Supporting Students to Be Resilient, Successful, and Ready to Learn

Early Assessment of the Prince George's County TNI@School Initiative

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TNI@School: Prince George’s Community Schools Network

In 2012, Prince George’s County, MD, launched the Transforming Neighborhoods Initiative (TNI) to achieve the vision of County Executive Rushern L. Baker III for a thriving economy, great schools, safe neighborhoods, and high-quality health care by targeting cross-governmental resources to neighborhoods with significant needs. Prince George’s County is the nation’s most affluent jurisdiction with an African American majority. With 908,049 residents (2016 Census), Prince George’s is the second-most-populous county in Maryland. It is also among Maryland’s most diverse counties; African Americans, Hispanics, and Caucasians made up 65 percent, 18 percent, and 13 percent of the population in 2016, respectively. Prince George’s County is home to the University of Maryland, College Park; NASA’s Goddard Space Flight Center; Joint Base Andrews (previously Andrews Air Force Base); and the US Department of Agriculture’s Beltsville Agricultural Research Center. It is bordered by Washington, DC, and Montgomery, Howard, Anne Arundel, Calvert, and Charles counties in Maryland.\(^1\)

Recognizing the interrelated challenges facing the County’s highest-need neighborhoods, the TNI structure seeks to leverage County knowledge and resources through interagency neighborhood committees designed to facilitate coordinated and collaborative responses to challenges in specific neighborhoods. Three neighborhoods were added to the original six based on high rates of violent crime that negatively affect the County’s ability to attract new businesses, developers, and residents. To support the County Executive’s vision, TNI@School: Prince George’s Community Schools Network emerged in 2013 as a collaboration between the County government and Prince George’s County Public Schools. Led by the Office of the County Executive and implemented by the Department of Social Services, TNI@School supports students in identified neighborhoods by offering wraparound supports to improve learning (figure 1).

TNI@School initially targeted 22 of the highest-need schools in the target neighborhoods based on needs related to attendance, academic performance, and a school progress index. Since then, TNI@School has worked to reach more schools and students, and as of May 2017, it provides services in 40 schools across all grade levels (table 1). Prince George’s County Public Schools serves 132,000
students in prekindergarten through grade 12 with diversity of its student population reflecting that of the County.²

This report explores implementation of TNI@School from 2015 through 2017. Before 2015, the initiative and its current data collection and reporting processes were still in development. Though the level of analysis described here cannot be done on the first two years of the initiative, TNI@School reports that around 3,400 service connections were made from 2013 to 2015. Current programs and processes evolved out of the challenges experienced, lessons learned, and improvements made during those initial years.

FIGURE 1
TNI and TNI@School Structure

Note: TNI@School expanded full-day prekindergarten in elementary schools. This assessment focuses on K–12 program components.
### TABLE 1

**Neighborhoods and Schools in the TNI@School Network**

<table>
<thead>
<tr>
<th>TNI neighborhoods</th>
<th>TNI@School Target Schools</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Elementary/Kindergarten-Grade 8 Academy</td>
</tr>
<tr>
<td>East Riverdale/Bladensburg</td>
<td>Port Towns Elementary</td>
</tr>
<tr>
<td></td>
<td>Rogers Heights Elementary</td>
</tr>
<tr>
<td></td>
<td>Riverdale Elementary</td>
</tr>
<tr>
<td>Forestville</td>
<td>North Forestville Elementary</td>
</tr>
<tr>
<td>Glassmanor/Oxon Hill</td>
<td>Barnaby Manor Elementary</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Hillcrest Heights/Marlow Heights</td>
<td></td>
</tr>
<tr>
<td>Kentland/Palmer Park</td>
<td>Judge Sylvania W. Woods Elementary</td>
</tr>
<tr>
<td></td>
<td>Cora Rice Elementary</td>
</tr>
<tr>
<td></td>
<td>William Paca Elementary</td>
</tr>
<tr>
<td>Langley Park</td>
<td>Carole Highlands Elementary</td>
</tr>
<tr>
<td></td>
<td>Mary Harris Mother Jones Elementary</td>
</tr>
<tr>
<td></td>
<td>Langley Park McCormick Elementary</td>
</tr>
<tr>
<td>Silver Hill</td>
<td>William Beanes Elementary</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Suitland/Coral Hills</td>
<td>Andrew Jackson Academy</td>
</tr>
<tr>
<td></td>
<td>Suitland Elementary</td>
</tr>
<tr>
<td></td>
<td>Bradbury Heights Elementary</td>
</tr>
<tr>
<td></td>
<td>William Hall Academy</td>
</tr>
<tr>
<td></td>
<td>Samuel P. Massie Academy</td>
</tr>
<tr>
<td>Woodlawn/Lanham</td>
<td>Glenridge Elementary</td>
</tr>
<tr>
<td></td>
<td>Beacon Heights Elementary</td>
</tr>
<tr>
<td></td>
<td>Woodridge Elementary</td>
</tr>
</tbody>
</table>

**TNI@School Goals and Outcomes**

TNI@School is designed to improve school performance by ensuring that individual students in identified schools are resilient, successful, and ready to learn. The County will measure the long-term success of the initiative by improved attendance, student behavior, family stability, and graduation.
rates across all schools in the initiative. The root causes of these outcomes are interrelated, and wide disparities often exist across race, foreign-born status, English proficiency, and country of origin, but evidence highlights their link to student success.

- **Increased school attendance**: Students who attend school are more likely to learn course content and succeed academically. Research shows that attendance is linked to reading skills, and chronic absences predict dropping out (Epstein and Sheldon 2002). In 2014, chronic absenteeism among high schoolers in Prince George’s County Public Schools was three times the national average (Maryland State Department of Education 2015).

