



OFFICE OF RACIAL EQUITY AND SOCIAL JUSTICE

Marc Elrich
County Executive

Tiffany Ward
Director and Chief Equity

MEMORANDUM

February 2, 2024

To: Jennifer Bryant, Director
Office of Management and Budget

From: Tiffany Ward, Director
Office of Racial Equity and Social Justice

Re: Racial Equity Impact Assessment (REIA) for Supplemental Appropriation (SA) #24-44 Department of Health and Human Services Increase Somatic Services at Montgomery County Public Schools, \$1,168,672 to the FY24 Operating Budget

- I. **FINDING:** The Office of Racial Equity and Social Justice (ORESJ) finds that Supplemental Appropriation #24-44 Department of Health and Human Services Increase Somatic Services at Montgomery County Public Schools, \$1,168,672 to the FY24 Operating Budget has the potential to improve health and academic outcomes, particularly for Black and Hispanic students attending a community school receiving one of the ten School Community Health Nurse II positions.
- II. **BACKGROUND:** Supplemental Appropriation #24-44 would add an additional one point one million dollars (\$1,168,672) to the Fiscal Year 2024 Operating Budget. The increase in funds would support the hiring of ten School Community Health Nurse II (SCHN) positions in Montgomery County Public Schools (MCPS).

The Department of Health and Human Services ("DHHS" or "the Department") requested the supplemental appropriation. MCPS received funding from the Maryland State Department of Education through the Concentration of Poverty School Grant Program ("Program")—an initiative legislated under the Blueprint for Maryland's Future framework. The purpose of the Program is to provide financial support to schools that serve a high number of students eligible for free or reduced price meals.¹

¹ See the [Maryland State Department of Education's Blueprint for Maryland's Future](#).

BLUEPRINT FOR MARYLAND'S FUTURE + COMMUNITY SCHOOLS

One of the primary objectives of the Blueprint for Maryland's Future is to ensure all MCPS schools receive equitable financial support.² The initiative places emphasis on helping schools with higher concentrations of students experiencing poverty.³ The initiative has identified such schools as “Community Schools” or any school in the state of Maryland that receives a Concentration of Poverty Grant (“CPG Grants”). In the state of Maryland, there are three hundred and fifty-eight community schools receiving CPG Grants.⁴ In Montgomery County specifically, there are nineteen community schools. All of the community schools in the County are elementary schools.⁵

CPG Grants are distributed based on a formula and are given out every year. To qualify, a school must have a certain average percentage of its student population living in poverty over the past four years, not counting the 2020-2021 school year (due to the COVID-19 pandemic).

Community Schools receive CPG Grants to pay for positions such as Community School Coordinators and Healthcare practitioners. The coordinator's job is to work with the community to figure out what students need, partner with organizations that can provide services, and manage the additional support services currently offered by each school. For example, these services may include academic support such as extended learning opportunities, access to safe transportation, family engagement initiatives, or even access to dental services.⁶

POVERTY IN MCPS AND MONTGOMERY COUNTY

In Montgomery County, Black and Hispanic students are overrepresented in schools with high levels of poverty. Specifically, twenty-six percent of Black students and twenty-eight percent of Hispanic students go to schools where more than three-quarters of the student body qualifies for free or reduced-price lunch, compared to just six percent of white students.⁷ This means that in schools where a significant portion of students come from families with limited financial resources, students may face challenges beyond their schoolwork. They might come to school hungry, lack a stable place to live, or go without essential medical care—all factors that can make focusing on education or experiencing positive health and wellness outcomes more difficult.

² The Blueprint for Maryland's Future is a comprehensive reform that introduces five key pillars aiming to transform the state's educational landscape. These pillars include: Pillar 1, [Early Childhood Education](#), Pillar 2, [High-Quality and Diverse Teachers and Leaders](#), Pillar 3, [College and Career Readiness Pathways](#), Pillar 4, [More Resources to Ensure Success for All Students](#), and Pillar 5, [Governance and Accountability](#).

³ According to the 2024 [Health and Human Services Federal poverty guidelines](#), this means a household of two makes less than \$20,440 or for example, that a household of four, makes less than \$31,200.

⁴ See the Maryland State Department of Education [Enabler 4: Supporting Student Success Socially & Emotionally](#); MOST Network [Community Schools Map](#).

⁵ See the [MOST Network County Map](#).

⁶ See [Maryland State Department of Education: Community Schools & Concentration of Poverty Grants](#)

⁷ [School Poverty Rates by Race in Montgomery County](#), Maryland, National Equity Atlas, 2023.

The Office of Racial Equity and Social Justice has written about health services and health service staff in MCPS. These prior assessments describe the importance of addressing the impacts of social determinants of health, racial inequities in health outcomes, healthcare affordability, somatic services, and how targeted investments have the potential to improve health outcomes for Black and Hispanic residents:

- Racial Equity Impact Assessment Supplemental Appropriation #24-29 Centers for Disease Control and Prevention Cooperative Agreement Cooperative Agreement. February 8, 2022. Available at: <https://www.montgomerycountymd.gov/ore/Resources/Files/22-49.pdf>
- Racial Equity Impact Assessment Supplemental Appropriation #24-68 Amendment to the FY23 Operating Budget for Maryland School-Based Health Center Program. March 29, 2023. Available at: <https://www.montgomerycountymd.gov/ore/Resources/Files/23-68.pdf>

NURSE PRACTITIONERS AND MCPS

By rule, the state of Maryland requires health coverage in all schools by a school health services professional. According to the Maryland State Department of Education, some schools “have a registered nurse in every school; others employ licensed practical nurses or registered nurses in each school. In some schools, trained unlicensed health staff are in each school working under the supervision of a registered nurse who may be responsible for one to three schools.”⁸ CPG Grants may be used to cover the costs of healthcare practitioners—professionals licensed to provide essential medical services. This includes SCHNs.

