LINC Commission Meeting

January 11, 2010

A student at Longan Caring Communities in the KCMSD gets a new hairdo. Over 150 boys and girls at the school received free haircuts and styling as part of the Barber and Beauty Day organized by LINC and its community partners.

Photo: Joe Walker

LINC
Local Investment Commission

3100 Broadway, Suite 1100 · Kansas City, MO 64111 · (816) 889-5050 · www.kclinc.org

Local Investment Commission (LINC) Vision

Our Shared Vision

A caring community that builds on its strengths to provide meaningful opportunities for children, families and individuals to achieve self-sufficiency, attain their highest potential, and contribute to the public good.

Our Mission

To provide leadership and influence to engage the Kansas City Community in creating the best service delivery system to support and strengthen children, families and individuals, holding that system accountable, and changing public attitudes towards the system.

Our Guiding Principles

1. COMPREHENSIVENESS: Provide ready access to a full array of effective services.

2. PREVENTION: Emphasize "front-end" services that enhance development and prevent problems, rather than "back-end" crisis intervention.

3. OUTCOMES: Measure system performance by improved outcomes for children and families, not simply by the number and kind of services delivered.

4. INTENSITY: Offering services to the needed degree and in the appropriate time.

5. PARTICIPANT INVOLVEMENT: Use the needs, concerns, and opinions of individuals who use the service delivery system to drive improvements in the operation of the system.

6. NEIGHBORHOODS: Decentralize services to the places where people live, wherever appropriate, and utilize services to strengthen neighborhood capacity.

7. FLEXIBILITY AND RESPONSIVENESS: Create a delivery system, including programs and reimbursement mechanisms, that are sufficiently flexible and adaptable to respond to the full spectrum of child, family and individual needs.

8. COLLABORATION: Connect public, private and community resources to create an integrated service delivery system.

9. STRONG FAMILIES: Work to strengthen families, especially the capacity of parents to support and nurture the development of their children.

10. RESPECT AND DIGNITY: Treat families, and the staff who work with them, in a respectful and dignified manner.

11. INTERDEPENDENCE/MUTUAL RESPONSIBILITY: Balance the need for individuals to be accountable and responsible with the obligation of community to enhance the welfare of all citizens.

12. CULTURAL COMPETENCY: Demonstrate the belief that diversity in the historical, cultural, religious and spiritual values of different groups is a source of great strength.

13. CREATIVITY: Encourage and allow participants and staff to think and act innovatively, to take risks, and to learn from their experiences and mistakes.

14. COMPASSION: Display an unconditional regard and a caring, non-judgmental attitude toward, participants that recognizes their strengths and empowers them to meet their own needs.

15. HONESTY: Encourage and allow honesty among all people in the system.

Monday, Jan. 11, 2010 | 4 – 6 p.m.
Kauffman Foundation
4801 Rockhill Road
Kansas City, Mo. 64110

Agenda

I. **Welcome and Announcements**

II. **Approvals**
   a. November minutes (motion)

III. **LINC President's Report**

IV. **South Kansas City Clinic**
   a. Swope Health Services - Verneda Robinson

V. **Independence School District**
   a. 12 Blocks West – Dr. Jim Hinson

VI. **Teach for America**
   a. Richard Green
   b. Alicia Herald

VII. **Adjournment**

The Local Investment Commission met at the Kauffman Foundation, 4801 Rockhill Rd., Kansas City, Mo. Chairman **Landon Rowland** presided. Commissioners attending were:

Jack Craft	Adele Hall
Sharon Cheers	Rosemary Smith Lowe
Steve Dunn	Sandy Mayer (for Mike Sanders)
Herb Freeman	Margie Peltier
SuEllen Fried	David Rock
Rob Givens	David Ross
Anita Gorman	Gene Standifer
Bart Hakan	Bailus Tate

Gayle A. Hobbs reported that LINC was focusing on strengthening relationships with state agencies. She also reported a very successful Lights On After School events at over 40 LINC Caring Communities sites. A video about the October event was shown.

Alyson Campbell, Missouri Director of the Family Support Division, shared information about how the Dept. of Social Services division was working to deliver more services to more families and making them more accessible. Campbell was in Kansas City to attend the open house for the DSS office located at 4900 Swope Parkway, Kansas City.

A motion to approve the Oct. 19, 2009, LINC Commission meeting minutes was passed unanimously.

Abe Cole and **Bill Nicks** of BKD, Inc., presented the findings of LINC's financial audit for FY 2008-2009 including the required management letter and other correspondence. Discussion followed.

The LINC's IRS Form 990 should be available in January 2010 board review.

Anita Gorman commended the LINC Finance & Audit Committee and LINC staff who worked with the auditors.

A motion to approve the financial report prepared by BKD was passed unanimously.

Gayle Hobbs reported on an effort to replicate in Kansas City the Harlem Children's Zone, an effort to improve education in the urban core.

David Rock reported that voters passed an $85 million school-improvement bond issue in the Independence School District.

Dr. John Ruddy of the Fort Osage School District reported the district will host two H1N1 clinics.

Margie Peltier reported that **Marge Randle** was the guest speaker at the latest LINC Health & Aging Committee meeting.

Terry Ward reported the student population of the North Kansas City School District continues to grow while financial support from the property tax base is dropping.

The meeting was adjourned.

Partners announce plans to open a new safety net health clinic in south Kansas City

KANSAS CITY, MO - A new public safety-net health clinic will be developed in south Kansas City, Mo. to provide affordable and accessible care to meet growing need.

The new clinic, over a year in planning, became possible with the recent approval of a $320,000 one-year grant from the Health Care Foundation of Greater Kansas City, along with earlier $200,000 funding from the Kansas City, Mo. Health Department.

Sites for the clinic are still being investigated, but the clinic will be located south of 75th Street and west of I-435. Plans are to have the clinic open and providing health services by the summer of 2010.

The new clinic project has been organized by the Local Investment Commission (LINC) working closely with several community partners. Swope Health Services has been selected to provide clinical services.

Key partners involved in the new health clinic and development of health services in south Kansas City include the Kansas City, Mo. Health Department, Swope Health Services and the Center and Hickman Mills school districts – two high-poverty school districts.

Center School District 2009 enrollment is 2,200, of which 67% are on free and reduced lunch; Hickman Mills has 6,700 students, of which 75% are on free and reduced lunch. Free and reduced lunch is generally accepted as a measure of family poverty.

LINC has a major presence in both school districts, where it operates before and after-school programs for children at a combined 10 schools through its Caring Communities initiative. LINC Caring Communities also provides other opportunities and services for families and neighbors of the schools.

Development of a new clinic is based on demonstrated need as established in two separate studies.

A July 2009 report on safety-net providers and need issued by the Mid America Regional Council (MARC) included a recommendation to expand safety-net capacity in several areas

including south Kansas City. It cited the growing suburbanization of poverty, lack of primary care physicians, and poor public transportation. [Regional Health Care Initiatives, July 2009.]

A study by The Dochterman Group found a demonstrated need for two clinics to serve the families and residents within the Center and Hickman Mills school districts – a 55.6 square mile area bounded by 75th St. (north boundary), State Line (west), Raytown Road (east) and 129th St. (south).

Funding is available to develop an initial clinic with the goal of making it financially self-sustaining within a three-year period.

The clinic will provide or arrange for all services required of a federally qualified health center. At minimum, the following services will be offered on-site: primary care for all ages, preventive care including immunizations, chronic disease management, spirometry, phlebotomy and preparation of laboratory specimens, EKG, and patient education services.

Additional services offered to clinic patients by referral and/or arrangement will include: dental care, radiology services (diagnostic, mammograms, etc.), mental health and substance abuse services, specialty care such as obstetrics and gynecology, inpatient care and emergency care. The clinic will also provide eligibility and enrollment assistance for various health care programs.