- **Improved student behavior**: Suspension and expulsion can exacerbate students’ behavioral issues and can have profoundly negative impacts on students, including increased behavioral problems, higher risk of violence and substance abuse, and greater likelihood of academic failure (Gregory, Skiba, and Noguera 2010). In 2013, Prince George’s County Public Schools suspensions and expulsions were higher than the overall state rates (Maryland State Department of Education 2015).

- **Increased family stability**: Children who have a stable family are less vulnerable to other negative outcomes, including behavioral problems, chronic health issues, and involvement in other systems, including child welfare (Sandstrom and Huerta 2013).

- **Increased graduation rates**: High school graduation is often a prerequisite for college and career advancement, and it is associated with higher education, employment, and income in adulthood (Northeastern University Center for Labor Market Studies 2009). Prince George’s County Public Schools graduation rates are below the Maryland state average but have improved steadily for the past several years and reached 81 percent in 2016 (Maryland State Department of Education 2015).

**TNI@School Framework and Evidence Base**

Collaborative efforts like TNI@School require not only a common set of goals among partners, but a structure for working together toward those goals. TNI@School has adopted The Coalition for Community Schools’ framework, which emphasizes the principles of strong partnerships, accountability for results, high expectations, community strengths, diversity, and innovative solutions (figure 2). The research evidence on community schools is compelling: a literature review of 49 community schools
programs across the country found positive results across all outcomes of interest to TNI@School (Dryfoos, n.d.):

- Thirty-six of the 49 programs reported academic gains.
- Nineteen programs reported improvements in school attendance.
- Eleven programs reported a reduction in suspensions.
- Twelve programs reported increases in parent involvement.
- Six programs reported lower violence rates and safer streets in their communities.

Using the community schools framework, TNI@School established a network of school-based partners and community-based organizations to help achieve its goals. This report focuses on the activities of TNI@School’s seven core partners during 2015–17 and examines interim measures of progress in connecting students to four categories of services (see the appendix for the methods used to analyze the data obtained from TNI@School). As detailed in the framework below, these services are designed to provide evidence-based interventions to help remove barriers to success, improve outcomes, and support TNI@School students to be resilient, successful, and ready to learn.

As detailed in the framework, TNI@School core partners and services include the following:

- **Resource connection and referral**: Prince George’s County Department of Social Services Community Resource Advocates (CRAs) Program
- **Behavioral health counseling**: Advanced Behavioral Health (ABH), PACE Consulting LLC (PACE), and The Children’s Guild
- **Positive youth development and college and career readiness**: Hillside Work-Scholarship Connection (Hillside)
- **Case management**: Maryland Multicultural Youth Center (MMYC) and La Clinica del Pueblo (La Clinica)

TNI@School partners offer strategies that are grounded in research evidence shown to have a positive effect on one or more of the TNI@School outcomes. In some cases, TNI@School partners may not target the same population or use the same curriculum as that cited in the research, but they use core components of evidence-based strategies. For example, research demonstrates that health-based strategies can affect student outcomes. School-based health clinics and services, such as the mental
health counseling provided by TNI@School, have been shown to reduce high school dropout rates by one-third (Keeton, Soleimanpour, and Brindis 2012). Cognitive-behavioral therapy, offered by TNI@School’s behavioral health partners, has been shown to increase school attendance both during and after services (King et al. 1998). Additionally, research has identified connecting students to health insurance, as TNI@School’s CRAs do, as a high-impact strategy that improves attendance and increases the likelihood of high school and college graduation as compared with students who are not connected to health insurance (US Department of Education and US Department of Health and Human Services 2016).
FIGURE 2
TNI@School Framework

TNI@School students are resilient, successful, and ready to learn

Improved Attendance
- Success and timeliness of service connection
- Frequency and type of services
- Location of therapy; presenting problems
- Exit from services

Improved Student Behavior
- Completion and timeliness of student needs assessments
- Number and appropriateness of student referrals
- Referral follow-up rates
- Connection to supplemental funding for behavioral health supports

Improved Family Stability
- Success and timeliness of service connections
- Frequency and focus of services
- Attendance: individual goal plan updates
- Parent engagement in services
- Exit from services

Improved Graduation Rates
- Success and timeliness of service connections
- Frequency and focus of services
- Referrals to community services

Interim Measures of Success Linked to Longer-Term Outcomes

Evidence-Based Strategies
- School-based mental health services
- Cognitive-behavioral therapy
- Group counseling: social skills training
- Family engagement
- School-based case management and connection to services
- Family-school-community partnerships that draw on family and community resources to create safe schools
- Connecting students to health insurance
- Family engagement in services
- Career/college counseling
- Academic case management
- Mentoring; individual student intervention plans
- Family engagement
- Internships, apprenticeships, and work training
- Academic case management
- Language supports for English language learners
- Mentoring and family engagement
- Internships, apprenticeships
- Summer enrichment, community activities
- Teen pregnancy prevention

Resource Connection and Referral
- Frequency and type of services
- Referrals to community services
- Exit from services

Community Resource Advocate Program
- Success and timeliness of service connection
- Frequency and focus of services
- Referrals to community services

Positive Youth Development and College and Career Readiness
- Academic case management
- Language supports for English language learners
- Mentoring and family engagement
- Internships, apprenticeships
- Summer enrichment, community activities
- Teen pregnancy prevention

PACE CONSULTING, LLC
- Advanced Behavioral Health
- Behavioral Health Counseling
- Resource Connection and Referral
- Hillside Work-Scholarship Connection
- Positive Youth Development and College and Career Readiness
- Case Management
- Maryland Multicultural Youth Center
- The Children’s Guild
- La Clinica Del Pueblo

