

FAIRFAX COUNTY SUCCESSFUL CHILDREN AND YOUTH POLICY TEAM

April 7, 2021, 10 a.m. – 12:30 p.m.

<https://us02web.zoom.us/j/82699633248>

Password: SCYPTapr7#

Agenda

1. Welcome and Introductions
2. Discussion Item: School Readiness Priorities*
3. Discussion Item: Behavioral Health Priorities*
4. Discussion Item: Community Schools Priorities*
5. Discussion Item: Workforce Readiness Priorities*
6. Discussion Item: My Brother's Keeper
7. Recap of New Action Steps or Assignments
8. Items and Announcements Presented by SCYPT Members
9. Public Comment
10. Adjourn

**The format for these four discussion items will be as follows:*

- a. The SCYPT will hear short presentations providing updates and context on each of the four priority areas.*
- b. Members will join one of four breakout groups to discuss the issue of their choosing, with the goal of developing consensus on setting SCYPT priorities for the priority area.*
- c. Each group will report out to the full SCYPT, allowing for some feedback and questions.*

Next Meeting:

Wednesday, June 2, 2021

10 am – 12:30 pm

via Zoom (link TBA)

**SCYPT Update
April 7, 2021**

Topic	School Readiness
Relevant Plans	Equitable School Readiness Strategic Plan School Readiness Resources Panel Recommendations
Key Accomplishments	<p style="text-align: center;">*Please see the Equitable School Readiness Strategic Plan Update and the School Readiness Resources Panel Update for additional information.</p> <p>Implementation of the Early Development Instrument (EDI): The EDI is an online questionnaire that measures a child’s ability to meet age-appropriate expectations in the areas of physical health, social competence, approaches to learning, readiness to explore new things, emotional maturity, language and cognitive development and communication. EDI provides population level child outcomes by neighborhood and provides insights into quality and availability of school readiness supports and services in communities.</p> <p>Expansion of early childhood education program: The Board of Supervisors has provided funding to serve 108 children in community early childhood programs, including centers and family child care homes.</p> <p>School Readiness Resources Panel (SRRP): The SRRP identified innovative and bold expansion goals and long-term funding strategies and recommendations for expanding the County’s Equitable Early Childhood System.</p> <p>Creation of a dedicated public Children’s Fund: The Board of Supervisors approved the creation of a dedicated fund as recommended by the School Readiness Resources Panel. The Early Childhood Birth-5 Fund enables the County to make investments in the systematic expansion of early childhood services and to direct dedicated resources to early childhood initiatives.</p> <p>*In addition, the following plans include a focus on early childhood, child care and school readiness: the Chairman’s Task Force on Equity & Opportunity, Countywide Strategic Plan, The Fairfax County Economic Recovery Framework, and Fairfax County Public School’s Ignite Strategic Plan.</p>
FY 2020 and FY 2021 Accomplishments	<p>Establishment of an ESRSP Parent/Family Advisory Council</p> <p>Support for Development of Children’s Executive Function Skills</p> <p>FCPS Parent Liaisons</p> <p>Expansion of the Nurse-Family Partnership Program</p>

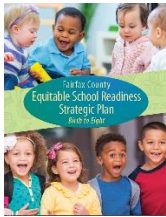
	<p>Promotion of the use of Developmental and Social Emotional Screeners</p> <p>Testing of the Fairfax County School Readiness Equity Lens</p> <p>Expansion of the Neighborhood School Readiness Project (NSRP)</p> <p>Creation of an Early Childhood Mental Health Consultation System</p> <p>Providing cross program relationship development</p> <p>Support for the enhancement of early childhood educator competencies and compensation.</p> <p>Providing ongoing and differentiated professional learning opportunities.</p> <p>Participation in the development of Virginia's <i>Unified Early Childhood System</i>.</p>
<p>Recommended Next Steps</p>	<p>Support Fairfax County's participation in Virginia's <i>Unified Early Childhood System</i>, which will ensure that all children have access to quality teaching and learning experiences that meet their unique needs. The system will:</p> <ul style="list-style-type: none"> • Unify shared and equitable expectations for quality. • Measure and strengthen adult-child interactions and curriculum use in all publicly funded birth to five programs. • Improve supports for educators, prioritizing those who need it most. <p>Support the continued expansion of access to quality early childhood experiences for eligible children ages birth to five in community early childhood programs, including centers and family child care homes.</p> <p>Endorse the establishment of the ESRSP Parent/Family Advisory Council and support recruitment of council members.</p> <p>Advocate for new funding for the Fairfax County Early Childhood Birth to Five Fund.</p> <p>Endorse future bond referenda for capital construction of early childhood classrooms in County and FCPS facilities.</p> <p>Support further implementation of SRRP recommendations.</p>

Successful Children and Youth Policy Team

Fairfax County Equitable School Readiness Strategic Plan Update - April 2021

The *Fairfax County Equitable School Readiness Strategic Plan, Birth to Eight (ESRSP)* lays out a vision and roadmap for ensuring that all young children in Fairfax County have the supports they need to be successful in school and beyond. The plan includes five core strategies for implementation:

- Establish meaningful partnerships with families to grow school readiness opportunities in all communities and support children’s optimal development in all settings.
- Provide equitable offerings of high-quality early development and learning experiences and related school readiness supports throughout the county.
- Foster quality and effective professional learning in all early childhood programs and services.
- Promote equity-focused planning and decision making, as well as shared accountability, through the use of data.
- Nurture a whole community commitment to school success for all children.



The ESRSP can be read [here](#).

STRATEGY 1: Establish meaningful partnerships with families to grow school readiness opportunities and inform school readiness efforts in the county.

- *Strategy 1, Action 2*

Establishment of an ESRSP Parent/Family Advisory Council

The County and Fairfax County Public Schools (FCPS) are establishing an advisory council comprised of parents/families of young children, birth through school age, to participate in system planning and decision-making related to the implementation of the ESRSP.

- *Strategy 1, Action 5*

Supporting Children’s Executive Function Skills

Strategies for supporting educators to understand the relationship between the functions of the brain and how children’s early experiences and interactions support the development of executive function skills are embedded in the professional learning opportunities offered by the Office for Children (OFC) and FCPS.

- *Strategy 1, Action 7*

FCPS Parent Liaisons

Parent liaisons engage with families, make referrals for early childhood programs and supports, and participate on Neighborhood School Readiness Teams, sharing best practices for partnering with families.

STRATEGY 2: Provide equitable offerings of high-quality early development and learning experiences and related school readiness supports throughout the county.

- *Strategy 2, Action 1*

Implementation of the Early Development Instrument (EDI)

The EDI is an online questionnaire that measures a child’s ability to meet age appropriate expectations in the areas of physical health, social competence, approaches to learning, readiness to explore new things, emotional maturity, language and cognitive development and communication.

- FCPS kindergarten teachers have received professional learning on how to conduct the EDI assessment.
- EDI was implemented over two years. The EDI was not implemented in School Year 2020-2021 to the final 16 elementary schools due to the pandemic; FCPS will continue implementation of the EDI in the 2021-2022 school year.

- *Strategy 2, Action 2*

Expansion of early childhood education program

The Board of Supervisors has provided funding to serve 108 additional children in community early childhood programs.

- Eligible children are those determined to be at risk, ages birth to five years old.
- Children are enrolled in early childhood programs, centers and family child care homes that participate in the Virginia Preschool Initiative, Virginia Quality, the USDA Child and Adult Care Food Program.

- *Strategy 2, Action 3*

Expansion of the Nurse-Family Partnership Program

The Board of Supervisors provided funding to expand the Nurse Family Partnership Program into the Herndon and Reston areas of the County. Two full-time positions were approved.

- *Strategy 2, Action 6*

Promoting the use of Developmental and Social Emotional Screeners

OFC and Fairfax Futures are partnering to promote the use of early childhood developmental and social emotional screeners in Fairfax County.

- OFC early childhood specialists are providing training on the use of the Ages and Stages Questionnaire (ASQ 3) and the Ages and Stages Questionnaire Social Emotional (ASQ SE) to early childhood educators throughout Fairfax County with a goal of screening children for developmental delays, with a subset of children screened for social emotional disorders, as needed.
- Fairfax Futures recently received a multi-year grant from the John & Janice Wyatt Foundation to support the county’s work to expand and promote the use of ASQ 3 and ASQ SE developmental and social/emotional screeners. Funding will also support the use of the ASQ Enterprise, a web-based data management system.

- *Strategy 2, Action 7*

Field testing of the Fairfax County School Readiness Equity Lens

Fairfax Futures received funding from the Eugene & Agnes E. Meyer Foundation to field test the Fairfax County School Readiness Equity Lens, designed to identify and address structural and institutional bias and overcome implicit bias to promote equity when making decisions and implementing policies that affect young children and their families. The work was focused in the Bailey’s Crossroads community. Through this work, a simplified equity lens, along with key ‘how-to apply an equity lens’ lessons emerged. The grant report, *Strengthening an Equitable School Readiness Framework for Early Childhood Education*, can be [viewed here](#).

- *Strategy 2, Action 8*

Neighborhood School Readiness Project (NSRP)

The NSRP has expanded participation of elementary schools and community early childhood programs.

- With a “collective impact approach” team members work within communities on practices/projects/products that ensure children enter kindergarten ready for success.
- The work is connected to the work of Opportunity Neighborhoods which reflects the voice of the community and has contact with resources and services that address all areas of family needs.

- *Strategy 2, Action 9*

Creation of an Early Childhood Mental Health Consultation System

The Board of Supervisors approved funding to establish an Early Childhood Mental Health Consultation System (ECMHCS). The system is currently being developed and will provide consultative services to community early childhood education programs with the goal of supporting the capacity of early childhood educators to promote children’s successful social and emotional development and provide positive adult-child interactions. The ECMHCS will provide support for educators addressing the many mental health impacts of the pandemic on children and their families.

STRATEGY 3: Foster quality and effective professional learning in all early childhood programs and services.

- *Strategy 3, Action 3*

Providing cross program relationship development

Early Childhood Partnership creates a network of support by creating a community of practice where educators and families can access professional development, tools and resources, network with each other, and share expertise.

- *Strategy 3, Action 6*

New initiatives supporting the enhancement of competencies and compensation.

- Fairfax County is participating in Virginia’s Preschool Development Grant which provides \$1,500 enhancements to educators in participating community early childhood programs.
- The Virginia Preschool Initiative provides \$3,500 per child to participating community early childhood programs in support of quality.