Plans are for the clinic to be staffed by a full-time physician and to add a nurse practitioner later as needed. The clinic would have 4,500 to 5,000 square feet of usable space with up to six examination rooms.

-###### -

The Partners

Local Investment Commission (LINC) www.kclinc.org

City of Kansas City, Mo. Health Department   www.kcmo.org/CKCMO/Depts/Health/index.htm

Swope Health Services www.swopehealth.org

Center School District www.center.k12.mo.us

Hickman Mills School District www.hickmanmills.org

Need for a South Kansas City clinic

Background Information

Selected pages and maps from two studies used in developing plans for a new safety net clinic in South Kansas City

- ➤ A Primary Health Clinic to Serve South Kansas City (The Dochterman Group)

- ➤ Safety Net Capacity Report (Mid-America Regional Council)
  http://www.marc.org/healthinitiative/enews/Safety_Net_Capacity_Report.pdf

Feasibility Assessment: *A Primary Care Health Clinic to Serve South Kansas City, Missouri*

Executive Summary

I.   Introduction

Greater Kansas City LINC, Inc. along with other Kansas City-area organizations and community leaders, has recognized the need for basic healthcare services in the southern section of Kansas City, Missouri. Through a major collaborative effort, LINC is now leading an initiative to establish a new primary healthcare clinic ("Clinic") to meet the needs of underserved residents of this area of the city, roughly the area south of 75th Street.

Collaborators envision the Clinic will serve as a primary healthcare home for residents of the community, and that it will become financially sustainable within three years of operation. Over the first three years, LINC and partners expect to contribute funds to support its operation.

LINC has retained The Dochterman Group, LLC to conduct a feasibility assessment of the planned Clinic as envisioned by collaborators. This report outlines the findings and conclusions of that feasibility assessment.

II.   Need and Access

An Assessment Area was established and studied to determine the need for and available access to basic primary healthcare services. The following findings relative to Need and Access were made:

- Populations within the Assessment Area demonstrate an immediate and compelling need for basic primary healthcare services, and have insufficient access to basic primary healthcare services
- There exist two distinct geographic areas of both *need* and *insufficient access: two Clinics are needed*
- While the region of the northwest quadrant of the Assessment Area may demonstrate the higher need based upon demographic indicators, the region in the southeast quadrant demonstrates both significant need and extremely limited access to available primary healthcare services

III.   The Clinic and Partnership

Swope Health Services (SHS) has been selected from among respondents to a Request for Proposal to provide all necessary Clinic infrastructure, clinical operations and management. SHS is experienced in serving diverse, uninsured, underinsured and impoverished populations similar to the Clinic's Target Population. SHS currently serves many patients residing in the Assessment Area.

Plans call for the Clinic to be initially be staffed with one full-time family medicine physician, and will bring in a nurse practitioner during the second year. A minimum of approximately 4,500 square feet will be required for Clinic facilities initially, with space for expansion over time necessary to meet expected patient demand.

Services provided by the Clinic are expected to include a full complement if basic primary care services for all ages. Additional services, including transportation, dental care, mental health and substance abuse, specialty care including obstetrics and gynecology, etc. are expected to be made available by arrangement and/or referral.

IV.   Financial Considerations

Pro-forma income and cash flow statements have been prepared, and call for an initial investment of approximately $613,000 to fund start-up and first year operations. Total funding required for the first three years is estimated at approximately $1.4 million.

V.   Conclusion

While the Assessment Area has not traditionally been considered as part of Kansas City's urban core, it is clear that much of the area's population virtually mirrors that of Kansas City's most impoverished, needy and vulnerable communities. This is a population in significant need and with very limited access to basic healthcare services. Whether the Clinic is located in the northwest quadrant or the southeast quadrant, demand for services is expected to be immediate, and will soon exceed planned supply.

Figure 2: MAP: "Poverty Levels" (< 200% FPL)

<200% FPL by ZIP Code

- 50%
- 30%
- 15%

Overlays
Approximate Center School District outlined in red. Approximate Hickman Mills School District outlined in yellow.

Figure 4: MAP: "Primary Care Providers- Medicaid"

Pushpins
- Medicaid Particpati...
- Medicaid Participation

Population by ZIP Code with PCPs
- 24,940
- 24,847
- 23,639
- 23,471
- 23,193
- 15,956
- 10,061
- 384

Approximate Center School District outlined in red. Approximate Hickman Mills School District outlined in yellow.
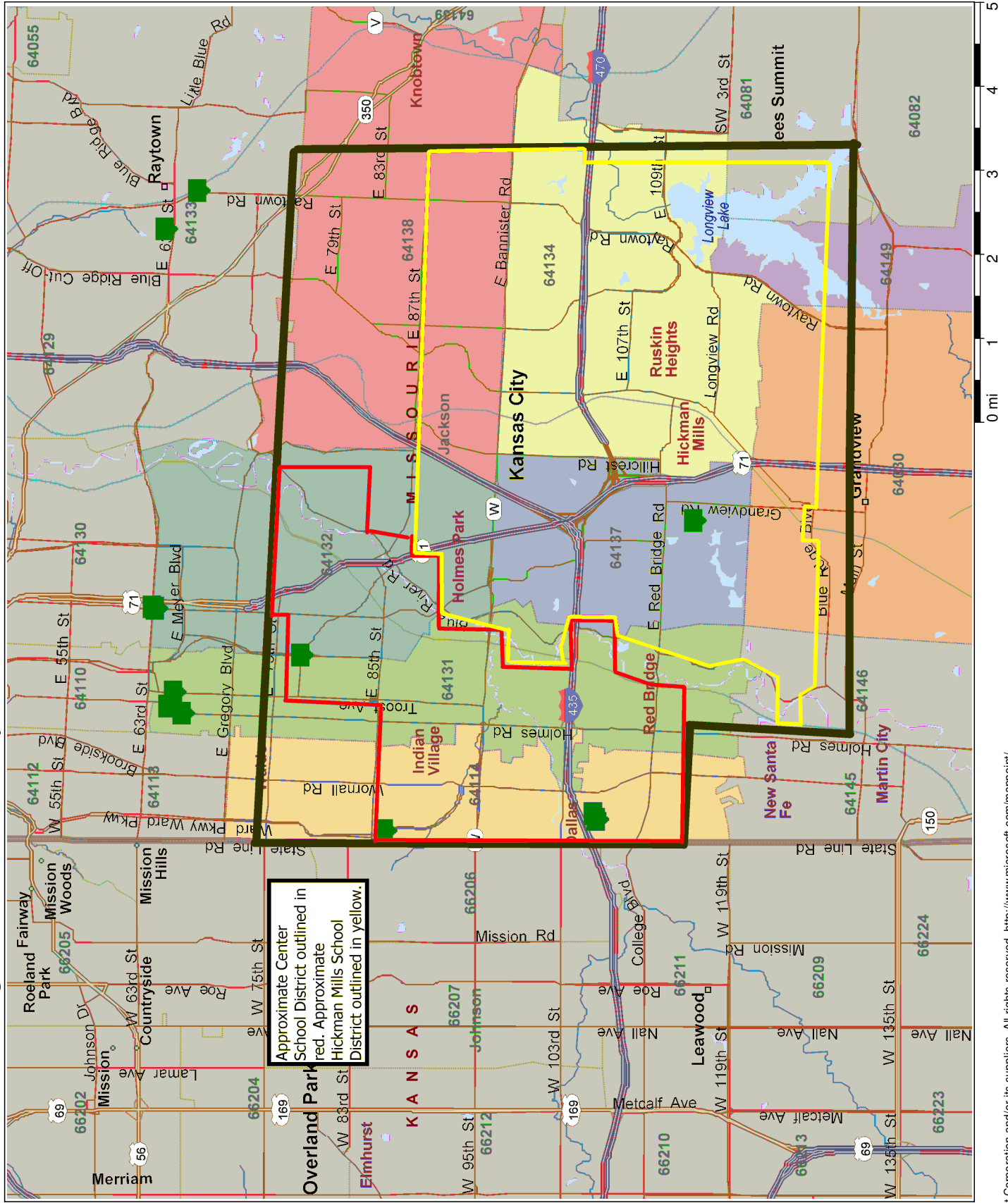
Regional Health Care Initiative

Findings, Conclusions and Recommendations

July 2009

Introduction

Almost 450,000 people in metropolitan Kansas City are either uninsured or covered by Medicaid. An additional number of residents are underinsured with high co-pays and deductibles. Many of these individuals rely on safety net providers to meet their health care needs. The term "safety net" has come to broadly refer to a loose network of care that includes public hospitals, federally qualified health centers, public health departments, faith-based clinics, free clinics and other independent clinics which, either by mission or mandate, provide significant amounts of health care to people who are uninsured, underinsured or medically underserved and who cannot easily access care or cover the costs of their own care.

