Enhanced Partner Roles Analysis Memo

Analysis for Task 3. Recommendations on Processes and Resources to Enhance Partner Roles

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Contents

Overview and Summary

In 2022, the American Institutes for Research® (AIR®) conducted an evaluation to assess the effectiveness of the Community Partnership Schools (CPS) model on improving a series of student outcomes during the early years of model implementation (2015–16 and 2018–19 school years). The evaluation in 2022 also examined implementation of the CPS model through virtual interviews of CPS partners. One of the findings that emerged from the 2022 implementation evaluation was the existence of an unbalanced role among the partners working in a given school relative to decision-making authority, commitment to the community school vision, and access to key information, supports, and opportunities to contribute to CPS implementation.

To build on these findings, AIR was asked to conduct additional qualitative research to better understand partner participation and capacity to support CPS implementation. AIR examined processes and resources to enhance partner roles. AIR focused on four CPS sites to assess equal partnership roles and provision of resources by partners. The information summarized in this memo is drawn from interviews and focus group discussions with representatives from health, university, nonprofit, and school district core partners in four targeted schools conducted in the fall of the 2023–24 school year. In reviewing these data sources, we sought to better understand what factors have facilitated or hindered equal partnerships and shared leadership.

Across the four schools, we found examples of promising practices in ensuring shared decision making and leadership, developing a common understanding of CPS implementation vision, and examples of collaboration. We also sought to understand how these schools perceived partner roles, how they worked to develop equal partnerships, and how the University of Central Florida (UCF) Center for Community Schools resources supported these efforts. We begin by highlighting some of the facilitators of success and barriers to partner engagement and shared decision making in the sections below.

Facilitators of success. Factors promoting shared leadership and engaging partners included intentionally building good relationships, having open and consistent communication among partners, and using collaborative decision-making processes that allow each partner to express needs and perspectives. All stakeholders we spoke to emphasized the importance of nurturing and maintaining good relationships between partners to support and improve CPS implementation. School district representatives and directors also discussed the need for good communication between partners, whether through cabinet meetings, emails, calls, individual meetings, or other means. Finally, all partner types highlighted the importance of decision-

making processes that allowed all participants to share their views and opinions with the group to collaboratively make decisions.

Barriers. The research team found that the main barriers to engaging all core partners in implementation and collaborative leadership included lack of clear partner expectations of their and other partners' roles, staff turnover, and inconsistent meeting attendance. The lack of clear expectations and role confusion came up most often for university partners, and was discussed by both university partner representatives and other core partners. Another barrier was turnover in staff, most critically for directors, which resulted in the need to spend more time developing relationships and building trust with representatives from other core partners. Inconsistent meeting attendance was another challenge for equal partner engagement, most specifically for cabinet meetings, where members were often busy and unable to attend all meetings. However, if they sent a substitute in their place, the core member would still need to be briefed and included for decision making.

In the next section, we briefly describe our methodology. We then provide findings on primary themes and highlights of our analysis related to the vision, partner roles, collaborative leadership bodies, decision-making processes, equal partner engagement, and support from UCF. Afterward, we present conclusions and discuss overall recommendations for the UCF Center to improve and further support shared leadership and decision making among CPS partners.

Research Methods

The evaluation team conducted six 60-minute virtual interviews and focus group discussions with nonprofit, university, health, and school district representatives from four CPS sites from August through September of 2023. Four CPS sites were identified to include a range of partner experiences, including a mix of sites of nonprofit partner agencies. We also reviewed analysis from the previous implementation evaluation in 2022 regarding responses on shared decision making and nonprofit support. Exhibit 1 lists the interviews and focus groups conducted with each stakeholder type for each of the four schools.

Exhibit 1. Data Sources

Interviews and focus groups – role	Number of participants	Number of schools
Nonprofit partner	4	4
University partner	4	3
Health care partner	3	3
School district partner	1	1

Interview and focus group transcripts were coded using qualitative software. We used a blended deductive and inductive approach to develop our coding structure. Our codebook was, in part, predicated on the coding structure used in the evaluation of CPS schools in 2020–22. In using an inductive and deductive approach we built on what we have learned about the initiative to date and allowed for new themes to be captured and analyzed as they arose.

