

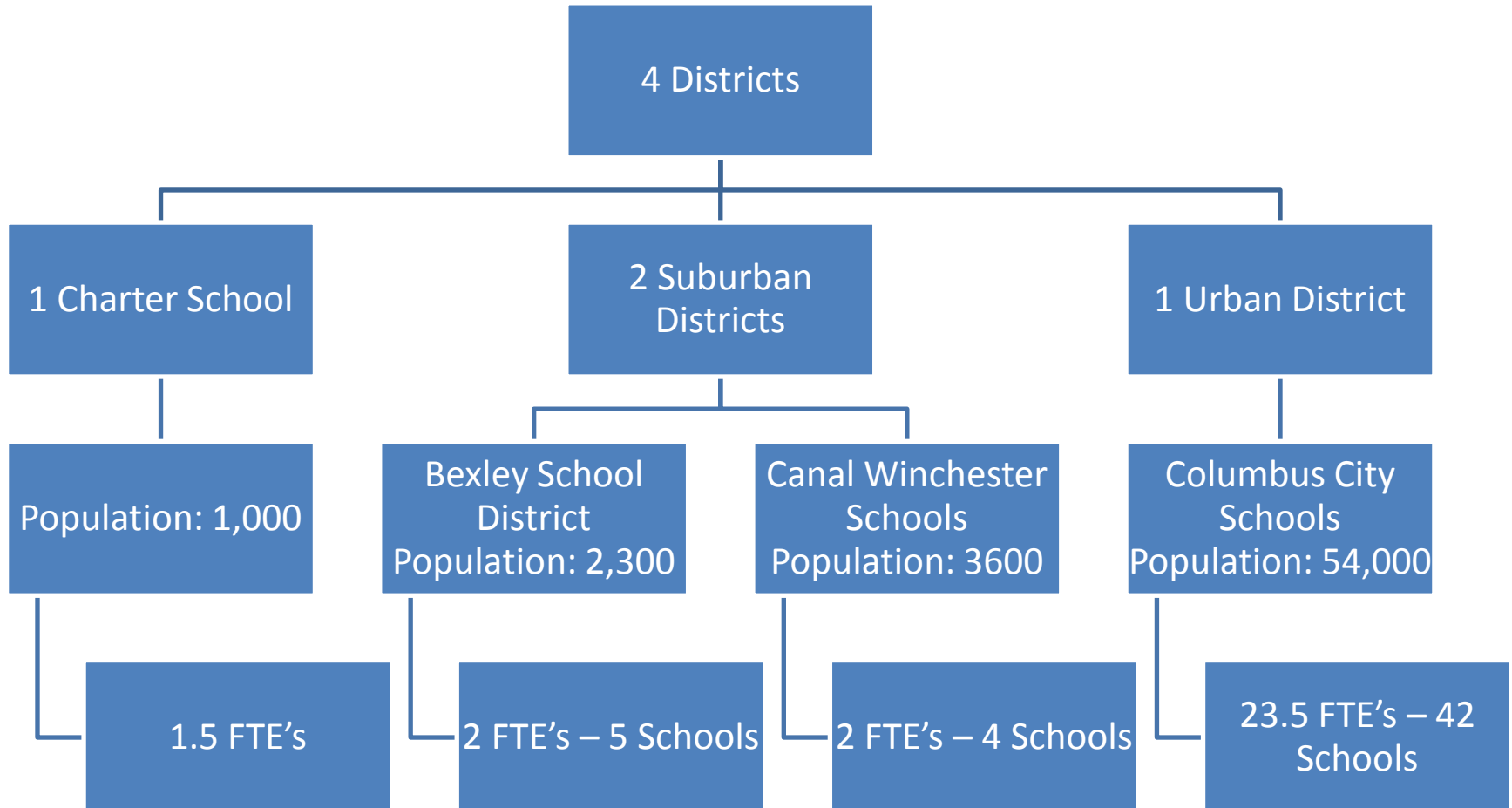


Make It Work: Identifying and Implementing Effective Universal Prevention Strategies

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Program Overview



Program Overview

Pre-Implementation of Multi-Tiered Delivery System

One Entry Point

- Focus on Individual Therapy

Capacity

- 15-30 Cases Per FTE

Learned Lessons

- Low Impact
- Lack of Engagement from School

Program Overview

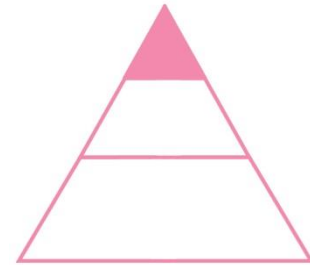
Tier 3: 1.5% Individual Intensive Interventions