Metropolitan Kansas City has 17 safety net organizations operating 33 clinics that provide primary health care to patients. While this appears to be an abundance of service sites, there are still critical shortages in the amount of health care that is available to the uninsured and Medicaid populations. Additional barriers unique to the bistate Kansas City region — such as the differences in Medicaid eligibility requirements between Kansas and Missouri, a limited regional public transportation system, limited access to the safety net system in suburban portions of the metropolitan area and limited access to services in the evening and on weekends — further reduce access to timely, quality health care.

The Regional Health Care Initiative (RHCI), sponsored by the Mid America Regional Council (MARC), is a regional initiative promoting innovative, collaborative approaches to providing health care to the uninsured and medically underserved. This initiative is funded through the REACH Healthcare Foundation, Health Care Foundation of Greater Kansas City, the Sosland Foundation, Bank of America, H&R Block Foundation, Wyandotte Health Foundation, the Hall Family Foundation, and the Sunflower Foundation. The RHCI works closely with safety net providers in the Kansas City metro area, and this report is a summary of the information gained and conclusions reached from that work. However, the conclusions and recommendations in the report are solely those of the RHCI staff at MARC.

This report is based on data collected through a safety net survey in 2007, additional data provided by safety net clinics as they worked on a variety of initiatives, data on emergency department visits provided by the Missouri and Kansas Hospital Associations, and public health records from the two states and a variety of other sources.

The intent of this report is to identify issues the safety net community must address if it is going to continue to have the capacity to serve the uninsured and medically underserved. The report is also intended to identify needs and strategies for increasing the capacity of the safety net system as the demand for services increases. This report represents a summary of the data collected and assessments made with respect to the safety net primary care health system in the metropolitan area. It should be noted that the RHCI and the Metropolitan Mental Health Stakeholders recently completed a similar assessment for the behavioral health community, which is available on the RHCI Web site, www.marc.org/healthinitiative.

Key Conclusions and Recommendations

Key conclusions of this report, discussed at greater length in the following pages, are:

Conclusion 1:................There is a substantial and increasing need for safety net services in the region — a need that cannot be met with the existing capacity of the system.

Conclusion 2:................The safety net physical plant is adequate to serve additional patients, as measured by exam room space, but the capacity is not evenly distributed across the metro area.

Conclusion 3:................In terms of medical staffing, the system is currently slightly strained in terms of medical staff per patient and clearly cannot add any capacity without adding additional medical, clinical and administrative staff. The needs for and availability of staff are not matched across the region. In addition, clinics have a difficult time in hiring and retaining medical staff.

Conclusion 4:................Current evening and weekend services for the safety net population are inadequate.

Conclusion 5:................Safety net clinics and other safety net providers do not currently have the technology capacity to participate in electronic health records and a health information exchange. There is no single health information exchange system in which health providers can reliably participate.

Conclusion 6:................Standardized, accessible data for the region is inadequate, both on the health of the population and the state of health care.

Conclusion 7:................Although the Regional Health Care Initiative focuses on primary care, specialty care and chronic disease management are also major issues in providing comprehensive, quality health care to those who are uninsured or medically underserved.

The report that follows includes of a set of findings and supporting documentation that leads to each of these conclusions. The report also contains a set of recommendations to address these issues:

Recommendation 1:...... Monitor the demand for safety net services and the capacity of the safety net system to meet that demand. Develop a better understanding of both the nature of the demand and the capacity of the safety net system to meet it.

Recommendation 2:...... Expand weekend and evening hours for safety net clinics and generally take every opportunity to use existing facilities to their fullest extent as a strategy to expand the capacity of the safety net system, serve additional patients, and provide improved access to care.

Recommendation 3:......Invest in additional health care professionals for safety net clinics and provide aid and assistance to safety net clinics in recruiting and retaining health care professionals.

Recommendation 4:...... Expand safety net capacity in Johnson County, north of the river, south Kansas City and Cass County.

Recommendation 5:...... Work with the safety net community to enhance the ability to implement and use electronic medical records and participate in a health information exchange.

Recommendation 6:......Expand the region's ability to access and analyze public health and disease incident data in order to better understand where the most effective interventions may be.

Recommendation 7:......Continue to monitor and assess the need for enhanced specialty care in the region   and support specialty care and chronic disease management initiatives.

> **Recommendation 3: Invest in additional health care professionals for safety net clinics and provide aid and assistance to safety net clinics in recruiting and retaining health care professionals.**

The most direct way to increase capacity of the safety net system is to invest in new medical staff and support staff. It is important to couple this investment in additional medical staff with support services and the development of initiatives to improve clinic efficiency so that the best possible use can be made of new medical staff.

Just as important as investing in new medical staff is providing assistance to clinics in hiring and retaining existing staff. This may be in the form of financial assistance or extended benefits or privileges, such as hospital privileges.

> **Recommendation 4: Expand safety net capacity in Johnson County, north of the river, south Kansas City and Cass County.**

