



**Memorandum of Understanding  
Sequoia Healthcare District / Redwood City School District  
Healthy Schools Initiative  
2026-2027**

**I. Purpose**

This Memorandum of Understanding (this “MOU”) describes the relationship and understandings between Sequoia Healthcare District (“SHD”) and Redwood City School District (“RCSD” or the “District”), (collectively, the “Parties”) for the delivery of Whole School, Whole Community, Whole Child (WSCC) policies and programs. The Parties expect WSCC to reduce health risks among youth, especially those risks that lead to chronic diseases and shall work cooperatively to achieve the goals of this MOU. Schools in which the mental, social, and physical health of students is protected have been able to significantly increase achievement.

**II. Parties**

RCSD, a public school district located in Redwood City, California and SHD, a governmental entity in San Carlos, California.

**III. Term and Funding**

This MOU shall be in effect for the academic school year beginning July 1, 2026, and ending June 30, 2027 (the “Term”).

During the Term, SHD will provide the funding for positions, programs, and services set forth in Exhibit A. SHD may reduce or eliminate the intended funding if: (1) SHD's directors decline to collect property taxes during the funding cycle; (2) a significant portion of SHD's property tax revenues are borrowed or otherwise reduced by the State of California; or (3) RCSD fails to fund positions or programs described in this MOU, does not provide timely reports as required, or otherwise fails to substantially comply with its obligations under this MOU. Funding for a staff position, or program may be prorated by SHD for any period in which the staff position is vacant, or a program is not being offered.

This MOU is not intended to replace or supersede any other existing agency agreements or MOUs. The Parties will meet to discuss the progress of current goals and to review future MOUs no later than March 1 of the year preceding the period of future agreements.

**IV. Common Goals**

School health services play a vital role in the academic outcomes of students. SHD and RCSD have, as a common goal, the effective and efficient coordination of school-based health and wellness programs for students and staff. Administrative and professional staff at RCSD and SHD shall cooperate on the achievement and execution of this MOU. Input from relevant staff will be sought in the evaluation of the program. This MOU formalizes and defines collaboration and implementation of the following goals.

Goal I: Work with school district administration, staff, and wellness committees to update existing health and safety programs, policies, or develop and implement new curriculum to enhance the safety and wellbeing of students, staff, and families.

Goal II: Engage teachers, families, students, and the community in promoting health enhancing behaviors.

Goal III: Network across school districts to share best practices.

Goal IV: Engage outside entities including business, post-secondary education and government sectors to develop partnership opportunities and leverage resources.

Goal V: Address social-emotional development and behavioral health concerns for students in grades K-8 through additional counseling services.

Goal VI: Use data to make necessary modifications and use best practices to cultivate and optimize programs throughout the district.

Goals and expectations for specific positions are set forth in Exhibit B.

**V. Staffing Plan**

RCSD is responsible for the advertising, interviewing, and employment/contracting of the positions identified in Exhibit A. RCSD administrators will meet and confer with SHD before making any revisions to job descriptions and will notify SHD of any potential change in employment of the existing staff positions identified in Exhibits. SHD will participate in all interviews related to this position and will make recommendations regarding the hiring and termination of persons for this position. Final decisions regarding hiring and termination will be made by RCSD. Nothing in this

MOU shall be construed to establish SHD as an employer or co-employer of the persons employed by RCSD under this Section. SHD shall provide funding for these positions, not to exceed the amount and period as set forth in Exhibit A of this Agreement.

The District will establish and support a Wellness Committee made up of volunteer members including parent leaders, community partners, and other school health advocates that will support the school wellness programs.

#### **VI. Program Providers**

In addition to supporting full-time wellness staff, SHD will reimburse RCSD for programs and services provided by nonprofit service providers. The description of services performed by the nonprofit service providers and amount of funding provided by SHD to support these contracted program providers is set forth in Exhibits A and C to this MOU.

#### **VII. Expenditure of Funds**

Amounts allocated to RCSD are to be used for the explicit purposes listed in the Exhibits to this MOU and may be modified only with the written approval from SHD's staff and CEO.

RCSD shall maintain sufficient accounting records regarding the expenditure of funds and permit inspection of the records if requested. SHD will maintain a separate operating budget and monitor expenses.

Expenses related to the above budget items will be reimbursed to RCSD on a semester basis by submitting an invoice for budgeted program expenses incurred in the immediately preceding semester to SHD via email by January 31 and June 30. A check will be issued to RCSD for approved expenses within 15 days of an approved invoice. Funding amounts identified in Exhibit A that are not requested for reimbursement will be retained by SHD.