Prince George’s County Department of Social Services, Public Schools, and network of community services under the direction of the TNI@School Dream Team

Supporting Students to be Resilient, Successful, and Ready to Learn
Similarly, academic supports like college and career counseling, also offered by TNI@School, have been shown to significantly increase students’ grade point averages, likelihood of graduation from high school, and enrollment and persistence in college. These findings were maintained when disaggregated by gender and race/ethnicity (Curtis and Bandy 2016). Academic case management, such as that provided by TNI@School’s case management partners, has been shown to reduce both absenteeism (Reid and Bailey-Dempsey 1995) and school behavior incidences, especially those resulting in in-school or out-of-school suspensions (Kannel-Ray, Lacefield, and Zeller 2008). Both school-based connection to services, such as CRAs, and a range of mentoring programs, such as those provided by other TNI@School partners, have been shown to increase student attendance (Lehr, Sinclair, and Christenson 2004; Smith 1995). Finally, job training and vocational education programs like those offered by TNI@School’s college and career readiness partners have been shown to significantly increase high school graduation (Schochet, Brughardt, and Glazerman 2000).

In addition, TNI@School implements several structural strategies that, although they are not specific to a program or target population, have been shown to positively affect students, schools, and families. These strategies include multidisciplinary teams, colocation of education and services, performance measurement, and data sharing (Goldberger, Keough, and Almeida 2000; Gunderson 2012; Prevention First 2011; Public Citizens for Children and Youth 2011).

The evidence base on school and community partnerships can also inform other potential strategies that may support TNI@School outcomes. Out-of-school-time strategies, income support strategies, family engagement strategies, and transportation strategies all feature prominently in the evidence on what works for student and family outcomes. TNI@School incorporates some of these strategies in existing programming, and future opportunities to add or expand services should consider these other evidence-based strategies.

Serving TNI@School Students

TNI@School works to connect students to resources and address barriers to academic performance through the five basic steps outlined here and shown in figure 3. Students are referred to TNI@School by school staff, TNI@School partners, or by themselves or their families. The referrer indicates one or several reasons for the referral, such academic concerns, behavioral challenges, or basic needs. After a student is referred to the initiative, TNI@School CRAs embedded in each target school complete a needs assessment to further identify the student’s specific needs. Based on identified needs, CRAs then
refer the student to TNI@School partners working in each target school and other community-based organizations. TNI@School partners are charged with engaging referred students in services and regularly reporting to TNI@School on service provision and some student outcomes. These data, which are reported in the TNI@School Efforts to Outcomes database, were used to generate the information in this report. At the end of the 2016–17 school year, CRAs began working to complete follow-up needs assessments with students to understand whether student needs improved or changed after services. Because this process is relatively new, this report does not include follow-up needs assessment information.

**FIGURE 3**
Five-Step TNI@School Resource Connection Cycle

**Inbound Referral to TNI@School by School Staff, Partners, and Families**

TNI@School strives to connect students and families to resources, and resource connection begins with the referral process. During the period covered by this report (August 2015 through January 2017), school staff, partners, and families referred 3,026 individual students to TNI@School. Referrals were spread across all school levels, including 32 percent in elementary schools, 27 percent in middle schools, 9 percent in the three kindergarten–grade 8 academies, and 32 percent in high schools (figure 4).
Various school and program staff are responsible for referring students to TNI@School when appropriate. Data on referral sources are available for 2015–17, though the referral source variable changed from an open-ended response in the older intake form to a series of standard response options in the current inbound form. Based on inbound referral data only (n = 1,799 referrals), the primary referrers to TNI@School included teachers (20 percent), counselors (20 percent), principals or vice principals (14 percent), and self or family members (10 percent) (figure 5). A high share (19 percent) of inbound referral sources were reported as "other." The least common referral sources included pupil personnel workers and school health professionals.
Program data can also be used to examine primary referrers by school level to understand who is working to connect students to TNI@School resources across different age groups. These data are presented by school level so that staff and partners working in each school can better understand which referrers are actively engaged in the TNI@School referral process and who could be more engaged in the elementary, middle, and high schools and the kindergarten–grade 8 academies. For example, over half (55 percent) of all referrals made by teachers were at the elementary school level. Referrals by counselors were more common at the middle (33 percent) and high school (38 percent) levels (figure 6).
To continue to increase appropriate referrals, TNI@School may consider engaging some of the less common referrers, such as parent engagement associates, pupil personnel workers, and school health professionals. Additionally, because students themselves and their family members represent a large share of the referrers, it may be helpful to gather their feedback on how the referral process works and whether there may be opportunities for improvement.

Through the inbound referral process, referrers choose one or more of 18 reasons specified for a referral to TNI@School. As shown in table 2, most students were referred for multiple reasons; on average, students were referred for three reasons. Many combinations of referral reasons exist, and no one combination represented a large share of all referred students. The most common combination of reasons was attendance and food resources, which represented 2.5 percent of all referred students. More analysis on referral reason combinations, such as whether certain reasons are more likely to be seen in combination than alone, could be helpful to further inform programming. Referrers could also provide an open-ended response for other referral reasons, which have been coded and added to the other specified response options as appropriate in the analyses below.
Although most students were referred for multiple reasons, the most common referral reasons (either alone or in combination with others) among all students included behavioral concerns (29 percent), academic concerns (21 percent), and anger and aggression (19 percent) (figure 7). These referral reasons are aligned with TNI@School’s long-term goals of improving student behavior and academic performance, and they suggest the initiative is reaching students who can benefit from its programming. Of the options on the referral form, the least common reasons for referral were career and college readiness (3 percent), violence (3 percent), and child abuse or neglect (3 percent).

