

This sample Local Comprehensive Needs Assessment (LCNA) consists of four surveys that can be utilized to learn about various stakeholder experiences with your LEA's Homeless Education Program (HEP). An assessment of the needs of students experiencing homelessness and effectiveness of your LEA's HEP should take place annually, and results should be utilized to review and revise pertinent policies, procedures, and practices.

This tool is designed to be customized to fit your LEA's Homeless Education Program (HEP). You may find that the number of questions may vary based on the stakeholder group being surveyed. The questions may need to be adjusted to language that pertains to your LEA's HEP and the services you are currently providing. The questions are intended to spark discussion and thought, which will allow you to create a framework for future HEP planning.

The ADE Office of the Coordinator has developed guidance documents and sample forms in alignment with both the McKinney-Vento Homeless Assistance Act and the Arizona ESEA Consolidated State Plan. Please note that these documents have been developed for McKinney-Vento Homeless Liaisons to adopt and adapt to fit the needs of their LEAs. To edit a sample document, refer to the <u>Converting Sample</u> Documents for LEA Use Guidance Document.

General Guidance

- The guidance documents and sample forms have been designed to correspond with <u>McKinney-Vento Homeless Assistance Act</u>, <u>Non-Regulatory Guidance</u>, the <u>Arizona ESEA Consolidated State Plan</u>, and the <u>National Center for Homeless</u> <u>Education (NCHE</u>). Thorough research was conducted prior to developing and sharing these resources with the field. Where applicable, legal citations have been included within documents. To this end, these resources are designed with statute and best practice in mind and should not require any significant changes.
- 2. Prior to use, update the documents in alignment with your LEA's branding requirements.
- 3. Review the text of each document to ensure the guidance throughout is accurate and applicable to your LEA.
- 4. The Arizona Department of Education's Homeless Education Program staff may modify these documents periodically. Please visit the <u>ADE Homeless Education</u> <u>website</u> regularly to ensure utilization of the latest version of each document.



DISTRICT EMPLOYEES

(Random sampling provided by Research and Evaluation team within the district or Human Resources. The list should include all departments within the district.)

The purpose of this survey is to obtain input to grow and improve delivery of services to students, school-level/district personnel, and support staff through the McKinney-Vento Homeless Education Assistance Act. Please take a few minutes to complete the following survey. Your opinion is very important. The information gathered will be utilized to evaluate our services as well as ensure we are following grant requirements. Your responses are confidential.

Rating scales: Poor, Fair, Good, Excellent and Yes, No, Not sure and Multiple Choice

- 1. I attended a district-lead McKinney-Vento training this school year.
 - a. Yes
 - b. No
 - c. Not sure
- 2. How would you rate your awareness of services provided through the of the McKinney-Vento Act?
 - a. Poor
 - b. Fair
 - c. Good
 - d. Excellent
- 3. I know who to contact in my district if I learn about a student that may be experiencing homelessness.
 - a. Yes
 - b. No
 - c. Not Sure
- 4. How would you rate your interaction with the McKinney-Vento Homeless Liaison?
 - a. Poor
 - b. Fair
 - c. Good
 - d. Excellent
 - e. I did not interact with the McKinney-Vento Homeless Liaison.

Provide an example:

- 5. How would you rate your understanding of the challenges and issues homeless children and youths face daily?
 - a. Poor
 - b. Fair
 - c. Good
 - d. Excellent
- 6. Select the top three items you feel are essential supports for students experiencing homelessness.

□After school programming

□Assistance with FAFSA (Free Application for free Student Aid) application

□Clothing/hygiene items

College and career readiness planning and support

Community-based organization referrals

□Counseling

□Fee waivers to participate in extra-curricular activities

□Free breakfast/lunch

□School supplies

□Summer school participation

□Support for parents to help their child succeed at school

□Transportation

□Tutoring

 \Box Other (please specify):



UNACCOMPANIED YOUTH SURVEY

(List is obtained by running query in SIS and from the list the Social Worker has maintained)

Dear Student,

You received support from the McKinney-Vento Office at ______this year. Please take a moment and complete this survey, your opinion is very important. The information gathered will be utilized to improve our services for future students and your responses are confidential. Thank you for your time.

- 1. Do you believe it was helpful meeting with the McKinney-Vento Homeless Liaison or McKinney-Vento Social Worker?
 - a. Definitely
 - b. Somewhat
 - c. Not at All
 - d. I don't recall meeting with the Social Worker.
- 2. Did the support you received by the McKinney-Vento Homeless Liaison or McKinney-Vento Social Worker assist you in becoming more aware of all the different resources available in the community?
 - a. Definitely
 - b. Somewhat
 - c. Not at All
 - d. I don't recall receiving assistance from the McKinney-Vento Homeless Liaison or the Social Worker.
- 3. How did your school counselor provide you with support with any of the following topics?

□Introduce you to the McKinney-Vento Homeless Liaison at your school.

□Meet with you to talk about your concerns.

□Connect you with organizations that could help you with clothing, food, or housing.

□Support with reviewing your class schedule.

□Review your transcript and grades with you.

□Request records from your previous schools such as transcripts, report cards, special education

□Provide information about credit recovery options.

