## School Health Professional Grant Logic Model

January 2021
Overarching Goal: All students in Colorado thrive by building their physical, mental, behavioral, and emotional health and are free from substance use

## PRIORITIES

Increase the presence of SHPs in schools to
provide substance use prevention and behaviora health care to students

Implement prevention education and provide evidencebased resources to school staff, students and families

Reduce barriers for enrolled
students, who are at risk for
substance use, to access services provided by
community-based organizations for treatment and counseling

| INPUTS | GRANTEE'S OUTPUTS |  |
| :---: | :---: | :---: |
|  | Strategies | For Whom |
| Senate Bill 14-215, Article 96, SHPG funding | Hire SHPs to enhance capacity | School staff; school community |
| CDE Staff <br> SHPG grantees <br> Comprehensive Health Standards | Enhance behavioral health knowledge, literacy/capacity through professional development |  |
|  | Enhance school culture and climate |  |
|  | Increase awareness, reduce stigma, reduce barriers, and promote positive behavioral health | K-12 Students and families in SHPG funded schools |
|  | Enhance evidencebased programs, services and supports |  |
|  | Administer a $\mathrm{BH} / \mathrm{MH}$ screener |  |
|  | Improve community collaborations | SHPG partners |
|  |  | Those serviced /supported by SHPG |
|  | Plan for sustainability |  |

## LOGIC ASSUMPTIONS

When schools focus on district- and school wide systemic improvements to prevention and early intervention for student's social, emotional and behavioral health needs, both externalizing and internalizing students improve their social and academic outcomes.

| OUTCOMES |  |
| :---: | :---: | :---: |
| Short Term | Medium Term |
| Increased number of <br> School Health <br> Professionals <br>  <br> in schools | $\frac{\text { SYSTEMS LEVEL** }}{\text { Improvements in: }}$ |

Professionals* in schools Tiered services within
Improved behavioral health programs and curriculum that include Social-
Emotional Learning (SEL)
Improved knowledge of behavioral health among school staff, school-aged youth and families (and communities)

Improved access to behavioral health
resources, training, interventions, services and supports

Enhanced school-familycommunity partnerships for behavioral health

Sustain the goals and objectives of the plan to achieve the outcomes

Sustainable FTE

Timprovements services within MTSS implementation
Culturally and linguistically appropriate services
Behavioral health referral systems
School culture and climate Trauma-informed practices Whole School, Whole Child, Whole Community

STUDENT LEVEL*** Increased positive attitudes toward school academics
Increase in students with trusted adults to go to for help with a serious problem

Decreased drug-related behavior incidents Increase in student's SEL skills

Physical well-being

IMPACT

## Long Term***

Increased attendance and decreased truancy

Decreased suspensions/ expulsion rates

Decreased dropout rates
Increased graduation and completion rates

Improved school culture and climate

Engagement in social interpersonal relationships (SEL)

Lower rates of students who report suicide attempts/bullying

A sustainable and replicable school-based system for supporting the promotion, education, intervention, and treatment of youth behavioral health

## EVALUTION FOCUS - OUTPUTS

Data driven performance measures and reporting on How much services and supports were provided? How well were services and supports provided?

