Meeting of the Cross-State Collaborative to Support Schools in the Opioid Crisis (CCSSOC)

December 11, 2019

The REL Team

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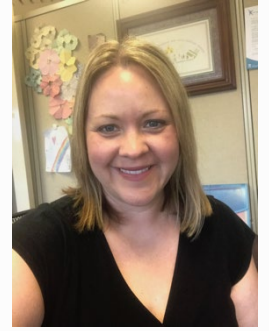Clay County Public Schools

Patti Clark
Cabinet for Health
and Family Services

Ronda Devine
KY DOE

Melissa Goins
Cabinet for Health
and Family Services

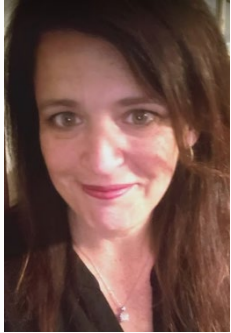**Angie McDonald**
KY DOE

Kathy Reutman
Boone County Schools

Tena Robbins
KY Dept for Behavioral Health,
Developmental and Intellectual Disabilities

Tennessee

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TDOE

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Marshall University

Conrae Lucas-Adkins
Marshall University

Paige Mathias
Potomac Highlands Guild

Allegra Kazemzadeh
WV DOE

Elizabeth Shahan
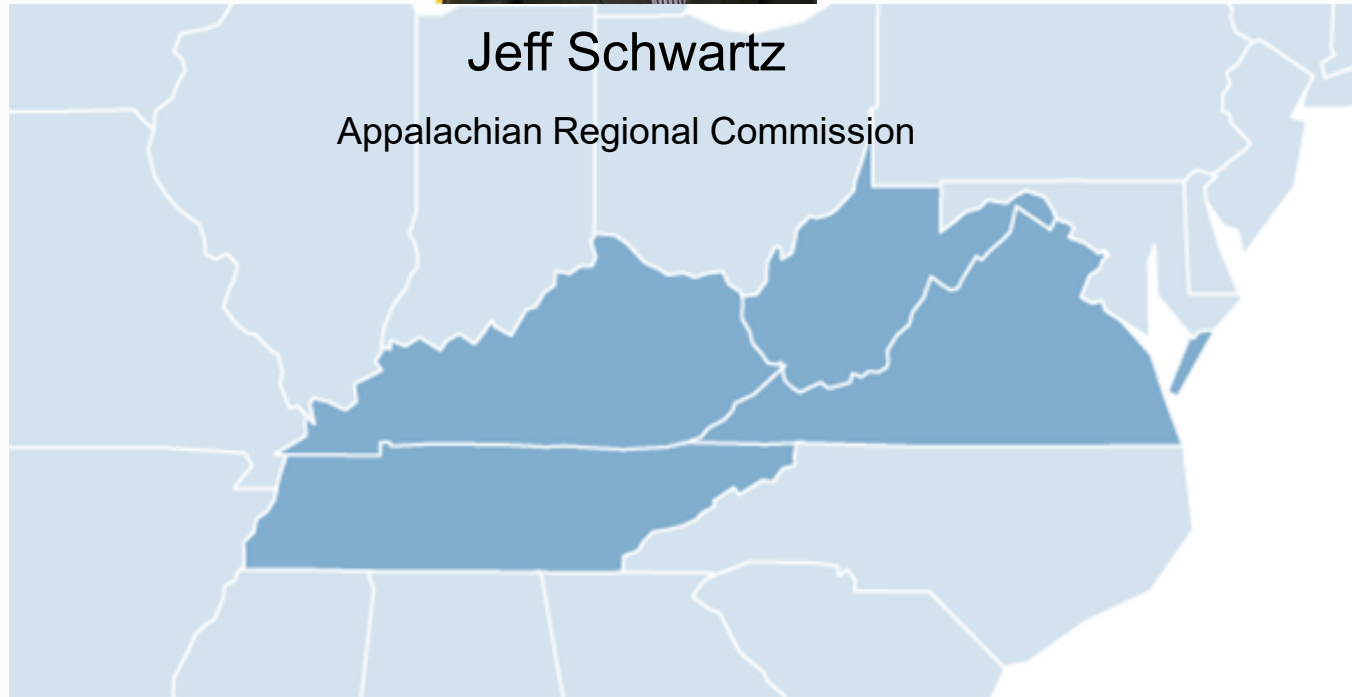Harrison County Family
Resource Network

Diana Whitlock
WV DOE

Cross-State

Jeff Schwartz
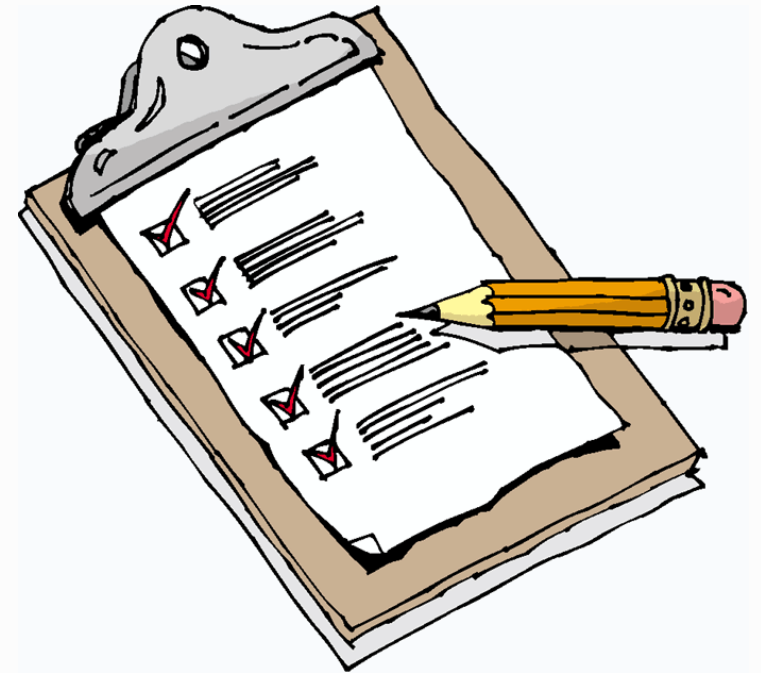
Appalachian Regional Commission

Today's agenda

- Overview of trauma-informed programs in MTSS framework
- Overview of program selection resources
- Handle With Care (HWC) presentation
- Next steps and wrap-up

As always, your input is key…
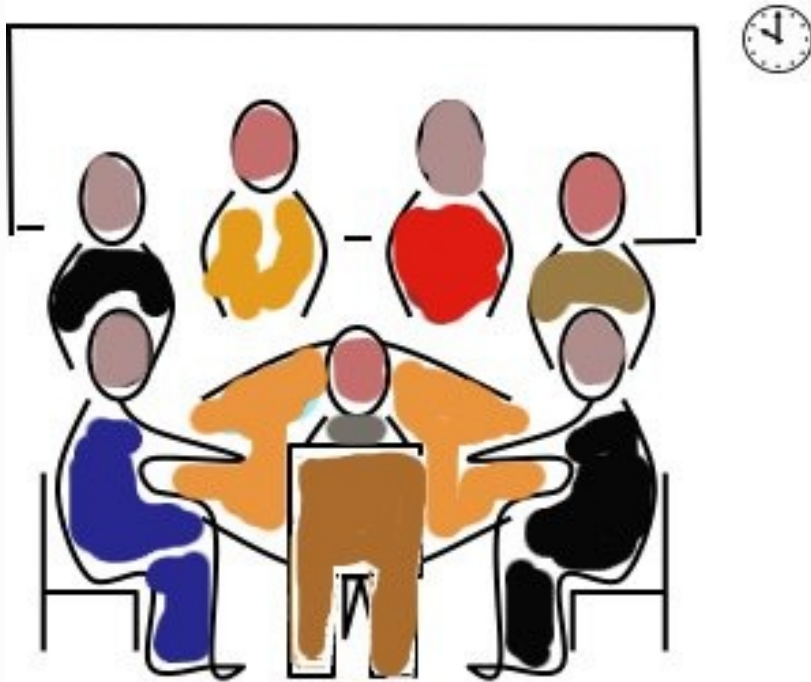
Overview of Trauma-Informed Programs

SCHOOL-BASED MENTAL HEALTH & BEHAVIORAL SUPPORTS IN A MULTI-TIERED SYSTEM OF SUPPORTS (MTSS) FRAMEWORK

Literature scan & organization

- Reviewed academic articles and other resources.

- Talked to partners, experts, and members for input.

- Organized all the information in an MTSS framework.

- Drafted practical resources—feedback welcome!
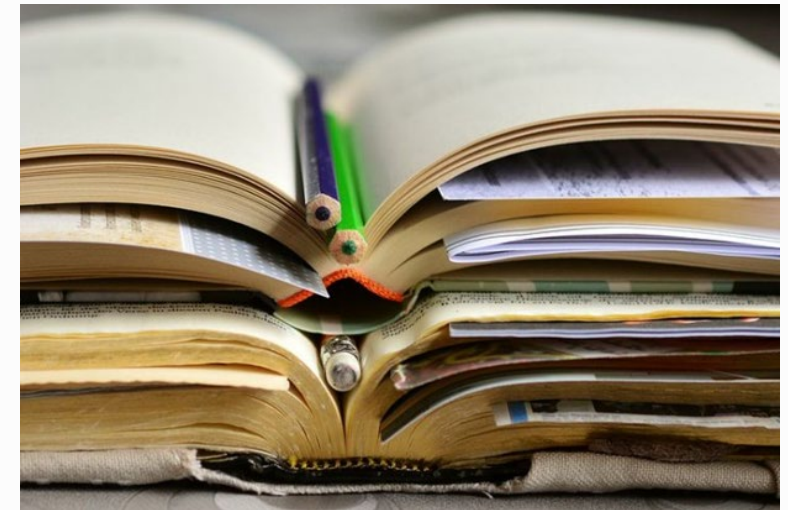
Quick review of Multi-Tiered System of Supports (MTSS)

Tier 3 (1-5%): Individualized support for the few students with intensive and persistent challenges

Tier 2 (5-10%): Targeted support for some students who are at risk

Tier 1 (80-90%): Universal support for all students

1-5%

5-10%

80-90%

Image source: studentbehaviorblog.org

Tier 1

Tier 3 (1-5%): Individualized support for the few students with intensive and persistent challenges