- *Strategy 3, Action 7*

Promoting ongoing and differentiated professional learning opportunities

- The Office for Children has been awarded the Child Development Associate Gold Standard by the Council for Professional Recognition. This CDA Gold Standard recognizes the high-quality professional learning opportunities offered to early childhood professionals in Fairfax County.
- Educators work with coaches and mentors to support positive adult-child interactions, as measured by the Classroom Assessment Scoring System (CLASS), implementation of curriculum and ongoing assessments for children, and ways to create engaging environments.

STRATEGY 4: Promote equity-focused planning and decision making, as well as shared accountability, through the use of data.

- *Strategy 4, Action 1*

Virginia's Unified Early Childhood System

Through participation in the state Preschool Development Grant Birth through Five, community and FCPS early childhood program leaders and early childhood educators are entering data into the new Virginia LinkB5 data portal.

The goal of LinkB5 is to:

- Connect different early childhood programs to one system.
- Capture basic information about early childhood sites.
- Present community resources from the perspective of site directors, principals and early childhood educators.
- Capture data on adult-child interactions (CLASS).

Early Development Instrument

- EDI will provide population level child outcomes by neighborhood.

STRATEGY 5: Nurture a whole community commitment to school success for all children.

- *Strategy 5, Action 3*

School Readiness Resources Panel (SRRP)

The SRRP was formed to identify expansion goals and long-term funding strategies for school readiness supports and services and implementation of the ESRSP.

- Participants included business leaders, community members, early childhood educators, families, the faith community, higher education, and the philanthropic community.
- The panel met throughout the summer 2019 and provided their recommendations to the Board of Supervisors in the early fall.

- *Strategy 5, Action 3*

Creation of a dedicated public Children's Fund

The Board of Supervisors approved the creation of a dedicated fund as recommended by the School Readiness Resources Panel. The Early Childhood Birth-5 Fund enables the County to make investments in the systematic expansion of early childhood services and to direct dedicated resources to early childhood initiatives.

Successful Children and Youth Policy Team

School Readiness Resources Panel Update – April 2021

The *Fairfax County School Readiness Resources Panel* was convened to:

- Collectively plan for funding and other resources for school readiness supports and services.
- Identify innovative and bold expansion goals and longterm funding strategies for school readiness supports and services.
- Develop recommendations for the Board of Supervisors, School Board and Successful Children and Youth Policy Team to consider in advance of the FY2021 County budget cycle.

The Panel's Recommendation:

Equitable Early Childhood System



Support a comprehensive approach to advance and expand Fairfax County's early childhood system - providing full and equitable access to high quality, affordable, early care and education for young children, families, and communities to thrive and prosper.

To view the full list of recommendations, view the [School Readiness Resources Panel presentation](#).

LEGISLATIVE AND STATE ACTIONS

1. *State Child Care Subsidy Program*

Advocate for additional state funding; request a local waiver to increase program income eligibility from 250% Federal Poverty Level (FPL) to 300% FPL to better address cost of living in the County and serve additional families.

- On February 2, 2021, the County increased local income eligibility for the Child Care Assistance and Referral program from 275% FPL to 350% FPL.
- The 2021 General Assembly passed legislation to temporarily increase state income eligibility for child care assistance to 85% State Median Income (approximately 340% FPL) and to allow parents to be eligible for the program while looking for work (currently parents must be employed or in training in order to be eligible). The legislation also permanently eliminates the eligibility requirement that families register with the Department of Child Support Enforcement.

2. *Virginia Preschool Initiative*

Advocate for increased state resources and operational flexibility which would allow the County to use its full VPI allocation and serve additional children in the program, to include: increasing per child funding amount to better reflect actual cost in Fairfax; permitting

localities to partner with family child care programs to provide VPI services; permitting localities to serve children who are three years old in VPI.

- In FY 2021 the Virginia Department of Education permitted Fairfax County to partner with family child care providers to provide VPI services. Family child care partners are currently serving three and four year olds in VPI.
- The 2021 General Assembly increased the VPI Per Pupil rate from \$6,326 to \$7,655.
- In September 2020 the state began a pilot to enroll eligible three year olds in VPI. The 2021 General Assembly authorized continuation of three year old participation in VPI. Fairfax County will continue to serve three year olds in VPI.

3. State Revenue

Advocate for the Governor and School Readiness committee to consider new state-wide revenue sources (e.g., sales tax, millionaire’s tax, etc.) to fund expansion of early childhood programs.

- The 2021 General Assembly passed legislation beginning the process of legalizing marijuana in the Commonwealth. The legislation sets up a framework to work towards legalization in 2024. Forty percent of future revenue from marijuana taxes is intended to fund pre-K programs for at risk three and four year old children.

4. County Taxing Authority

Convene a community task force to explore the pursuit of additional revenue-generating mechanisms to support a dedicated Early Childhood Fund. Strategies to consider include:

- **Pursuit of state enabling legislation to create a special taxing district that could levy additional property taxes within the boundaries of the County for the purpose of funding the early childhood system.**
- **Pursuit of state legislation that would amend the local tax structure to provide equal taxing authority for counties and cities, thereby providing the County with the authority to leverage a food and beverage tax.**
- The 2020 General Assembly passed legislation which provides additional taxing authority for counties:
 - Authorizes any county to impose a food and beverage tax of up to six percent (rather than up to four percent) and eliminates the requirement that a county hold a referendum before imposing such tax. However, a locality such as Fairfax County in which a meals tax referendum failed prior to July 1, 2020 would have to wait six years after the date of the failed referendum to impose the tax. A meals tax cannot be imposed in the County until FY 2024, assuming a July 1 implementation.
 - Authorizes all counties to levy a Transient Occupancy Tax at rates exceeding 2%, with the revenue derived from rates greater than 2% spent either (1) for purposes previously authorized or (2) for rates between 2% and 5%, for tourism promotion, effective May 1, 2021. Revenue from rates greater than 5% may be used for general purposes.

- Authorizes all counties to impose a Cigarette Tax at a rate not to exceed 40 cents per pack of 20 cigarettes, effective July 1, 2021.
- Authorizes all counties to levy an Admissions Tax at a rate not to exceed 10%, except for certain counties where an additional state sales and use tax is imposed (currently this provision applies to counties in the Historic Triangle), effective July 1, 2020.

LAND USE AND DEVELOPMENT

1. Develop additional early childhood program facilities aligned with the County and FCPS Capital Improvement Plans.

Ensure that new and re-development County projects include dedicated space for early childhood programs where needed. Formalize process of evaluating and including early childhood program space in any future County development projects. This would build upon recent successful efforts such as the redevelopment of the Original Mt. Vernon High School and planning for the Massey Complex, Kingstowne Consolidated Facility, and other capital projects.

- In 2019 the County’s Office of Strategy Management hired a Planning Manager to bridge the work of the Health and Human Services System with planning and development work.
- The Health and Human Services System has begun a master planning project that will lay the groundwork to update the HHS portion of the Fairfax County Comprehensive Plan. This will provide an opportunity to better ensure that future requirements/needs for early childhood facilities are met through public or private development activities.
- The County’s Capital Improvement Program Bond Referendum Plan includes bond referenda of \$25 million for Early Childhood Facilities in FY 2022, 2024, 2026 and 2028 for a total of \$100 million in funding for capital construction of early childhood facilities.

Ensure that plans for new and renovated Fairfax County Public School buildings include dedicated space for early childhood programs.

- 2. Ensure that land use regulatory requirements and land use boards and commissions support expansion and enhancement of the early childhood system.*
- 3. Promote conversion of commercial buildings to include dedicated space for early childhood facilities as permitted in the Office Building Repurposing policy.*
- 4. Align investments in the “child opportunity areas” where other initiatives are under way to create the conditions where children and families thrive.*

DEDICATED EARLY CHILDHOOD FUND

1. Evaluate and pursue the following local revenue and funding options in order to create a sustainable dedicated funding stream for early childhood education.

Create a dedicated Early Childhood Fund with a set-aside of tax revenue commensurate with the value of one cent from the local Real Estate tax rate. This funding mechanism emulates

that of Fund 30300, The Penny for Affordable Housing Fund, and would be put into place by an action of the County Board of Supervisors.

- The County established a dedicated Early Childhood Birth to 5 Fund in FY 2021 consisting of current County school readiness funding. The Fund enables the County to make investments in the systematic expansion of early childhood services when funding becomes available.

Please see Legislative and State Actions above for additional strategies for supporting a dedicated Early Childhood Fund (special taxing district, food, and beverage tax).

**SCYPT Update
April 7, 2021**

Topic	BEHAVIORAL HEALTH
Relevant Plans	Children's Behavioral Health System of Care Blueprint (a detailed implementation update is attached)
Key Accomplishments	<ul style="list-style-type: none"> • Developed a partnership with the Northern Virginia Family Network (NVFN) and created a family advisory board to increase family voice in planning services for children and youth. • Implemented Short-Term Behavioral Health Services (STBH), which provides short-term mental health treatment at no cost for youth and families who meet the income criteria. Youth are referred by Fairfax County Public Schools mental health staff or the CSB. • In partnership with George Mason University, created the Fairfax Consortium for Evidence Based Training to train child-serving mental health clinicians in evidence based practice. • Developed a website that links youth and families to local mental health resources. • Signs of Suicide program expanded to all FCPS middle and high schools. • The CSB launched support groups for youth with behavioral health issues and their parents or caregivers. • Expanded the Northern Virginia Family Service Violence Prevention and Intervention Program (VPIP), which provides accessible, bilingual mental health services to children, youth and families living in targeted neighborhoods with the goal of mitigating the negative effects of exposure to violence and trauma and help them develop healthy relationships. • Sponsored psychology doctorate students from George Mason University to provide behavioral health services at local pediatric practices. • Implemented Substance Abuse Prevention (SAP) services, a partnership with the Community Services Board (CSB) and FCPS. Youth are identified by school-based counseling staff and referred to the CSB if further treatment is indicated. • CSB substance use treatment for youth has been expanded through the Opioid Taskforce and Diversion First initiatives. • The Fairfax County Trauma Informed Community Network has trained over 7,000 people in trauma awareness. • Implemented family peer support partner services to support and assist families of children and youth with behavioral health issues.
FY 2020 and FY 2021 Accomplishments	<ul style="list-style-type: none"> • In response to COVID, Short-Term Behavioral Health Services were made available to all middle and high school age youth whose family meets the income criteria. • The Children's Services Act (CSA) program in FY 21 to date has provided over \$2.5 million in funding for a continuum of behavioral health care services to over 500 youth referred by school social workers, the court, CSB and DFS.

