



**Safe Schools
Healthy Students**

2018

**Connecticut
Final
Evaluation
Report**

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Executive Summary

The evaluation plan as described in the version submitted to SAMHSA in January 2017 was largely implemented as planned. In order to evaluate progress in the state and local action plans, both a process and an outcome evaluation were conducted. In the NCE year, the evaluators were able to collect several of the data points that had still been missing at the end of Year 4. In the evaluation, particular attention was paid to disparities based on race/ethnicity, gender, poverty, and sexual orientation. A review of the program Elements is described in this report, setting the context for the next section, which delineates preliminary findings. Despite some significant limitations and barriers to data quality and completeness, several analyses were conducted. One of the main observations that can be made about this project is that an enormous amount of productive activities were implemented with the overarching goal of improving the lives of Connecticut's children. In terms of quantitative data, positive trends were in one or more communities on: Preschool participation, number of students receiving mental health services, chronic absenteeism, and disciplinary sanctions. Disparities based on race, ethnicity, gender and/or sexual orientation are evident in some key areas of the outcome data, including suspension and expulsion rates, alcohol use, and bullying and suicidality in the LGBTQ community. In the no-cost extension year, evaluation activities focused on updating data from existing sources, presenting data to stakeholders, getting qualitative feedback from stakeholders, and finalizing data analysis. Recommendations for future projects are made, and confirmation of Safe Schools Healthy Students goals are delineated.

Verification of Implementation of Approved Evaluation Plan

The evaluation plan as described in the version submitted to SAMHSA in January 2017 was largely implemented as planned over the course of the project. Although some small changes were necessitated by alterations to local educational authority (LEA) work plans, and certain specific evaluation activities did not take place as planned, the overall evaluation was not significantly changed. There was some staff turnover to the evaluation team over time, but the lead evaluator, one research assistant and the data analytic and management staff were on the project from the beginning.

Details on the slight modifications to the evaluation are described later in this report, but first it seems that it would be helpful to summarize the overall evaluation plan. In order to evaluate progress in the state and local action plans, both a process and an outcome evaluation were conducted. In addition to tracking the development of the project over time, the process evaluation included an assessment of the state- and district-wide facilitators and barriers to implementation of all the selected interventions, including evidence-based and evidence-informed practices. The process evaluation included tracking such important steps as what trainings and meetings were held in order to implement the various practices, as well as qualitative observations, and, in some cases, focus groups with stakeholders from the participating school districts. We also regularly conducted web-based searches for policy changes, data updates, and relevant articles. Field notes from observations made of meetings and implementation of programs were regularly made. In many cases, the LEA managers collected data on the process indicators in their districts that were targeted to specific interventions implemented and provided these to the evaluators to compile and report.

The outcome evaluation was primarily focused on the required TRAC/IPP and GPRA indicators, as well as the shared indicators selected by the state in the Comprehensive Plan, but also included many additional variables that were deemed important to gaining a complete picture of what was happening related to the project. The final, no-cost extension, year was very useful for collecting data for the previous year from the parties involved in the SS/HS project, including the LEAs, the State Department of Education (SDE), the Department of Public Health (DPH), the Department of Children and Families (DCF) and the Court Support Services Division (CSSD) of the state Judicial Branch. In the evaluation, particular attention was paid to disparities based on race/ethnicity, gender, poverty, and sexual identity.

Description of the Program

As the evaluation is directly tied to the program, we provide a description of the program development by Element.

Element 1: Promoting early childhood and emotional learning and development

GOAL 1-1. *Connecticut SS/HS partners will advance priority initiatives of Connecticut's Office of Early Childhood Education that expand early childhood education opportunities; increase quality and promote early identification and intervention model.*

The first objective of the statewide plan was to increase the number of affordable and high quality early childhood education opportunities for low income children. While 79.3% of all Connecticut children entering Kindergarten in the 2012-2013 school year had some pre-school experience (as reported by parents/guardians), access to quality pre-school education seemed largely a function of income (ctdata.org). In his definition of "high quality" CT Governor, Dannel P. Malloy, stated programs must be accredited or pursuing accreditation by the National Association for the Education of Young Children (NAEYC) or be a Federal Head Start approved program. All of Middletown and New Britain preschools currently meet one of these two definitions.

In 2012, Governor Malloy approved an expansion of 1,000 School Readiness opportunities for children throughout the state. In 2013, low income preschool children received preschool education through 10,041 state-funded preschool slots and 8,956 Early/Head Start programs. In addition, "The Connecticut Office of Early Childhood (OEC) was established in 2013 to coordinate and improve the various early childhood programs and components in the state to create a cohesive high-quality early childhood system." (<https://www.ct.gov/oec/cwp/view.asp?a=4546&q=535738>)

In 2014, 1,020 additional School Readiness opportunities for low-income children in 46 towns and cities throughout Connecticut were added. Public Act 14-41 established the Connecticut Smart Start Program, which is intended to expand preschool opportunities for low-income children in public schools.

During the 2014-2015 school year, the state funded an additional 368 slots with money to renovate classrooms in 28 school districts through a competitive grant process. Bridgeport was one of the districts awarded grant funds to renovate four new pre-K classrooms and serve an additional 60 students. Anecdotally, it was reported that many of the new slots were not utilized, but we have not been able to obtain hard data on the numbers of unfilled slots.

The second objective under Element 1 was to "increase the capacity of early childhood education providers to identify behavioral and mental health issues." In the service of early identification, the state made the transition from birth-to-three services to special education more seamless.

In addition, the state plan included support for the development and field testing of the new Kindergarten Entry Inventory Assessment Tool. This new screening tool followed the principles of Connecticut's preschool Assessment Framework and was designed to identify students who may be in need of behavioral support services. It is not clear if this tool was fully implemented during the life of the project.

In Year 4 of the project, due to state funding cuts, the Care4Kids program, which helps low-income families pay for daycare, tightened its eligibility requirements, resulting in a drop in enrollment of 7,500 families (from 22,874 to 15,390). On the other hand, despite the budget crisis, Governor Malloy committed to continue funding the pre-K classroom expansion.

Element 2: Promoting Mental, Emotional and Behavioral Health

GOAL 2-1. *Connecticut SS/HS partners will advance the implementation of Connecticut's Children's Behavioral Health Plan led by Implementation Advisory Board.*

In recognition of the significant gaps in behavioral health care for children in the State of Connecticut, a strategic plan was created pursuant to Public Act 13-178. The Connecticut Children's Behavioral Health Plan was submitted to the Connecticut General Assembly in October of 2014.

The SS/HS Statewide plan was developed in alignment with these Behavioral Health Plan goals. SS/HS partner agencies (Department of Children & Families, CT State Department of Education, Department of Mental Health and Addiction Services, the Office of Early Childhood, and Court Support Services Division of the Judicial Branch) were all involved in the Behavioral Health Plan and had representation on the State Management Team (SMT).

The statewide plan addressed the PA-13-178 requirement that Emergency Mobile Psychiatric Services (EMPS) providers shall "collaborate with community-based mental health care agencies, school-based health centers and the contracting authority for each local or regional board of education. Statewide, EMPS responded to 18,002 EMPS calls during the 2013-2014 school year and 166,644 EMPS calls during the 2014-2015 school year. These calls represented services to 8,313 children and 8,060 children respectively. A large number of these calls (29.4% in 2013-14 and 32.2% in 2014-15) were placed by school personnel in recognition of children and youth in psychiatric crisis. Each of the partner LEAs provided their district-wide data by school in order to promote discussions with their local providers regarding appropriate referral processes for children and youth in psychiatric crisis.

On October, 1, 2015, the State Department of Children & Families (DCF) presented a report to the Connecticut Legislature summarizing the progress made to date regarding behavioral health for children in Connecticut.

One of the highlights of the 2015 report was the release of the Statewide Suicide Prevention Plan. The statewide goal of training gatekeepers in mental health awareness and suicide prevention was embraced by all three LEAs. They offered Youth Mental Health First Aid and other trainings to many professional and paraprofessional staff. In addition, based on a report to the Connecticut Suicide Advisory Board in June 2015 by Aseltine et al., (2015), indicating that New Britain was among cities/towns with the highest rates of hospitalizations for suicide attempts in the state, New Britain also offered Question Persuade Respond (QPR) suicide prevention training to all teaching staff as part of a required professional development day.

In order to address Health Promotion, Prevention and Early Identification, DCF supported the community-based training of Circle of Security attachment-enhancing parenting program. Statewide, the Department of Mental Health and Addiction Services trained Young Adult Services (YAS) staff in the program. One of the LEAs involved in SS/HS, Middletown, provided Circle of Security Training to members of the community, including parents and early childhood providers.

The final years of the grant displayed both positive and negative developments related to Element 2. DCF and their service agencies committed to implementing trauma-informed programming for children across the state, including New Britain and Bridgeport. Over 800 clinicians and staff at 42 community mental health providers were trained to deliver evidence-based Trauma-Focused Cognitive Behavioral Therapy. DCF now takes a trauma-informed approach to all their work, including child welfare and juvenile justice. The New Britain LEA also expanded the reach of the Ana Grace Project, increasing access to trauma-informed services, and training teachers in this approach. However, state budget issues resulted in reduced funding for education and all state-funded services, leading to concern that it will be impossible to avoid a deleterious impact on the students' mental health.

Element 3: Connecting Schools, Families and Communities

GOAL 3-1. *Connecticut SS/HS partners will advance the initiatives of the Connecticut State Department of Education's Chronic Absenteeism Strategic Action Group and Connecticut's Achievement Gap Task Force.*

The SS/HS statewide plan adopted the recommendations regarding chronic absenteeism that was proposed in a report by the Chronic Absenteeism Strategic Action Group (SAG) presented in 2014 (Chronic Absenteeism SAG, 2014). The rates of chronic absences during

the 2013-2014 school year differed greatly by race/ethnicity, with 15.7% Black, 18.1% Hispanic and 7.2% of White students having high rates of absenteeism.

Because lost instructional time undermines student academic success, the State Department of Education (SDE) does not distinguish between absences for medical, disciplinary or any “excused” reason. Their work group identified multiple barriers to attendance, including: poorly managed chronic health issues; limited transportation and safe walking routes; lack of shared understanding of need to attend school; and students feeling unsafe in school. In addition, the work group noted that a lack of cultural competence on the part of school staff and administrators resulted in disproportionate numbers of Black and Hispanic students being suspended and expelled throughout the state.

A state law designed to hold districts with high rates of absenteeism accountable was signed by Governor Malloy in July 2015. Public Law 15-225 requires school districts that have high rates of chronic absenteeism to establish a district school attendance review team. It further requires the State Department of Education to develop a chronic absenteeism prevention and intervention plan. PL 15-225 requires the State Board of Education to define “disciplinary absence,” and it requires local boards of education to report data relating to student attendance to stakeholders. In addition, the law established a new statewide definition of “truant”: a child age five to eighteen, inclusive, who is enrolled in a public or private school and has four unexcused absences from school in any one month or ten unexcused absences from school in any school year.

The State Department of Education Chronic Absenteeism Strategic Action Group also presented information about suspensions and expulsions in Connecticut (Chronic Absenteeism SAG, 2014). Approximately 41,000 students received 105,000 sanctions during the 2013-2014 school year. The SDE identified High School students, as well as Black and Hispanic students, as having the highest rate of suspensions and expulsions.

Based on this report, gender was also a factor in disciplinary action. Statewide, male students were twice as likely to be suspended as female students, which was true for all racial and ethnic groups. Further, Black and Hispanic boys were 2-3 times as likely to be suspended or expelled as White boys, and Black and Hispanic girls were 4-6 times more likely to get such a sanction as their White counterparts. The connection between sanctions and chronic absenteeism was clear: Approximately 40% of White and Black students who were suspended or expelled and 50% of suspended/expelled Hispanic students were also chronically absent.

This report noted that in the 2013-2014 school year, two of our LEA partners were among the school districts with the highest rate of suspensions and expulsions at all grade levels:

elementary (Bridgeport 7.95%, New Britain 8.31%), middle (Bridgeport 21.83%, New Britain 26.52%), and high school (Bridgeport 29.59%, New Britain 37.68%). Further, in Bridgeport, 52.84% of all sanctions were out of school.

Goal 3-2. *Connecticut SS/HS partners will increase the scale and reach of Disproportionate Minority Contact initiatives led by the Office of Policy & Management and the Judicial Branch.*

The statewide plan included recommendations to reach out to families and communities, to implement evidence-based interventions and to work with school staff. The CT SDE provided a great deal of training throughout the state in culturally responsive pedagogy and discipline, positive school climate development, and Positive Behavioral Interventions and Supports (PBIS <https://www.pbis.org/>).

The LEAs adopted several school environment improvements in order to reduce bullying and improve attendance. In addition, two districts started to use PBIS, and one implemented the intervention developed by Yale entitled RULER (<http://ei.yale.edu/ruler/>). In order to decrease the number of school-based sanctions, Middletown continued to implement and expand the Right Response program to reduce arrests and extreme disciplinary sanctions, which helped Middletown limit the amount of time district students were out of school. New Britain used the Well Managed Schools program to decrease sanctions and Attendance Works to decrease chronic absenteeism.

All of the SSSH LEAs increasingly instituted practices related to the restorative justice approach over the last two years of the project. Although there have been decreases in expulsions and suspensions in the state generally, State Board of Education members recently expressed outrage at the level of discipline in the state, especially regarding racial and ethnic minorities and young students (pre-K to second grade).

(<https://ctmirror.org/2017/05/03/state-board-members-outraged-by-number-of-young-students-suspended/>)

Element 4: Preventing behavioral health problems including substance use

GOAL 4-1. *Connecticut SS/HS partners will promote the success of the Department of Mental Health and Addiction Services' Connecticut Strategic Prevention Framework Coalitions (CSC) and the Partnerships for Success Coalitions to address a diverse set of youth addiction issues.*

The Connecticut Strategic Prevention Framework (CT SPF) Initiative's goal is to develop a comprehensive Prevention Strategy for delivering and implementing effective substance abuse prevention and/or mental health promotion services. The Regional Substance Abuse Action Council is a legislatively-created public/private partnership comprised of community leaders. Its purpose is to establish and implement a strategic plan to develop and coordinate needed substance abuse prevention and mental health promotion services

in the sub-region. These councils cover the state and help local areas develop plans that meet the needs of local stakeholders. DMHAS and DCF have also worked in partnership to train EMPS providers in Screening, Brief Intervention and Referral to Treatment (SBIRT) regarding substance use screening and referral for adolescents.

In order to put these initiatives in context, results from the 2013 Youth Risk Behavior Survey (YRBS) are reviewed here. The 2013 Connecticut YRBS data indicated that 36.7% of Connecticut youth reported drinking alcohol in the past 30 days (US average 34.9%). Thirty-day use did not vary significantly by gender (37% female, 36.4% male). Rates of drinking in the past 30 days did vary by race, with White students (39.7%) reporting higher rates of alcohol use than Black (27.9%) or Hispanic (30.6%) students. However, heavy episodic (binge) drinking of 5+ drinks in a single session was reported more by male (23%) than female (16.8%) students. The same racial differences held, with 22% of White students compared with 12.2% Black and 15.5% of Hispanic students reporting heavy episodic drinking. Connecticut students were also more likely to report marijuana use in the past 30 days (26% total, 22.6% female, 29.4% male) compared with the US average of 23.4%. The numbers of Black (25.4%) and White (25.6%) students reporting current marijuana use were similar, while Hispanic students (27.3%) reported a slightly higher rate. These numbers did not vary significantly from national averages, however, Connecticut students reported being offered drugs on school property at rates that were significantly higher than the national norm of 22.1%. The rate of Connecticut youth being offered drugs was 27.1% overall (24.9% female, 29% male).

Updates and comparisons on the above statistics from more recent CT YRBS data are reported in the Findings section.

GOAL 4-2. *Connecticut SS/HS partners will support the State Epidemiological Outcomes Workgroup (SEOW) to enhance statewide prevention data collection, monitoring and evaluation efforts.*

In 2013, the Connecticut State Legislature reviewed the 2013 Report to Congress on the Prevention and Reduction of Underage Drinking submitted to Congress by the U.S. Department of Health and Human Services. This report reflected all of the legal and policy strategies that Connecticut had applied to underage drinking. Although there was a statistically significant decrease in alcohol use between 2005 (45.3%) and 2013 (36.7%) the rate still exceeded the national average of 34.9%.

In July of 2015, Governor Malloy signed into law the "Second Chance Society" initiative. He announced a federal grant award of \$8,240,940 to improve the reintegration of offenders with substance use disorders and to reduce the risks that frequently lead to imprisonment. A State Epidemiological and Outcomes Workgroup (SEOW) was been

established to review and analyze behavioral health data and use the results to guide decision making on this and other related initiatives.

The SS/HS state plan was to monitor changes in the subsequent Connecticut YRBS and other relevant data. In the LEAs, the Search Institute, School Climate and YRBS data was to be compared to the state averages as these reports became available.

Element 5: Creating Safe and Violence Free Schools

GOAL 5-1. *Connecticut SS/HS partners will increase the implementation support necessary for communities to enact effectively Public Act 11-232: An Act Concerning the Strengthening of School Bullying Laws.*

Connecticut 2013 YRBS data indicated that 6.8 % of Connecticut students reported missing school because they were feeling unsafe. This applied to both male (6.6%) and female (7.1%) students. Although similar rates were reported by White (5.4%) and Black (5.6%) students, nearly twice as many (11.6%) Hispanic students reported that they missed school because they did not feel safe. A significant percentage of Connecticut students reported being bullied (21.9%) in school or cyber-bullied (17.5 %) in the past year per the 2013 CT YRBS. Student reporting varied by race, with fewer Black students (13.0%) compared with White (23.6%) and Hispanic (22.4%) students reporting that they had been bullied in school. Over ten percent (10.8%) of Black students reported that they were cyber-bullied compared to 19.0% of White and 16% of Hispanic students. In 2013, girls were more likely to report being cyber bullied (22.8%) than boys (12.3%).

The SDE School Climate Transformation Grant (SCTG) initiative focused on support to LEAs implementing an evidence-based, multi-tiered behavioral framework for improving school climate. The strategy of improving school climate was designed to reduce the incidents of bullying and to improve student connection to school.

Middletown and Bridgeport implemented PBIS (Positive Behavior Improvement Services). The SCTG is part of the Behavioral Health Plan Strategy (see Element 2) and fits within the goals of Element 5. In addition to PBIS, Bridgeport implemented the RULER program to address emotional intelligence and address school climate, and New Britain implemented Well Managed Schools.

OBJECTIVE 5.A. *Increase the number of school districts (and personnel) receiving positive school climate trainings.*

Positive School Climate trainings provided by the CT SDE continued to be conducted throughout the state throughout the life of the SSHA project.

A multi-agency collaboration led by the Court Support Services Division (CSSD) of the Judicial Branch resulted in a statewide School Based Diversion Initiative (SBDI) designed to reduce the numbers of school based arrests. This initiative was in alignment with the Right Response efforts in Middletown and the initiatives in New Britain and Bridgeport to reduce school-based arrests. The Research Division received annual data from CSSD to track the goals set forth by the Juvenile Justice Policy and Oversight Committee. These goals included an increased rate of diversion by 20%, decreased rate of incarceration by 30% and decrease in the recidivism rate by 10%. The number of arrests in the LEA schools were monitored and shared with SMT and CMT committees formed to address both Element 3 and Element 5.

In July and August 2017, two legislative acts were passed that may have a deleterious effect on some of the positive changes that have been made over the past few years. SR 7276 reduces the number of school district employees who are required to receive training and professional development in physical restraint and seclusion of students. Although this was passed in order to relieve districts from financial burden, it will lead to fewer staff available to handle certain incidents. In addition, there was a repeal of a law that had been instituted to ensure an individualized learning plan to expelled students and required that they receive a minimally adequate education. The repeal allows districts to decide how they provide education to expelled students.

Methodology

In order to evaluate progress in the state and local action plans, both a process and an outcome evaluation were conducted. In addition to tracking the development of the project over time, the process evaluation included an assessment of the state- and district-wide facilitators and barriers to implementation of all the selected interventions, including evidence-based and evidence-informed practices. The process evaluation included tracking such important steps as what trainings and meetings were held in order to implement the various practices, as well as qualitative observations, and, in some cases, focus groups with stakeholders from the participating school districts. Data was collected as field notes from observations made of meetings and implementation of programs. In many cases, the LEA managers collected data on the process indicators in their districts that were targeted to specific interventions implemented.

The outcome evaluation was primarily focused on the required TRAC/IPP and GPRA indicators, as well as the shared indicators selected by the state in the Comprehensive Plan, but included many additional variables that are deemed important to gaining a complete picture of what was happening in the project. The evaluation team gathered data from the parties involved in the SS/HS project, including the LEAs, the State Department of

Education (SDE), the Department of Public Health (DPH), the Department of Children and Families (DCF) and the Court Support Services Division (CSSD) of the state Judicial Branch. In the evaluation, particular attention was paid to disparities based on race/ethnicity, gender, disabilities, poverty, and sexual orientation.

TRAC/IPP and GPRA data

Data that were submitted for the Infrastructure Development, Prevention, and Mental Health Promotion (IPP) quarterly reports were gathered from the state DMHAS and SDE managers and the LEA managers using a monthly data collection tool that was developed by the evaluation team with input from the project managers. The evaluators also reviewed websites and contacted other partners as needed in order to identify policy changes that were established.

The table below illustrates the four required IPP indicators and the data collection methods for obtaining and reporting them.

Figure 1: IPP Indicators and Data Collection

Data Entry	Required Data	Data Source	Collected By	Collection Timeline	SAMHSA Reporting
CDP/TRAC/SPARS	TR1: Number of individuals who have received training in prevention or mental health promotion.	LEA Project Manager SERC Consultant DMHAS Project Manager & Research Assistants	Monthly Data Tool Excel Spreadsheet	Monthly	Quarterly: January 10 April 10 July 10 October 10 through September 2018
	WD2: Number of people in mental health and related workforce training in mental health related practices/activities that are consistent with the goals of the grant.	LEA Project Manager SERC Consultant DMHAS Project Manager & Research Assistants	Monthly Data Tool Excel Spreadsheet	Monthly	Quarterly: January 10 April 10 July 10 October 10 through September 2018
	PC1: Number of state and local policy changes completed as a result of the grant.	LEA Project Manager SERC Consultant DMHAS Project Manager & Research	Monthly Data Tool Excel Spreadsheet	Monthly	Quarterly: January 10 April 10 July 10 October 10 through

		Assistants			September 2018
	PD1: Number of organizations that entered into formal written inter- or intra- organizational agreements to improve mental health related practices and activities consistent with the goals of the grant.	LEA Project Manager SERC Consultant DMHAS Project Manager & Research Assistants	Monthly Data Tool Excel Spreadsheet	Monthly	Quarterly: January 10 April 10 July 10 October 10 through September 2018

The evaluators developed a single monthly data collection tool for the state and LEA managers to fill in all process updates, Collaborator Indicator Data (CID) for the Multisite Evaluation (table below), and IPP (table above). The LEA managers generally obtained the CID data from local sources. The evaluation team research assistants assigned to the LEA helped gather and organize information regarding meetings, the website, supports, contributions, trainings, professional development, and process measures; including pre-filling the monthly data tools before they were sent out to the LEA managers for confirmation and further editing. The tool was completed and reviewed every month, and entered into SHEDS quarterly. The DMHAS and SDE leadership, LEA project managers and evaluators were able to review and compile the information for analysis and reporting. This also provided a mechanism for identifying what data was missing so follow-up could be conducted.

Figure 2: Collaborator Indicator Data

Data Entry	Required Data	Data Source	Collected By	Collection Timeline	SAMHSA Reporting
SHEDS: Collaborator	SS/HS meetings by type of meeting including: <ul style="list-style-type: none"> • # of members/non-members attending; • Meeting format; • Meeting activities/outputs 	LEA Project Manager SERC Consultant DMHAS Project Manager & Research Assistants	Monthly Data Tool Excel Spreadsheet	Monthly	Quarterly: January 10 April 10 July 10 October 10

SS/HS Website and type of contents added	LEA Project Manager SERC Consultant DMHAS Project Manager & Research Assistants	Monthly Data Tool Excel Spreadsheet	Monthly	Quarterly: January 10 April 10 July 10 October 10
SS/HS number and type of support activities and topics addressed	LEA Project Manager SERC Consultant DMHAS Project Manager & Research Assistants	Monthly Data Tool Excel Spreadsheet	Monthly	Quarterly: January 10 April 10 July 10 October 10
Member contributions: <ul style="list-style-type: none"> • Number of organizations, • Number of participants • Type of contribution 	LEA Project Manager SERC Consultant DMHAS Project Manager & Research Assistants	Monthly Data Tool Excel Spreadsheet	Monthly	Quarterly: January 10 April 10 July 10 October 10
Partner contributions: <ul style="list-style-type: none"> • Number of organizations, • Number of participants • Type of contribution 	LEA Project Manager SERC Consultant DMHAS Project Manager & Research Assistants	Monthly Data Tool Excel Spreadsheet	Monthly	Quarterly: January 10 April 10 July 10 October 10

In addition, the evaluators developed Excel data templates which were sent to the main partner agencies (i.e. SDE, DCF and DPH) as part of data requests for various required and desired outcome data. The evaluators sent multiple requests to these and other agencies to obtain Baseline and Years 1-4 data. In the end, most of the required data came from SDE and was found in publicly available websites, most recently EdSight. In addition, although templates were provided, CSSD and DCF sent data in their formats, and the evaluation team was able to pull out much of the needed data or additional information related to the topic of interests (e.g., number of calls from schools to the statewide Mobile Crisis service for behavioral health issues). There tended to be a significant gap between the academic year and the availability of clean data that could be reported.

