Introduction
Under the leadership of Governor Mike DeWine, Ohio has invested $675 million in student wellness and success. Aligned with Each Child, Our Future, Ohio’s strategic plan for education, these funds will help school districts address the needs of the whole child. These funds allow districts, alongside allowable community partners, flexibility to design programs and purchase services that meet the specific needs of their students covering the 11 different initiatives listed below:

- Mental health services;
- Services for homeless youth;
- Services for child welfare involved youth;
- Community liaisons;
- Physical health care services;
- Mentoring programs;
- Family engagement and support services;
- City Connects programming;
- Professional development regarding the provision of trauma-informed care;
- Professional development regarding cultural competence;
- Student services provided prior to or after the regularly scheduled school day or any time school is not in session.

This document is intended to provide guidance and implementation assistance.

The Role of Partnership
Everyone, not just those in schools, shares the responsibility of preparing children for successful futures. Partnerships transform the educational experience. Addressing the needs of the whole child starts with parents, caregivers and schools and extends to other government and community organizations that serve children. Community partners support districts through additional resources such as content expertise; data sources; joint planning; and human, financial and organizational capital. Collaboration between districts and other government and community organizations is at the foundation of the Student Wellness and Success funding.

Districts are required to develop a plan for utilizing Student Wellness and Success funds in collaboration with at least one of the following community partners:

- Board of alcohol, drug and mental health services;
- Educational service center;
- County board of developmental disabilities;
- Community-based mental health treatment provider;
- Board of health of a city or general health district;
- County department of job and family services;
- Nonprofit organization with experience serving children;
- Public hospital agency.

Districts are encouraged to leverage existing collaborative teams, such as a district leadership team, and to engage diverse groups of local stakeholders to guide these efforts. By prioritizing and capturing a diverse set

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1 Districts include traditional public school districts, community schools, joint vocational school districts and STEM schools eligible for Student Wellness and Success funding.
of voices, districts can ensure they are intentionally planning and engaging vulnerable youth and their families and the organizations that represent their needs. Meaningful and ongoing stakeholder engagement is critical to the success of all students.

**Selecting the Right Community Partner**

Schools are logical environments for addressing the health, social, emotional and behavioral needs of children in the interest of learning readiness, but schools and districts cannot support this work alone. Selecting the right community partners with which to develop their plans can help districts most effectively utilize their Student Wellness and Success funds. The allowable community partner that is "right" for a district may depend on several factors, including district and community needs, attitudes, availability and readiness to enter a collaborative partnership.

Collaborative partnerships (two or more organizations working together to achieve common goals) can be mutually beneficial, but they also require additional time and effort. Collaborative partnerships require difficult conversations, such as outlining roles and responsibilities, decision-making or funding. Districts and partnering agencies need to explore differences in their structures, services and terminology and reach a consensus on the mission and vision of their work together. Districts may wish to create Memorandums of Understanding with their partners to define the parameters of the collaboration. While districts are not required to use these funds with the allowable community partners with which they've developed their plans, continued collaboration with partners will be valuable while working through each key component of the plans.

Districts already working collaboratively with allowable community partners are encouraged to continue to do so. Districts and community partners may consider using these dollars to establish new programs together or expand on existing ones.

**Using a Continuous Improvement Process for Student Wellness and Success**

Schools are very familiar with using a continuous improvement process for systemwide improvement planning. A common model used by schools is the Ohio Improvement Process (OIP), where district teams create a strong foundation for systemwide success and sustainability to support student wellness and success.

A continuous improvement process rests on the foundation of collaborative structures with continuous feedback loops. Once the foundation to support the work is established, there are five key components:

- Using data to identify critical needs;
- Researching and selecting evidence-based strategies;
- Planning for implementation;
- Implementing and monitoring;
- Examining, reflecting and adjusting.

Each key component can be used in the development of a focused and integrated student wellness and success plan.

**For Community Partners**

While the Ohio Improvement Process is a common model for systemwide improvement planning within education, the Ohio Department of Education recognizes that other continuous improvement processes also are widely used inside and outside of the education sector. The crosswalk below aligns commonly used improvement processes used in education with examples from prevention (Strategic Prevention Framework) and health (Community Health Improvement Plan). This can help provide common language while working collaboratively with districts.
Using Data to Identify Critical Needs

To create a comprehensive plan for Student Wellness and Success funds, districts, alongside their community partners, should collect and analyze student and community data to identify critical needs. Using data, teams can identify risk and protective factors within their communities and identify the needs of students and families. There are several data sources districts can examine to identify critical needs including, but not limited to:

- Attendance, including chronic absenteeism;
- Course performance;
- Discipline data (office discipline reports, suspension and expulsion rates);
- School climate surveys;
- Internal and external health, mental health and behavioral health referrals;
- Screening and assessment data;
- Additional data sources collected by community partners (for example, Youth Risk Behavior Surveys; community violence and trauma rates; rates of homelessness among the student population; juvenile arrests and court appearances; poverty rates; emergency room visits; well-child visits; dating violence rates; alcohol, tobacco and other drug use rates).