	<ul style="list-style-type: none"> • CSA expanded intensive, evidence-based community-based interventions for youth to include access and funding for Multi-Systemic Family Therapy, Functional Family Therapy, Parent-Child Interaction Therapy, and Dialectical Behavior Therapy. • Implemented the Fairfax Recharge program, a respite service for income eligible families who have been impacted by COVID-19 and have youth who have behavioral health issues. • The CSB established a direct referral process for school staff to make referrals to outpatient mental health services. • Created the Healthy Minds Community of Telehealth Providers which supports public and private mental health professionals to provide effective mental health services to children, youth, and families through telehealth. • The Fairfax Consortium of Evidence Based Practice provided training to local clinicians in Trauma Focused Cognitive Behavioral Therapy, and trained family members on the value of using evidence based practices. The Regional Consortium of Evidence Based Practice, a partnership between Northern Virginia CSBs and George Mason University, was created to provide training in Trauma Focused Cognitive Behavioral Therapy and other Evidence-Based treatments to CSB staff. FCPS, with county financial support, hired clinicians to provide mental health treatment in three community schools. • Contracted with a local non-profit organization to pilot the provision of case management services to youth with mental health issues transitioning to adulthood, and to create a local youth advisory board.
<p>Recommended Next Steps</p>	<ul style="list-style-type: none"> • Develop a children’s behavioral health plan to provide an accessible, equitable and affordable continuum of community-based behavioral health care for children, youth, and families. This plan should promote the use of evidence-based approaches, assist families in accessing services through care navigation and case management supports, and increase children and youths’ access to behavioral health services in school and through school referrals to community-based services. • Develop and implement crisis and crisis prevention planning that involves families, hospital emergency departments, behavioral health crisis services, schools, pediatric primary care providers, and behavioral health providers.



GOAL 1: Deepen the Community “System of Care” Approach

Coordinator: Jim Gillespie

Governance Structure:

A. *Establish a Children’s Behavioral Health System of Care oversight committee as the locus of SOC management and accountability.* Accomplished through designating CPMT as the oversight committee.

B. *Establish cross-system behavioral health system of care practice standards, policies and procedures.* Revised system of care principles and practice standards have been approved by the CPMT. In December 2017 CPMT approved revisions to local policies and procedures, based on the revised practice standards, and these have been incorporated in the SOC training curriculum.

Generate support for the SOC approach among the general public and policy makers and administrators at the state and local levels. Results Based Accountability (RBA) measures were developed for the BHSOC Blueprint, approved by CPMT in September 2017 and quarterly reports have been presented since February 2018. In 2017 the system of care initiative was re-named Healthy Minds Fairfax (HMF).

C. *Continue to develop partnerships with community organizations and agencies in different sectors for coordination, financing and support of the SOC approach.* HMF is partnering with the Northern Virginia Family Network, a network of more than 10 regional family- and children-focused nonprofit organizations.

Financing Strategies:

D. *Coordinate county budgeting, including but not limited to Diversion First, to maximize the possibility of high priority children’s behavioral health needs being funded.* To complete these strategies a matrix of youth services has been developed and fiscal mapping conducted. This strategy has now been folded into a fiscal mapping strategy for children’s services. It was presented to SCYPT in April 2019 and also to DMB leadership in June. Both groups received the fiscal map and its process quite well and gave approval to proceed with fine-tuning the data.

Service Quality and Access:

E. *Develop/facilitate trainings and outreach materials that increase awareness and knowledge of systems of care values and creates better informed consumers, providers and county and school system staff.* Develop/facilitate trainings and outreach materials that increase awareness and knowledge of systems of care values and creates better informed consumers, providers and county and school system staff. A master calendar for children’s behavioral health trainings and events and a children’s behavioral health resources page were added to the Healthy Minds Fairfax public website in August of 2018. In the first two quarters of FY21, the training events calendar and the community resources website pages received the following visits:

Number of visits/page views for training events calendar website page:

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19
15/16	24/28	N/A	N/A	39/44	124/162	89/119

Number of visits/page views for community resources website page:

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19
92/119	81/115	N/A	N/A	173/234	265/347	166/272

Due to COVID-19, trainings continued to be held using a virtual platform. In the 1st and 2nd Quarters of FY21, 12 trainings were held with a combined total of 864 participants. Trainings for case managers included Introduction to System of Care, introductions to several Evidence-Based Treatments such as Multisystemic Therapy, Functional Family Therapy and Parent Child Interaction. Case managers, Wraparound facilitators and family support partners were also provided a three-part training series to help them identify and work with natural supports for families. An introduction to EBTs was also held for families. The EBT trainings were recorded and are available online as resources for staff and families.

Number of Staff, providers & families trained on community resources, insurance access, evidence-based/informed practices, & High-Fidelity Wraparound:

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19	FY 18
732	58	N/A	N/A		304	206	0

F. *Collect and regularly report on community outcomes and assess gaps in the array of services and supports necessary for the success of the SOC in preventing and treating behavioral health issues.* An inter-agency workgroup issued a Population Level Data Report on Youth Behavioral Health Needs in the Fairfax-Falls Church Community in February 2020. Presentation to the CPMT was delayed due to COVID and will be done when in-person meetings resume. The annual Office of Children’s Services Gaps and Needs Survey was suspended this year in response to COVID. The SOC Training Committee has promoted the implementation of an array of evidence-based interventions that are now available in our community such as MST, FFT, PCIT and TFCBT.

G. *Review intake, assessment, triage, referral protocols across all levels of care, and lead case management assignments with the goal of supporting families in accessing both public and community provided resources.* In FY 20 HMF funding expanded the regional mobile stabilization and response service by 15%. A significant increase in DBHDS funding support has resulted in eight more crisis counselors being hired and eliminated the need for county funding in FY 21.

GOAL 2: Data Systems

Coordinator: Jim Gillespie

A. *Increase cross-system data sharing.* The HS IT Advisory Committee is consulted on various topics such as Document Management, the “Front Door,” and the Services taxonomy to ensure that recommendations meet CSA needs. CSA is presently implementing OpenText document management and is working with DFS Finance about how records might be integrated. In addition, CSA has participated in the DFS process to define requirements for replacing or upgrading our management information system which has cross-agency case management functionality.

- B. *Use cross-system data to improve decision-making and resource use.* The FY20 Data Analytics Fellowship Academy (DAFA) evaluated CSA data on the effectiveness of Foster Care Prevention Services as provided across our system of care service agencies. The results were presented to the CPMT. In addition, the George Mason Psychology Department has provided free consultation on the statistical analyses of CSA data to include client demographics, service utilization and CANS ratings. It is planned for these results to be shared with the CSA Management Team and CPMT in the future.

GOAL 3: Family and Youth Involvement

Coordinator: Jim Gillespie

- A. *Increase the presence and effectiveness of family leadership through a sustained family-run network*
The Northern Virginia Family Network, a network of more than 10 regional family- and children-focused nonprofit organizations meets quarterly to collaboratively address its mission of ‘elevating the voices of families to improve outcomes for children, youth and young adults across systems of care’. In May 2020 the Network became a member of the newly formed HMF Family Advisory Board.
- B. *Increase family and youth involvement in system planning and implementation.*
In February 2020 the CPMT parent representatives, FAPT parent representatives and representatives from NAMI-NOVA, the Autism Society of Northern Virginia and the Northern Virginia Family Network met to plan the establishment of a HMF Family Advisory Board (FAB). In May 2020 CPMT endorsed the establishment of the FAB as the family advisory board for CSA and Healthy Minds Fairfax, and in July the FAB established an FY 21 monthly meeting schedule.
- C. *Include youth and family participation in the evaluation of publicly and privately provided services, with prompt action for improvement when necessary.* In FY21 Q2, the CSA Monitoring and QA Plan was shared with providers and the Family Advisory Board for comments; it was presented to the CPMT at the December, 2020 meeting. Implementation of the Monitoring and QA plan are underway, with CSA staff reviewing and tracking SIRs and monthly progress reports, as well as ensuring that CSA funds are not being used to purchase Medicaid eligible services without the required documentation. In FY21 Q3, a survey company, Crossroads, Inc., will be on board to survey family satisfaction on provider services; the company will survey a pool of families on a monthly basis. This is a change from the previous survey process that was done on an annual basis. The change in the survey protocol will hopefully lead to a higher response rate. Concerns from families will also be able to be dealt with on a more timely basis as the Crossroads will forward any family concerns that need to be addressed on a monthly basis. CSA staff will provide the data necessary for Crossroads to fulfill the established Scope of Work. A report of the survey efforts will be compiled after the 4th Quarter of FY21.
- D. *Expand evidence-based peer to peer groups, family/community networks.* See Goal 5, Strategy B.

GOAL 4: Increase Awareness and Reduce Stigma

Coordinator: Jesse Ellis

- A. *Implement “gatekeeper trainings” to increase layperson understanding of mental illness, recognition of signs and symptoms of mental illness or emotional crisis, and support of others in*

accessing help, using a cultural competency lens. Gatekeeper trainings continue to be provided in a number of ways through Mental Health First Aid, and the Kognito suite of online trainings (including a peer training for teens), and Signs of Suicide. Eleven Kognito modules are now available, including early childhood, military families, postvention, and trauma-informed schools modules. HMF funding has helped expand the implementation of Signs of Suicide to cover all FCPS middle and high schools. The Eric Monday Foundation is finalizing a web-based training specifically for youth sports coaches; FCPS and multiple youth sports organizations have committed to implementing the training with their coaches. The CSB is now offering Mental Health First Aid and QPR suicide prevention trainings virtually. An overview of gatekeeper trainings available through the county and elsewhere is [available online](#).

- B. *Promote youth-led initiatives to combat stigma associated with mental illness, treatment, and accessing help.* The CSB awarded nine [mini-grants for youth-led projects to address stigma](#), funded by the regional suicide prevention grant, for FY20. An RFP for FY21 mini-grants will be released shortly. Twenty-three high schools in Fairfax County are currently implementing Our Minds Matter clubs, developed by Our Minds Matter (formerly the Josh Anderson Foundation), and more are planning to do so.
- C. *Increase public awareness of issues surrounding mental illness and behavioral health care.* The public service announcements developed by the Health Department have been running in theaters since June 2016. The contract for television and online placement ended in June 2018, so current data is based only on YouTube views.

While the number of texts received by PRS CrisisLink continues a slowly declining trend, the number of calls to the crisisline is significantly higher through the first quarter of FY21; the majority of calls came in through CrisisLink’s local number and were not routed through the national number.