The required **GPRA** items, all of which are also reported on the Shared Indicators Table,

and data collection plan for obtaining and reporting them are below:

Figure 3: Shared Indicators Table

Data Entry	Required Data	Data Source	Collected By	Collection Timeline	SAMHSA Reporting
SHEDS:GPRA/Shared Indicator Tables	Total number of children and youth served as a result of implementing strategies identified in the LEA comprehensive plan.	EdSight LEA PowerSchool SDE School Enrollment Data	SDE LEA Project Manager	Annual	Baseline: March 2015 Annual Reports Oct 2015 2016 2017 Final Report 2018
	Total number of students who received school-based mental health services .	DPH PowerSchool DCF, EMPS	DPH, DCF, EMPS SBHC Support Staff LEA Project Manager	Requested Annually	Baseline: March 2015 Annual Reports Oct 2015 2016 2017 Final Report 2018
	Percentage of mental health referrals which resulted in services being provided in the community .	DPH PowerSchool DCF, EMPS	DPH, DCF, EMPS SBHC Support Staff LEA Project Manager	Requested Annually	Baseline: March 2015 Annual Reports Oct 2015 2016 2017 Final Report 2018
	Percentage of students who reported consuming alcohol on one or more occasions during the past 30 days.	Search Institute Developmental Assets Survey YRBS School Climate Survey	Search Institute YRBS LEA	Annual	Baseline: March 2015 Annual Reports Oct 2015 2016 2017 Final Report 2018
	Percentage of students who reported being in a physical fight on school property during the current school year.	YRBS School Climate Survey	YRBS LEA	Annual	Baseline: March 2015 Annual Reports Oct 2015 2016 2017 Final Report 2018

	Percentage of students who did not go to school on one or more days during the past 30 days because they felt unsafe at school or on their way to school.	YRBS School Climate Survey	YRBS LEA	Annual	Baseline: March 2015 Annual Reports Oct 2015 2016 2017 Final Report 2018
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In addition, Connecticut’s SS/HS project team selected the following as **shared indicators** for Elements 1 and 3:

Figure 4: Additional Shared Indicators El. 1 & 3

Data Entry	Required Data	Data Source	Collected By	Collection Timeline	SAMHSA Reporting
Shared Indicator Tables	Number and rate of children enrolled in early childhood programs prior to entering kindergarten.	EdSight profile and performance report 2012-13 SDE LEA	SDE LEA	Annually	Baseline: March 2015 Annual Reports Oct 2015 2016 2017 Final Report 2018
	Number and percentage of children chronically absent .	EdSight	SDE LEA in PowerSchool Attendance Office	Annually	Baseline: March 2015 Annual Reports Oct 2015 2016 2017 Final Report 2018
	Number and rate of student suspensions and expulsions .	EdSight	SDE LEA Project Manager	Annually	Baseline: March 2015 Annual Reports Oct 2015 2016 2017 Final Report 2018

How evaluation supported continuous quality improvement

The first use of the data collected was to present it to project leadership and at SMT and CMT meetings. This was useful in terms of identifying areas of need which could potentially guide action. When at least two years of data were available, change indicators were presented to these groups in order to facilitate discussion and to help interpret the findings. One of the main uses of the data was to compare stated project goals and barriers to implementation. On an on-going basis, the evaluators continued to provide the Project Director and managers with data relevant to the current phase of implementation. Through the course of the project, there was development of greater sharing of data. This reporting combined data from all available sources. The information was used by the stakeholders to understand issues facing the program and to consider course changes. The timing of milestones was also compared to the project timeline.

If the LEAs or SMT made changes in order to improve a program aspect or to adjust to contextual variables, the evaluators tracked these and adjusted evaluation plans if needed. In some cases, the data first presented by the evaluation team may have signaled the need for modification. The evaluator then tracked changes made in response to the problem and presented follow up data to help determine whether further changes were needed.

Monthly in-person meetings or conference calls with grant-related staff at each LEA, as well as regular meetings with DMHAS and SDE leadership, enabled evaluation team members to gather information about changes in policies and procedures that were enacted at the school or district level and the development of inter-organizational agreements developed as a result of the grant. These meetings also enabled the evaluation team to provide feedback to district staff so that they could make data-informed decisions to promote the goals of the grant. Progress reports on implementation and data collection were provided on a regular basis to all involved parties. If problems were noted, discussions were held to strategize how to strengthen implementation of current procedures or to modify the procedures.

Evaluation team members developed a tracking method to help manage the data collection requirements of the grant. They also developed data gathering tools to facilitate this data collection process.

The evaluators also offered to conduct special projects at the involved LEAs in order to investigate research questions of the most interest that would not be answered by other methods, although only Bridgeport accepted this offer. As a result, we conducted focus groups in Bridgeport with LGBTQ students in the spring of 2016, and conducted further analyses of LGBTQ-specific survey results.

National Multi-Site Evaluation Participation

Connecticut and its LEAs participated fully in the National Multi-Site Evaluation (MSE). Our representatives received training on the MSE protocols, including data collection, management, and reporting procedures, as well as common data collection tools and measures. The research team has a long history of participation in SAMHSA grants and has regularly contributed to cross-site evaluation projects designed to assess the success of multi-site projects.

The Connecticut research team assisted the MSE researchers in their evaluation. Initially, the team helped with the identification of key informants to provide feedback about planning and collaboration among LEA and state level partners. Our close work with all of the stakeholders helped us to identify the individuals who were best equipped to answer the instrument domains. The online survey responses gathered from state and district collaborators enabled the research team to identify some of the ongoing barriers to achieving grant-related goals. This data-driven decision making tool provided a basis for problem solving remaining issues. Finally, our staff compiled and entered the data into the SHEDS database for the State Collaboration and LEA Collaboration Indicator tool.

To assist with the evaluation of Implementation, research staff worked with district and state level team members to identify the key informants. These individuals completed the first round of phone interviews and surveys designed to assess the success of the process. At the LEA level, the research team helped the LEA managers to submit lists of appropriate family members and school partners for the School Level Survey.

Institutional Review Board

The bulk of the data collected for this evaluation was publically available and/or non-identifiable, and often not at the individual level. In addition, the evaluators were not usually involved in data collection, but were receiving data collected from other sources. Therefore, the only pieces of the evaluation that were submitted to the IRB were related to the LGBTQ studies at the Bridgeport LEA. IRB approvals were received and updated as needed. Final IRB reports were submitted last year to close out the project.

No-Cost Extension Year

During the fifth year, a no-cost extension was granted. Since one of the three LEAs did not participate and the overall funding level was reduced, activities were not as intense as in previous years, but did continue. Most activities were focused on sustainability for the state and remaining LEAs, and on completion of data collection and analysis for the evaluators.

During the NCE, the SMT and Data Management subcommittee continued to meet. The Data subcommittee finalized various documents and procedures intended to assist school districts going forward with best practices in data collection and sharing to enhance the availability of behavioral health services. The leadership also set up a large statewide conference in the final year to disseminate practices that were utilized in the SSHS LEAs as well as general socio-emotional learning best practices. The state leadership also arranged for in-depth technical assistance for ten schools across the state in SEL. In addition, the state provided trainings focusing on Elements 2 and 5 during the no-cost extension year. Element 2 trainings included for example Positive Behavior and Interventions Supports (PBIS) and creating behavior support plans. Two of the Element 5 trainings were on the topics of restraints/seclusions prevention and dismantling systemic racism in schools.

During the no-cost extension year, Bridgeport schools provided staff trainings focusing mostly on Elements 2 and 3. Element 2 trainings prepared their teachers, staff, and administrators on cultural competency and social emotional functioning. A number of these trainings also focused on building capacity to sustain the Boys Town model by using the Train the Trainer model. Element 3 trainings focused primarily on using the Train the Trainer model to sustain restorative practices within the Bridgeport school system.

During the last year, New Britain Schools provided their staff trainings focusing on Elements 1 and 5. Element 1 trainings prepared their teachers and staff for developmentally appropriate practices with young children through their Executive Functioning curriculum. Element 5 trainings concentrated on school safety which included an Active Shooter Training provided to all of their staff. In addition, they had a one-day Love Wins Conference training for all their district staff on Element 3 (connecting schools and families) providing staff on trauma-informed and engagement practices.

At the end of Year 4, many of the data points needed to complete the outcome analyses and reporting were not yet available. A fifth year via no-cost extension was vital in order to be able to obtain and analyze the four years' of project data. A large statewide conference was held through SSHS funds on SSHS-related topics with the purpose of enhancing sustainability of SSHS priorities. The evaluators were able to add several questions regarding future priorities to the conference feedback survey. (The results from this are reported in the Findings section.) The evaluators continued to collect quarterly IPP data from the LEAs and state leaders, and continued to report it on the SPARS website. Research staff participated in many of the SSHS webinars available online including the Framework Implementation Toolkit and the OLE Communicating Data for Sustainability. In addition, the SSHS grantee profile featuring Connecticut's efforts on the grant was updated by the research staff. The evaluation team presented data from the entire project to the SMT at their final meeting.

Data Analytics

To a large extent, descriptive analyses were utilized. Given the development of the available data over time and the indirect data collection methods, the evaluators were often limited in what data was available and how much it could be manipulated. For instance, some data was provided with just percentages and no way to determine numerator and denominator, or often given totals with no way to break down individual cases. We often were just able to compile and present what was available in ways that provided some insight into subgroup comparisons and changes over time.

Where actual values were available, we calculated Chi Square and Cohen's d for changes between Baseline (or earliest available year) and Year 4 (or last available year). Where only percentage points were available, an effect size (Cohen's d) was calculated using the formula reported by Dennis, Lennox, & Foss (1997) for effect sizes using percentage differences:

$$2 * \text{ARCSIN} (\% \text{ for Comparison group}) - 2 * \text{ARCSIN} (\% \text{ for Baseline or State})$$

Effect sizes using standard cutpoints of .2 for a small effect, .5 for a moderate effect and .8 for a large effect were reported where applicable.

For Statewide YRBS data, the confidence intervals were compared for groups of interest. Non-overlapping confidence intervals are reported as significantly different. For example, past 30 day alcohol use for Males was significantly higher in 2013 (36.4% (CI: 31.9-41.2)) than in 2015 (28.0 (CI: 24.5-31.7)). While the percentage also decreased for females in the same time periods, the confidence intervals between 2013 (37.0 (CI: 32.2-42.0)) and 2015 (32.0% (CI: 28.3-36.0)) overlap, so the difference is not considered significant.

For Qualitative data, thematic analyses were conducted, especially for the LGBTQ focus groups and process observations.

LEA Work Plan & Evaluation Plan Updates

Over the course of the project, various specific changes to the LEA work plans occurred, and the evaluation plan was modified as needed to keep up with those changes. These changes were described in detail in previous evaluation reports, and will not be reiterated here. The priorities set forth in the statewide comprehensive plan remained unchanged.

There were some changes to the planned evaluation. We had intended to conduct an on-line staff survey assessing the type and number of gate-keeper trainings completed and the number of mental health referrals made to see if there was an association between type or number of trainings and an increase in actual referrals. The plan was to conduct staff

surveys in Spring of 2016 and 2017. It was difficult to find an appropriate time that year to conduct these surveys as so many trainings were on-going and the staff were called on to complete many other surveys, both related and unrelated to SS/HS. The LEA managers decided that we should not pursue this component.

We had offered to conduct a more in-depth sub-study for each LEA, of their choice. A study on LGBTQ high school students' experiences, concerns and recommendations was conducted for Bridgeport (see Findings). New Britain had selected analyses of their Well-Managed Classroom data as their study of interest, and some steps were taken to do this, but it was dropped by the LEA. Middletown did not end up selecting an additional project for us to conduct.

In addition, the evaluators had proposed to create "success" ratings of the implementation of the LEA workplans. However, there were concerns over the interpretation of these potential ratings, and about the value of rating alterations to the original plans as not being evidence of success, as well as trying to reduce complex and varied interventions to simple numbers. For these reasons, success ratings were not done.

Findings

It should be noted that there were significant changes to data collection and reporting from the CT Department of Education, which was the source for many of the data points needed for our analyses. On April 18, 2016, the Connecticut State Department of Education announced the launch of EdSight, "a new interactive data website that will...streamline online access to important school and district information....from over 30 different sources" including school districts and other external sources.(EdSight Launch Press Release). In September 2016, CSDE informed us that we could/should start getting our data from the EdSight portal. We noted that the prior data and data available on EdSight often differed. Upon inquiring about the differences, CSDE noted in an email "We have instituted new data practices such as freeze dates and Facility 1 comparisons which have created the data differences you are seeing when looking back to CEDaR data. EdSight is the most accurate and official data reporting source." Due to the differences between prior data received for SY2012-15 (and some of 2015-16), SSHS reports were updated to reflect data available on EdSight wherever possible. Due to differences in how the data were calculated before and after these changes, the ability to make direct comparisons over time is limited.

First, descriptive observations based on enrollment data for the state and the three project LEAs are provided below. Enrollment data from CSDE was made available from the 2012-13 school year through the 2016-17 school year. As can be seen in the graphs below,

Bridgeport and New Britain had significantly higher levels of low income students, as evidenced by free or reduced lunch eligibility, than the state averages and as compared to Middletown. In 2016-2017, Bridgeport’s value for FRL eligibility changed significantly from nearly 100% reported as eligible to 51%. The LEA manager suggested this might be due to better data from parents re: income or magnet schools being added/drawing from suburbs. It also followed the election of a new mayor in 2015.] Bridgeport does participate in Community Eligibility Provision (CEP), which allows schools that predominantly serve low-income children to offer free, nutritious school meals to all students. The Bridgeport and New Britain LEAs also trend higher for English language learners (ELL), while special education rates are similar for all three districts and the state. These proportions have remained largely consistent across the grant years, although there seems to be a slight uptick in special education rates across the state.

Figure 5: Free/Reduced Lunch

Enrollment Demographics Eligible for Free or Reduced Lunch 2012-2017

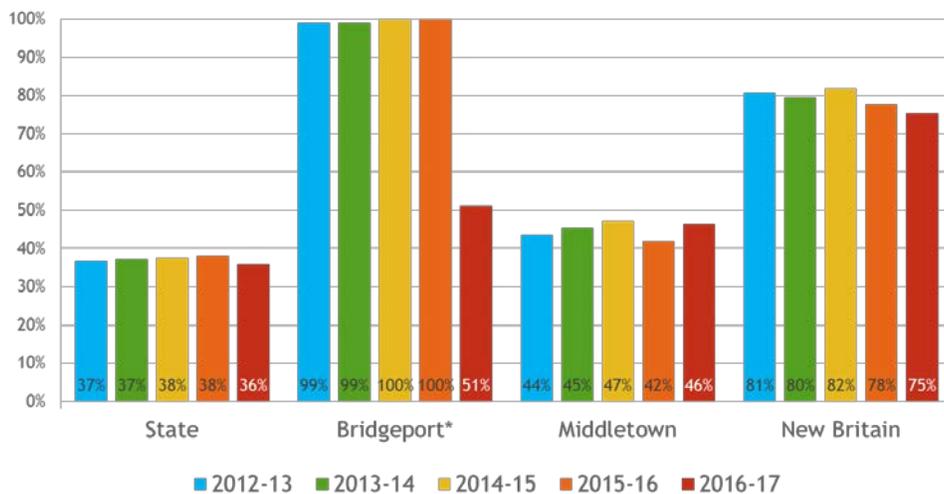


Figure 6: ELL

Enrollment Demographics English Language Learner 2012-2017

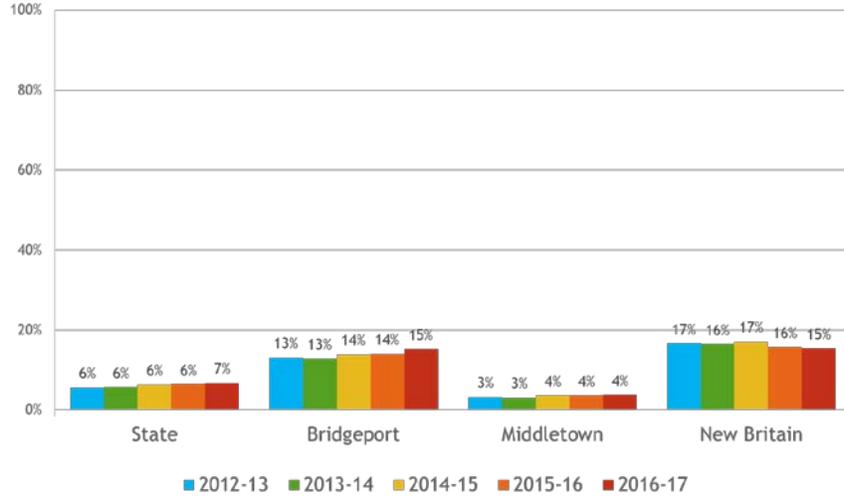
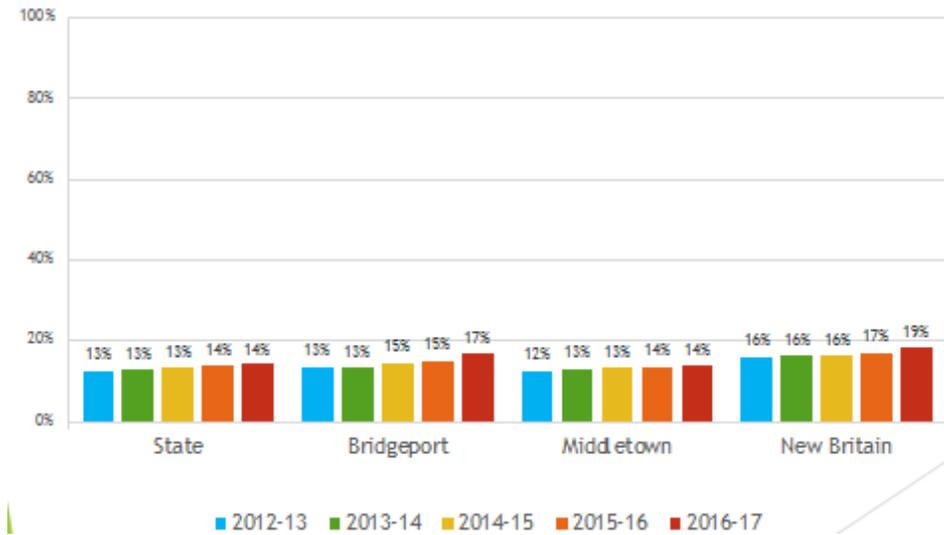


Figure 7: Special Education

Enrollment Demographics Received Special Education 2012-2017



In terms of gender, the graph below indicates that there have been fairly equal numbers of girls and boys across the LEAs and state, steadily over time. Race/ethnicity is more diverse

in the selected LEAs than for the state overall, and more so in New Britain and Bridgeport than in Middletown.

Figure 8: Gender

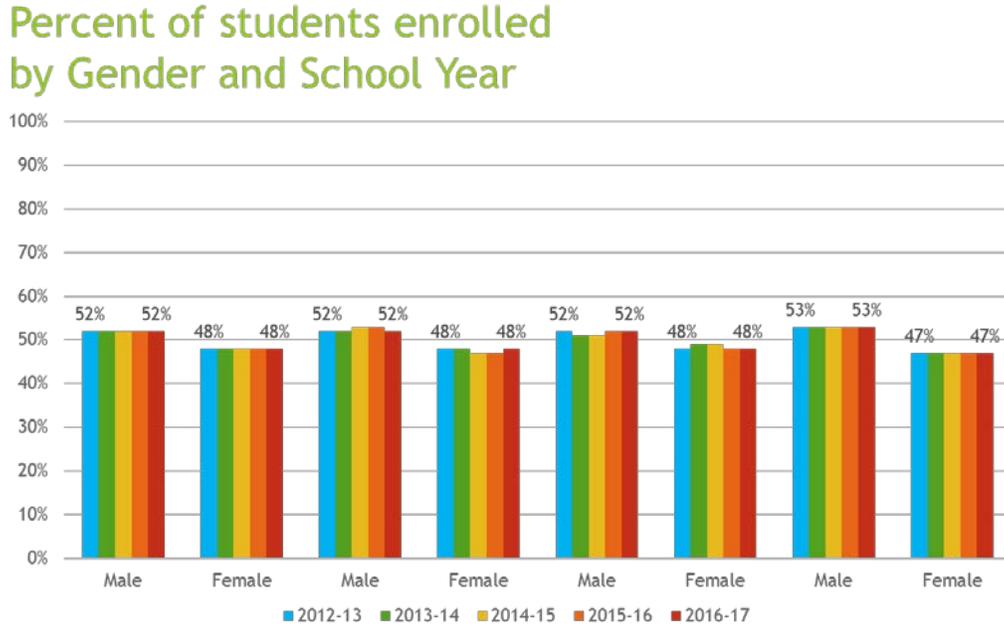


Figure 9: Race

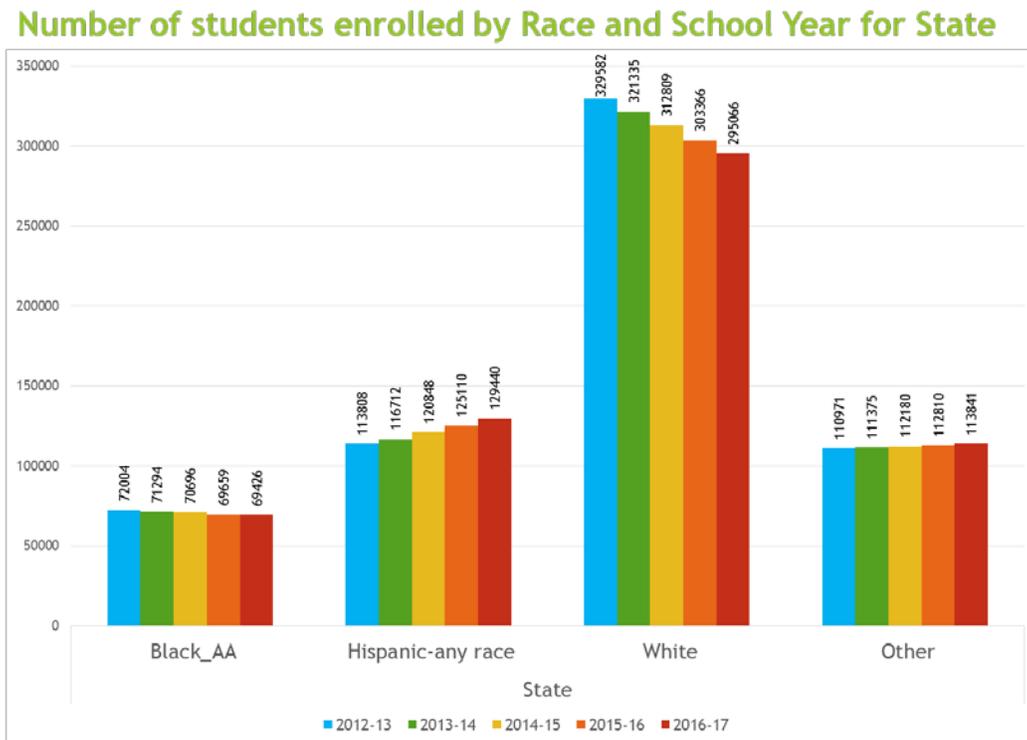
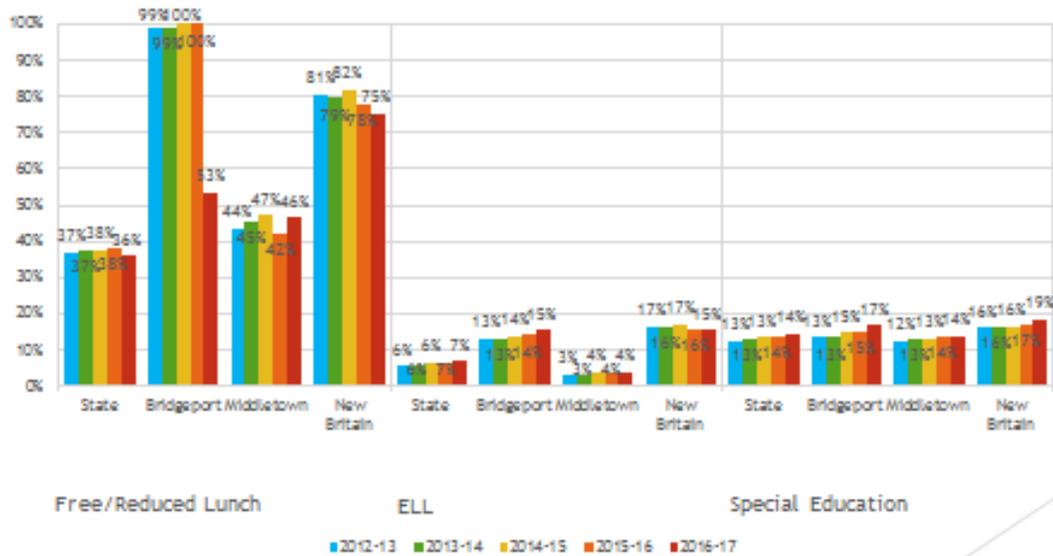


Figure 10: Combined Free/Reduced Lunch, ELL, Special Ed.

Enrollment Demographics 2012-2017



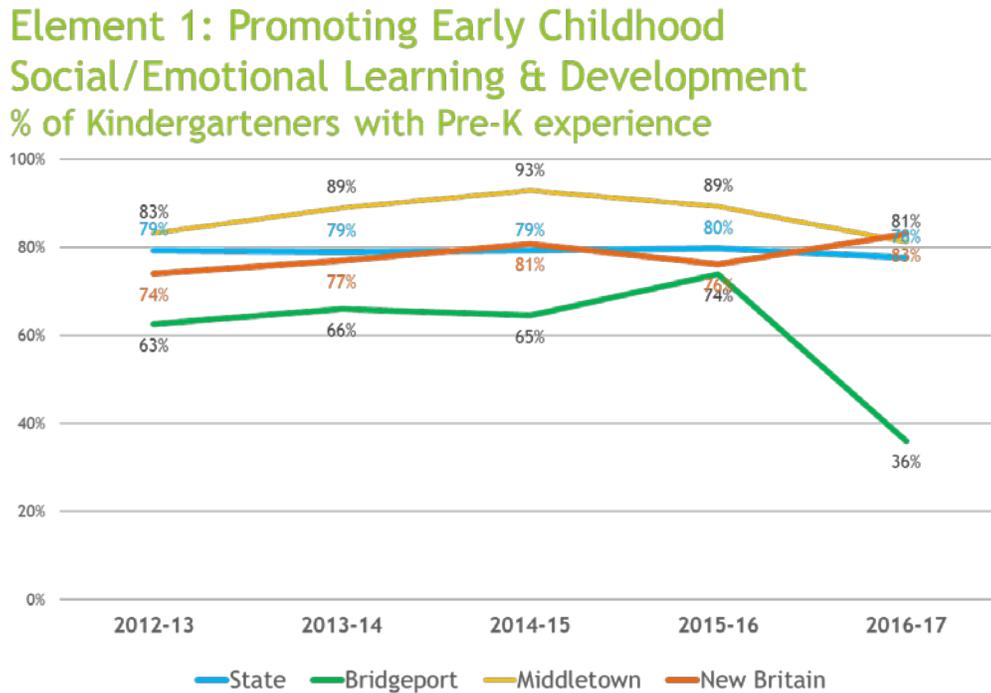
*In 2016-17, Bridgeport revised their calculations for Free/Reduced Lunch status.

Element 1

In terms of implementation activities related to early childhood, the state and LEAs conducted trainings with approximately 1,349 individuals during the course of the grant. There is evidence of some improvement in terms of proportion of kindergartners who had preschool experience in the SSHS involved LEAs. Bridgeport especially showed a statistically significant increase from baseline, although their percentage was still significantly lower than the state average. However, there was a significant drop in Year 4 in Bridgeport. This may have been due to data availability issues, although the LEA manager also said that there were problems with preschool, including finding children to fill the available slots and parents reporting that they were unable to cover the parent portion of the cost of childcare.