In the following sections, we provide detailed analysis of the primary areas related to partner roles, shared leadership, and collaborative decision making.

A. Shared Vision

Representatives from the four schools shared visions for CPS implementation in three primary categories. These included (a) removing barriers for families and developing the local community, (b) creating a wrap-around model for education, and (c) ensuring equitable outcomes for all students and families. For example, at multiple sites, there was a consistent theme across partners of a shared vision to meet basic needs and engaging in a whole-child approach to allow students to succeed academically. Directors discussed a whole-child approach as including meeting mental, physical, emotional, social, and nutritional needs. This also included working with the four core partners to provide programs and services that keep students engaged and wanting to be in school, as well as providing supports for the community surrounding the school. For one school, the health, university, and principal respondents all discussed a vision to meet these basic needs to benefit the entire community.

> "The role that we play, or the vision, ultimately, is to look at the entire community, meaning the student, the family, the school, and the surrounding area, recognizing that we want the best quality of life for each of them."
>
> *– Health Partner*

Core partner representatives interviewed shared that the vision at their schools was commonly set by the executive cabinet, principal, and guidance from the UCF Center. **While core partners**

from one site discussed the role of guidance from UCF and the principal in setting the vision for CPS implementation, all core partners at the other three sites said that establishing the vision was primarily the role of the executive cabinet. Some partners from one site, including the director and principal representatives, noted that the overall vision was determined from the CPS model but adapted to the specific school context. At this same site, the director mentioned that the vision direction was initially set by the principal and that implementation needed to align with the principal's vision. Respondents from the other three sites, including representatives from nonprofit, university, health, and district partners, emphasized that setting the vision for CPS implementation was a group process, focusing mostly on the executive cabinet. Respondents said that cabinet members would discuss the vision, ensuring alignment with the school principal, and would vote. They also noted having strategic planning meetings annually for the executive cabinet to capture and refine the vision for CPS implementation.

> "We determine that [vision] through strategic planning. We have strategic planning every year in the summer. Strategic planning normally aligns with what we would call our school improvement plan. … But we utilize that school improvement plan along with the vision, mission, and values of all of the partners who are at the decision-making table, which is the executive cabinet. And we take that plan, and we utilize that as a formal recommendation for operations and execution for action items in the next year."
>
> *– CPS Director*

B. Partner Roles

We asked the partners to describe their role and describe their expectations for and perceptions of other core partners in CPS implementation. In Exhibit 2, we describe examples of partner responsibilities outlined in memorandums of understanding (MOUs), as well as findings on partner roles from interviews and focus group discussions.

Exhibit 2. MOU Partner Responsibilities

Partner	Standard qualifications	MOU partner responsibility examples	Evaluation findings
Nonprofit	• Agency resources Community school coordinating entity	• Coordinating entity • Clinical and case management services • Dedicated team for advocacy and grant-writing efforts • Trauma-informed care and mental health awareness for teachers	• Coordination • Program management

Partner	Standard qualifications	MOU partner responsibility examples	Evaluation findings
Healthcare	• Comprehensive medical services	• Wellness cottage on campus offering primary, dental, and behavioral health services • Dedicated contact to ensure seamless integration within community schools • Dental mobile unit • Ongoing collection of current healthcare data for area	• On-site healthcare services • Telemedicine services • Funding for wellness coordinator
University	• University resources	• Needs assessments: formal needs assessment of community schools; interns for community needs assessment • Data analysis: dedicated staff responsible for collecting and analyzing data, developing reports • Teacher professional development and coaching: classroom management, Teacher Leader Academy • Service-learning opportunities through after-school clubs • Tutoring/mentoring and outreach opportunities to parents and community by university/college students. • Pilot Literacy Program for struggling readers • Mental health counseling interns	• Needs assessment support • Teacher professional development • Tutoring, mentoring, volunteering, internships • Events at school site
School district	• Facility use/office space	• Office space for community schools personnel and services • Staff, such as extra assistant principal as community schools administrator, designated liaison for community schools • Data permissions for community schools staff • Tutors for after-school and weekend tutoring • Buses for evening transportation • School nurse for basic needs and triage	• Physical space provision • Overall support and approval • Funding • Relationships with principal, assistant superintendent, superintendent

Source: UCF Core Partner MOU Guidelines and partner interviews.

