LEARNING COMMUNITIES FOR SCHOOL SUCCESS PROGRAM (LCSSP) 2022–23 ANNUAL PROGRESS REPORT

FOR COHORTS 5 & 6

INSTRUCTIONS

Every grantee should complete an annual report. Reports should include the following:

- 1. **LCSSP Grantee Details** Provide background information about the grant including the lead LCSSP applicant, reporting local educational agency (LEA), cohort number, and type of grant.
- 2. **Primary LCSSP Goals** Complete the LCSSP Goals table.
- 3. **LCSSP Activities** Complete the LCSSP Activities table, including identifying whether LCSSP activities incorporated training/professional development and/or implementation of programs and practices, and when possible, the number of participants in LCSSP activities by role.
- 4. **LCSSP Narrative** Provide a one-half to two-page narrative for each prompt.
- 5. **Annual Expenditure Report** Complete and submit the Annual Expenditure Report. The template can be found on the California Educators Together website at https://www.caeducatorstogether.org/groups/6eroohdm/learning-communities-for-school-success-program-lcssp.
- 6. **LCSSP Participating Schools** Complete the LCSSP Participating Schools table to provide information about each school that is part of your LCSSP grant.

Please submit your completed annual report template and expenditure report by Friday, October 27 at 11:59 PM to <u>LCSSP@cde.ca.gov</u> **AND** <u>LCSSP@wested.org</u>.

SECTION 1: LCSSP Grantee Details

- 1. Applicant/lead LEA name: _____
- 2. Applicant/lead LEA County-District-School (CDS) code (14 digits):
- 3. The annual report must be submitted by the LCSSP lead or an individual with LEA authority. Indicate who is submitting this report.

Name: ______ Title: _____

- 4. Date Submitted: _____
- 5. Cohort Number: 5 6
- 6. Type of Grant: As approved in your LCSSP application, does the LCSSP grant serve a single LEA or a consortium of LEAs? (Check one box below)
 - A. Single LEA with all schools in the LEA participating
 - B. Single LEA with a limited number of schools in the LEA participating
 - C. Consortium of LEAs with all schools in each member LEA participating
 - D. Consortium of LEAs with a limited number of schools participating in some or all LEAs
- 7. (For consortia only): What districts are part of your LCSSP grant?

District Name:	CDS Code (14 digits):
District Name:	CDS Code (14 digits):
District Name:	CDS Code (14 digits):
District Name:	CDS Code (14 digits):
District Name:	CDS Code (14 digits):
8. How many schools are supported by your LCSSP gra	nt?

SECTION 2: LCSSP Goals

LCSSP grantees can work toward numerous goals under the LCSSP initiative. Please identify which of the following were your primary LCSSP goals during the 2022–23 school year.

LCSSP Goals	Check if this was a 2022–23 goal
1. Increase attendance rates	
2. Reduce chronic absenteeism rates	
3. Increase graduation rates	
4. Decrease dropout rates	
5. Reduce suspension, expulsion, and other school removal rates	
6. Reduce referrals of students to law enforcement agencies	
7. Reduce criminal offenses	
8. Improve academic performance	
9. Integrate school and community services	
10. Improve school climate	
11. Improve outcomes for vulnerable populations	
12. Other (specify):	
13. Other (specify):	
14. Other (specify):	

To make progress toward LCSSP goals, grantees may engage in diverse activities (e.g., developing partnerships, implementing programs, providing professional development). In the table below, please check each activity that was carried out during the 2022–23 school year as part of your LCSSP grant in column 1.

For the activities that were part of your LCSSP grant during the 2022–23 school year (check box selected in column 1), please indicate whether that activity included training/professional development (column 2) and/or implementation of programs or practices (column 3). Additionally, **if available and appropriate**, provide the number of staff (e.g., administrators, teachers, support staff), students, and/or parents and families who participated in each LCSSP-supported activity in columns 4, 5, and 6.

LCSSP Activities	Check if this was a 2022–23 LCSSP activity (1)	Activity Type: Provided training/ professional development (2)	Activity Type: Implemented programs or practices (3)	Number of participants: staff (4)	Number of participants : students (5)	Number of participants: parents/ families (6)
1. Academic interventions						
2. Health services						
3. Attendance improvement plans						
4. Case management						
5. Communities of practice						
6. Community schools						
7. Coordination, referral, and linkage between services and systems						

LCSSP Activities	Check if this was a 2022–23 LCSSP activity (1)	Activity Type: Provided training/ professional development (2)	Activity Type: Implemented programs or practices (3)	Number of participants: staff (4)	Number of participants : students (5)	Number of participants: parents/ families (6)
8. Culturally responsive practices						
9. Drug and alcohol interventions						
10. Family/parent engagement						
11. Gang prevention						
12. Mental health services						
13. Multi-Tiered Systems of Support (MTSS)						
14. Needs assessment						
15. Partnerships with community-based organizations						
16. Positive Behavior Interventions and Supports (PBIS)						
17. Relevant staffing (increase/reallocate staff)						
18. Restorative practices or restorative justice models Rev 08/21/23						5

LCSSP Activities	Check if this was a 2022–23 LCSSP activity (1)	Activity Type: Provided training/ professional development (2)	Activity Type: Implemented programs or practices (3)	Number of participants: staff (4)	Number of participants : students (5)	Number of participants: parents/ families (6)
19. School climate interventions						
20. Social emotional learning						
21. Trauma-informed strategies						
22. Tutoring/Mentorship						
23. Other: (specify)						
24. Other: (specify)						
25. Other: (specify)						

Section 4: LCSSP Program Narrative

For each prompt below provide a one-half to two-page narrative.