Goal: Reduce severity, intensity of symptoms driving impairment

Strategies: Address family and individual factors

Programs:

- Individual therapy
 - Cognitive Behavioral Therapy
 - Motivational Interviewing
- Family therapy
- Group Therapy
 - Cognitive Behavioral Intervention for Trauma in Schools
- School collaboration



Behavioral Health System



Academic System



NATIONWIDE CHILDREN'S
When your child needs a hospital, everything matters.™

Program Overview

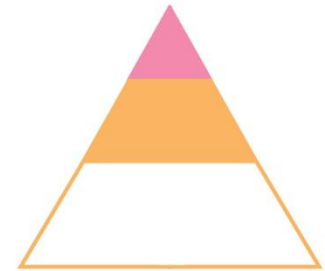
Tier 2: 5-10% Targeted Interventions

Goal: Reduce risk for “at-risk population”

Strategies: Treatment and prevention groups to address symptoms/concerns

Programs

- Too Good for Drugs
- Too Good for Violence
- Coping Cat
- Skillstreaming
- Relationship Plus



Program Overview

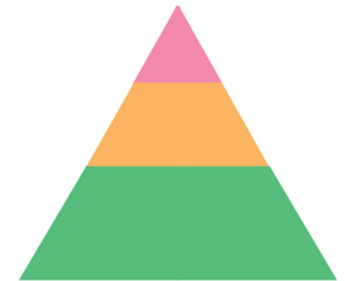
Tier 1: 80-90% Targeted School Wide

Goal: Promote a positive school climate through implementation of prevention programs that provide consistent and structured responses to behavioral and emotional concerns

Strategies: Teacher education, resources, student and family engagement and strategies

Programs:

- Elementary: PAX Good Behavior Game
- Middle and High School: Signs of Suicide (SOS)