There were multiple ways university partners engaged with their CPS sites, but there was a lack of consistency and clarity across sites regarding expectations about university partner responsibilities. According to the UCF Core Partner MOU Guidelines, the standard qualification for university partners is the leveraging of university resources, and example contributions include leading needs assessments for CPS sties, data analysis, teacher professional

development and coaching, university students providing tutoring, mentoring, special projects, literacy programs, and mental health counseling interns. University partners discussed their role as providing university students as tutors, volunteers, and interns; promoting teacher professional development; providing assistance with needs assessments; and holding events at CPS sites. Some university partners discussed having structures in place for university students to volunteer at the school for short projects or longer internships. Other university partners shared that they tailored opportunities and roles to the university specialties—for example, having interns work with mental health counselors or directly with teachers depending on the type of university departments and students. Some sites had more than one university partner, with each one taking on different responsibilities. However, there appeared to be no standard role or clear expectations for university partners; some provided student interns, others focused on professional development, some did needs assessments, and others hosted events at schools. Only one of the sites had university partners reporting providing nearly all of these services, while the other three provided some services. For example, respondents from one site reported recruiting university students as tutors, volunteers, and interns at the school, providing teacher professional development, and assistance with needs assessments and data analysis. For a second site, respondents discussed providing mental health counselor and teacher university student interns, and on-campus events, but not needs assessment, data analysis, or tutoring support. At a third site, the university partner's main focus was on teacher professional development, as well as needs assessment and data analysis support. At the fourth site, the director discussed the university partner's role of providing interns, helping with data analysis, and mentoring students.

Nonprofit partner roles: The nonprofit partner's role was most often described as funding the CPS director, who was tasked with convening partners and stakeholders, responsible for program management, and leading CPS implementation. This matched the UCF Core Partner MOU Guidelines standard qualifications for the nonprofit community-based partner to serve as a coordinating agency and provide agency resources, with variation in the specific examples including afterschool programs, grant-writing, and case management services. The directors, employed by the school's nonprofit partner, largely seemed to be responsible for establishing the processes of collaborative decision making. For example, all directors interviewed mentioned setting the meeting times and agenda for cabinet meetings and said that it was their responsibility to ensure that all partners remain engaged, even if that required having one-on-one calls with each partner. Directors also discussed the program and budget management and implementation aspects of their work, overseeing staff that include the wellness coordinator, expanded learning coordinator, and family and engagement coordinator, to ensure afterschool programs are happening and students are participating. Reporting was another key role shared

by directors. Directors shared that they received support from their employing agency, the nonprofit partner, that extended into things like relationship building with other partners.

> "We are the collaborative leaders of that model, which means we convene, we pull everyone together, we manage, we're budgeting, we're advocates. We're all those things. We oversee the operations at our school."
>
> *– CPS Director*

Providing health services was seen as the key role for the health partner. According to health partners, this included providing primary care, wellness checks, school physicals, sports physicals, and information for students on addressing health issues. Other CPS partners also perceived the health partner role as providing primary care, vision, dental, and mental health, and having a physician on campus, or providing an on-site clinic or telemedicine. **However, there was variation in how services were provided.** While the UCF Core Partner MOU Guidelines standard qualifications for the health partner are to contribute comprehensive medical services, specific examples provided included onsite health services, mobile units, and healthcare data collection. For example, one school had an on-site clinic, and another was providing telemedicine at the school, along with dental screenings. At a third site, one health partner provided funding for the wellness coordinator employed by the nonprofit agency and coordinated with another health partner to provide medical services. Other partners also perceived the health partner role as providing primary care, vision, dental, and mental health, and having a physician on campus, providing an on-site clinic, or providing telemedicine.

Respondents highlighted the school district's role as providing physical space for CPS implementation, establishing relationships with the principal and district leadership, and overall support, funding, and approval for activities. This matches the UCF Core Partner MOU Guidelines standard qualifications for the school district partner for contributing facility use and office space. A director and university partner from different sites highlighted the important role of the school district in providing space at the school for CPS implementation—for example, for providing expanded learning activities. In addition to physical space, school district representatives, such as the principal, assistant superintendent, and superintendent, facilitated key relationships with directors and other core partners to support implementation. For example, one director discussed having a good working relationship with the school principal, which enhanced CPS implementation, and engagement with the assistant superintendent that made implementation possible. Other sites discussed having support from the superintendent visiting the school. A university partner highlighted the school district's role in obtaining funding for construction to expand space for expanded learning offerings. Respondents also alluded to the need for approval from the principal and school district to carry out CPS-related activities.

