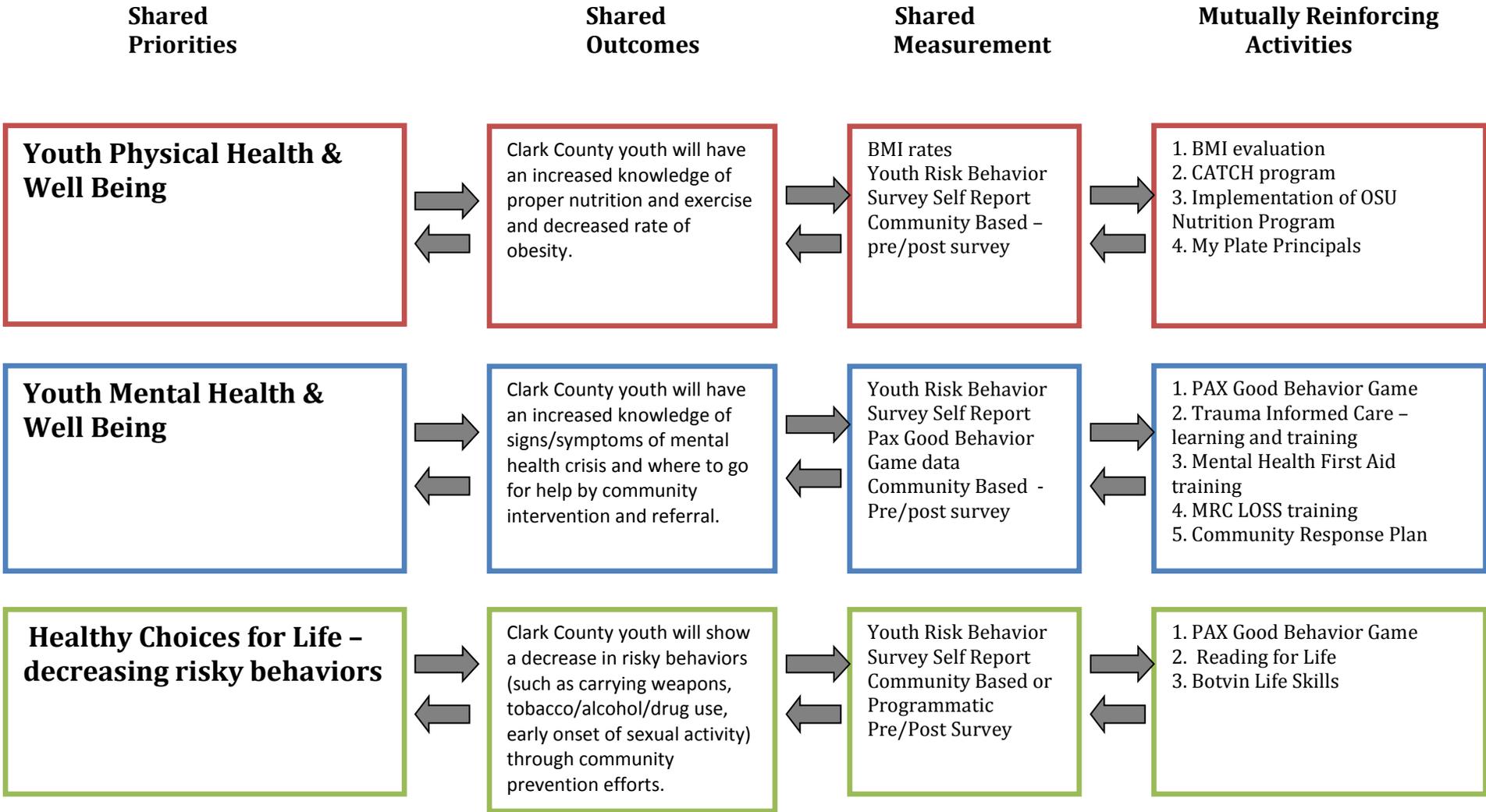


# Clark County Family and Children First Council Shared Plan Update for SFYs 17-19

**Current FCFC Initiatives:** Help Me Grow Early Intervention; Help Me Grow Central Coordination; Family Centered Services and Supports; FCFC Service Coordination; System of Care for Multi-Need Children (Placements, Wraparound, Day Treatment, IHBT, MH Assessments); Independent Living Transitions; Community Health Improvement Plan, Trauma Informed Care



**Were there any modifications from last year's plan? Yes  No**

**If yes, please identify the types of changes made by checking the appropriate boxes below:**

X **Priorities** Clark County changed one priority from Kindergarten Readiness to Healthy Choices for Life- decreasing risky behaviors. Our community determined there were plenty of sustainable programming to assist and ensure kindergarten readiness and we wanted to switch to prevention efforts.