Assessment of Needs

Community Concerns

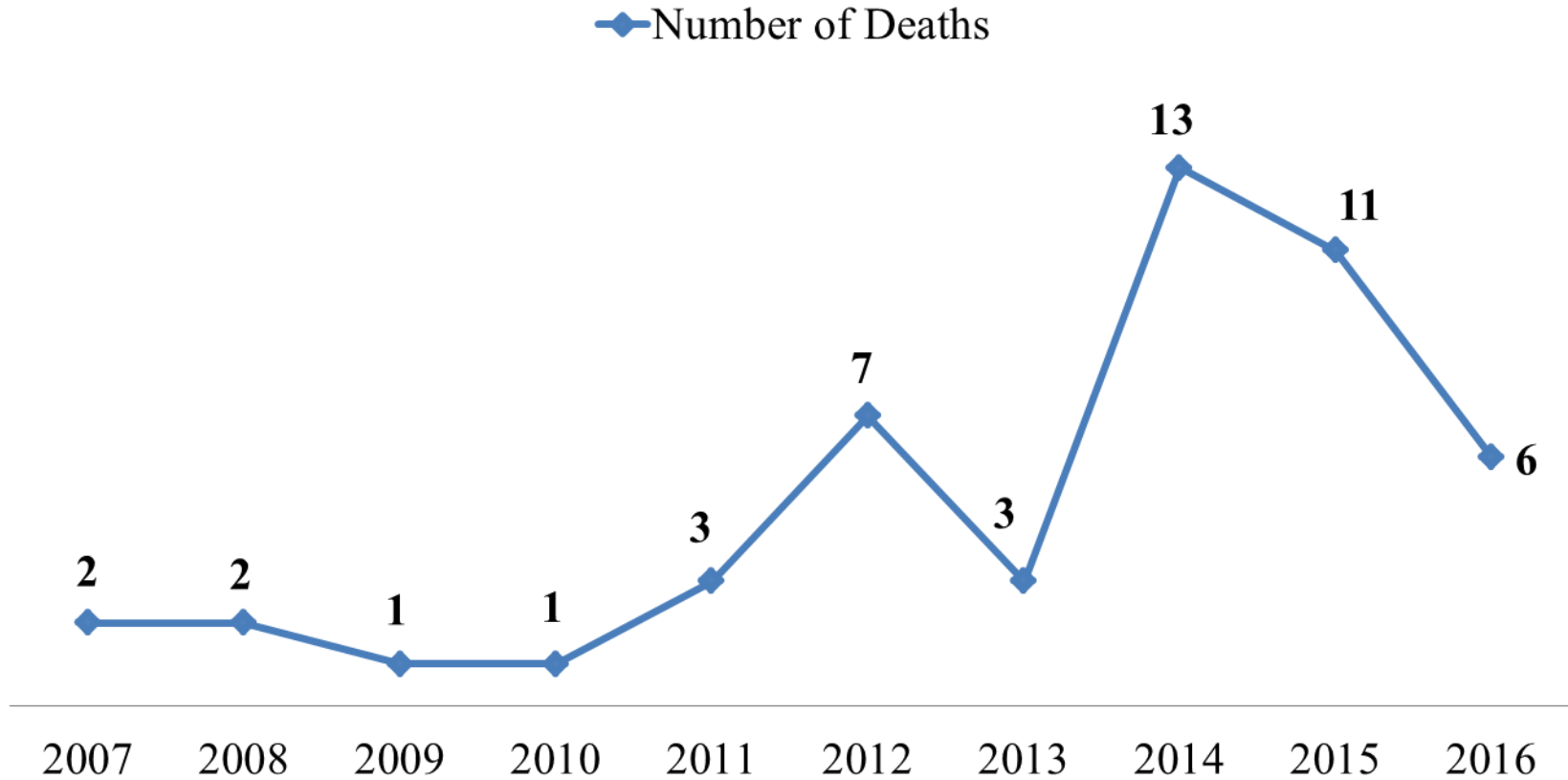
Franklin County Youth Suicide Rates

- 2014: 14
- 2015: 11

*Source: Columbus Dispatch; Franklin County
Coroner's Office*



Youth Suicides: Franklin County (OH)



Source: Columbus Dispatch; Franklin County Coroner's Office



Assessment of Needs

Community Concerns

- 25.2% of Children in Franklin County living in Poverty in 2012.
- High School Dropout Rate. In 2012 67 percent of students graduated from High School in Franklin County
- 17% of Franklin County children diagnosed with one or more mental, emotional and behavioral disorder in 2012.
- 40.6% of students were enrolled in schools labeled as failing in 2012.

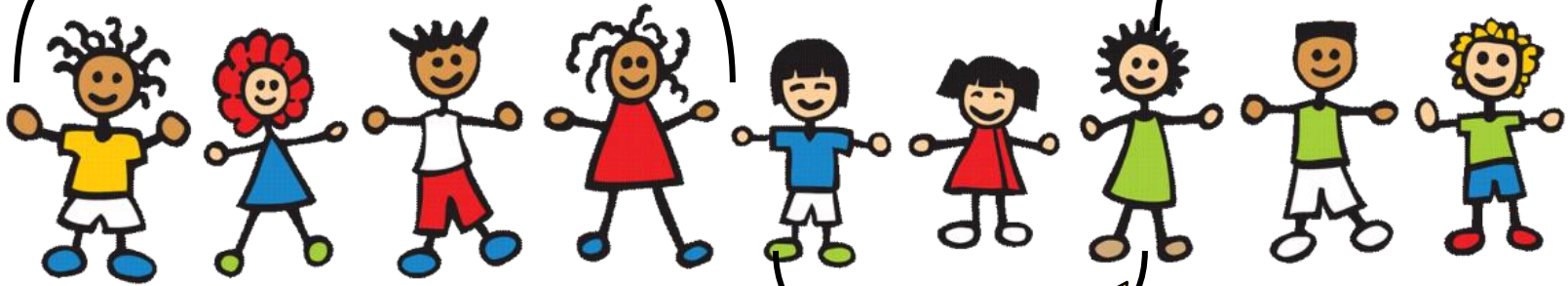
•Source: Community Conversations Report: Recommendation to city of Columbus.; Franklin County Children's Stress Profile