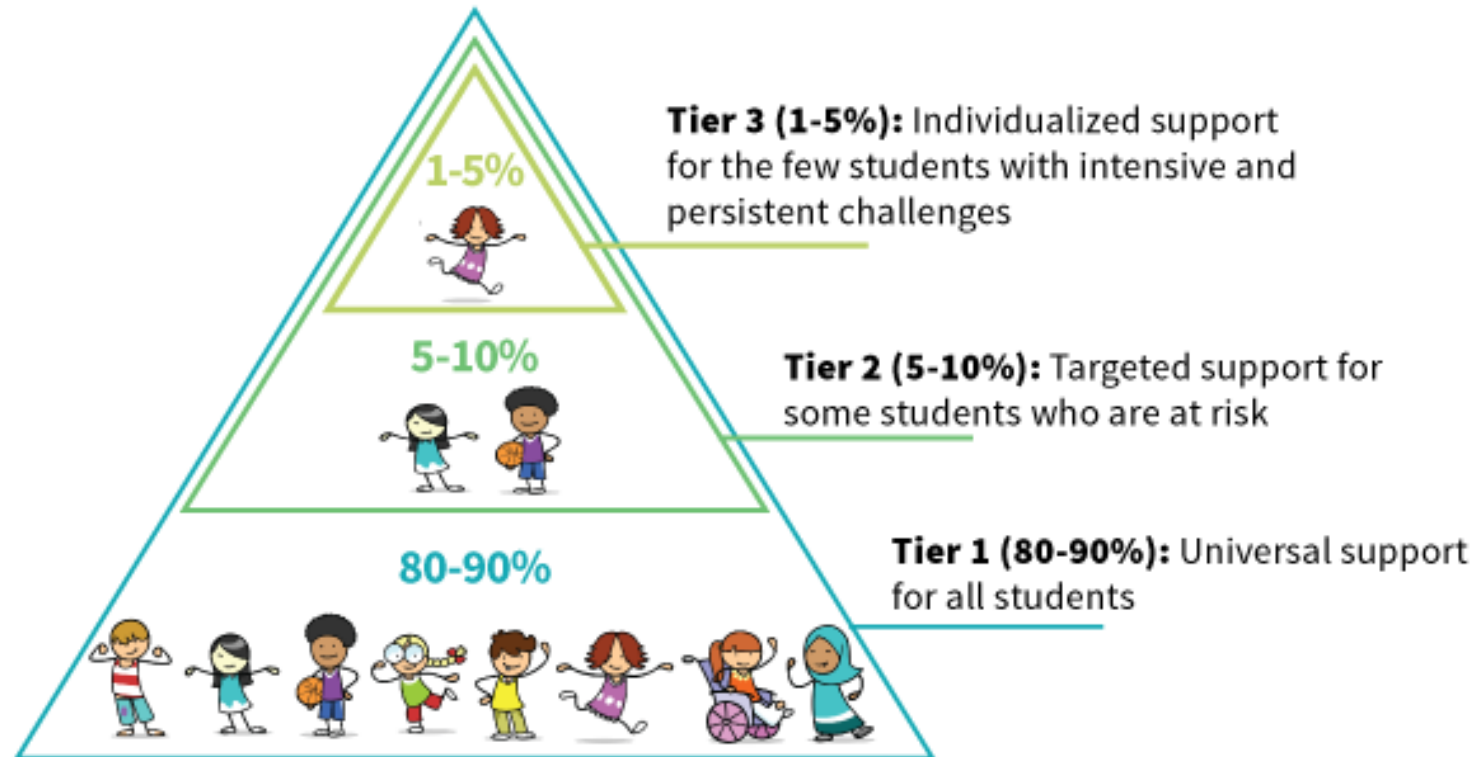Tier 2 (5-10%): Targeted support for some students who are at risk

Tier 1 (80-90%): Universal support for all students
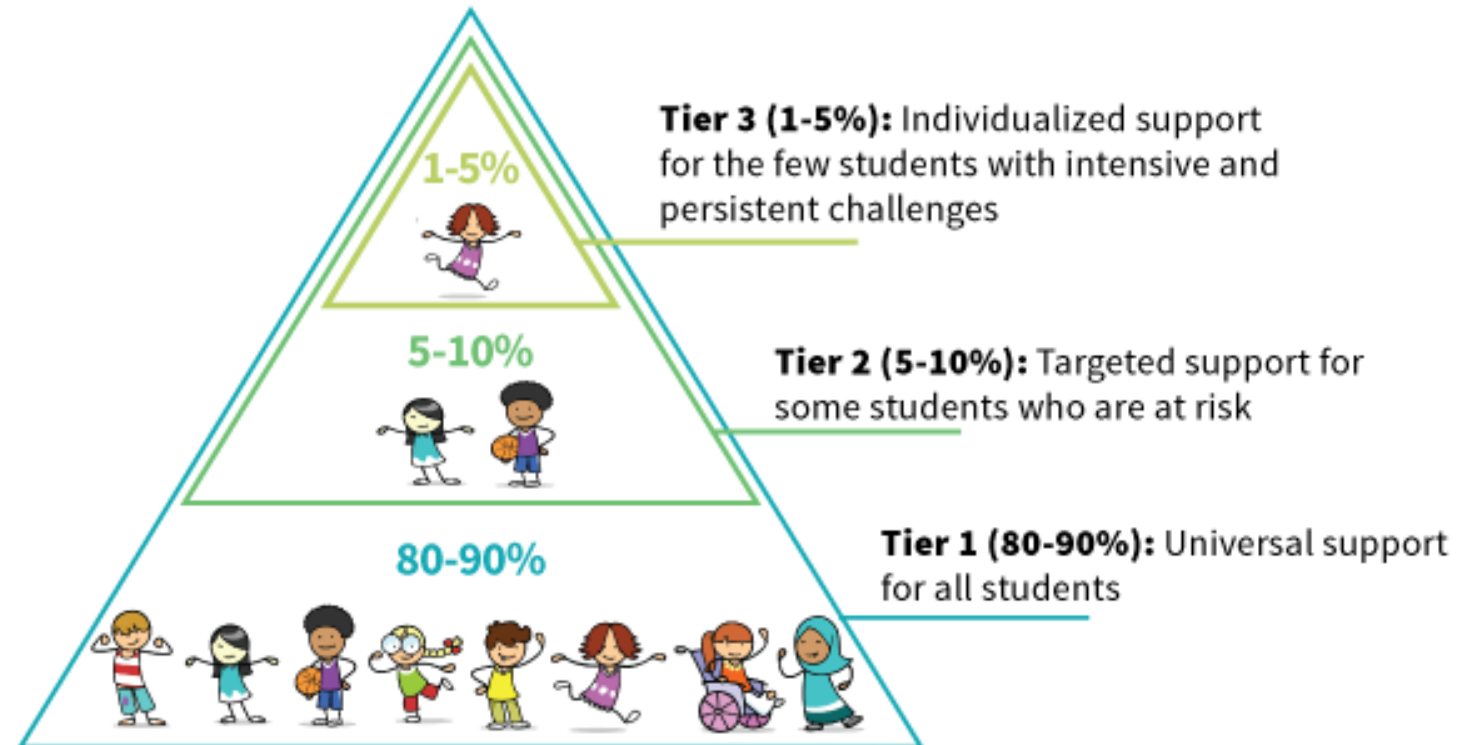
Image source: studentbehaviorblog.org

Tier 1
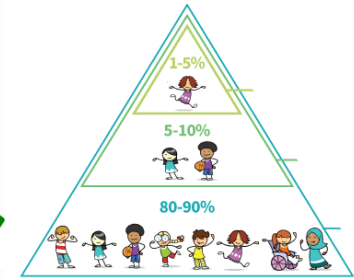
- ## Strategies:
  - Social-emotional and coping strategies (emotion regulation tools, relaxation, social problem solving).

  - Environment/structure (quiet corners, Monarch Room).

  - Relationship-building (encouraging statements, asking students about strengths and needs, listening, showing empathy).

- ## Programs:
  - Provide education about trauma (to staff and students).

  - Teach coping and resiliency skills for students (and sometimes staff).

Tiers 2 and 3

✓

✓

Tier 3 (1-5%): Individualized support for the few students with intensive and persistent challenges