Data indicates that the uninsured and medically underserved are moving outward. The cores of Kansas City, Mo., and Kansas City, Kan., are still the areas of greatest concentration of those in need of safety net care and these areas continue to be underserved. However, the expansion of the safety net population in more suburban areas has not been matched by a commensurate expansion of safety net services. The uninsured and medically underserved in these areas present different issues than those residing in the core because they are more dispersed, making both communication and transportation an issue.
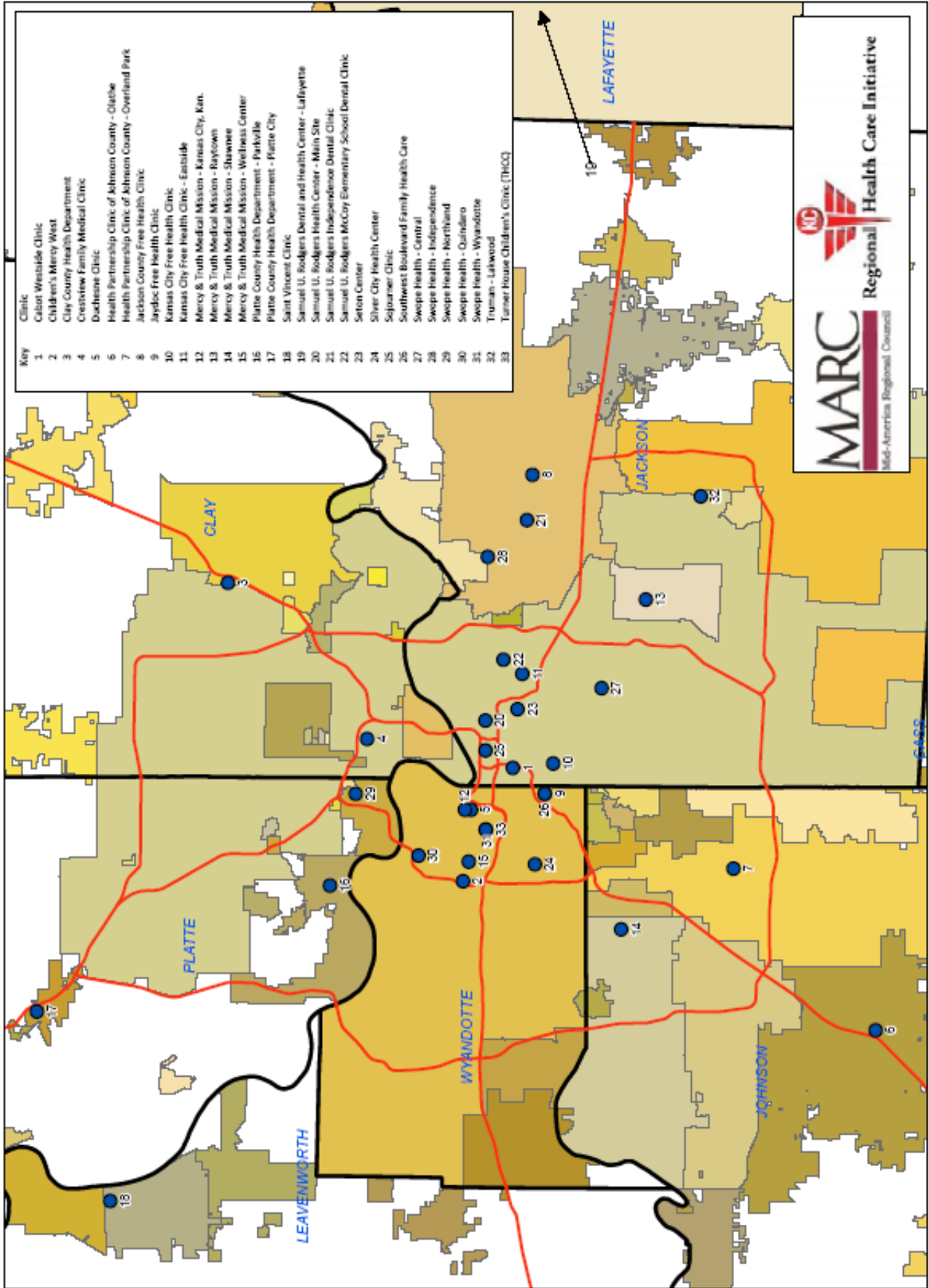
Clinics in these areas want to expand services and these efforts should be supported. Different models have been tried and these should be closely monitored and evaluated to see if these might provide a better approach to providing safety net health care in these communities.

> **Recommendation 5: Work with the safety net community to enhance the ability to implement and use electronic medical records and participate in a health information exchange.**

The safety net clinics, not unlike others in the health care system, have not taken full advantage of electronic medical records and health information exchange. Such systems may help clinics provide more effective and efficient care, extending the quality and quantity of the care they can provide. In addition, there are increasing expectations and requirements that health care providers use and participate in such systems. A concentrated and coordinated effort is needed to assess the best strategy for increasing the technology capacity of safety net clinics and provide assistance in implementing and using these technologies. In addition to the technology capacity of individual clinics, there is a need to develop an effective, coordinated system to exchange medical information.

> **Recommendation 6: Expand the region's ability to access and analyze public health and disease incident data in order to better understand where the most effective interventions may be.**

Kansas City Safety Net Clinic Locations

Key | Clinic

1. Cabot Westside Clinic
2. Children's Mercy West
3. Clay County Health Department
4. Crestview Family Medical Clinic
5. Duchesne Clinic
6. Health Partnership Clinic of Johnson County - Olathe
7. Health Partnership Clinic of Johnson County - Overland Park
8. Jackson County Free Health Clinic
9. Jaydoc Free Health Clinic
10. Kansas City Free Health Clinic
11. Kansas City Free Health Clinic - Eastside
12. Mercy & Truth Medical Mission - Kansas City, Kan.
13. Mercy & Truth Medical Mission - Raytown
14. Mercy & Truth Medical Mission - Shawnee
15. Mercy & Truth Medical Mission - Wellness Center
16. Platte County Health Department - Parkville
17. Platte County Health Department - Platte City
18. Saint Vincent Clinic
19. Samuel U. Rodgers Dental and Health Center - Lafayette
20. Samuel U. Rodgers Health Center - Main Site
21. Samuel U. Rodgers Independence Dental Clinic
22. Samuel U. Rodgers McCoy Elementary School Dental Clinic
23. Seton Center
24. Silver City Health Center
25. Sojourner Clinic
26. Southwest Boulevard Family Health Care
27. Swope Health - Central
28. Swope Health - Independence
29. Swope Health - Northland
30. Swope Health - Quindaro
31. Swope Health - Wyandotte
32. Truman - Lakwood
33. Turner House Children's Clinic (THCC)

LAFAYETTE

CLAY

JACKSON

PLATTE

WYANDOTTE

LEAVENWORTH

JOHNSON

CASS

MARC
Mid-America Regional Council

KC
Regional Health Care Initiative

Independence: Revitalized

Our community is experiencing many exciting changes. New infrastructure, Jackson Drive expansion, a venue for entertainment, the Independence Event Center, highlight the development and prospect of the eastern portion of our area. In 2008 the Independence School District experienced an exciting first year with over 2600 new students in the six schools acquired in the western neighborhoods. Enrollment increases in the area and parent and community involvement continues to grow throughout the district. The Independence School District, in partnership with Independence Council of Economic Development, is helping to bring new life to the Independence Regional Hospital. The Business Incubator will provide state-of-the-art facilities and attract local business.

While our community has several successes to celebrate, some neighborhoods are experiencing difficult times. The western side of town is heavily affected by current economic trends, foreclosures and vacancies. Poor economic situations often lead to a decrease in community pride and involvement. A momentum of positive change has swept over the entire community. Building from existing interest in making improvements in western Independence, a community project that takes a holistic approach to revitalizing neighborhoods is being adopted.
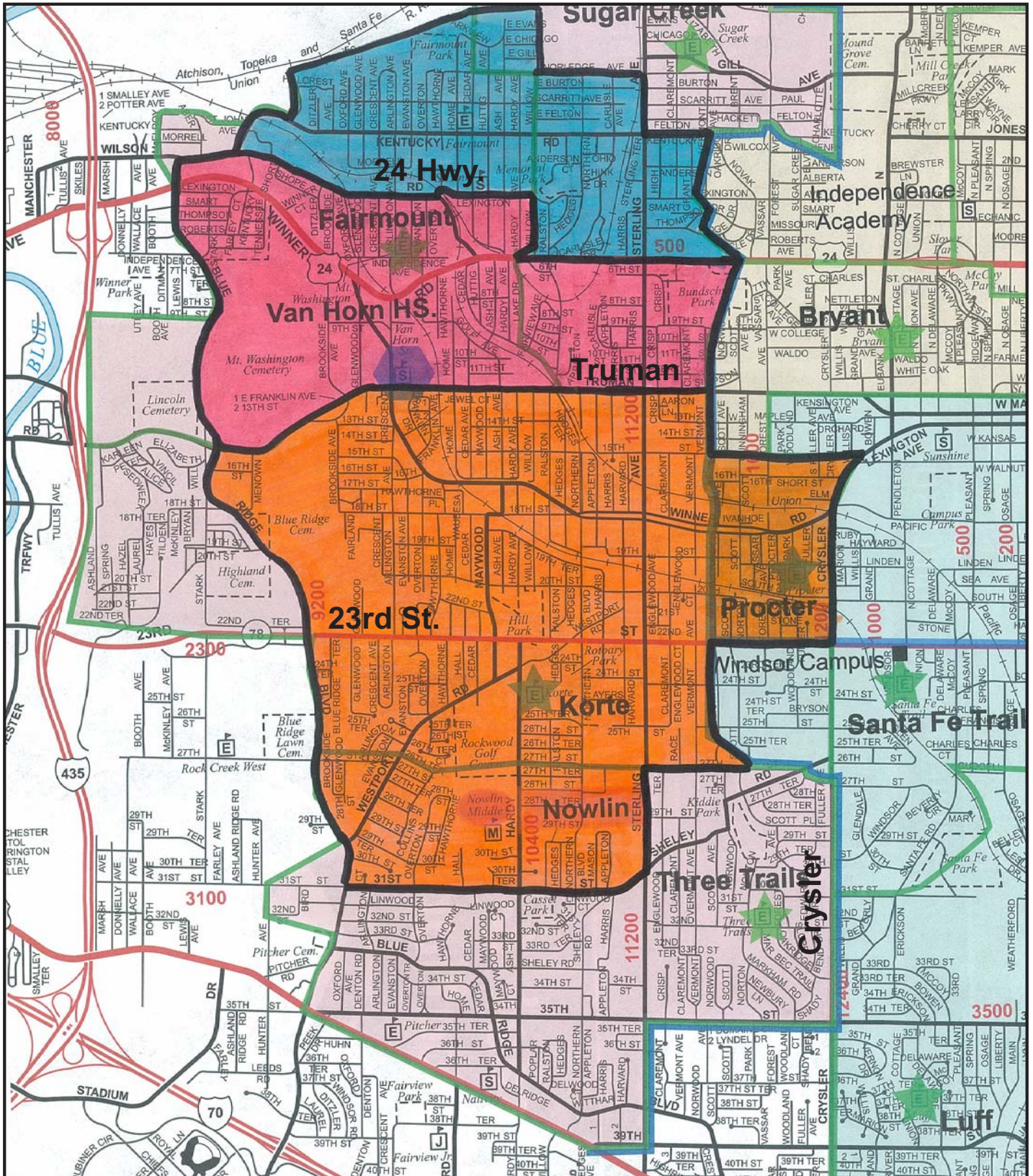
Our plan is to strategically revive and maintain neighborhoods. A model of revitalizing our neighborhoods will be derived from South Atlanta, an area that was stricken with poverty and the effects it brings. The revitalization of the area in South Atlanta successfully changed the community for the better. South Atlanta experiences continued success and serves as a model for other struggling communities throughout the United States.