ACES in Ohio's Children

49% have 0 ACES

**26% have
2 or more
ACES**

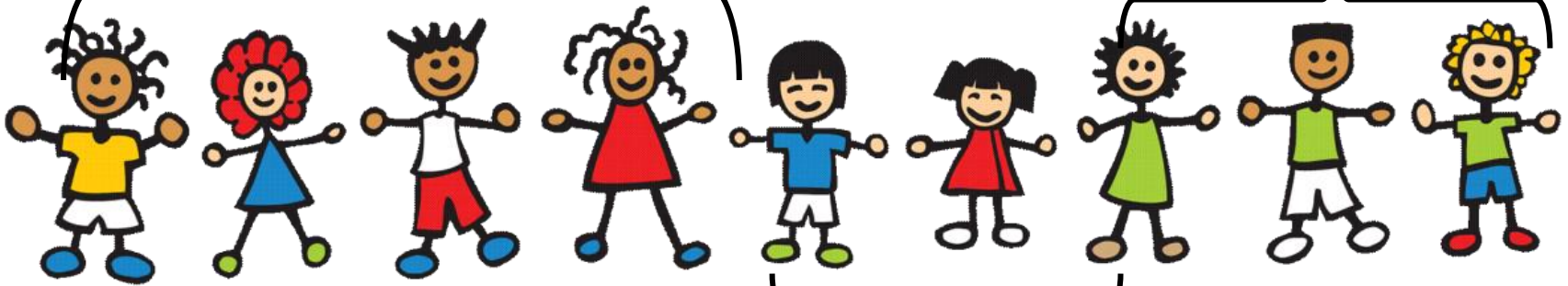


**25% have 1
ACE**

ACES in Ohio's Children

50% have 0 ACES

**14% have
3 or more
ACES**



**36% have
1-2 ACES**

www.childhealthdata.org

(2014)

Assessment of Needs

Strategies

- Review and Utilize Community Data
 - Coroners Offices
 - Health Department
 - Community Reports
- Collaborations
 - Coalitions/Partnerships
 - Community Conversations
 - Community Engagement

Assessment of Needs

School Data

- School Climate
- Most Common Mental Health Diagnosis Presented
 - Percentage of Students Experiencing Impairment
- Restrictive Setting
- Discipline Data
- Support Staff
- Community Partners
- Additional Resources Available

Funding and Partners

District Support

- Engage and Train Support Staff

County Mental Health Board

- Grants/Training Opportunities

Support of Hospital Administration

- Internal Partnerships



Signs of Suicide Implementation

School Engagement

Gatekeeper Training

Parent Training (Optional)

Classroom Implementation

- Acknowledge
- Show that you Care
- Tell a Trusted Adult

Screenings and Risk Assessments (Optional)

- Brief Screening for Adolescent Depression (BSAD)
- Columbia Severity Suicide Rating Scale (C-SSRS)

Linkage to Treatment Services



SOS Program Data (2015)

School Implementations	78	
School Partners	53	
Classrooms	607	
Number of Students	13,429	
BSAD Screenings	11,790	<i>Positive Screens</i> 1,564
Students Triageed	3,031	
Risk Assessments	611	
Non-Crisis Mental Health Referral	578	
Crisis Referrals	67	

PAX Good Behavior Game Implementation

Classroom-based teacher-implemented strategy to improve socialize students and increase self-regulation skills.

- Not a program/curriculum
- Classes are divided into equivalent teams
- Teams are rewarded for appropriate behavior/inhibition of disruption and aggression
- Intensity is increased over time

PAX Good Behavior Game

A kernel is the smallest unit of scientifically proven behavioral influence.

- PAX GBG is comprised of 5 evidence-based kernels
 - Tootles
 - Beat the Timer
 - PAX Quiet
 - Granny's Wacky Prizes
 - PAX Sticks