One school district representative emphasized their role in ensuring trust in the partnership: "that we're doing everything that we are telling the Community Partnership School [and] UCF; that we're doing everything with fidelity and transparency in terms of our partnerships and following through and reporting accurate numbers in terms of the people that we're helping."

C. Collaborative Leadership Bodies and Decision-Making Processes

During the focus groups, each of the partners described their involvement in at least one of these leadership bodies, with a major focus on the cabinet as a structure for collaborative leadership and decision making. Community Partnership Schools have a number of decision-making bodies, including, but not limited to, the cabinet of core partners, operational committees (e.g., operations, data, grants, communications), student and community leadership councils, and school-centered committees (e.g., staff well-being, student behavior, academic intervention, family engagement, parent-teacher associations). **Partners across sites agreed that holding regular cabinet meetings, especially when all partner representatives attend and review the same data, was conducive to shared decision-making.** However, busy schedules and competing priorities were consistently preventing partners from regularly attending meetings, which might lead to unequal participation in decision making. The following section describes core partner participation in collaborative decision-making bodies, the structure of the cabinet, and the processes for collaborative decision making at each site.

Leadership Body Membership

As stipulated in the CPS MOUs, core partners are all members of the leadership cabinet. Nonprofit, university, and school district partners also shared in interviews their participation with other decision-making bodies. CPS directors and coordinators, typically funded by the nonprofit partner, participated in the largest number of decision-making groups, including operational committees, community and student leadership councils, and school-based committees. While oversight of the cabinet, operational committees, and inclusive leadership councils fell under the director and coordinator role description, the cabinet chair position was a representative from another partner, who would facilitate meetings. When directors and coordinators participated on school-based committees, CPS services were more integrated with the school-day operations. For example, having a wellness coordinator work with school counselors on a behavioral committee helped improve coordination of mental and physical health services. University partners noted sending representatives to community leadership council meetings as well as sitting on the communications and fundraising committees. School administrators and teachers also participate in some way with all CPS decision-making bodies to ensure decisions are actionable and in students' best interests.

Cabinet Structure

Executive cabinets were the main decision-making authority and structure for collaboration among CPS partners. However, it was not clear how the cabinet chair is selected. At each site, CPS directors work in collaboration with a cabinet chair to plan and facilitate monthly meetings of, at least, all four core partners. Some directors mentioned meeting more frequently with individual partners, and all directors noted an open line of communication with school administration for less formal conversations as being beneficial for implementation. Other partners and community members beyond the four core partners were also invited to serve on the cabinet at some sites. There were no clear processes or regulations articulated in interviews around who served as the cabinet chair, how they were chosen, or for how long they serve. Across the four sites, the director drafted the cabinet agenda, and the chair was responsible for running the meeting and making sure attendees were engaged. The chairs at the four sites involved in this analysis each came from a different partner agency (health, university, district, and non-core additional partner). All four cabinet chairs were held in high esteem by other partners, according to respondents. At one site where a district representative served as chair, the director noted that he was well equipped to serve in the position because of his tenure with the district and knowledge of the CPS initiative's history.

Collaboration Among Partners and Collaborative Decision-Making Processes

Overall, partners were satisfied with the processes for collaborative decision-making and felt as though their voices were being heard. Other key factors for promoting collaboration were building strong relationships and good communication structures among partners. However, there were still barriers to shared decision making, including sparse attendance and regular staff turnover. All focus group participants agreed that decision making was collaborative, and each partner had a fair chance to express their opinions. **Participants described three collaborative decision-making processes**:

- All sites held an annual strategic planning meeting, sometimes an entire day-long retreat, to look at data from the previous year and set goals for the upcoming year.

- Operation committee meetings were mentioned as collaborative spaces where goals were divided into actions and measures.