Once data sources have been analyzed and critical needs are identified, teams should complete a districtwide environmental scan. Through this process, teams compare the prioritized needs with the support services currently offered. This allows for identification of any potential gaps, barriers or repetitions in services. Working together, districts and community partners can then build comprehensive plans.

It is important for teams to share data with staff, students, families and community partners and actively seek feedback and input from these parties.

Refer to Appendix B for details on a sample needs assessment tool.

### Using Data to Identify Critical Needs

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**THE ROLE OF COMMUNITY PARTNERS IN USING DATA TO IDENTIFY CRITICAL NEEDS**

Identifying critical needs begins with collecting and analyzing data for informed decision-making. Community partners can share additional data and resources to help districts identify needs and existing programs and
services in their communities. They can then advise districts on how to best utilize funds to fill gaps and remove barriers.

**EXAMPLE**
A district may be aware of adverse childhood experiences impacting individual students and families and hypothesize that trauma is a high need but may not have the specific data needed for decision-making. The district may choose to reach out to the county department of job and family services and the community-based mental health treatment provider to explore additional data sources. Working together, the district and provider can paint a clearer picture of the needs, services currently offered and gaps that should be addressed for children and youth in the community.

**Researching and Selecting Evidence-Based Strategies**
Once the team has identified critical needs, it can begin to research and select evidence-based strategies or promising practices to address the prioritized needs. Evidence-based strategies are practices, programs or activities that have been proven to improve student outcomes. Promising practices are programs and strategies that show some level of evidence of effectiveness or change but still require additional evaluation.

When selecting evidence-based strategies or promising practices, teams may consider the following:
- Does this match our priority of needs?
- What training is needed for staff?
- What outcomes do these program(s)/practice(s) impact?
- Do we have the capacity to implement with fidelity?
- How much class time is necessary to conduct the program(s)? Do we have the time in our current schedule? Do we need to make schedule accommodations?
- What is the cost? How will this be funded?
- Are cultural considerations addressed?

Teams can use the Department’s [Evidence-Based Clearinghouse](#) to identify evidence-based strategies to meet the needs of Ohio’s students.

**THE ROLE OF COMMUNITY PARTNERS IN RESEARCHING AND SELECTING EVIDENCE-BASED STRATEGIES**
Community partners can assist district teams with identifying additional clearinghouses and repositories that review strategies and programs aligned to each of the 11 identified initiatives. Examples may include the Center for Disease Control and Prevention’s [High Impact in 5 Years (Hi-5) initiative](#), Robert Wood Johnson Foundation’s [What Works for Health](#) tool or Ohio Department of Health’s [Creating Healthy Communities](#) program.

**EXAMPLE**
Upon reviewing the data, the district and community partners prioritize trauma as a high need and choose to focus on professional development for trauma-informed care and mental health services. The community-based mental health treatment provider assists the district in identifying evidence-based practices by sharing resources from the Georgetown University Center for Child and Human Development that outline evidence-based treatments for trauma.

**Planning for Implementation**
A comprehensive plan for Student Wellness and Success funds outlines the goals, strategies and partnerships required to meet expected outcomes. Teams should consider how proposed strategies will align with existing district initiatives and be sustained beyond the funding opportunity. While districts do not need to submit plans to the Department, nor will the Department approve plans, districts may wish to align their plans within the [Comprehensive Continuous Improvement Plan](#) (CCIP) and to the reporting requirements set forth by the Department.
Districts also should consider additional funding streams with which to align planning and implementation to create a continuum of care to meet student needs.

Refer to Appendix C for details on a sample planning tool.

THE ROLE OF COMMUNITY PARTNERS IN PLANNING FOR IMPLEMENTATION

In planning with identified partners, districts can coordinate the provision of services to eliminate duplication and maximize the impact of local efforts. Community partners can offer districts human capital and provide their knowledge and expertise. They can assist with training, professional development, consultation and coaching as districts implement their plans.

EXAMPLE

The district, county department of job and family services, and community-based mental health treatment provider jointly develop a plan to address trauma from multiple avenues. The county department of job and family services will support the district by providing professional development for district staff on trauma and the impact of trauma on development, behavior and learning. The community-based mental health treatment provider will provide Cognitive Behavioral Intervention for Trauma in Schools (CBITS) in two of the schools demonstrating the highest rates of trauma. The mental health provider will provide additional trauma services at its clinic site, working with the district to develop a clear and consistent referral process.