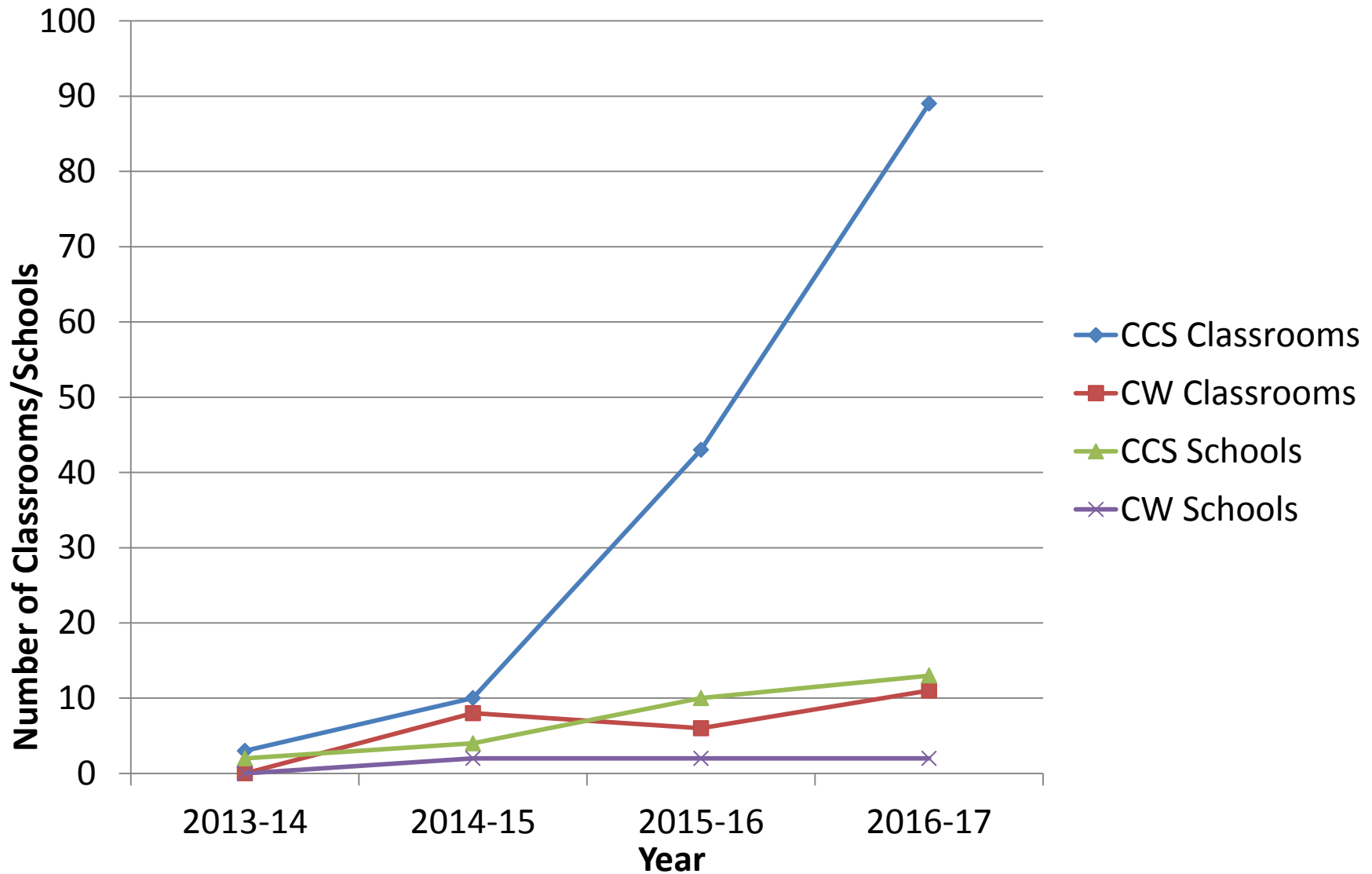
PAX Good Behavior Game Data

Schools 15

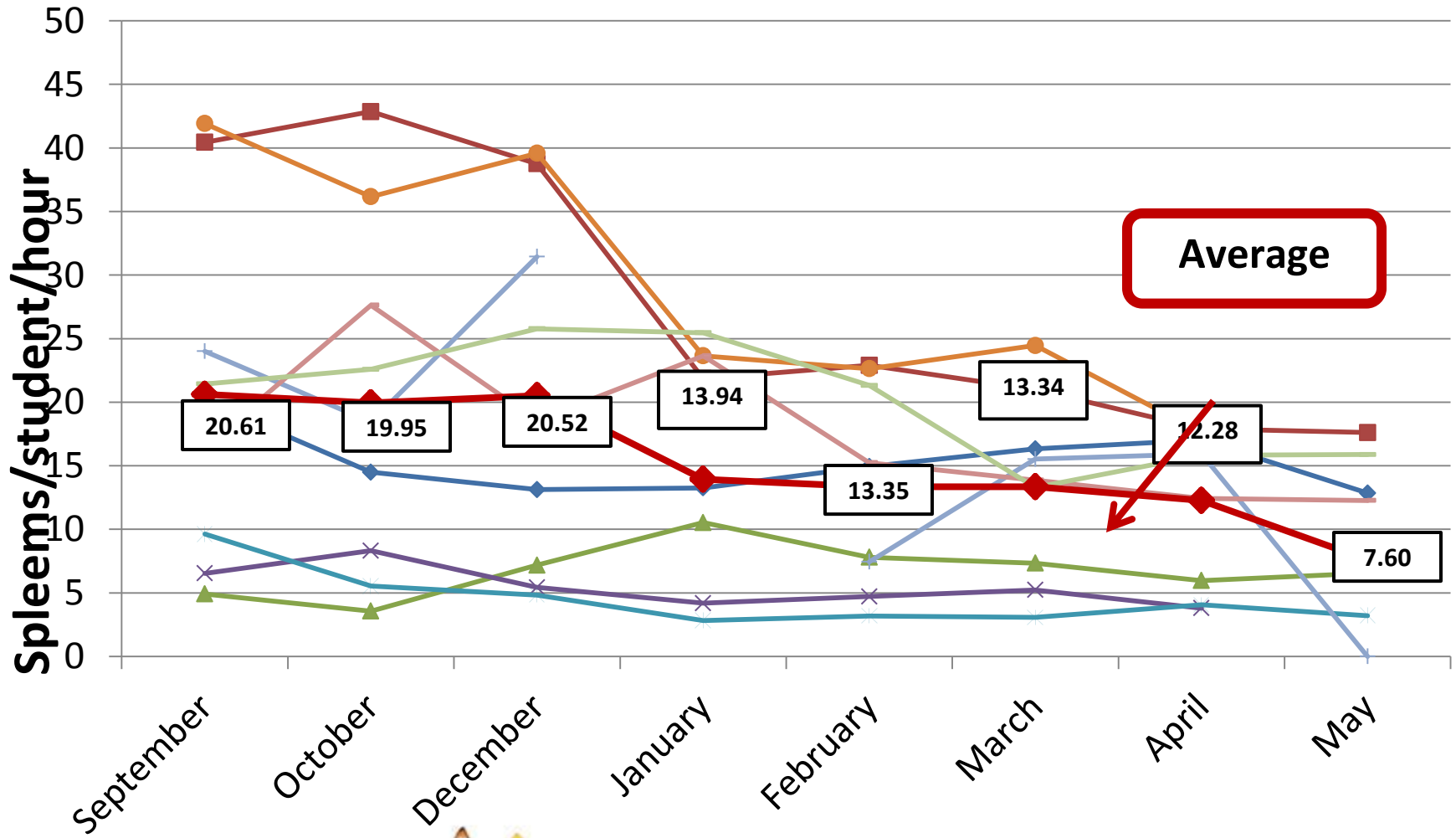