The state rates remained fairly constant over time. Middletown showed an increase from Baseline, but evidenced decreases in the last two years. Middletown was consistently above the state rates in every year, however. New Britain seemed to be showing a general increase and was above the state average last year.

Figure 11: Kindergarteners with preschool experience



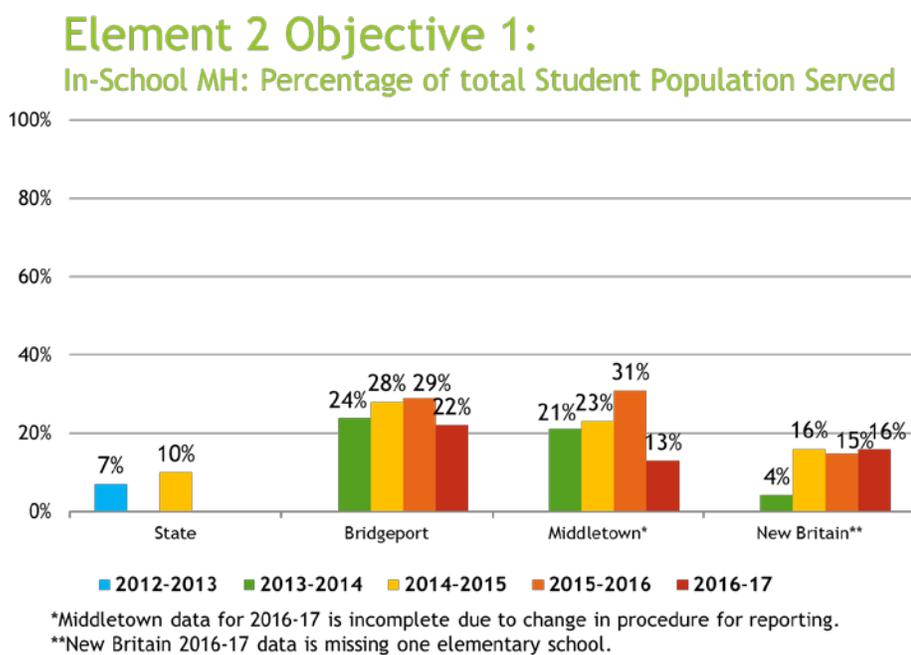
Element 2

Providing mental health services to students who needed it was one of the major focuses of the CT SS/HS project. In order to monitor progress on this goal, it was necessary to set up mechanisms to try to consistently gather mental health service data. There was progress towards setting up such a system at the LEAs and for the state, but some difficulties were experienced, resulting in what remained inconsistent data collection. However, all the partners agreed that establishing systematic behavioral health data collection would remain the main focus of sustainability at the state and LEA level. IPP data also illustrates the amount of effort being expended in this Element. A total of 10,597 mental health professionals and 908 non-professionals received mental-health related trainings during the course of the grant.

Data received from the LEAs for the final year remains incomplete (change in collection procedures=lower than expected N, missing school). Bridgeport’s 2016-17 data was reported directly by the two School Based Health Centers as opposed to the district data from the previous years. Middletown had a new collection process by using PowerSchool to report MH numbers in 2016-17. New Britain has one school missing for 2016-17. At the state level, the SDE provided the number of students served by the School Based Health Centers but did not provide the number of students enrolled for SY13-14, so percentages

cannot be calculated for Year 2. All groups increased the percent served from Baseline to year 3 with Middletown and New Britain showing a small effect ($d=.23$ and $.27$ respectively). All three LEAs had significantly higher percentages of students served than the State in Year 3 with Bridgeport and Middletown showing a small effect ($d=.33$ and $.35$ respectively). There is some evidence of increases in the provision of mental health services at the state level and in two of the involved LEAs. This increase continued for the state in year 4 (15.1%) which was significantly higher than baseline (7.1%) showing a small effect ($d=.26$). The data provided by the two SBHCs in Bridgeport for year 4 (22.0) did not differ significantly from the Baseline value of 23.5.

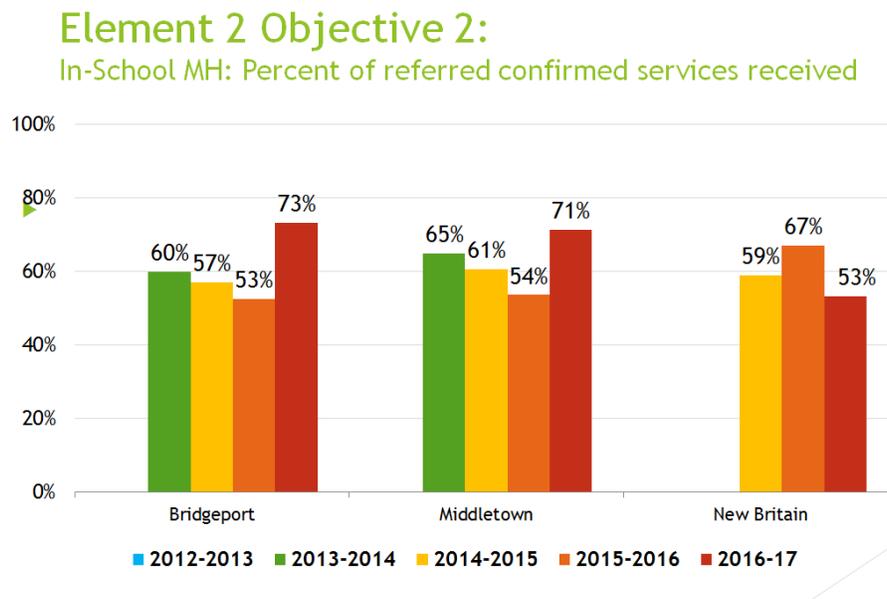
Figure 12: Students receiving school-based mental health services



In terms of referrals from the schools to mental health services in the community, this has been more difficult to track, but there is also some evidence of improvement. The referrals are not tracked at the state level at all. Although there are significant data limitations, the LEAs demonstrated some evidence of improvements on this variable. Note that New Britain was missing data from one school for 2016-17, and Middletown changed its data collection methodology, which may have resulted in spurious variations over time. None of the changes from baseline¹ to year 3 represent significant differences. The increase from Baseline to Year 4 for Bridgeport is significant with a small effect ($d=.29$).

¹ For New Britain, Year 2 (2014-15) is counted as the Baseline for this item.

Figure 13: Confirmed mental health services provided in community

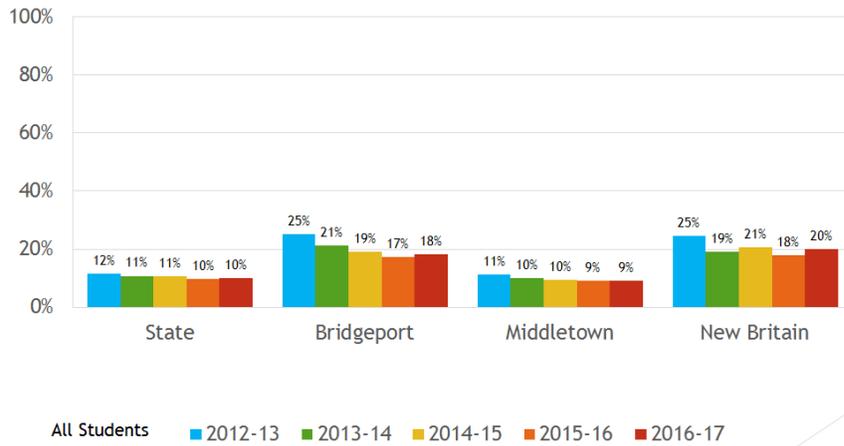


Element 3:

In terms of activities conducted in order to strengthen school/student/family/community connectedness, the state and LEAs conducted trainings with approximately 6,289 individuals over the course of the grant. All the initiatives related to this Element seem to have resulted in evidence of improvement in chronic absenteeism rates. All the LEAs (and the state) have shown a significant overall reduction in chronic absenteeism from baseline to 2015-16 that remained significantly lower than baseline in 2016-17. Bridgeport and New Britain absenteeism rates remained significantly higher than the state in 2016-17, however. High school, ELL and lower income students exhibit higher absentee rates than other groups of students.

Figure 14: Overall chronic absenteeism rates

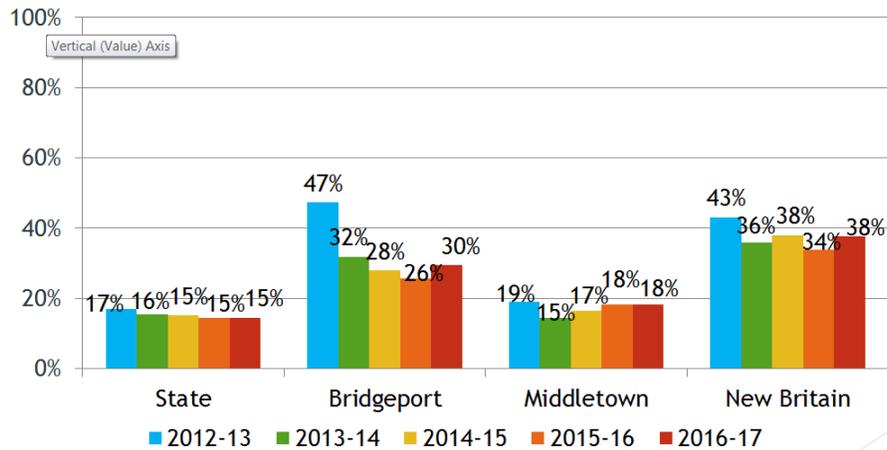
Element 3 Objective 1: Family, School & Community Collaboration-Chronic Absences 10%+



High School absenteeism rates for Bridgeport dropped significantly between baseline and 2013-14 (representing as small effect (Cohen’s $d=.34$) and remained lower than baseline across the remaining years of the grant. In New Britain, the chronic absenteeism rate for High School students in 2015-16 showed a reduction from 43% at baseline to 24% (small effect; Cohen’s $d=.202$). In the same time period, New Britain’s Middle School students’ (not shown) chronic absenteeism rate dropped from 27% to 17% (Cohen’s $d=.197$). Both Bridgeport’s and New Britain’s baseline rates were significantly higher than the state at baseline (moderate effect; Cohen’s $d= -.65$ and $-.55$ respectively). While still higher than the state for each subsequent grant year, after the baseline year the effect size for both LEAs represented a small effect (i.e., Cohen’s $d <.5$).

Figure 15: High school students' chronic absenteeism rates

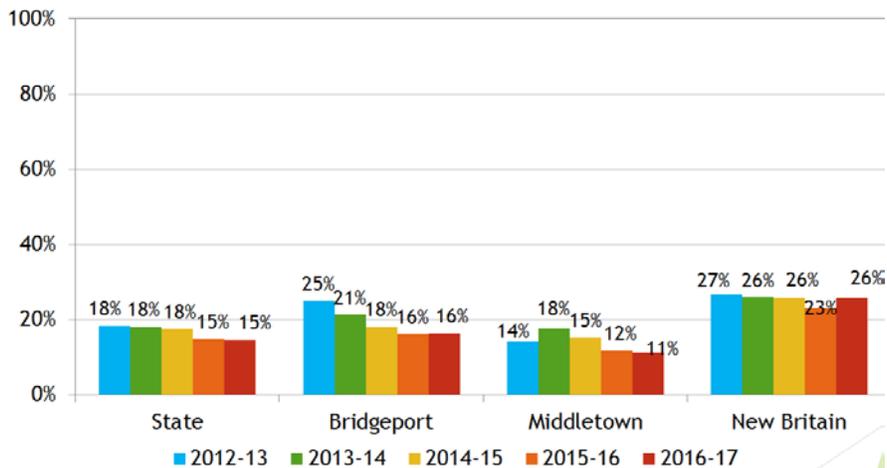
Element 3 Objective 1: High School Chronic Absences 10%+



For students who were English language learners, the chronic absenteeism rate did not show a clinically meaningful change for any group. Bridgeport's reduction from 25% at baseline to 16% in 2015-16 and 2016-17 was close to a small effect ($d=.18$).

Figure 16: English language learner chronic absenteeism rates

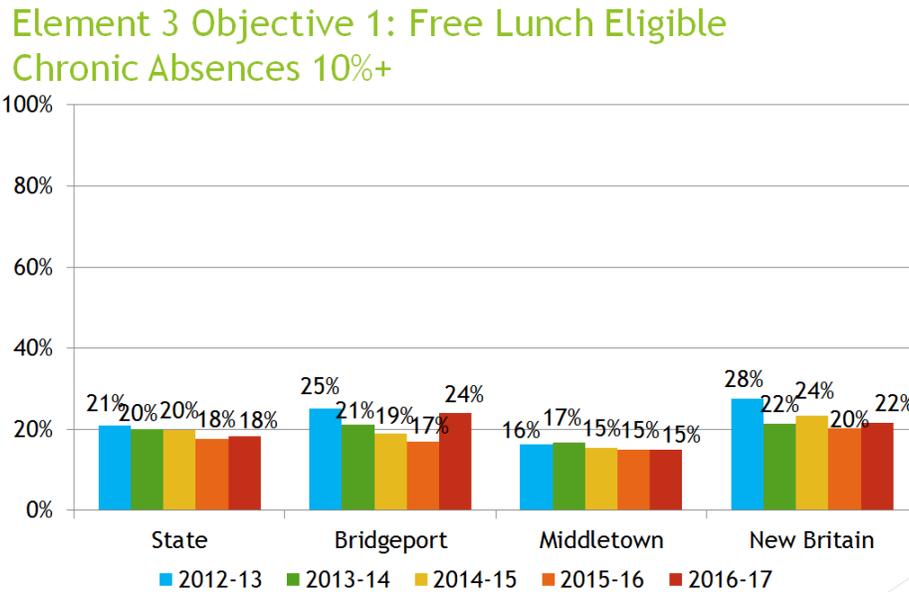
Element 3 Objective 1: English Language Learner Chronic Absences 10%+



For students eligible for free lunch, the chronic absenteeism rates did not meaningfully change from baseline. Bridgeport's rates for these students match their overall rates from baseline to 2015-16, since during those years, it was reported that virtually 100% of Bridgeport students were eligible for free or reduced lunch. In 2016-17, Bridgeport's

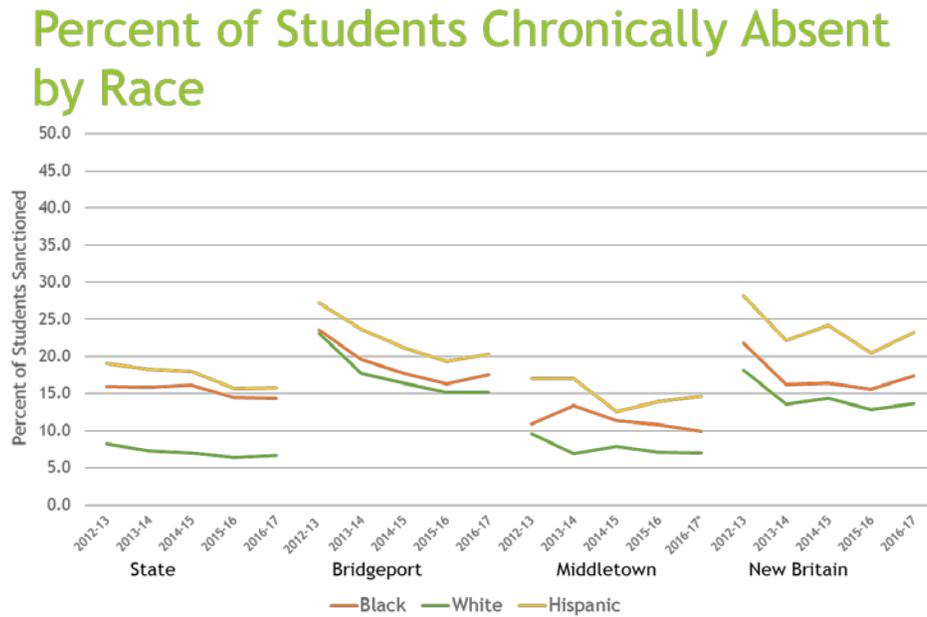
report of FRL eligibility change to just over 50% of student's eligible. This change may be related to any (or none) of the changes in Bridgeport during that time, including, the election of a new mayor in 2015 , better procedures for reporting parents' income, or the opening of district-wide magnet schools.

Figure 17: Free lunch eligible chronic absenteeism rates



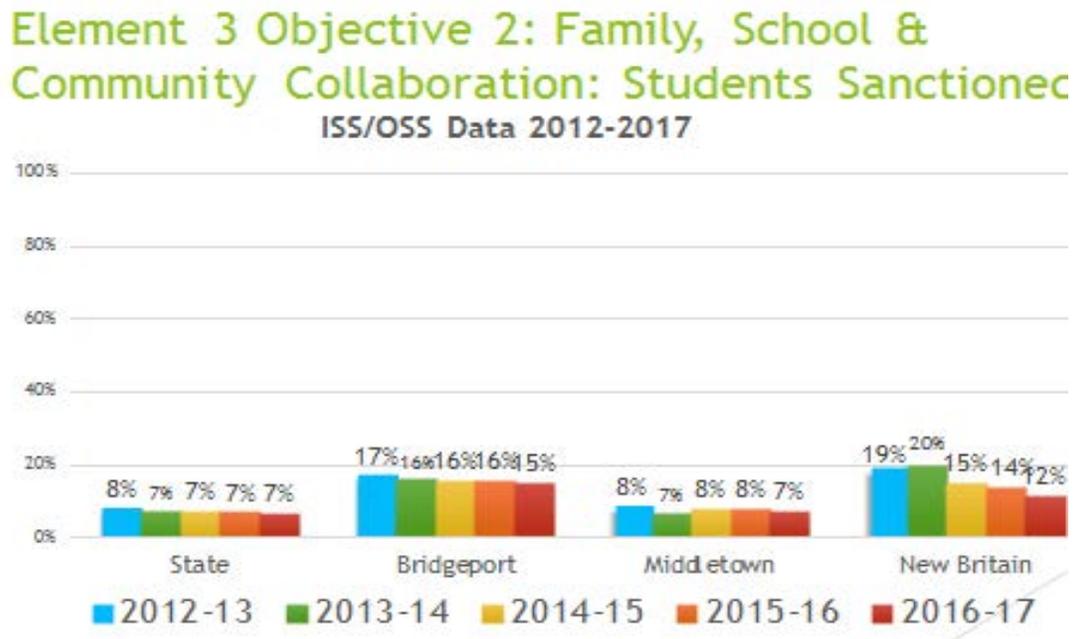
Although the changes within race from baseline to later years were not quite clinically meaningful for any LEA or the state, the reductions were most consistent across race groups in Bridgeport. Bridgeport's absenteeism rates was significantly higher than the State for White students at baseline and year 1 (Cohen's $d = -.30$ and $-.21$ respectively).

Figure 18: Students' race group chronic absenteeism rates



Suspensions and expulsions are included in absentee calculations, and were also a particular focus of initiatives in CT, especially as they seem to disproportionately affect minority students. As can be seen in the graphs below, Bridgeport and New Britain had significantly higher rates of disciplinary actions than the state average in all years.. However, both Bridgeport and New Britain evidenced significantly lower discipline rates in years 2, 3 and 4 as compared to the baseline year.

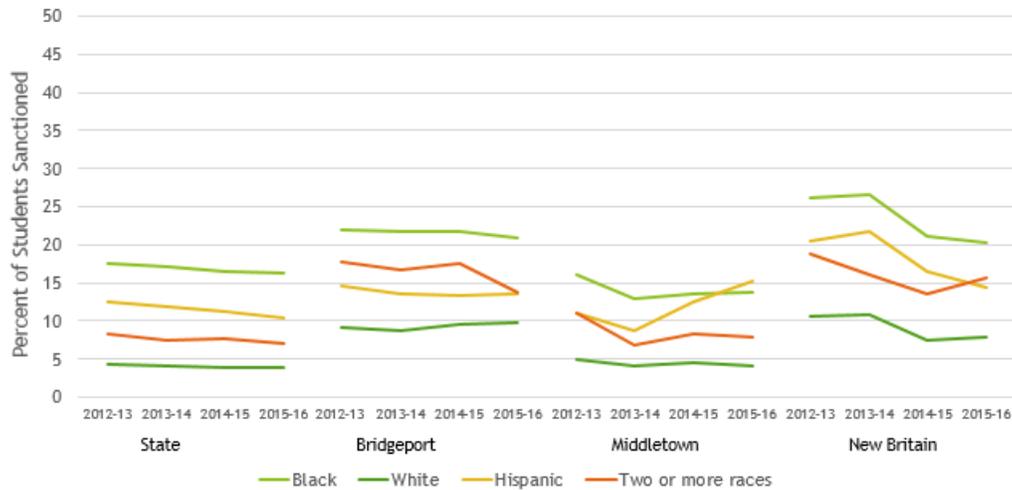
Figure 19: Overall Suspension rates (ISS/OSS and expulsion)



In terms of race and ethnicity, the highest discipline rates were seen for Black students and the lowest for White students, with Hispanic and multi-racial students in between. This pattern is consistent across locations and time with one exception for Middletown in 2015-16 where the rate for Hispanic students was non-meaningfully higher than that of Black students. For Bridgeport, the suspension rate for multiracial students decreased from baseline in 2016-17 but that change may not have been clinically meaningful ($d=.16$). A similar result may have occurred in Middletown but due to the low number of multiracial students who received sanctions in 2016-17, these data were masked by the state for the first time during this grant. In New Britain, the suspension rate for Black students showed a meaningful decrease from 26.1% to 16.1% (Cohen's $d=.20$). While the rate for Hispanic students showed almost parallel declines, this change may not have been clinically meaningful ($d=.16$). In 2012-13, Multiracial students in New Britain had significantly higher suspension rates compared to the state ($d=.21$). In the following year (2013-14), Hispanic students in New Britain had significantly higher suspension rates compared to the state ($d=.20$). By 2016-17, no New Britain racial group was meaningfully higher than the state.

Figure 20: Racial breakdown (no 2016-17 data)

Percent of Students Sanctioned by Race



In terms of gender, male students received more disciplinary sanctions than female students across the board in terms of location and year, although this difference was clinically meaningful only for New Britain in 2013-14. At baseline and in 2013-14, the suspension rates for male students in New Britain were significantly higher than for male students statewide ($d = -.25$ and $-.29$ respectively).

Figure 21: Suspension rates by gender

Percent of Students Sanctioned by Gender

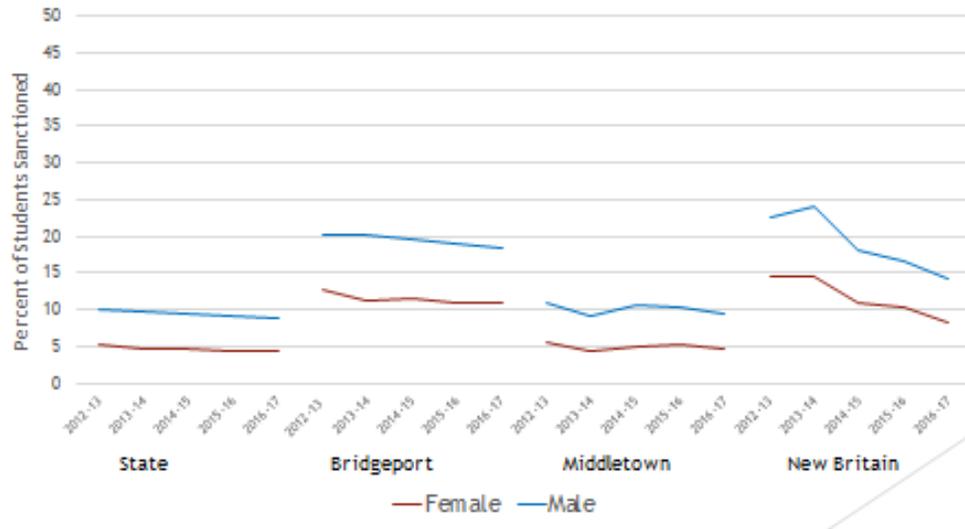


Figure 22: ISS sanctions per student enrolled

Sanctions: In school Suspensions per Student Enrolled

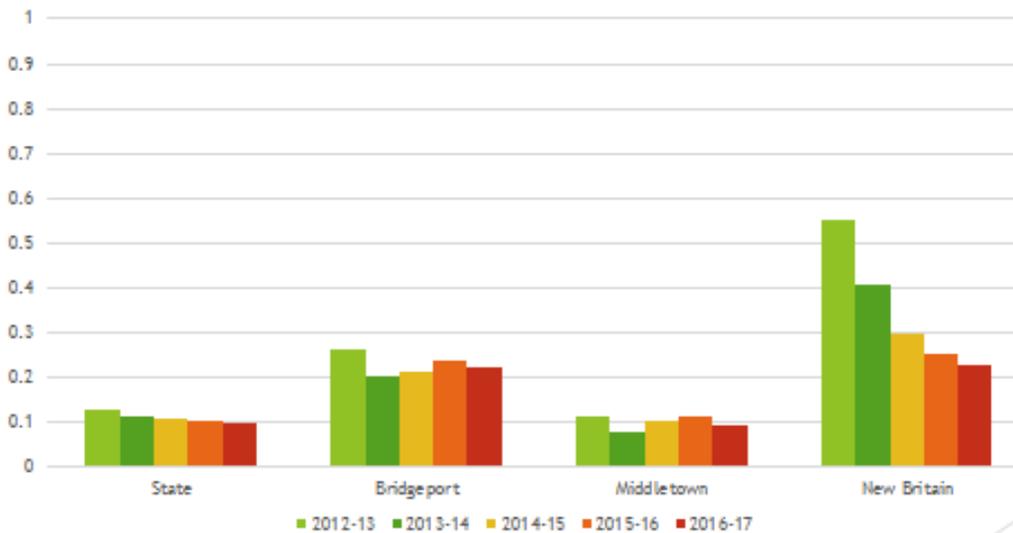


Figure 23: OSS sanctions per student enrolled

Sanctions: Out of school Suspensions per Student Enrolled

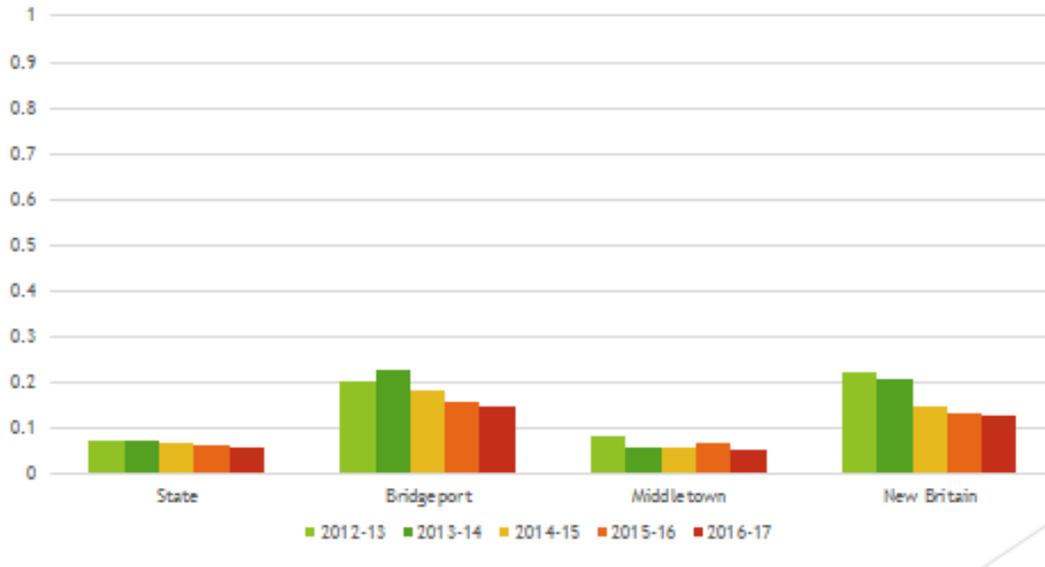
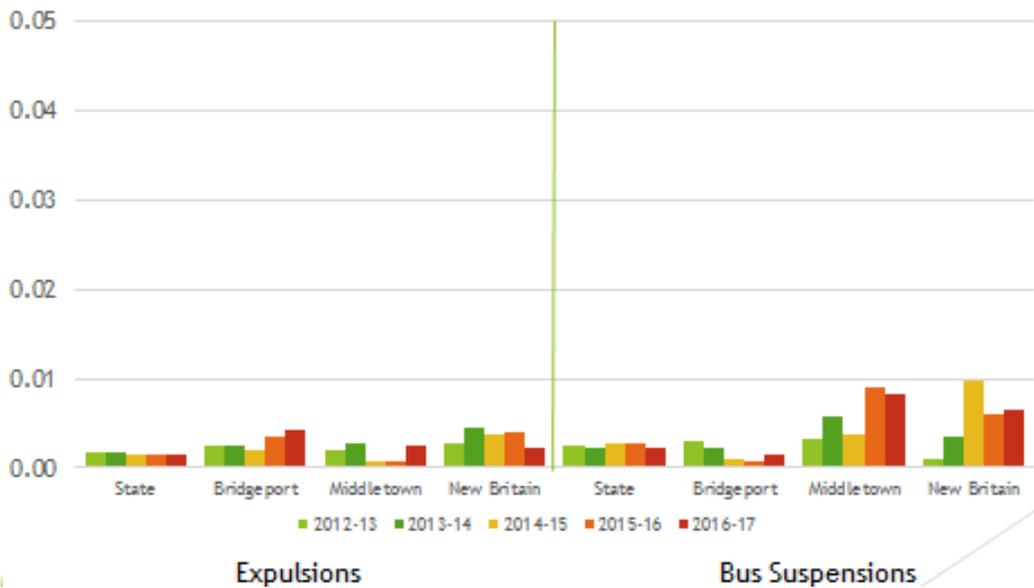


Figure 24: Expulsions & bus suspensions sanctions per student enrolled

Sanctions: Expulsions & Bus Suspensions per Student Enrolled



In terms of arrests, it can be seen in the chart and table below that New Britain students have been arrested at a much higher rate (per thousand students enrolled) than the other LEAs across the five years of data available. The total number of arrests in Middletown is low, but parallels the state rate.