- Most collaborative decision making occurred during monthly cabinet meetings. In these meetings, each partner had the chance to share their perspective on progress and needs, including sharing subject matter expertise, and cabinet members voted on how to proceed.

Intentional relationship building appeared to be a key factor for good collaboration. Directors especially emphasized the importance of building strong relationships with core partners and stakeholders for effective CPS implementation.

> "Relationship building is amazing, and just staying ... we couldn't get half of the things we do done without positive and growing relationships with our partners. So, we have to always try to continue to cultivate those."
>
> *– CPS Director*

One director discussed leveraging pre-existing relationships as key to moving implementation forward, sharing the ability to contact political leaders as needed for activating resources for the school. The director also explained that many members of the executive cabinet are at high levels of organizations, so might not be as motivated to attend meetings if not for the relationships, given their other responsibilities.

> "When you have a chief operating officer of a bank that serves on your committee, when they look at the list of things they have to do today, a local school that they don't know that much about comes very low on their priority list. So, building those relationships, I would say, is one of the biggest tasks of the director, getting those folks to see why this meeting is just as important as the other meetings. Because without the relationships, our committees go to die because people don't see it the same as maybe a budget meeting for their bank. They have a million other things to do in the day. So, to devote an hour and a half to our cabinet meeting once a month is a big ask, if they don't have a personal, passionate connection to what we're doing."
>
> *– CPS Director*

Respondents discussed the importance of intentionally building strong relationships and having good communication, leading to better collaboration, support, and funding among core partners for CPS implementation. Strategies for building good relationships included promoting open and organized communication, newsletters, having regular cabinet meetings, and one-on-one meetings between the CPS director and cabinet members. Most partners said that having regular cabinet meetings promoted communication and relationships among partners. One director shared a strategy of having one-on-one meetings with members of the executive cabinet to build relationships, create trust, and obtain buy-in from partners for CPS implementation. Another director cited including partners in newsletters as much as possible as a means to share what is happening. Directors and principals emphasized the need for open lines of communication and making sure partners were on the same page, while also being clear and organized.

> "Just open lines of communication, being organized, but the key to everything, I think, is building relationships, communication being clear, because if it's not, if you're not organized, if the communication is not clear, then you're going to waste time. And I'm in education, but in the business world, time is money, but time is so scarce and it's valuable to everyone, so there's no partner that's more important than another. So just being organized and being a strong communicator and being able to communicate your ideas and visions for events clearly is really pivotal."
>
> *– Principal*

Respondents shared examples of how intentionally building good relationships through communication led to greater support and funding for CPS implementation. For example, a director shared how discussions about data on improved literacy after university partner engagement with their university partner led to increased investment in related programing. At another site the university partner described how having consistent university student engagement and a pre-existing intentional good relationship with the school district led to providing funding for paid internships for university students at the CPS site. A principal also echoed this sentiment regarding the importance of strong relationships to engage stakeholders across the community to support CPS implementation.

Staff turnover. Staff turnover, especially in the director position, leaves partners trying to rebuild relationships and catch up on context, instead of being able to make time-sensitive decisions. Turnover in the director role caused challenges, because core partners have to develop relationships and build trust with new directors. Directors discussed the importance of understanding the status of relationships with partners and stakeholders when starting in the role, and assessing which relationships needed to be nurtured and which needed to be maintained as important to supporting implementation. Sites where cabinet members served for an extended period shared that the continuity and historical context were always helpful.

Meeting attendance. Across all partners and sites, there was a general concern about partner availability to regularly attend cabinet meetings, which hinders CPS progress and collaborative decision making.

> "Attendance is always a challenge. I mean, we're all also very busy. So just like this meeting, you can send out as many reminders as you'd like. It's just a matter of who's able to attend and when. It seems like you can never find the best time to work for everyone."
>
> *– University Partner*

Particularly during the COVID-19 pandemic, respondents reported that it has been difficult to engage all partners. To promote engagement and improve attendance, one site began alternating locations where the cabinet meetings are held—rotating between core partner sites. The same site also reported considering hosting hybrid in-person and virtual meetings.

Busy schedules and competing priorities led cabinet members to occasionally miss meetings or send substitute representatives in their place. However, partners noted that sending stand-ins slowed the decision-making process if the substitute did not have authority to make decisions.