We will take a holistic approach to revive Western Independence neighborhoods through mixed-income housing, continued growth and involvement in the school district and expansion of other community features. Strategic neighbors will be placed throughout the neighborhoods to serve as mentors and leaders. The holistic approach is flexible and allows for adaptations of specific community needs.

To celebrate our community's history and create a sense of unity for the revitalization project - it is called 12 Blocks West. Within 12 blocks west of our city's most famous landmark home are struggling neighborhoods in distress. In the Truman Home lived a man from Independence who achieved greatness. The challenge is for the entire community to come together to inspire greatness in this area that lies just 12 blocks west. The foundation has been built, and in large part because of community efforts, the momentum for positive change has begun. Now is the time for us to use this momentum as a catalyst for revitalizing some of the most historic neighborhoods in our city. The benefits for our children, families, businesses, civic government and community as a whole are immeasurable.

12 Blocks West

24 Hwy.

Fairmount

Van Horn HS.

Truman

Independence Academy

Bryant

23rd St.

Procter

Korte

Windsor Campus

Santa Fe Trail

Nowlin

Three Trails

Crysler

Luff

Posted on Wed, Dec. 23, 2009

Other school districts are crucial to a stronger KC

By YAEL T. ABOUHALKAH
The Kansas City Star

The Kansas City School District is a punching bag for longtime critics, and often deservedly so.

Those detractors — along with more supportive neighborhood, civic and political leaders — contend that improving the district is essential to Kansas City's ability to attract jobs and residents. That's also correct.

But it's worth emphasizing that the quality of education provided by 14 other school districts serving Kansas City, Mo., residents also is crucial to the city's future.

Start with a few facts, using the 2008-09 school year data just released by the Missouri Department of Elementary and Secondary Education.

Biggest districts serving Kansas City residents:

- North Kansas City, 17,955
- Kansas City, 17,677
- Lee's Summit, 17,120
- Blue Springs, 13,766
- Independence, 13,128

Incredibly, the Kansas City School District has lost almost half of its population base in six years, plummeting from 33,641 students. The reduction has occurred because of charter schools, the Independence School District's annexation of seven Kansas City schools in 2008 and population loss in the urban core.

Lowest average high school ACT scores (out of 36):

- Hickman Mills, 16.6
- Kansas City, 16.8
- Center, 18.6
- Grandview, 18.8
- Independence, 19.7

The ACT scores have declined for all five of these districts. Hickman Mills has gone down from 17.9, Kansas City from 17.5, Center from 19.9, Grandview from 19.4 and Independence from 21.2 (with the sharpest loss occurring after the addition of Kansas City School District children through the annexation).

Highest percentage of black students:

- Hickman Mills, 79.7
- Center, 67.5
- Kansas City, 64.9
- Grandview, 58.2
- Raytown, 45.0

The percentage of black students in the Kansas City district has *fallen*; it was 68.1 percent in the 2003-04 school term. The other districts mentioned here have continued to gain black students and lose white students.

Highest percentage of students receiving free lunch:

- Kansas City, 79.6
- Hickman Mills, 75.7
- Center, 66.9
- Grandview, 65.2
- Independence, 55.2

Here's one key fact to take away from all of these numbers: Large parts of Kansas City south of the Missouri River are served not only by the often-criticized Kansas City School District, but also by three other struggling districts: Hickman Mills, Center and Raytown. Combined, they have as many students as the Kansas City district.

That ratchets up the need for school, political and civic leaders in the city to pay more attention to these districts. Even if the Kansas City School District stabilizes under the leadership of new superintendent John Covington, there are plenty of challenges facing the city as it tries to attract jobs and people to live south of the river.

(And let's not even get started on the real advantages regarding economic growth held by Johnson County, which has a more affluent population than Kansas City and high-performing students in the Shawnee Mission, Olathe and Blue Valley districts.)

Meanwhile, Kansas City's Northland is served by districts that are growing and have fewer students in poverty and higher average ACT scores than districts south of the river.

The Northland is still strongly gaining in population, and the area is often promoted by corporate and political officials as the best place for new jobs and housing.

The Northland's success, however, makes it even more difficult to spur economic growth in the Kansas City urban core served by problem-plagued school districts.

Editorial Board member Yael T. Abouhalkah can be reached at abouhalkah@kcstar.com or 816-234-4887. He blogs at voices.kansascity.com.

2009 Kansas City Corps Profile

Recruiting History

Firsthand experience has shown us that when given the opportunity, students in low-income communities can and will achieve at high levels. Armed with this understanding, Teach For America corps members in Kansas City work relentlessly to increase academic achievement and expand educational opportunities for 7,200 students growing up in our most underserved communities. We first placed corps members in Kansas City in 2008 and aim to have 250 corps members in classrooms across our region by 2015.

Colleges Most Attended by 2009 Corps Members

University of Missouri, Columbia	Harvard University
University of Kansas, Main Campus	Drake University
University of Minnesota, Twin Cities	Rockhurst University
University of Pittsburgh, Pittsburgh Campus	Cornell University
Brigham Young University	Princeton University

2009 Corps Statistics

Nationally, more than 4,000 corps members are beginning their first year as teachers, and this year, 70 of them will be working toward educational equity in 37 public schools throughout Kansas City.

Diversity of 2009 Corps Members[1]

Total People of Color: 25%
Pell Grant Recipients: 19%[2]

10% African-American
6% Latino/Hispanic
6% Asian-American
4% Multi-Ethnic
1% Did Not Respond
74% Caucasian

[1] Percentages are rounded and do not add up to 100 percent.

[2] Teach For America uses the receipt of Pell Grants as a measure of socioeconomic diversity.

