



City of Cleveland
Justin M. Bibb, Mayor

Office of the Mayor
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Integrated Health Initiative

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Integrated Health Initiative

This initiative will increase access to healthcare services that help students manage the pandemic's disruptions through three key investments. First, this will support the physical infrastructure to establish three new school-based health clinics in CMSD schools. Second, this investment will support additional health supplies, medical equipment and telehealth infrastructure in additional schools. Third, this investment will support the creation of a community health education campaign to make children and families aware of new health centers and services and to proactively engage families in healthcare opportunities that will improve long-term outcomes.

Integrated Health Initiative Budget

The figures included in the budget are projections. The actual costs may vary.

| Capital | 2023 | 2024 | 2025 | Total Project Costs |
|---|-------------------|-------------------|-------------------|----------------------------|
| Equipment & supplies | \$ 126,000 | \$ 50,000 | \$ 50,000 | \$226,000 |
| Telehealth tools | \$ 25,000 | \$ 20,000 | \$ 20,000 | \$65,000 |
| Connectivity infrastructure to support telehealth | \$ 40,000 | \$ 20,000 | \$ - | \$60,000 |
| 3 new brick and mortar clinic spaces | \$ 500,000 | \$ 500,000 | \$ 500,000 | \$1,500,000 |
| Total Capital Cost | \$ 691,000 | \$ 590,000 | \$ 570,000 | \$ 1,851,000 |

| Community Engagement & Family Enrollment Outreach | 2023 | 2024 | 2025 | Total Project Costs |
|--|---------------------|---------------------|---------------------|----------------------------|
| Community health staff & coordinators | \$ 250,000 | \$ 250,000 | \$ 250,000 | \$ 750,000 |
| Social media & radio outreach | \$ 60,000 | \$ 60,000 | \$ 60,000 | \$ 180,000 |
| Materials & support for partner organizations | \$ 130,000 | \$ 130,000 | \$ 130,000 | \$ 390,000 |
| Hosting community-based health & education events | \$ 75,000 | \$ 75,000 | \$ 75,000 | \$ 225,000 |
| Market research | \$ 164,000 | \$ - | \$ - | \$ 164,000 |
| Total Outreach Cost | \$ 679,000 | \$ 515,000 | \$ 515,000 | \$ 1,709,000 |
| Administrative Cost | \$ 62,000 | \$ 62,000 | \$ 62,000 | \$ 186,000 |
| Overall Project Costs | \$ 1,370,000 | \$ 1,105,000 | \$ 1,085,000 | \$ 3,746,000 |

Date: December 13, 2022

Name of Requesting Entity / Individual - **Integrated Health Initiative Task Force**

EIN (if applicable) -

Address of Requesting Entity – **Cleveland Foundation**

City Council Ward Number of Requesting Entity -

Geographic Scope of Project: select one [City Council Ward] [multiple City Council Wards] **[City-wide]** [Beyond the City] -

If applicable, please specify City Council Ward Number(s) of Project Scope –

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Phone Number – **216-615-7137**

Which priority area(s) does this initiative address? Check all that apply.

- Stabilizing the Budget Inclusive Economic Recovery Housing for All Violence Prevention & Public Safety
 Closing the Digital Divide A Modern & Transparent City Hall Education for Everyone Lead-safe Cleveland
 Arts & Neighborhood Amenities Civic Participation Fund

Total Amount Requested for Initiative \$ 3,746,000

Initiative description [500 words or less]

Both science and experience tell us that healthy children are better prepared and able to learn. High-quality, readily accessible mental and physical health care is needed to fully support healthy child development and foster effective learning. This was true before the COVID-19 pandemic and is dramatically more so today. The recently released report, [Education Forward: The Impact of COVID-19 on Cleveland's Education Landscape](#), reveals the profoundly sobering educational impact of COVID on our 37,000+ Cleveland Metropolitan School District (CMSD) students. It is a clarion call to ensure robust health-focused responses to the urgent needs of our children—both physical AND mental—are available to the greatest extent possible in the 2022-23 school year and beyond.

