.

²The Service Plan Areas (SPA) were adopted by the LA County Board of Supervisors in 1993. Within each of the eight SPA's, the departments of Children and Family Services, Mental Health, Health Services, Public Social Services and Probation work together and with other non-county agencies such as LAUSD to promote and enhance effective coordination and integration of services and programs for children and youth.

"Turf issues" are an impediment to restructuring and coordinating existing services as well as identifying gaps in services. Some individuals at the district, cluster and school levels feel threatened by efforts to collaborate with outside agencies to provide services to students at school sites. This is especially true in situations in which individuals are brought in to provide services similar to those provided by school district staff or in cases in which outside agencies fail to adequately coordinate and communicate with personnel on campus before beginning work with students. A few school psychologists and counselors stated that some community agencies send under-qualified interns to school sites to deliver services. Often, psychologists, nurses, -and school counselors feel they have to supervise interns and as a result, their workload is heavier. Additionally, there is a perception among some schools that sharing resources with other schools may compromise or limit the services available to students and families. As a result, some school officials are reluctant to enter into partnerships.

Attendance at high level meetings regarding children's issues helps the District establish and maintain connections with various public and private organizations and develop partnerships to bring needed services to the schools within LAUSD. Student Health and Human Service Division staff represent the District at a number of meetings throughout the county, state, and nation. As a result, outside agencies and community-based organizations recognize the sincere efforts being undertaken by the District to improve and coordinate the delivery of services within the District and are aware of opportunities for partnership with LAUSD- In addition, the District's Central Office has undertaken a relatively new role in establishing interagency connections, providing local assistance, and providing technical assistance and training aimed at enabling individuals to address health and human service needs.

Recommendations

- The Assistant Superintendent of Student Health and Human Services and members of the Board of Education Standing Committee on Student Health and Human Services should lobby Board of Education members to allocate resources in order to effectively implement the Learning Support concept. Specifically, the Learning Support concept should be included in staff development training throughout the district. Learning Support is significant in that it establishes a comprehensive policy to address barriers to student learning.
- Student Health and Human Services Division staff should work with staff from the Divisions', of Instruction, Special Education, Child Development and Adult and Career Education, before and after school programs, as well as cluster and school administrators to establish a comprehensive plan to link student health and human services, instruction, and management/governance components throughout the District as part of the implementation of the Learning Support concept.
- Student Health and Human Services Division staff should continue outreach efforts throughout Los Angeles County, the State of California, and the nation. -Attendance at various local, state, and national meetings provides the district with the latest research and best practices in the area of coordinated health and human services.

Cluster Level Findings

Organization Facilitators have been particularly effective in increasing the awareness of schools and community organizations regarding opportunities for collaborative involvement. Many community organizations lack an understanding of how schools function and how outside organizations can effectively provide services to members of a school community. Additionally, most school staff lack the time or knowledge about community organizations necessary to conduct effective outreach. The Organization Facilitator has served as an effective bridge between schools and community organizations. As a result, school staff report that they are more aware of the resources available in the surrounding communities and community organizations are more aware of how to approach a school.

Healthy Start* can serve as a catalyst for collaboration and an initial tool to focus schools on the concept of coordinated services. Healthy Start requires schools to conduct a needs assessment and evaluate how Healthy Start can supplement what currently exists at a site. Additionally, some Organization Facilitators have found that the organization of a Healthy Start collaborative can serve as the foundation for the Resource Coordinating Council in a complex. However, it should be noted that Healthy Start funding is finite. Thus, it is necessary to establish a core framework for coordinated services within the complex or cluster that will remain in effect once Healthy Start has ended. The process of establishing such a framework is currently underway in each cluster. Each Organization Facilitator is working together with their Resource Coordinating Council to write a strategic plan for their family of schools. The strategic plans should assist Organization Facilitators in further developing-the Learning Support framework in each complex or cluster.