Regional Corps Member Placement[1]

Pre-K, Kindergarten	3%
Elementary (1-2)	11%
Elementary (3-5)	15%
Middle School	50%
Secondary Math	8%
Secondary Science	8%
Secondary Social Studies	1%
Secondary Foreign Language	3%

[1] Percentages are rounded and do not add up to 100 percent.

Bilingual	4%
ESL	6%
Special Education	3%

National Principal Satisfaction

* 87 percent of recently-surveyed principals (in schools with Teach For America corps members) reported that they would hire another Teach For America teacher.

* 94 percent of principals surveyed regard Teach For America teachers as effective as, if not more effective than, other beginning teachers in terms of overall performance and impact on student achievement.[1]

[1] "Teach For America 2009 National Principal Survey," Policy Studies Associates, July 2009

February 26, 2009

Days of Thunders Drum Up New Hope

By Joe Robertson

Right about the time Ellington Bell worried that he'd bitten off too much with his big plan to save kids, along came Mick Terrizzi.

An unlikely pairing, for sure.

Bell, 42, a longtime school bus driver from Kansas City's urban core, had this idea he could start an after-school drill team at Blenheim Elementary School, where he is a parent liaison. The drill team would be in the spirit of the famed Marching Cobras, and it would transform lives the same way the Cobras transformed his, 30 years ago.

Terrizzi, a 23-year-old social studies teacher from San Francisco's Sunset District, was one of those young idealists who came to Blenheim through Teach for America's national program to put top college graduates to work as teachers in the country's neediest schools.

What Bell didn't know was that Terrizzi has a vision, too. He aims to take the teacher inside him and combine it with the musician who has played clubs with bands up and down the California coast since he was 18.

"He stopped me in the hall one day…" Bell said, remembering that nervous time last fall after the fliers had gone out to all of Blenheim's families. Bell had promised a drill team with the whole works. Marchers. Flippers. Drummers.

"…and he said, 'I know a little bit about drums.' "

They laugh about it now.

Terrizzi knows a little bit about drums the same way that Bell — who can still do back flips — knows a little bit about drill teams.

"We're going to work on Bulldog II today," Terrizzi told his drummers while they caught their breath between warm-up wind sprints in the gym.

"You know," he said, seeing confusion in their eyes. "Dut duh-dan duh-dan-dan…" He air-drummed, voicing the rhythm. His corps began to join in, heads bobbing, barking, "duh-dan dan, dut duh-dan dan…."

"That's the one!" the teacher shouted.

Blenheim's drill team and drummers — plus a cheerleading squad — are gearing up now for their first tour. Several schools have lined up to see their stuff later this spring.

The high-steppers strut to a choreography that comes from Bell's imagination.

And the drum riffs are original Terrizzi. He dreams up rhythms on electronic drums at home, records them and burns CDs that give each member a chance to listen to his part alone as well as all the drums together.

It feels original to the players.

"We're making a California sound," said 12-year-old Kelvin Porter, who plays the tenor tom drum and a snare.

Eleven-year-old Tyree Fryer, who plays the low tenor tom, took a crack at describing what Kelvin meant.

"It's hip-hop," he said, ponderingly, "with a little bit of happiness."

Moments before, the corps had put the opening section of Bulldog II together in a hard-driving collection of thunder, the boys biting lower lips, making good on their teacher's challenge — "Let's see if we can really nail it."

The chance to perform, Tyree said, "inspires me to stay out of trouble. You've got to have good behavior and good grades to be a drummer."

The small school, which is slowly growing middle grade enrollment as Kansas City converts its elementary schools into K-8 schools, can't support some of the more traditional middle school extracurricular activities in sports and music.

An extracurricular program with the promise of performances helps teachers prod some students who are otherwise prone to let grades and behavior slip, Blenheim Principal Rebecca McKeel said.

And the number of students in the program soared after the first schoolwide performance in the auditorium.

"Parents were coming to me saying, 'I want my child in there drumming,' " McKeel said.

Terrizzi added a junior varsity for the lower elementary grades. The school doesn't have enough drums to go around when everyone performs, so Terrizzi went to a hardware store and supplemented his ensemble with a mix of plastic buckets and tubs and a single metal can "that gives us a cymbal effect."

Teach for America requires its teachers to serve at least two years in the classroom — a commitment Terrizzi says he will happily fulfill and then some.

But he and his California band mates — some of them also are elementary teachers — plan to start a music school in San Francisco. Terrizzi sees a school that teaches preschoolers by day and older students after school, and then becomes a professional studio and recital hall by night.

The Blenheim experience, he said, is affirming for him what Bell already knows: Music can change lives.

"With the drill team, I'm not quiet anymore," said 11-year-old Candace Williams. "I get myself out."

Bell is hard on them at times. Everyone has to work together. It's a large group of students.

"You see that gleam on their faces," Bell said. "You're bringing that light to the kids. It's the same thing I was reaching out for when I was a kid.

"It saved my life."

Teach For America Placement Regions and Expansion Years

Greater Boston ('09)
Connecticut ('06)
New York ('90)
Mid-Atlantic:
Philadelphia/Camden/Delaware ('03)
Eastern North Carolina ('90)
Miami-Dade ('03)
Newark ('93)
Baltimore ('92)
D.C. Region ('92)
Charlotte ('04)
Atlanta ('00)
Jacksonville ('08)
Nashville ('09)
Memphis ('06)
Mississippi Delta ('91)
South Louisiana ('90)
Greater New Orleans ('90)
Indianapolis ('08)
St. Louis ('02)
Milwaukee ('09)
Chicago ('00)
Tulsa ('09)
Twin Cities ('09)
Kansas City ('08)
Colorado ('07)
New Mexico ('01)
Dallas ('09)
Houston ('91)
South Dakota ('04)
Las Vegas Valley ('04)
Phoenix ('94)
Rio Grande Valley ('91)
Bay Area ('91)
Los Angeles ('90)
Hawai'i ('06)

For more information on Teach For America, please visit www.teachforamerica.org.

About Teach For America

Teach For America is the national corps of top recent college graduates of all academic majors who commit to teach for two years in urban and rural public schools and become lifelong leaders in the effort to expand educational opportunity.

Teach For America's network includes 7,300 corps members teaching in 35 regions across the country and 17,000 alumni working from within education and many other sectors to create the systemic changes that will help end educational inequity.

Teach For America at a Glance	
Teach For America corps members	7,300
Regions in which corps members teach	35
Students reached	450,000+
Students reached since 1990 (charter year)	3 million+
Teach For America alumni	17,000
Alumni working full-time in education	63%

The Problem of Educational Inequity

Today in the United States, 9-year-olds in low-income communities are already three grade levels behind their peers in high-income communities. Half of them won't graduate from high school. Those who do graduate will read and do math, on average, at the level of eighth graders in high-income communities. This educational inequity is one of our nation's most pressing problems, and Teach For America enlists our most promising future leaders in the movement to solve it. Through the combined efforts of our corps members and alumni, working alongside other members of the communities we serve, we will achieve our vision: One day, all children in this nation will have the opportunity to attain an excellent education.

Corps Recruiting and Admissions

Teach For America recruits top college graduates of all academic majors, career interests, and backgrounds who demonstrate achievement, leadership, perseverance, and a commitment to expanding opportunity for children in low-income areas. Our recruiting efforts are especially focused on individuals who share the racial and/or socioeconomic backgrounds of the students in underserved public schools, many of whom are African-American or Latino/Hispanic.

A record 35,000 individuals applied to Teach For America's 2009 corps, marking a 42 percent increase over the previous year. At more than 130 colleges and universities, over 5 percent of the senior class applied; at Ivy League schools, 11 percent of all seniors applied, including nearly 20 percent of African-American and Latino/Hispanic seniors. Admission to Teach For America is highly selective, with 15 percent of applicants earning acceptance to the 2009 corps. Teach For America is the No. 1 employer of graduating seniors at more than 20 schools, including Georgetown University, Spelman College, and the University of Chicago.

