

1. Partner Background a. Organization name b. Organization contact person and contact email and phone number c. Summarize your organization’s mission and its connection to Louisiana’s plan for struggling schools

The Health and Education Alliance of Louisiana (HEAL)

The mission of the Health & Education Alliance of Louisiana (formerly the Childhood and Family Learning Foundation) is to address the physical health, mental health and social barriers to success in education for our youth. HEAL works directly in schools through the Coordinated Care for the Whole Child Program to bridge the gap in health care that our at-risk children experience which all too often grows into an academic achievement gap. Our vision is “Every School, Every Child in Louisiana receives access to coordinated health and education to ensure success.” Our Coordinated Care for the Whole Child Program provides a framework for collaboration and integration between the educational system and health care systems.

The Coordinated Care for the Whole Child Program model aligns with the Louisiana Department of Education’s (LDOE) priority to provide targeted support to address opportunity and achievement gaps felt by specific subgroups of students. In our experience, this achievement gap is not only academic, but also health-related. Our highest risk students, particularly those who are living in poverty or who have disabilities, are disproportionately plagued by undiagnosed or untreated health issues that prohibit academic achievement. For schools with high numbers of economically disadvantaged and/or disabled students, overall school performance suffers not only through the aggregate low performance of those students but also through the overall classroom environment which is disrupted by those students.

HEAL was initially created to establish the Mahalia Jackson Early Childhood Center, which continues to operate under the Orleans Parish School Board. The program model was to create Mahalia Jackson as a demonstration model of early childhood education, which other area child care centers could emulate in achieving early education best practices. HEAL employs two OPH certified Child Care Health Consultants who continue to provide health and safety education required by licensure to area child care providers.

As HEAL has continued to grow, the Coordinated Care for the Whole Child model has grown from an early childhood model to also addressing the health needs of children in Orleans Parish schools as the unmet need for basic preventative health services, alongside more intensive interventions for emergent health issues became apparent. HEAL returned operation of the Mahalia Jackson Center to Orleans Parish Schools and continued to develop its health intervention model throughout Orleans Parish. HEAL has conducted a formal evaluation of its full model in four pilot charter schools in Orleans Parish, and these external evaluation results are expected before the design summit on January 18th. HEAL is now poised to take those evaluation results and begin replication of this project on a district-based model. Louisiana’s plan under ESSA provides an excellent opportunity to further pilot this successful program.

2. Evidence of Track Record of Student and School Outcomes a. In any format, please illustrate your organization’s track record in dramatically improving schools or systems of schools and/or radically increasing outcomes for targeted subgroups of students.

Since its founding in 2007, HEAL has served 35 schools and child care centers in Orleans Parish. We have reached more than 32,000 children in poverty in the following sites: Lafayette Academy Charter School, Esperanza Charter School, Morris Jeff Community School, McDonogh #42, Resurrection of our Lord Elementary School, Lawrence D. Crocker College Prep, Sylvanie Williams College Prep, Mary Queen of Peace Catholic School, Saint Dominic School, Cohen College Prep, St Benedict de Moore, Delgado, Harney, Mahalia Jackson, Holy Ghost, Craig, KIPP NOLA, KIPP Renaissance, KIPP Central City Academy, KIPP Central City Primary, KIPP McDonogh 35 Primary, KIPP McDonogh 35 Middle, KIPP Believe, NOCP Middle, Success Preparatory Academy, Wilcox’s Academy of Early Learning, Kids of Excellence Child Development Center, Sentino Early Childhood Academy, Clara’s Little Lambs Preschool, McMillian’s First Steps, and Little Professor Child Development Center.

As will be described in the organizational model section, one of HEAL’s objectives for sustainably implementing the Coordinated Care for the Whole Child model in a school/district is to work with that district to enroll as a billing Medicaid provider and to streamline and maximize systems around Medicaid billing and reimbursement. With HEAL’s intervention, 15 partner schools have become Medicaid providers, with an estimated financial impact of over \$2.8 million to support health interventions in those schools.

In the current school year alone, HEAL has provided 2,998 vision screenings with 21.5% of students recommended for further evaluation. HEAL has conducted 1,173 hearing screenings and recommended 10.5% of students for further evaluation. The ability to see and hear (or accommodations for those who can’t) are obviously critical to academic achievement, yet the failure rate we’re seeing in our school children demonstrates HEAL’s theory of change—that providing appropriate identification of and accommodation or resolution for physical health issues can play a huge role in overcoming the achievement gap.

HEAL is seeing its work creating a positive correlation to reduced negative health outcomes. In schools HEAL has supported, immunization noncompliance has dropped from 35% to only 2%. Though vision screening failures are still too high, with HEAL intervention, the number of students failing vision screenings has fallen from 43% to 23% in just five years. Our forthcoming independent evaluation will demonstrate how these interventions translate to academic indicators, including increased student performance, overall school performance improvement, reduced negative behavior issues, and increased positive climate indicators.