Tier 2 (5-10%): Targeted support for some students who are at risk

Tier 1 (80-90%): Universal support for all students

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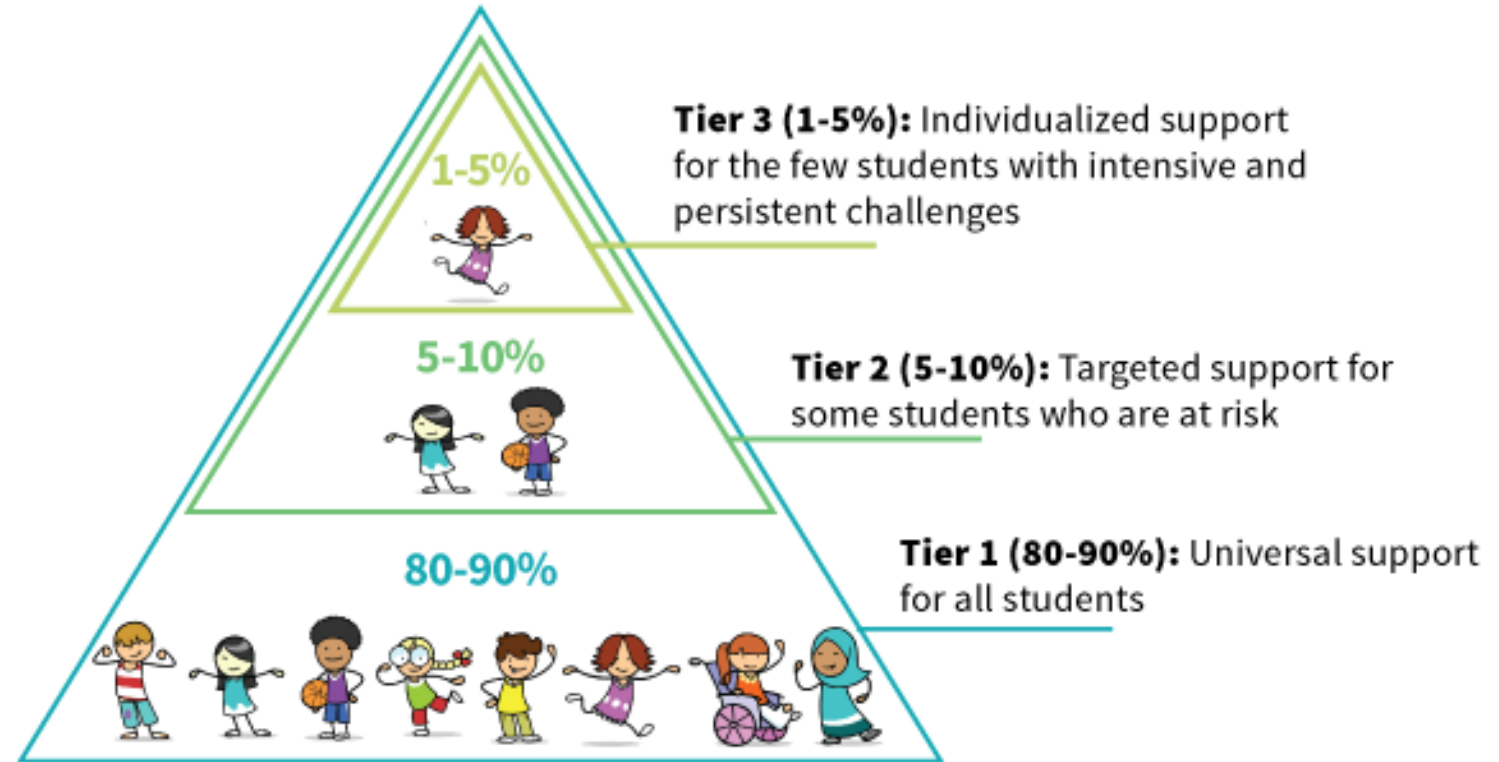
Image source:
studentbehaviorblog.org

Tier 2 and 3 trauma-based programs
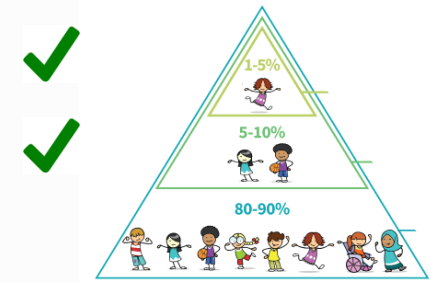
- Provide education about trauma and mental health symptoms to students (and staff).

- Teach coping and resiliency skills for students.

- Most delivered by school mental health professionals.

- External trainer typically required.

Multi-tiered programs

Tier 3 (1-5%): Individualized support for the few students with intensive and persistent challenges

Tier 2 (5-10%): Targeted support for some students who are at risk

Tier 1 (80-90%): Universal support for all students

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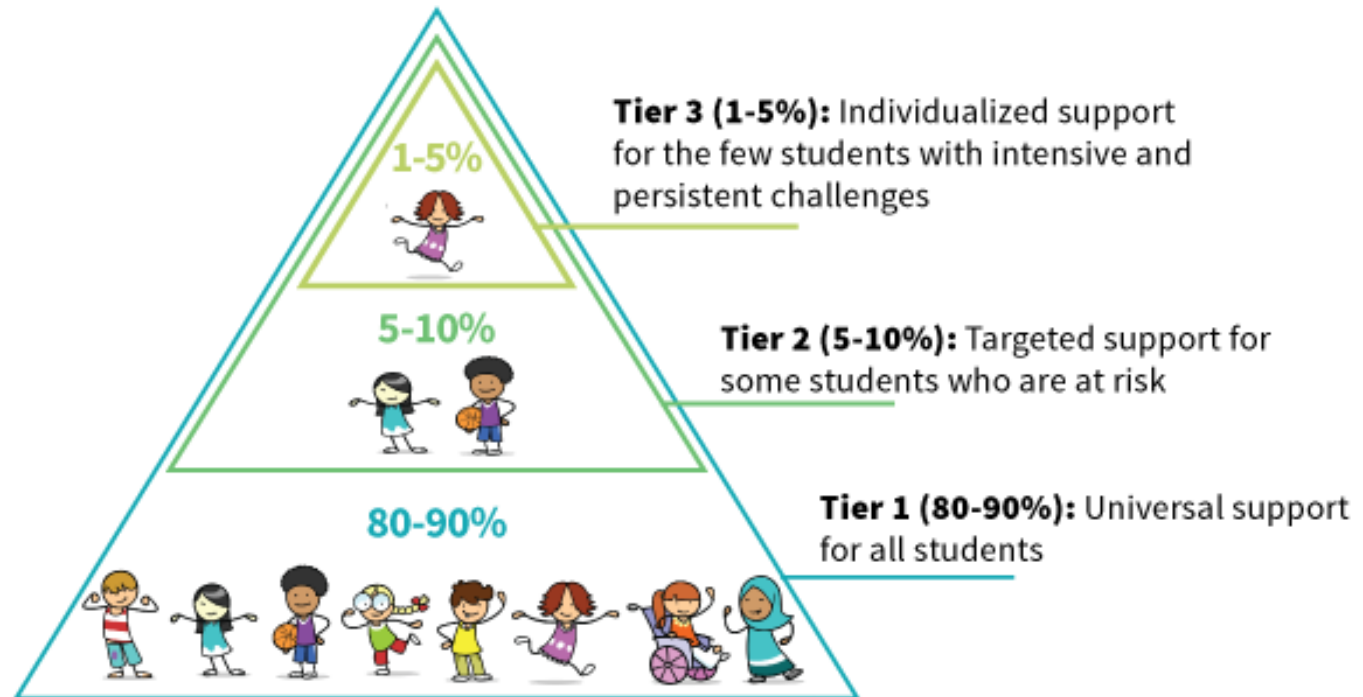
Q & A

Program Selection Resources

TRAUMA-INFORMED PROGRAMS IN SCHOOLS

Selecting a trauma-informed program

Selecting the right interventions   Menu of trauma-informed programs

Selecting the right interventions for students' mental health needs

Assessing needs

| What are the challenges facing students? | → | What are stressors related to these challenges? | → | How are these challenges manifested? |

Data   **Data**   **Data**
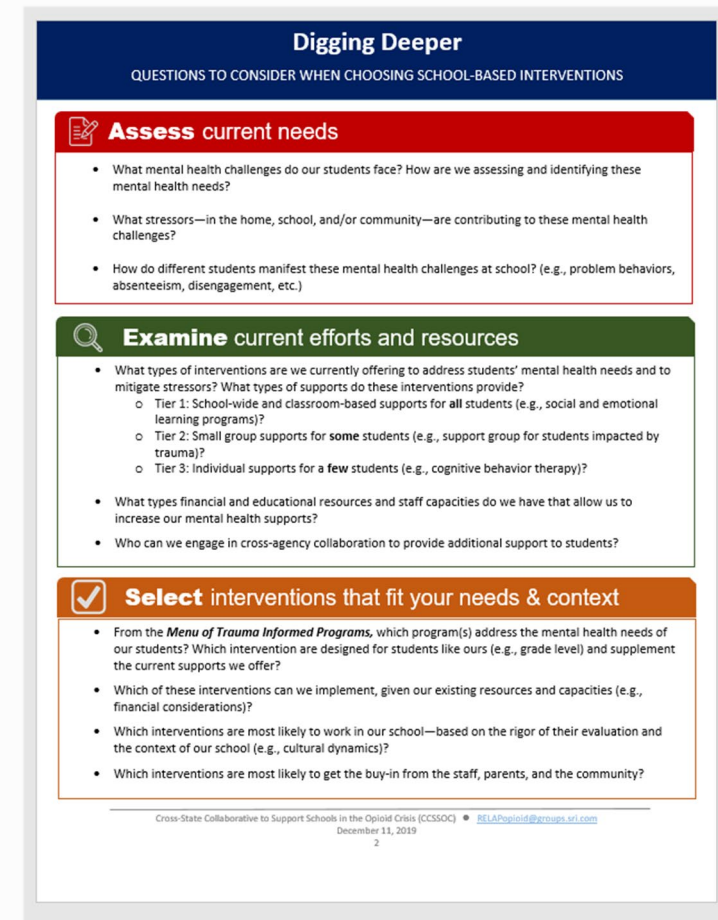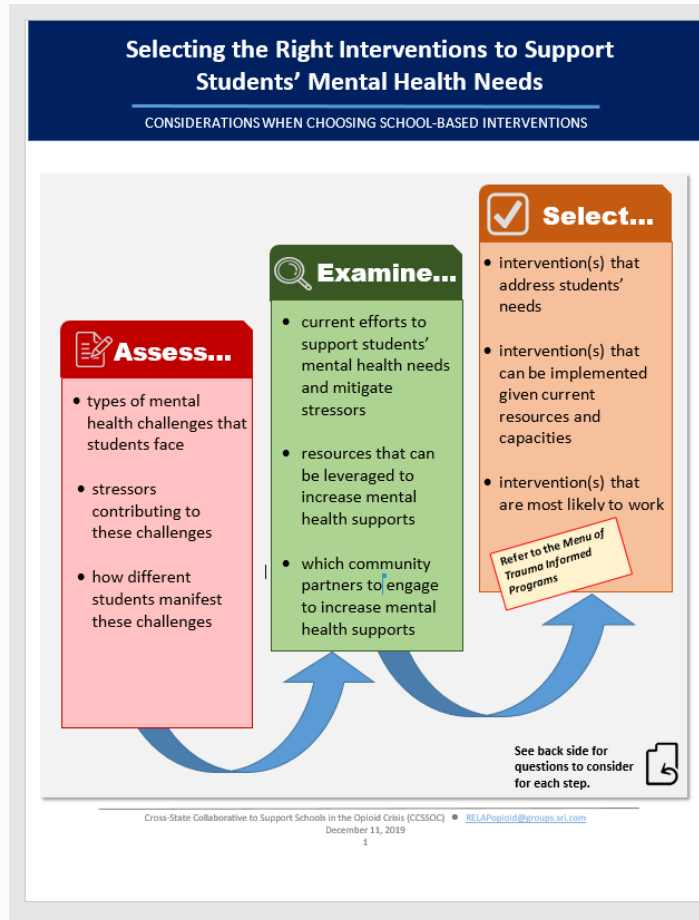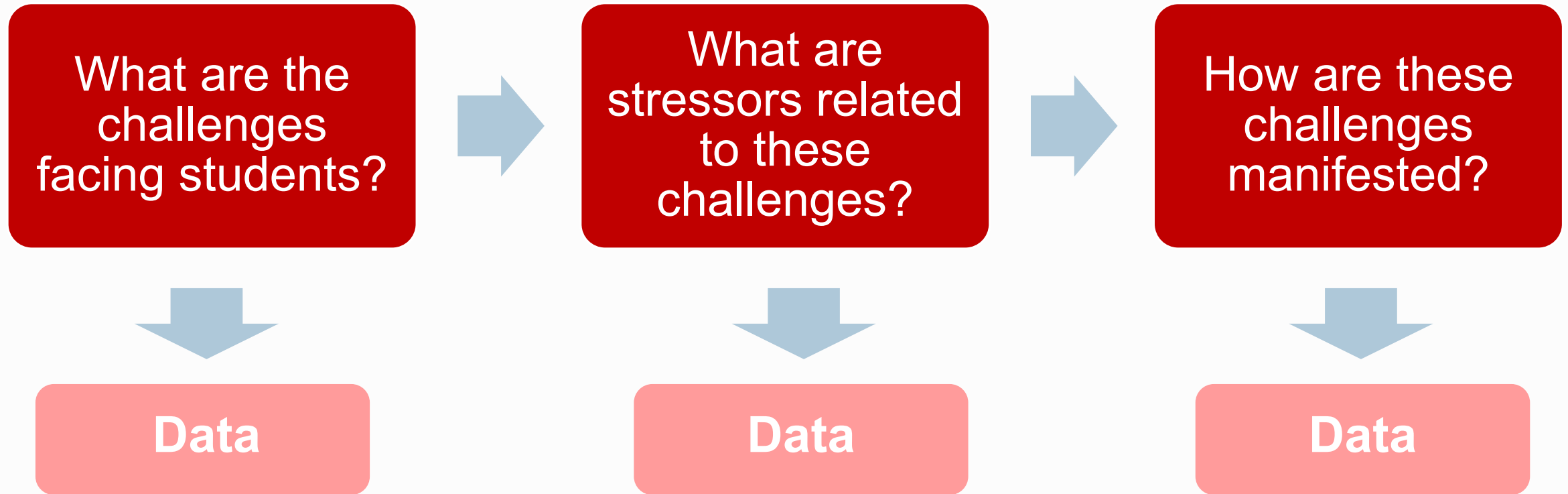
Examining efforts and resources