Corps Training and Placement

With 19 years of experience in preparing corps members to be successful teachers in low-income urban and rural areas, Teach For America is at the forefront of teacher training and professional development. Teach For America trains more teachers for low-income communities than any other organization or institution in the nation.

Pre-Service Training

After approximately 30 hours of independent work and observation of experienced teachers, corps members attend an intensive five-week training institute and a regional orientation to the schools and communities in which they will be teaching. At the institute,

corps members teach in summer school programs, receive feedback from veteran teachers, and complete a regimen of seminars and practice sessions designed to build the capabilities required to advance student achievement. During their regional orientation, corps members complete additional training sessions on establishing clear goals for their students' achievement, planning for instruction, and preparing to use data to inform their approach.

Ongoing Professional Development

Building on its pre-service training, Teach For America works with corps members in a two-year program of support and professional development. Full-time program directors observe corps members at least four times a year and problem-solve with them to improve their practice and accelerate student progress toward goals. Corps members receive toolkits that include sample assessments, standards, and teaching resources customized for their grade level, subject, and district; meet periodically in content-area and grade-level learning teams; and complete coursework toward full teacher certification and a master's degree.

Teach For America places corps members in 35 regions across the country. We choose new placement sites based on several factors: the community's vision of how our presence will help to close student achievement gaps; the existence of a feasible, state-approved alternate route to teacher certification; a district commitment to

2009 Corps at a Glance	
Total members	4,100
Those with college leadership experience	89%
Average undergraduate GPA	3.6
People of color	30%
Pell Grant recipients	25%
First in family to attend college	18%

placing a critical mass of corps members across the range of subject areas and grade levels; and community support that will enable us to fund the site in a sustainable way. In most of our regions, Teach For America provides between 10 and 30 percent of new teachers, though these percentages can shift based on the overall numbers of teachers hired by school districts each year.

Corps Impact

A growing body of rigorous research demonstrates that Teach For America corps members are as effective as—and in some cases more effective than—other teachers.

A 2008 Urban Institute study using seven years of North Carolina high school student exam data found that Teach For America corps members were, on average, more effective than other teachers in all subject areas, especially in math and science. That was true even when Teach For America teachers were compared with experienced, fully certified teachers. These findings were confirmed in a 2009 update of the study, which employed a larger sample of corps members and additional comparison groups. In all cases, the positive impact of having a Teach For America teacher was at least twice that of having an experienced teacher relative to a new teacher.

A 2004 independent study by Mathematica Policy Research found that students of Teach For America corps members make 10 percent more progress in a year in math than is typically expected and slightly exceed the normal expectation for annual progress in reading.

In a 2007 independent survey of principals who employ Teach For America teachers, 94 percent reported that corps members have made a positive impact in their schools and 95 percent rated corps members as effective or more effective than other beginning teachers, in terms of overall performance.

Alumni Impact

Some 17,000 Teach For America alumni are working from within education and many other sectors to level the playing field for students and families in low-income communities. This force of leaders is armed with experience, insight, and a proven commitment to ensuring an excellent education for all children.

Alumni at a Glance	
Total Teach For America alumni	17,000
Working in the field of education*	63%
Serving in school leadership	380+
Working on Capitol Hill (in government or advocacy)	200
*Source: Teach For America Alumni Survey, 2008	

Two-thirds of alumni are working full-time in the field of education, almost half of them as classroom teachers. Over 380 alumni school leaders impact the lives of more than 340,000 students each year, while more than 20 alumni social entrepreneurs have founded and continue to lead some of our country's most innovative nonprofits. In addition, a growing number of Teach For America alumni are pursuing politics as an avenue for change, including more than 500 who work in government, politics, and/or advocacy, and 26 who serve in elected office.

Teach For America Alumni Highlights

Cami Anderson (Los Angeles Corps '93), Superintendent of District 79, Alternative Schools and Programs, New York City Department of Education

Chris Barbic (Houston Corps '92), Founder and Head of Schools, YES College Prep (Houston)

Furman Brown (Los Angeles Corps '90), Founder and Executive Director, Generation Schools (New York City)

Timothy Daly (Baltimore Corps '99), President, The New Teacher Project (National)

Mike Feinberg (Houston Corps '92), Cofounder and Superintendent, KIPP Schools (National)

JoAnn Gonzales (Rio Grande Valley Corps '97), Founder and COO, IDEA Public Schools (Rio Grande Valley)

Anthony Jewett (New York Corps '03), Founder, President, and CEO, Bardoli Global, a social enterprise dedicated to empowering student leaders of color to embark on international-exchange and study-abroad programs (National)

Michael Johnston (Mississippi Delta Corps '97), Senator, Colorado State Senate District 33

Jason Kamras (D.C. Region Corps '96), 2005 National Teacher of the Year, Director of Human Capital Strategy, D.C. Public Schools

Dave Levin (Houston Corps '92), Cofounder and Superintendent, KIPP Schools (National)

Michelle Rhee (Baltimore Corps '91), Chancellor, D.C. Public Schools

Hae-Sin Thomas (Bay Area Corps '93), Cofounder and CEO, UrbanEd Solutions, a nonprofit education consulting organization committed to improving academic outcomes for children in historically underserved urban centers (National)

Thomas Torkelson (Rio Grande Valley Corps '97), Founder and CEO, IDEA Public Schools (Rio Grande Valley)

Sarah Usdin (South Louisiana Corps '92), Founder and President, New Schools for New Orleans

Our History

In 1989, Wendy Kopp proposed the creation of a national teacher corps in her senior thesis at Princeton University. Convinced that many accomplished recent college graduates seek work that offers significant responsibility and makes a real difference in the world, the 21-year-old Kopp raised $2.5 million of start-up funding, hired a skeleton staff, and launched a grassroots recruiting campaign. During Teach For America's first year (1990), 500 corps members taught in six low-income communities. Today, 7,300 corps members are teaching in 35 regions, and Teach For America is fostering the leadership and advocacy of 17,000 alumni in the movement for educational excellence and equity.

Our Funding

Teach For America secures local contributions from businesses, foundations, government organizations, and individuals in the regions where corps members teach. In addition, we receive national funding from corporations and foundations, individuals, and the federal government. More than 70 percent of our revenue stream is regional, and the remainder is national. Teach For America's projected operating budget for the 2009 fiscal year is $148 million.

Funding Fiscal Year 2008	
Operating budget: $113.5 million	
Funding source	% of total*
Corporations	15
Foundations	27
Individuals	20
Federal Govt.	16
State Govt.	7
Local Govt./School District	10
Special Events (net)	6
	*rounded

Corps members are paid directly by the school districts for which they work and generally receive the same salaries and benefits as other entry-level teachers. Teach For America is a member of AmeriCorps, the national service network, through which corps members are eligible to receive loan forbearance and interest payment on qualified student loans, as well as an education award of $4,725 at the end of each year of service.

January 4, 2010

Gauging the Dedication of Teacher Corps Grads

By AMANDA M. FAIRBANKS

Teach for America, a corps of recent college graduates who sign up to teach in some of the nation's most troubled schools, has become a campus phenomenon, drawing huge numbers of applicants willing to commit two years of their lives.

But a new study has found that their dedication to improving society at large does not necessarily extend beyond their Teach for America service.

In areas like voting, charitable giving and civic engagement, graduates of the program lag behind those who were accepted but declined and those who dropped out before completing their two years, according to Doug McAdam, a sociologist at Stanford University, who conducted the study with a colleague, Cynthia Brandt.

The reasons for the lower rates of civic involvement, Professor McAdam said, include not only exhaustion and burnout, but also disillusionment with Teach for America's approach to the issue of educational inequity, among other factors.

