

# Guidance to Support Student Wellness and Success

## STUDENT WELLNESS AND SUCCESS FUNDS, DISADVANTAGED PUPIL IMPACT AID AND BASE COST - STUDENT WELLNESS AND SUCCESS COMPONENT

### Introduction

[Each Child, Our Future](#), Ohio's strategic plan for education, seeks to ensure each student is challenged, prepared and empowered for his or her future by way of an excellent prekindergarten-grade 12 education. Ohio's schools can succeed by meeting the needs of the *Whole Child* – the physical, social, emotional and intellectual aspects of the child's well-being. Over the next two years, many schools will have three funding options to continue these vital services. Those funds include: Disadvantaged Pupil Impact Aid, Base Cost Student Wellness and Success Component and remaining funds from previous years' Student Wellness and Success Funds.

During the 2019-2020 and 2020-2021 school years many schools from across the state found innovative and effective ways to provide whole child supports, including mental and behavioral health care services, to children using Student Wellness and Success Funds. The [2020-2021 Student Wellness and Success Fund Survey Data Report](#) showed that mental health services was the most popular allowable use category. Eighty percent of the schools and districts eligible to receive funds reported an initiative that involved the Mental Health Services category. Mental health services were the most frequently provided service, accounting for 1,308 of the services, an increase of 434 from those reported in FY20. For more information on programs supported by Disadvantaged Pupil Impact Aid and Student Wellness and Success, see the Department's [Ideas for Innovation](#) and [Resources for District and Community Partners](#) webpages.

### Ohio House Bill 110 and Supporting Student Wellness

The adoption of a new school funding formula incorporates the Student Wellness and Success funding provided in the 2019-2020 and 2020-2021 school years into the formula and restricts a portion of the funding that schools and districts will receive for this critical work. The formula acknowledges the importance of programs and activities that support Ohio's children such as: mental and physical healthcare services, prevention education programs, wrap around services, mentoring and afterschool programs, programs geared toward homeless youth and those involved in the child welfare system, enhanced safety and security measures and improved family and community resource and engagement services. Regardless of his or her circumstances, each child has unique needs – and it is imperative to find ways to meet those needs. [Ohio law](#) directs where and how the Student Wellness and Success funding within the base cost and the Disadvantaged Pupil Impact Aid Funds can be spent. The new formula restricts funding within two elements of the larger formula.

The purpose of this document is to assist schools and districts, along with chosen community partners, in implementing and strengthening their plans to improve student wellness activities. This guidance provides tools and resources for using a continuous improvement process to support whole child needs. The document also explains how schools and districts can use the three different funding streams to continue to expand their student wellness and success efforts. The [chart](#) below can be used as a quick guide of the differences between the three funding streams discussed in this document.

	<b>Disadvantaged Pupil Impact Aid</b>	<b>Base Cost Student Wellness and Success</b>	<b>Student Wellness and Success</b>
<b>Funding Years</b>	FY22 & FY23 New funding formula	FY22 & FY23 New funding formula	FY20 & FY21 Many schools have remaining funds available to spend
<b>Allowable Costs:</b>	<ul style="list-style-type: none"> <li>• Mental health services, including telehealth services</li> <li>• Culturally appropriate, evidenced-based or evidenced-informed prevention education, youth-led programming and social and emotional learning curricula to promote mental health and prevent substance use and suicide</li> <li>• Services for homeless youth</li> <li>• Services for child welfare involved youth</li> <li>• Community liaisons or programs that connect students to community resources, including City Connects, Communities in Schools and other similar programs</li> <li>• Physical health care services, including telehealth</li> <li>• Family engagement and support services</li> <li>• Student services provided prior to or after the regularly scheduled school day or at any time school is not in session including mentoring programs</li> <li>• Extended school day or school year</li> <li>• Reading improvement and intervention</li> <li>• Instructional technology or blended learning</li> <li>• Professional development in reading instruction for teachers of students in K-3rd</li> <li>• Dropout prevention</li> <li>• School safety and security measures</li> <li>• Community learning centers that address barriers to learning</li> <li>• Academic interventions for students in grades 6-12</li> </ul>	<ul style="list-style-type: none"> <li>• Mental health services, including telehealth services</li> <li>• Culturally appropriate, evidenced-based or evidenced-informed prevention education, including youth-led programming and social and emotional learning curricula to promote mental health and prevent substance use and suicide</li> <li>• Services for homeless youth</li> <li>• Services for child welfare involved youth</li> <li>• Community liaisons or programs that connect students to community resources, including City Connects, Communities in Schools and other similar programs</li> <li>• Physical health care services, including telehealth services</li> <li>• Family engagement and support services</li> <li>• Student services provided prior to or after the regularly scheduled school day or at any time school is not in session including mentoring programs</li> </ul>	<ul style="list-style-type: none"> <li>• Mental health services</li> <li>• Professional development regarding cultural competence</li> <li>• Services for homeless youth</li> <li>• Services for child welfare involved youth</li> <li>• Community liaisons</li> <li>• City Connects programming</li> <li>• Physical health care services</li> <li>• Mentoring Programs</li> <li>• Family engagement and support services</li> <li>• Professional development regarding the provision of trauma-informed care</li> <li>• Student services provided prior to or after the regularly scheduled school day or at any time school is not in session including mentoring programs</li> <li>• Mentoring Programs</li> </ul>