Please note that SHD must receive all invoices for budgeted program expenses by July 31, 2027 to be eligible for reimbursement. Invoices received after July 31, 2027 will not be paid.

### **VIII. Confidentiality**

The District will implement all reasonable measures to keep confidential the personal identifying information of students using the services funded by this MOU, including information protected by HIPAA and FERPA. Such information shall not be shared with SHD. SHD shall be provided only with non-identifiable information and aggregated information, such as numbers of students served, zip codes of service recipients, and other statistical data.

### **IX. Procedures for Resolving Disputes**

In the event of a dispute, difference of interpretation, or appeal of a decision regarding the terms and/or conditions of this Agreement, resolution shall first be sought in the monthly meeting between the SHD Director of School Health and the Director of Health and Wellness. If resolution is not reached, the issue shall then be presented to the SHD CEO and District Superintendent for joint resolution by them. If the issue cannot be resolved by the SHD CEO and the District Superintendent, the parties will meet in mediation and attempt to reach a resolution with the assistance of a mutually acceptable mediator. The costs of the mediator, if any, shall be shared by the Parties. This Agreement, including any exhibits, shall for all purposes be deemed subject to the laws of the State of California.

### **X. Record Keeping**

RCSD is responsible for tracking students receiving counseling and other services funded through this MOU. Completion of an annual data report will be collected at the end of the funding cycle and is required. School-based partners under contract with RCSD will provide data to the District by June 30. It should be noted that SHD strongly encourages school districts receiving funds to use a systematic process to track services/outcomes.

### **XI. Impact Report**

The District will provide an annual Impact Report which outlines the programs or projects carried out with SHD funds and may request a brief presentation by the District Director of Health and Wellness to the SHD Board of Directors at the conclusion of each funding cycle. The report should include a description of positions and programs funded, number of students and staff served, metrics of effectiveness, MOU impact goals attained, counseling outcomes and due by June 30.

For longitudinal tracking purposes, SHD will be collecting survey data (CHKS or in-house District-created survey) on an annual basis. The District will reasonably cooperate in providing requested tracking data to SHD. SHD strongly encourages districts to use the CHKS Core module.

**XII. Marketing / Reciprocal Marketing**

RCSD is encouraged to make public announcements about this funding. SHD will coordinate with District public relations personnel when developing or presenting press releases or media referencing school districts. Any use of the name and logo of SHD on marketing or publicity materials should be reviewed and approved by SHD.

The District shall maintain a mutually acceptable description of the HSI partnership and SHD’s funding on its website. Further, the SHD logo shall be included on any written materials or presentations related to SHD funding.

We, the undersigned, have read and agree to abide by the terms and conditions contained in this MOU. We have reviewed the proposed project and support the goals, objectives, funding, and programs set forth herein.

**Redwood City School District:**

Address: 750 Bradford St, Redwood City, CA 94063

\_\_\_\_\_  
John Baker, Superintendent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Rick Edson, CBO RE

\_\_\_\_\_  
Date

**Sequoia Healthcare District:**

Address: 1016 Laurel Street, San Carlos, CA 94070

\_\_\_\_\_  
Pamela Kurtzman, CEO

\_\_\_\_\_  
Date

2026-2027  
 Healthy Schools Initiative  
 Allocation of Funding to  
 Redwood City School District  
 Exhibit A

<ul style="list-style-type: none"> <li>• The Period of Funding shall be July 1, 2026 through June 30, 2027</li> <li>• Reimbursement of employee's benefit is not to exceed 33% of Employer contributions</li> </ul>	SHD Maximum Contribution	SHD Maximum Contribution Totals
<b>PERSONNEL</b>		
• Director, Health & Wellness (1.0)	169,676	
• Nursing Services (3 RNs)	<u>353,429</u>	
Subtotal		523,105
<b>PROGRAMS &amp; SERVICES</b>		
<b>Mental Health</b>		
• Counseling Programs of Choice	391,500	
• Acknowledge Alliance	20,000	
• Child Mind institute	25,000	
• Extended Learning Opportunities Program	30,000	
• Jasper Ridge Farms Horse Buddies	8,400	
• Friends for Youth	31,050	
<b>Clinical / Health Literacy</b>		
• Health Educator	20,000	
• El Centro De Libertad	25,000	
• United Through Education	20,000	
<b>Training and Supplies</b>	<u>3,000</u>	
Subtotal		<u>573,950</u>
<b>TOTAL - SHD Maximum Contribution</b>		<u>\$1,097,054</u>

2026-2027  
Scope of Work  
Redwood City School District  
Exhibit B

WSCC Goals & Staff Scope of Work

STAFF

All staff supported through the HSI grant share in the responsibilities for attaining the WSCC-related goals and objectives outlined here.