Teachers 245

Classrooms 99

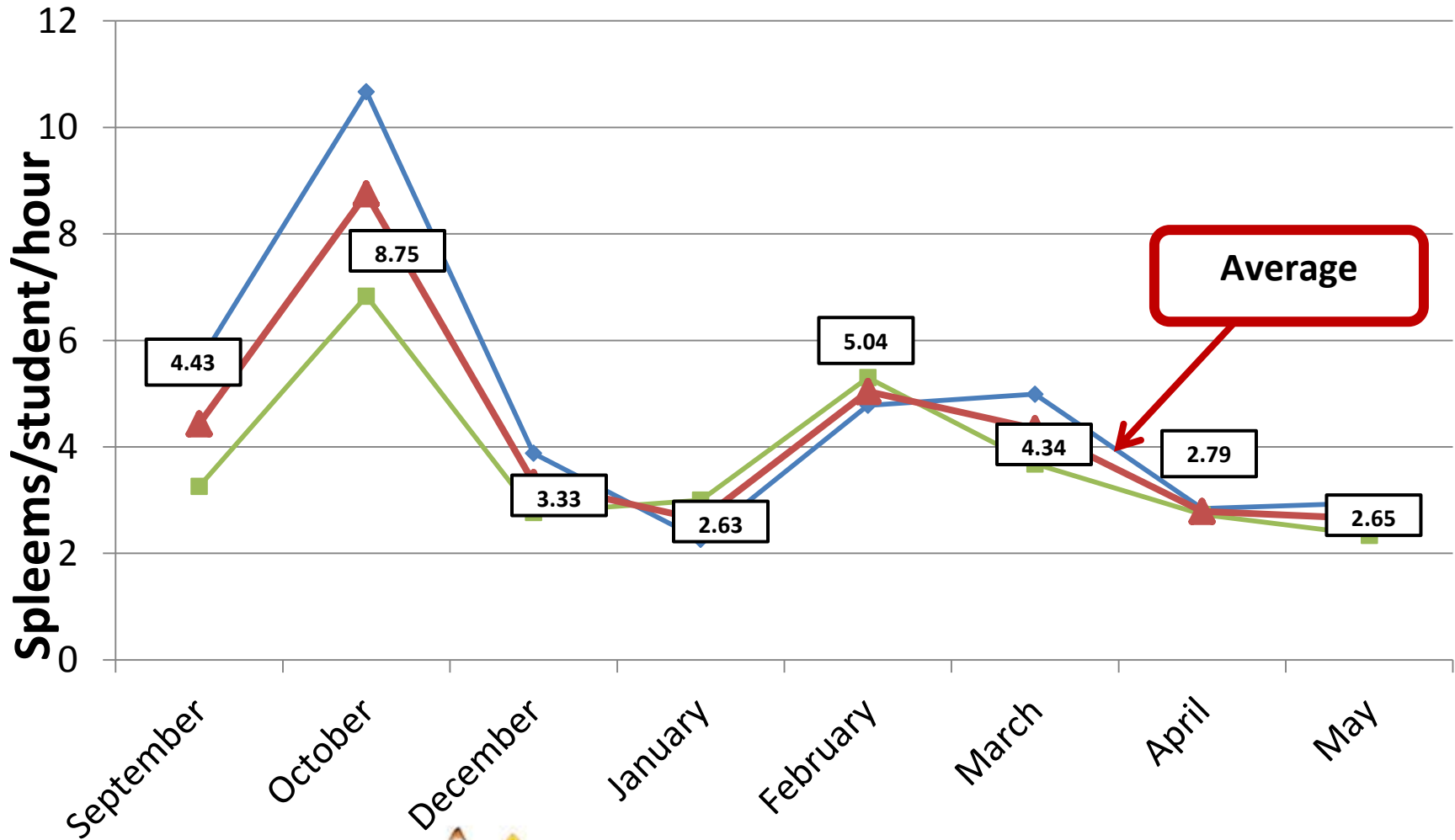
Implementation Timeline