Number of views of PSAs promoting help-seeking behaviors:

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19	FY18	FY17
132	174	N/A	N/A	306	270	619	6,597,856	3,298,928

Number of crisis texts/calls:

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19	FY18	FY17
381/ 4500	*	N/A	N/A	381/ 4500	1638/8289	1675/7780	1815/5597	1087/4927

*Information is unavailable at this time and will be updated on the next quarterly report.

- D. *Maintain a speaker’s bureau and/or list of approved presenters to school and community groups.* To be completed in CY21.

GOAL 5: Youth and Parent/Family Peer Support
Coordinator: Jim Gillespie

- A. *Create a Family Support Partner program.* Through the Virginia Department of Behavioral and Developmental Services, the county was selected as a sub-recipient for a federal SAMHSA grant that funds family support partner services for three years. Since October 2017 NAMI Northern Virginia has been the provider. The SAMHSA grant ends January 2021 and effective February 2021 PRS, Inc. will become the provider through a county contract.

Number of families served by family support partners (unduplicated by FY):

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19	FY 18
38	22	N/A	N/A	45	155	160	55

- B. *Expand evidence-based peer to peer groups, family/community networks.*
 In February 2019 the CSB launched “Heads Up” and “Talk It Out”, resource groups for parents and teens (ages 14-17). The groups are available in weekly concurrent sessions. Teens talk about successful, sustainable recovery and resilience through mental health or substance use challenges. Parents acquire resources and discuss ideas on how to help their teen live their healthiest, fullest lives in the aftermath of trauma or through times of emotional distress. The groups became inactive in April 2020 due to COVID but re-opened virtually later in the quarter.

Number participating in expanded parent/family peer support service programming:

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19	FY 18
10 parents, 4 youth	9 parents, 5 youth	N/A	N/A	19 parents, 9 youth	91 parents, 72 youth	22 parents, 20 youth	0

GOAL 6: System Navigation

Coordinator: Tracy Davis

- A. *Develop an accurate, accessible and real time database of behavioral health care providers that includes information on if they are accepting new clients, if they accept insurance, and their areas of expertise, with functionality to assist families in understanding behavioral health issues and in navigating the system to access services.* A listing of the REACH training pediatricians has been added to the redesigned Healthy Minds Fairfax website. The listing is maintained and updated on a regular basis and it has just been updated to add the November 2019, June 2020 and November 2020 REACH training participants.

Total Number of Visits for All Visitors to HMF Website:

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19	FY18	FY17
4,613	4,442	N/A	N/A	9,055	14,811	8,649	2,848	0

Number of Visits for Returning Visitors:

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19	FY18	FY17
2,412	2,247	N/A	N/A	4,659	8,062	5,968	1,994	0

Number of Visits for New Visitors:

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19	FY18	FY17
2,201	2,195	N/A	N/A	4,396	6,749	2,681	854	0

FY21 (1st& 2ndQtrs. combined) Top Content Viewed by Number of Visits:

Content	Visits
Children's Services Act Forms and Resources	2,076
Healthy Minds Fairfax Homepage	1,470
Children's Services Act	1,084
COVID-19 Mental Health Resources	468
What is a Family Partnership Meeting or Family Resource Meeting?	328
Evidence-Based Treatments and Interventions	278
Get Help In an Emergency	226
Family Assessment and Planning Team	207
About Healthy Minds Fairfax	201
Children's Services Act Staff Roster	190
Children's Services Act Case Management	185
Children's Behavioral Health Community Resources	173
CSA Training Materials	169
Community Policy and Management Team	148
Family Support Services	142
For Providers	130
Healthy Minds Fairfax Directory of REACH-Trained Pediatricians	129
CSA COVID-19 Information	118
How Do I Pay for Services	117
CSA Symposium	117
Finding Supportive Services	109

- B. *Create a clearing house for information on children's behavioral health issues and resources.* Current work on the website includes a feedback survey, a weblink policy and adding additional resources for the mental health screening tool. In addition, COVID-19 Mental Health Resources have been added to the website along with CSA COVID-19 Information.

GOAL 7: Care Coordination and Integration

Coordinator: Jim Gillespie

- A. *Provide behavioral health consultation to primary care providers and patients.*
 The Virginia Mental Health Access Program (VMAP) has launched, making psychiatric consultation and other resources available to pediatricians all over the state of Virginia. More information can be found at: <http://www.virginiapediatrics.org/vmap/> By mid FY 21 the pediatricians will also have the support of a care navigator. Through HMF funding a George Mason University 3 psychology residents are currently placed in a local pediatric primary care office to provide behavioral health services.

- B. *Promote resources to implement tiered levels of integration based on capacity and readiness.*
 HMF is co-sponsoring a REACH behavioral health training for pediatricians to be held virtually in early June. 111 Fairfax-Falls Church are enrolled in the Virginia Mental Health Access Program, through which they have access to telephonic consultation. Psychiatric consultations for Fairfax pediatricians skyrocketed to 40 in the period October – December 2020. In 2018 an inter-agency workgroup headed by Dr. Gloria Addo-Ayensu developed a community plan to implement integration, including but not limited to consultation, facilitated referral, co-location and full integration, which was endorsed by CPMT in June 2018. The workgroup also developed a project to safely divert youth from hospitalization when appropriate through expansion of CR2 mobile crisis response services.

Number of pediatric primary care psychiatric consults:

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19	FY 18
15	40	N/A	N/A	55	64	0	0

- C. *Increase the appropriate implementation of behavioral health screenings and referrals in primary care settings.* The workgroup recommended screening tools for use in primary pediatric care, based on the recommendations of the American Academy of Pediatrics and the REACH curriculum.

GOAL 8: Equity/Disparities

Coordinator: Peter Steinberg

- A. *Promote the adoption of culturally and Linguistically Appropriate Services (CLAS) Standards among BH providers.* This strategy has been achieved.

- B. *Increase access and availability to behavioral health services for underserved populations.* Healthy Minds Fairfax continues to support the Northern Virginia Family Service Violence Prevention Intervention Program (VPIP). During the first two quarters of this year, the VPIP program has served 32 youth and family members. A 100% of those served were Hispanic and 64% of the youth were male while 36% were female.

Require training in cultural competence and advancing equity in alignment with One Fairfax for County, FCPS, and County-contracted behavioral health service providers. Two online half-day trainings for County-contracted behavioral health service providers are planned in the 3rd Quarter. The annual CSA symposium, which will be a half-day virtual event due to COVID-19, will focus its presentations on equity in behavioral health. The symposium is scheduled for March 10th.

- C. *Implement support structures for LGBTQ youth.* The Underserved Populations workgroup as identified this as a priority.

GOAL 9: Reduce Incidence of Youth Suicide in our Community

Coordinator: Jesse Ellis

- A. *Identify universal suicide and/or depression screening tool(s) for use by the community.* The team developing guidance and protocols for suicide/depression screening by community organizations has finalized a toolkit for publication; it has been incorporated into the new website.
- B. *Develop and publish guidelines for service providers on the availability and effective use of crisis services.* The CSB has [published information](#) (including printable fliers) on accessing the Mobile Crisis Unit and on Involuntary Psychiatric Hospitalization of Minors.
- C. *Develop a common and coordinated approach to youth suicide postvention.* A resource for community organizations and families on [implementing suicide postvention](#) has been published on the redesigned website. An extension of the committee has begun meeting to discuss opportunities for coordinated community postvention outreach and services. A new Kognito module on postvention is now available. The Conner Strong Foundation developed “Help is at Hand,” a booklet with guidance and supports for survivors; plans for widespread availability and dissemination are in development.
- D. *Continue to make available and promote the suicide prevention hotline, including text line.* The PRS CrisisText Connect program engaged in 1638 text conversations with 1389 unique individuals in FY20. This represents a slight decrease from FY19. However, the number of hotline calls answered continued to significantly increase. In FY20, PRS CrisisLink answered 8289 calls, a 7% increase over FY19, after huge increases in FY18 and FY17. Of these calls, 465 (an 43% increase over FY19) were from youth under 18, and 524 were from individuals 18 to 24. These trends continued through the first quarter of FY21, as PRSCrisisLink engaged in 381 text conversations with 359 unique individuals, and answered 4500 calls.
- E. *Train behavioral health providers in evidence-based practices specific to the treatment of youth with suicidal ideation and behavior.* The Core Competency Training that is now offered regularly includes a section that is specific to the treatment of youth with suicide behavior. Training on Family Intervention for Suicide Prevention (FISP) is also regularly provided through the Training Consortium.

GOAL 10: Evidence-Based and Informed Practices

Coordinator: Peter Steinberg

- A. *Develop definitions and criteria for evidence-based and evidence-informed practice in prevention and intervention/treatment.*

This strategy has been met.

- B. *Establish a set of core competencies based on service type for all public & contracted provider staff.*

This strategy has been met.

- C. *Train County, school staff and providers on EBPs, including how and when to use them. Include a review of practices that are harmful.* The Fairfax Evidenced Based Training Consortium, which is overseen by the Evidenced-Based Workgroup in partnership between Fairfax County and George Mason University, delivered a training to CSA case managers on evidenced based practices. Several trainings are planned for the 3rd and 4th quarter of this fiscal year. The consortium will be offering trainings in TF-CBT, Family Intervention for Suicide Prevention (FISP), and a refresher course in the Core Competencies. This refresher course will allow participants to become certified in the Core Competencies.
- D. *Incentivize the use of EBPs among providers.* All participants who become certified in the core competencies will be placed on a list of providers that will be housed on the Healthy Minds Fairfax website.

GOAL 11: Trauma Informed Care

Coordinator: Chrissy Cunningham and Jesse Ellis

- A. *Ensure there is sufficient clinical capacity to meet the needs for trauma-specific, evidence-based interventions.* In the spring of 2018, the Fairfax Consortium for Evidence-Based Practice trained over 100 clinicians in the Family Intervention for Suicide Prevention (FISP), which is a trauma-informed treatment protocol for suicidal ideation. An additional 50 clinicians will be trained in January 2021.

In November 2018, 45 clinicians were trained in Trauma-Focused Cognitive Behavioral Therapy. The enrollment requirements for that training included a commitment from accepted clinicians to pursue certification. To date, 4 clinicians have completed the certification process, and at least several others are scheduled to take the exam. The consortium team continues to explore strategies to encourage and incentivize clinicians to complete the certification process. In the spring of 2020, an additional 24 clinicians attended TF-CBT training, which was provided virtually. In January 2021, an additional 30 clinicians are scheduled to attend virtual TF-CBT training. All of these clinicians will be encouraged to follow-through with certification once they complete the requirements over the year following their training.