To test and explore how best to expand access to integrated health services for scholars, a prototype was developed by the Integrated Health Task Force (IHTF), leveraging national best practices and local expertise. The prototype was launched in four Say Yes schools in January 2021, resulting in the creation of a groundbreaking approach to school-based health care that emphasizes family, school personnel, and provider collaboration.

School-based healthcare is not a new concept. Like many communities, we have numerous examples of strong school health programs in Cleveland, but services have not been universally available or equitably distributed.

Supported by ARPA, the IHI will help ensure that every CMSD scholar has access to integrated physical and mental health services to help every student successfully manage the pandemic's disruptions by:

- a) Outfitting all participating schools with the supplies needed for a medical cart and equipment including cold storage for vaccines, medical supplies, and/or a private room available and equipped for telehealth and mental health appointments
- b) Updating the technology needed for telehealth appointments, and building secure and soundproof spaces to utilize telehealth
- c) Adding “brick and mortar” clinic spaces in strategic areas of the district so they can serve the school they are located in as well as additional people in the surrounding area
- d) Engaging the community and raising awareness of the initiative by utilizing earned and targeted mass and social media, participating in key community events, and creating clear and succinct outreach materials

Estimated timeline for implementing/launching initiative (including start date, end date, and major milestones)

February 2023 – May 2023

- Identification of school locations for physical infrastructure support
- Ordering, receiving and distributing medical supplies for year 1
- Development of the full community outreach strategy

June 2023 – May 2024

- Start phase 1 implementation of infrastructure supports – some physical, some mobile, and some telehealth.
- Continued implementation of the community outreach strategy.

June 2024 – May 2025

- Start phase 2 implementation of infrastructure supports – some physical, some mobile, and some telehealth.
- Continued implementation of the community outreach strategy.

June 2025 – May 2026

- Start phase 2 implementation of infrastructure supports – some physical, some mobile, and some telehealth.
- Continued implementation of the community outreach strategy.

End date is December 2026.

*Phases refer to the number of sites.

Who will be implementing/executing this work? Will it be done by the City, require additional staff, require contractors or an RFP process? Have those implementing already been identified? [300 words or less]

Launched in early 2020, the Integrated Health Initiative is an existing partnership among Say Yes Cleveland, CMSD, and local community health providers. It is organized through a taskforce (Integrated Health Task Force) (IHTF) of more than 100 individuals representing more than 50 local organizations (in addition to Say Yes and CMSD), including health systems and health centers, mental health providers, community-based organizations, philanthropic organizations, and institutions of higher education. The Integrated Health Initiative Task Force would be responsible for implementation.

Cleveland Foundation will receive the funds. Reporting and compliance will be delivered by Cleveland Foundation and Cleveland Metropolitan School District.

Secured partners or collaborators in this initiative. [300 words or less]

ADAMHS Board; Applewood Centers, Inc.; Beech Brook; Bellefaire JCB; Better Health Partnership; Buckeye Health Plan; Care Alliance; CareSource; Case Western Reserve University; Centene; City Year Cleveland; Cleveland Christian Home; Cleveland Clinic; Cleveland Metropolitan School District; Cleveland Rape Crisis Center; County Family Justice Center; Cuyahoga Community College; Cuyahoga County; Cuyahoga County Division of Children and Family Services; Educational Services Center of NEO; Friendly Inn Settlement; Front Line Service; Greater Cleveland Partnership; Journey Center for Safety and Healing; Life Act; MedWorks; Mental Health & Addiction Advocacy Coalition (MHAC); MetroHealth Systems; Molina Healthcare; Murtis Taylor Human Services System; MyCom Youth Development Initiative of Greater Cleveland; Nationwide Children's Hospital; Neighborhood Family Practice; NewBridge Cleveland Center for Arts & Technology; OhioGuidestone; PEP Cleveland; Reach Out and Read Greater Cleveland; Say Yes Cleveland; The Cleveland Foundation; United Healthcare Community Plan; United Way of Greater Cleveland; University Hospitals; Woodruff Foundation; YMCA of Greater Cleveland

What are the goals of this initiative? [300 words or less]

Ensure that every CMSD scholar has access to integrated physical and mental health services to help them successfully manage the pandemic's disruptions by expanding access to and utilization of health services for scholars in Cleveland.