□Receive individualized counseling regarding college or career planning.

□Arrange for you to visit colleges and universities to learn more about the school.

□Assist you with the college application process.

□Provide waivers for you to take the ACT or SAT

□Assist you with competing the Free Application for Federal Student Aid (FAFSA)

Explain to you what an independent status is on the FAFSA.

□Provide a copy of your McKinney-Vento eligibility letter for your college or university financial aid office.

4. Please indicate any services you were assisted with:

□Clothing or hygiene items

Community based organization referral (i.e., HYC-Homeless Youth Connection)

□Counseling referral

□School enrollment

□McKinney-Vento eligibility

□FAFSA (Free Application for Federal Student Aid) completion

□Fee waiver (i.e., course fees, extra-curricular activity fees)

□Shelter or Housing Referral

□Social services referral (i.e., Department of Economic Security (DES) Benefits Guidance, counseling referral, etc.)

□Connection to tutoring or academic support

□Transportation (i.e., bus passes, bus route, etc.)

Other: *place box where they can input what other service

- 5. Was your overall experience a positive one?
 - a. Definitely
 - b. Somewhat
 - c. Not at All
 - d. I don't recall any interactions with the McKinney-Vento Homeless Liaison or the Social Worker.

Comments:

6. Do have any suggestions for our staff that would enhance your experience interacting with our staff?

(Open for responses)



PARENT

(List is obtained by running query in SIS, and list that the Liaison has maintained.)

Dear Parent, your child received support from the McKinney-Vento Homeless Liaison at (insert name of LEA) this year. Please take a moment and complete this survey, your opinion is very important. The information gathered will be utilized to improve our services for future students and your responses are confidential. Thank you for your time.

- 1. Do you believe the support you received from the McKinney-Vento Homeless Liaison, or the Social Worker was helpful.
 - a. Definitely
 - b. Somewhat
 - c. Not at All
 - d. I don't recall receiving support from the McKinney-Vento Homeless Liaison.
- 2. Please indicate all services you were provided. (Multiple choice)

□After school program enrollment

□Clothing or hygiene items

□Community based organization referral (i.e., A New Leaf, Community Bridges, HYC-Homeless Youth Connection, Save the Family, UMOM)

□Counseling referral

□School enrollment assistance

□FAFSA (Free Application for Federal Student Aid) completion (high school students only)

□Fee waiver (i.e., course fees, extra-curricular activities)

□Preschool or Head Start referral.

Connecting you with school staff to support your child.

□Transportation (i.e., bus passes, bus route, etc.)

Insert branching here:

If transportation was provided through McKinney-Vento please answer the following question.

 Do you feel that the transportation provided through McKinney-Vento services met your child's need to arrive to school on time?
Yes

□No

Were route details communicated to you in a timely manner?
□Yes
□No

Did you understand the McKinney-Vento transportation guidelines?
□Yes

□No

• Do you know where to call when your child is going to absent and will not need a ride?

□Yes

□No

Comment Section

Other: (leave option for participant to complete)

- 3. Did your interaction with the McKinney-Vento Homeless Liaison assist you in becoming more aware of the different resources available in the community?
 - a. Definitely
 - b. Somewhat
 - c. Not at All
 - d. I don't recall interacting with the McKinney-Vento Homeless Liaison.
- 4. Were your phone calls/emails returned in a timely manner?
 - a. Definitely
 - b. Somewhat
 - c. Not at All
 - d. I don't recall interacting with the McKinney-Vento Homeless Liaison.
- 5. Was your overall experience with the McKinney-Vento Homeless Liaison a positive one?
 - a. Definitely
 - b. Somewhat
 - c. Not at All

d. I don't recall interacting with the McKinney-Vento Homeless Liaison.

Comments:

6. Do have any suggestions for our staff that would enhance your experience interacting with our staff?

(Open for responses)



COMMUNITY BASED AGENCIES SURVEY

(List maintained by Liaison. Inclusive of all community organizations, LEA Liaisons, Agencies)

Throughout the year you may have interacted with the ______ McKinney-Vento staff. The collaboration between your agency and the district is a vital part of how we service our families who are experiencing homelessness. Please take a few minutes to complete the following survey. Your opinion is very important to us. The information gathered will be utilized to evaluate our services. Your responses are confidential.

Rating scale: Poor, Fair, Good, Excellent and Yes, No, Not sure and Multiple Choice

- 1. The McKinney-Vento Homeless Liaison has provided training for our organization.
 - a. Yes
 - b. No
 - c. Not sure
- 2. Based on your collaboration to assist families experiencing homelessness, do you believe it was helpful?
 - a. Definitely
 - b. Somewhat
 - c. Not at all
 - d. I don't recall collaborating with your district.

Please explain below by providing an example.

- 3. Was your collaboration and/or any interaction with our district positive?
 - a. Definitely
 - b. Somewhat
 - c. Not at all
 - d. I don't recall collaborating with your district.

Please explain below by providing an example.

- 4. Do you believe collaboration with our district is important for the clients (families) you serve?
 - a. Definitely
 - b. Somewhat

c. Not at all

Please explain below by providing an example.

5. Do have any suggestions for our staff that would enhance your experience working with our district?

(Open for responses)