	Disadvantaged Pupil Impact Aid	Base Cost Student Wellness and Success	Student Wellness and Success
	<ul style="list-style-type: none"> <li>• Employment of an individual who has successfully completed the Bright New Leaders for Ohio schools' program as a principal or an assistant principal</li> </ul>		
<b>Release of Funds</b>	<p>Disadvantaged Pupil Impact Aid Funds will be distributed through the larger school foundation funding process like all other elements within the formula. Payments are made on a monthly or bi-monthly schedule. Unlike federal grants, where districts draw down funds when expenditures are incurred, Disadvantaged Pupil Impact Aid funds will be disbursed regardless of spending activity. Disadvantaged Pupil Impact Aid Funds are calculated based on the number and concentration of economically disadvantaged students enrolled at each school and district. The higher the concentration of disadvantage, the higher the per pupil amount. Implementation of the school funding formula will include detailed calculations of this funding stream for each school or district.</p>	<p>Funds will be distributed through the larger school foundation funding process like all other elements within the formula. Payments are made on a monthly or bi-monthly schedule. Unlike federal grants, where districts draw down funds when expenditures are incurred, funds will be disbursed regardless of spending activity. The base cost and the restricted component for Student Wellness and Success initiatives is calculated based on the enrolled student population at each school and district. Funding for this element of the base cost is funded at a ratio of one Student Wellness and Success funding staff for every 250 students, with traditional public schools guaranteed a minimum of five positions. While the funding is computed on an FTE basis, the funds are not exclusively required to support staff. Implementation of the school funding formula will include detailed calculations of this funding stream for each school or district.</p>	<p>Schools and districts received Student Wellness and Success Funds in the 2019-2020 and 2020-2021 school years and should continue to spend those funds on the 11 allowable uses based on the plan completed with a community partner.</p>

	<b>Disadvantaged Pupil Impact Aid</b>	<b>Base Cost Student Wellness and Success</b>	<b>Student Wellness and Success</b>
<b>Community Partners</b>	<p>Community partners are required</p> <ul style="list-style-type: none"> <li>• Board of alcohol, drug addiction and mental health services</li> <li>• Educational service center</li> <li>• County board of developmental disabilities</li> <li>• Community-based mental health treatment provider</li> <li>• Board of health of a city or general health district</li> <li>• County department of job and family services</li> <li>• Nonprofit organization with experience serving children</li> </ul> <p>Public hospital agency</p>	<p>A community partner is not required but it is encouraged that schools and districts leverage partners identified in the Disadvantaged Pupil Impact Aid and Student Wellness and Success Funds planning process.</p>	<p>Community partners are required</p> <ul style="list-style-type: none"> <li>• Board of alcohol, drug addiction and mental health services</li> <li>• Educational service center</li> <li>• County board of developmental disabilities</li> <li>• Community-based mental health treatment provider</li> <li>• Board of health of a city or general health district</li> <li>• County department of job and family services</li> <li>• Nonprofit organization with experience serving children</li> <li>• Public hospital agency</li> </ul>
<b>Where should funds be deposited?</b>	<p>School funding revenue will be received as revenue in the General Fund as restricted revenue. Schools and districts should use the existing restricted receipt code to receive these funds (3211). This will allow schools and districts to track these funds. It will be up to each school and district to ensure compliance with the restricted spending requirements.</p>	<p>School funding revenue will be received as revenue in the General Fund as restricted revenue. The Auditor of State's Office created a new restricted receipt code (3218). This will allow schools and districts to track these funds. It will be up to each school and district to ensure compliance with the restricted spending requirements.</p>	<p>Schools received Student Wellness and Success Funds during FY20 &amp; FY21. These funds were deposited into a special revenue fund for Student Wellness and Success Funds (Fund 467) with receipt code 3219.</p>