A total of 105 students (3 percent) were also referred for one or more other open-ended reasons that did not fit clearly into the specified referral reasons. Common referral themes among these 105 students included mental health, child care, and immigration or English as a Second Language (ESL) supports. As shown in table 3, some students had more than one other open-ended reason for referral, so the number of reasons is greater than the number of unique students. These open-ended reasons suggest TNI@School may be able to provide more explanation or guidance on how to interpret the referral reasons used on the inbound referral form. For example, mental health is currently categorized as “other,” but it may be better categorized as anger and aggression or behavioral concerns. Or perhaps mental health should be added as one of the specified reasons on the inbound referral form if it is not already captured by other response options.
Interestingly, inbound referral data also show that the top three overall referral reasons were also the top three referral reasons when looking specifically at elementary school, middle school, and high school referrals (figure 8). At all three levels, behavioral concerns, academic concerns, and anger and aggression topped the list of referral reasons, either by themselves or in combination with other reasons. For example, of all students referred for academic concerns, 32 percent were elementary students.
school students, 27 percent were middle school students, 10 percent were students in kindergarten-grade 8 academies, and 32 percent were high school students.

**FIGURE 8**
Top Reasons for Student Referrals by School Level

*Total referral reasons (percent)*

| Source: TNI@School administrative data, 2015–17. Notes: Students may have been referred for multiple reasons; for this reason, percentages do not add up to 100. Missing data are excluded from the percentages reported. n = 3,026 students. |

![Bar chart showing top reasons for student referrals by school level.](chart)

**Student and Family Needs Assessments**

After TNI@School receives an inbound referral, CRAs work to do a more in-depth assessment of student and family needs. During the 2015–16 school year, CRAs used the Child and Adolescent Needs and Strengths (CANS) Comprehensive Assessment; in the following school year (2016–17), CRAs used a different general needs assessment informed by the CANS assessment. Assessment data are available for 3,018 students referred between August 2015 and January 2017. Of these students, assessments were completed for 71 percent (2,157 students) by June 2017. As discussed in the CRA section below, the proportion of students assessed included all referred students, including students with whom CRAs were unable to make contact. Without contact, CRAs could not complete a needs assessment. In the next assessment, it would be useful to look at how many students with whom CRAs are able to make...
contact subsequently complete a needs assessment. These data would help reveal how large a barrier contact information is and whether there are other barriers to needs assessment after referral.

Although each school in the TNI@School network has unique strengths and assets, these schools were strategically identified based on the characteristics of the schools, students, and families that present barriers to academic success. All but 11 of the 40 schools are Title I schools, a federal designation that attests to the high share of students from low-income families. In all but 4 schools, over 70 percent of students are eligible to receive free and reduced-price school meals, another indicator that their families likely struggle to make ends meet. The majority of students in the TNI@School network are black or Hispanic. Schools within Langley Park and East Riverdale/Bladensburg, two neighborhoods with large Hispanic populations, serve a large share of Hispanic students. Three variables (foreign born, housing status, and food insecurity) used in the general needs assessments completed for TNI@School students assessed in school year 2016–17 are discussed below. These variables provide relevant benchmarks (though not perfect comparisons) for Prince George’s County overall.

About 21 percent of Prince George’s County residents overall are foreign born. Students who are foreign born or new to the country can face significant challenges in adapting to their new school and living environment, including communication and language barriers, as well as culture shocks and other changes associated with a long-distance move (Short and Boyson 2012). Based on data from the TNI@School general needs assessment in 2016–17, about 8 percent of TNI@School students or their families who completed the assessment self-reported they were new to the country (figure 9). About 3 percent of children in the United States under age 18 are foreign born (NCES 2015).

FIGURE 9
TNI@School Self-Reported as New to the Country

TNI@School students or their families who self-reported they were new to the country

8%

Source: TNI@School general needs assessment, 2016–17.
Note: Data available for 526 students.

Positively, most TNI@School students that completed the assessment resided in stable housing (figure 10). Sixty-nine percent lived in an apartment or home owned by their parent or guardian, and
another 15 percent lived in an apartment or home their parent or guardian rented. Housing stability has been linked to strong academic performance and attendance (Cunningham and MacDonald 2012), underscoring the importance of identifying and monitoring student and family housing status. The homeownership rate among TNI@School families was higher than the homeownership rate across Prince George’s County (62 percent). However, 16 percent of TNI@School families resided in a more unstable housing situation, with 9 percent doubled up with other family and friends and 7 percent in motels, transitional housing, emergency shelters, or other places.

**FIGURE 10**

Family Housing Status among TNI@School Students

<table>
<thead>
<tr>
<th>Housing Status</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motel, transitional housing,</td>
<td>7%</td>
</tr>
<tr>
<td>emergency shelter, other</td>
<td></td>
</tr>
<tr>
<td>With family or friends in a</td>
<td>9%</td>
</tr>
<tr>
<td>semipermanent or permanent residence</td>
<td></td>
</tr>
<tr>
<td>Apartment or home that family rents</td>
<td>15%</td>
</tr>
<tr>
<td>Apartment or home that family owns</td>
<td>69%</td>
</tr>
</tbody>
</table>

*Source: TNI@School general needs assessment, 2016–17.*

*Note: Data available for 511 students.*

Food insecurity is also linked to challenges with attendance and academic performance among students (Wight, Thampi, and Briggs 2010). Based on predictors of food insecurity including poverty, unemployment, and homeownership, Feeding America estimates the food insecurity rate in Prince George’s County at 14.4 percent. In the general needs assessment, TNI@School seeks to uncover food insecurity by asking whether a student’s family has worried that food would run out before they could purchase more. For the 2016–17 school year, 20 percent of TNI@School students or their families who
completed the assessment self-reported they worried that food would run out (figure 11). The rate among TNI@School families is significantly higher than the County (14 percent) or the nation (13 percent).\textsuperscript{6}

**FIGURE 11**  
TNI@School Self-Reported Concern about Food  

- TNI@School students or their families who self-reported they worried about food

<table>
<thead>
<tr>
<th>20%</th>
</tr>
</thead>
<tbody>
<tr>
<td>TNI@School families worried food would run out before they could purchase more</td>
</tr>
</tbody>
</table>

Source: TNI@School general needs assessment, 2016–17.  
Note: Data available for 451 students.