Director of Health and Wellness

Provide access to:

- Health Education: Teaching students the skills needed to maintain and improve their health.
- Physical Education & Activity: Providing movement opportunities before, during, and after the school day.
- Nutrition Environment & Services: Offering healthy food choices and nutrition education.
- Health Services: Access to school nurses and preventive care.
- Counseling, Psychological & Social Services: Support systems for mental and emotional well-being.
- Social & Emotional Climate: Creating a safe, supportive, and respectful school environment.
- Physical Environment: Ensuring a clean, safe, and healthy campus infrastructure.
- Employee Wellness: Promoting health and well-being for school staff.
- Family Engagement: Connecting parents and caregivers directly to school wellness communities.
- Community Involvement: Leveraging local resources, businesses, and public health sectors to support students.

School Nurse

- Health Services: Access to school nurses and preventive care.
- Social & Emotional Climate: Creating a safe, supportive, and respectful school environment.
- Family Engagement: Connecting parents and caregivers directly to school wellness communities.

Health Educator

- Health Education: Teaching students the skills needed to maintain and improve their health.
- Social & Emotional Climate: Creating a safe, supportive, and respectful school environment.

Mental Health Interns

- Counseling, Psychological & Social Services: Support systems for mental and emotional well-being.
- Social & Emotional Climate: Creating a safe, supportive, and respectful school environment.
- Family Engagement: Connecting parents and caregivers directly to school wellness communities.

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Director of Health & Wellness reports directly to the District's Deputy Superintendent and to the Superintendent on a monthly basis. Director will oversee all aspects and phases of project implementation and operations and collaborate with RCSD administration and staff and SHD staff. Responsible for HSI and District program include:

- develop and deliver health and wellness programs and services and facilitate district-wide initiatives.
- coordinate and expand partnerships between school, community, county and state agencies, as well as local non-profit and business organizations.
- be an effective link to contracted wellness services, including determining the best use of resources and facilitating equitable distribution of programs that address the components of the WSCC model throughout the district.
- Positive Behavioral Interventions and Supports and MTSS support focuses on preventing behavior issues before they occur by creating structured, predictable, and supportive school environments. Rather than reacting to misbehavior, proactive discipline emphasizes teaching, modeling, and reinforcing positive behaviors across all settings.
- Responsible for supporting a positive school climate through student behavior intervention, restorative practices, school supports, and appropriate disciplinary follow-up consistent with District policies.
- Student and family supports for chronic absenteeism support students in their well-being.

**Credentialed School Nurse**, a Registered Nurse (RN), will provide nursing care and education to students throughout the district to ensure the health and safety of all students. The lead nurse will conduct evaluations and supervision of LVNs.

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 Scope of Work for  
 Organizations Serving  
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 Exhibit C

Provider Scope of Work
<p><b>PROGRAMS &amp; SERVICES</b></p> <p>Description to include:</p> <ul style="list-style-type: none"> <li>- CBO name</li> <li>- Program name</li> <li>- Description of work to be provided</li> <li>- Deliverables - metrics and outcome data</li> </ul>
<p><b>Mental Health</b></p> <ul style="list-style-type: none"> <li>• Counseling Programs of Choice List</li> <li>• CBO name - Suzy Hughes</li> <li>• Program name - One Life</li> <li>• Description of work to be provided -School based individual and group counseling</li> <li>• Parenting classes will also be provided in a separate contract</li> <li>• Deliverables - metrics and outcome data -</li> </ul>
<ul style="list-style-type: none"> <li>• Program name - Acknowledge Alliance</li> <li>• CBO name - Tracy Lyons</li> <li>• Description of work to be provided - RCP's purpose is to implement its unique approach to learning and teaching by using a mental health lens and providing sustained support to increase student wellbeing. RCP licensed mental health professionals have the expertise to help educators recognize and welcome emotions as crucial to success in education and a constant and reliable support system. We skillfully use approaches and strategies to implement social-emotional learning to help students feel more comfortable, safe, and engaged, and provide educators with knowledge, expertise, and tools, helping them foster a positive classroom environment. RCP's multiple tiers of support range from direct student services to educator support and professional development.</li> </ul> <p>By developing healthy relationships, being aware of culturally responsive interventions, promoting the development of resilience, and focusing on the connections between emotions and learning as well as mental health promotion, students are more able to focus on learning, teachers are better able to respond to student needs, and administrators have more tools to be effective leaders.</p> <p>Four series of parenting classes will be offered in four sessions throughout the year. The focus will be on families with chronic absenteeism or high behavior referrals.</p> <ul style="list-style-type: none"> <li>• Deliverables - metrics and outcome data- Acknowledge Alliance utilizes a third-party evaluator, Clarity Social Research Group, to collect, manage, and report impact metrics. The outcome data measures the effectiveness of the program through educator-student relationships, personal and professional resilience of school staff, social emotional competency in students, and positive school community. At the end</li> </ul>