The roles and responsibilities of the Organization Facilitator are unclear. There is confusion among individuals throughout the District regarding the Organization Facilitator position. While the roles and responsibilities are clearly defined in the Plan for Restructuring Student Health and Human Services, stakeholders have different perspectives of the role of the Organization Facilitator. For example, some people believe that the Organization Facilitator is responsible for pursuing Healthy Start and other grants, while others feel that the Organization Facilitator's role is to bring additional services to school campuses. Additionally, individuals are confused as to where the Organization Facilitator fits in the District organizational structure. This misunderstanding stems from the fact that the Organization Facilitators are hired by the clusters but are also accountable to the Assistant Superintendent of Student Health and Human Services. Some Organization Facilitators reported that individuals at the cluster and school levels believe that the Organization Facilitators are "pushing a district agenda" or that they are part of "just another reform effort." As a result, these Organization Facilitators have had difficulty obtaining the "buy-in" of administrators and key staff in the clusters and schools.

*Healthy Start is an initiative funded by the State of California through a competitive grant process. Overall, the Healthy Start program seeks to assist schools and their collaborative partners to develop and improve comprehensive, integrated school-linked services and supports with a vision toward improving student achievement and the overall well-being of children. There are two types of Healthy Start grants available: planning and operational.

Recommendations

- Organization Facilitators and health and human service personnel should be encouraged to continue their efforts to coordinate and network with organizations and agencies outside of LAUSD.
- Organization Facilitators, health and human service personnel and cluster and school administrators should be encouraged to look beyond Healthy Start and continue work on a strategic plan to implement a long-term framework for coordinated services at the cluster and school levels.
- Efforts should be undertaken to clearly communicate the roles and responsibilities of the Organization Facilitator within the context of Learning Support to administrators and staff at the district, cluster and school levels.

School Level Findings

Community agencies are more aware of how to approach and effectively work with schools. Many schools have experienced difficulties conducting effective community outreach to obtain additional resources and services for students and their families. In many cases, school staff lack knowledge about the communities surrounding their schools. Familiarity with local resources is often limited to what they see as they drive to work each day. Additionally, principals and lead teachers are busy with administrative and teaching duties and may not have the time to conduct effective community outreach. Organization Facilitators have been very effective in bringing schools and community agencies together in order to provide needed services to students and families. The Organization Facilitators serve as a District contact person for community agencies interested in providing services to schools. As a result of these partnerships, community agencies are able to expand their client base and schools are able to offer more health and human services to their students and families.

Schools are communicating and collaborating more as a result of the coordinated **services restructuring efforts**. School site staff reported that within the last two years, there has been an increase in information sharing and collaboration among schools. Additionally, the evidence suggests that schools are forming more collaboratives. For example, when Healthy Start first began, 4 of 5 planning grant applications written in Cohort I (1992) and Cohort 2 (1993) were submitted by a single school site. In Cohort 6 (1997), only 6 of 20 planning grant applications were submitted by single school sites. The other 14 applications were submitted by multiple school collaboratives. A similar pattern occurred with Healthy Start operational grant applications where 7 of 8 applications during Cohort I (1992) and Cohort 2 (1993) were submitted by single school sites. Cohort 6 (1997) applications showed the number of single site applications drop to 2 of 10.

Many schools are just beginning to implement the health and human services restructuring plan on campus. During the initial stages of the restructuring process, most Organization Facilitators focused their efforts on establishing a coordinated service framework

at the cluster or complex level. As a result, establishing Resource Coordinating Teams at the school level was not an early priority for most Organization Facilitators. Nevertheless, Organization Facilitators report that a number of schools have established the beginnings of Resource Coordinating Teams, and have begun to map and organize existing resources, or develop systemic programs to serve the entire school community. Several schools utilize the Student Study Team or Student Success Team as a Resource Coordinating Team. It should be noted, however, that traditional Student Study and Student Success Teams focus on individual students. Thus, although it is fine to use the existing group, these teams must be expanded beyond the individual student level and address systemic, school-wide coordinated services issues.

Recommendations

- Each family of schools should be encouraged to continue collaborative relationships among the schools within the family as well as with district services, outside agencies and organizations in order to provide needed services to students and families.
- Organization Facilitators need to develop relationships with key individuals at school sites, including existing health and human service providers, in order to move the restructuring process to the school level.
- Organization Facilitators need to provide local school stakeholders with more information about the roles and responsibilities of the Resource Coordinating Team (RCT) and how the RCT functions within the context of Learning Support.