Because TNI@School tracks several indicators on student needs, these data can help inform whether TNI@School is reaching the vulnerable students it seeks to serve and what other types of services students may need.

### Outbound Referral to TNI@School Partners and Community-Based Organizations

After assessing student and family needs, CRAs, the cornerstone of the TNI@School model, work to connect students to TNI@School partners and community resources. CRAs are embedded in each target school and work within unique school climates. School climate and readiness for the TNI@School project affect how integrated and effective CRAs can be, especially during early implementation. CRAs have worked to cultivate school relationships to increase engagement with TNI@School over time.

From August 2015 through January 2017, CRAs made resource connections to 6 TNI@School partners and over 60 other community-based resources that work to address a variety of challenges, from housing to adult mental health to financial stability. Between the 2015–16 and 2016–17 school years, TNI@School intentionally made changes and improvements to their program processes and data collection that were intended to improve key measures, such as the number of referred students who have a needs assessment completed and the time between student referral and program participation. This report looks at early implementation, but the next iteration of data analysis may show improvements that occurred subsequent to these changes.
Of the 3,026 students referred to TNI@School by January 2017, CRAs made resource connections for 91 percent (2,751 students) by June 2017 (six months after the last referred student in this analysis), as recorded in the outbound referral file. Student referrals, needs assessments, and resource connections represent three steps in the TNI@School process; each step includes overlapping groups of students (figure 12). Many students completed all three steps in the process, but some students who were referred did not receive a resource connection, and not all students who received a resource connection also completed a needs assessment. Examining how these groups of students overlap may help highlight areas in which TNI@School can strengthen the process so that more students complete all three steps.

FIGURE 12
TNI@School Indicators of Progress
Resource connection and referral

<table>
<thead>
<tr>
<th>TNI@School Indicators of Progress: Resource Connection and Referral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students referred to TNI@School by January 2017</td>
</tr>
<tr>
<td>3,026</td>
</tr>
</tbody>
</table>

Sources: TNI@School intake/inbound files; outbound file; Child and Adolescent Needs and Strengths and general needs assessment file.
Note: n = 3,026 students.

CRAs worked to ensure resource connections were made in a timely manner. Data on students who were assessed by January 2017 (n = 1,327) show that most students began TNI@School program participation about 19 days after completing the needs assessment. Many students began program participation much sooner, with about 36 percent of students beginning program participation the same day as their needs assessment. CRAs seek to make appropriate resource connections based on referral reasons and needs assessment findings. Of the 1,248 students for whom CRAs made referrals to at least one TNI@School partner by January 2017, 89 percent (1,110 students) were connected to appropriate partners.

CRAs also monitored family engagement as measured by parent or guardian consent to treatment goals established in response to a student’s needs assessment. Family engagement often provides a boost to student outcomes by marshaling both school and family investment in a student’s success (Harvard Family Research Project 2014). To secure consent to treatment goals, CRAs must first
establish communication with each student’s parent or guardian, which often takes flexibility and persistence. TNI@School shows early signs of success around this indicator, but more progress is needed. For those students for whom data were reported (509 students with a general needs assessment for the 2016–17 school year), about half (52 percent) of the families consented to at least one of their student’s treatment goals as determined by the needs assessment, while the other half did not.

**Services Received by Students and Families**

Altogether, TNI@School served 2,180 individual students from January 2015 to January 2017. Table 4 shows the number of schools and students served by each of the core TNI@School partners over this period. Most students (1,491, or 68 percent of all TNI@School students) were served by both the CRA program and another core partner. Table 5 shows all possible combinations of the four core services received by students and how many students received those combinations. The most common combinations included resource connections (through the CRA program) and college and career readiness or behavioral health.

**TABLE 4**

**Schools and Students Served by TNI@School Partners through January 2017**

<table>
<thead>
<tr>
<th>Program</th>
<th>Schools served (n)</th>
<th>Students served (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community resource advocates</td>
<td>39</td>
<td>1,816</td>
</tr>
<tr>
<td>Hillside</td>
<td>9</td>
<td>1,048</td>
</tr>
<tr>
<td>Children’s Guild</td>
<td>13</td>
<td>485</td>
</tr>
<tr>
<td>Advanced Behavioral Health</td>
<td>9</td>
<td>104</td>
</tr>
<tr>
<td>Maryland Multicultural Youth Center</td>
<td>3</td>
<td>96</td>
</tr>
<tr>
<td>La Clinica del Pueblo</td>
<td>1</td>
<td>87</td>
</tr>
<tr>
<td>PACE Consulting</td>
<td>6</td>
<td>46</td>
</tr>
</tbody>
</table>