What metrics will you use to determine its success? [300 words or less]

1. **Four-Year Evaluation Results:** The Prevention Research Center for Healthy Neighborhoods at Case Western Reserve University is conducting a four-year evaluation of the integrated health work. Researchers will look at implementation to understand how efforts can be improved and assess the impact of expanded school-based health on scholars' health and academic outcomes.
2. **Increase the number of students with a signed Consent Form:** The IHTF has created one standard form that includes consent to treat and to share information across all providers
3. **Increase the number of students enrolled in health insurance**
4. **Expand access to and usage of "brick and mortar" clinic spaces and telehealth services**

How does this initiative address racial equity and inclusion? [300 words or less]

Communities of color often have higher rates of mental illness but less access to mental health resources ([Source](#)). The IHI helps close gaps between resources available in wealthy communities and underserved communities by providing physical and mental healthcare in easily accessible locations like neighborhood schools and via telephone. Cleveland schools serve a diverse group of students, with 63.9% percent Black and 17.2% percent Hispanic students; providing healthcare through schools will greatly expand access to healthcare for these groups of minority students and their families.

What is the community impact of this initiative? Who will be served? For example, approximately how many citizens will it impact, how many businesses will it support, and/or how many jobs will it create? [300 words or less]

Research shows the benefits of school-based health care to promote academic success, quality of life, and equity, including boosting school attendance and decreasing disciplinary actions, increasing access to affordable, ongoing health insurance, and creating a more positive school culture that fosters learning. Proven interventions like school-based healthcare are desperately needed to reverse the dramatic impact of COVID-19 on school attendance and student stress levels, challenges that can impact graduation rates and subsequent employability.

The IHI can impact all 37,000+ CMSD students and their families by scaling existing integrated health prototypes. The IHTF successfully built and implemented the Integrated Health prototype in four CMSD schools from February 2021–June. In the first 14 months of the prototype, more than 400 consent forms were completed by scholars' families, and more than 500 health care services were delivered by partnering providers. With support from ARPA, the prototype could be expanded to eventually serve all CMSD students.

How does this initiative set Cleveland apart at a state, national, and/or international level? [300 words or less]

There has been a statewide call for more mental health resources ([Source](#)). When fully implemented, the program will be the first of its kind in Ohio—every scholar will have direct access to integrated healthcare services (preventive and acute, for both mental and physical health) through their school at little or no cost. The IHI would set Cleveland apart as a city making bold strides toward repairing the damage done to student and community health during COVID and provide an opportunity for future innovation in integrated healthcare.

How might ARPA funding leverage additional support for this initiative? What other sources of support or matching do you anticipate for this initiative? List each source, dollar amount, and whether it is expected or secured. This may include federal funding beyond ARPA (like IJJA), private, or philanthropic dollars [300 words or less]

Local philanthropic support for this initiative has been strong. Organized philanthropy has provided \$3.4M to date. CMSD has invested \$3.5M to fund the presence of a nurse at each school. CMSD has also established the Office of Integrated Health with support from the Gund Foundation and the Cleveland Foundation. Additionally, MetroHealth secured a \$5M investment from the state of Ohio. These funds represent contributions to date, and additional ongoing support is expected from both CMSD and philanthropy.

How will this initiative be sustained and for how long will it continue to provide value to the community? [300 words or less]

The requested ARPA funds will provide one-time funding to support capital costs related to space, equipment, medical supplies, and enrollment outreach. These funds will provide for initial scaling costs and sustain the initiative for 3 years.

Long-term sustainable funding is being pursued that will require modifications to Ohio's current state Medicaid plan, such as 18 other states to date have secured. The IHTF is prioritizing conversations at the local and state level to address and improve the financial stability for school-based health care. With this long-term funding, the IHI could continue to provide value to the community for decades into the future.