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of Project Resilience, each classroom completes an internally developed survey to determine students' understanding of themselves and others and teachers' perceptions of students applying SEL strategies during the school day. An end of year survey is administered to educators to determine their perception of utilizing resilience strategies to promote their personal and professional growth, educators will recognize students strengths, educators strengthen relationships with their colleagues, and educators will report that they worked to promote a positive school environment.

We expect to serve 25 educators per year (12 per quarter) and 250 students (125 per quarter).

Reduction of truancy and behavioral referrals will be the measurable outcomes for the parenting classes.

- CBO name - Safiya Addison
- Program name - Child Mind institute will provide: CBT
- Description of work to be provided - The Child Mind Institute's School and Community Programs provide a comprehensive suite of evidence-based mental health services delivered directly in schools at no cost to families. Services are designed to strengthen student coping skills, improve emotional regulation, and build school capacity to support mental health and wellness. For the 2026-27 school year, CMI will consult closely with Patrinia Redd and Redwood City School District leadership to identify the mental health services that are most needed and best aligned with district and school priorities. Based on this consultation, CMI will tailor programming to address identified needs, which may include direct student services, mental health skill-building groups, trauma-informed interventions, professional development for educators, and consultation to school staff. Programming may include:

Weekly Mental Health Skill-Building groups (6-week cycles; 1 hour per week) grounded in cognitive behavioral principles to help students understand emotions, manage stress, and build coping strategies.

Small-group trauma-focused interventions (14-week cycles; 1 hour per week) for students experiencing trauma or significant emotional distress.

Professional development workshops for teachers, student support staff, and caregivers focused on student mental health, stress management, and classroom strategies.

Ongoing consultation with school administrators, counselors, and wellness staff to integrate services into existing school structures.

For work in Hoover School, CMI will allocate a portion of an experienced clinician's time to deliver and coordinate services during the school year.

- Deliverables - metrics and outcome data- CMI will track participation and outcomes for students, caregivers, and educators served each quarter (December, March, and June), including the number of individuals served and the number of new participants per reporting period. Depending on services provided, outcomes will include:
- Students who complete Mental Health Skill-Building groups show statistically significant improvements in coping skills, including emotion regulation, stress management, and

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- problem-solving
- Students participating in trauma-focused treatment groups experience statistically significant decreases in PTSD symptoms
  - Students participating in DBT-based groups develop skills in mindfulness, distress tolerance, emotion regulation, and interpersonal effectiveness
  - Educator and caregiver satisfaction and self-reported increases in confidence supporting student mental health following workshops.

- CBO name - Enrique Calderon
- Program name - Extended Learning Opportunities Program
- Description of work to be provided - a. Supporting students & # 39; mental health doesn't stop at the end of the school day. To truly foster academic success, we have to take a whole-child approach—recognizing that emotional well-being directly impacts learning. We are seeking funding to continue implementing and expanding our after school mental health initiative in partnership with One Life Counseling, aimed at addressing the mental health and social-emotional needs of our students beyond the school day.
- b. RCSD's Expanded Learning Opportunities Programs serve 2,000+ students across 11 school sites and 3 community centers providing academic support, enrichment, and recreational activities beyond the regular school day. We also recognize that many of our students face mental health challenges during the expanded day hours and need that additional support. While our students have access to mental health services during the school day, we know that there is a critical gap during the after school hours, where they would still greatly benefit from these services.
- c. This aligns with our Community Schools vision where schools serve as hubs for our families most in need. Expanding mental health services beyond the school day strengthens this and ensures students have continuous support when they need it most.
- Deliverables - metrics and outcome data
- We will measure by the number of student group sessions, check ins and 1:1 seasons.

