

**Committee on Health, Education, Labor & Pensions
United States Senate
Submitted Testimony by
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In December 2012, Delta Health Alliance was awarded a five-year Promise Neighborhoods grant by the U.S. Department of Education, authorizing \$6 million in the first year and about \$23 million in the subsequent years. I serve as the day-to-day manager for this project.

I was asked to respond to two questions:

**** What is your state, district, or school doing to implement innovative approaches to improve academic outcomes for students, particularly low-income and at-risk students?*

**** How can we improve the federal law (No Child Left Behind) to encourage more states, districts, and schools to innovate?*

Our promise neighborhood grant is being implemented in Indianola, Mississippi, a town of about 10,600 in the Mississippi Delta county of Sunflower. The town's population is 80 percent African-American and its municipal school district is about 98 percent African American with nearly every student eligible for free or subsidized school meals. Our partners include the Sunflower County Consolidated School District, city of Indianola, Delta State University, B.B. King Museum in Indianola, Urban Child Institute in Memphis, University of Memphis, and the University of Tennessee Health Sciences Center. The cross-state collaboration offers opportunities to implement promising practices and lessons learned throughout the region.

Our overall mission is to ensure Indianola children are ready for school, that students who need help get help quickly, and that young people stay in school through graduation and transition to postsecondary education. The Indianola Promise Community (IPC) offers a collective approach, with programs and services complementing and building on each other in a coordinated fashion.

Innovation guides our process by using data to rigorously assess each of our programs against objectives and goals, making changes – innovations – in real-time when the data show results are not being delivered. Our commitment is to results-based accountability which calls for decisions to be rooted in data. For

each program, there is baseline data (where we are) and target data (where we need to be). At the beginning of each program, the data team leads the development of performance measures with program staff. After the performance measures are developed, a program scorecard is developed, and on a monthly basis, IPC data and program staff meet to discuss progress on performance measures. The program's scorecard drives this conversation. This process allows program-level staff to make decisions about the intervention in real-time, as opposed to waiting until a program ends to evaluate it. We collect performance data on over 30 programs and 10 partners, using a universal case management data system. In addition, we have eleven family advocates who work with individuals and families at most risk. At-risk families are identified using data collected from the school district through our case management system.

From our perspective, innovation is relatively easy once everyone agrees that data, not anecdotes, not personalities, not local politics, should drive decisions about the effectiveness of programs. Once all of our partners adopted that position, and have collaborated with us in developing the objective benchmarks and the data to measure those benchmarks, we have been able to make the changes we have needed to make. And that is the key to innovation.

One of our innovations is using a computer based study program called Classworks to not only help students master skills but also to allow us to monitor the achievement level of each student and intervene with tutoring when needed. Once all of the May 2014 year-end state test (MCT2) results were provided to us, we determined that Classworks usage in Indianola was associated with higher MCT2 scores. Specifically, when students mastered more Classworks lessons, they were more likely to score higher MCT2 scores. Likewise, when students mastered less Classworks lessons, students did not perform as well on the MCT2. This also means students' MCT2 scores can be estimated long before the end of the school year. By calculating a student's Classworks mastery score, staff can reasonably predict how well a given student will do on the MCT2. This has major programming implications: we can use Classworks data to identify which kids need the most help quicker than ever before.

Across all tested grades (3rd-8th) in Indianola, proficiency rates improved by a relative eight percent from 2013 to 2014. Third grade proficiency rates in both math and English were actually on par with the state averages. This is key because a large portion of our resources since 2010 has been devoted to the children in the earliest years of school and pre-school.

Additional innovative approaches have produced early outcomes in Indianola including:

*** Kindergarten readiness measures increased 19 percent from fall 2013 to fall 2014. We credit this increase to the overall alignment of our early childhood programs among all of our participants and ensuring that children are enrolled in multiple programs.

*** Of the 350 students attending our camps during summer 2014, more than 73 percent demonstrated no summer learning loss in reading, whereas nationally low-income students typically lose more than two months in reading achievement.

*** Supplemental teacher training by academic coaches across all English & Language Arts classrooms is associated with rising 9-week achievement scores for high school students in 2013 and 2014.

*** Since full implementation of key programming and evidence-based outcomes, the gap between Indianola 3rd graders and Mississippi 3rd graders performing at proficient and advanced levels in reading and math on state tests has virtually been closed.

To answer the second question, we have never found the NCLB law to be an impediment to the innovations we have developed in Indianola. So long as the provisions of NCLB are tied to analysis of programs based on real-time data and objective goals, it can help foster innovation. NCLB's focus on accountability is consistent with the IPC effort to review individual-level student data in real time and use that information to improve intervention efforts. By building a clear and truthful picture of what programs are working, and for which groups of children, it becomes possible to scale, replicate, and sustain successful initiatives. In this way, innovations have the capacity to drive real, positive and lasting change.

One of our clear findings is that it takes multiple programs operating over a significant period of time to create desired outcomes. It takes time to build community buy-in, to fashion programs to fit the particular characteristics of a community, and to overcome the natural resistance to upend the status quo. If Congress is willing to fund this kind of sustained innovative program, we can deliver outcomes that will make you proud.