Figure 25: School Arrests

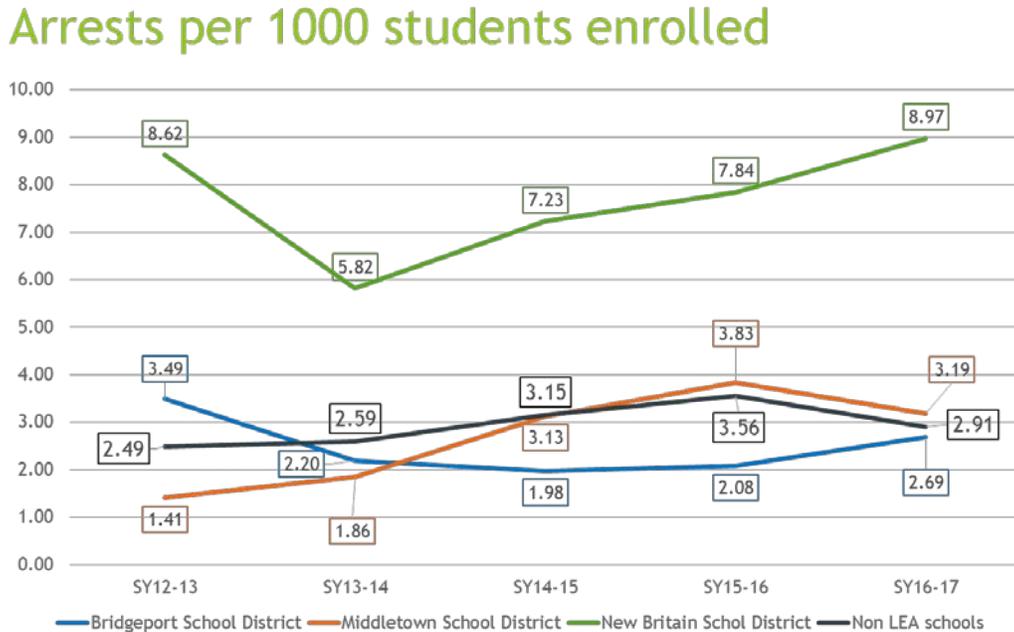


Figure 26: Number of arrests within LEA by school year.

Number of arrests per school year by LEA

	SY12-13	SY13-14	SY14-15	SY15-16	SY16-17
Bridgeport School District	71	46	42	44	57
Middletown School District	7	9	15	18	15
New Britain Schol District	89	59	73	79	91
Non LEA schools	1293	1332	1608	1801	1463
STATEWIDE	1460	1446	1738	1942	1626

School Climate items (Elements 4 & 5)

There was an issue with inconsistent data collection since none of the LEAs had an established mechanism to measure these items either as needed for the grant or at all. YRBS uses the grant wording, but none of the LEAs were regularly conducting YRBS surveys. At the state level, the YRBS is administered only every other year. Each of the LEAs had to create an annual data collection mechanism for this indicator (and some of the other GPRA items). However, there were variations in the surveys utilized over the grant years and in each LEA. Some surveys had different wordings and were administered at different times of the year and with different samples.

In Bridgeport, Search Institute data was administered in the spring of 2011 (reported as the baseline for past month alcohol use) and 2013-14. In 2014-15, Bridgeport had developed a School Climate survey, but administration for that year required active consent by parents (i.e., students could only respond to the survey if they had signed permission from their parent/guardian.) For the third year of the grant, Bridgeport conducted YRBS in the spring of 2016. No further school climate measures were conducted during the 2016-17 school year.

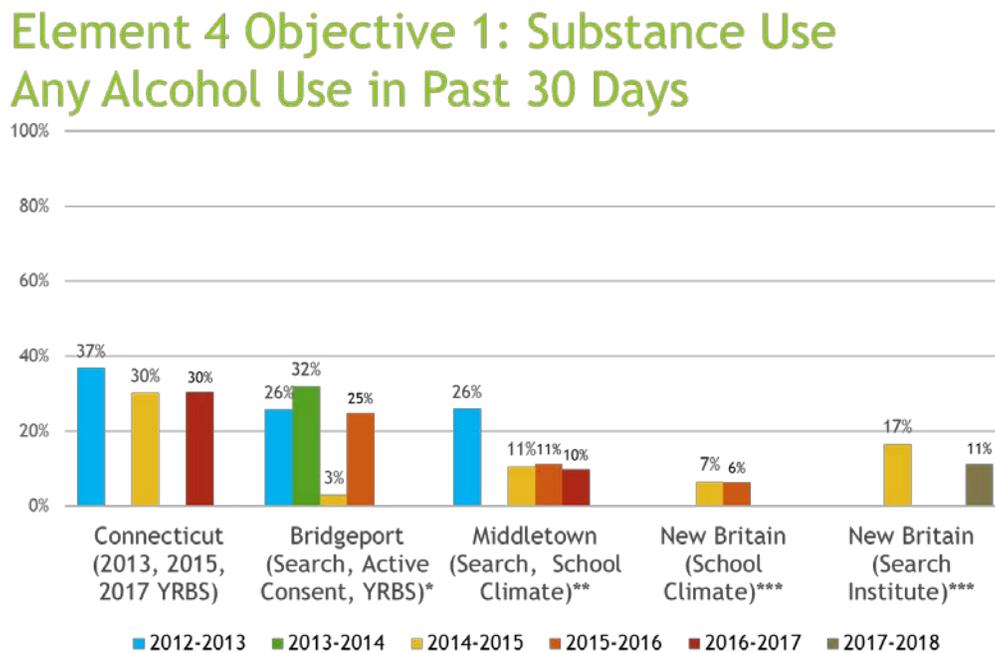
In Middletown, Search Institute was collected in the spring of 2012 (reported as the baseline for past month alcohol use). For 2013-14, Middletown was developing their School Climate survey so no data are available. This School Climate survey was conducted and reported for 2014-15, 2015-16, and 2016-17.

In New Britain, no school climate data with these three items was available at baseline or 2013-14. By 2014-15, the LEA had developed a School Climate survey that was used by various groups of schools at varying times throughout the year. Some versions of this survey did not include the three items for GPRA indicators 4 through 6. As a result, the School Climate survey conducted in the spring of 2015 (2014-15 school year) consisted primarily of Middle School students (96.8%) and the fall of 2015 (2015-16 school year) was more balanced (52.3% Middle School students). In 2015, New Britain also conducted the Search Institute survey in two sessions; one for Middle School students in the spring and for High School students in the fall. The evaluators were instructed to combine the results of these two administrations to be reported as 2014-15 data. New Britain also conducted Search Institute again in the spring of 2018 as part of the end-of-grant activities. The purpose was to compare pre and post data to gauge the impact of the SSHS project. Because the SI surveys did not have the exact SSHS required wording, New Britain chose to include the SSHS required wording questions in their annual school climate surveys.

Element 4

Substance use seemed to have received a somewhat less intense focus in the CT SS/HS project, with a relatively small number of individuals (357) receiving training specifically related to this Element (although other trainings allocated to other elements included substance use and a number of trainings were related to multiple elements), and fewer activities in the work plans as well. Nevertheless, the required indicator of 30 day alcohol use seemed to have shown some improvement, but due to the methodological issues described above, we cannot feel any confidence in changes at the LEA level. The state showed a significant decrease in 30-day alcohol use from Baseline to Year 4.

Figure 27: Alcohol use in past 30 days



*Bridgeport: 2013-13 reports SI 2010-11 data; 2014-15 was active consent, mostly 7th grade girls; 2015-16 is Overall HS only.

**Middletown: 2012-13 reports SI 2011-12 data.

***New Britain: used School Climate only for 2014-15 and 2015-16; Alternate wording/values from SI used in 2014-15 and 2017-18

Element 5

In terms of fights on school property and missing school due to feeling unsafe, the available data is spotty and it is difficult to identify trends over time. Much attention was paid to programming aimed at improving school climate in relation to violence prevention and

safety, as evidenced by the project training 15,413 individuals over the course of the project. The majority of those individuals were community members (8,227). As can be seen from the graphs below, we only have three years of data for the state and one of the LEAs and two years for the other two LEAs for the required indicators. Furthermore, they're not necessarily for contiguous years, and different surveys were utilized in different locations. There are three variations for the wording of the question about fights in the past year:

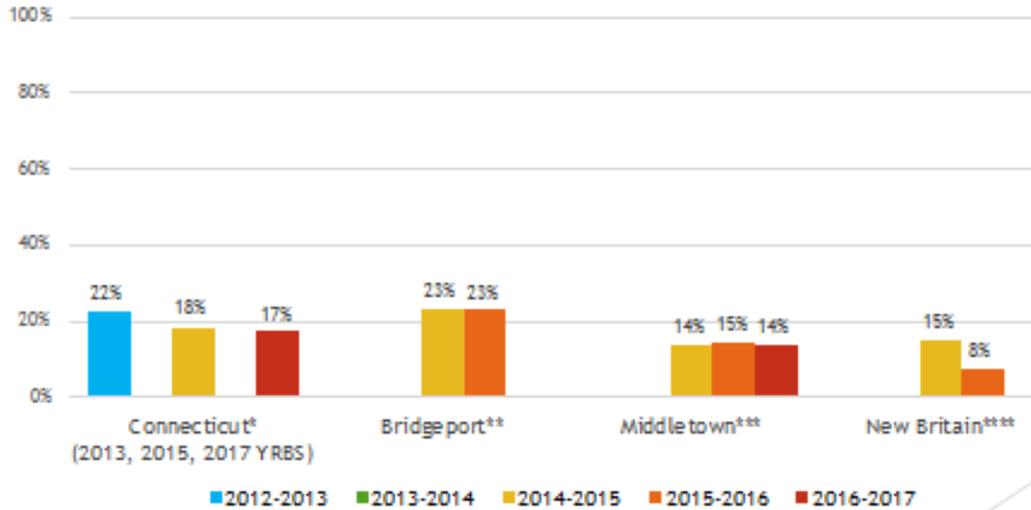
- *Students who reported being in a physical fight on school property during the current school year. (NB School Climate).*
- *During the past 12 months, how many times were you in a physical fight on school property? (Bridgeport & Middletown School Climate).*
- *Students who reported being in a physical fight 1+ times in past 12 months (YRBS wording: no mention of on school property).*

Search Institute surveys do not ask about fighting per se, but instead ask if the student “Hit or beat someone up” one or more times in the past 12 months? or if the student has “Taken part in a fight where a group of your friends fought another group” one or more times in the past 12 months?

The change from baseline to year 4 for the state was statistically significant but may not be clinically meaningful. For Bridgeport and New Britain, the populations differ too much for a valid comparison. Middletown rates did not differ across the three years collected, but since comparable data were not available for the first two years, it is not possible to know how these rates compare to rates before the grant was active.

Figure 28: Fights on school property

Element 5 Objective 1: Fights Reported on School Property in past year



*State: Exact data point not available: % in physical fight 1+ times in past year is reported.

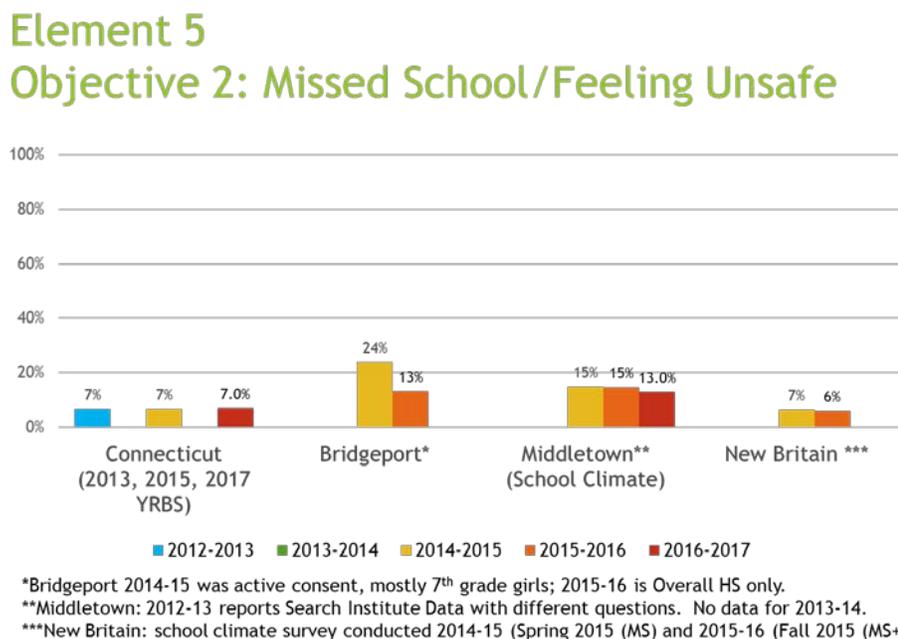
**Bridgeport 2014-15 was active consent School Climate, mostly 7th grade girls; 2015-16 is Overall HS only-YRBS wording 2013-14 SI used different questions re: fighting (not shown). No data for 2012-13 or 2016-17.

***Middletown 2012-13 SI used different questions re: fighting (not shown).

****NB school climate conducted 2014-15 (Spring 2015 (MS)) and 2015-16 (Fall 2015 (MS+HS)). Wording differed "in a physical fight on school property **during the current school year**". 2016-17 not conducted. 2017-18 2012-13 SI used different questions re: fighting (not shown).

For the question about missing school due to feeling unsafe at school or on the way to school, there was no change in the response rates for the state or Middletown. The rates for Middletown are significantly higher than the state, but these may not be clinically meaningful. For Bridgeport and New Britain, the populations differ too much for a valid comparison.

Figure 29: Missed school because felt unsafe



Bridgeport Special Project

A special sub-study was conducted in Bridgeport related to Elements 3 and 5 for the Quality Improvement Project for the LEA's Disparities Impact Statement. For the Bridgeport Disparity Group of LGBTQ adolescents in the district, the evaluation team conducted focus groups with approximately 25 students in the city's high schools recruited from the Gay Straight Alliance (GSA) Peer Support Groups. Both qualitative and quantitative data were collected from these focus groups, as well as from the Youth Risk Behavior Survey administered to the district in Spring 2016. Additional questions from the GLSEN survey were added to more specifically target concerns related to this group.

Results of this study were presented in previous evaluation reports, so this report will not include all of the details

The qualitative data that was collected from the focus groups in the high schools captured significant themes from the voices of the teenagers, significant events in the school district advocating for the youth, and recommendations for future activities in the schools.

Overall themes:

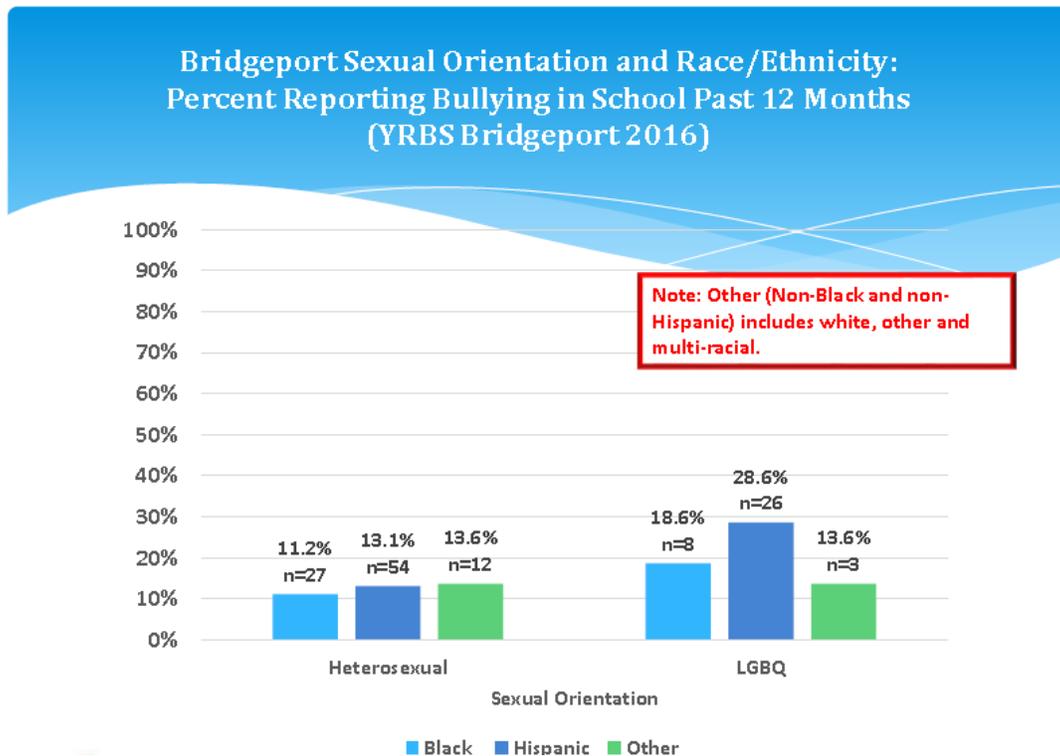
- Underclassmen (9th and 10th graders) were much less likely to self-identify, join GSA and much more likely to use slurs and make GSA members uncomfortable outside the peer support group.
- When students experience gender/sexuality slurs towards them, few staff allies ever address this language and behavior.
- Students who identify as Lesbians in both schools seem to have the most acceptance.
- Males who identify as gay have significantly less acceptance from peers.
- Youth who identify as transsexual or transgender have the least acceptance from peers.

Recommendations:

- Clear, public administrative support to make GSA visible and present in high schools for students of all grades.
 - Providing GSA events as a regular part of announcements.
 - Support for GSA through grant writing opportunities.
 - Fundraising for attendance and events throughout the state (i.e. True Colors Conference or Gay Prom).
 - Funding for a dedicated SAFE space for LGBTQI youth in the schools.

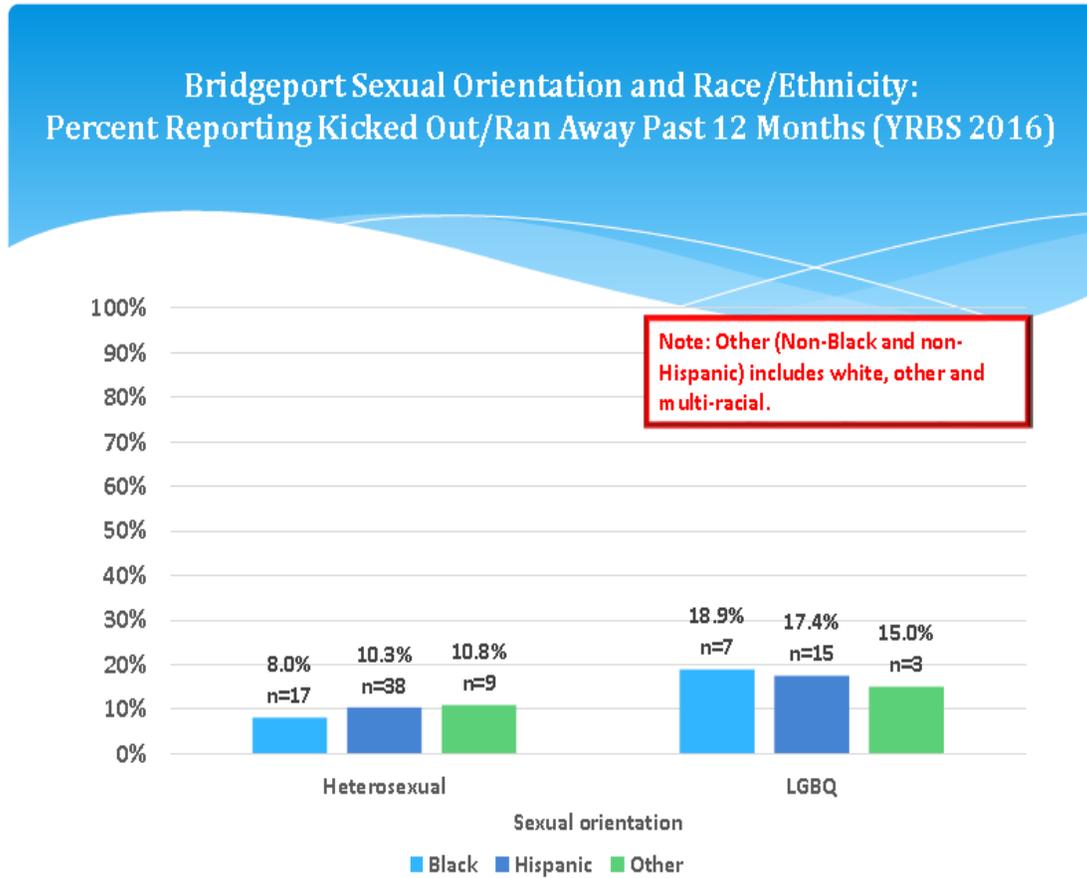
The findings that follow focus on the YRBS done in Bridgeport in 2016, with a reanalysis based on two groups: Heterosexual and LGBTQ. The graph below shows the significant difference in bullying for students based on sexual orientation in the schools, based on the Bridgeport 2016 surveys. Bridgeport students (YRBS 2016) who identified as LGBTQ and of various races and ethnicities reported significantly higher percentages of bullying (20.3%) compared to their heterosexual counterparts (12.6%). The Hispanic LGBTQ students show an especially high rate of bullying.

Figure 30: Bullying



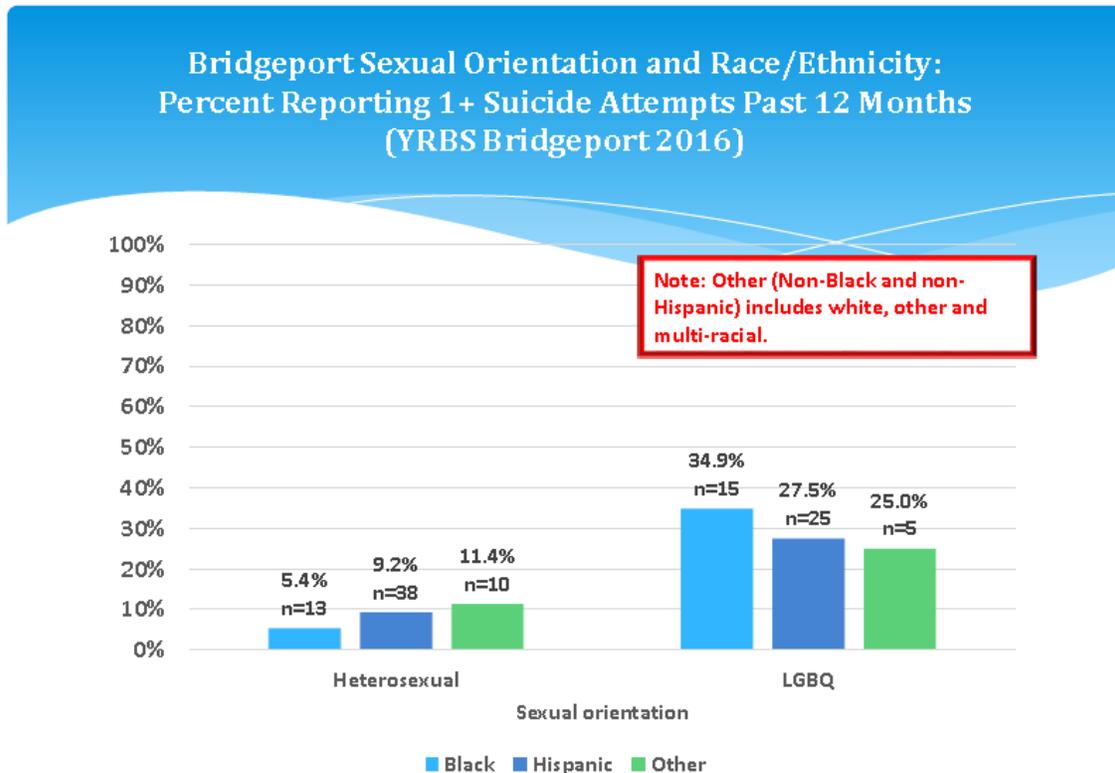
In Bridgeport (YRBS 2016), overall, LGBTQ students reported significantly higher rates of being kicked out or running away from their homes (17.1%) as opposed to the heterosexual students (9.7%). Black LGBTQ (18.9%), Hispanic LGBTQ (17.4%) and Other LGBTQ students (15.0%) reported much higher percentages of being kicked out of their home or running away from home than the same ethnic groups in the Hetero group. See graph below.