> "Case in point, we may have a team member from our healthcare team come and we might get the office manager who is in charge of the medical assistance. Well, our office manager who runs patient services for the medical assistance is not our chief executive officer who can make any decision, and he's going to have to go back to her. So oftentimes when we have persons filling in these meetings, they're not the decision maker. If we have someone who might have to come represent an organization at a cabinet meeting, that way we have representation in quorum, but they'll then have to go back to the decision maker, and then the decision maker comes to us, and we may have to have the conversation again. We may have to draw an even clearer picture for that decision maker, because they might not have been there. So those are some of the struggles that slow our success down and what we do."
>
> – *CPS Director*

D. Equal Partner Engagement

In the 2022 evaluation of UCF's Community Partnership Schools, AIR found that one challenge with CPS implementation was ensuring that one partner did not dominate decision making, resulting in a "one-legged stool" where other partners were either disengaged or underutilized or felt that they had little decision-making power in implementation. To further explore this finding and the partners' perceptions of partnership engagement in their sites, we asked focus group participants to describe their CPS core partners' engagement in the work. Overall, there appeared to be some imbalance in partnerships across the four sites we studied. High levels of partner commitment were described as the result of a shared mission and vision for supporting students and families and improving the quality of life for the community. Challenges to partner commitment included lacking human capital and fiscal resources, competing organizational commitments, and imbalance in the core staffing model at CPS schools. Specifically, the director position is funded by one partner, and takes on the primary role in implementing activities and services for CPS schools. Some respondents questioned the need for each partner to be equally engaged in the work. Finally, university partners, in particular, appeared to be less engaged and appeared likely to commit fewer resources to sites than other partners in the four sites we studied. We describe these facilitators and challenges to partner engagement in more detail below.

Shared mission and vision for strong partnerships. Focus group participants shared that working with partners who truly are invested in improving the lives of the community creates a stronger partnership overall. For example, one participant shared, "I think for us, it goes back to the why, and none of us are doing this work to get rich, or there's no financial gains for anyone. And so, at the end of the day, if you remember you're doing it for the child, or the collective child, then everyone is on level ground. And so you work to overcome any barriers you may see. In this type of work, you're working with good people."

Questioning the need for a balanced partnership. Nearly half of the focus group participants (5 respondents) noted that they did not see equal participation among partners, but also questioned if an equal partnership among all partners was necessary for implementation of the initiative. One director discussed seeing the nonprofit agency taking the lead, saying, "we're kind of running a site operation for [the nonprofit agency] at the school." While all partners reported seeing value in supporting the initiative, many of the less engaged partners described competing organizational commitments as a primary reason for not engaging more fully. For example, one respondent explained the challenges to a truly equal partnership and the possibility that an equal balance might not be essential for quality implementation.

> "Yeah, I think equal is tough. I think there are going to be relationships with people, and in organizations it's only natural that you're going to have stronger ones with some people than others. So, I would say no, that it's not totally equal, but that they're close enough, they're still contributing and we're still leveraging them, that we're still being able to do and plan and to provide what we need to. But there are stronger partners, mainly due to the relationship that I have or the school or the director has with them, that we feel like are stronger than others."
>
> *– Principal*

Competing priorities. In particular, university partners were described as being less engaged with the partnership across the four sites. Three out of four nonprofit partners remarked that they would like to see more participation from their university partners. University partners we spoke with shared that competing priorities and limited time and resources were primary challenges to more fully committing to supporting their sites. One university partner said, "I think part of our challenge is that we are limited, specifically by our administration and our financial position, but I do feel like the things that we do, we do well. The other thing is, we can't control students. So even though we're an institution with a bunch of students … we can't force these students to engage with [the school]." One university partner also noted that they felt pressure to support the partnership through fundraising, but also admitted that the university as an institution had not been very helpful in identifying grant opportunities but could try to work on this more in the

future. Health partners we spoke to also reported that competing priorities for their organizations were challenging in terms of committing time and resources to sites.