Current interventions in your schools

Resources partners can make available

Resources available in your schools
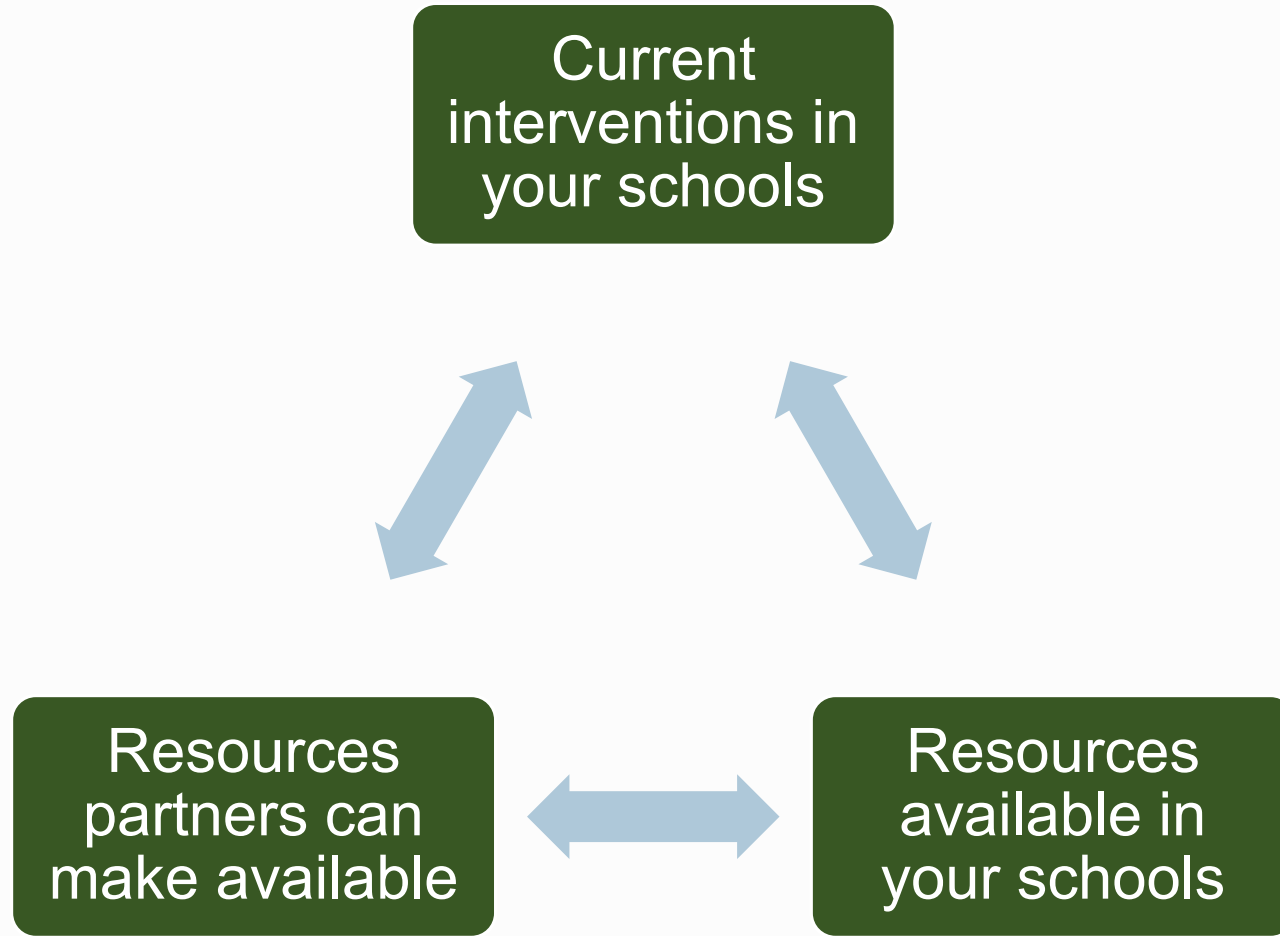
Selecting interventions

Menu of Trauma-Informed Programs for Schools

Many educators are seeking guidance to support students who have experienced trauma, particularly related to the opioid crisis. This tool provides a list of interventions that have been developed to address this specific need and that REL AP researchers identified through a search of the academic literature and other resources, such as policy papers and websites.

This tool is divided into two tables. The first table (blue header) provides descriptions of each program, including the intended audience (grades, students vs. teachers, specific sub-groups), program setting, and other important considerations (pages 2-4).

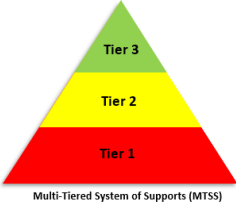The second table (purple header) provides helpful implementation information for those looking to select and implement one or more interventions from this list. This table includes the intensity of the resources typically needed for implementation, implementation considerations (e.g., who implements, required professional development, materials), and information on the interventions' evaluation, if applicable (pages 5-7).

Both tables organize all interventions using the Multi-Tiered System of Supports (MTSS) framework. Specifically, interventions are listed under one of these three categories:

- **Multi-Tiered:** Supports that include all 3 tiers
- **Tier 1:** Universal support for *all* students
- **Tier 2** and **Tier 3:** Targeted support for *some* students (Tier 2) *and* intensive support for a *few* students (Tier 3)

Tier 3
Tier 2
Tier 1
Multi-Tiered System of Supports (MTSS)

Researched and developed by:
Regional Educational Laboratory - Appalachia
December 11, 2019.

1

Which intervention(s) will meet students' needs?

Which intervention(s) can we implement given existing resources?

Which intervention(s) are most likely to be effective?

Which intervention(s) are most likely to get the buy-in from stakeholders?

Menu of trauma-informed programs

Menu of trauma-informed programs: Program descriptions

Tier 1: *Universal support for all students*							
Program Name (and developers)	**Program Description**	**Grade**	**Participants**			**Program Setting**	**Considerations**
			All Students	**Educators**	**Specific Sub-Groups**		
Heart of Learning and Teaching (HLT) (Office of Superintendent of Public Instruction in Washington and Western Washington University)	A curriculum for teachers that includes modules on trauma, building compassionate schools, self-care, collaborative problem solving, and role plays, games, and case vignettes.	K-12	✓		Program designed for all students. Evaluation study conducted with female students involved in the foster care and juvenile justice systems.	Classroom	

Menu of t... Program...

Program Description

A curriculum for teachers that includes modules on trauma, building compassionate schools, self-care, collaborative problem solving, and role plays, games, and case vignettes.

Program Name (and developers)			Program Setting	Considerations
Heart of Learning and Teaching (HLT) (Office of Superintendent of Public Instruction in Washington and Western Washington University)	A cu... inclu... build... self-... solvi... case...		Classroom	

REL APPALACHIA
Regional Educational Laboratory
At SRI International

Menu of trauma-i....ms: Program descript....

Program Setting

Classroom

	Tier 1 ...dents				
Program Name (and developers)	**Program Descriptio...**		**Specific ...Sub-Groups**	**Program Setting**	**Considerations**
Heart of Learning and Teaching (HLT) (Office of Superintendent of Public Instruction in Washington and Western Washington University)	A curriculum for teachers t... includes modules on traum... building compassionate sch... self-care, collaborative pro... solving, and role plays, gam... case vignettes.		...ram designed for ...udents. ...uation study ...ucted with ...ale students ...ved in the foster ...and juvenile ...ce systems.	Classroom	

Q & A

Menu of trauma-informed programs: Implementation information

Tier 1: Universal support for all students					
Program Name	**Resource Intensity**	**Implementation Considerations**		**Evaluation Information**	
		Who Implements	**Professional Development**	**Materials**	**Evidence**[2]	**Findings**[5]
Heart of Learning and Teaching (HLT)	Low	School staff	Workshop optional for teachers.	Free downloadable manual; screening materials	Demonstrates a Rationale (ESSA)	Potential for… **Students:** Decreased PTSD symptoms[7].