Outcomes

Indicators

Strategies

**1. Identify any barriers in implementing the plan (i.e. data collection, data tracking, funding, infrastructure, etc.)**

Our main data collection resource, the YRBS- Youth Risk Behavior Survey, is conducted every other year. This presents reporting barriers for annual data. This first year we will report 2015 results for baseline data. Also our new prevention curriculum, Botvin Lifeskills, will be implemented in two local schools – Tecumseh Middle School grades 6, 7, & 8 and Miami View Elementary grades 3, 4, & 5. However, it will take three years to have all three grades included. We are hoping more schools will show interest in implementation with testimony from these two schools.

**2. Identify any successes/how implementing this plan has worked to strengthen the council and county collaboration.**

Clark County has had great success with every school participating in the Youth Risk Behavior Survey. This tool provides great data on many of the topics we have shared as our three top priorities. These three priorities also align with our community's recent health improvement plan. Many of the initiatives brought on by those results, have offered their data to assist with our Shared Plan. Another success has been the amount of collaboration and support to implement Botvin Lifeskills as a new prevention program. Several Foundations and other funding organizations have agreed to offer resources to ensure proper training and materials are offered to the schools.

**Report on Indicator Data** (Provide data for each outcome indicator listed on the Shared Plan. List only ONE outcome per page. This page can be duplicated as needed).

Shared Outcome: **Clark County youth will have an increased knowledge of proper nutrition and exercise and decreased rate of obesity.**

Shared Measurement Indicator(s):	Baseline Data	Current Year Data	Direction of Change (+, -, NC)
<p>% of elementary students who are overweight or obese as measured by Body Mass Index calculated through self-report of height, weight and age through evaluations with public health nurse.</p>	<p>Data: 63% Year of Data: 2015-2016</p>	<p><b>Data:</b> average 33% overweight and 18.7% obese <b>Year of Data:</b> 2016-2017</p>	<p>The % of elementary aged school children considered overweight or obese has decreased with the latest data collection. Efforts continue to capture students and provide them with education and healthy practices to diet and exercise.</p>
<p>% of HS students who are overweight or obese through self-report on Youth Risk Behavior Survey</p>	<p>Data: 42.3% Year of Data: 2015</p>	<p>Data: 42.3% Year of Data: 2015</p>	<p>New data has not yet been collected. However, Clark County can offer other details regarding diet to establish baseline for this coming year's data collection.</p>

3. List the data source(s) for the indicator(s):

Elementary student data is collected by Clark County Combined Health District with the help of Public Nurse.

Youth Risk Behavior Survey conducted by Clark County Combined Health District in all city and county public high schools and now middle schools; YRBS first conducted during 4th quarter 2008-2009 academic year and repeated every two years.

4. Identify any key findings (explanation of data findings; FCFC actions taken in response to key findings, etc.):

Although it seems as though BMI data for elementary students has improved from 2015-2016 data collection; the three elementary schools evaluated showed an increase from fall data to spring data for overweight and obese percentages.

Healthy Living Coalition is a collaboration between local organizations who work together to promote and deliver health programs about nutrition, fitness and weight control. This Coalition meets every other month to discuss health related events to network resources.

The Obesity Task Force continues with its goals to change school culture to impact child and family wellness by increasing knowledge about healthy food and exercise choices by modifying systems and programs that can aid such choices in the school. The strategy continues through the CATCH program at Lincoln Elementary and Fulton Elementary conducted in **7 second grade classrooms** reaching 79 kids, with a pre and posttest in each classroom. Also implemented CATCH in the **afterschool programs** at Fulton, Lincoln and Perrin Woods reaching 80 kids total also with pre and posttests. Each week a physical activity game, challenge or set of activities was completed for an entire hour. Healthy nutrition games or activities along with a healthy snack occurred weekly. Such topics as sugar in drinks, fruits and vegetables and how to include them in their diet, water intake and daily movement were all components of the curriculum. By using the Go, Slow Whoa nutrition programming facilitators were able to see results. Since the programming began, there has been an overall increase in reported physical activity. Over half of the students in each school reported that they completed an activity that increased their heart rate and it was at least 20 minutes in length. The reported amount of TV watching had decreased from 2-3 hours a day to 1 hour or less by self-reporting via the posttest. Out of the 46 students at Fulton they reported in the pretest that 23 chose fruit over candy, at the completion of CATCH, 44 chose fruit over candy. So overall in the 2nd grade classrooms facilitators are seeing percentages of students increasing physical activity as well as making healthier choices due to the education of the Go, Slow, and Whoa food education. These same results were conveyed with the after school program, the overall TV watching decreased and there was an increase in physical activity and better overall food choices that were all self- reported from pre to post testing.