In 2019, 51 clinicians working with children ages 7-12 were trained in MATCH-ADTC- Modular Approach to Therapy for Children with Anxiety, Depression, Trauma, or Conduct Problems. An additional 39 clinicians were trained in MATCH-ADTC using a virtual format this spring.

As evidence-based treatment models become more broadly available in our community, efforts have been made to familiarize staff in case management roles with the different treatment models and with how to connect their clients to providers who can offer them. Increasing demand for these evidence-based treatments from our system and our partners is an important part of incentivizing clinicians to participate in training, to follow-through with certification, and to use treatment practices with proven outcomes.

- B. *Train non-clinical staff in community-based organizations, schools, and county agencies to implement trauma-informed practices.* The Fairfax County Trauma-Informed Community

Network has reached over 7000 people with their 90-minute Trauma Awareness 101 Training, which is also available on-demand as a 30-minute webinar. The TICN continues to offer full day sessions of their Trauma-Informed Supervisor Training and has reached over 600 supervisors from county human services agencies, schools, and non-profit partners. Additionally, the TICN offers a full day training on Secondary Traumatic Stress (STS) in the workforce (The Cost of Caring), and a 2 hour Secondary-Traumatic-Stress and Self-Care Basics workshop, both of which have reached 500+ staff from county human services agencies and non-profit partners. A special version of STS training focused on navigating the pandemic has been delivered to almost 200 people to date. Additional trainings and resources are available on the TICN website, and include a mini-grant opportunity to fund small space improvement projects. Space improvement projects were completed this spring at the Health Department, Domestic & Sexual Violence Services, Juvenile & Domestic Relations District Court, Department of Family Services and at the Community Services Board. An additional project is underway at the Department of Housing & Community Development. Funds for small projects at community-based organizations will be made available this year through grant funding from the Family & Children's Trust Fund of Virginia (FACT). Awards for those projects, along with additional projects in county spaces, will be announced in January 2021.

This spring, the TICN added to their list of publications, which previously included a "Guide to Educating Children, Youth and Families about Trauma & Resilience" booklet for staff providing psychoeducation to kids and families. The new resource for professionals is entitled "A Guide to Trauma-Informed Approaches for Service Providers," and is available in both booklet and poster format, and is intended for staff in case management and care coordination roles. These resources have been widely distributed, as have two COVID-19 specific publications entitled, "Trauma-Informed Strategies for Working with Youth and Families During the COVID-19 Pandemic" and "Trauma-Informed Strategies for Working with Youth and Families When Out-of-School Time Centers Reopen and Programs Resume."

Inform the community at large on the prevalence and impacts of trauma. In February of 2019, a team of four TICN members from Fairfax-two from the CSBs Wellness, Health Promotion & Prevention Team, one from the NCS prevention team, and one from FCPS Social Work Services-attended an intensive 2-day course to become Master Trainers in the ACE Interface curriculum, an evidence-based program that the VA Department of Behavioral Health and Developmental Services has a license for, and is rolling out across the state to raise awareness in the community about the impact of Adverse Childhood Experiences, and the science of neurobiology, epigenetics and resilience. With support from DBHDS, the Fairfax Master Trainer Team convened the first ACE Interface presenter cohort in the state in April 2019, where 30 people from county HHS agencies, FCPS, non-profit, and family/parent organizations were trained to deliver the curriculum. ACE Interface Presentations- titled Building Resilient Communities and Understanding Adverse Childhood Experiences- have been delivered to over 1,000 people so far, and are currently available in a virtual format, which have drawn larger audiences than pre-pandemic in-person presentations. Recruitment for a second presenter cohort is currently underway, with training scheduled for late February. Thanks to grant funding from FACT, presenters from community, faith or parent organizations will have access to a stipend each time they complete a presentation. In partnership with DBHDS and other ACE Interface Master Trainer Teams from across the state, plans are currently underway for a PSA related to the messages in the ACE Interface presentation, and for additional coordination of this work at the state a regional levels.

- C. *Develop shared screening and referral process for individuals impacted by trauma for school and human services agency staff using nationally recognized screening tool.* One county HHS agency is currently screening clients using a validated trauma screening tool. Juvenile & Domestic Relations District Court began piloting the STRESS (Structured Trauma Related Experiences Symptom Screener) in select work units in 2016 and scaled to agencywide implementation in July 2019. Through technical assistance from the RFK National Resource Center for Juvenile Justice, JDRDC is currently working on refining workflow and referral processes to respond to the results of the screening. Expanding the capacity of the provider community to offer evidence-based treatments for trauma, the work of the training consortium, is a key component of ensuring that all of the necessary resources to effectively respond to trauma screening are in place.
- D. *Human service agency leaders will integrate the concepts of trauma-informed care into their organizational culture.* County Health and Human Services agencies continue to implement plans to ensure their organizations are trauma informed. Evidence of lessons learned by agency leadership from across HHS in the Taking the Lead: Training for Leaders in High Stress, Trauma-Exposed Workplaces (training that was sponsored by the TICN in 2016) have been apparent throughout the response to the pandemic, and the TICN has received multiple requests for review of those training materials during this time.

GOAL 12: Behavioral Health Intervention

Coordinator: Peter Steinberg

- A. *Develop empirically validated cross system human services and schools screening process available to determine needs, resources, & desirable outcomes.* The Brief Screening for Adolescent Depression (BSAD) is available for families and youth on the Healthy Minds Fairfax Website as well as the website for the Falls Church-Fairfax County Community Services Board. Healthy Minds Fairfax staff continues to work with human services to develop a protocol for screening tools.

Number of BH screenings

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19	FY18	FY17
15	15	N/A	N/A	30	50	89	88	108

- B. *Create capacity to address behavioral health needs of children 0-7.* Office for Children staff who support early childhood educators in centers and family childcare homes throughout the county participated in a professional learning series that will use The Pyramid Model Equity Coaching Guide and facilitated discussions on understanding the impact of race and implicit bias. The Pyramid Model for Social Emotional Competence in Infants and Young Children (formerly known as SEFEL – the Social Emotional Foundations for Early Learning) applies coaching and mentoring through an equity lens. The Pyramid Model is a multi-tiered framework of evidence-based teaching practices that promote social and emotional skills of all children, prevent challenging behaviors and provide individualized interventions for children with persistent challenging behavior.
- C. *Establish a training consortium in partnership with university and private provider partners (ex: GMU, INOVA) for ongoing training for staff and service providers.* The Fairfax Consortium on

Evidenced Based Practice has entered its fourth year and we are in the early planning stages for the next year. All trainings that recently took place were delivered online. The consortium will be offering 3 trainings in the 3rd and 4th quarter. The trainings are in TF-CBT, Family Intervention for Suicide Prevention, and a refresher course in the Core Competencies.

- D. *Expand access to timely and available behavioral health services for school age children and youth with emerging behavioral health issues who have not been able to access such services.* Healthy Minds Fairfax Short-Term Behavioral Health Services (STBH) is available to children and youth who attend any of the 44 designated Fairfax County Public Schools and all middle school and high school Comprehensive Services Sites. During the 3rd quarter, STBH services will expand to include the middle and high school that is part of Falls Church City Public Schools. Children and youth who must wait for services at the Falls Church-Fairfax Community Services Board will be screened for STBH services. As a reminder, this service continues to link income eligible youth and families from select school communities to timely and available short-term mental health counseling (up to 8 sessions), funded by Healthy Minds Fairfax. During this quarter, all services were provided via telehealth.

Number of youth served through Short-Term Behavioral Health Services:

FY21 (1 st Qtr)	FY21 (2 nd Qtr)	FY21 (3 rd Qtr)	FY21 (4 th Qtr)	FY21 TOTAL	FY20	FY19	FY18	FY17
20	67	N/A	N/A	87	205	215	126	57

- E. *Develop recommendations for the Board of Supervisors Public Safety Committee that reflect Diversion First initiatives needed for youth who come in contact with the criminal justice system.* CSB and JDRDC staff continue to meet to address the behavioral health needs of the court that can be provided by the CSB.
- *Reduce youth substance abuse and use.* Substance Abuse Prevention Services (SAP) are available in all Fairfax County School pyramids including alternative schools. During this school year, 5 youth have been referred to the CSB for SAP services.

GOAL 13: Service Network for High Risk Youth
Coordinator: Janet Bessmer

- A. *Increase availability/capacity of provider community to offer trauma assessments and evidence-based trauma treatment; trauma services shall be offered in languages and in locations that are accessible to families.* This goal overlaps with roles of TICN and the Training Consortium. Private providers who offer trauma assessments and treatments are identified in the CSA provider directory. There continues to be a need for providers to offer evidence-based trauma assessments and treatment. TFCBT training was offered by the consortium, supplemented by CSA funding, for 44 clinicians in November 2018 and were offered again in Spring 2020. Additional training dates are set for the Fall, 2020. The Training Consortium is strategizing how to increase the number of clinicians who complete the certification process. Links to listing of certified therapists will be provided.

- B. *Identify and implement an evidence-based parenting program designed for parents of adolescents (12+); language capacity and location/accessibility shall meet the needs of families.* Three providers are currently under contract to provide Functional Family Therapy.
- C. *Identify and implement an evidence-based parenting program designed for parents of children (<12); language capacity and location/accessibility shall meet the needs of families.* Parent Child Interaction Therapy (PCIT) is currently being offered by one provider in our region.
- D. *Monitor utilization of ICC and Case Support and increase capacity/staffing so that youth with identified behavioral health care needs receive appropriate case management services.* UMFS and Wraparound Fairfax are fully staffed. There appears to be adequate capacity at this time.
- E. *Improve the utilization of the annual gaps survey of youth and parents in CSA-SOC to identify needed interventions.* The annual state OCS survey was suspended for FY20.
- F. *Develop communication plan to share information about the services and care coordination offered through the SOC process with the broader provider community.* CSA produces a bi-monthly newsletter that contains training announcements and other information pertinent for system partners. See social marketing goals for more information about outreach efforts. DFS has been facilitating a quarterly home-based provider meeting to share information about FFPSA implementation. Two information sessions about EBTs were provided to nearly 300 county and school staff during the summer. CSA has also developed a specific page on their public and internal website with information and job aides regarding new services.
- G. *Build system capacity to monitor fidelity to EBT models and conduct outcome evaluation for purchased services.* Fidelity monitoring efforts have been moved to the Virginia Wraparound Implementation Center, which is funded through a federal grant. Both Wraparound providers, UMFS and Wraparound Fairfax, have entered into MOUs with VWIC. As VWIC collects data on family satisfaction through the WFI-EZ survey and compliance of the model through file reviews using the DART, data will be entered into an online information system. CSA staff will have access to this data. A report out on the WFI-EZ and DART data collected from FY18 through FY20 was provided to the CSA Management Team and the ICC Stakeholders Workgroup.
- H. *Provide IT infrastructure to support data collection for fidelity monitoring and outcome evaluation along with electronic records management.* CSA has implemented an electronic document management system, OpenText, and has been able to work remotely. Serious Incident Reports and other data are tracked and collected electronically.
- I. *Explore opportunities for expanding available financial resources to serve youth on diversion or probation who need intensive behavioral health services.* CSA staff continue to collaborate with juvenile court leadership to make the CSA process accessible to probation officers. Training about MST and FFT have been provided to court staff.
- J. *Increase family and provider membership on the CPMT.* FAPT parent representative positions have been filled. All vacant CPMT positions were filled as of September 24, 2019. The Family Advisory Board was established.