Menu of trau... ...s: Implementat...

Who Implements

School staff

Program Name	Resource Intensity				Evaluation Information	
		V... Impl...			Evidence[2]	Findings[5]
Heart of Learning and Teaching (HLT)	Low	Scho...			Demonstrates a Rationale (ESSA)	Potential for... **Students:** Decreased PTSD symptoms[7].

Menu of Trauma-Informed Programs: Implementation Information

Professional Development	Materials
Workshop optional for teachers	Free downloadable manual; screening materials

Menu of trauma-informed programs: Implementation information

Tier 2: Targeted supported for some students **and Tier 3:** Intensive support for a few students						
Program Name	**Resource Intensity**	**Implementation Considerations**			**Evaluation Information**	
		Who Implements	**Professional Development**	**Materials and Supports**	**Evidence[2]**	**Findings[5]**
Bounce Back	High	Mental health professionals	One-day in person training or free online training/materials, potential ongoing implementation support by developer.	Free sample materials and forms, robust online community of practice	**Promising (OJJDP)**	Some evidence for… **Students:** Improved PTSD/trauma and anxiety symptoms, social adjustment, behaviors, emotional expression, and coping skills; decreased depression symptoms.

Menu of trauma~~~~~~~~~~~ms: Implementati~~~~~~

Evidence

Promising (OJJDP)

Tier 2: Targeted supp~~~			...sive support for a few students		
Program Name	**Resource Intensity**	**W...**	**...s and ...rts**	**Evaluation Information**	
				Evidence[2]	**Findings[5]**
Bounce Back	High	Mental...	...d ...t online ...f	Promising (OJJDP)	Some evidence for… **Students:** Improved PTSD/trauma and anxiety symptoms, social adjustment, behaviors, emotional expression, and coping skills; decreased depression symptoms.

Glossary of evidence levels

OJJDP	
For more information, visit: https://www.ojjdp.gov/MPG/Home/About/	
No Effects	Programs have strong evidence indicating that they did not achieve their intended outcomes when implemented with fidelity.
Promising	Programs have some evidence indicating they achieve their intended outcomes. Additional research is recommended
Effective	Programs have strong evidence indicating they achieve their intended outcomes when implemented with fidelity.

Menu of t...
Impleme...

Findings

Some evidence for…

Students: Improved PTSD/trauma and anxiety symptoms, social adjustment, behaviors, emotional expression, and coping skills; decreased depression symptoms.

Tier 2: *Target...*		...students
Program Name	**Resou... Intens...**	...formation **Findings**[5]
Bounce Back		e evidence for… ents: Improved /trauma and anxiety toms, social tment, behaviors, ional expression, and g skills; decreased ession symptoms.
	Hig...	

Q & A

Let's use the resources

Two schools affected by the opioid crisis

Vignette 1:

You are the superintendent of a district in a suburban community and your teachers are increasingly reporting concerns about middle school students' misbehavior and decreases in attendance and achievement.

The teachers believe that the problem behaviors affect not only students directly impacted by familial substance use, but all the other students in the classroom who are exposed to community effects of the opioid crisis.

The teachers and administrators report feeling ill-equipped to help the students, and the students don't know how to help themselves or their peers.

You are willing to spend/leverage considerable resources to solve this issue in your district.

Two schools affected by the opioid crisis

Vignette 2:

You are the principal of a high school in a rural community. You've noticed that some students are struggling with attendance and have increasing numbers of behavioral incidents relative to prior years. Based on your knowledge of many families in your community, you suspect that your observations are related to parental opioid use and related traumas that the students have experienced.

You would like to help your students, but you do not have a large budget or a regular in-house mental health professional who can provide therapy for this select group of students who you can identify and need additional supports.

Instructions

- We will split into two groups.
  - Vignette 1: **TN & WV**
  - Vignette 2: **KY, VA, cross-state**
- Each group will answer questions about assigned vignette.
- Click on your designated Google Doc link, which appears in the chat box.
- Also open the Menu of Programs.
- Spend **~5 minutes** responding to questions about the vignette.

Q & A

ReClaimWV and the Handle With Care Program

Creating Trauma-sensitive schools and classrooms in West Virginia and beyond

December 11, 2019

Introductions and Overview

- ReClaimWV *(Diana Whitlock, Assistant Director, Office of Special Education, West Virginia Department of Education (WVDE))*

- Handle With Care *(Andrea Darr, Executive Director, West Virginia Center for Children's Justice)*

- Monitoring Handle With Care Data *(Allegra Kazemzadeh and Amber Stohr, WVDE)*

- A Local Perspective *(Ron Duerring, Ed.D., Superintendent, Kanawha county schools)*

- Questions?

Connecting Social-Emotional and Mental Health Supports to the Opioid/Substance Abuse Epidemic in WV Schools

- **VISION STATEMENT:** To advance the wellness and resilience of West Virginia students so they may become lifelong learners, productive citizens, and successful individuals.

- **MISSION STATEMENT:** In response to the Opioid Epidemic, the West Virginia Department of Education will support and collaborate with local education agencies, schools, communities, and families to address the social-emotional, physical, behavioral, and mental health needs of our students.

West Virginia DEPARTMENT OF EDUCATION

West Virginia Compared to the Nation

2001-2016 Resident Drug Overdose Mortality Rates
West Virginia and United States

Data Source: WV Health Statistics Center, Vital Surveillance System and CDC Wonder
Rates are age-adjusted to the 2000 US Standard Million

West Virginia Compared to the Nation

Rate of Infants Born with NAS per 1,000 Delivery Hospitalizations

Source: HCUP — State Inpatient Databases
https://mchb.tvisdata.hrsa.gov/PrioritiesAndMeasures/NationalOutcomeMeasures

As Opioids Move In, Children Move Out
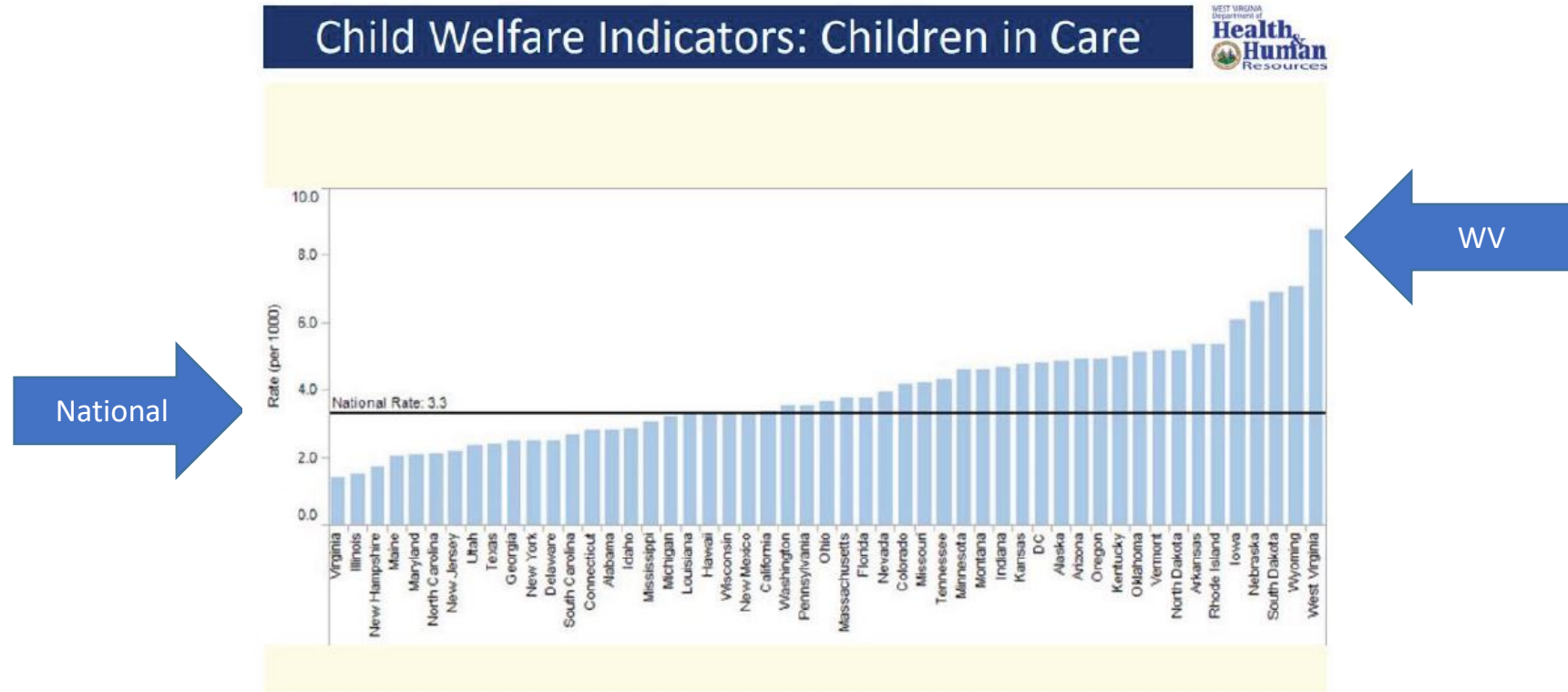
Kinship Care in West Virginia

5-Year Estimate of the Number of Grandparents with Grandchildren Residing in their Home