*Note: n = 2,180 students.*
TABLE 5
Service Combinations for TNI@School Students

<table>
<thead>
<tr>
<th>Type of service</th>
<th>Students served (%)</th>
<th>Students served (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resource connection and college and career readiness</td>
<td>39%</td>
<td>847</td>
</tr>
<tr>
<td>Resource connection and behavioral health</td>
<td>24%</td>
<td>524</td>
</tr>
<tr>
<td>Resource connection only</td>
<td>15%</td>
<td>329</td>
</tr>
<tr>
<td>College and career readiness only</td>
<td>9%</td>
<td>186</td>
</tr>
<tr>
<td>Resource connection and case management</td>
<td>5%</td>
<td>105</td>
</tr>
<tr>
<td>Behavioral health only</td>
<td>4%</td>
<td>96</td>
</tr>
<tr>
<td>Case management only</td>
<td>4%</td>
<td>78</td>
</tr>
<tr>
<td>Resource connection, behavioral health, and college and career readiness</td>
<td>1%</td>
<td>11</td>
</tr>
<tr>
<td>Behavioral health and college and career readiness</td>
<td>0%</td>
<td>4</td>
</tr>
</tbody>
</table>

Source: TNI@School outbound file (CRA) and partner data, 2015–17.
Note: n = 2,180 students.

BEHAVIORAL HEALTH COUNSELING

Core Partners: Advanced Behavioral Health, PACE Consulting LLC, and The Children’s Guild

TNI@School offers behavioral health services through ABH, PACE, and Children’s Guild. Together, these partners served 635 students. Most of these students were referred to behavioral health partners through the outbound referral process, though 16 percent were connected another way (figure 13).

The first session for students served by ABH or PACE (150 students) happened approximately four weeks after their referral. Students attended an average of 23 sessions with ABH and PACE and exited after about three months of services. Students received multiple types of therapy, sometimes in combination. The majority (87 percent) of students received individual psychotherapy at least once, and 61 percent received family therapy or psychotherapy at least once. Sixty-one percent of students received therapy in school, over one-quarter (28 percent) of students received therapy in their home, and another 11 percent of students received therapy in an office setting. For these sessions, TNI@School offered supplemental funding to qualifying students who otherwise would not have been able to use behavioral health services. Supplemental funding is a key resource for helping the program achieve its goal of reducing barriers to academic and social supports for low-income students. During 2015–17, 145 students received supplemental funding (97 percent of those who had requested it) to support their access to behavioral health services.
FIGURE 13
TNI@School Indicators of Progress
Behavioral Health Counseling

TNI@School Indicators of Progress: Behavioral Health Counseling

<table>
<thead>
<tr>
<th>635</th>
<th>23</th>
<th>3</th>
<th>145</th>
</tr>
</thead>
<tbody>
<tr>
<td>students received behavioral health counseling from ABH, PACE, or Children’s Guild</td>
<td>sessions attended by each student enrolled with ABH and PACE, on average</td>
<td>months of services provided to students enrolled with ABH and PACE, on average</td>
<td>students received supplemental insurance</td>
</tr>
</tbody>
</table>

Source: TNI@School partner data, January 2015 - January 2017.
Note: ABH = Advanced Behavioral Health; PACE = PACE Consulting.

CASE MANAGEMENT

Core Partners: La Clinica del Pueblo and Maryland Multicultural Youth Center

Case management services were received by 183 students from either La Clinica or MMYC. Many students were connected through the outbound referral process, though 42 percent were connected another way. Twenty-five students were referred to one of these partners but not successfully engaged by January 2017, which may speak to the demand for these services.

La Clinica was recruited by the County specifically to address the needs of unaccompanied minors who fled from Central America. Students served by La Clinica attended an average of six sessions from September 2016 to February 2017. Students attended various types of sessions and often more than one type. The most common types of sessions were case management (47 percent of students attended at least one of these), group intervention (38 percent), and group therapy (30 percent). Some sessions resulted in additional referrals for other services, most commonly reported as additional referrals for education, food, or other reasons. La Clinica covered a variety of outcome areas in student sessions. The most common outcome areas covered were reported as behavioral or mental health services (34 percent of students had at least one session that covered this outcome) and providing language access to services for those with limited English proficiency (29 percent). Language services were generally provided to facilitate student or family involvement in the process of reducing barriers or advocating for themselves.

MMYC, which also provides case management, tracks 14 areas of well-being in their case management sessions. The majority of sessions reported focused on behavior and communications (58 percent) with the next most common types of session focused on community resources (21 percent) and academic progress (10 percent). On average, students attended 32 sessions with MMYC between
January 2015 and January 2017. MMYC tracks many types of participant outcomes in their own program data, but these data are not yet available in the TNI@School Efforts to Outcomes database. TNI@School may seek to integrate more MMYC outcomes in their database to be analyzed in the next assessment.

**POSITIVE YOUTH DEVELOPMENT AND COLLEGE AND CAREER READINESS**

*Core Partner: Hillside Work-Scholarship Connection*

As of January 2017, Hillside reported 856 TNI@School students currently enrolled in services out of the 1,048 TNI@School students ever served by Hillside. Eighty-two percent of students served by Hillside were connected through the outbound referral process. On average, students attended 14 sessions in the nine-month period from May 2016 to January 2017. Hillside tracks attendance at both scheduled and unscheduled meetings. Over half of all Hillside students attended at least half of their scheduled meetings. About one-third of students struggled more with attendance and attended less than half of their scheduled meetings. The program data do not yet support an analysis of why some students might attend more scheduled sessions than others. In the future, it may be beneficial to examine whether students with greater parent engagement, for example, have more frequent attendance.

Hillside tracks four core services provided to students. The most common core services provided are after-school programming and academic assistance and postsecondary training, all of which were provided to all Hillside students at some point during their participation (figure 14). Case management was close behind these and provided at least once to 93 percent of all Hillside students, and employment training was provided at least once to 40 percent of students. Many students received at least three core services (53 percent) or even all four core services (40 percent). Hillside engaged the parents of 56 percent of students at least once during their participation and consistently engaged the parents of 6 percent of students once a month between September 2016 and January 2017, when these data were reported.

