

## **Adequacy Work Group**

**6-5-20**

Present: Jay Kahn, Rick Ladd, Val Zanchuk, Jane Bergeron, Iris Estabrook, Barbara Tremblay, Dick Ames, Bill Ardinger. Also present: Jesse Levin, Bruce Mallory, Jordan Hensley, Drew Atchison, Erica Ungarelli, Kelly Untiet, Eric Frauwirth. 11 public attendees.

Senator Kahn opened the meeting at 3pm and welcomed commission members, AIR team members, presenters, and the public.

First to present – Erica Ungarelli, Director, Bureau for Children’s Behavioral Health. She provided an overview of the Bureau of Children’s Behavioral Health, which is fairly recent (about 4 years old). Many community mental health centers partner with schools to provide services. Medicaid in schools provides services to students if they meet Medicaid criteria. Work in partnership with DOE and the Bureau of Student Wellness.

Next presenter – Kelly Untiet of the DOE’s Bureau of Student Wellness. Consists of the Office of Nutrition Programs and Services, Office of School Health, and Office of Social and Emotional Wellness (of which Kelly is an Administrator). Want to ensure that students are ready to learn. Organize teams at various schools across districts, create plans to work together and serve students. Working to educate and train school workforce to meet student needs (ex: youth MH first aid, suicide prevention, etc). Support services for educators as well in an effort to help and retain.

Chris – from the school’s point of view this work is voluntary. Can you characterize if it is schools with the highest needs getting involved or are those schools not getting involved, perhaps because of lack of bandwidth? Kelly – feel like I’ve talked to every district in NH in some shape or form. Their abilities to do activities varies, but all recognize the need. Erica – a perfect reason for schools to reach out to community providers rather than taking this work on all by themselves – can be a real challenge. Medicaid in school only targets eligible students, so much less broad-based.

Jane – in terms of new systems of care, where does funding for that work come from? Erica – insurance pays for screening and assessments as part of well child checks. A lot of schools do some levels of screenings, whether developmental or behavioral (sometimes interchangeable at a young age). Early intervention a program funded by the department as well – mostly developmental but pick things up. Medicaid as an insurer does pay for diagnostic evaluations and treatment as a core benefit for students enrolled. Jane – do you know how many schools have mental health centers and is there any data around the impact? Erica – funded through a normal funding stream, so has to be eligible for community MH center. Primary funding source through Medicaid. Fairly broad eligibility for younger children. Kelly – around 20 districts receiving

their competitive funding streams, but DOE doesn't collect that data. Erica – would say more than half of MH centers have some involvement with local schools.

Jay – We have base aid and differentiated needs (your presentations fit that category). Is there accurate enough data to quantify the populations you're trying to address across schools or SES indicators by town that are good indicators that show where targeted assistance should be applied? Kelly – base of work helps ALL students, in developing skills and also in not sliding into higher need categories. Support for all students also is helpful for higher level of need students. As indicators of funding the work, DOE looks at the quantifiable need as FRPL, community violence, disparate populations; districts' readiness/willingness to engage in innovative and robust ways of thinking. Not sure how you might bring that to scale across the state. Would argue that there are structural and systemic ways that could be used – flat rate funding to support “the system”. Eric – getting our arms around the need and data is very difficult right now because our systems and service systems are so siloed. Lament the idea that DOE and school data and DHHS data do not meet in any informative way. Limitations in what schools can provide to help assess that more accurately. Kelly – one small example of the challenges is that we have districts that have been unable to invest in a data system; doing handwritten data collection with pen and paper. How do you get that from the desk to community providers and on up? Barbara – to see the work that has been provided the last 4 years has been amazing, and hopes that they continue to move forward and collaborate.

Rick – noted that UNH-Durham received \$26.8 million grant for early childhood. What are we finding out in terms of data. Is UNH sharing with DHHS or DOE? How can we tie that together? Bruce – on June 15 we will be talking to Deborah Nelson about the early childhood system and Kim Firth. Erica – my department involved in that grant. Kelly – at DOE have an early childhood intervention team staffed by UNH and led internally by DOE deputy commissioner. I am working to make sure all the work described is plugged into that. Erica – have integration team to build bridges.

Next Presenter – Eric Frauwirth, administrator of the bureau of career development at the DOE. Major focus of the office is to support CTE in schools and state corrections system. 20 CTE districts within NH, allowing students to attend one of the 26 CTE centers within the state or 5 along border with VT. Most physically attached to high schools. Perkins the main funding stream for CTE – federal formula funding grant. Most recent allocation ~6million dollars. 85% of dollars goes to students, divided 80/20 between secondary and post-secondary (CCSNH). CTE centers supposed to be supported at the state/local level, with perkins supplemental. CTE centers belong to communities/local districts. DOE allocates money for tuition and transportation. Longer discussion of how transportation and tuition monies distributed. Comparisons with MA and DE.

Rick – Can you explain the % of students participation in DE vs NH? Eric – different structure, where every HS has one or more CTE programs at the HS. A school like Plymouth has a CTE center attached. 85% of Plymouth students take at least one CTE course. Conway, similar,

Portsmouth, similar. But when it comes to having to transport and reimburse for tuition, schools will only budget to send a very limited number of students to CTE.

Dave – the whole idea of transportation is a disincentive, but is there anything else DE is doing with the program of study that makes it more attractive? Eric – no, it's based on the structure of the system. Our system has contracted with a consulting firm to provide NH options for providing equitable access to CTE. Bussing won't go away in NH, but maybe ways to make it more appealing. Report supposed to come in August, but delayed to December. Dave – does the ADMA for adequacy count for CTE students? Eric – our CTE centers are part time, so home school district will get the adequacy money (part of which is sent to the CTE center). State paying for student twice. Dave – can confirm about budgeting for a limited number of students to do CTE.

Val – incredibly apparent that the state funds CTE because it has to, not because it wants to. From the business community, everything else is worthless. Very frustrating to see the byzantine architecture that disincentivizes participation in CTE. When you don't help kids prepare themselves for the work world you're doing a disservice. State completely oblivious to the needs of the workforce. When defining adequacy, to what end? Incredibly frustrating to see all the barriers.

Rick – one of the major costs in CTE is capital improvements. What's going on with that? Eric – noted earlier that state partners with CTE centers to create. Originally would do renovations in order of construction of center. Have decided that is not practical and will be proposing that renovation allocations stay available but in an RFP grant process (MA does this).

Barbara – can you talk about apprenticeship? Eric - Electrical and plumbing programs part of their work, but really just do some admin, mostly in community colleges.

Further discussions of values, outcomes, what the legislature has placed in the bucket of adequacy, and a preview of discussion to come on Monday.

Questions/comments placed in Q/A box:

Jeanne Dietsch 05:00 PM

Do any states combine CTE and community college, so that there is proper funding, rather than trying to fund both?

Jeanne Dietsch 05:01 PM

Academic, vocational and behavioral are all required by the Constitution, no? “It shall be the duty of the legislators and magistrates, in all future periods of this government, to cherish the interest of literature and the sciences, and all seminaries and public schools, to encourage private and public institutions, rewards, and immunities for the promotion of agriculture, arts, sciences, commerce, trades, manufactures, and natural history of the country; to countenance and inculcate

the principles of humanity and general benevolence, public and private charity, industry and economy, honesty & punctuality, sincerity, sobriety, and all social affections, and generous sentiments, among the people....” Section 2:83 NH Constitution

Jeanne Dietsch 05:01 PM

Presumably adequate education definition should match the Constitution?