Legend:
- 13–250
- 251–529
- 530–847
- 848–1,564
- 1,565–3,892

*Data represents the estimated number from 2011 to 2015, of Children (18 and younger) living with their Grandparents
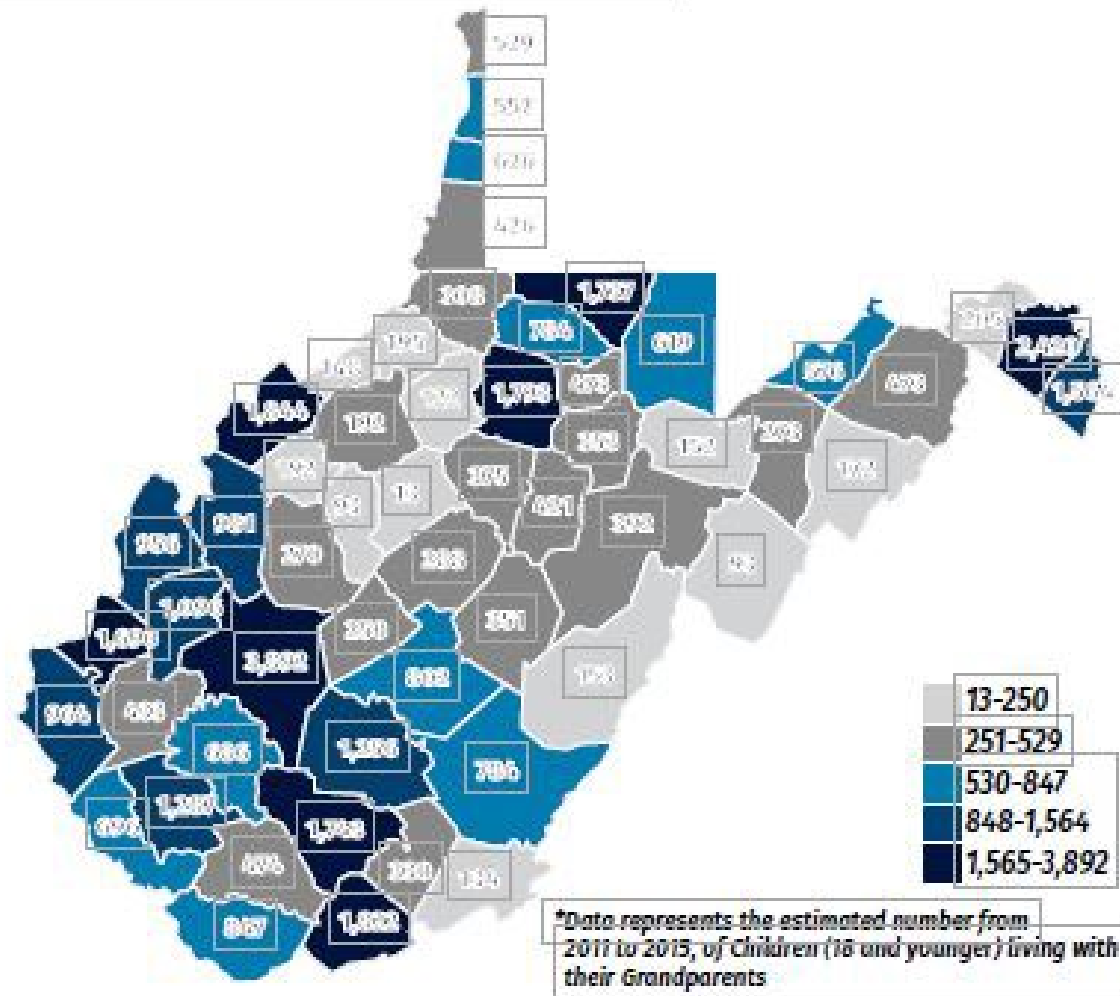
Impact on WV Schools – WVU Teacher Survey

Increased Impact on Schools
Over 70% of teachers report an increase in students impacted by substance use in the home.

Need for Specific Teacher Training
Despite the increased numbers of students impacted, over 70% of teachers reported not receiving training specific to children impacted by parent/caregiver substance use.

https://cehs.wvu.edu/crisis-in-the-classroom

West Virginia DEPARTMENT OF EDUCATION

Identified Needs in WV

West Virginia's students are suffering from the fallout of the Opioid Epidemic

- Attendance

- Ability to learn

- Behavior

- Basic needs

- Mental, social/emotional, and behavioral health needs

West Virginia DEPARTMENT OF EDUCATION

FIVE GOALS

- Support the needs of the whole child by coordinating services and resources offered by the WVDE and its partners.

- Provide LEAs with training and technical assistance on evidence-based practices to support the whole child, particularly in social-emotional and behavioral health, including substance abuse prevention and intervention.

- Create and support peer resiliency networks that help students combat significant adversity through responsible behavior and lifelong, positive health practices. Provide students with tools to identify peers in crisis, understand crisis protocols, and address hurtful behaviors such as bullying.

- Provide education, professional learning, and information to students, classroom teachers, and school personnel regarding WVBE policies that address opioid and substance abuse (alcohol, tobacco, and other drugs), particularly where these policies align with the goals of educational program development and content standards.

- Address the violent and erratic student behaviors among our students that are increasing in frequency, duration, and intensity, especially among younger children. These behaviors are a response to the Opioid Epidemic, and frequently result in mental health issues.

ReClaimWV — Action Steps

- Create programmatic guides for educators of grades PreK-12th

- Provide community resources and contacts

- Deliver training to identify students in crisis, determine their needs, and locate age-appropriate services

- Provide prevention and intervention strategies

- Develop the ReClaimWV website for information, strategies, resources, and immediate help in crisis

- Supporting youth-to-youth peer networking

- Provide training and technical assistance to develop lifelong, positive health practices

- Create e-learning courses for educators and webinar

- Expand training/technical support through WV Behavior/Mental Health Technical Assistance Center

Established Prevention Requirements for WV Schools

- H.B. 2195 / WV Code § 18-2-7b – Substance abuse and violence prevention education

- H.B. 2535 / WV Code § 18-2-40 – Suicide prevention awareness

- H.B. 4402 / WV Code § 18-2-40 – Sexual violence prevention

- WV Policy 2520.19 - WV College and Career-Readiness Dispositions and Standards for Student Success

- WV Policy 2520.5 - WV College and Career-Readiness Standards for Wellness Education

Social Emotional Learning: Building Protective Factors
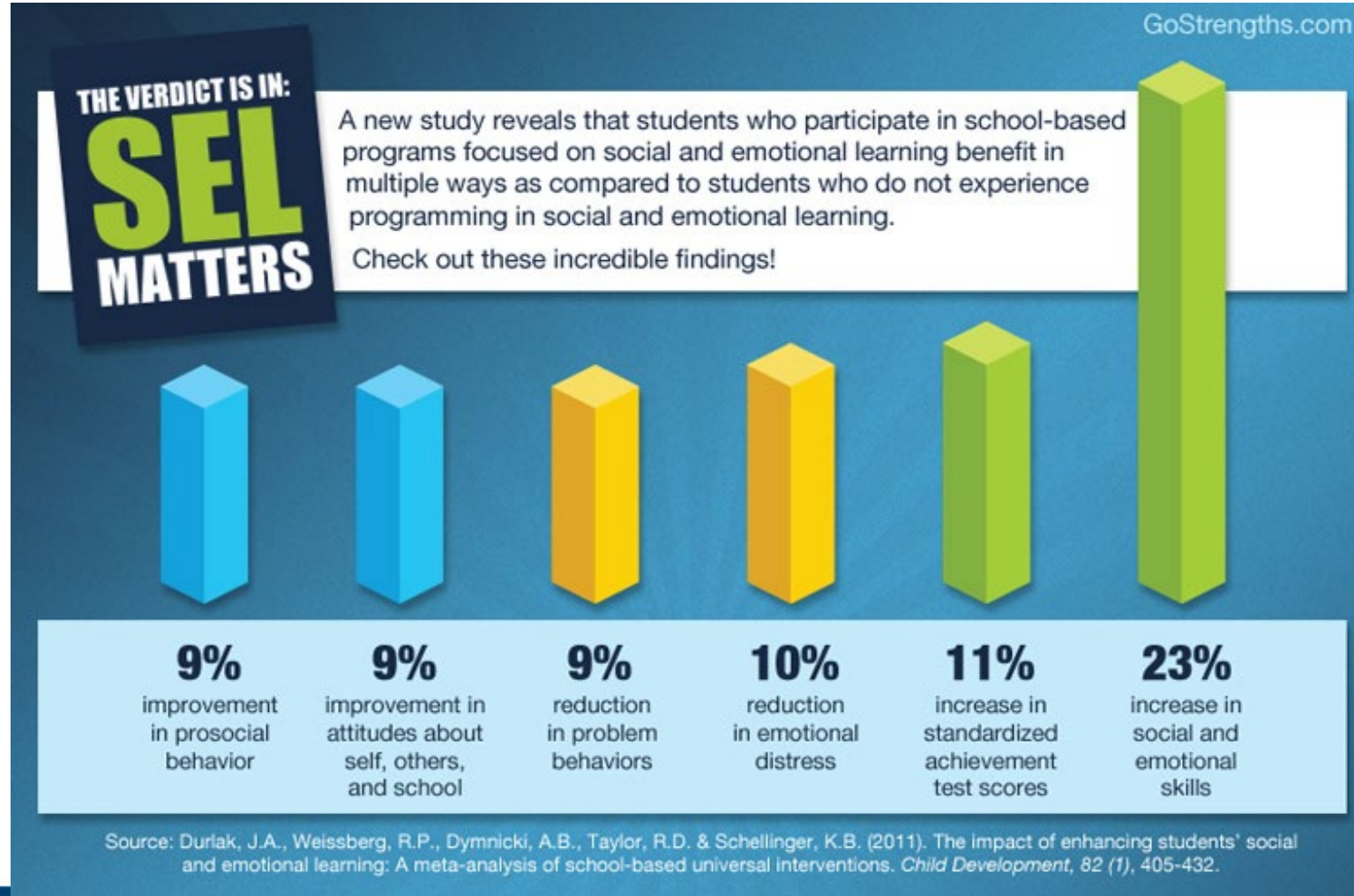
ReClaimWV –Toolkit, Resource Tables, and Website

https://wvde.us/reclaimwv/

Addressing Behaviors and Mental Health Issues

- Working toward expanding services for children born with NAS and those identified as at-risk through involvement with the Governor's Council for Substance Abuse Prevention and Treatment

- Whole-Child Multi-Tiered Systems of Support

- PBIS / ECPBIS

  (Positive Behavior Intervention Support and Early Childhood PBIS)