- CBO name - Brenda Melton
- Program name - Jasper Ridge Farms Horse Buddies
- Description of work to be provided - This is a unique experiential learning program where horses provide the mode of learning for special needs students in San Mateo County. Working directly with Adapted Physical Education staff, classes of special needs students participate in two consecutive sessions.  
The goals are:
  1. Increase the physical activity of students: Horseback riding and horsemanship activities require movement, balance, and coordination.
  2. Improve the emotional well-being of students: Learning new skills and overcoming fears and challenges improve self-confidence and self-esteem.
  3. Improve the social well-being of students: Participating in a group of their peers is a shared experience and a team-building experience during which students encourage, motivate, and support each other.
- Deliverables - metrics and outcome data
  1. Significantly increase the physical activity of students during their visits versus a typical school day by at least 75%.
  2. Significantly improve the mental well-being of students during their visits versus a typical school day by at least 75%.
  3. Significantly improve the social well-being of students during their visits versus a

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typical school day by at least 75%.

4. Provide an inclusive and accessible environment for 100% of students.

Measurement:

Program impact is measured through a 5-point Likert scale survey administered to teachers and aides on week 2 of 2 sessions, assessing percent improvement across four domains: social well-being, mental well-being, physical activity, and participants' experience of program inclusivity and accessibility. Given the range of cognitive and developmental abilities among our participants, impact data is collected through teacher and aide surveys rather than direct student self-report, ensuring all participants are represented equitably in our outcome measurement.

- CBO name
- Program name Friends for Youth will provide:
- Description of work to be provided - Connect Mentoring Program-
- a. In an unsteady world, connection can make all the difference, and it all begins with safe space. When young people have a place free from judgment and external pressures, they are able to imagine new futures for themselves. A strong mentoring relationship provides more than support. It offers young people a mirror for their potential, helping the navigate challenges, build confidence and resilience, explore identity, and recognize who they are capable of becoming.

Friends for Youth's mission is to empower underserved youth through mentorship and community relationships, and our vision is to provide every young person who needs a mentor with a mentor. Through our school-based group mentoring, FFY provides relationship-centered mentoring services for underserved youth facing social, emotional and systemic barriers to wellbeing and academic success. With the goal of empowering youth to be mentally and behaviorally healthy, emotionally secure, and equipped with resiliency-building skills, FFY centers social and emotional learning as a critical component of youth well-being and long-term success.

Schools are recognized as crucial access points for culturally responsive preventative services for marginalized youth. FFY's school-based group mentoring program utilizes a curriculum rooted in CASEL's framework for social and emotional learning - fundamentally supporting youth in developing critical skills in self- awareness, self-management, relationship skills, social awareness and responsible decision-making. To reduce barriers to care and normalize help-seeking, FFY engages bilingual staff and mentors who speak the languages of the youth served and understand the cultural and socioeconomic contexts shaping youth experiences. Through our programs, youth develop at least one positive, supportive relationship with a trusted adult outside of their family, strengthen their ability to cope with life's ups and downs, and experience an increased sense of belonging within their schools and wider community. Ultimately, our approach empowers marginalized youth to navigate life's challenges while fostering social and emotional skill-building, community and connection.

Associated activities include the recruitment and intensive screening of volunteer mentors, utilization of the latest iteration of our SEL curriculum, case management support to youth, mentors and school staff, and facilitating warm handoffs and referrals to community resources and partners.

- Deliverables - metrics and outcome data-
- a. Youth feel like they have at least one positive relationship with a trusted adult outside of