In MCPS, SCHN responsibilities include case management, developing individual healthcare plans, training school staff to support student health needs, and implementing health promotion programs. More broadly, they are tasked with administering daily medications, managing chronic illnesses, and responding to medical emergencies. School Health Room Technicians or SHRTs are Certified Nursing Assistants and Certified Medication Technicians, are assigned to a single school and work under the oversight of an SCHN, providing first aid and assisting with medication administration and health screenings. Collectively, healthcare professionals play a critical role in improving student health, educational outcomes, and overall student well-being, providing emergency care, managing chronic conditions such as asthma and diabetes—which disproportionately affect Black students—and ensuring compliance with health regulations.

Currently, each SCHN is responsible for the health services of up to 2,000 students. They also cover multiple schools. Most schools in MCPS are staffed by SHRTs, with SCHNs overseeing their work. However, the demand for SCHNs exceeds the supply, creating a

⁸ Education Article, §7-401, Annotated Code of Maryland; Maryland Department of Health and the Department of Education, [13A.05.05.05](#)

gap that the CPG Grants aim to fill to ensure each school has the necessary healthcare support for its students.

- III. **ANALYSIS:** Increasing the number of school nurses in Montgomery County Public Schools—particularly in Community Schools with high concentrations of Black and Hispanic students experiencing poverty—has the potential to expand and or make permanent health and wellness services. This increase and or the maintenance of service offerings has the potential to lead to better health and educational outcomes for students attending eligible schools.

The addition of ten SCHNs to MCPS aligns with the Blueprint for Maryland's Future by addressing the fourth and fifth pillars: providing more resources for schools with high concentrations of poverty and ensuring accountability for learning outcomes. This is important given the overrepresentation of Black and Hispanic students in schools where these nurses will likely end up. Nurses will directly support student well-being, a determinant of educational success, and help track health-related barriers to learning. By leveraging CPG Grants to hire nurses, schools can address the direct health needs of their students. This ensures that children are healthy, safe, and ready to learn, which is particularly important in communities where socioeconomic factors often limit access to healthcare.

Notably, the supplemental appropriation lacks specificity. For instance, the supplemental appropriation notes, “There are existing senior nurses at some schools that will be reassigned to the new Community Schools.”⁹ However, it does not include details on how this process will play out, how school nurses will be selected, which new schools will receive the nurses, or specifics regarding the timeline for this transition. Further, this racial equity impact assessment acknowledges there are three hundred and fifty-eight existing community schools. More details, such as how many of those existing schools have SHRTs or SCHNs, and which ones have senior SCHNs and junior SCHNs, would allow for a deeper analysis.

Additionally, it is not explicitly stated how the need for nurses was prioritized over other services that may be offered or provided through CPG Grants. Alternative uses of funds, such as mental health services or safe transportation, may offer substantial benefits, particularly for Black and Hispanic students.

Concerningly, the supplemental appropriation requires senior nurses to be reassigned. Notably, the supplemental appropriation does not explicitly state that these senior nurses will be reassigned to other Community Schools. Once the existing nurses are reassigned, the Department will hire junior nurses as replacements at a lower cost of one point one million dollars (\$1.17 million). However, it is unclear what impact this movement might have on disrupting existing services. Further, while it may be assumed

⁹ [Office of Management and Budget Memorandum](#), “Supplemental Appropriation #24-44 to the FY24 Operating Budget Montgomery County Government, Department of Health and Human Services. December 17, 2023.

that the more senior nurses may be reassigned to other community schools in need, there are no guarantees in this supplemental that this will occur.

Without transparency into how the decision to fund school nurses was made, a needs assessment for each of the existing community schools, a timeline for the transition of nurses across MCPS schools, or even a deeper comparative analysis of the best services to be offered, this racial equity impact assessment is careful not to overstate the potential impact the choice to fund school nurses may have in the broader context of advancing racial equity.

Concerningly, the funding structure is unclear and overly complicated. A December 17, 2023, memo acknowledges the complexities, stating, “The funding and reimbursement arrangement for this grant is complex.”¹⁰ As a rule, overly complex processes can create barriers to transparency and accessibility, which in turn reinforce structures that prevent communities of color and those without privilege from engaging in decision-making processes. The supplemental also states that “it appears unlikely MCPS would contest reimbursing DHHS for the cost of these positions.” While it appears “unlikely” that MCPS would contest the reimbursement, there does not appear to be any binding requirements that preclude them from doing so. If they do, what implications might that have on the Program, staff, and MCPS students?

IV. FURTHER CONSIDERATIONS: The appropriation could include more explicit provisions to ensure the needs of the community are prioritized and that services are culturally competent. For instance, this may be working with school communities to notify parents of future staff changes but also ensuring that whatever communications are sent out are accessible (digital and in print) and also in English and Spanish.

Additionally, future consideration may include a needs assessment that considers how to prioritize other forms of support, such as mental health services, after-school programs, and other wraparound services that might provide a more holistic approach to addressing the educational and health inequities faced by Black and Hispanic students in high-poverty schools.

cc: Dr. James Bridgers, Director, Department of Health and Human Services
Ken Hartman, Director, Office of Strategic Partnerships, Office of the County Executive

¹⁰ Ibid., page 1.