Figure 31: Running Away



Particularly alarming, in the Bridgeport (YRBS 2016), the LGBTQ students who reported attempting suicide at least once in the past year was over three times as high as in the Hetero group: 29.1% versus 8.7% overall. Almost 35% of Black students, 27.5% of Hispanic students, and 25% of students of Other ethnicity who identify as LGBTQ reported attempting suicide at least once in the past year compared to heterosexual students who are Black (5.4%), Hispanic (9.2%), and Other (11.4%). See following graph.

Figure 32: Suicide Attempts



No Cost Extension Year Findings

During the NCE year, a large statewide conference was held with a focus on social-emotional learning and sustainability of SSHS priorities. The attendees were asked to complete feedback surveys on the conference in general and on specific workshops. The evaluators were able to add several questions to the survey listing priorities for the future, based on SSHS goals. The questions were:

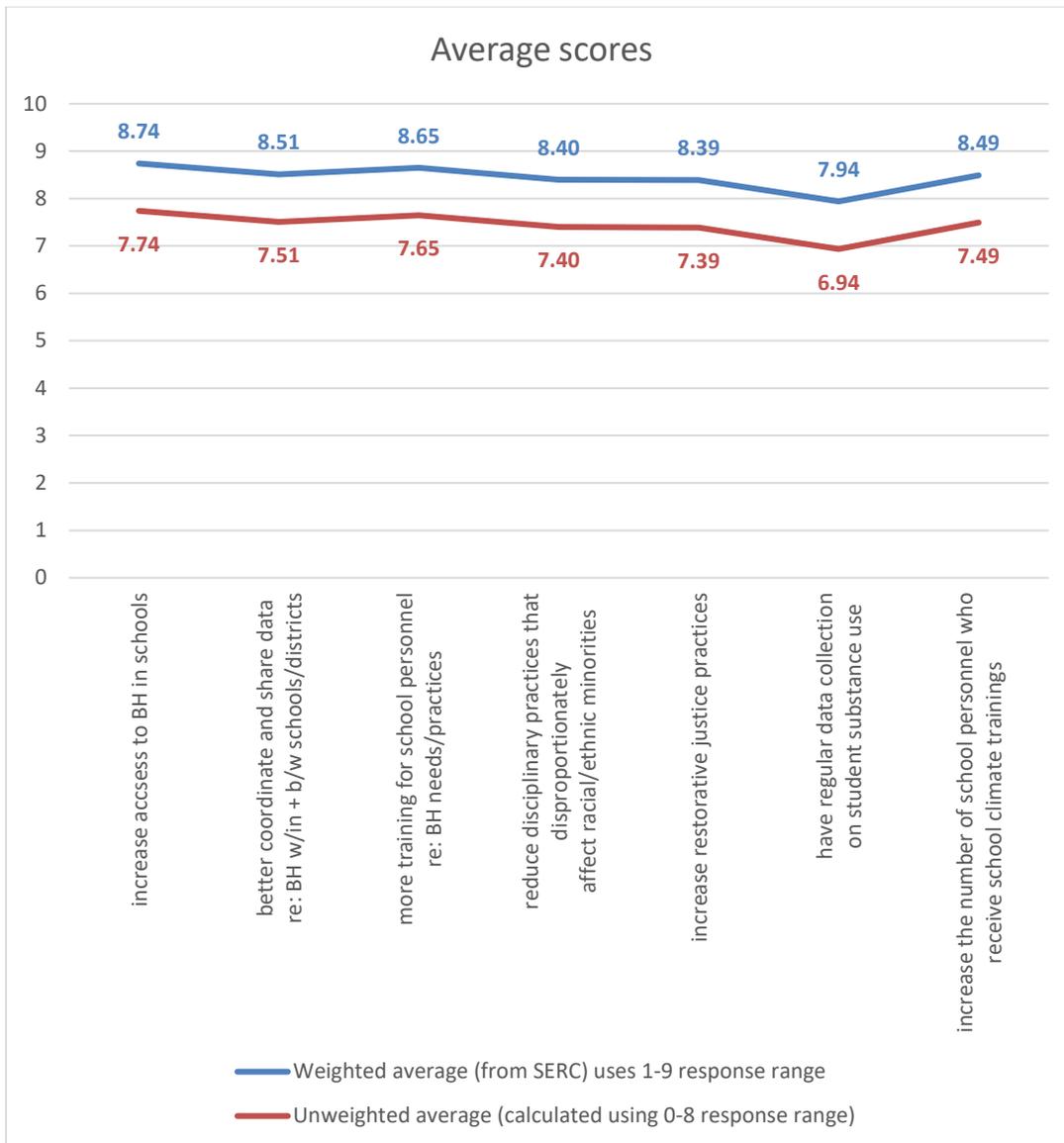
How important is it to:

1. increase access to behavioral health in schools
2. better coordinate and share data regarding behavioral health within and between schools/districts
3. have more training for school personnel re: BH needs/practices
4. reduce disciplinary practices that disproportionately affect racial/ethnic minorities
5. increase restorative justice practices

6. have regular data collection on student substance use
7. Increase the number of school personnel who receive school climate trainings

As can be seen in the graph below, all the goals were rated as highly important, all but one at the highest level of importance. Collecting data on student substance use was rated slightly lower than the other items.

Figure 33: Conference attendee feedback



LEA Manager Feedback

All three LEA managers provided feedback on the SSHS project in general before the end of funding. Certain themes emerged and are reported here.

Barriers. When recounting their experiences with the project, there was a common theme (verified by the evaluators' experience) that there was a lack of clear guidance at the beginning of the project. There seemed to be expectations that the grant could and should encompass everything possible, so the initial result seemed to be plans that were unfocused, overly ambitious and varied by location. A lack of good leadership was observed from the federal, state and evaluation entities. In retrospect, all wished that there had been fewer but more coherent and common objectives and planned activities. This would have made the project more manageable at all levels and would have allowed for a deeper evaluation instead of the scattershot data collection that was done to try to follow all the different requirements and activities. At different points of the project, each of the LEA managers felt that there wasn't enough buy-in at the district level as well, and also felt it might have been easier to communicate the value of the initiative if it had been more focused.

Nevertheless, each manager eventually hit their stride and all were able to initiate many valuable interventions, at some point paring down their work plans so that while still wide-reaching were more focused. In the final year or two, there seemed to have been some impact from changing state and national environments that may pull back some of the progress that was made. These barriers include state funding, the influx of families fleeing Hurricane Maria's effects, and the fear of immigrant children that their parents will be deported.

Successes and Sustainability

Despite the barriers and limitations, all of the LEA managers felt that a great deal of impact had been made at the district level, and identified several programs, policies or procedures that would be sustained after the end of the grant funding. At two of the LEAs, funding had been established to keep the LEA managers in similar positions at the district after the end of SSHS funding, keeping someone who will continue to coordinate programs and priorities that were begun under SSHS. In order for these positions and programs to have received that sort of buy-in from the districts, a culture shift seems to have been necessary, whereby things such as student wellness, mental health promotion and whole child perspective are valued.

Recommendations

For future projects, the LEA managers recommended having clear direction, leadership and commitment at the federal, state and local levels. A simpler, more coherent vision of what should be done, and with adequate support from leadership, would facilitate earlier implementation and greater impact.

Analysis/Barriers and Limitations

The main barrier for the SS/HS project evaluation was that we were largely dependent upon secondary administrative data from other state agencies and local educational entities. Despite the fact that all these agencies were partners in this grant, it was rather difficult to obtain data, especially in a timely and sufficiently complete way. This was understandable as all the agencies were contending with increased demands and reduced staffing due to budget cuts and ambitious legislative mandates. In addition to not having any control over data quality, the evaluators often didn't know data definitions or what decisions have been made about what was included or excluded. In addition, we often didn't have individual-level data that we could analyze ourselves, but had to use numbers that others calculated. In some instances we only had percentages without knowing the sample sizes, or had numerators without denominators.

With some regularity, we noted inconsistencies in data reported over time from the same agency. For some indicators, the LEAs needed to establish new data collection procedures and tools in order to collect what was required, and there were some implementation and sampling issues. For instance, one year Bridgeport ended up with most of their survey respondents being middle school girls and New Britain with middle school students when they had desired a representative sample of all students in middle school and high school. In Year 4, for different reasons, the same districts were not able to collect some of the required indicators at all.

A major impact on the consistency of data being reported has been due to changes in how the CT Department of Education calculates and reports the data that provides the bulk of the data elements we report for SSHS. The changes that were instituted by SDE in April of 2016 mean that it's not entirely valid to make direct comparisons between what was collected before and after that date. In addition, although we had been provided some additional data from SDE with breakouts that were meaningful to SSHS (e.g. ethnic subgroups, grade levels, focus schools, etc.), due to budget and staffing shortages, at a certain point they were no longer be able to provide the breakouts.

Summary of Findings and Results

One of the main observations that can be made about this project is that, despite various barriers, an enormous amount of productive activities were implemented, with the overarching goal of improving the lives of Connecticut's children. Although benefiting from and leveraging the work of other related initiatives that were also occurring within the state, much was directly initiated and/or funded by the SS/HS project. In addition, many important issues were raised and discussed through the SMT and CMTs, with action plans and sustainability plans in place to address them, especially in relation to the need for better tracking of behavioral health services for children so that access can be improved for those that need them.

In term of quantitative data, there were positive changes observed in several categories. There were positive trends observed at the state level and/or one or more communities on: percentage of kindergartners with pre-K experience, number of students receiving mental health services, chronic absenteeism, and disciplinary sanctions. On most indicators, Middletown usually demonstrated advantages as compared to the other involved LEAs and to the state. This can be seen regarding absenteeism, poverty, suspensions and expulsions, and many other variables. By contrast, New Britain and Bridgeport usually compared negatively to the state averages on the same issues. However, while Middletown had to contend with a ceiling effect, Bridgeport and New Britain demonstrated significant improvements over time on some key issues. One of the major focuses of the project and the evaluation was to confront and track behavioral health disparities. Disparities based on race, ethnicity, gender and/or sexual orientation are still evident in some key areas of the outcome data, including suspension and expulsion rates, alcohol use, and bullying and suicidality in the LGBTQ community.

Qualitative data included feedback that a more focused intervention plan from the outset of the project with more consistency across the state and LEAs might have led to greater improvement in key areas, would have resulted in better data quality and allowed for a more in-depth evaluation.

Feedback from attendees at the statewide conference in the NCE year confirmed the continuing importance of SSHS goals, including increasing access to behavioral health services, better data sharing, more training in behavioral health, reducing disciplinary practices that disproportionately affect racial/ethnic minorities, and increasing the use of restorative justice practices.

Conclusion

In the last year, evaluation activities consisted of updating data from all sources and finalizing data analysis. Data was presented to the stakeholders in order to inform further exploration, decision-making and policy creation. We hope that the information on significant changes as a result of the project can inform sustainability decisions and support, and we hope that information on areas of concern, especially the vulnerability of certain groups of students, will spur continuing action to enhance the well-being of Connecticut's children.

There are concerns that some of the beneficial changes that have been observed over the course of the SSHS project may not be sustained due to the budget crisis in our state and from negative influences of certain national issues. Over the last two years, there have been increasing budget problems at the state level which have impacted all state agencies as well as funding for local education districts. The LEA managers and other leaders involved in SSHS have been working tirelessly on sustainability and accessing other funding sources. The LEAs have also instituted policy, procedural and staffing changes in many areas that current district leadership seem to support, and should lead to sustainability of at least some gains. At the state level, sustainability efforts are also continuing, and are focused on capturing and reporting standardized mental health services data in order to identify and respond to students' needs.

Appendices

I. Final behavioral health disparities table*

Direct Services: Number to be served	Current	2014	2015	2016	2017	Totals
<i>By Race/Ethnicity</i>						
African American	189	0	103	183	189	475
American Indian/Alaska Native	5	0	1	5	5	11
Asian	26	0	16	26	26	68
White (non-Hispanic)	231	0	128	206	231	565
Hispanic or Latino	550	0	235	537	550	1322
Native Hawaiian/Other Pacific Islander	2	0	1	2	2	5
Two or more Races	2	0	0	6	2	8
Others:	0	0	0	2	0	2
<i>By Gender</i>						
Female	472	0	220	455	472	1147
Male	532	0	272	509	532	1313
Other Identified	1	0	5	3	1	9
<i>By Sexual Orientation/Identity Status</i>						
Lesbian	4	0	6	2	4	12
Gay	7	0	7	6	7	20
Bisexual	7	0	2	5	7	14
<i>By Socio-Economic Status</i>						
Free Lunch	28	0	15	25	28	68

* Figures include Bpt. & NB 2017 tables, MdltN 2016 table

II. Logic Model

Element 1		GOAL 1-1. Connecticut SS/HS partners will advance priority initiatives of <i>Connecticut's Office of Early Childhood Education</i> that: a) expand early childhood education opportunities; b) increase quality; and c) promote early identification and intervention models.			
Promoting early childhood social and emotional learning and development					
Needs & Gaps	Populations of Focus	State Management Team Objectives	Community Management Team Objectives	Evidence-Based and Informed Practices	GPRA Measures Indicators TRAC Measures
<p>Lack of spaces available for children to receive quality early child learning and development programs</p> <p>Gap: Kindergarten Entry Assessment that can be administered during the first few months of admission into kindergarten, covers essential domains of school readiness, uses national standards and research</p> <p>Gap: quality of pre-school programs (type and geography)</p> <p>Need to decrease school readiness gap</p>	<ul style="list-style-type: none"> School district Pre K classrooms Target community classrooms Under-represented groups children and families Families below the federal poverty line Children with high truancy rates Children not able to read at grade level Children not able to self-regulate Non-Department of Children and Family (child protective services) involved children and families and schools 	<p>1a. SMT partners increase the number of affordable, high quality early childhood education opportunities to low income</p> <p>1b. SMT partners increase the capacity of early childhood education providers to identify behavioral health and mental health issues</p>	<p>BPS: The proportion of the 1856 students entering Marin, Park City Magnet, Tisdale and Discovery Magnet schools kindergarten with pre-K experience will increase from the baseline measure of 65.9% to 72.5% by 9/2017 as measured by CSDE data reports.</p> <p>CSDNB: The 872 students entering kindergarten in the Consolidated School District of New Britain entering with pre-K experience will increase from a baseline measure of 66% to 73% by 9/2017 as measured by CSDE data reports.</p> <p>MPS: The proportion of the students entering kindergarten at MPS with pre-K experience will increase or be maintained at 88% by 9/2017 as measured by CSDE data reports. (Note: Middletown exceeds state averages)</p> <p>MPS: Middletown Safe Schools Healthy Students project, in partnership with Opportunity Knocks Behavioral Health Work group will decrease the number of preschool students suspended, expelled, or placed on reduced day schedule to 0 through in-school supports and community referrals by 6/2017.</p> <p>CSDNB: Disparity Impact and Community Quality Improvement Project: Improve Northwest Evaluation Association (NWEA) scores as measured by fall pre-test and spring post-test scores by X% in the numeracy domain, X% in the literacy domain, and X% in personal/social skills domain among chronically absent kindergarten students. [CSDNB reviewing benchmarks]</p>	<ul style="list-style-type: none"> National Association for the Education of Young Children (NAEYC) accreditation Child First Help Me Grow <ul style="list-style-type: none"> Child First The Ruler Well Managed Schools Framework for Implementing and Evaluating Pre-K to 3rd Grade 	<p>Shared indicator: Number and rate of children enrolled in early childhood program prior to entering Kindergarten</p> <ul style="list-style-type: none"> PC1 – Partnership Collaborations PD1 – Policy Development WD1 – Workforce Development TR1 - Training <p>See individual CMT measurable Objectives</p> <ul style="list-style-type: none"> PC1 – Partnership Collaborations PD1 – Policy Development WD1 – Workforce Development TR1 - Training
PARTNERS	Connecticut Office of Early Childhood Education; Local Early Childhood Education Councils; State Department of Education; Department of Social Services (e.g., Birth to Three); United Way of Connecticut (211; Child Development Info line); Local Education Agencies; Community Providers; Parents and Families				

Element 2		GOAL 2-1. Connecticut SS/HS partners will advance the implementation of Connecticut's Children's Behavioral Health Plan led by Implementation Advisory Board.			
Promoting mental, emotional & behavioral health					
Needs & Gaps	Populations of Focus	SMT Objectives	Community Management Team Objectives	Evidence-Based and Informed Practices	GPRA Measures Indicators TRAC Measures
<ul style="list-style-type: none"> Lack of uniform and coordinated mental health data collection between school / community partners and systems statewide Lack of systematic screening and assessments in school/ community programs and effective communication protocols(e.g., release forms) Insufficient community capacity and coordination between partners to deliver culturally/ age appropriate behavioral and mental health prevention and treatment services 	<ul style="list-style-type: none"> Students Receiving Tier 3 Interventions. Students with behavioral emotional problems Students with 4 or more suspensions Students assigned to out-of-district placement Underrepresented groups children and families Families below the federal poverty line Pilot classrooms and schools Students receiving special education 	<p>2.a. Support development and growth of SSHS LEA's effective models for school districts, community partners and parents to coordinate the delivery of mental health and behavioral health services, including trainings and resources.</p>	<p>BPS: The proportion of the 5,965 students in Marin, Park City Magnet, Tisdale, Discovery Magnet, Bryant, Bassick HS and Central HJS receiving school-based mental health services will increase from a baseline measure of 20% to 30% by 6/2017 as measured by school-based mental health service records.</p> <p>MPS: The proportion of the 4,774 Middletown Public School students receiving school-based mental health services will increase from the baseline of 21% of students to 23% of students per school year by 6/2017 as measured by school based mental health service records.</p> <p>CSDNB: The proportion of the 2,434 students in North End and Chamberlain elementary schools and Pulaski and Slade Middle Schools receiving school-based mental health services will increase from the baseline measure of 8% of students to 10% of students by 6/2017 as measured by school-based mental health service records.</p>	<ul style="list-style-type: none"> PBIS The Ruler Responsive Classroom (RC) Well Managed Schools Boys Town Model Question, Persuade, Refer, Suicide Prevention Connect Training Trauma Adaptive Recovery Group Education Training T.R.A.M.A. Youth Mental Health First Aid 	<p>GPRA Two: The total number of students receiving school-based mental health services.</p> <ul style="list-style-type: none"> PC1 – Partnership Collaborations PD1 – Policy Development WD1 – Workforce Development TR1 - Training
		<p>2.b. Identify state and local systems improvements that support expansion of the child mental and behavioral health systems and develop a statewide diffusion plan that include both service and systems improvements</p>	<p>BPS: The proportion of the 5,965 students in Marin, Park City Magnet, Tisdale, Discovery Magnet, Bryant, Bassick HS and Central HS referred for community-based mental health services that resulted in mental health services being provided in the community will increase from a baseline measure of 60% (226 out 378 referrals given) to 75% by 6/2017 as measured by Bridgeport Mental Health Visits within Schools Reports.</p> <p>MPS: The proportion of the 4,774 MPS students referred for community-based mental health services that resulted in mental health services being provided in the community will increase from the baseline measure of 64.7% in the 2014-2015 school year to 75% of students referred by 6/2017.</p> <p>CSDNB: Increase the proportion of the 2,434 students in North End and Chamberlain elementary schools and Pulaski and Slade Middle Schools referred for community-based mental health services that resulted in mental health services being provided in the community will increase from a baseline measure of X% of students to X% of students referred by 6/2017 as measured by school-based mental health service records.</p>		

Element 2 (continued)					
Needs & Gaps	Populations of Focus	SMT Objectives	Community Management Team Objectives	Evidence-Based and Informed Practices	GPRA Measures Indicators TRAC Measures
<ul style="list-style-type: none"> Same as above 	<ul style="list-style-type: none"> Same as above 	<p>2c. Increase training and resources to support expansion of the child mental and behavioral health system</p>	<p>BPS: 85% of relevant staff (student support services, teachers, security guards) in Marin, Park City Magnet, Tisdale, Discovery Magnet, Bryant, Bassick HS and Central HS and community service partners will be trained in mental health topics by 9/2017 as measured by training records.</p> <p>MPS: 85% of the 461 Middletown Public School certified staff and 100 community service partners will be trained by 9/2017 in protocols for early identification and the referral process to screening & early intervention services and other trained in mental health topics by 9/2017 as measured by training records..</p> <p>CSDNB: 85% of relevant school personnel and community service partners trained by 9/2017 in agreed upon protocols for early identification and protocols to facilitate screening and early intervention services and other trained in mental health topics by 9/2017 as measured by training records.</p>	<p>See above</p>	<p>See above</p>
Partners	Dept of Children and Families; Dept of Mental Health and Addiction Services; Dept of Social Services; Behavioral Health Partnership; Community Providers; United Way of Connecticut (211; Info line); Local Education Agencies; Parents and Families; Task Force to Study the Provision of Behavioral Health Services for Youth and Adults				



Element 3		GOAL 3-1. Connecticut SS/HS partners will advance the initiatives of the Connecticut State Department of Education's Chronic Absenteeism Strategic Action Group and Connecticut's Achievement Gap Task Force. GOAL 3-2. Connecticut SS/HS partners will increase the scale and reach of Disproportionate Minority Contact initiatives led by the Office of Policy Management and the Judicial Branch.			
Connect families, schools, and communities					
Needs & Gaps	Populations of Focus	SMT Objectives	Community Management Team Objectives	Evidence-Based and Informed Practices	GPRA Measures Indicators TRAC Measures
<ul style="list-style-type: none"> Chronic absenteeism is a significant problem in Connecticut that requires a coordinated effort between schools, families, and community partners Limited use of evidence-based models that increase effective parent outreach, empowerment and inclusion initiatives The number and rate of Connecticut youth suspended from their academic program for minor policy and non-violent behavior violations Uneven use of methods to engage parents and to communicate available resources to promote healthy child development remain undeveloped, underutilized, and/or under-resourced 	<ul style="list-style-type: none"> Families below the federal poverty line /Students receiving free and reduced lunch Minority children and families Parents of pilot classrooms and schools Children with physical health issues Children with behavioral and emotional issues Children of families with inadequate access to transportation 	<p>3.a. Develop and promote evidence-based models that promote school-family partnerships in addressing issues related to chronic absenteeism</p>	<p>BPS: Disparity Impact and Community Quality Improvement Project: Community Quality Improvement Project: Reduce suspension and expulsions in SOARS/AIMS classes through the implementation of the Boys Town model.</p> <p>The proportion of the 5,965 students in Marin, Park City Magnet, Tisdale, Discovery Magnet, Bryant, BassickHS and Central HS Pre-K-12th who are chronically absent as defined by absences for at least 10% of enrolled days will decrease 10% from 21.3% to 19.2% by 6/2017 as measured by as measured by CSDE reports.</p> <p>MPS: The proportion of the 4,774 MPS students who are chronically absent as defined by absences for at least 10% of enrolled days will decrease 10% by 6/2017 as measured by as measured by CSDE reports.</p> <p>CSDNB: The proportion of the 10,038 students in the Consolidated School District of New Britain in grades K-12th who are chronically absent as defined by absences for at least 10% of enrolled days will decrease 10% from 19.1% to 17.2% by 6/2017 as measured by CSDE data reports.</p>	<ul style="list-style-type: none"> Attendance Works / Hedy Chang PBIS Boys Town Model The Ruler 	<p>Shared Indicator: Percentage and number of students chronically absent</p> <ul style="list-style-type: none"> PC1 – Partnership Collaborations PD1 – Policy Development WD1 – Workforce Development TR1 - Training

Element 3 (cont)					
Needs & Gaps	Populations of Focus	SMT Objectives	Community Management Team Objectives	Evidence-Based and Informed Practices	GPRA Measures Indicators TRAC Measures
<ul style="list-style-type: none"> Same as above 	<ul style="list-style-type: none"> Same as above 	<p>3.b. Promote and support the implementation of evidence-based alternatives to suspensions models</p>	<p>BPS: The proportion of the 5,965 students in Marin, Park City Magnet, Tisdale, Discovery Magnet, Bryant, Bassick HS and Central HJS who receive in-school or out-of-school suspensions or expulsions as defined by CSDE reports will decrease in elementary school from baseline measures of 7.95% to 6.4%; in middle school from 21.83% to 18.6%; and in high school from 29.59% to 25.2% by 6/2017 as measured by CSDE data reports.</p> <p>MPS: The proportion of the 485 African American and Hispanic MPS students in grades 7-12 who receive in-school or out-of school suspensions or expulsions as defined by CSDE reports will decrease from 16% in the 2013-2014 school year to 13.5% by 9/2017 as measured by CSDE reports.</p> <p>CSDNB: The proportion of the 10,038 students in the Consolidated School District of New Britain in grades K-12th who receive in-school or out-of school suspensions or expulsion as defined by CSDE reports will decrease in elementary school from baseline measures of 8.3% to 6.7%; in middle school grades from 26.5% to 22.0%; and in high school grades from 37.7% to 32.0% by 6/2017 as measured by CSDE data reports.</p>	<ul style="list-style-type: none"> PBIS Local Interagency Service Teams Boys Town Model The Ruler Right Response Initiative 	<p>See individual CMT measurable Objectives</p> <ul style="list-style-type: none"> PC1 – Partnership Collaborations PD1 – Policy Development WD1 – Workforce Development TR1 - Training
Partners	State Department of Education; Local Education Agencies; Parents and Families; Chronic Absenteeism Strategic Action Group; Achievement Gap Task Force; Department of Children and Families; Juvenile Justice Agencies; Community Providers; Connecticut Association of Schools				