Support Student Health and Wellness

Education For All ARPA Initiative



CITY OF CLEVELAND

Mayor Justin M. Bibb

Agenda

01 The Need

02 Initiative Overview

Narrative, Evidence-base & Impact Measures

03 Initiative Partners

Philanthropic, Community & Service Provision Partners

04 Initiative Finances

Cost, Leverage & Sustainability



The Need for Supporting Student Health & Wellness

Healthy children are better prepared and able to learn. High-quality, readily accessible mental and physical health care is needed to fully support healthy child development and foster effective learning, especially after COVID-19.

A report released by Education Forward on the impact of COVID-19 on Cleveland kids found that:

- **Chronic absenteeism** in the 2020–21 and 2021–22 academic years was double pre-pandemic levels
- Students reported experiencing **high levels of stress** and **rising rates of depression**
- Students are dealing with **higher levels of grief, trauma, domestic violence, and lost socialization**



The Goal:

Ensure every CMSD student has access to integrated physical and mental health services that will help them successfully manage COVID-19 disruptions and come to school ready to learn



Initiative Overview

The initiative will help students successfully manage the pandemic's disruptions through:

- **New health clinics** – create clinics to support student health and wellness across the District that attend to health needs both for students and the broader community
- **Community health education** – create a community outreach campaign to make children and families aware of new health centers, and to proactively engage in healthcare opportunities that will improve long-term outcomes
- **More health supplies and better technology** – invest in more new medical equipment in schools and in telehealth technology that will allow schools to better serve their students

Impact Measures

- Increase in the number of students with a signed Consent Form
- Increase in the number of students enrolled in health insurance
- Expanded access to and usage of brick-and-mortar clinic spaces and telehealth services
- Four-year program evaluation results from the Prevention Research Center for Healthy Neighborhoods



Initiative Partners

This initiative is organized through the Integrated Health Task Force, which includes representatives from health systems and health centers, mental health providers, community-based organizations, philanthropic organizations, and institutions of higher education.

| | |
|--|--|
| ADAMHS Board | Greater Cleveland Partnership |
| Applewood Centers, Inc. | Journey Center for Safety and Healing |
| Beech Brook | Life Act |
| Bellefaire JCB | MedWorks |
| Better Health Partnership | Mental Health & Addiction Advocacy Coalition |
| Buckeye Health Plan | MetroHealth Systems |
| Care Alliance | Molina Healthcare |
| CareSource | Murtis Taylor Human Services System |
| Case Western Reserve University | MyCom Youth Development Initiative |
| Centene | Nationwide Children's Hospital |
| City Year Cleveland | Neighborhood Family Practice |
| Cleveland Christian Home | NewBridge Cleveland Center for Arts & Technology |
| Cleveland Clinic | OhioGuidestone |
| Cleveland Metropolitan School District | PEP Cleveland |
| Cleveland Rape Crisis Center | Reach Out and Read Greater Cleveland |
| County Family Justice Center | Say Yes Cleveland |
| Cuyahoga Community College | The Cleveland Foundation |
| Cuyahoga County | United Healthcare Community Plan |
| Cuyahoga County Children and Family Services | United Way of Greater Cleveland |
| Educational Services Center of NEO | University Hospitals |
| Friendly Inn Settlement | Woodruff Foundation |
| Front Line Service | YMCA of Greater Cleveland |



Initiative Funding

Total funding request: \$3.746M to provide for initial scaling costs and sustain the initiative for an additional 3 years

| Sub-Initiative | Cost |
|---|-------------|
| Health clinic infrastructure | \$1,500,000 |
| Health supplies and telehealth technology | \$351,000 |
| Community health education, engagement and outreach | \$1,709,000 |
| Administrative costs | \$186,000 |

The Integrated Health Task Force is prioritizing conversations at the local and state level to address and improve the financial stability for school-based health care. With this long-term funding, **the initiative could continue to provide value to the community for decades into the future.**



Questions?