The study, "Assessing the Long-Term Effects of Youth Service: The Puzzling Case of Teach for America," is the first of its kind to explore what happens to participants after they leave the program. It was done at the suggestion of Wendy Kopp, Teach for America's founder and president, who disagrees with the findings. Ms. Kopp had read an earlier study by Professor McAdam that found that participants in Freedom Summer — the 10 weeks in 1964 when civil rights advocates, many of them college students, went to Mississippi to register black voters — had become more politically active.

"There's been a very clear and somewhat naïve consensus among educators, policy folks and scholars that youth activism invariably has these kinds of effects," Professor McAdam said. "But we've got to be much more attentive to differences across these experiences, and not simply assume that if you give a kid some youth service experience it will change them."

Teach for America is nearing its 20th anniversary. Of its 17,000 alumni, 63 percent remain in the field of education and 31 percent remain in the classroom. (This reporter took part in the program from 2003 to 2005.)

Financed by the William T. Grant Foundation, the study surveyed every person who was accepted by Teach for America from 1993 to 1998. It is being published this month in Social Forces, a journal published by the University of North Carolina.

The study compared "graduates," who completed their two years; "dropouts," who entered the program but left before the two years were up; and "nonmatriculants," who were accepted but declined the offer. It included 1,538 graduates, 324 dropouts and 634 nonmatriculants. Nearly 45 percent of those sampled returned the 34-page survey.

While Teach for America graduates remain far more active than their peer group, the findings indicate that the program neither achieves an earlier organizational goal of "making citizens" nor

produces people who, in great numbers, take their civic commitments beyond the field of education.

"To find that Teach for America graduates are more involved in education but are not serving in soup kitchens is interesting but not surprising — it's consistent with their current mission," said Monica C. Higgins, an associate professor at the Graduate School of Education at Harvard who studies organizational behavior. "They're not trying to make global citizens. They're focused on education."

Professor McAdam's findings that nearly all of Freedom Summer's participants were still engaged in progressive activism when he tracked them down 20 years later have contributed to the widely held notion that civic advocacy and service among the young make for better citizens.

Ms. Kopp, 42, was curious to know whether something similar was occurring with her corps of teachers. But Professor McAdam, 57, said Freedom Summer was the exception, not the rule.

"Freedom Summer is the odd civic experience, and hardly representative of what happens when young people do service," he said. "A lot of the impact of any experience is where it's historically situated."

Rob Reich, 40, an associate professor of political science at Stanford, shares that view.

"Back in the '60s, if you signed up for Freedom Summer, it was perceived to be countercultural," said Professor Reich, who taught sixth grade in Houston as a member of the Teach for America corps. "But unlike doing Freedom Summer, joining Teach for America is part of climbing up the elite ladder — it's part of joining the system, the meritocracy."

Last year, 35,000 people applied to Teach for America, 42 percent more than in 2008. Further, at more than 20 colleges and universities, Teach for America was the top recruiter. At Harvard, 13 percent of graduating seniors applied. At Spelman College, in Atlanta, 25 percent did.

"It's hard to see the incredible outpouring of interest among this generation and think of it as a lack of civic engagement," Ms. Kopp said.

"Unfortunately," she added, "it doesn't seem as if this study looked at Teach for America's core mission, by evaluating whether we are producing more leaders who believe educational inequity is a solvable problem, who have a deep understanding of the causes and solutions, and who are taking steps to address it in fundamental and lasting ways."

Cami Anderson, 38, who taught in Los Angeles as a corps member in 1993 and participated in Professor McAdam's study, is among the graduates who, relative to their peer group, already exhibited high levels of service before stepping into a classroom.

"Not many of us are heads of large public systems, but we're starting to be," said Ms. Anderson, who is the superintendent of alternative high schools and programs for the New York City Department of Education. "Just give us a few more years."

Promise Neighborhoods and Community Schools

Promise Neighborhoods represent a vitally important national strategy for improving the lives of children in our most disinvested communities. The strategy's power lies in its recognition of the interconnected nature of the academic, social, emotional, physical and civic development of our young people in the communities in which they live. This recognition is grounded in solid research. In addition, the Promise Neighborhoods strategy follows several other principles of best practice in education and youth development: starting early, providing consistent and sustained support, and taking a comprehensive, integrated approach.

The manner in which the federal government frames the Promise Neighborhoods strategy will play a crucial role both in how the work rolls out in the short term and how it can be sustained in the long term. This brief addresses two key elements that should be considered in the formulation of that strategy: the general role of anchor institutions and, specifically, the pivotal role of public schools as anchors including the vision of the community school

1. Anchor Institutions

Anchors institutions are public or non-profit entities that are permanently rooted in specific locales – generating jobs, creating local business opportunities, and contributing in significant ways to the development of human, social and cultural capital. Higher education institutions[1], hospitals and health centers, community-based youth development organizations, and schools are some of the most important anchor institutions that may be in, or near, a Promise Neighborhood. Engaging the leadership of these institutions as partners in a Promise Neighborhood and mobilizing their assets will be vital to the success of the effort. By leveraging the resources of anchor institutions, Promise Neighborhoods will be a stronger position to sustain their work over the long term.

Promise Neighborhood applicants should be expected to identify these anchor institutions, demonstrate how they are currently contributing to neighborhood well-being and specify additional commitments of institutional capital to support action toward a broad set of results that the applicant seeks. Applicants should also define mechanisms for sustaining the involvement of top-level leadership of these institutions as partners in the Promise Neighborhood planning and implementation process over an extended period of time. The potential for these institutions to refocus and redirect their own institutional assets towards strategies that improve results for young people in Promise Neighborhoods should be required.

Rural applicants clearly will not have the same locally-based anchor institutions that are present in many urban centers. Therefore, rural applicants should be expected to look beyond their own geographic area to regional or state level institutions with assets to contribute, such as regional medical centers and state institutions of higher education.

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[1] Chapter 8: Anchor Institutions As Partners In Building Successful Communities And Local Economies in Retooling HUD For A Catalytic Federal Government:A Report To Secretary Shaun Donovan, PENN Institute for Urban Research, University of Pennsylvania, February 2009.

2. Schools as Key Anchors (Community Schools)

Schools are particularly critical and influential anchor institutions because they reach most, if not all, children in a neighborhood. All schools in Promise Neighborhoods should be community schools – regardless of the type of school (traditional public school, charter public school, magnet school, alternative school); regardless of who operates the school (local school district, community-based organization -CBO, higher education institution, educational management organization); and regardless of size or curricular focus.

Community schools have extended hours and extended services as well as deep and purposeful relationships with community resources. The vision of the community school has the school building open all year, all day and well into the evening, involving an array of community partners working together around a set of shared outcomes to a) develop the academic social, emotional, physical and civic competencies of students; b) strengthen families so they can support their children's education and contribute to the community; and c) provide various opportunities and support to community residents.[2]

Community schools typically involve early learning and care opportunities, challenging and engaging real-world curriculum, expanded learning time, comprehensive services and learning supports (such as school-based or school-linked medical and mental health services), strong family and community engagement, adult education and job training and cultural and civic events. The school also serves as a place for community problem-solving.

Effective partnership which are at the heart of the community school strategy, will be vital to the development of Promise Neighborhoods overall. For example, a school's lead partner – a CBO, higher education institutions or other organization – typically helps to a) mobilize the resources of the community to support the school's core educational function, and b) engage the community in other student support, family strengthening and community building activities. This partnership model allows educators in the school to focus on their academic mission.

Community schools can and should be an integral part of any Promise Neighborhood.   All Promise Neighborhood applicants should delineate how they will facilitate schools, regardless of type, becoming centers of their community, through mobilizing and leveraging community assets. The goals must include not only improving academic achievement, but also promoting the social, emotional, physical and civic development of young people, their families and other community residents.

For More Information:
Martin Blank, President
Institute for Educational Leadership
Director, Coalition for Community Schools
202 822 8405 x167; blankm@iel.org

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[2] For more information about Community Schools go to www.communityschools.org

Barber & Beauty Day
Longan Caring Communities
December 2009