- Communities in Schools

- Kanawha Co. Schools Pilot
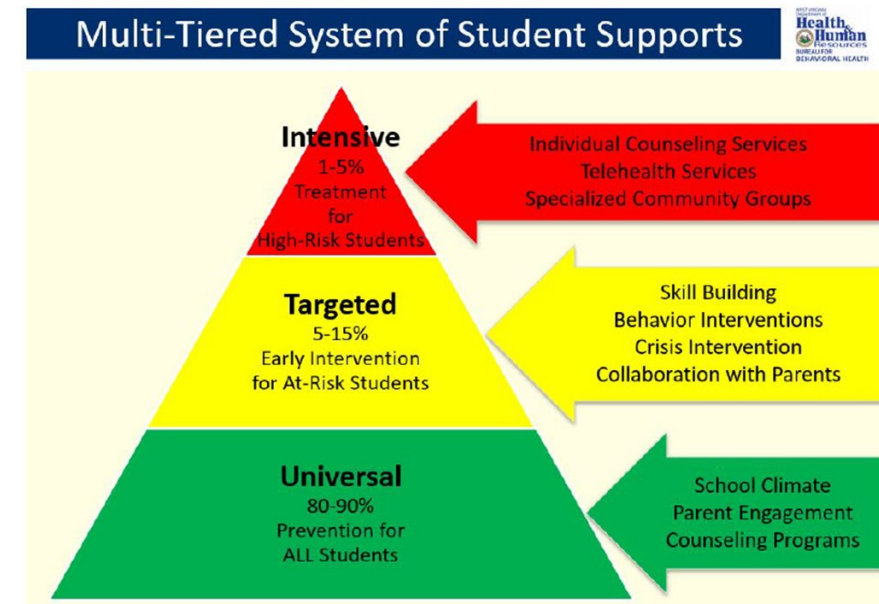
Ongoing Educator Training Opportunities

- MHTTC
  - Drug Prevention Strategies – November 2019
  - Screening Brief Intervention and Referral to Treatment (SBIRT) – January 2020
  - Compassion Fatigue for School Personnel – February 2020

- Violence Loss Trauma (VoLT) Graduate Certificate
  - January 2020

- ReClaimWV Conference
  - June 2020

- Modules and other courses in development

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Ongoing Peer Resiliency and Youth Leadership

- WVSSAC and MVB Bank Opioid Awareness Summits (WVU, MU, WVDE)

- Teen Mental Health First Aid training

- WV SADD

- Working with WV YMCA to develop Teen Centers

- Sponsoring students to attend Community Anti-Drug Coalitions of America – Washington, DC (2020)

- Sponsoring students to attend the National Students Against Destructive Decisions Conference – St. Louis, MO (2020)

West Virginia DEPARTMENT OF EDUCATION

Supporting Mental Health for Every Student

WV is using evidence-based models to support all students (MTSS for the whole child)

- Positive Behavioral Supports and Interventions (PBIS)

- Expanded School Mental Health (ESMH)

- Building Protective factors through Social-Emotional Learning (SEL)

For more information, training and resources visit wvpbis.org and wvesmh.org.

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REL Appalachia Opioid Collaborative

Before we get started

Handlewithcarewv.org

Andrea Darr
(304) 766-5898
Andrea.L.Darr@wvsp.gov
WV Center for Children's Justice

Handle With Care

- A program aimed at ensuring that children who are exposed to violence receive appropriate interventions so they can succeed in school to the best of their ability.

- Research shows that trauma can undermine children's ability to learn, form relationships and function appropriately in the classroom.

FOCUS BEHAVE APPROPRIATELY LEARN

Trauma Turns off the Learning Switch!

- Problems with academic performance

- Inappropriate behavior in the classroom

- Difficulty in forming Relationships

ACEs tend to get passed down from generation to generation.

Our Drug Endangered Children are having Drug Endangered Children

Ground Zero for the Opioid Crisis

Law Enforcement

EMS

Public Health

CPS

Schools

Handle With Care
Kids being successful in school

Kids at risk tend to:

- Skip school
- Use drugs
- Become violent
- Commit crimes
- End up meeting Law Enforcement

HWC intervention:

- LE identifies children at the scene
- The school is notified before school starts the next day.
- We all handle the child with care and respond in a trauma sensitive way.

Handle With Care

3

1. Police encounter kids at the scene and send "heads-up" HWC notice to the school.

2. Schools prep trauma-sensitive support for these kids.

3. Mental health providers partner for on-site therapy.

HWC Timeline

2009 Office of Juvenile Justice Survey

2010 Attorney General Eric Holder launched DCI

2011   WV Children's Justice Task Force formed a
          subcommittee to look at programming

2012   Developed the HWC program

2013   Piloted the HWC program

2015   WV State Police launched HWC statewide

2018   Stakeholder meeting in every WV county

2019   HWC is in 27 states around the country

HWC PILOT

Handle With Care Notice

From Law Enforcement to the School

To: _____   From: _____
     (School)   (Law Enforcement Agency)

Date: _____ Time: _____ Incident Date: _____

The child referenced below was on the scene of a police action in the last 24 hours and could exhibit academic, emotional and/or behavioral problems as a result of exposure to a traumatic event. Please handle him/her with care. For more information go to
www.handlewithcarewv.org

Childs Name: _____   Age: _____
Childs Name: _____   Age: _____
Childs Name: _____   Age: _____

✂ -

To: _____   From: _____
     (Teacher)   (Principle/Counselor)

Handle With Care

Student _____

Incident Date _____

FRAGILE

Charleston PD   **Mary C. Snow Elementary**

HWC Notice

- No details are given, just 3 simple words
- It arrives at the school before the start of the next school day
- Need to know basis only
- Does not stay in child's permanent record
- Include child care serving agencies
- **It does not mean you approach the child**

The Solution
A Trauma Sensitive School

A respectful and safe environment where children can build positive relationships with adults and peers, learn to manage their emotions and behavioral responses, and find academic success.

Ways to Handle Children with Care

Food, sleep, and clean clothes

Safe, predictable and supportive environments

Connection to a caring adult; clear expectations and boundaries

Empowerment for self-confidence

Choice to develop decision making skills

Self-actualization
desire to become the most that one can be

Esteem
respect, self-esteem, status, recognition, strength, freedom

Love and belonging
friendship, intimacy, family, sense of connection

Safety needs
personal security, employment, resources, health, property

Physiological needs
air, water, food, shelter, sleep, clothing, reproduction

What if school interventions are not enough?

HWC In Summary

- Identifies the kids most at risk
- Provides teachers with a heads up
- Connects children with accessible mental health services if needed
- Strengthens and improves relationships in the community
- Thus improving academic, social-emotional and behavior outcomes

In closing

Success in school is success in life.
Let's help children succeed in school everyday to the best of their ability!

Monitoring Handle With Care Data in Schools

A PILOT PROJECT WITH REL AP IN KANAWHA COUNTY SCHOOLS, WEST VIRGINIA

Cross-State Partnership's goal

- To build capacity among local data users to access, understand, and use state data resources to facilitate action at the local level.

  …. helping to address "data-rich, information-poor" (DRIP) syndrome.

REL AP and WVDE project: Context

- West Virginia has the highest rate of **opioid-related overdose** deaths of any state.

- WVDE leaders adopted the **ReClaimWV** strategic plan to improve outcomes for students and families affected by the opioid crisis.

- **Handle With Care** is one program that aligns with WVDE and ReClaimWV's aim to improve outcomes for students and families.

HWC School-level Logic Model

Inputs	Activities	Outputs	Short-Term Outcomes	Mid-Term Outcomes	Long-Term Outcomes	Impact
• West Virginia Department of Education staff expertise • West Virginia Center for Children's Justice staff expertise • District staff expertise • ReClaimWV partners' expertise • District buy-in • Trainer capacity • West Virginia Education Information System (WVEIS) data • Substance Abuse and Mental Health Services Administration (SAMHSA) funding • Community law enforcement and Emergency Medical Services (EMS) • Community mental health organizations	• Community stakeholders meet to introduce HWC • Law enforcement officers & EMS watch "roll call" video in child referral protocols • School holds physical space for mental health professionals • HWC school leaders, teachers and school staff complete 1-hour training • Teachers and school staff participate in HWC book study or strategic planning (Based on Massachusetts Advocates for Children report *Helping Traumatized Children Learn*) • School staff develop referral protocols (customized per school) • School and partners sign Memoranda of Understanding (MOUs)	• Law enforcement & EMS officers trained to refer trauma victim information to school • Law enforcement & EMS have presence in school • HWC school leads trained in receiving and handling referral information • Teachers and school staff trained to observe children using a trauma-sensitive lens • Referral protocols developed • MOUs in place • Referrals to school counselor begin • School staff trained to implement HWC process	• Law enforcement and EMS officers increase use of HWC protocol when child is present at incident • School data lead receives increase in HWC notifications when incidents occur • Officers visit school regularly • Teachers increase awareness of effects of traumatic events on children's learning • Teachers observe students using trauma-sensitive lens • Teachers increase use of trauma-sensitive strategies as needed • Teachers increase use of school protocol to refer student to counselor as needed	• Increased school-law enforcement communication regarding children's exposure to trauma • Increased teacher use of trauma-sensitive interventions in the classroom • Increased teacher referrals to counseling services • Increased counselor referrals to mental health services • Increased use of strategies to become trauma-sensitive school by school staff	• Increased number of students receiving counseling services and mental health services for trauma exposure • Fewer student misconduct incidents • Improved student attendance	Improved academic outcomes

HWC Logic M...

Inputs	Activities	Outputs	Short-Term Outcomes	Mid-Term Outcomes	Long-Term Outcomes	Impact

Mid-Term Outcomes

- Increased school-law enforcement communication regarding children's exposure to trauma
- **Increased teacher use of trauma-sensitive interventions in the classroom**
- **Increased teacher referrals to counseling services**
- **Increased counselor referrals to mental health services**
- **Increased use of strategies to become trauma-sensitive school by school staff**

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HWC Logic M

Long-Term Outcomes

Inputs	Activities	Outputs	Short-Term Outcomes	Mid-Term Outcomes	Long-Term Outcomes	Impact

- West Virginia Department of Education staff expertise
- West Virginia Center for Children's Justice staff expertise
- District staff expertise
- ReClaimWV partners' expertise
- District buy-in
- Trainer capacity
- West Virginia Education Information System (WVEIS) data
- Substance Abuse and Mental Health Services Administration (SAMHSA) funding
- Community law enforcement and Emergency Medical Services (EMS)
- Community mental health organizations

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- Increased number of students receiving counseling services and mental th services for ma exposure
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- Increased number of students receiving counseling services and mental health services for trauma exposure
- Fewer student misconduct incidents
- Improved student attendance

Improved academic outcomes

Project 5.2.13

Monitoring Handle With Care Data Pilot Project

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HWC Logic M...