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Say Yes! Cleveland

ARPA Request: \$3.746 Million

Purpose: Integrated Health Initiative--Cleveland Children's COVID-related Healthcare Supports

Both science and experience tell us that healthy children are better prepared and able to learn. High-quality, readily accessible mental and physical health care is needed to fully support healthy child development and foster effective learning. This was true before the COVID-19 pandemic and is dramatically more so today. The recently released report, *Education Forward: The Impact of COVID-19 on Cleveland's Education Landscape*¹, reveals the profoundly sobering educational impact of COVID on our 37,000+ Cleveland Metropolitan School District (CMSD) students. It is a clarion call to ensure robust health-focused responses to the urgent needs of our children—both physical AND mental—are available to



the greatest extent possible in the 2022-23 school year and beyond.

The American Rescue Plan

Act (ARPA) affords our community a unique opportunity to invest in healthcare to aid children and families who have been dramatically and disproportionately impacted by COVID-19. School-based healthcare is not a new concept. Like many communities, we have numerous examples of strong school health programs in Cleveland, but services have not been universally available or equitably distributed.

As the Bibb Administration and Cleveland City Council consider options and prioritize the spending of federal ARPA dollars, we urge you to include the *Integrated Health Initiative (IHI)* among those priorities. Specifically, the IHI

COVID IMPACT ON CLEVELAND CHILDREN

As described in the *Education Forward* report, COVID-19 has greatly affected K–12 education in Cleveland. In a city where half our children were already living in poverty, families have struggled to meet their most basic needs—food, housing, safety, and **healthcare**. We include these stats to show the areas we believe can be positively impacted when scholars have better access to healthcare .

Chronic absenteeism in the 2020–21 and 2021–22 academic years was double pre-pandemic levels.

Students reported experiencing high levels of *stress + rising rates of depression*.

Students are dealing with higher levels of *grief, trauma, domestic violence, and lost socialization*.

¹ The report, released in May, is a collaboration among Say Yes Cleveland, College Now, the Higher Education Compact, PRE4CLE, Cleveland Transformation Alliance, Starting Point, and the Gund and Cleveland Foundations.

responds to identified priorities calling for inclusive recovery, violence prevention, and education for all.

Background

Launched in early 2020, the Integrated Health Initiative is an existing partnership among Say Yes Cleveland, CMSD, and local community health providers. It is organized through a taskforce (Integrated Health Task Force) (IHTF) of more than 100 individuals representing more than 50 local organizations (in addition to Say Yes and CMSD), including health systems and health centers, mental health providers, community-based organizations, philanthropic organizations, and institutions of higher education.

*The **goal** is clear and compelling: help ensure every CMSD scholar has access to integrated physical and mental health services that will help every scholar successfully manage the pandemic's disruptions.*

To test and explore how best to expand access to integrated health services for scholars, a prototype was developed by the IHTF, leveraging national best practices and local expertise. The prototype was launched in four Say Yes schools in January 2021, resulting in the creation of a groundbreaking approach to school-based health care that emphasizes family, school personnel, and provider collaboration.

When fully implemented, the program will be the first of its kind in Ohio—every scholar will have direct access to integrated healthcare services (preventive and acute, for both mental and physical health) through their school at little or no cost. Long-term sustainable funding is being pursued that will require modifications to Ohio's current state Medicaid plan, such as 18 other states to date have secured.



Proposal for Cleveland's Covid Relief Funds

Request: Appropriate \$3.746 million of available ARPA funds to specifically support increased access to high-quality integrated school-based, community-connected healthcare through *one-time funding* to support capital costs related to space, equipment, medical supplies, and enrollment outreach.

Capital costs for every participating Say Yes school

To aid school preparedness for expanded integrated healthcare services, ARPA funds are needed to make facilities improvements to existing spaces to serve scholars' health needs.

Equipment needs include cold storage for vaccines, medical supplies, and/or a private room available and equipped for telehealth and mental health appointments. To outfit all buildings with the supplies needed for a medical cart (blood pressure cuffs, medical supplies, gloves, etc.), the cost is estimated at **\$226,000²**, with ongoing resupply for three years likely to be an **additional \$50,000**.