The YRBS data remains the same as the survey is conducted every two years. However, Clark County can offer a bit more detail to other diet related questions to offer baseline for the upcoming survey. From 2013-2015HS data: increase from 17% to 18.3% self- report of overweight; increase from 20% to 24% self- report of obese; decrease from 32% to 25.7% drank soda 1x/day; increase from 53% to 54.2% exercised 20 minutes or more; decrease from 31% to 20.6% watching TV 3+ hours per day. MS data: 17% self -report overweight; 28.8% self- report obese; 38.9% self- report active 60 minutes /day; and 30% self- report watching TV 3+ day.

**Report on Indicator Data** (Provide data for each outcome indicator listed on the Shared Plan. List only ONE outcome per page. This page can be duplicated as needed).

Shared Outcome: **Clark County youth will have an increased knowledge of signs/symptoms of mental health crisis and where to go for help by community intervention and referral.**

Shared Measurement Indicator(s):	Baseline Data	Current Year Data	Direction of Change (+, -, NC)
# of teachers & school staff trained in the Good Behavior Game- a prevention model promoting self- regulation	<p><b>Data:</b> 41 teachers, 4 intervention specialists, 3 multiple disabilities teachers, 3 tutors, 2 curriculum coaches, &amp; 6 staff including 1 principal. A total of 35 classrooms and 6 schools are implementing this program.</p> <p><b>Year of Data:</b> 2015-2016 school year</p>	<p><b>Data:</b> 19 additional teachers and 1 principal. A total of 57 teachers and classrooms throughout 8 schools are implementing this program.</p> <p><b>Year of Data:</b> 2016-2017 academic year</p>	
Youth Risk Behavior Survey Self Report % of high school students reporting to plan to attempt suicide in the past 12 months as reported on Youth Risk Behavior Survey	<p><b>Data:</b> 17.7%</p> <p><b>Year of Data:</b> 2015</p>	<p><b>Data:</b> 17.7%</p> <p><b>Year of Data:</b> 2015</p>	

1. List the data source(s) for the indicator(s):

Youth Risk Behavior Survey is conducted by Clark County Combined Health District in all city and county public high schools. The Youth Risk Behavior Survey was initiated during 4th quarter 2008-2009 academic year and is repeated every two years. It has recently been implemented in all Middle Schools.

Pax Good Behavior Game data: Conducted and evaluated by Wellspring throughout the academic school year.

2. Identify any key findings (explanation of data findings; FCFC actions taken in response to key findings, etc.):

Suicide Prevention Coalition has undertaken many youth initiatives in efforts to reduce this finding. The Coalition shares the YRBS data, provides gatekeeper trainings throughout the community, sponsors Mental Health First Aid trainings for school staff and students, provides additional school staff and student trainings, production of public service announcements, training for youth in detention, formation of bullying workgroups, and participation in Peer Helper training of trainers.

Mental Health Recovery Board has offered funding and grant awards have supported the expansion of the Good Behavior Game in several elementary schools. This program teaches students how to work toward valued goals, and teaches them how to cooperate with each other to reach those goals. Students learn how to self-regulate during both learning and fun. Students learn how to delay gratification for a bigger goal. The game protects students against lifetime mental, emotional, behavioral, and related physical illnesses for their futures. In Clark County, Wellspring has trained an additional 19 teachers and one principal on PAX Good Behavior Game. A total of 57 classrooms/ 57 teachers and 8 schools currently implement PAX. This estimates 18 students per classroom, equals 1,026 students impacted by PAX. It is the hope of Clark County to expand to half of all Clark County Schools by 2019.

Data shows a reduction in undesirable classroom behavior ranging from 23% to 82%. The mean for eight schools, is 61%- reduction in undesirable behaviors. Implementation data shows 30 teachers (53%) implementing at or near fidelity. A Principal shared the following regarding PAX: *“I am not sure I could pull anything out separately. It is having a common language in the building that has really improved a lot.”*

Clark County has continued training for all direct provider staff, juvenile court staff, educational staff and social service providers to gain a better understanding of Trauma Informed Care principles. Experienced and trained therapists have provided audience specific training and coaching sessions to providers in the community working with children who have experience trauma or are at risk for trauma.

The YRBS data remains the same as the survey is conducted every two years. However, Clark County can offer a bit more detail to other mental health related questions to offer baseline for the upcoming survey. From 2013 to 2015: increase from 32% to 33.4% of students

feeling sad or hopeless for 2 weeks or more; increase from 17% to 17.7% of students who made a plan to commit suicide; decrease from 12% to 11.2% for attempted suicides. For Middle school students, 13.4% made a plan to commit suicide and 7.9% reported they had attempted suicide.