Element 4		GOAL 4-1. Connecticut SS/HS partners will promote the success of the <i>Department of Mental Health and Addiction Service's</i> Connecticut Strategic Prevention Framework Coalitions (CSC) and the Partnerships for Success Coalitions that use community coalitions to address a diverse set of youth addiction issues			
Preventing behavioral health problems including substance use					
Needs & Gaps	Populations of Focus	SMT Objectives	Community Management Team Objectives	Evidence-Based and Informed Practices	GPRA Measures Indicators TRAC Measures
<ul style="list-style-type: none"> Evidence-based programs to prevent and reduce youth substance use – including school health curriculum remains underdeveloped or in need of increased implementation fidelity Uniform substance use data collection in schools, especially for elementary age remains under-developed or non-existent 	<ul style="list-style-type: none"> SRBI Tier 3 Behavior students Students undergoing school transitions <ol style="list-style-type: none"> Pilot classroom and schools Students who have more than 10 days of absence due to suspension Families who use substances 	<p>4.a. Expand the number of community coalitions focused on reducing 30-day alcohol use rates among youth ensuring a focus on the three SSHS LEA's.</p>	<p>BPS: The proportion of the 5,965 students in Marin, Park City Magnet, Tisdale, Discovery Magnet, Bryant, Bassick HS and Central HS who reported alcohol consumption on one or more occasions during the past 30 days will decrease from the baseline measure of 27% to 23.5% (or a 15% decrease) among 7 to 12 grades students by 9/2017 as measured by Bridgeport's annual school climate survey.</p> <p>MPS: The proportion of the 1,934 students in grades 7-12 in the Middletown School District who reported alcohol consumption on one or more occasions during the past 30 days will decrease from the baseline measure of 10.5% in the 2014-2015 school year by 10.0% by 9/2017 as measured by Middletown's annual school climate survey.</p> <p>CSDNB: The proportion of the 4,360 students in the Consolidated School District of New Britain in grades 6-12th who report alcohol consumption on 1 or more occasion during the past 30 days will decrease from the baseline measure of X% to X% by 9/2017 as measured by the school climate. <i>[CSDNB benchmarks in process]</i></p>	<ul style="list-style-type: none"> Search Institute Attitudes and Behavior Survey Strategic Planning Framework CAST Program Reconnecting Youth Motivational Enhancement Therapy and Cognitive Behavioral Therapy for Adolescent Cannabis Users and Other Substance Users Strengthening Families Program Interactive Journaling with Voices Curriculum 	<p>GPRA Four: % of students who report consuming alcohol on 1 or more occasions during the past 30 days.</p> <ul style="list-style-type: none"> PC1 – Partnership Collaborations PD1 – Policy Development WD1 – Workforce Development TR1 - Training
Partners		Department of Children and Families; Department of Mental Health and Addiction Services; Local Education Agencies; Parents and Families; Regional Action Councils; Local Prevention Councils; Community Providers; Partnership for Success and Best Practice Initiative Coalitions; United Way of Connecticut (211; Info line)			

Element 5		GOAL 5-1. Connecticut SS/HS partners will increase the implementation support necessary for communities to enact effectively Public Act 11-232: <i>An Act Concerning The Strengthening Of School Bullying Laws.</i>			
Creating safe and violence free-free schools					
Needs & Gaps	Populations of Focus	SMT Objectives	Community Management Team Objectives	Evidence-Based and Informed Practices	GPRA Measures Indicators TRAC Measures
<ul style="list-style-type: none"> Healthy school climate development and intervention training for teachers, school staff, parents and community members and leaders remains a lower priority Districts and schools apply discipline policies and practices with appreciable variation leading to significant disparities and also to variations in data quality 	<ul style="list-style-type: none"> Students from impoverished and high crime neighborhoods Pilot schools and classrooms Ethnic/racial minority students SRBI Tier 3 Behavior students Pilot classroom and schools Special Education Students Students undergoing school transitions 	<p>5a. Increase the number of school districts and school district personnel receiving positive school climate trainings</p> <p>5b. Increase the capacity of Local Interagency Service Teams (LIST)</p>	<p>BPS: The proportion of the 5,965 students in Marin, Park City Magnet, Tisdale, Discovery Magnet, Bryant, Bassick HS and Central HS who:</p> <ol style="list-style-type: none"> Reported being in a physical fight on school property will decrease from the baseline measure of 23.2% to 20.9% by 9/2017 as measured by Bridgeport's annual school climate survey. Did not go to school because they felt unsafe at or on their way to and from school will decrease from the baseline measure of 23.8% to 20.7% by 9/2017 as measured by Bridgeport's annual school climate survey. <p>MPS: The proportion of the 4,774 MPS students who:</p> <ol style="list-style-type: none"> Disparity Impact & Community Quality Improvement Project focuses on the proportion of the 485 African American and Hispanic students in grades 7-12 who reported being in a physical fight on school property will decrease from the baseline measure of 15% to 12% by 6/2017 as measured by the Middletown School Climate survey. Did not go to school because they felt unsafe at school or on their way to and from school will decrease from the baseline measure of 15% to 12.5% by 6/2017 as measured by the Middletown School Climate survey. <p>CSDNB: The proportion of the 4,360 students in Pulaski and Slade Middle Schools and New Britain High School who report:</p> <ol style="list-style-type: none"> Being in a physical fight on school property will decrease from the baseline measure of 15% to 14% by 9/2017 as measured by the annual CSNB school climate survey. That in the past 30 days they were absent from school because they felt unsafe at school or on their way to and from school will decrease from the baseline measure of 6.7% to 6% by 9/2017 as measured by the annual CSNB school climate survey. 	<ul style="list-style-type: none"> CAST Program-Reconnecting Youth TOP Program Peaceful School Bus School Based Diversion Initiative Interactive Journaling with Voices Curriculum The National School Climate Center's School Climate Improvement Process Search Institute Attitudes and Behavior Survey 	<p>GPRA Five: Percentage of students who reported being in a physical fight on school property during the current school year.</p> <p>GPRA Six: Percentage of students who did not go to school on one or more days during the past 30 days because they felt unsafe at school or on their way to and from school.</p> <ul style="list-style-type: none"> PC1 – Partnership Collaborations PD1 – Policy Development WD1 – Workforce Development TR1 - Training
Partners		Juvenile Justice Advisory Committee; State Department of Education; Local Education Agencies; Parents and Families; Connecticut Association of Boards of Education; Connecticut Association of Public School Superintendents; Connecticut Association of Schools			

III. IPP data table

IPP Measure	2014	2015	2016	2017	TOTAL
TR1	17	5,078	3,750	2,685	11,530
WD2	4,771 (+519 not in TRAC)	7,182	7,656	3,993	23,602
PC1	16 (+4 not in TRAC and 3 w/outstanding GPO approval after initially being disallowed)	5	2	1	24
PD2	10 (+10 not in TRAC)	3	6	10	29

IV. Cumulative IPP Workforce Development (WD) Trainings by Element (2013-2018)

WD definition: The number of people in the mental health and related workforce received training in specific mental health-related practices/activities as a result of the grant.

*Total number of participants may contain duplicate attendees

Number of participants trained Training Title	Element 1
Bridgeport LEA	174
Youth Mental Health First Aid for SOARS/AIMS staff	12
Feeling Words Curriculum Training	50
Feeling Words to all Speech and Language and Social Work Staff Training	50
RULER: High School Training	50
Ruler Training - Columbus School #3	5
Ruler Training - Columbus School #5	7
Middletown LEA	45
Understanding & Managing Classroom Behaviors: Using a New Lens	29
Using a New Lens: A Unique Approach to Understanding Challenging Behavior in Schools	16
New Britain LEA	1085
Well Managed Schools Teacher Training	5
Well Managed Schools Consultation training, New Britain High School	200
Executive Functioning/Purposeful Play	120
Framework for Evaluating and Implementing PreK-3rd Grade	60
EASTCONN Developmentally Appropriate Practices	370
EASTCONN Developmentally Appropriate Practices-PreSchool teachers	30
DAP Training, Eastconn	60
Executive Functioning-1st Grade Staff	40
Executive Functioning-Grade 1 Pilot	20
Executive Functioning-Kindergarten Staff	40

Executive Functioning Coaching: Grade 1 pilot	20
Executive Functioning Coaching: Kindergarten	40
EastConn-Kindergarten	40
EastConn-1st Grade	40
State of CT	45
New School Psychologists Orientation 2015	45
Grand Total	1349

Number of participants trained	Element 2
Training Title	
Bridgeport LEA	2213
Boys Town Training	55
RULER Training	84
Yale RULER Approach Training for Support Staff and Administrators	225
PowerSchool Training	32
Yale RULER Approach Training for Staff and Teachers	100
School Counselors trained in Student Support Page	40
RULER Approach Training-Home School Coordinators	20
RULER Overview-7th/8th Grade Science Teachers	15
RULER Training: Meta Moment	84
Mental Health Training	19
RULER Implementation Survey and Feedback	29
Feeling Words Curriculum Training-SLP	50
Network Sessions: Ruler	75
Positive Action Training and First Step Training Social Skills Curriculum	21
Ruler Presentation Training	20
Ruler Training: Feel Words Curriculum	50
Ruler Training-HS Teacher/Admin	50
Ruler Training-New Teachers	120
Ruler Training-Security Guards	84
SDQ Administration Training	35
Tauck Family Foundation Annual Meeting: Ruler	200
RULER	65
Ruler Ed talk	25
RULER Network training	150
Central High School Ruler Training	35
YMHFA Training #9	23
Ruler Training - Columbus School #1	6
Ruler Training - Columbus School #2	6
Ruler Training - Columbus School #4	5
YMHFA Training #10	15
YMHFA Training #11	15
Trauma Informed Care	39

Positive Action Curriculum	39
Boys Town Training (5-day - 35 hour training)	20
Equity Training	10
Boys Town Coaching and Training	5
Boys Town Fidelity Training Support	10
Cultural Competency Training (to work with staff) for Administrator cohort A	17
Cultural Competency Training (to work with parents) for Administrator cohort A	15
Cultural Competency Training (to work with parents) for Administrator cohort B	17
Cultural Competency Training (to work with staff) for Administrator cohort B	18
Youth Mental Health First AID Training 3	20
Youth Mental Health First Aid Training 5	100
Training for ACES Training by Joa Anne Frieberg (7/11/18)	25
Boys Town Summer Training: Recertification Year	15
Resiliency Training for Support Staff	80
Restorative Practice "PAC and SIP"	10
Youth Mental Health First AID Training	20
Middletown LEA	1457
<hr/>	
Association for Positive Behavior Support Conference	1
Kognito At-Risk for Educators PK-12	510
Mental Health First Aid	14
Northeast PBIS Network Leadership Forum (2-Day Training)	14
PBIS SWIS Facilitator Training	1
Positive Behavior Interventions and Supports (PBIS) (6-Day Training)	31
Positive Behavioral Intervention and Supports (PBIS)	34
Psychological First Aid for Schools	23
Understanding & Managing Challenging Classroom Behavior: Using a New Lens	7
Youth Mental Health First Aid	29
Connecticut Restraint and Seclusion Prevention Initiative Conference	2
Understanding Mental Health Conditions	1
National Conference on Advancing School Mental Health	4
Capturing Kids' Hearts	5
2015 CT AHPERD Fall Conference - Healthy Bodies, Healthy Minds, Healthy Futures	2
Positive Behavioral Interventions & Supports (PBIS) Coaches Meeting	9
De-Escalation Strategies in the Classroom	29
Fostering Resilient Youth: Creating a Blueprint for a Healthy Future	2
Compassion Counts: How Trauma Touches All of Us	1
Leaning Into Listen-Messaging Interrupted!	483
Conference for Advancing School Mental Health	9
Introduction to Restorative Practices	50
PBIS School-Wide Information System (SWIS) Training	3
Positive Behavioral Interventions and Supports (PBIS) Year 3: 3-day training	28
Developing Functional Behavior Assessments (FBAs) and Behavior Intervention Plans (BIPs)	3
Positive Behavioral Interventions and Supports Training	32

Deep Equity Institute with Gary Howard	1
6th Annual Northeast PBIS Network Leadership Forum	6
PBIS Year 3 Training 4	26
Pacific Educational Group "Beyond Diversity"	32
Fostering Social & Emotional Learning in CT Schools	4
IIRP Training of Trainers: Facilitating Restorative Conferences	8
Brief Introduction to Restorative Practices-- Professional Development	37
Governance Council/PTO/PTA Circle Training	14
Check-in, Check-out (CICO): PBIS Tier II data system	1
CICO-SWIS Facilitator Certification Training: PBIS Tier II data system	1
New Britain LEA	5894
Attendance Works Training	50
CPI Training	25
SEE CBO Orientation	25
Well Managed Classroom Training Slade	95
Well Managed Schools	475
Well Managed Schools Administrator Training	35
Well Managed Schools Specialized Program Administrator Training	5
Well Managed Training SEE CBO	50
3 PD treatment of anxiety	50
DiLoreto Wraparound training	20
Well Managed Schools 5	150
Well Managed Schools 4	25
Well Managed Schools 3	105
Community Coalition Training Academy	30
Well Managed Schools 2	40
Well Managed Schools 1	180
Well Managed Program Technical Assistance, Boystown, Smalley School	12
Well Managed Program Technical Assistance, Boystown, Smalley Kindergarten at Roosevelt	10
Well Managed Program Technical Assistance, Boystown, Northend	12
Well Managed Program Technical Assistance, Boystown, Smith	12
Well Managed Program Technical Assistance, Boystown, HALS	12
Well Managed Program Technical Assistance, Boystown, Diloreto	12
Well Managed Program Technical Assistance, Boystown, Lincoln	12
Youth Mental Health First Aid 1	20
Love Wins, Nelba Marquez Greene Training for Administrators	45
Youth Mental Health First Aid 2	12
Program Consultation Training Smalley, Lincoln, Northend, DiLoreto, Smith, HALS	270
Program Technical Assistance Smalley	57
Program Technical Assistance Lincoln	50
Program Technical Assistance Northend	27
Program Technical Assistance Smith	48
Well Managed Program Technical Assistance Slade	15

Well Managed Program Technical Assistance New Britain High School	15
Well Managed Program Technical Assistance Pulaski	15
Well Managed Schools Deans and Security Training	8
Executive Functioning Training, EASTCONN EA	7
Convocation- Love Wins Presentation	1200
Love Wins Training-Smith School	35
Love Wins Training-DiLoreto School	45
Love Wins Training-Northend School	30
Prek-12 Review 360 Virtual PD	800
Love Wins Conference Nov 2016	1200
Review 360	300
Specialized Classroom Management-Boystown Training	50
Framework for Implementing and Evaluating Prek - 3rd grade-Admio	10
Framework for Implementing and Evaluating Prek - 3rd grade - Kindergarten	19
Well Managed Program Technical Assistance, Boystown, Northend 2	12
Well Managed Program Technical Assistance, Boystown, Smalley School 2	12
Well Managed Program Technical Assistance Slade 2	15
Well Managed Program Technical Assistance New Britain High School 1	15
Well Managed Class Room Training Feb	120
State of CT	1033
Alliance District Convening Training	30
Boys Town Model Training	30
New School Psychologists Orientation 2014	38
SSP Forum Panel Presentation	50
Enhancing Instructional Programs Within Schools: Training in Special Education	10
Administration	
School Based Health Conference	100
Scientific Research-Based Interventions: Improving Education for All Students	80
Tier 2 Decision Rules	21
Classroom Behavior Management	40
Building A Bridge Between Tier 2 and Tier 3	40
Developing Behavior Support Plans	40
Transitioning Students with Mental Health Needs	17
Creating Measurable Behavioral and Social-Emotional IEP Goals & Objectives	40
Ex Functioning 101	40
Transition and Mental Health	15
Ct Assoc of School Summer Leadership Institute/CAS	80
An Alternative to Restraint/Seclusion: Nonviolent Crisis Intervention	8
Behavioral Systems of Support: Strategies and Practices to Foster Students'	247
Social-Emotional Development	
Creating Measurable Behaviorial and Social-Emotional IEP Goals & Objectives	40
School Wide Information System (SWIS) Training	7
Creating Behavior Support Plans	40
PBIS training days	20
Grand Total	10597

Number of participants trained	Element 3
Training Title	
Bridgeport LEA	336
Boys Town Model Training	47
Restorative Practice Training	10
Student Support Page Training 2	14
RULER Parent/Family Resource/BCAC -3	16
RULER Parent/Family Resource/BCAC -2	16
RULER Parent/Family Resource/BCAC -1	16
Suspension Reduction and Parent Engagement Training	25
PBIS Classroom Management Training for Teachers	7
Boys Town Training TOT	6
Boys Town Fidelity Trainer	3
Mental Health First Aid Training: Training of School Counselors and Social Workers in Mediation to address student conflict in positive ways.	10
Boys Town Follow Up Training	16
SRBI District Rollout	25
Boys Town Training	15
Boys Town Training Follow-up	10
(PBIS) Training for Elementary/Middle school Administrators	45
Restorative Training Advanced Train the Trainer	15
Youth Mental Health First AID Training 2	20
Youth Mental Health First AID Training 4	20
Middletown LEA	1070
Are they Glad to See You? Being a Welcomed Visitor in Families' Homes	7
As Diversity Grows, So Must We (keynote and workshop sessions)	480
Community Mediation Training	14
High-Impact Strategies for Family-School Partnerships	2
Kognito At-Risk for Educators PK-12	26
Nuts and Bolts: Moving from Community-Service to Youth-Led Social Change	1
Collaborative and Proactive Solutions: Opening Day Keynote Presentation	460
Family Development Credential Program	1
Family Development Leadership Credential Program	1
Family School Connection Home Visitor Training	5
Communicating the Common Core: Schools and Parents Working Together for Student Success	1
People Empowering People (PEP) Facilitator Training	4
Parent Leadership Conference	1
10th Annual Retreat of the Connecticut Consortium on School Attendance	4
Nurturing Families in Action - Family Assessment Staff	1
Meeting the Challenge: CT Core Standards Success for English Language Learners and Students with Disabilities	5
2015 National Family and Community Engagement Conference	5

Identifying and Working with Parents with Cognitive Limitations	1
2016 National Family and Community Engagement Conference: Owning our Movement, Maximizing our Impact	6
Building Relationships with Families for Student Success	10
CT Family Engagement Conference: Building Dual Capacity with An Emphasis on Equity and Diversity	4
Leading for Equitable Classrooms - An Institute for Action (2 Day Training)	3
Suffolk University Center for Restorative Justice- Using Restorative Circles for Difficult Conversations around Race	28
New Britain LEA	2485
Question Persuade Refer Suicide Prevention Training	150
Program Technical Assistance DiLoreto	65
Specialized Classroom Management, BoysTown	75
Well Managed Schools, BoysTown-TA April	200
Well Managed Schools, BoysTown-Consultation Workshop	8
Well Managed Schools, BoysTown-TA May	200
SEL Curriculum Implementation and Review 360	400
SEL Curriculum	75
Lecture presentation from Dr. Steve Constantino	45
EASTCONN: Developmentally Appropriate Practices-Preschool teachers	20
EASTCONN: Developmentally Appropriate Practices-Grade 1 teachers	47
Love Wins Trauma Informed/Engagement Training, Dr. Steve Ablon	1200
State of CT	118
Believing the College Dream	45
Building Relationships with Families for Student Success: Full-Day Training for School and District Staff	73
Grand Total	4009

Number of participants trained	Element 4
Training Title	
Bridgeport LEA	49
Social Workers trained in SBIRT	43
CAST Group (11 sessions)	6
Middletown LEA	55
National Prevention Network (NPN) Prevention Research Conference	3
Protecting Brain Development	10
Adolescent SBIRT (Screening, Brief Intervention and Referral to Treatment)	
Training-of-Trainers: 2-day Training	1
Adolescent SBIRT (Screening, Brief Intervention, and Referral to Treatment)	11
Adolescent SBIRT (Screening, Brief Intervention, and Referral to Treatment) for Secondary Pupil Services Staff	30
State of CT	253
Adolescent SBIRT-Direct-April 18	13
Adolescent SBIRT-Direct-April 21	12

Adolescent SBIRT-Direct-May 26	13
Adolescent SBIRT-Direct-June 1	13
Adolescent SBIRT-Direct-June 8	15
Adolescent SBIRT-Direct-June 30	17
Adolescent SBIRT-Train the Trainer-May 4	16
Adolescent SBIRT-Train the Trainer-May 19	25
Adolescent SBIRT-Direct-April 8	15
Adolescent SBIRT-Direct-April 13	9
Adolescent SBIRT-Direct-May 19	15
Team Initiated Problem Solving Day 1-School Teams	50
Team Initiated Problem Solving Day 2-Coaching Support	25
Team Initiated Problem Solving Day 3-Train the Trainer	15
Grand Total	357

Number of participants trained	Element 5
Training Title	
Bridgeport LEA	897
CAST (Coping and Support) Training	4
Trauma Awareness Training	42
RULER Training	135
Student Support Page Training 1	25
RULER District Training	6
RULER School Implementation Teams	150
Kognito's At Risk For Educators PK-12 Training	6
PBIS Training Tier I Intervention	6
PBIS Training Tier II Intervention	6
Boys Town Training Follow-up	24
CICO training	7
Curriculum Training	15
PBIS Technical Assistance Workshop	5
PBIS Coaches Training	30
PBIS Training 11/10 Group 2	100
PBIS Training 11/9 Group 1	100
Tier 1 Booster Training	11
PBIS Team Training	13
Ruler/ Restorative Practice Training - OSS Cluster #1	35
Ruler/ Restorative Practice Training - OSS Cluster #2	35
Working with LGBTQ Youth : Best Practices	85
Social Emotional Training and Cultural Competency	37
Yale RULER Approach Training for Parents	20
Middletown LEA	370
Improving School Climate: Team Training	5
Restorative Practices Basic Training	2

School Threat Assessments	5
The Seedlings Institute for School Leaders at the Yale Center for Emotional Intelligence	3
Bullying, Harassment & Mandated Reporting: What School Officials Need to Know	34
Restorative Justice	20
Working with Street Gangs in New England and Building Health Equity	3
Right Response OPM Retreat	6
Positive Interventions & Strategies for Changing Behaviors on the Bus	157
School Climate Basic Training	5
BARJ/Restorative Practices Training	2
Coping and Support Training (CAST) Coordinator Training	1
Coping and Support Training (CAST) Facilitator Training	3
Restorative Practices Training	15
Introduction to Restorative Practices and Using Circles Effectively	40
Facilitating Restorative Conferences Two Day Training	17
Introduction to Restorative Practices	19
Safe School Ambassadors	9
SERC Dismantling Systemic Racism Conference	13
Safe School Ambassadors Training	11
New Britain LEA	4909
Kindergarten Summit	80
Well Managed Classroom Training Pulaski	95
Love Wins Presentation	30
SEE Orientation - Teachers and Administration	55
Love Wins Conference	135
Well Managed Schools Consultation 3 Day Workshop	5
Program Technical Assistance Smalley Kindergarten/ HALS	25
First Aid for Summer School Teachers	45
Well Managed Schools Admin Training-Cohort 1	15
Well Managed Schools Admin Training-Cohort 2	15
Well Managed Schools Admin Training-Cohort 3	15
Well Managed Schools Gaffney	100
Well Managed Schools Chamberlain/Holmes	120
Well Managed Schools Vance/Jefferson	120
Well Managed Schools - Summer School	90
Effective School Staff Interactions with Students and Police-Slade/Pulaski	160
Effective School Staff Interactions with Students and Police-High School	180
Well Managed Schools-Praise/Correction: Gaffney	100
Well Managed Schools-Praise/Correction: Chamberlain/Holmes	120
Well Managed Schools-Praise/Correction: Vance/Jefferson	120
Well Managed Classroom Training	185
First Aid /CPR Certification Program for Community Partners	45
Well Managed Schools Training-Building Consultant	500
Well Managed Schools-Coaches	7

Well Managed Schools-Building-wide PD	350
Think:Kids Training	9
Well Managed Schools - 5 school staffs	350
Look For The Good	2
Specialized Classroom Management, BoysTown-Alternatives Programs	15
Admin Intervention Training, BoysTown	15
Specialized Classroom Management	60
Well Managed Schools Train The Trainer	6
Well Managed Schools - new teachers	40
Boystown consultation: Sunrise	10
Boystown consultation: Steps	10
Boystown consultation: Transition Center	15
Boystown consultation: Brook Side School	15
Program Consultation and Technical Assistance	30
Consultation, BoysTown	25
ALICE (Alert, Lockdown, Inform, Counter, Evacuate)	1100
BoysTown - Specialized Classroom Management-March	50
BoysTown - Specialized Classroom Management-February	50
BoysTown- Well Managed Schools	100
BoysTown - Specialized Classroom Management-January	50
Boystown Well Managed Schools Coach Workshop	5
Well Managed Class Room Training Jan	120
Well Managed Class Room Training Mar	120
State of CT	1010
2-Day School Climate Training	60
Forum- Suspension (CHDI)	45
HOSA Conf. New Haven	35
Restorative Practice Training	45
School Climate Advanced Training	45
PBIS ToT	1
Restorative Practices Introduction - IIRP	1
Intro to Restorative Practices	33
Dismantling Racism	350
Transgender Conference/CHRO & True Colors	40
3rd Annual Dismantling Systemic Racism Conference	325
Alternatives to Restraint/Seclusion: Non Violent Crisis Intervention	30
Grand Total	7186

Number of participants trained	Multiple
Training Title	Elements
Bridgeport LEA	22
Behavior Strategies for Teachers- Boys Town	22
Middletown LEA	49

Social Thinking Conference	2
Emotional Intelligence: From Theory to Practice	2
Positive Behavioral Interventions & Supports (PBIS): Year 2 Day 2(Jan)/Day 3 (Mar)	23
Dismantling Systemic Racism 2016 Conference on Race, Education & Success	13
Northeast PBIS Network Leadership Forum 2016 (2-Day Training)	8
Reducing Barriers and Engaging Diverse Communities in Coalition Prevention Efforts	1
New Britain LEA	522
Well Managed Schools Administrator Training	60
New Britain High School Well Managed Schools Training	180
Framework for Implementing and Evaluating Prek-3rd Grade	25
Well Managed Schools Consultation Workshop	7
Well Managed Schools Training	250
State of CT	30
Enhancing Instructional Programs Within Schools: School Level Staff	10
Enhancing Instructional Programs Within Schools: School Level Staff 2	10
Enhancing Instructional Programs Within Schools: School Level Staff-April	10
Grand Total	623

V. Cumulative IPP Trainings (TR) by Element (2013-2018)

TR Definition: The number of individuals (other than those in the MH/related workforce) who have received training in prevention or mental health promotion.

*Total number of participants may contain duplicate attendees.