In addition to program implementation measures, Hillside collects data regarding student progress toward program milestones. A key component of the Hillside program is the individual goal plan, which summarizes how students will achieve the goals they have set for themselves. Although these data were only reported for September 2016 to January 2017, they show 159 students received an update to their individual goal plan, suggesting that students and staff are both establishing and updating the plans. Similarly, achieving Hillside's Youth Employment Training Academy certification and obtaining employment are significant milestones for some Hillside students. Program data show that 16 students achieved the academy certification, and 21 students obtained employment while receiving Hillside
services. Of the 63 students for whom data on postgraduation plans were collected, 56 were reported as matriculating to college, and the other seven were entering the military. These outcomes represent a small share of Hillside students currently served through TNI@School, as many students were still working toward these outcomes or may have achieved one of these outcomes before Hillside began reporting data to TNI@School. Outcomes will be better understood as data become more complete. Additionally, TNI@School may wish to track more interim outcomes of Hillside services that may precede or accompany Youth Employment Training Academy certification and employment.

FIGURE 14
TNI@School Indicators of Progress
Positive youth development and career and college readiness

<table>
<thead>
<tr>
<th>TNI@School Indicators of Progress: Positive Youth Development and Career &amp; College Readiness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students received after school programming</td>
</tr>
<tr>
<td>Students received post-secondary training</td>
</tr>
<tr>
<td>Students received case management</td>
</tr>
<tr>
<td>Students received employment training</td>
</tr>
<tr>
<td>100%</td>
</tr>
<tr>
<td>100%</td>
</tr>
<tr>
<td>93%</td>
</tr>
<tr>
<td>40%</td>
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Learning and Recommendations

Early Successes and Opportunities for Growth

TNI@School has made great strides in setting up a robust initiative and serving over 2,180 students during 2015–17. The initiative has established a solid foundation for connecting students and families to programming designed to remove barriers to academic success, improve academic outcomes, and stabilize families. Early in implementation, TNI@School established a rigorous performance measurement process designed to track service delivery and assess student, family, and school outcomes. In just the last school year (2016–17), TNI@School has made many intentional changes to their processes and procedures designed to better connect students to resources. Implementation is an iterative process, and the tasks ahead for TNI@School will focus on continuing to improve processes and services based on the data collected in the first year and a half of implementation. The data highlight two major early successes:
- **Students are referred to TNI@School for a wide range of needs.** Based on data from the general needs assessment, TNI@School is engaging students with a variety of needs, including students who self-report as new to the country, who are in unstable housing situations, and whose families worry about food security. Based on data from the inbound referrals, students are most commonly referred for academic and behavioral concerns and anger or aggression issues. Further, students often have unique combinations of referral reasons, with few patterns across students. These findings suggest that TNI@School is reaching students who can benefit from resource connections but that the resource combinations needed by each student will likely be unique based on their unique needs. The CRA model is a good fit for this approach, as CRAs are able to conduct more in-depth needs assessments and make individual resource connections based on student needs.

- **TNI@School uses referral reasons and assessment data to connect students with services that match their needs.** Most students referred to TNI@School receive a service connection, and most service connections are appropriate based on student needs. TNI@School may consider what other services may be needed based on the most common reasons for referral written in the “other” category of the referral form. For example, child care was the second most common reason written in the “other” category. Some TNI@School services may be in higher demand than the initiative can currently meet. For example, some students referred for case management had not yet been connected with those partners as of this analysis.

Opportunities for growth include the following:

- **Refine response options on the inbound referral form and train potential referrers.** In moving from the intake to the inbound referral form, TNI@School made improvements in tracking the types of school staff and partners referring students to TNI@School. Another opportunity to improve the inbound referral form may be to further refine the options for referral reasons based on the most common reasons written in as “other” or provide more guidance on how to interpret the existing referral reasons. For example, mental health is currently categorized as “other,” but it may be better categorized as anger or aggression or behavioral concerns. Or perhaps mental health should be added as one of the specified reasons on the inbound referral form if it is not already captured by other response options. Expanding response options or collecting more specific detail on other reasons for referrals may also provide additional insight on student needs and how TNI@School can help address them.
Seek feedback on the TNI@School referral process from both the most common and least common referrers. During 2015–17, school staff, students, and other stakeholders made 4,237 referrals to TNI@School across all school levels. To continue to increase appropriate referrals, TNI@School may consider engaging some of the less common referrers, such as parent engagement associates, pupil personnel workers, and school health professionals. Because students themselves and their family members represent a share of referrers, it may be helpful to gather their feedback on how the referral process works and whether there may be opportunities for improvement.

Expand CRA capacity for assessment and follow-up. Overall, program data show that CRAs played a critical role in the referral and resource connection process. Through June 2017, CRAs completed assessments for 2,157 individual students and made service connections for 2,751 individual students. CRAs were not able to complete an assessment on some students because of insufficient contact information. In addition, some students served by TNI@School partners did not come through the CRA referral process, which made it difficult to track the appropriateness and timeliness of service connections and the referral follow-up rate.

Share program data with all partners and continually assess progress. Data are only meaningful if they are interpreted within the context of implementation and applied in ways that improve programming and student outcomes. Many questions are not answered by the data in this report, and each iteration of analysis brings to light additional questions. In the next assessment, for example, TNI@School is interested in looking at whether process improvements made in school year 2016–17 resulted in more efficient resource connections for students. These data only explore the first year and a half of implementation, but they do provide a platform for informed discussions among partners about whether the program is working as well as it could and what, if any, improvements might be made to better support student outcomes. Data should be shared transparently, and partners should be invited to help interpret findings and plan for any changes.