GOAL 14: DD/Autism Services
Coordinator: Tracy Davis

Develop expanded continuum of care of services for youth with DD/autism. The workgroup has refined the direction of the work on this goal. Two main deliverables were identified:

Deliverable #1: Revised SOC Blueprint Goal 14, DD/Autism Services, with updated action steps and dates

Deliverable #2: DD/Autism Services Case Management Recommendations with a Statement of Need

The two deliverables for Goal 14 stated above have been accomplished.

Updates on each blueprint strategy are addressed below:

- A. *Conduct needs assessment and service inventory of the existing continuum of services and supports and identify critical service gaps for youth with DD/Autism.* Status: No further action is required on Strategy A. For Action Steps 1- 4: The workgroup had consensus that the urgent need is to serve the 1,000 youth that are on the DD waiver waitlist and that the largest service gap is for case management along with the need for behavioral supports, respite, crisis supports (such as Reach), transportation and attendant care giver support. The workgroup determined that there is no further needs assessment and inventory needed however consolidating the inventory information and possibly reexamining the needs could be addressed with the development of the subsequent blueprint following the completion of the current blueprint.
- B. *Utilize results of needs assessment and gap analysis to develop a plan to address critical service gaps.* Status: No further action is required on Strategy B. For Action Steps 1- 5: The workgroup determined that there may be a need for focus groups/discussion with service providers such as Grafton, Jill's House and/or other homebased/ABA providers. Jill's House or Autism Society can bring together families to be sure the plan is addressing their needs. The Welcoming Inclusion Network (WIN) and CSB Supported Employment should be included in all future discussions to address critical gaps. The workgroup determined that these tasks may be completed in conjunction with priority strategy areas D, E, & F and therefore there is no further work required for this strategy. Reassessment of utilizing the results of the needs and service gaps should be addressed with the development of the subsequent blueprint following the completion of the current blueprint.
- C. *Develop a system navigation, community awareness & outreach campaign to promote early identification of youth with DD/Autism who would benefit from referral to services.* Status: No further action is required on Strategy C. For Action Steps 1 – 7: The workgroup indicated that current efforts by CSB, FCPS, and family organizations are ongoing. Each organization will assume responsibility going forward for implementing the current efforts. Reexamining the needs and the services with regards to system navigation, community awareness & outreach to promote early identification could be addressed with the development of the subsequent blueprint following the completion of the current blueprint.
- D. *Improve transition planning for children with intellectual disabilities or chronic residential needs.*
- E. *Ensure access to crisis stabilization services designed for youth with DD/Autism with providers trained to serve this population*
- F. *Increase case management and care coordination capacity for children and youth with DD, particularly for younger children.*

Status of Strategy E, F and G: Strategy E, F & G were identified as high priority areas. The objective for the workgroup is to address Blueprint Strategy E, F & G. The DD/Autism services workgroup presented a recommendation to take the CSA process that currently exists to accurately assess children for appropriate supports to prevent crisis and applying it to 347 of the more than 1,300 youth who have open cases with the CSB Developmental Disabilities Services Unit. On November 7, 2019, the recommendations were presented to the CSB DD Support Services leadership team. The CSB will assume responsibility going forward for implementing the recommendations that they determine to be most beneficial. Obtaining additional positions to serve in a case management role appears to be the next area to be addressed.

GOAL 15: Transition Age Youth

Coordinator: Peter Steinberg

Provide coordinated services and supports for youth and young adults of transition age, both those still in school and those who have left school. Reduce the number of youth of transition age who are living with unidentified and untreated serious mental illness who have signs and/or symptoms of a serious mental health condition that emerged before they transition out of youth serving systems/programs.

- A. Health Minds Fairfax plans to reward a contract to a private agency to offer case management services to transition age youth.

SCYPT Update
April 7, 2021

Topic	Community Schools
<p>Status of Community Schools in Fairfax</p>	<p>Three community schools are operating in Fairfax County:</p> <ul style="list-style-type: none"> • Mt. Vernon Woods Elementary School, funded by Fairfax County and coordinated by United Community; • Whitman Middle School, funded by United Way of the National Capital Area and coordinated by United Community; and • Glasgow Middle School, funded and coordinated by Communities in Schools of Northern Virginia. <p>FCPS has submitted a proposal for a US Department of Education grant that would fund new sites at Hutchison Elementary School and Herndon Middle School. We anticipate hearing back by the beginning of the summer.</p> <p>All current and proposed sites align with Opportunity Neighborhoods communities.</p>
<p>Summary of Framework in Development</p>	<p>Prior to the pandemic, the SCYPT’s community schools committee was developing a proposed framework for a countywide approach to community schools. It would establish a countywide standard for community schools, regardless of who funds them or who is responsible for coordinating specific sites. The framework would allow for community schools to be coordinated by FCPS staff or non-profit staff (as the current sites are), and funded under different models and programs. But the approach and underlying foundations of all sites would be consistent.</p> <p>The framework was developed after extensive research and engagement with the Coalition for Community Schools and United Way of the National Capital Area, visits to and consultations with other local community schools, and our experience with our current community schools.</p> <p>The framework will include standards and recommendations in the following areas:</p> <ul style="list-style-type: none"> • Intended outcomes of community schools • How to assess strengths and needs of a community • Program and service area categories • How to develop a school action plan • How community schools are managed and coordinated at the school and system levels • Community School Coordinator job responsibilities, hiring processes, and training content • Site selection processes • Communications • FCPS responsibilities

Recommended Decision Points for Finalizing the Framework	<p>Before the framework recommendations are finalized and presented to the SCYPT, the committee would like SCYPT feedback on some key questions:</p> <ol style="list-style-type: none">1. Coordination: A structure with the following components:<ol style="list-style-type: none">a. An FCPS program manager position to coordinate work across sites and support all sitesb. A countywide advisory group (aligned with the SCYPT) to provide guidance and insight into system-wide approaches and effortsc. School-level advisory groups to engage local partners and stakeholders to help determine needs, develop partnerships, etc.2. Site selection: Should sites be prioritized by a collaborative group of FCPS and County staff based on a set of agreed-upon data.3. FCPS responsibilities: Even if they are employed by community-based organizations, FCPS provide the site coordinators with office and program space, computer, FCPS system access, building access, and training with MOU of each ON partner.
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SCYPT Update
April 7, 2021

Topic	WORKFORCE READINESS
<p>Key Partners and their Major Programs</p>	<ul style="list-style-type: none"> • FCPS Academic and Career Planning: FCPS infuses academic and career planning starting in elementary school with career-connected learning and Portrait of a Graduate work. Students engage in goal-setting, learning about their interests and strengths, and career exploration. In middle and high school, students develop their academic and career plan that links their skills, interests, and goals with their course selections and postsecondary plans. • FCPS CTE includes six program-specific areas: business and information technology, consumer sciences and education, health and medical sciences, marketing, technology and engineering education, and trade and industrial education. This program provides a variety of career and technical education courses in all middle and high schools as well as specialty workforce development programs offered through six high school academies. In addition, the CTE team continually reviews course offerings and content to ensure that work-based learning is incorporated into the curriculum and relevant career pathways are available to students. Course work is being expanded in the areas of Science, Technology, Engineering, Arts, and Mathematics (STEAM), health and medical, and cyber security. Additionally, the CTE central office team is supporting the expansion of dual enrollment and early college opportunities with NOVA as well as work-based learning opportunities with business and community partners. • FCPS CTS supports the transition to postsecondary education and employment for students with disabilities. Through CTS, students have access to classes and programs that teach workforce readiness skills, employability skills, self-advocacy, and self-determination. Transition planning is incorporated into the students' Individual Education Program (IEP) process, and career assessment services are available. CTS provides assistance with adult agency referrals and linkages to postsecondary services to include college accommodations, Virginia Department for Aging and Rehabilitative Services, and the Fairfax-Falls Church Community Services Board. Work-based learning opportunities, including community work experience, is a critical component of CTS, and there are specialty career education programs available to students ages 18-22. • FCPS CSP is comprised of four programs designed to support students who are the first in their family to attend college and/or are part of traditionally underrepresented groups in higher education: Advancement via Individual Determination (AVID), The Early Identification Program (EIP) in partnership with George Mason University, the College Partnership Program (CPP), and Pathway to the Baccalaureate in partnership with NOVA. These programs, each with unique features and supports, prepare students for the academic rigor of college course work, help students with the college admissions process, and provide enrichment experiences to build resilience and success towards graduation and the matriculation to postsecondary. Additional services include college, academic performance monitoring, tutoring, and support with the pursuit of financial aid. • FCPS Nontraditional School Programs includes alternative programs for high school aged students and FCPS Adult High School with diploma and high school equivalency pathways. • FCPS ACE offers a wide variety of courses, certificate programs, and career training to adults with a focus on providing educational opportunities for adults to earn professional credentials that will help them advance in the workforce. ACE program areas include Trade and Apprenticeships, Business and IT, and Health and Medical that are focused on working adults with classes that will not disrupt a day-time work schedule. Many ACE students are sponsored by employers, WIOA grants, or receive scholarships. ACE Apprenticeship programs qualify for funding from 529 savings plans and offers payment plan options to students in apprenticeship courses. ACE now proudly serves over 24,000 students. • Fairfax County Department of Family Services provides Employment and Training Services, including summer employment and the WIOA Youth Program through Virginia Career Works. • Northern Virginia Community College (NOVA) and George Mason University, among other initiatives, offer ADVANCE, a partnership that provides supports to NOVA students to complete their bachelor's degree. • Many additional programs and services are offered through the Department for Aging and Rehabilitative Services, the Department of Labor and Industry (Youth Registered Apprenticeships),