(Note: No Element 4 or Multiple Element trainings listed in our data)

Sum of Number of participants	Element 1
Training Title	
Bridgeport LEA	60
Juvenile Detention Staff Training	10
Family Training	50
Grand Total	60

Sum of Number of participants	Element 2
Training Title	
Bridgeport LEA	536
Ruler Training	25
Youth Mental Health First Aid Training for Parents and Community	18
Youth MH First Aid for school security officers	43
RULER School Visit Assembly	300
RULER Investee Presentation-Investors and Investees	100

RULER Investee Presentation-Trauk Family Foundation	15
LGBTQ Diversity Conference	35
New Britain LEA	372
SEE First Aid Training - Community Providers	40
Well Managed Schools Community Provider Training	35
Finish The Race	297
Grand Total	908

Sum of Number of participants	Element 3
Training Title	
Bridgeport LEA	152
Yale RULER Approach Training - Community Forum	125
Yale RULER Approach - Community Provider Train-the-Trainer	4
Youth Mental Health First Aid Training for Parents	23
Middletown LEA	13
2014 Stone Soup Conference - Parent Voices: From Listening to Action!	7
Friday CAFÉ: The Forgotten Partner	2
Building Opportunity, Two Generations at a Time	4
New Britain LEA	2115
High School Walk in Event	115
CCSU Got Grit?	2000
Grand Total	2280

Sum of Number of participants	Element 5
Training Title	
Bridgeport LEA	4117
District PAC RULER Overview - Parents	100
RULER District Convocation	4000
Bullying Prevention	17
Middletown LEA	90
Juvenile Review Board (JRB) Workshop: Sponsored by Middletown Court District Local Interagency Services Team (LIST)	17
Safe School Ambassadors	36
Safe School Ambassadors Training	37
New Britain LEA	4020
High School Rally	70
Violence Prevention Rally	800
Anti Violence Rally Keynote Speakers HS event	1500
Anti Violence Rally	1150
Internet Safety Presentation	500
Grand Total	8227

VI. Data tables for Annual Performance Report

Shared Indicators for Annual Performance Report from Evaluators, version date 10/31/2018

Shared Indicator	Community Name	Data	Analysis
GPRA 1: <i>The total number of children and youth served as a result of implementing strategies identified in the LEA comprehensive plan.</i>	Statewide (EdSight.ct.gov)	Baseline: 35,608 ² in the selected districts of 554,804 (total CT Student enrollment) Year 1: 35,912 549,877 Year 2: 36,138 546,347 Year 3: 35,963 541,815 Year 4: 36,068 538,893	Total number of students in districts total in state
	Bridgeport (EdSight.ct.gov)	Baseline: 6,209 20,338 Year 1: 5,932 20,929 Year 2 ³ : 5,669 21,244 Year 3: 5,327 21,191 Year 4: 5,396 21,222	Total number served in focus schools total in district
	Middletown (EdSight.ct.gov)	Baseline: 4,948 Year 1: 4,847 Year 2: 4,793 Year 3: 4,701 Year 4: 4,702	Total number of students in district
	New Britain (EdSight.ct.gov)	Baseline: 10,322 Year 1: 10,136 Year 2: 10,101 Year 3: 10,071 Year 4: 10,144	Total number of students in district

² Sum of LEA N served baseline year.

³ Bridgeport only evaluated by focus school Year 2 as interventions in the first year were done in Focus Schools. Boys Town was first implemented in SOARS/AIMS schools (not the same as Focus schools). PBIS and RULER were implemented district-wide after the first year. Interventions were implemented district-wide in 2017-18 School year.

Shared Indicators Element 1	Community Name	Data	Analysis
<i>% of students entering Kindergarten with an early childhood education experience prior to entering Kindergarten</i>	Statewide (ctdata.org /SDE/OEC)	Baseline: 79.3% n=31,148/39,429 Kindergarteners Year 1: 79.2% n=30,295/38,299 Year 2: 79.2% n=29,821/37,662 Year 3: 79.7% n=29,208/36,657 Year 4: 77.7% n=28,477/36,639	Fairly constant but with an uptick during the first 3 years, perhaps starting to reflect new pre-K slots that were part of state initiative. Drop in final year to significantly below baseline but this change may not have clinical significance..
	Bridgeport (SDE/OEC)	Baseline: 62.5% n=1,186/1,898 in district; 71.1% n=213/299 in Focus Schools Year 1: 65.9% n=1,223/1,856 in district; 71.1% n=220/310 in Focus Schools Year 2: 64.5% n=1,216/1,884 in district; 54.5% n=164/301 in Focus Schools Year 3: 73.7% n=1,282/1,739 in district; 79.2% n=229/289 in Focus Schools Year 4: 36.0% 654/1,816 per SDE/OEC. n=47.0% 149/317 in Focus Schools.	Marked increase since baseline at year 3, for both district and focus schools- perhaps due to new pre-K slots, both for overall district and focus schools. Small effect for increase from baseline to Yr3. There was a drop in final year to well below baseline, but this could be due to the fact that there may have been a different data source in Yr4 than previous years.
	Middletown (SDE/OEC/MPS-Yr3)	Baseline: 83.2% n=357/429 Year 1: 89.1% n=366/411 Year 2: 92.8% n=361/389 Kindergarteners, 89.0% n=349/392 with 1+ years of Pre-K experience Year 3: 88.6% n=343/387 Kindergarteners, 82.6% n=319/386 with +1 years of pre-k experience Year 4: 81.2% n=302/372 (SDE)	Higher than state averages from the beginning. There was still a general trend up, but with a non-significant decrease last 2 years to below baseline. (SDE data for Year 4 is higher than MSD reported value but neither was sig diff from baseline).
	New Britain	Baseline: 74% n=706/954	Near state averages

	(SDE/OEC; Also Coalition for New Britain's Youth (Yr 1))	Year 1: 76.6% n=667/871 ⁴ Year 2: 80.7% n=736/912 Year 3: 76.0% n=695/914 Year 4: 85.7% n=732/854	until Yr4. Small effect (d=.293) from Baseline to Year 4. In Yr4, NB is significantly higher than the state but this change may not have clinical significance.
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⁴ New Britain Kindergarten with Pre-K experience data and source updated on 12/28/2015 for Year 1 based on Coalition for New Britain's Youth's report "New Britain, Connecticut 2018: A Demographic, Social & Environmental Scan. 667 is calculated from SDE reported Kindergarten enrollment of 871.

Shared Indicators Element 2	Community Name	Data	Analysis
GPRA 2: <i>The total number of students receiving school-based mental health services.</i>	Statewide (DPH)	Baseline ⁵ : 7.1% 3,223 individuals of 45,243 individuals enrolled in SBHC; 16.8% of 19,080 individuals served by SBHC. 41.4% (n=42,298/102,210) of all visits were for mental health. Year 1: n=3,895 (N enrolled: data not available from DPH); 44.8% (n=48,482/107,243) of all visits were for mental health. Year 2: 10.1% n=4,448/44,118 individuals enrolled in SBHCs; 18.7% of 26,513 individuals served by SBHC; 44.6% (n=53,874/120,676) of all visits were for mental health.) Year 3: 10.9% n=4,883/47,776 individuals enrolled in SBHC; 16.8% of 19,080 individuals served by SBHC; 44.4% (n=47,843/107,748) of all visits were for mental health. Year 4: 8.7% n=3,952/45,562 individuals enrolled in SBHC; 15.1% of 26,256 individuals served by SBHC; 48.0% (n=55,405/115,322) of all visits were for mental health.	Statewide School Based Health Clinic Data Although generally a small percentage of students (7-11% of those enrolled; 14-19% of those served) visit the SBHCs for MH reasons, they account for a large percentage (41-48%) of total visits, indicating multiple visits for the same students.
	EMPS calls referred from Schools (EMPS)	Baseline: 3,761 calls (34.0%) referred from schools/11,061 total calls. Year 1: 4,229 calls (34.7%) referred from schools/12,177 total calls. Year 2: 4,292 calls (36.2%) referred from schools/11,871 total calls. Year 3: 4,681 calls (40.2%) referred from schools/11,655 total calls. Year 4: 4,972 calls (42.4%) referred from schools/11,735 total calls.	These data indicate the % of child crisis calls that originate from schools. This % seems to have trended up over the course of the grant.
	Bridgeport (BPS) (YR 4: Optimus and Southwest SBHCs)	Baseline: Data unavailable Year 1: 23.5% n=1,403/5,965 students Year 2: 27.6% n=1,560/5,661 students Year 3: 28.7% n=1,529/5,327 students Year 4: 22.0% n=1,723/7,817 students	% of MH Services in focus schools Statistically significant increase from Year 1 to Yr3, but this change may

⁵ Note: 2012-13 data were listed as “Not final”.

SOURCE: <https://www.cga.ct.gov/kid/rba/SchoolHealthCenters/DPH%20School-Based%20Health%20Centers%20Presentation%209-16-14.pdf>

			not have clinical significance
			Bpt is significantly higher than state in Yrs 3 and 4
	Middletown (MPS)	Baseline: Data unavailable Year 1: 21.2% n=1,010/4,782 students (Focus schools: 24% n=585/2,454 students) Year 2: 23.3% n=1,064/4,567 students (Focus Schools: 21% n=510/2,240 students) Year 3: 31.0% n=1,358/4,383 students Year 4: 13% 674/4,702 – incomplete data based on new PowerSchool data collection process not fully implemented.	% of MH Services in all schools (& in Focus schools) Large increase in Year 3 and a large decrease in Year 4, but this latter is likely due to reporting changes.
	New Britain (DPH & CSDNB)	Baseline: Data unavailable Year 1: 4.2% n=121/2,875 ⁶ students Year 2: 16.4% n=1,641/9,977 students Year 3: 14.9% n=1,485/9,934 students Year 4: Missing Holmes Elem.: 16.3% n=1,569/9,652 ⁷	% MH services in all NB schools. Statistically significant increase since Year 1, and higher than state average (where known) but still lower than other LEAs

⁶ N is total population of the only schools for which we have MH data this year (NBHS and Roosevelt MS).

⁷ N is total population for reporting schools (i.e., excluding Holmes Elementary) for this year.

Shared Indicators	Community Name	Data	Analysis
GPRA 3: <i>The percentage of mental health referrals for students that resulted in mental health services being provided in the community.</i>	Statewide (EMPS Data from DCF.)		
	EMPS Calls (aka: Episodes ⁸)	Baseline: 67.2% n=2,528 calls from schools that were referred to community services/3,761 calls from schools. Year 1 67.5% n=2,854/4,229 Year 2: 68.4% n=2,935/4,292 Year 3: 67.3% n=3,150/4,681 Year 4: 71.6% n=3,559/4,972	What is available at state level not exactly the indicator requested. EMPS reports: <ul style="list-style-type: none"> • number of calls or “episodes” received, • calls that were referred by schools, and • calls that received a care referral to community services. EMPS does not have data on whether the community services were provided.
	Unique Children Served ⁹ (EMPS)	Baseline: 38.9% n=3,288 ever referred by schools/ N=8,446 children with EMPS call(s) Year 1: 39.7% n=3,685 ever referred by schools/ N=9,288 children Year 2: 40.7% n=3,696 ever referred by schools/ N=9,087 children Year 3: 44.6% n=4,091 ever referred by schools/ N=9,168 children Year 4: 47.5% n=4,590 ever referred by schools/ N=9,654 children	No significant effect for comparing baseline to any subsequent year, although seems to be trending upward.
	Pre-K (~ age 0-4) Children Served	Baseline: 312 episodes; 227 children Year 1: 419 episodes n=273 children Year 2: 406 episodes; n=271 children Year 3: 301 episodes; n=199 children Year 4: 404 episodes n=282 children	
	Elementary (~ age 5-12) Children Served	Baseline: 3,923 episodes; 2,916 children Year 1: N= 4,398 episodes; 3,272 children Year 2: 4,674 episodes; 3,322	

⁸ EMPS calls with valid values for key variables (N=61,822 (77 calls with invalid values)); Excludes 211Only calls.

⁹ Unique Children with consistent values for Age, Race, Gender across all 5 years. N inconsistent=622.

	children Year 3: 5,031 episodes; 3,584 children Year 4: 5,623 episodes; 3,847 children	
Middle/High School (~ age 13-18) Children Served	Baseline: 6,773 episodes; 5,263 children Year 1: N= 7,517 episodes; 5,707 children Year 2: 7,345 episode; 5,455 children Year 3: 7,049 episodes; 5,355 children Year 4: 7,424 episodes; 5,496 children	53 episodes 22 from schools/72 calls for age >18
Bridgeport (Bridgeport Mental Health Referral Report)	Baseline: Data unavailable Year 1: 60% n=226/378 school referrals Year 2: 57% n=262/460 Year 3: 53% n=250/476 (BPS Report) Year 4: 73% n=275/375 (BPS Report)	Percentage of MH referrals resulting in community services was trending downward, but there was a significant increase in the last year.
Bridgeport EMPS calls from schools referred to community services (EMPS)	Baseline: 75.8% n=197 calls from schools that were referred to community services/260 calls from schools. Year 1: 81.2% 246/303 Year 2: 71.6% 184/257 Year 3: 67.8% 198/292 Year 4: 57.1% 125/219	Fewer calls from Bridgeport schools were referred to community services in Year 4 than at Baseline. Statistically significant moderate effect.
Middletown (MPS, EMPS)	Baseline: No data for % referred who received comm. serv.; 9.9% referred to comm. services n=482/4,869 enrolled (data provided by calendar year) Year 1: No data for % referred who received comm. serv. (N=62 EMPS calls from Middletown /40=EMPS calls referred from Middletown schools) Year 2: 61% n=159/262 of those referred received comm. services Year 3: 54% n=126/235 of those referred received comm. services Year 4: 71% n=105/147 of those referred received comm. services	Baseline number not likely accurate due to new reporting process. Number of MH referrals resulting in community services was trending downward, but there was a large increase in Yr 4 that was not statistically significant.
Middletown EMPS calls from schools referred	Baseline: 36.1% n=13 calls from schools that were referred to community services/36 calls from	Values from Yr1-Yr3 are lower than Baseline and Yr4

	to community services (EMPS)	schools. Year 1: 24.4% 10/41 Year 2: 14.5% 10/69 Year 3: 24.1% 13/54 Year 4: 38.9% 21/54	(Small statistical effect).
	New Britain (CSDNB, EMPS)	Baseline: Data unavailable Year 1: Local data not collected; (n=95 EMPS episodes referred from schools/128 EMPS calls) Year 2: 59% n=261/443 referrals Year 3: 67% n=189/282 Year 4: 53% n=170/319 referrals (missing Holmes Elementary and value for comm serv rec'd for Brookside Elementary unknown)	Non-significant increase from Year 2 to 3. Year 4 data is missing a school, so it's not clear if there is an actual trend down in the last year.
	New Britain EMPS calls from schools referred to community services (EMPS)	Baseline: 85.3% n=81 calls from schools that were referred to community services/95 calls from schools. Year 1: 87.5% 84/96 Year 2: 78.9% 71/90 Year 3: 86.4% 108/125 Year 4: 86.5% 109/126	Yr2 significantly lower than Baseline (Small effect). Other years do not differ significantly from baseline.

Shared Indicator: Element 3	Community Name	Data	Analysis
<i>Number and percent of students chronically absent</i>	Statewide (SDE Chronic Absenteeism Rate: EdSight)		
	Total % Chronically Absent	Baseline: 11.5% n=63,802/554,804 Year 1: 10.8% n=59,387/549,877 Year 2: 10.6% n=57,913/546,347 Year 3: 9.6% n=52,014/541,815 Year 4: 9.9% n=53,350/538,893	Trend downward in absenteeism at the state level, and in all subgroups, with slight uptick in year4. (significantly different from Baseline, but this change may not have clinical significance.) However, even Yr 4 is lower than baseline. These trends are seen in almost all categories listed below.
	Grades K-5	Baseline: 8.1% Year 1: 8.0% Year 2: 7.9% Year 3: 6.7% Year 4: 7.1%	
	Grades 6-8	Baseline: 10.7% Year 1: 9.7% Year 2: 9.6% Year 3: 8.5% Year 4: 8.8%	
	Grades 9-12	Baseline: 16.9% Year 1: 15.5% Year 2: 15.2% Year 3: 14.5% Year 4: 14.5%	
	American Indian or Alaska Native	Baseline: 14.1% Year 1: 12.8% Year 2: 12.0% Year 3: 9.7% Year 4: 12.7%	
	Asian	Baseline: 7.3% Year 1: 6.4% Year 2: 6.1% Year 3: 5.3% Year 4: 5.5%	
	Black or African	Baseline: 16.0%	

American	Year 1: 15.9% Year 2: 16.1% Year 3: 14.5% Year 4: 14.4%	
Hispanic Latino of any race	Baseline: 19.1% Year 1: 18.3% Year 2: 18.0% Year 3: 15.7% Year 4: 15.8%	
Native Hawaiian or Pacific Islander	Baseline: 12.2% Year 1: 10.7% Year 2: 9.4% Year 3: 9.0% Year 4: 11.0%	
Two or More Races	Baseline: 11.9% Year 1: 10.9% Year 2: 10.0% Year 3: 9.2% Year 4: 9.8%	
White	Baseline: 8.3% Year 1: 7.3% Year 2: 7.0% Year 3: 6.4% Year 4: 6.7%	
Students in Special Education	Baseline: 19.4% Year 1: 19.1% Year 2: 19.0% Year 3: 18.1% Year 4: 18.6%	Higher absentee rates seen with students in special education.
English Language Learner	Baseline: 18.4% Year 1: 18.2% Year 2: 17.5% Year 3: 14.9% Year 4: 14.6%	Higher absentee rates seen in ELL students.
Free Lunch Eligible	Baseline: 20.9% Year 1: 20.1% Year 2: 19.9% Year 3: 17.7% Year 4: 18.3%	Higher absentee rates in students with low income.
Reduced Lunch Eligible	Baseline: 10.4% Year 1: 9.2% Year 2: 8.8% Year 3: 8.2% Year 4: 9.4%	
Not Eligible for Lunch Subsidies	Baseline: 6.9% Year 1: 6.2% Year 2: 5.8%	

	Year 3: 5.3% Year 4: 5.7%	
Bridgeport (SDE Chronic Absenteeism Rate: EdSight)		
Total % Chronically Absent	Baseline: 25.1% Year 1: 21.2% Year 2: 19.0% Year 3: 17.4% Year 4: 18.3%	Well above state average in all years, but exhibits lowering trend overall and in most categories below. Small statistical effect Baseline vs Yr 3 for overall. Most categories below do not show a statistically significant reduction but are noted if do.
Grades K-5	Baseline: 17.9% Year 1: 17.4% Year 2: 15.7% Year 3: 13.9% Year 4: 14.0%	
Grades 6-8	Baseline: 18.7% Year 1: 18.5% Year 2: 16.3% Year 3: 15.3% Year 4: 15.1%	
Grades 9-12	Baseline: 47.4% Year 1: 31.9% Year 2: 27.9% Year 3: 25.8% Year 4: 29.5%	Small effect Baseline vs each subsequent year
American Indian or Alaska Native	Too few to report	
Asian	Baseline: 15.0% Year 1: 10.6% Year 2: 8.1% Year 3: 6.9% Year 4: 8.9%	
Black or African American	Baseline: 23.6% Year 1: 19.6% Year 2: 17.7% Year 3: 16.3% Year 4: 17.6%	
Hispanic Latino	Baseline: 27.2%	

	of any race	Year 1: 23.7% Year 2: 21.2% Year 3: 19.3% Year 4: 20.3%	
	Two or more Races	Baseline: Masked Year 1: 24.5% Year 2: 17.3% Year 3: 18.5% Year 4: 15.6%	
	White	Baseline: 23.1% Year 1: 17.7% Year 2: 16.4% Year 3: 15.2% Year 4: 15.2%	
	Students in Special Education	Baseline: 29.7% Year 1: 28.4% Year 2: 27.5% Year 3: 25.9% Year 4: 27.1%	
	English Language Learner	Baseline: 25.0% Year 1: 21.3% Year 2: 18.2% Year 3: 16.2% Year 4: 16.4%	
	Free Lunch Eligible	Baseline: 25.1% Year 1: 21.2% Year 2: 19.0% Year 3 ¹⁰ : 17.4% Year 4: 23.9% ⁱ	In Yr 4, FRL was 51% instead of the 100% previously reported. Although this doesn't necessarily affect the absentee rate, the denominator for Yr4 is half of prior years due to a policy change.
	Reduced Lunch Eligible	Too few to report	
Middletown (SDE Chronic Absenteeism Rate: EdSight)			
	Total % Chronically Absent	Baseline: 11.2% Year 1: 10.1% Year 2: 9.5% Year 3: 9.1% Year 4: 9.1%	Similar to state averages, with similar downward trends, and subgroup differences.
	Grades K-5	Baseline: 7.0% Year 1: 7.5% Year 2: (5.7% excluding grade 4-	

¹⁰ Baseline through Year 3, Bridgeport reported ~100% of students eligible for Free Lunch; In Year 4, Bridgeport changed their protocol for reporting Free/Reduced lunch eligibility.

		masked in data - true value is lower) Year 3: 4.1% Year 4: 4.2%	
	Grades 6-8	Baseline: 11.6% Year 1: 10.8% Year 2: (14.9% Grades 7-8 only, grade 6= masked data - true value is lower) Year 3: 8.3% Year 4: 7.8%	
	Grades 9-12	Baseline: 19.0% Year 1: 14.5% Year 2: 16.6% Year 3: 18.2% Year 4: 18.4%	
	Asian	Too few to report	
	Black or African American	Baseline: 10.9% Year 1: 13.4% Year 2: 11.4% Year 3: 10.8% Year 4: 9.9%	
	Hispanic Latino of any race	Baseline: 17.0% Year 1: 17.0% Year 2: 12.6% Year 3: 13.9% Year 4: 14.6%	
	Two or More Races	Baseline: 13.7% Year 1: 9.0% Year 2: 10.3% Year 3: 8.5% Year 4: 9.9%	
	White	Baseline: 9.6% Year 1: 6.9% Year 2: 7.9% Year 3: 7.1% Year 4: 7.0%	
	Students in Special Education	Baseline: 19.8% Year 1: 16.6% Year 2: 17.9% Year 3: 18.5% Year 4: 17.8%	
	English Language Learner	Baseline: 14.2% Year 1: 17.6% Year 2: 15.2% Year 3: 11.7% Year 4: 11.2%	

Free Lunch Eligible	Baseline: 16.4% Year 1: 16.8% Year 2: 15.4% Year 3: 15.1% Year 4: 14.9%	
Reduced Lunch Eligible	Baseline: 8.0% Year 1: 7.9% Year 2: 5.0% Year 3: 6.1% Year 4: 7.9%	
Not Eligible for Lunch Subsidies	Baseline: 8.0% Year 1: 5.7% Year 2: 5.5% Year 3: 4.9% Year 4: 5.4%	
New Britain (SDE Chronic Absenteeism Rate: EdSight)		
Total % Chronically Absent	Baseline: 24.6% Year 1: 19.2% Year 2: 20.7% Year 3: 18.0% Year 4: 20.1%	Rates well above state averages in all years. There seems to be a lowering trend with a slight uptick in year 4, but Yr 4 is still lower than baseline.
Grades K-5	Baseline: 14.8% Year 1: 11.4% Year 2: 12.2% Year 3: 10.5% Year 4: 11.4%	
Grades 6-8	Baseline: 27.1% Year 1: 18.8% Year 2: 19.8% Year 3: 17.5% Year 4: 21.3%	Yr 3 significantly lower than Baseline.
Grades 9-12	Baseline: 43.1% Year 1: 35.8% Year 2: 38.0% Year 3: 33.8% Year 4: 37.7%	Yr 3 significantly lower than Baseline.
Asian (Note: Race groups other than AA, Hispanic, and White were not updated using current EdSight values for all LEAs and State.)	Baseline: Too few to report Year 1: 9.4% Year 2: 6.3% (CSDNB) Year 3: Too few to report Year 4: 8.7% (CSDNB)	
Black or African American	Baseline: 21.8% Year 1: 16.2% Year 2: 16.4%	

		Year 3: 15.6% Year 4: 17.4%	
	Hispanic Latino of any race	Baseline: 28.2% Year 1: 22.2% Year 2: 24.2% Year 3: 20.5% Year 4: 23.2%	
	Two or more races	Baseline: 28.4% Year 1: 18.4% Year 2: 19.7% Year 3: 15.8% Year 4: 16.2%	
	White	Baseline: 18.2% Year 1: 13.6% Year 2: 14.4% Year 3: 12.9% Year 4: 13.7%	
	Students in Special Education	Baseline: 31.3% Year 1: 27.4% Year 2: 26.9% Year 3: 26.3% Year 4: 28.8%	
	English Language Learner	Baseline: 26.7% Year 1: 25.9% Year 2: 25.7% Year 3: 23.1% Year 4: 25.7%	
	Free Lunch Eligible	Baseline: 27.6% Year 1: 21.5% Year 2: 23.5% Year 3: 20.3% Year 4: 21.6%	
	Reduced Lunch Eligible	Baseline: 13.0% Year 1: 10.8% Year 2: 9.5% Year 3: 10.5% Year 4: 12.2%	
	Not Eligible for Lunch Subsidies	Baseline: 17.2% Year 1: 14.0% Year 2: 12.4% Year 3: 11.6% Year 4: 14.8%	

Shared Indicators Element 3	Community Name	Data	Analysis
<i>Number and percent of student suspension and expulsion rates.</i>	Statewide (EdSight)		
	In School suspensions	Baseline: 72,812 sanctions (0.13/student enrolled) Year 1: 63,568 sanctions (0.12/student enrolled) Year 2: 58,638 sanctions (0.11/student enrolled) Year 3: 56,866 sanctions (0.11/student enrolled) Year 4: 53,057 sanctions (0.10/student enrolled) ISS, OSS, Expulsions -- Breakdown is by sanction category and incident category.	This section indicates total numbers of sanctions by type, as well as rates when known. No breakdown of students by race/ethnicity/disability available for suspension or expulsion rates on a district level. Generally low rates for all types of sanctions and no significant time trends noted overall.
	Out of school Suspensions	Baseline: 41,132 sanctions (0.07/student enrolled) Year 1: 40,648 sanctions (0.07/student enrolled) Year 2: 37,701 sanctions (0.07/student enrolled) Year 3: 34,415 sanctions (0.06/student enrolled) Year 4: 32,982 sanctions (0.06/student enrolled)	
	Expulsions	Baseline: 954 sanctions Year 1: 939 sanctions Year 2: 849 sanctions Year 3: 848 sanctions Year 4: 750 sanctions	No data received or available online from CSDE on expulsion rates in the districts.
	Bus Suspensions	Baseline: 1,322 sanctions Year 1: 1,218 sanctions Year 2: 1,490 sanctions Year 3: 1,533 sanctions Year 4: 1,267 sanctions	

Total Sanctions	Baseline: 116,220 total sanctions of all types (0.21/student enrolled). Year 1: 106,373 total sanctions (0.19/student enrolled). Year 2: 98,678 total sanctions (0.18/student enrolled). Year 3: 93,662 total sanctions (0.17/student enrolled). Year 4: 88,056 total sanctions (0.16/student enrolled)	
Suspension rate (Students with any sanction) by grade		
	Baseline: 7.8% (43,248/554,804); K-5: 3.0%, Grade 6-8: 10.3%, HS: 13.5%. Year 1: 7.4% (n=40,914/ N=549,877); K-5: 3.1%, Grade 6-8: 10.1%, HS: 12.3%. Year 2: 7.2% (n=30,440/N=546,347); K-5: 3.1%, Grade 6-8: 9.6%, HS: 11.9%. Year 3: 7.0% (n=38,100/N=538,893); K-5: 2.6%, Grade 6-8: 9.8%, HS: 11.8%. Year 4: 6.8% (36,582/538,893) K-5: 2.6%, Grade 6-8: 9.9%, HS: 11.0%.	There seems to be a slight trend downward for total sanction rate at the state level. Baseline v Yr3 and Baseline v Yr4 both statistically significant but this change may not have clinical significance.
Suspension rate (Students with any sanction) by gender		
Male	Baseline: SDE: 10.2% Year 1: 9.9% Year 2: 9.6% Year 3: 9.3% Year 4: 9%	
Female	Baseline: SDE: 5.2% Year 1: 4.8% Year 2: 4.6% Year 3: 4.5% Year 4: 4.3%	
Suspension rate (Students with any sanction) by race		
Black	Baseline: SDE: 17.5% Year 1: 17.1% Year 2: 16.5% Year 3: 16.2% Year 4: 15.2%	
White	Baseline: SDE: 4.4% Year 1: 4.1% Year 2: 3.9% Year 3: 3.9% Year 4: 3.9%	

Hispanic	Baseline: SDE: 12.5% Year 1: 11.8% Year 2: 11.2% Year 3: 10.3% Year 4: 9.7%	
Bridgeport (EdSight)		
In School suspensions	Baseline: n=5,329 sanctions (0.26/student enrolled) Year 1: n=4,214 sanctions (0.20/student enrolled) Year 2: n=4,536 sanctions (0.21/student enrolled) (Focus Schools: 1,912 sanctions) Year 3: n=5,085 sanctions (0.24/student enrolled) (Focus Schools: 1,958 sanctions) Year 4: n=4,731 sanctions (0.22/student enrolled) (Focus Schools: 1,718 sanctions)	Generally higher than state rates. No change over time noted.
Out of school Suspensions	Baseline: n=4,184 sanctions (0.21/student enrolled) Year 1: n= 4,783 sanctions (0.23/student enrolled) Year 2: n=3,937 sanctions (0.19/student enrolled) (Focus Schools: 1,501 sanctions) Year 3: n=3,393 sanctions (0.16/student enrolled) (Focus Schools: 1,137 sanctions) Year 4: n=3,191 sanctions (0.15/student enrolled)	Generally higher than state rates. Generally lowering trend but not significant.
Expulsions	Baseline: n=51 sanctions Year 1: n=54 sanctions Year 2: n=44 sanctions (Focus Schools: 25 sanctions) Year 3: n=76 sanctions Year 4: n=90 sanctions	Number of expulsions shows general increase over time in Bridgeport.
Bus Suspensions	Baseline: n=59 sanctions Year 1: n=45 sanctions Year 2: n=19 sanctions Year 3: n=16 sanctions Year 4: n=30 sanctions	Generally higher than state rates, but decreasing over time.