3. Your Organization’s Model

a. How will you differentiate your services to meet the unique needs of schools and districts in Louisiana?

HEAL has responded to the critical need for better health and education for our children by creating a program that bridges the gap between the Department of Health and the Department of Education. Education and healthcare communities, the two disciplines with expertise in child development, tend to work in and are funded in silos. To effectively educate our children, we must tear down these silos and change the way education and healthcare professionals work together with children and their families. Our initial work indicates that, frequently, there are non-cognitive factors from the psychosocial, behavioral or physical health spectrum that are creating barriers to academic achievement for a student. This program model helps schools redesign workflow within the RTI process, incorporating a high level of health screenings into the school calendars and incorporating health interventions that decrease discipline rates through coaching and modeling de-escalation techniques. Parents are engaged and encouraged to access health services quickly to prevent loss of academic time.

The proposed project combines the evidence-based best practices of multi-disciplinary team planning from the health care industry with RTI to create a framework for identifying and addressing health needs. All of the elements that are integral to RTI - high-quality instruction, ongoing assessments, and tiered instruction—are addressed in both academic and health platforms, working together, through this project design.

Tier 1: All students will receive fundamental vision, hearing, dental, and physical health screenings, along with immunization compliance reviews. Results from these screenings are recorded in the school’s database, as well as reported to parents. Students identified by any assessment or the teacher or the section head as needing Tier 2 or 3 intervention are referred to the Health and Wellness Team.

Tier 2: This tier incorporates quality support services for our vulnerable children. The Health and Wellness Team consists of HEAL nurses and psychologists, school social worker, school nurse, SPED coordinators, a designated school leadership representative, and other disciplines as the need arises. Teachers participate in the portions of the meeting relevant to their student(s). Parents are also invited to attend the meetings. Referrals to Tier 2 can be based on grades or on identified needs emerging from screenings or teacher/faculty/parent referral. The team meets weekly and conducts in depth reviews of each student identified. Each child reviewed in Tier 2 receives a formal intervention plan with an appointed case manager from the team who oversees progress against the intervention plan. Intervention plans can include: psychological support, increased academic interventions, health assessments and treatment plans,

coordination with primary health care providers, parent engagement, outside referral, group sessions, classroom modifications, etc.

Tier 3: Tier 3 interventions are what have been traditionally viewed as “pull outs” in the academic framework. These are individualized and highly specific interventions based upon the emerged needs of the child. This may be standard small group academic intervention, direct counseling, or acute medical care, which will be arranged by referral. Each child at this level is still the responsibility of the Health and Wellness Team and has one member of that team as a designated case manager.

Throughout the three-tiered process, HEAL provides professional development and training to all school staff, who are, for so much of the day, the caretakers of our children, to learn and integrate this process. HEAL provides professional clinical psychologists to not only participate on the Health and Wellness Team but to also provide classroom-based observations, upon which coaching and training is designed. HEAL builds the capacity of the school to look at the child through not just an academic lens, but also a holistic lens, including a focus on health. HEAL changes the culture at the school to consider emerging academic issues on a whole-child framework, taking into account non-academic health factors that might be influencing a child. HEAL teaches schools to use nurses and social worker, who are already on staff but all too often are assigned to “catch-all” roles like monitoring the lunchroom or helping with car pool, and let them use their training and expertise to identify emerging health needs. HEAL trains teachers with vital classroom management skills and modifications that can help accommodate a child who has a specific need or disability.

b. What are the attributes of your ideal partner school or district?

HEAL targets schools with diverse student populations with high concentrations of students in poverty. For the program to truly be effective, HEAL requires a supportive and engaged leadership team at the school/district level.

c. Describe your experience working with other third party providers to support coherent school and district improvement.

As detailed in the opening portion of this document, HEAL’s first major project was to develop and launch the Mahalia Jackson Early Childhood Center, which included onsite partnerships with St. Thomas Clinic, the New Orleans Public Library, and five state agencies providing direct service to families, among other partners. HEAL was founded and developed for the purpose of bridging schools and districts with third party providers. HEAL leverages relationships with health care and university partners to assist in services to children, and HEAL also serves as an intermediary for schools and billing agents for Medicaid reimbursement, if requested. HEAL’s entire program model is built upon and relies upon collaboration from a diverse set of community partners from health and education to fully maximize the program’s effectiveness.

d. What support from the state, district or school partners would enhance your success in Louisiana?

HEAL’s ability to impact thousands more children is only limited by its funding and staffing resources to reach out to more schools and districts in Louisiana. HEAL’s goal is and has always been to develop a model for replication that can be expanded to serve every child in Louisiana, and through this effort, HEAL hopes to access funding to allow for more personnel to expand the program’s impact. Working with willing and forward-thinking administration at the district and school level would also play a large part in the program’s success. Finally, HEAL can realize some efficiencies by combining some efforts across districts and school systems, and common meeting space would be quite important in creating economies of scale.