A. Provide an overview of the primary LCSSP activities and the alignment to the Local Control and Accountability Plan (LCAP) during the 2022–23 academic year, including an overview of implementation of activities that were not assessed in *Section 3: LCSSP Activities* portion of this report (e.g., during the 2022–23 school year there were 50 home visits of students who were chronically absent).

B. Describe the impact of LCSSP observed thus far for teachers, students, families, and/or other relevant stakeholders.

C. If you utilize school climate, parent/family engagement, or other local measures, please describe each measure and report data on each measure for the 2022–23 academic year.

D. COVID-19 continues to impact students, families, and schools in a variety of ways (e.g., an intensified teacher shortage, higher rates of chronic absenteeism, school climate challenges). Please reflect on and describe the impact of COVID-19 on LCAP, LCSSP goals, LCSSP activities, and LCSSP outcomes during the 2022–23 academic year.

E. Per the LCSSP legislation, "a local educational agency that receives LCSSP grant funding shall evaluate and report to the governing board of the school district, the county board of education, or its chartering authority, as applicable, and the department, the results of the activities it undertakes pursuant to this article." Describe how the LCSSP program spending and student outcomes are shared and disseminated to the school community. Attach a confirmation of dissemination, i.e., Board Agenda Item, webpage link, etc.

SECTION 5: Annual Expenditure Report

Complete and submit the Annual Expenditure Report. The template can be found on the California Educators Together website at https://www.caeducatorstogether.org/groups/6eroohdm/learning-communities-for-student-success-program-lcssp.

SECTION 6: LCSSP Participating Schools

This section is required for grantees that serve a subset of schools within their participating LCSSP district(s). If you selected option B or option D for item 6 in Section 1: LCSSP Grantee Details, please complete this section. If you selected option A or C for item 6 in Section 1: LCSSP Grantee Details, you may skip this section.

To understand progress on the outcomes of interest for LCSSP, the CDE will collaborate with WestEd to collect standardized data on relevant outcomes (e.g., attendance rates, chronic absenteeism rates, graduation rates). To facilitate this process for grantees that serve a subset of schools within their district(s), please provide the district name, school name, and 14-digit County-District-School (CDS) code for each school that is part of your LCSSP grant in the table below. CDS codes can be found using the California School Directory at https://www.cde.ca.gov/schooldirectory where you can search for each school, or the Public Schools and Districts data file at https://www.cde.ca.gov/ds/si/ds/pubschls.asp, which includes an Excel file that can be sorted or filtered to identify schools.

Learning Communities for School Success Program

Narrative

Cohort:		6						
Reporting Year: 1								
Applicant	t Agency:	New Haven Un						
CDS Coo	le:	Alameda Cour	Alameda Coun					
Grant Aw	vard Amount:	1566300						
OBJECT CODE	BUDGET ITEM	Reporting Year Expenditures	20% Match	NARRATIVE (Detailed explanation of expenditures and match. Figures and explanations should equal the total spent.)				
1000	Certificated Personnel Salaries	\$0.00	\$0.00					
2000	Classified Personnel Salaries	\$187,737.85	\$174,973.00	Project Lead (\$67,988.36), Centralized Family Service Assistants (FSA) (\$32,179.61) for English Learners, Foster Youth and Unaccompanied Immigrant Youth; Program Specialist (\$85,451.30) works in tandem with the Community Specialist supporting for homeless partnerships, and supporting the FSAs at elementary and secondary, with an emphasis on college-career connections and developing a learning community with United Way and other events/partners. Extended hours for staff during weekends, evenings, and intersession (\$2118.58). <i>Match = Community Specialist</i> (\$87,476); Staffing for para-professionals in expanded day programs at 5 schools with high percentages of English Learners to support tutoring and/or academic intervention (\$87,497).				
3000	Employee Benefits	\$89,277.86	\$86,287.00	Benefits & Health/Wellness for salaries above.				
4000	Books and Supplies	\$782.29	\$27,000.00	Student & family engagement materials and supplies (\$782.29). Match = Office copying supplies for walk-ins at the Family Center, new staff supplies, and general office supplies (\$27,000).				
5000	Services and Other Operating Expenditures	\$20,000.00	\$25,000.00	Contract partnerships with Tiburcio Vasquez Health Center providing health services, health/medical coverageinformation and support with enrollment/re-enrollment (\$20,000). <i>Match = SparkPoint Financial Health and Coaching (\$15,000), and United</i> <i>Way Bay Area (\$10,000) supporting field trips to college and career partnerships</i> <i>through college-career connections and developing a learning community.</i>				
6000	Capital Outlay	\$0.00	\$0.00	NA				
	TOTAL DIRECT COSTS:	the second	\$313,260.00					
7000	Indirect Rate4.9%	\$14,592.00	\$0.00	State approved indirect for 2022-2023				
	TOTAL:	\$312,390.00	\$313,260.00					