Push forward in collecting and analyzing student and family outcome data. This report uses program data from 2015 through 2017 to examine early indicators of success in connecting students to services. Evidence has shown these indicators are good predictors of future outcomes for students and families. There is always an opportunity to improve and expand these program data, as outlined in more detail below, which would increase confidence in the analysis and meaning behind the findings. Additionally, there is an opportunity for TNI@School partners to add outcomes to their data collection, such as assessments of changes in behavior,
attitude, knowledge, or skills, which would help measure whether students are better off after service connections. In spring 2017, TNI@School made a large effort to reassess students to understand how their needs had changed or been resolved since receiving services, and these data will offer some insight on outcomes. TNI@School is also working to obtain school data for TNI@School students that can be linked to existing program data to better understand whether students receiving services are achieving the goals of increased attendance, academic performance, and graduation. Family stability will likely be harder to measure, but proxy data from the County or the Department of Social Services or a follow-up survey of TNI@School families could start to track changes in family outcomes.

**Improving Data Collection and Reporting**

TNI@School provided two years of program data for this report. The effort involved in setting up a shared measurement system across multiple partners cannot be underestimated, and TNI@School currently has ongoing data collection from all seven core partners. TNI@School has navigated a number of data challenges to improve data quality, including multiple data system changes and training a large number of staff and partners on data entry. It is common for initiatives like TNI@School to refine and build out their data system through performance measurement and continuous improvement for several years before embarking on rigorous evaluation. Below are several opportunities to improve data entry and data quality control to support stronger data analysis in the future, many of which are currently in progress across the TNI@School initiative.

- **Outbound referrals:** Data from the outbound referral form suggest many students are being connected to TNI@School entities and partners outside of this primary referral process. These outside referrals prevent further analysis of service connections and follow-up rates and make it more difficult to be clear on how many students are served by each TNI@School partner. TNI@School might consider reviewing the referral process to ensure all referrals are processed the same way, or at a minimum, all referral processes track the same standard data elements.

- **Missing data:** TNI@School should work to build the capacity and commitment of staff entering data to increase data completeness. Many data fields used to construct the measures in this report (or those dropped from this report) had more than 10 percent of data missing, decreasing the reliability of the measure. Students who are missing from the data may represent either positive or negative outcomes that could significantly change interpretation of the data.
- **Double-barreled response options:** Some forms combined two or more response options when individual options would have been more accurate. For example, the referrer form combines the student and a family member into a single category that can be chosen for referrer, when in reality these can be very different referrers.

- **Documentation:** TNI@School has made many intentional changes throughout the first years of implementation to improve data collection. Creating a timeline of these changes and the dates they went into effect will help explain discrepancies in data that may otherwise portray an inaccurate picture of implementation. For example, changes in documentation could include:
  - documenting the changes from the intake to the inbound form and from the CANS assessment to the general needs assessment,
  - documenting new requirements for data entry, and
  - documenting policy changes, such as when follow-up needs assessments began.

Additionally, continued maintenance of the data dictionary of all fields currently reported by each TNI@School partner and a data process flow that illustrates how data are collected, transferred among partners, and ultimately reported in the shared measurement system can strengthen quality control and analysis. The TNI@School team has extensive expertise in their own data, but this documentation would support future external evaluations or continuity in the event of staff turnover.
Appendix. Methods

The Urban Institute received student-level program data from TNI@School spanning 2015 to 2017, with some variation by partner (table A.1). Using SAS, we ran basic descriptive statistics based on the indicators discussed with TNI@School program staff as key data points to review for the early assessment. Students were linked across files by using the participant enterprise ID, a unique code assigned by TNI@School staff for each student, and duplicate entries were removed from each dataset before analysis. For student-level analyses, students with multiple referrals or sessions were merged into one record. Source notes for all tables, graphs, and infographics should be consulted for specific data files and date ranges.

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<thead>
<tr>
<th>Data source</th>
<th>Time period</th>
</tr>
</thead>
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<td>CRA program/referrals</td>
<td></td>
</tr>
<tr>
<td>intake/inbound report</td>
<td>August 2015–January 31, 2017</td>
</tr>
<tr>
<td>general needs assessment</td>
<td>January 2016–January 31, 2017</td>
</tr>
<tr>
<td>outbound report (including legacy data)</td>
<td>August 2015–January 31, 2017</td>
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<tr>
<td>Partner data</td>
<td></td>
</tr>
<tr>
<td>PACE Consulting</td>
<td>April 2015–January 31, 2017</td>
</tr>
<tr>
<td>Advanced Behavioral Health</td>
<td>April 2015–January 31, 2017</td>
</tr>
<tr>
<td>La Clinica del Pueblo</td>
<td>September 2016–January 31, 2017</td>
</tr>
<tr>
<td>Maryland Multicultural Youth Center</td>
<td>January 2015–January 31, 2017</td>
</tr>
<tr>
<td>Hillside</td>
<td>May 2016–January 31, 2017</td>
</tr>
</tbody>
</table>
Notes


3. This statistic was taken from the US Census Bureau, 2011–15 American Community Survey five-year estimates.

4. This statistic was taken from the US Census Bureau, 2011–15 American Community Survey five-year estimates.

5. This statistic was taken from Feeding America’s 2015 Map the Meal Gap food insecurity rate estimate.

References


About the Authors

Sarah Gillespie is a senior research associate in the Metropolitan Housing and Communities Policy Center at the Urban Institute. Her research focuses on housing and homelessness, place-based initiatives, and performance measurement. She is project director for a five-site national evaluation of supportive housing for families involved in the child welfare system and an evaluation of a supportive housing social impact bond for people frequently involved with the criminal justice system in Denver, CO.

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