	<p>the Fairfax County Economic Development Authority, the Northern Virginia Regional Commission, local chambers of commerce, and other business and community partners.</p>
<p>Related Recommendations in Existing or Proposed Plans</p>	<ul style="list-style-type: none"> • NOVA Workforce Labor Market Information • The FCPS Strategic Plan includes workforce readiness related strategies: <ul style="list-style-type: none"> ○ All students will: be college or career ready by graduation; Graduate on time; have a plan for college or career after high school ○ All students will meet grade-level expectations for Portrait of a Graduate outcomes as measured by their performance on end-of-year POG Presentations of Learning. • The draft Fairfax County Strategic Plan includes four related strategies: <ul style="list-style-type: none"> ○ EO 15. Develop and implement a roadmap that enables our most economically disadvantaged residents to build fundamental workforce competencies, including technology acumen and English proficiency, in alignment with employer requirements and through leveraging existing county and community resources. ○ LEL 13. Promote career and technical education and associated career paths — including apprenticeship and internship programs — across schools, postsecondary institutions and workforce development organizations. ○ LEL 14. Identify and address common barriers that prevent many residents from accessing career and technical education. ○ LEL 15. Increase the supply and improve the quality of career and technical education — including apprenticeship and internship programs — by expanding comprehensive public-private coalitions across schools, postsecondary institutions and workforce development organizations. • The proposed Fairfax County Economic Recovery Plan includes two related recommendations: <ul style="list-style-type: none"> ○ Coordinate improvements to certification and reskilling programs; bring these opportunities to low-income communities and communities of color. ○ Strengthen job training and placement programs. • The Chairman’s Task Force on Equity and Opportunity included three related recommendations: <ul style="list-style-type: none"> ○ Expand Career and Technical Education offerings through FCPS and community-based providers to be more accessible and to align with projected areas of job demand. ○ Engage educators, business, government, and nonprofits, and involving youth and young adults, to align their resources and initiatives to create an education-to-career system that better connects Fairfax’s youth ages 16-24 who are not in school or working (opportunity youth) to in-demand careers. ○ Ensure residents are aware of academic and career enrichment opportunities, early enough and in ways that encourage Blacks and Hispanics to take advantage of them. • Fairfax Futures is looking to make Opportunity Youth a key focus area, but they have not yet determined the specific scope of their work.
<p>Decision Points for Scope of Work</p>	<p>How might SCYPT support and increase meaningful community and work-based learning opportunities for students that connect to their high school learning and support a successful transition to postsecondary engagement in continuing education or work?</p> <ul style="list-style-type: none"> • Introducing and integrating career-connected experiences starting in elementary school, with expanded opportunities in middle and high school • Fostering community partnerships to extend Finance Park learning experiences • Engaging and connecting students who do not enroll in college immediately after high school and re-engaging school-aged students and adults who have not yet completed high school <i>(Focus of breakout session today)</i> <ul style="list-style-type: none"> ○ Scholarships and financial aid for college, trade/apprenticeship, workforce training ○ Partnerships with adult and alternative programming to connect students with paid work experiences, workforce training programs ○ Expand access to in demand industry credentials and training programs ○ Childcare and preschool coverage for parents to return to school/training ○ Expansion of dual enrollment programming to include programs with resume ready credentials and training ○ Business partnerships to include academic and career mentoring opportunities



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Chairman McKay

June 23, 2020

Launched by President Obama in 2014, the My Brother's Keeper Initiative currently partners with over 250 counties, cities, towns, and tribal nations to address opportunity gaps that exist for boys and young men of color. My Brother's Keeper Communities work across sectors to implement policies and action that, among other key principles, aim to improve literacy and college and career readiness for young men of color. The My Brother's Keeper Initiative also aims to address the disproportional amount of contact with law enforcement our youth of color experience while improving and promoting "second chances" for youth following contact with the criminal justice system.

I believe the mission and work of the My Brother's Keeper Initiative aligns with that of our One Fairfax priorities to consider equity in all areas of the County and work towards making Fairfax County a place where all can thrive. This equity lens must be applied towards the experiences of our youngest residents, as these experiences are crucial to determining their success later in life.

Therefore, I ask without objection that our Successful Children and Youth Policy Team (SCYPT) facilitate a partnership between Fairfax County and the My Brother's Keeper Alliance to make Fairfax County an official "My Brother's Keeper Community." SCYPT is directed to identify and engage community partners in shaping the participation and infrastructure necessary for building, improving, and scaling initiatives that serve and support improved life outcomes for boys and young men of color and to determine the resource needs to implement organizational and operational recommendations.



MBK COMMUNITY CHALLENGE

Playbook for Action

Purpose of this Playbook

- A.** To encourage Mayors, tribal leaders and county executives to accept the President’s “MBK Community Challenge”
- B.** To provide a process framework for the development of an effective plan of action
- C.** To define the six goals central to the Challenge
- D.** To promote data-driven strategies

My Brother’s Keeper at a Glance

In February 2014, President Obama launched the My Brother’s Keeper (MBK) initiative to address persistent opportunity gaps faced by boys and young men of color and ensure that all young people can reach their full potential. The initiative seeks to organize and capitalize on the commitment of community leaders in order to reach that goal.

Starting this fall, the Administration will take the next crucial step in this effort by issuing a challenge to cities, towns, counties and tribal nations across the country to become “MBK Communities.” This challenge represents a call to action for all members of our communities, and Mayors, tribal leaders, and town and county executives in particular, as they often sit at the intersection of many of the vital forces and structural components needed to enact sustainable change through policy, programs, and partnerships. In addition to issuing this challenge to Mayors and local officials, the Obama Administration has conducted outreach to business leaders, non-profits, philanthropies, and local school-systems, who are organizing independently to support communities’ efforts.

The MBK Community Challenge encourages communities (cities, rural municipalities, and tribal nations) to implement a coherent “cradle – to - college - and - career strategy” for improving the life outcomes of all young people to ensure that they can reach their full potential, regardless of who they are, where they come from, or the circumstances into which they are born.

It is important to underscore that this is not a new federal program, but rather a call-to-action, and a targeted effort to convene leaders, identify effective strategies, and to work together to accomplish our shared goal of improving life outcomes for young people. We encourage you to use this Playbook to guide your planning and outreach with the understanding that you may have already begun some of these steps. Challenge participants are encouraged to reach out with questions or ideas by emailing localgovernment@who.eop.gov.

LAY THE GROUNDWORK FOR AN MBK COMMUNITY

✓ **STEP #1: ACCEPT THE PRESIDENT'S CHALLENGE**

Notify the White House that you will participate (localgovernment@who.eop.gov), provide a designated point of contact on your staff, confirm your pledge to build and execute a plan to accomplish as many of the goals listed below as possible, and announce your acceptance of the challenge with a press release or media statement.

- | | |
|---|---|
| A. Ensure all children enter school cognitively, physically, socially and emotionally ready | D. Ensure all youth complete post-secondary education or training |
| B. Ensure all children read at grade level by 3rd grade | E. Ensure all youth out of school are employed |
| C. Ensure all youth graduate from high school | F. Ensure all youth remain safe from violent crime and receive second chances |

✓ **STEP #2: CONVENE A "LOCAL ACTION SUMMIT" TO BUILD AN MBK COMMUNITY**

This effort will require a coalition of partners with an ownership stake in the strategy, and a sense of empowerment to help lead the effort. **Within 45 days** of accepting the President's Challenge, host a Local Action Summit with key stakeholders to assess needs and assets, determine priorities, and set concrete goals.

EXTERNAL PARTNERS

- University presidents
- Job training programs
- Chambers of Commerce
- Local business owners
- Faith groups & leaders
- PTA & parent groups
- Student groups
- Youth leadership orgs
- Non-profit orgs
- Local philanthropies
- Teachers, educators
- Banks/financial orgs

GOV'T STAKEHOLDERS

- School systems
- Law enforcement
- Child & Family Services
- Employment Services
- Public Health
- Public Housing
- Parks and Recreation
- State & Federal partners

✓ **STEP #3: CONDUCT A POLICY REVIEW & FORM RECOMMENDATIONS FOR ACTION**

Following your Local Action Summit, direct a working group of pertinent government stakeholders to scour existing local policies, programs, and practices in search of ways to introduce or expand on existing efforts to better serve the needs of the community's youth. The working group should assess the impact of both existing and proposed programs. **Within 120 days** of accepting the President's Challenge, this body should produce a report with recommendations for action on your selected areas of focus (from Step 1), standards for tracking and sharing data across public agencies and community partners, and structural recommendations for institutionalizing the effort until goals are reached.

SUGGESTED DATA FIELDS FOR COMMUNITY TRACKING (not exhaustive):

- | | | |
|---|---|--------------------------------|
| - Enrollment in quality pre-K | - School attendance | - Median earnings |
| - Children entering kindergarten ready to learn | - High school graduation rate | - Summer employment |
| - Adolescent births | - AP/IB/Dual Enrollment | - Arrest rate |
| - Low birth weight | - Advanced degree enrollment/completion | - Exposure to violence |
| - Child maltreatment | - STEM BA enrollment/completion | - Imprisonment/detention rate |
| - Youth developmental screening | - Youth in school or working | - Homicide rate |
| - Reading and math achievement | - Labor force participation rate | - Adolescent mortality |
| | | - Youth with effective mentors |

✓ **STEP #4: LAUNCH A PLAN OF ACTION, NEXT STEPS & A TIMETABLE FOR REVIEW**

Within 180 days of accepting the President's Challenge, convene key partners to publicly launch a plan of action for accomplishing selected goals based off the results of your policy review. It should include a protocol for tracking data, benchmarks and timelines for review to ensure the transparent assessment of progress towards goals, and the open examination and retooling of ineffective strategies. Include a blueprint for resourcing your efforts which outlines plans to use or redirect existing resources, new public or private sector commitments, and specific areas where additional commitments, investment, or partnership could help your community reach its MBK goals and help potential new partners target their involvement.

MAKING THE CASE: TOPLINE TALKING POINTS

These talking points are provided as a resource to help you discuss the MBK Community Challenge with stakeholders and citizens, and are intended to be adapted to fit the needs and priorities of your community.