Name and Signature of Superintendent or Authorized Designee

Printed Name and Title (if Designe	e)	Dr. John Thompson Superintendent New Haven Unified School District
Signature:		
Ema	ail form to: <u>LCSSP@cde.ca.gov</u>	FOR CDE USE ONLY
\bigcirc		Approved:

Date:

Annual Expenditure Report Learning Communities for School Success Program

Cohort	6			LCSSP Office Approval	
Reporting Period:	1		Date Received		1
Applicant Agency:	New Haven Unified School District		Date Approved:		1
County/District/School Code:	Alameda County/New Haven Unified School [District	Approved By:		
Grant Award Amount:	\$1,566,300				1
20% Minimum Match:	\$313,260				
Object Code	Budget Item	Budget for Reporting Year	Reporting Year Expenditures	Balance	20% Match
1000	Certificated Personnel Salaries	\$25,200.00	\$0.00	\$25,200.00	
2000	Classified Personnel Salaries	\$243,664.00	\$187,737.85	\$55,926.15	\$174,973.00
3000	Employee Benefits	\$124,884.00	\$89,277.86	\$35,606.14	\$86,287.00
4000	Books and Supplies	\$43,869.00	\$782.29	\$43,086.71	\$27,000.00
5000	Services and Other Operating Expenditures	\$60,000.00	\$20,000.00	\$40,000.00	\$25,000.00
6000	Capital Outlay	\$0.00	\$0.00		
	Total Direct Costs	\$497,617.00	\$297,798.00	\$199,819.00	\$313,260.00
7000	Indirect Rate4.9 %	\$24,383.00	\$14,592.00	\$9,791.00	\$0.00
Total Budget & Expenditure		\$522,000.00	\$312,390.00	\$209,610.00	\$313,260.00
				2	

Contact Information

Learning Communities for School Success Program

Cohort	
Reporting Period	
Applicant Agency:	
County/District/School Code:	
Date Completed:	
Grant Award Amount:	
Section 1	Fiscal or Program Contact Information
Name:	Jennifer Hawkins
Title:	UCFC Coordinator (Grant Program Manager)
Phone Number:	510-476-2780
Email:	jhawkins@nhusd.k12.ca.us
Section 2	Person Completing this form (if different than above)
Name:	Jennifer Hawkins
Title:	UCFC Coordinator (Grant Program Manager)
Phone Number:	510-476-2780
Email:	jhawkins@nhusd.k12.ca.us

Annual Expenditure Report Instructions (AER)

Learning Communities for School Success Program

California Department of Education Revised Oct. 2023

PURPOSE

The Learning Communities for School Success Program (LCSSP) Annual Expenditure Report (AER) is the accountability document that reflects the dollar amount spent towards work plan activities.

REPORTING PERIODS AND DUE DATES

Annual Expenditure Report Due: October 27, 2023

DOCUMENT INSTRUCTIONS

The AER requires completion of the following worksheet tabs: 1) Contact Information; 2) Annual Expenditure Report; 3) Narrative

Tab 1: Enter the following information: 1) Cohort from drop-down menu; 2) Reporting period; 3) Applicant Local Educational Agency Name (LEA); 5) County/District/School (CDS); 6) Date form completed; 7) Grant Award Amount from Grant Award Notification; 8) Program Contact Name; 9) Title; 10) Phone number; 11) Email address, and if the person completing the form is different from the program contact, complete Section 2. 12) Name of person completing this form; 13) Title; 14) Phone Number; and 15) Email address.

Tab 2: Enter the following information: 1) Reporting year budget (Column C); 2) Total expenses by object code for the current expenditures being reported (Column D). Cells are prepopulated with zeros; 3) Balance will auto populate; 4) Information on the applicable year Indirect Cost Rates (ICR) can be accessed on the CDE website at https://www.cde.ca.gov/fg/ac/ic/; 5) Complete matching funds information for the reporting year (cash expenditures or in-kind matching funds/services).

Tab 3: Reporting year expenditures will be populated from the Annual Expenditure section under tab 2. Under the Narrative column, enter all the expenditures and match with a detailed explanation.

DOCUMENT SUBMISSION

Email signed original to the California Department of Education, LCSSP@cde.ca.gov. For questions regarding this report, email LCSSP@cde.ca.gov.