For the MRC LOSS Team, several goals have been identified: 1) recruit and retain active roster of volunteers; 2) revise and practice response protocol; 3) improve accurate data collection and reporting/debriefing after each response. Mental Health Recovery Board sponsored 2 MRC LOSS Volunteers to attend the Crisis Response Training (CRT) outside of Clark County region. Clark County Combined Health District and other agencies also sent staff to attend CRT training to increase capacity and common response Framework among multiple response efforts across the county.

MHRB also co-sponsored two Mental Health First Aid trainings this past year, one for the Health District Staff and volunteer responders. The other was for the Catholic parishes in Clark County.

7 Question, Persuade, Refer (QPR) sessions were conducted in Clark County with 157 people attending, including all Health District staff, FCFC Board, Clark State Community College staff and a session at the Springview Government Center. An additional 10 sessions of QPR instruction at the Springfield Fire Department trained 95 more people.

**Report on Indicator Data** (Provide data for each outcome indicator listed on the Shared Plan. List only ONE outcome per page. This page can be duplicated as needed).

Shared Outcome: **Clark County youth will show a decrease in risky behaviors (such as carrying weapons, tobacco/alcohol/drug use, early onset of sexual activity) through community prevention efforts.**

Shared Measurement Indicator(s):	Baseline Data	Current Year Data	Direction of Change (+, -, NC)
<p>% of high school students reporting onset of drinking alcohol, smoking marijuana, or having sex before age 13 as reported on Youth Risk Behavior Survey</p>	<p><b>Data:</b> drinking before 13- 16%; smoking marijuana before 13- 9.0%; having sex before 13- 5.0% <b>Year of Data:</b> 2013</p>	<p><b>Data:</b> drinking before 13- 11.1%; smoking marijuana before 13- 9.1%; having sex before 13- 5.7% <b>Year of Data:</b> 2015</p>	<p>Early onset of drinking before 13 has decreased while smoking marijuana and having sex, slightly increased for HS students. For MS students, they reported in 2015: 18.5% drank alcohol before 13, 6.2% smoked marijuana, and 6.2% had sex before 13.</p>
<p>Community Based or Programmatic Pre/Post Survey – Reading for Life, Botvin Lifeskills, PAX Good Behavior Game</p>	<p><b>Data:</b> expand prevention programs locally to address risky behaviors. <b>Year of Data:</b> 2017</p>	<p><b>Data:</b> same <b>Year of Data:</b> 2017</p>	<p>See PAX Good Behavior Game information above; Reading for Life began this year (2017) and Botvin Lifeskills will begin in two local schools during 2017-2018 academic year.</p>

1. List the data source(s) for the indicator(s):

Youth Risk Behavior Survey is conducted by Clark County Combined Health District in all city and county public high schools. YRBS was first conducted during 4th quarter 2008-2009 academic year and is repeated every two years. It has recently been implemented in all Middle Schools as well.

Community based program pre/post survey for Reading for Life and Botvin Lifeskills program.

2. Identify any key findings (explanation of data findings; FCFC actions taken in response to key findings, etc.):

The YRBS data shows information from 2013 and 2015 as this priority has not been shared on this report before. Clark County can offer a bit more detail to other risky behavior related questions to offer baseline for the upcoming survey. From 2013 to 2015 regarding risky behaviors: decrease from 21% to 20% for those that reported texting or emailing while driving; increase from 19% to 20.2% of those carrying a weapon; increase from 6% to 8.6% of those who carried a gun; decrease from 26.3% to 21.7% for those involved in a physical fight; decrease from 47% to 33.4% for those who tried smoking; decrease from 11% to 4.5% for those reporting smoking for 20 or more days; decrease from 12% to 9.1% who used chewing tobacco, snuf or dip; decrease from 66% to 60.7% have tried alcohol; decrease from 40% to 34.2% report using marijuana; increase from 2.0% to 5.7% tried heroin; increase from 7.0% to 8.4% tried hallucinogenic drugs; decrease from 47% to 37.7% had sex; and there was an increase from 7.0% to 8.4% drank or used drugs before having sex. For middle school students: 31.5% reported they had carried a weapon; 44% were in a physical fight; 20.6% tried smoking; 1.7% used chewing tobacco, snuf or dip; 24.9% tried drinking; 11% tried marijuana; and 9.2% reported they had had sex.

Reading for Life began operations in May 2016. The first youth were referred at the end of June 2016. 46 youth were referred to this program and 25 were placed in the Reading for Life program and 21 were placed in the control group (community service). Of the 46, 4 youth failed to complete and 2 youth were initially referred but did not enter the program. The Reading for Life youth completed approximately 25 hours of time in group learning and applying character virtues in the context of reading a book with two adult mentors, with five mentoring groups completed. In addition, each group completed a community service project of at least 3 hours. The youth assigned to community service, completed 25 hours of community service. Over the next year the goal is to train more mentors and evaluate rate of recidivism for these youth.