To update the technology needed for telehealth appointments, and build secure and soundproof spaces to utilize telehealth, the cost is approximately **\$125,000**. Approximately \$65,000 would be earmarked for the actual telehealth tools (devices that examine in close detail and transmit in real time to the doctor observing, including in ear and mouth) in each building, with the rest designated for increasing connectivity infrastructure to support the additional needs of telehealth equipment.

To support full health integration, additions to the current health clinic infrastructure are needed. This means adding “brick and mortar” clinic spaces in strategic areas of the district so they can serve the school they are located in as well as additional people in the surrounding area. These sites can be built in such a way that allows for eventual community access. Based on calculations used for an Ohio Department of Health grant recently awarded to Integrated Health Initiative partner MetroHealth System, refurbishing an existing space costs approximately \$250,000 and building a new space that includes two exam rooms, a bathroom, and basic lab space is approximately \$500,000 per clinic. Estimated capital costs include site design and permit fees, specialty consulting (e.g., engineering), build-out costs, signage, IT infrastructure, and 10 percent construction contingency. The goal is to add an additional three clinic spaces to the existing one, with a total cost of \$1.5 million. If costs are able to be contained, any remaining funds will be used to support vision and dental services and needs.

The total request to support the capital costs related to the Integrated Health Initiative is \$1,901,000.

Community engagement and family enrollment outreach

Building awareness and establishing trust among Cleveland families is essential to increasing buy-in and connecting scholars to integrated healthcare services. The first step is to ensure scholars have a *signed health consent form* on file with their school. IHI has developed a common consent form that enables streamlined student enrollment and privacy-protected data sharing among partners to aid in quickly identifying and responding to individual needs and emerging population trends. Clear communication and sustained engagement with families is essential to building trust and awareness before a family is asked to sign the health consent form. Every family deserves the opportunity to learn about the value of school-based health services, particularly the connection between COVID recovery, academic success, and health. This outreach will also help improve health literacy among families and address misinformation about issues like immunization and mental health.

² These and the following cost figures in this section are derived from direct experience of the MetroHealth System, an active school-based health care partner with CMSD.

To reach the thousands of Cleveland students and their families across the 2022-23, 2023-24, and 2024-25 academic years with essential basic information, and to be able to connect the IHI in each neighborhood and with each school building, a variety of outreach and engagement



efforts are needed. The IHI will work closely with community partner organizations, out-of-school-time providers, parent ambassadors, health care providers, and trusted entities such as public libraries and faith-based leaders to engage every family. To build this network, utilize earned and targeted mass and social media, participate in key community events, and create clear and succinct materials needed to support the efforts and participating schools, **\$1.33 million** over the next

three academic calendars is requested. These funds would go towards the following purposes: community health staff and coordinators (\$250,000 per year), social media and radio (\$60,000 per year), materials and support for partner organizations (\$130,000 per year), supporting and hosting community-based health and education events (\$75,000 per year) and implementing a market research effort to provide the entire community with data on effective messages and showing a path for long term impacts on health literacy (\$300,000 total).

The total cost of community education and family enrollment support is \$1,845,000 million during the next three academic years (2022-23, 2023-24, and 2024-25).

Research shows the benefits of school-based health care to promote academic success, quality of life, and equity, including boosting school attendance and decreasing disciplinary actions, increasing access to affordable, ongoing health insurance, and creating a more positive school culture that fosters learning. Proven interventions like school-based healthcare are desperately needed to reverse the dramatic impact of COVID-19 on school attendance and student stress levels, challenges that can impact graduation rates and subsequent employability.

As noted in the *Education Forward* report, COVID-19 is a “potentially generation-shattering occurrence.” With swift action and a commitment to high-quality TRULY integrated healthcare represented by this request, we have a chance to use public investment through ARPA funds to create a generation-restoring response and demonstrate a model of integrated school-based healthcare that can leverage sustainable *and allowable* Medicaid funding.

Thank you for your consideration.