Impact

Inputs	Activities	Outputs	Short-Term Outcomes	Mid-Term Outcomes	Long-Term Outcomes	Impact

- West Virginia Department of Education staff expertise
- West Virginia Center for Children's Justice staff expertise
- District staff expertise
- ReClaimWV partners' expertise
- District buy-in
- Trainer capacity
- West Virginia Education Information System (WVEIS) data
- Substance Abuse and Mental Health Services Administration (SAMHSA) funding
- Community law enforcement and Emergency Medical Services (EMS)
- Community mental health organizations

- Increased number of students receiving counseling services and mental health services for trauma exposure
- Fewer student conduct incidents
- Improved student attendance

Improved academic outcomes

• Improved academic outcomes

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Monitoring HWC implementation and student outcomes

OVERVIEW OF DATA REVIEW MEETING PROTOCOL AND WORKBOOKS

HWC program-improvement process support: Guide and workbooks

- **HWC Guide**
  - Recommends processes for conducting program improvement
  - Instructions, templates, examples
- **HWC Counselor Workbook (or Document)**
  - Tracks interactions with students identified for HWC support
  - Summarizes data to share with the school data lead
- **HWC Data Lead Workbook**
  - Tracks implementation and student outcomes
  - Customizes graphs and charts to visualize data

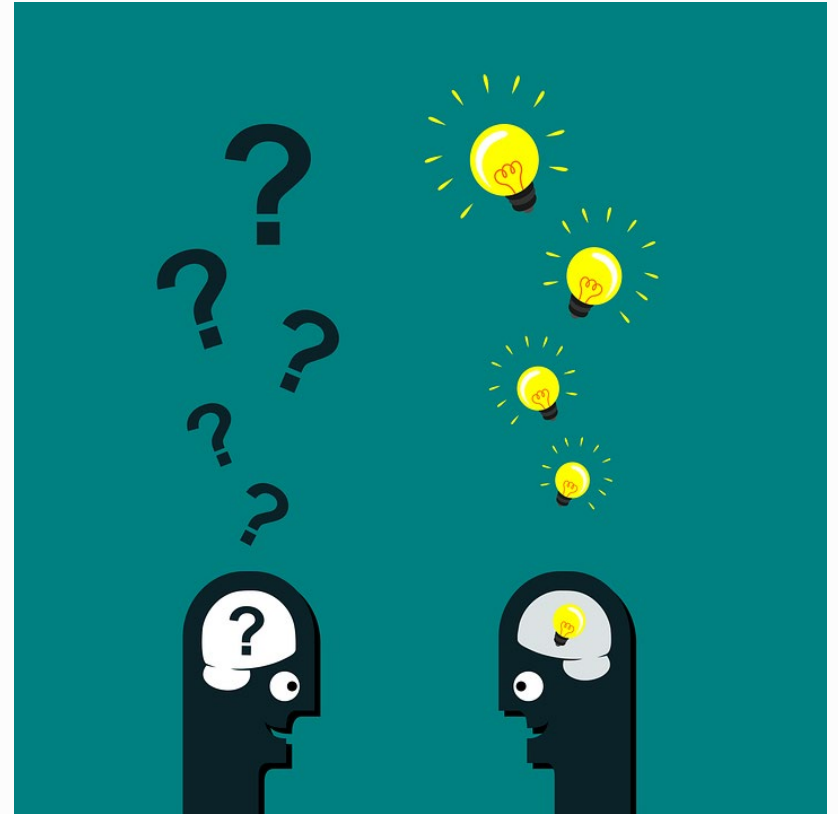# HWC program-improvement process

Implement HWC

Collect and enter data

Hold data review meeting

Prioritize improvements

Plan for action
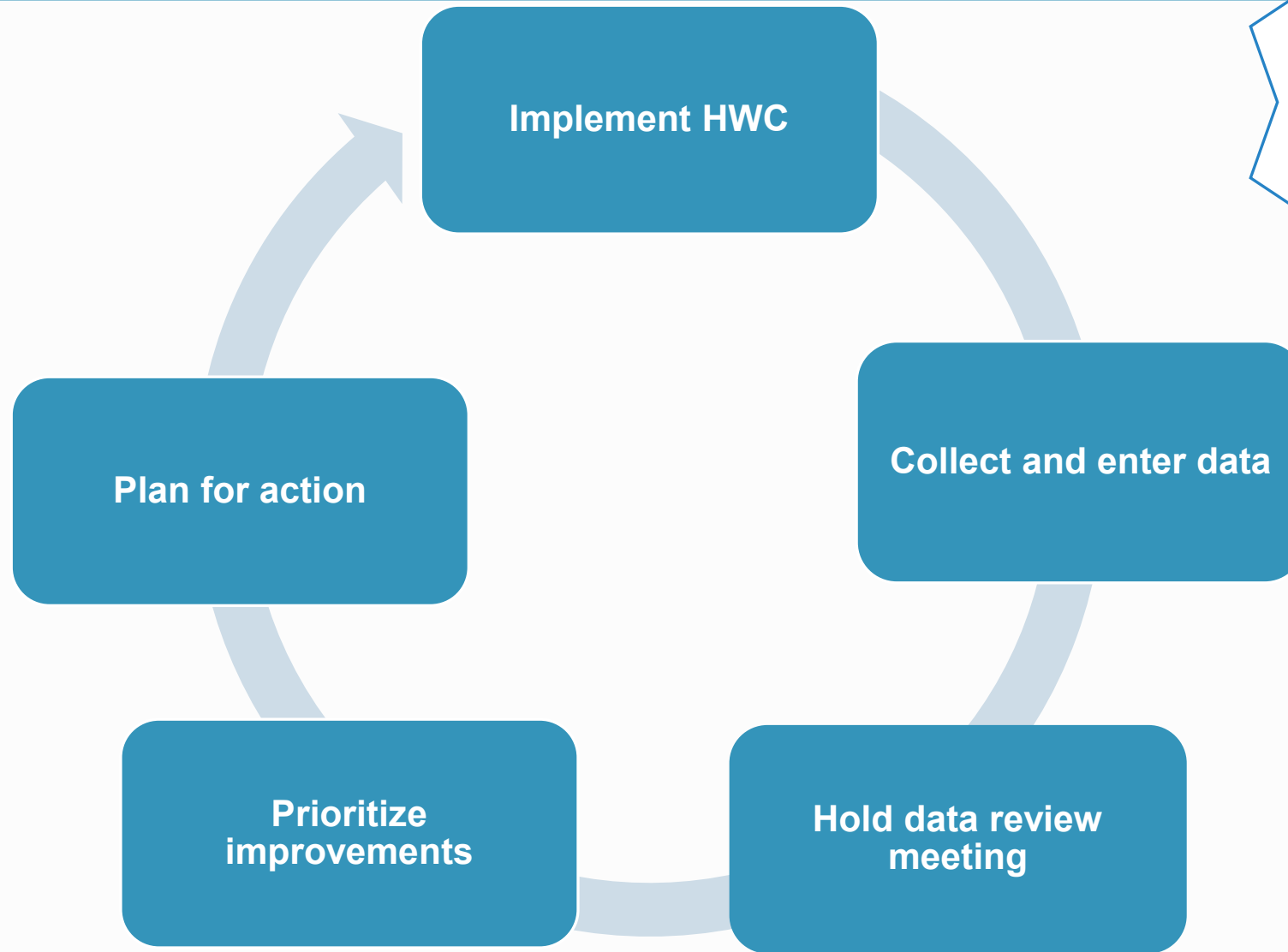
Ideally this is a monthly process

The Local Perspective

RON DUERRING, ED.D., SUPERINTENDENT, KANAWHA COUNTY SCHOOLS

Questions?

# What are our next steps?

Google Doc

- Instructions:
  - Click on the Google Doc link in the chat.
  - Add your thoughts, questions, and ideas to the topics listed.
  - Add your name in parentheses after each comment.
  - Rank this activity in terms of importance or urgency to you (#1 highest through #5 lowest).
  - Spend about **5 minutes** on this activity.

We heard you! We will…

- Review your comments.
- Ask for a couple of volunteers.
- Formulate a plan for next steps.
- Report back to the collaborative.

Wrap up
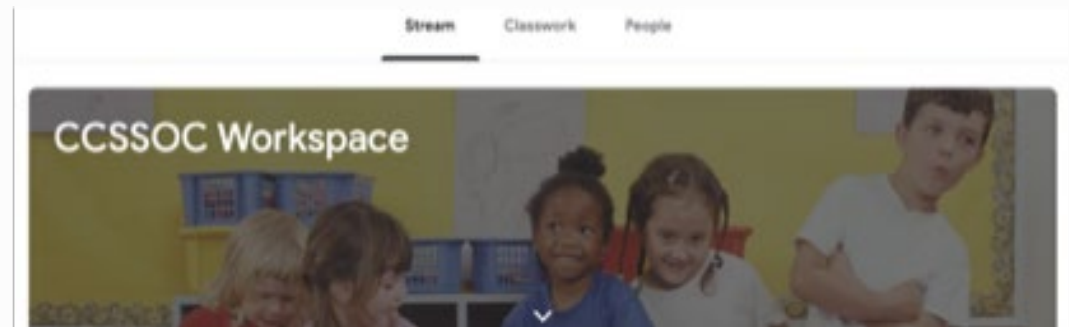
- We recorded this meeting and will send it to all participants soon.

- Let us know if you have questions or comments about resources or programs.

- Better yet, go on the **Workspace** and discuss with other members:

    https://classroom.google.com/u/0/c/NDA3MDUxMjYxODRa

- Possible weeks for next meeting: **March 16–20** or **March 30–April 3**.

- Interest in **presenting your work**? We'd love to hear from you!

Thank you!

RELAPopioid@groups.sri.com

REL Appalachia

https://ies.ed.gov/ncee/edlabs/regions/appalachia/

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