	<b>Disadvantaged Pupil Impact Aid</b>	<b>Base Cost Student Wellness and Success</b>	<b>Student Wellness and Success</b>
<b>Reporting</b>	<p>The Department has developed a reporting survey for these funds. Districts should keep adequate records to demonstrate how funds are being used. The Department will notify schools and districts of reporting requirements and timelines for reporting. Ohio law requires districts to submit a report after June 30. Reporting will be similar to prior Student Wellness and Success Funds and must be spent on one of more of the initiatives listed above.</p>	<p>Base Cost Student Wellness and Success Component reporting will be included in the Disadvantaged Pupil Impact Aid Fund Survey after the end of the fiscal year. Districts should keep adequate records to demonstrate how funds are being used. The Department will notify schools and districts of reporting requirements and timelines for reporting. Reporting will be similar to prior Student Wellness and Success Funds and must be spent on one of more of the initiatives listed above.</p>	<p>Student Wellness and Success Fund reporting will be included in the Disadvantaged Pupil Impact Aid Fund Survey after the end of the fiscal year. Districts should keep adequate records to demonstrate how funds are being used. The Department will notify schools and districts of reporting requirements and timelines for reporting. Reporting will be similar to prior Student Wellness and Success Funds and must be spent on one of more of the initiatives listed above.</p>

## 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 Disadvantaged Pupil Impact Aid, Base Cost Student Wellness and Success Component and previous Student Wellness and Success funds.

Districts are required to develop a plan for utilizing Disadvantaged Pupil Impact Aid funds as they were with Student Wellness and Success Funds. The Department encourages districts to update their current plan or expand to include additional services allowable under Disadvantaged Pupil Impact Aid. This plan is to be developed, updated or expanded in collaboration with at least one of the following community partners:

- Board of alcohol, drug addiction 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 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. The [Ohio Local Stakeholder Engagement Toolkit: A Guide for Districts and School Leaders](#) and the [Community Partnership Toolkit](#) may be helpful in developing successful school and community partnerships.

## 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/update their plans can help districts most effectively utilize their Student Wellness and Success Funds and New Disadvantaged Pupil Impact Aid 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 Disadvantaged Pupil Impact Aid

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 disadvantaged pupils.

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 Disadvantaged Pupil Impact Aid 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.

Education Ohio Improvement Process (OIP)	Education Positive Behavioral Interventions and Supports (PBIS)	Education Comprehensive Continuous Improvement Plan (CCIP)	Prevention Strategic Prevention Framework (SPF)	Health Community Health Improvement Plan (CHIP)
Identifying Critical Needs	Data Collection and Review	Planning Tool	Assessment and Capacity	Community Health Assessment
Research and Select Evidence-Based Strategies	PBIS Action and Implementation Plan	SMART Goals	Planning Goals, Objectives & Strategies	Planning Goals, Objectives & Strategies
Plan for Implementation	Implementation of Plan (Evidence-based practices at each tier)	Strategies and Action Steps	Implementation	Implementation
Implement and Monitor	Progress Monitoring and Assessment	Implement and Monitor	Evaluation	Track and Report
Examine, Reflect, Adjust	Sustainability, Scaling and Continuous Regeneration	Sustainability	Sustainability	Continuous Evaluation and Improvement

## Using Data to Identify Critical Needs

To create or expand a comprehensive plan for the Disadvantaged Pupil Impact Aid, 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
- [K-12 Prevention Self-Assessment](#)
- Additional data sources collected by community partners (for example, [Youth Risk Behavior Surveys](#); [OHYES](#); 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; and 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 A](#) for details on a sample needs assessment tool.

## 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 17 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](#)
- 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 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 B](#) 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, expertise and 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 Disadvantaged Pupil Impact Aid 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.

## Reporting

[Ohio law](#) requires that each district submit a report to the Department describing the initiative or initiatives on which the district’s Disadvantaged Pupil Impact Aid 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. 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 department has created a new reporting mechanism for Student Wellness and Success Funds, Base Cost Student Wellness and Success component and Disadvantaged Pupil Impact Aid Funds. This reporting mechanism is similar to the 2019-2020 and 2020-2021 reporting. Please refer to [Guidance for Completion of the FY22 DPIA and SWSF Data Collection Tool](#) for reporting guidance.

## **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 [Guidance for Completion of the FY22 DPIA and SWSF Data Collection Tool](#) for reporting guidance, 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](mailto:WellnessAndSuccess@education.ohio.gov). For resources to support planning, visit the Supporting Student Wellness webpage.