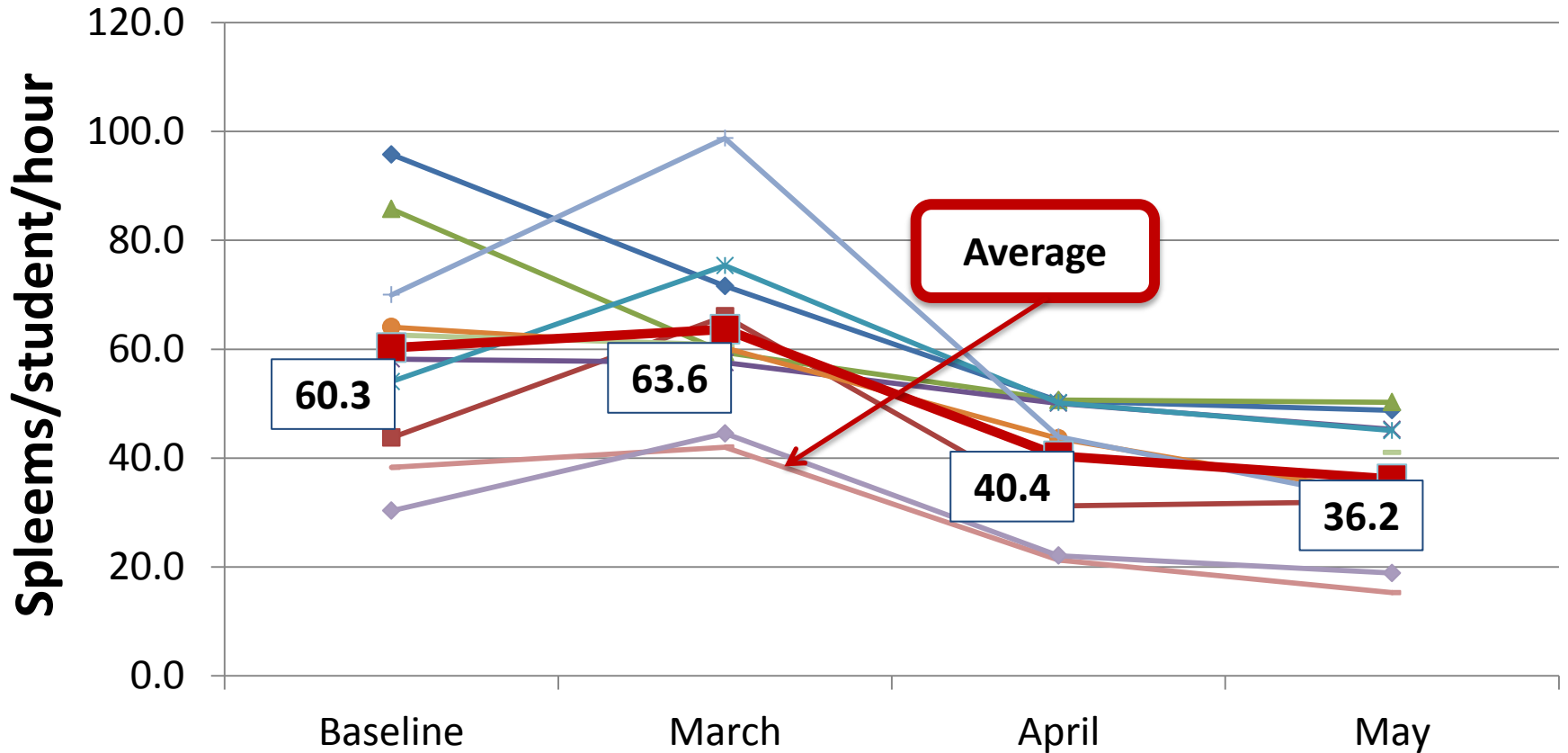
2015-16 Columbus City Schools School Spleem Data