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<p>their family.</p> <ul style="list-style-type: none"> <li>• i. Measurement:           <ol style="list-style-type: none"> <li>1. % on connectedness to mentor</li> <li>2. % of improvement of life because of mentoring</li> <li>3. % who want to be in this program next year</li> <li>4. % who recommend this program for other students.</li> </ol> </li> <li>• b. Youth gain knowledge and awareness of how to cope with life's ups and downs through self-awareness, self-management, social awareness, relationships skills, and responsible decision making</li> <li>• i. Measurement:           <ol style="list-style-type: none"> <li>1. % increase in knowledge base</li> <li>2. % increase of outlook on life</li> </ol> </li> <li>• c. Youth feel a sense of belonging in their schools and wider community</li> <li>• i. Measurement:           <ol style="list-style-type: none"> <li>1. % on connectedness to school</li> <li>2. % improvement in relationships with peers, family, and community</li> </ol> </li> </ul> <p>FFY measures the outcomes and measurements above through qualitative and quantitative pre- and post-evaluation surveys.</p>
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<p><a href="#">Clinical / Health Literacy</a></p>
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<ul style="list-style-type: none"> <li>• Health Educator</li> </ul>
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<ul style="list-style-type: none"> <li>• CBO name -Luis Valdivia</li> <li>• Program name - El Centro De Libertad</li> <li>• Description of work to be provided - El Centro de Libertad's Prevention Education Program is a structured, small-group, school-based early intervention model designed to address substance use risk factors among middle and high school students. Students are referred by school personnel due to identified substance use history, behavioral concerns, or risk factors associated with substance misuse.</li> </ul> <p>Each cohort consists of 10 weekly sessions conducted in a small-group format (4-12 students). The program emphasizes interactive learning, open discussion, and relationship-building between counselors and students. The small-group setting fosters trust, engagement, and meaningful dialogue.</p> <p>Core Program Components:</p> <ol style="list-style-type: none"> <li>1. Substance Use Education       <ul style="list-style-type: none"> <li>Physical, psychological, and social impact of alcohol, drugs, and vaping</li> <li>Understanding addiction as a disease</li> <li>Current trends and high-risk behaviors</li> </ul> </li> <li>2. Skill Development and Protective Factors       <ul style="list-style-type: none"> <li>Peer pressure resistance skills</li> <li>Relapse prevention strategies</li> <li>Problem-solving and decision-making skills</li> <li>Coping skills development</li> <li>Anger management and nonviolent conflict resolution</li> <li>Personal accountability and healthy choices</li> </ul> </li> <li>3. Early Identification and Intervention       <ul style="list-style-type: none"> <li>Screening and assessment of students who may require a higher level of care</li> <li>Direct referral to appropriate treatment services when needed</li> <li>Enrollment in outpatient treatment services for those assessed as appropriate</li> </ul> </li> <li>4. Family Engagement       <ul style="list-style-type: none"> <li>Parent workshops offered at participating school sites provide education on:           <ul style="list-style-type: none"> <li>Substance use trends and warning signs</li> </ul> </li> </ul> </li> </ol>
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Behavioral and physical indicators of substance use  
Impact of substance use on family systems  
Strategies to support adolescents  
Community resources and treatment options

The Prevention Education Program fills a critical service gap by providing accessible, on-campus early intervention services. By addressing risk factors early and strengthening protective factors, the program supports improved student well-being,

- Deliverables - metrics and outcome data  
The Prevention Education Program will have a measurable and meaningful impact on RCSD students and families by increasing knowledge of substance use risks, strengthening protective factors, improving coping and decision-making skills, and enhancing early identification of students who may require additional intervention. The program is designed to produce both immediate knowledge gains and longer-term protective behavioral outcomes. Impact will be evaluated through a combination of quantitative and qualitative measures, with clear quarterly reporting.

Student knowledge acquisition will be measured using standardized pre- and post-program assessments administered at the first and final sessions. These surveys will measure understanding of the physical, psychological, and social impacts of substance use, awareness of addiction as a disease, knowledge of vaping risks and current trends, understanding of coping strategies, and awareness of community resources. For the students who attend a minimum of 5 classes or more and are present during the post-program assessment we anticipate that at least 75 percent of participating students will demonstrate measurable improvement between pre- and post-assessments, with an average knowledge gain of at least 20 percent across core content areas.

Program engagement will also serve as a measurable indicator of impact. Attendance and completion rates will be tracked for each cohort, with a goal of achieving an 75 percent or higher completion rate among enrolled students. Consistent attendance and completion demonstrate student engagement and program relevance.

Parent workshops will also include outcome evaluation measures. Participating parents will complete brief surveys assessing increased knowledge of substance use warning signs, improved understanding of current trends, enhanced confidence in communicating with their adolescents, and awareness of available community resources. We anticipate that at least 75 percent of participating parents will report increased knowledge and greater confidence in supporting their child following workshop participation.

To complement quantitative measures, qualitative data will be collected through anonymous student testimonials. These narratives will provide additional evidence of growth, engagement, and behavioral insight gained through participation in the program.

All outcome data will be compiled and reported quarterly and annually. Upon request and in compliance with district agreements and confidentiality standards, participant names may be provided as required. Through this structured evaluation framework, the Prevention Education Program will provide RCSD with tangible, data-driven evidence of impact while strengthening the well-being and resilience of students and families served.

Training and Supplies