Total Sanctions	Baseline: 9,620 total sanctions of all types (0.47/student enrolled). Year 1: 9,096 total sanctions (0.44/student enrolled). Year 2: 8,536 total sanctions (0.40/student enrolled). Year 3: 8,570 total sanctions (0.40/student enrolled). Year 4: 8,042 total sanctions (0.38/student enrolled)	Slight lowering trend noted.
Suspension rate (Students with any sanction)		
Total	Baseline: 17.0% (3,456/20,338) Year 1: 16.2% (3,381/20,929) Year 2: 15.7% (3,343/21,244) Year 3: 15.7% (3,327/21,191) Year 4: 15.0% (2,184/21,222)	Suspension rate shows general decrease. Baseline vs Yr 3 and vs Yr 4 decreases are statistically significant but this change may not have clinical significance.
Elementary (K-5)	Baseline: 8.3% (n=867/10,490) Year 1: 8.0% (n=843/10,577) Year 2: 7.2% (n=766/20,641) Year 3: 7.3% (n=766/10,571) Year 4: 7.9% (n=835/10,570)	Slight downward trend over time.
Middle (6-8)	Baseline: 23.1% (n=983/4,260) Year 1: 23.1% (n=975/4,426) Year 2: 22.1% (n=961/4,340) Year 3: 21.9% (n=921/4,206) Year 4: 18.9% (n=795/4,205)	
High School (9-12)	Baseline: 33.9% n=1,602/4,730) Year 1: 29.8% (n=1,494/5,012) Year 2: 30.1% (n=1,573/5,221) Year 3: 30.0% (1,630/5,429) Year 4: 28.5% (1,552/5,445)	
Middletown (MPS district data, SDE-EdSight)		

In School Suspensions	Baseline: SDE: 557 sanctions (0.11/student enrolled) Year 1: n=377 sanctions (0.08/student enrolled) Year 2: n=492 sanctions (0.10/student enrolled) Year 3: n=547 sanctions (0.12/student enrolled) Year 4: n=435 sanctions (0.09/student enrolled)	
Out of school Suspensions	Baseline: SDE: 421 sanctions (0.09/student enrolled) Year 1: n=279 sanctions (0.06/student enrolled) Year 2: n=274 sanctions (0.06/student enrolled) Year 3: n=320 sanctions (0.07/student enrolled) Year 4: n=258 sanctions (0.06/student enrolled)	General lowering trend noted despite increase in Yr 3.
Expulsions	Baseline: SDE: 10 sanctions Year 1: n=13 sanctions Year 2: n=4 sanctions Year 3: n=4 sanctions Year 4: n=12 sanctions (MPS)	
Bus Suspensions	Baseline: 16 sanctions Year 1: n=28 sanctions Year 2: n=18 sanctions Year 3: n=42 sanctions Year 4: n=39 sanctions	
Total Sanctions	Baseline: 1,004 total sanctions of all types (0.20/student enrolled). Year 1: 697 total sanctions (0.14/student enrolled). Year 2: 788 total sanctions (0.16/student enrolled). Year 3: 913 total sanctions (0.19/student enrolled). Year 4: 744 total sanctions (0.16/student enrolled)	
Suspension rate (Students with any sanction)		
Total	Baseline: 8.3% (412/4,874) Year 1: 6.9% (335/4,782) Year 2: 8.4% (383/4,721) Year 3: 8.1% (383/4,701) Year 4: 7.1% (334/4,702)	Fairly consistent rate over time.

Elementary (K-5)	Students sanctioned: Baseline: 5.2% n=128/2,452 Year 1: 5.4% n=130/2,420 Year 2: 5.7% n=133/2,334 Year 3: 5.1% n=115/2,261 Year 4: 5.9% n=132/2,232	
Middle (6-8)	Baseline: 16.0% n=164/1,022 Year 1: 13.3% 132/994 Year 2: 15.3% 157/1,023 Year 3: 14.1% 141/1,001 Year 4: 15.4% n=155/1,004	
High School (9-12)	Baseline: 13.0% n=176/1,350 Year 1: 9.0% 117/1299 Year 2: 12.8% 168/1313 Year 3: 12.8% 168/1309 Year 4: 8.2% 109/1,336	
New Britain (CT SDE Suspensions and Expulsions, CT Voices for Children Report 2015, SDE; District Discipline Summary Report 2015-2016)		
In School suspensions	Baseline: n=5,680 sanctions (0.55/student enrolled) Year 1: n=4,145 sanctions (0.41/student enrolled) Year 2: n=3,012 sanctions (0.30/student enrolled) Year 3: n=2,562 sanctions (0.25/student enrolled) Year 4: n=2,336 sanctions (0.23/student enrolled) (800 students w/ISS: 3.2 ISS per student w/ISS (CSDNB))	Number of sanctions overall shows downward trend.
Out of school Suspensions	Baseline: n=2,314 sanctions (0.22/student enrolled) Year 1: n=2,127 sanctions (0.21/student enrolled) Year 2: n=1,523 sanctions (0.15/student enrolled) Year 3: n=1,374 sanctions (0.14/student enrolled) Year 4: n=1,333 sanctions (0.13/student enrolled) (688 students w/OSS: 1.92 ISS per student w/ISS (CSDNB))	

Expulsions	Baseline: not enough data Year 1: n=45 sanctions Year 2: n=39 sanctions Year 3: n=40 sanctions Year 4: n=22 sanctions	
Bus Suspensions	Baseline: 10 sanctions Year 1: n=36 sanctions Year 2: n=98 sanctions Year 3: n=60 sanctions Year 4: n=65 sanctions	
Total Sanctions	Baseline: 8,032 total sanctions of all types (0.78/student enrolled). Year 1: 6,353 total sanctions (0.55/student enrolled). Year 2: 4,672 total sanctions (0.46/student enrolled). Year 3: 4,036 total sanctions (0.40/student enrolled). Year 4: 3,756 total sanctions (0.37/student enrolled)	Decreasing trend of total sanctions per student enrolled.
Suspension rate (Students with any sanction)		
Total	Baseline: SDE: 18.8% n=1,936/10,322 Year 1: 19.7% n=2,009/10,136 Year 2: 14.8% n=1,523/10,101 Year 3: 13.5% n=1,394/10,071 Year 4: 11.5% n=1177/10,144	General decrease over time. Baseline v Yr 3 and v Yr 4 are statistically significant. Year 4 represents a clinically significant small effect.
Suspension rate (Students with any sanction) by grade		
Elementary (K-5)	Students sanctioned Baseline: 9.0% n=456/5,080 Year 1: 9.1% n=455/5,020 Year 2: 6.7% n=339/5,043 Year 3: 6.4% n=325/5,055 Year 4: 5.2% n=265/5,097	
Middle (6-8)	Students sanctioned Baseline: 24.2% n=522/2,161 Year 1: 27.0% n=562/2,085 Year 2: 22.4% n=442/1,972 Year 3: 14.9% n=296/1,987 Year 4: 17.6% n=362/2,060	Baseline v Yr 3 almost significant.

	High School (9-12)	Students sanctioned Baseline: 35.6% n=941/2,614 Year 1: 37.9% n=992/2,614 Year 2: 28.6% n=741/2,592 Year 3: 30.0% n=773/2,580 Year 4: 22.1% n=550/2,488	Baseline v Yr4 small significant effect
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Shared Indicators Element 4	Community Name	Data	Analysis
GPRA 4: <i>The percentage of students who report consuming alcohol on one or more occasions during the past 30 days.</i>	Statewide (YRBS 2013, 2015, 2017: administered every other year)	Baseline: 36.7% n=2,231 Year 1: not administered Year 2: 30.2% n=2,224 Year 3: not administered Year 4: 30.4% n=2,284	Statistically significant decrease from Baseline to Year 4, but this change may not be clinically significant. Only non-consecutive years' data available at state level. No statistically significant differences in subgroups below unless noted.
	Female	Baseline: 37.0% n=1,167 Year 1: not administered Year 2: 32.0% n=1,123 Year 3: not administered Year 4: 32.7% n=1,156	
	Male	Baseline: 36.4% n=1,198 Year 1: not administered Year 2: 28% n=1,089 Year 3: not administered Year 4: 28.3% n=1,120	
	Black	Baseline: 27.9% n=152 Year 1: not administered Year 2: 21.1% n=177 Year 3: not administered Year 4: 20.9 n=222*	
	White	Baseline: 39.7 n=1,420 Year 1: not administered Year 2: 31.9% n=1,296 Year 3: not administered Year 4: 34.5% n=1,102	
	Hispanic	Baseline: 30.6 n=374 Year 1: not administered Year 2: 31.8% n=487 Year 3: not administered	Significant difference in Yr 4 between Hispanic girls and boys.

	Year 4: 27.9% n=649 Year 4: Hispanic girls: 34.7% n=329 Hispanic boys: 21.7% n=318	
Multi-Racial	Baseline: 46.2% n=101 Year 1: not administered Year 2: 29.9% n=104 Year 3: not administered Year 4: 20.6% n=130	
Bridgeport (Search Institute Developmental Assets Survey (2010-11 and 2013-14); Bridgeport Active Consent School Climate Survey (2014-2015); YRBS (2015-2016))	Baseline: 24.8% n=248/1,002 Year 1: 32% n=215/673 Year 2 ¹¹ : MS: 3.3% n=5/151 Year 3 ¹² : 24.8% n=251/1,011 Year 4: Survey not administered.	Different data collection tools and procedures in different years. Comparisons over time may be spurious.
Middletown Search Institute Developmental Assets Survey ¹⁰ ; School Climate Survey (2014-15 & 2015-16); MPS 2016-17	Baseline: 25.7% n=419/1,629 ¹³ Year 1: Data unavailable Year 2: 10.6% n=146/1,375 MS: 4.6% n=27 HS: 14.4% n=107 Year 3: 11.3% n=144/1,278 MS: 5.7% n=20/630 HS: 16.7% n=92/648 Year 4: 9.7% n=150/1550 MS: 5.7% n=38/666 HS: 12.7% n=112/884	There were changes in the tool used to collect yearly district climate data over multiple years. Comparisons over time may be spurious.
New Britain School Climate Survey Yr 2: May-June 2015 (96.8% MS students) Yr 3: Fall 2015 (52.3% MS students)	Baseline: Data unavailable Year 1: Data unavailable Year 2: 6.6% n=94/1,435 Year 3: 6.3% n=221/3,525 Year 4: Data unavailable	Inconsistent collection procedures over the years. Comparisons over time may be spurious.

¹¹ Bridgeport conducted a separate School Climate Survey that required active consent resulting in a low number of responses primarily representing 7th grade girls. (63% girls, 70% 7th grade (n=3 11th grade, the rest were 6th=8th), 93.5% age 12-14)

¹² Two of three high schools reported.

¹³ Search Institute data from 2011-12. No data exist for 2012-13.

	<p>How often did you consume 'more than just a few sips' of alcohol?</p> <p>Search Institute</p> <p>Yr 2: Combined Spring 2015 (mostly MS) +Fall 2015 (all HS) (overall 45.4% MS students)</p> <p>Yr 5: Spring 2018 (80.8%MS students)</p>	<p>Baseline: Data unavailable</p> <p>Year 1: Data unavailable</p> <p>Year 2: OVERALL¹⁴: 16.6% n=408/2,460</p> <p>MS¹⁵: 13.0% n=146/1,127</p> <p>HS¹⁶: 19.7% n=262/1,333</p> <p>Year 3: SI not administered</p> <p>Year 4: SI not administered</p> <p>*Year 5¹⁷: OVERALL: 11.4% n=92/805</p> <p>MS: 8.4% n=55/665</p> <p>HS: 24.2% n=36/154</p>	<p>Inconsistent collection procedures. Comparisons over time are spurious.</p> <p>*Yr 5 included since LEA did not have 3 data points. Sample is 81% MS. HS data <u>does not</u> include 10th grade students.</p>
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¹⁴ Spring endorsed plus Fall endorsed (146+262=408) divided by Spring Surveyed plus Fall Surveyed (1127+1333=2460)

¹⁵ Includes: Pulsaski MS, Slade MS, HALS Academy and 7th grade from Alternative Center Schools. Excludes 45 HS students (Alternative Center Schools)

¹⁶ Includes: NBHS from Fall 2015 survey and 45 HS students from Spring 2015 survey.

¹⁷ Using Search Institute data from AEP (grades 7,11,12), NBHS (grades 9,11,12 only), Pulaski MS, Slade MS, Diloreto MS (n=823). 805/823 (97.8%) had a valid response to the Alcohol question.

Shared Indicators Element 5	Community Name	Date	Analysis
GPRA 5: <i>The percentage of students who reported being in a physical fight on school property during the current school year.</i>	Statewide (YRBS administered every other year 2013, 2015, 2017 HS only)	Exact data point not available, percent of students in 1+ physical fights in past year is reported: Baseline: 22.4% (YRBS 2013). Year 1: not administered Year 2: 18.4% (YRBS 2015) Year 3: not administered Year 4: 17.3% (YRBS 2017)	No statistical effect for reductions from baseline to year 4. Rates for Black (18.6%) & Hispanic (15.3%) girls was more comparable to Black (22.0%) and Hispanic (22.9%) boys compared to White girls (8.5%) and boys (22.4%).
	Bridgeport Bridgeport Active Consent School Climate Survey (2014-2015); YRBS 2015-2016	Exact data point not available, “During the past 12 months, how many times were you in a physical fight on school property?” reported Baseline: Data unavailable Year 1: Data unavailable Year 2: 23.2% n=35/151 Year 3: 22.9% n=226/988 for Harding and Central HS Year 4: Survey not administered.	Only 2 years of data available, different populations surveyed, other methodological issues so not valid to make comparisons.
	Middletown Search Institute¹⁸; School Climate Survey (2014-15; 2015-16); MPS (2016-17)	Exact data point not available, “During the past 12 months, how many times were you in a physical fight on school property?” reported Baseline: See below for alternate SI wording and data from 2011-2012. Year 1: Data unavailable Year 2: 13.7% n=188/1,372 MS: 16.5% 96/583 HS: 10.1% 75/740 Year 3: 14.5% n=186/1,278 MS: 19.5% HS: 9.6% Year 4: 13.9% n=216/1550 MS: 17.0% 113/666 HS: 8.9% 79/884	District-wide. Fairly consistent over time.
	Hit someone 1+ times in last 12 months	Baseline: 34% n=554/1,629	
	Been in a group	Baseline: 15% n=244/1,629	

¹⁸ Search Institute (SI) wording differs from specified YRBS wording. SI data were specified by gender and grade, but not race/ethnicity.

fight 1+ times in last year		
Engaged in 3+ acts of fighting, hitting, injuring a person, carrying or using a weapon, or threatening physical harm in the last year	Baseline: 29% n=472/1,629	
Hispanic students grades 7-12	Baseline: Data unavailable Year 1: Data unavailable Year 2: 15% n=21/140 Year 3: 23.6 n=61/258 MS: 18.5% HS: 25.0% Year 4: Data unavailable	Somewhat higher than overall.
African American students grades 7-12	Baseline: Data unavailable Year 1: Data unavailable Year 2: 15% n=35/227 Year 3: 18.2% n=36/198 MS: 22.2% HS: 21.5% Year 4: Data unavailable	Somewhat higher than overall.
New Britain School Climate Survey ¹⁹ Yr 2: May-June (96.8% MS) Yr 3: Fall (52.3% MS)	Baseline: Data unavailable Yr 1: Data unavailable Yr 2: 14.9% n=235/1,572 Yr 3: 7.6% n=267/3,525 Yr 4: Data unavailable	Inconsistent collection procedures. Comparisons over time are spurious.
Hit someone 1+ times in past year Search Institute Yr 2: Combined Spring 2015 (mostly MS) +Fall 2015 (all HS) (overall 45.4% MS students) Yr 5: Spring 2018 (80.8%MS students)	Baseline: Data unavailable Year 1: Data unavailable Year 2: OVERALL 34.6% n=865/2,503 MS: 45.1% n=512/1,136 HS: 30.5% n=413/1,356 Year 3: SI not administered Year 4: SI not administered *Year 5: OVERALL 42.9% n=353/823 MS: 45.6% n=299/655 HS: 26.6% n=41/154	*Yr 5 included since LEA did not have 3 data points. Various methodological and sampling issues – not valid to compare years.

¹⁹ Students who *reported being in a physical fight on school property during the current school year.*

	<p>Involved in a group fight 1+ times in past year</p> <p>Search Institute</p> <p>Yr 2: Combined Spring 2015 (mostly MS) +Fall 2015 (all HS) (overall 45.4% MS students)</p> <p>Yr 5: Spring 2018 (80.8%MS students)</p>	<p>Baseline: Data unavailable</p> <p>Year 1: Data unavailable</p> <p>Year 2: OVERALL 18.9% n=474/2,503 MS: 23.4% n=266/1,136 HS: 18.2% n=245/1,356</p> <p>Year 3: SI not administered</p> <p>Year 4: SI not administered</p> <p>*Year 5: OVERALL 20.0% n=165/823 MS: 20.0% n=133/665 HS: 20.1% n=31/154</p>	<p>*Yr 5 included since LEA did not have 3 data points.</p> <p>Various methodological and sampling issues – not valid to compare years.</p>
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Shared Indicators Element 5	Community Name	Data	Analysis
<p>GPRA 6:</p> <p><i>The percentage of students who did not go to school because they felt unsafe at school or on their way to and from school.</i></p>	Statewide (YRBS administered every other year 2013, 2015, 2017)		
	Total	Baseline: 6.8% n=2,401/32,908 Year 1: not administered Year 2: 6.9%, n=2,368/31,951 Year 3: not administered Year 4: 6.9% n=2,395/32,315	No change
	Female	Baseline: 7.1% n=1,179 Year 1: not administered Year 2: 6.2%, n=1,184 Year 3: not administered Year 4: 7.5% n=1,200	Signif decrease in Yr 2 but increase Yr 4.
	Male	Baseline: 6.6% n=1,215 Year 1: not administered Year 2: 7.2%, n=1,173 Year 3: not administered Year 4: 6.1% n=1,181	Signif increase Yr 2 but decrease Yr 4.
	Bridgeport (Bridgeport Active Consent School Climate Survey (2014-2015) ; YRBS (2015-2016) 2 of 3 HS reported.		
	Total	Baseline: not administered Year 1: not administered Year 2: 24% 36/151 Year 3: 13.3% n = 132/993 (YRBS 2015-2016) Year 4: Survey not administered	Only 2 years of data available. Samples differ so comparison is spurious.
	Female	Year 3: 15.3% n=75/489) Year 4: Survey not administered	
	Male	Year 3: 10.8% n=54/499 Year 4: Survey not administered	

<p>Grades 9-12 LGBTQ Subpopulation (GLSEN, YRBS)</p>	<p>Baseline: Data unavailable for LEA, but available for statewide. 23%/29% of students statewide regularly heard staff make negative remarks about someone's gender expression, and 10%/14% regularly heard school staff make homophobic remarks (CT GLSEN, 2013/2015). 11% of students statewide have been the victim of teasing or name calling during the past 12 months because someone thought they were gay, lesbian or bisexual (CT YRBS, 2013). (Males 11.7%; Females 10.1%; Hispanic (16.1%; 9th grade 13.0%)</p> <p>Year 1: Data unavailable Year 2: Data unavailable Year 3: YRBS 2015: 9.1%ⁱⁱ (Males 9.8%; Females 8.0%; Hispanic (13.1%; 10th grade 10.2%)) Year 4: Survey not administered</p>	<p>Data for baseline, year 1 and year 2 are unavailable due to no questions administered on this subject.</p> <p>Statewide GLSEN 2017 data has not been made available yet.</p> <p>9th grade is the grade with the highest percentage reporting being victim of name calling or teasing (CT YRBS, 2013).</p>
<p>Middletown (School Climate Survey Yr2 & Yr3; MPS Yr4)</p>		
<p>Total</p>	<p>Baseline: Data unavailable Year 1: Data unavailable Year 2: 15.3% n=210/1,377 Year 3: 14.6% n=187/1,276 Year 4: 12.7% 197/1550</p>	<p>Non-significant lowering trend.</p>
<p>Middle School</p>	<p>Baseline: Data unavailable Year 1: Data unavailable Year 2: 15.4% n=90/583 Year 3: 14.5% n=91/629 Year 4: 15.1% 101/666</p>	
<p>High School</p>	<p>Baseline: Data unavailable Year 1: Data unavailable Year 2: 14.2% n=106/745 Year 3: 14.8% n=96/647 Year 4: 10.9% n=96/884</p>	
<p>New Britain (School Climate Survey and Search Institute)</p>		
<p>New Britain School Climate Survey Yr 2: May-June (96.8% MS)</p>	<p>Baseline: Data unavailable Year 1: Data unavailable Year 2: 6.7% n=106/1,572 Year 3: 6.1% n=214/3,525 Year 4: Data unavailable</p>	<p>Inconsistent collection procedures. Comparisons over time are spurious.</p>

	Yr 3: Fall (52.3% MS)		
	Feel safe at school (Strongly Disagree/Disagree) School Climate Survey Yr 1: Fall (61.7% MS students) Yr 2: May-June (96.8% MS) Yr 3: Fall (52.3% MS)	Baseline: Data unavailable Year 1: 16.3% n=328/2,017 Year 2: 13.3% n=199/1,499 Year 3: 11.2% n=360/3,220 Year 4: Data unavailable	Inconsistent populations. Comparisons over time are spurious, however the same question was asked for all years. Year1 v. year 3 is a significant decrease but that change may not be clinically significant.
	Afraid someone will hurt you at school School Climate Survey Yr 1: Fall (61.7% MS students) Yr 2: May-June (96.8% MS) Yr 3: Fall (52.3% MS)	Baseline: Data unavailable Year 1: 31.0% n=592/1,911 Year 2: 26.4% n=396/1,499 Year 3: 27.8% n=895/3,220 Year 4: Data unavailable	Inconsistent populations. Comparisons over time are spurious, however the same question was asked for all years. No significant change.

End Notes:

¹ In Year 4 (2016-17, Bridgeport changed their protocol for Free/Reduced lunch from a method that meant virtually all students were eligible for Free Lunch to a protocol that meant about half of the students were eligible for free lunch.

¹ http://www.ct.gov/dph/lib/dph/hisr/pdf/yrebs2015ct_graphstrends.pdf

Acronyms:

BPS: Bridgeport Public Schools

CBMH: Community-Based Mental Health

CSDNB: Consolidated School District of New Britain

DCF: Department of Children and Families

DPH: Department of Public Health

EMPS: Emergency Mobile Psychiatric Services

MPS: Middletown Public Schools

SDE: State Department of Education

SBHC: School-Based Health Center

SBMH: School-Based Mental Health

YRBS: Youth Risk Behavioral Survey

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ⁱ In Year 4 (2016-17, Bridgeport changed their protocol for Free/Reduced lunch from a method that meant virtually all students were eligible for Free Lunch to a protocol that meant about half of the students were eligible for free lunch.

ⁱⁱ http://www.ct.gov/dph/lib/dph/hisr/pdf/yrbs2015ct_graphstrends.pdf