2015-16 Canal Winchester Schools School Spleem Data



2016 (2nd Semester) CCS Classroom Spleem Data



2016-2017 PAX Data

Goal for
2016-17:
Disciplinary
Incidents by
classroom

Preliminary Data

- Ohio Ave Elementary
 - 54.1 % reduction of suspension days/student
 - 1.12 to 0.51 days/student
 - 39% reduction in infractions that resulted in in-school and out-of-school suspensions
- Livingston Ave
 - 12.6% increase in the rate of suspension days/student
 - 1.23 to 1.38 days/student.
 - 5% increase in infractions that resulted in in-school and out-of-school suspensions

PAX Good Behavior Game



Improved Outcomes...

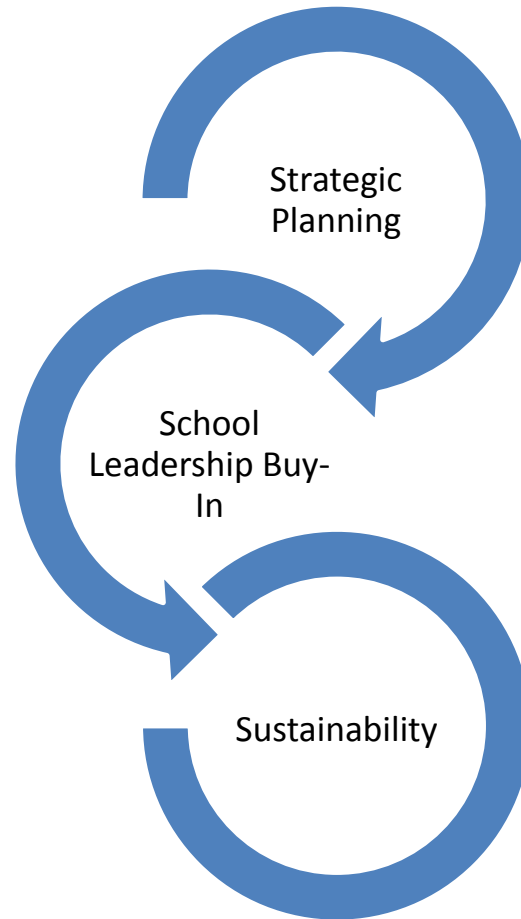
- Up to 75% reduction in disruptive and inattentive behaviors in the classroom
- Up to 60% fewer discipline referrals
- Improved academic standardized test scores
- 20-30% reduction in special education
- 15% more likely to graduate from high school
- 32% reduction in juvenile and adult criminal acts
- Up to 50% reduction in suicidal ideation

Substance Use Prevention...

- 68% reduction in tobacco use
- 35% reduction in alcohol dependence
- 50% reduction in other substance use



Lessons Learned



Future Plans

Cures Grant

- Ohio Expansion
- Collaboration

NCH Expansion

- Training Opportunities
- Collaboration with After School Programs



Questions?