- In February 2014, President Obama launched the “My Brother’s Keeper” initiative to address persistent opportunity gaps faced by boys and young men of color and ensure that all young people can reach their full potential.
- My Brother’s Keeper seeks to bring together leaders, organizations, and people in communities around the country to work to improve the life outcomes of young people in America. This is about doing what is smart for our youth, our economic future, and our entire community.
- **On September 27th, the President announced that he is inviting cities and communities around the country to join the “MBK Community Challenge”** to build and execute robust plans to ensure that all young people can achieve their full potential, no matter who they are, where they come from, or the circumstances into which they are born.
- Mayors, tribal leaders, and county executives around the country are already convening key partners in their cities, to determine their communities’ biggest priorities, to set goals, and to build comprehensive, sustainable plans to give all our youth the chances to succeed that they deserve.
- Our goals as an “MBK Community” are to ensure that:
 - ✓ All of our children enter school cognitively, physically, socially and emotionally prepared
 - ✓ All of our children read at grade level by third grade
 - ✓ All of our young people graduate from high school
 - ✓ All of our young people complete post-secondary education or training
 - ✓ All youth out of school are employed
 - ✓ All of our young people are safe from violent crime and receiving the second chances they deserve
- To meet these goals, we will join communities across the country in working to improve access to high quality early education, to close stubborn gaps in school readiness, to bolster reading support programs at all levels, and to promote “reading at home” and stronger reading cultures with parents.
- We’re also going to work with school officials and parents to reduce school suspensions and expulsions.
- We are going to initiate a public-private campaign to support mentoring programs, and actively recruit citizens to serve as mentors for our youth.
- We renew our effort to prevent violence and keep our young people safe, through targeted intervention, mediation, counseling, and multi-platform campaigns to reduce violence.
- To make sure young people have viable career paths, and the skills they need to compete in the 21st century workforce, we will engage with local businesses and others to increase summer jobs, internships, and apprenticeships for young people. We will also work with our community colleges, universities and advanced training programs to improve access and affordability.
- We are committing, as a community, to identifying and implementing policies that are proven to work; to forging action-oriented partnerships; and to closely tracking our progress and setbacks with data.
- And we commit to this task to ensure our community’s workforce can compete with the workforces of cities around the country and the world. Employers will want to set up shop here because they know we have a well prepared, diverse, and fully mobilized workforce.
- Anyone concerned with the economic future of our community, our families, our neighborhoods, or our country, should know that empowering all our youth, including boys and young men of color, is an investment in our shared future, and our collective prosperity.

BUILD A COMPREHENSIVE PLAN

Plans for MBK Communities should take a “cradle-to-college-and-career” approach, and address as many of the 6 goals laid out in the MBK Task Force’s report as possible.

✓ A.) ENSURE ALL CHILDREN ENTER KINDERGARTEN PREPARED TO SUCCEED

By the age of 3, children from low-income households have heard roughly 30 million fewer words than their higher-income peers. Studies show that achievement gaps, behavioral problems, health disparities, and much more can all be dramatically affected by improving children’s access to high quality early education. The unparalleled brain development and socialization that takes place in the first few years of life mean that any investment a city makes in early education is an investment in its own long-term economic success.

✓ B.) GET ALL CHILDREN READING AT GRADE LEVEL BY 3rd GRADE

All children should be reading at grade level by age 8—the age at which reading to learn, and not just learning to read, becomes essential. Reading well at an early age is essential to later success in education, employment and life. When provided frequent, quality reading experiences in the home, and high-quality instruction in school, nearly every child can learn to read by the third grade.

A child’s literacy skills prior to kindergarten, as well as his or her reading skills at the conclusion of kindergarten, are highly predictive of future reading proficiency. During these critical years, reading with an adult is an especially important way to familiarize children with books and promote early awareness of written language and interest in reading.

Both school and community engagement are needed to support parents and other adult caregivers in strengthening home literacy and to provide students with broader opportunities to read with adults. Preschools and elementary schools can support all families by training parents and caregivers to use effective tutoring and joint book-reading strategies, such as listening to children read.

✓ C.) GRADUATE ALL STUDENTS FROM H.S. – PREPARED FOR COLLEGE & CAREER

Researchers are making progress in identifying the underpinnings of school success, including: (1) effective leaders who work with staff to implement a clear and strategic vision for school success; (2) collaborative teachers who are committed to the school, participate in professional trainings, and work to improve the school; (3) involved families who have strong relationships with school staff and support learning; (4) supportive environments where the school is safe and orderly and teachers have high expectations and are engaged with their students; and (5) ambitious instruction where classes are academically demanding and engage students.

Research from the University of Chicago has found that schools that were strong on these essentials were 10 times more likely to improve student learning gains in math and reading than schools that were weaker in these essentials. Research has also demonstrated the importance of expanded learning time in schools to open new opportunities for students to grow, providing more time for student engagement and deeper attention to academics; greater enrichment classes and activities that complement school curricula; and more time for teacher collaboration and development. Summer learning loss is a significant contributor to lowered achievement, and certain high-quality out-of-school time and summer learning programs have been found to sustain or accelerate learning and reduce incidences of violence.

✓ **D.) ENSURE POST-SECONDARY EDUCATION OR TRAINING OPTIONS FOR ALL**

Every American child should have a postsecondary option. Often a lack of information and/or encouragement are all that stand in our children's way as they look toward their options beyond high school. Working with school boards, educators, and partners in higher education to make accurate and empowering information more broadly accessible, especially to potential first-generation-college students is an important first step. Students should know what is expected of them in order to be competitive at the next level, they should have the support they need to perform, and they should be provided the proper context as to how a post-secondary education will likely affect their career and economic options. Encouraging, facilitating, and monitoring FAFSA completion long before the deadline, and exercises to locate and fill out post-secondary applications and scholarship forms should be incorporated in learning programs throughout high school years.

✓ **E.) IMPROVE ACCESS TO JOBS AND VALUABLE WORK EXPERIENCE**

A mere glimpse into a workplace or higher education setting can help youth begin envisioning themselves in fulfilling careers, and building plans to make those visions a reality. When community leaders underscore for employers the long-term workforce and economic benefits of empowering the next generation of workers, everyone wins. Investments in infrastructure, advanced manufacturing, job training and raising the minimum wage will pay dividends to the economy as a whole and improve employment prospects for all young people. Summer jobs, internships, and direct line-of-sight into local professional workplaces can provide motivation, structure, and encouragement for long-term career planning—as well as “soft skills” like punctuality, teamwork and interpersonal communication, all of which enhance job prospects.

A few specific ideas for action are: (1) Collect commitments from local businesses for summer job opportunities to cover a target percentage of youth between the ages of 16-24. (2) Reach out to public and private sector employers to urge them to develop job-shadowing and internship programs for low income youth. (3) Encourage local employers to host regular field-trips from classes and community programs from local low income areas to tour their work space and interact with staff. These can be important for children as early as elementary school.

✓ **F.) PREVENT YOUTH VIOLENCE AND PROVIDE SECOND CHANCES**

No one is more acutely aware than local executives of how dangerous our streets can be, particularly for boys and young men of color. Violence too often leads to communities gripped by fear and heartbreak, lost lives, and incarceration. These problems reverberate through our neighborhoods and families in countless harmful ways.

Mayors, tribal leaders and county executives have unique access to the various players who must play a part in reaching young people and implementing strategies to avert tragedy. Specifically, they can embrace models for community engagement that promote constitutional and community oriented policing as core operational philosophies and provide training on racial bias and disparities to prosecutors, defense counsel, judges, probation officers and others involved as decision makers in the criminal justice system. And they can increase the availability of diversion programs to keep youth out of the juvenile justice system; increase the use of alternatives to incarceration, especially for status and misdemeanor offenses; and enhance educational and training programming for juveniles in secure placement.

Criminal histories keep many young people from getting jobs, securing housing, attaining higher education, or qualifying for loans or credit – even when they are otherwise qualified and have paid their debt to society. Local government executives can do a great deal to facilitate more successful reentries by addressing policies that saddle juveniles and young adults with excessive fines and permanent criminal records. A more effective approach is often to strengthen a community's focus on the potential and future of juveniles who have gotten into early trouble, while actively working to implement strategies that have proven to lower the likelihood of re-offense. This could include, for example, working with public housing authorities to reduce barriers for formerly-incarcerated individuals to obtain stable housing. Several communities are also exploring initiatives to modify requirements for the disclosure of juvenile or criminal records on job applications.

✓ **ADDITIONAL IMPERATIVE: ISSUE A CALL TO ACTION FOR MENTORS**

Access to a healthy and engaged mentor can make a world of difference in a young person's life. Mayors, tribal leaders, and town and county executives' voices will be critically important in encouraging their citizens to step up as mentors, while working with public and private sector partners to create effective mentorship programs. Several Mayors are leading by example in their cities by providing all municipal employees, from high ranking city officials to custodial staff, with mentorship training, access to matching programs, and paid time each week to dedicate toward mentorship.

SHARE YOUR FINDINGS

Possibly the most important component of this Challenge is the sharing of best practices, dead-ends, and promising ideas between government officials and their partners. No one who is committed to this work should be working in a vacuum anymore. The MBK Community Challenge provides a venue, and an organizing principle for communities like yours to facilitate the sharing of information and successful strategies to ensure that no current or future leader feels that he or she needs to reinvent the wheel in attempting to address the same problems that other leaders across town or across the country have already found success in solving.

As part of your plan, incorporate a reporting structure that will facilitate the sharing of data, policy techniques, and program strategies between cities. As your work continues, adopt "What Works First" policies requiring budget directors and program managers to compare existing and proposed programs to the programs with the strongest available evidence of impact, and require a justification if a low-evidence approach is selected.

CONCLUSION

In order to maximize the effectiveness of MBK Community Challenge plans, our hope is that you will approach this effort with an eye both toward short-term priorities and long-term progress. In constructing and carrying out plans, we hope community leaders will keep sustainability top of mind, and work to ensure they are answering questions with their plan as to how to keep their effort focused and effective for as long as it takes to be successful. For instance: How will you ensure your plan stays fresh and relevant over time? How will you ensure a sustained focus on eliminating disparities and obstacles to opportunity? What types of protocols will you put in place to ensure that once goals are met and problems are effectively solved, your plan can adapt to focus on sustaining the progress, or identifying new problems to solve? Build into your plan guidelines for how your community will recognize success, and move forward from there.

The President has issued this call to action at a time when our economy is growing, jobs are being created, and the global marketplace is expanding. But along with these changes come a rapidly advancing global marketplace for workers, a shrinking need for unskilled labor, and growing disparities between the rich and the poor. As a country, we simply can't afford to let any of our young people slip through the cracks.