Implementing and Monitoring

While teams implement their plans, it is important to continually monitor progress. This involves asking the questions: “Are we doing what we said we would do?” and “Is it working?” Periodically reviewing plans can help teams ensure they are meeting the needs of the students. Districts should plan how they will share progress and obtain feedback from stakeholders, staff, students and families.

THE ROLE OF COMMUNITY PARTNERS IN IMPLEMENTING AND MONITORING

Community partners can assist districts in choosing measurement tools that assess fidelity of implementation and outcomes. Working together, community partners and districts can identify optimal timelines for data collection and how data points can be compared to monitor progress.

EXAMPLE

To monitor the effectiveness of the professional development provided to staff, the district and county department of job and family services collaborate to create a questionnaire for staff. The district distributes the survey three- and six-months following the professional development to gauge the impact on self-reported level of knowledge. To monitor implementation of the CBITS program, the community-based mental health provider will use the CBITS Fidelity Adherence Measure created by the program developers.

Examining, Reflecting and Adjusting

Evaluation is similar to progress monitoring but occurs at the end of the plan year and assesses whether the plan produced the desired outcome(s). This includes program evaluation and should be applied to school-implemented programs, as well as programs offered through community partnerships. Identifying whether a practice, strategy or policy resulted in the intended outcome can assist teams in determining what to maintain, adjust or strategically withdraw. At this point, districts may identify additional partners that are needed. Keep in mind that meaningful work around these initiatives often takes time. While reporting is required after the first fiscal year, this work may need additional time to produce meaningful outcomes for students. In evaluating programs and services early on, consider the successes and challenges of processes, as well as outcomes.
THE ROLE OF COMMUNITY PARTNERS IN EXAMINING, REFLECTING AND ADJUSTING
Similar to the role of community partners in planning for implementation, community partners can provide human capital, knowledge and expertise and, often, additional data to inform evaluation efforts.

EXAMPLE
At the end of the school year, the district, county department of job and family services, and mental health provider reconvene to review outcomes and discuss successes, challenges and areas for improvement. The district and mental health provider identify an area for improvement — teachers need additional supports beyond the professional development provided on trauma. Using Student Wellness and Success funds, the district will contract with the mental health provider to provide ongoing consultation with teachers on classroom behavior interventions and how to support students who are struggling with trauma.

Release of Funds
Funds will be distributed through the larger school foundation funding process. Funds will be disbursed with half of the annual amount provided in October and the remaining half provided in February. These funds should be deposited into Fund 467. Student Wellness and Success funds will be distributed to schools on a per-pupil basis, with per-pupil funding scaled based on federal census poverty data. Every school district, community school and joint vocational school district will receive a minimum of $25,000 in Fiscal Year 2020 and $36,000 in FY21. This funding is paid directly to each entity based on where students are educated, without any transfers or deductions from students’ resident districts. Estimates based on the final version of the budget are available here. These estimates can be used during the initial planning phase. The Department will post a detailed worksheet of the calculation with the school foundation payment reports when the first payment is made in October.

Reporting
Ohio law requires that each district submit a report to the Department describing the initiative or initiatives on which the district’s Student Wellness and Success funds were spent during that fiscal year. Districts should keep adequate records to demonstrate they have met the legislated requirements of this funding (developing a plan in collaboration with an allowable community partner and spending the dollars on an allowable initiative) but also should consider their work through a continuous improvement process. Districts should revisit their comprehensive plans, which outline the goals, strategies and partnerships to meet expected outcomes and review their monitoring and evaluation efforts.

Reporting will be open before the end of the fiscal year. Should districts choose to report on their work before the end of the fiscal year, there may be opportunities for the Department to connect districts doing similar work, resulting in the creation of peer networks.

Again, keep in mind that meaningful work around these initiatives often takes time. While meaningful student outcome data may not be available to report after the first fiscal year, consider the successes and challenges of partnerships, planning, implementation and processes.

THE ROLE OF COMMUNITY PARTNERS IN REPORTING
While community partners are not required to report to the Department, continued collaboration at this stage is encouraged as districts reflect on their work through a continuous improvement process. Similar to examining, reflecting and adjusting, this report can inform opportunities for change, including expansion or focusing of programming or shifting funding.

REPORTING TEMPLATE
Please refer to Appendix A for a reporting template, which includes the prompts and questions the Department may ask in the report districts must complete at the end of the fiscal year. Additional questions may be added.
later. Districts are encouraged to collect artifacts and evidence to demonstrate each component of the reporting tool for verification purposes.

**Technical Assistance and Resources**

Email questions to WellnessAndSuccess@education.ohio.gov.

For resources to support planning, visit the Student Wellness and Success webpage.