> "[CPS is] not our full-time job or focus. And so, there are people at the table, that is what they do all day every day. And again, we want to be a good partner. We are definitely at the table, but it's not our main focus."
>
> *– Health Partner*

Imbalance in the funding of CPS staff. Typically, the nonprofit partner is charged with using the CPS funding and internal funds to provide compensation for the director and three coordinator positions. Because the nonprofit partner is responsible for providing funding for the primary CPS staff, other partners relayed that they felt that implementation of the initiative was largely the responsibility of that nonprofit partner. One suggestion raised by a respondent to address this and give other partners more responsibility and ownership over the work was to diversify funding of on-site positions among partners. At one site, the health partner provided the funding to cover the wellness coordinator role but noted that this was not a stated expectation laid out in the MOU. One director suggested that diversifying the funding streams for the four core role salaries could help level partnership engagement as well as contribute to sustainability of the program beyond grant funds.

> "I am not the expert at speaking on step-down funding, but it's a real thing. And when we're really going through that, the way we need our partners most is to help us mitigate that we're losing those dollars every year, because we don't want to have a decrease in services because we're having to turn a coordinator into a part-time position, which might cause us to lose a coordinator. And now we have to reallocate what that pillar may do because we don't have a full-time coordinator anymore."
>
> *– CPS Director*

E. UCF Support

Most respondents described the support from the UCF Center as useful and supportive and also provided suggestions for consideration in the future. All respondents reported the support from the UCF Center as being useful—in particular, facilitation of networking through regular meetings for all directors hosted by UCF and events for principals and school district representatives to gather, discuss successes and challenges, and build relationships. Health partner representatives discussed attending a conference hosted by UCF and attending regular meetings as being helpful. In addition to regular calls for directors hosted by UCF, directors shared that they often sought support from other directors in their cohorts. Requests for additional support varied by the role of each partner. **Health care partners** we spoke to

suggested that UCF collect and share best practices as well as create a repository or listserv to share information. **Directors** requested additional training and support for existing sites—for example, best practices in establishing and maintaining a balanced leadership team. One director said, "It would be really interesting for me to hear, 'How do you pick a cabinet? What are the requirements for a cabinet member?' I mean, I walked in, all this stuff was already established." **University partners** felt that the UCF Center should provide clearer expectations of the university partner role.

F. Conclusion

This report summarizes our analysis of partner roles and shared decision making and leadership. Below we highlight some promising practices, or facilitators, as well as primary challenges found in our analysis.

Facilitators. The strategies for engaging partners and promoting shared leadership include:

- Intentional relationship building among core partners and stakeholders to support successful CPS implementation and sustainability of the model.

- Fostering open and consistent communication among core partners through practices such as structured meetings, open-door policies between administration and directors, and shared responsibilities for provision of services.

- Facilitated collaborative decision-making processes with the executive cabinet where each partner is provided space to express perspectives and needs.

Barriers. Critical barriers shared with our research team included:

- Lack of clear expectations for university partners.

- Imbalance in the funding model for core CPS staff at sites.

- Turnover among staff, especially CPS directors.

- Inconsistent attendance among core partner representatives at executive cabinet meetings.

G. Recommendations

Further clarify expectations for each partner in MOUs—especially the role of the university partner. Both service provision and funding expectations should be outlined at the beginning of any CPS partnership. This could also promote consistency for the university partner role across CPS sites and help ensure key needs are met for the sites, such as assistance with conducting needs assessments and data analysis.

Diversify funding sources to encourage partnership sustainability. Currently the nonprofit partner is typically funding and selecting the director as well as the three coordinator positions. Three directors suggested that increased funding or diversifying funding sources for the coordinator positions could contribute to the sustainability of the positions and programing as well as create shared investment of partners for the success of implementation.

Reduce staff turnover. All directors agreed that increasing compensation for the four core roles would contribute to less turnover in these positions. Ideally, finding ways to compensate or recognize other partners as well for their involvement might incentivize attendance and participation when they have competing priorities coming from their full-time jobs.

Promote mechanisms for networking, building relationships, and sharing resources. All respondents reported that the UCF Center provided support for networking and communicating with others in the same partner role. Suggestions for additional support included more events for collaboration, information and best practices repositories, and additional training for current directors. A final suggestion was to provide additional guidance on best practices in selecting and maintain CPS cabinets, including who serves as cabinet chair, how they are selected, and for how long they serve.

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