1. Contact Information

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LEA Name: Ventura County Office of Education - Spec. Ed

Cohort: E Tier1 Year: 2011/12

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2. Which of the programs listed below were implemented under this grant during the 2011/12 year?

Botvin's Life Skills Training	No
Keepin' It Real	No
Minnesota Smoking Prevention Program	No
Project Alert	Yes
Project Northland	No
Project SUCCESS	No
Project TND (Towards No Drug Abuse)	Yes
Project TNT (Towards No Tobacco Use)	No
SPORT	No
State-Wide Indian Drug Prevention Program	No

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3. Comments pertaining to question 2 are located in the appendix. (Optional)

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4. How m 2011/12 s

identified in question 2 during the

		Number of Participating Students
Grade 6	33	33
Grade 7	40	40
Grade 8	41	41
Grade 9	28	28
Grade 10	19	19
Grade 11	29	29
Grade 12	19	19
Non Traditional	0	0
Grade Total	209	209

Cohort: E

5. Comments pertaining to question 4 are located in the appendix. (Optional)

6. Which of the non-research-validated curriculum-based programs (e.g., LEA adopted health curricula, lessons addressing specific populations, etc.) listed below were offered to students in the general population during the 2011/12 school year?

Number of

Program/Strategy Name	Participating Students
Anti-Tobacco Media Blitz	0
Blowing Away Big Tobacco's Big Lies	0
Classroom Animation Studio Kit	0
Decisions for Health Series	0
Effective Youth and Adult Partnerships	0
Enough Snuff	0
Guiding Good Choices – Families That Care	0
Hands Off Tobacco! Series	0
Health and Wellness Series	0
Personal/Social Lessons: The Missing Link	0
Project ABCD (Analyze, Beware, Create, Disseminate)	0
Project ALIVE! (Arts Leading Into Vital Education)	0
Project SCAT (Schools and Communities Against Tobacco)	0
Something Stinks in Hollywood	0
Stay On Track Series	0
Teen Health Course Series	0
Teens Tackle Tobacco	0

7. If a non researched-validated curriculum-based program not listed in the table above was offered, please specify the name of the program/strategy along with the number of projected and participating students in the boxes below.

Ventura County Office of Education Wellness Program is provided to all special education students K -12. Instruction includes at appropriate grade levels adopted units from the Great Body Shop, Circles, and Life Facts.

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9. Which of the non-curricula activities (e.g., Teens Kick Butts, Teens Kick Ash, poster contests etc.) listed below were offered to students in the general population during the 2011/12 school year?

	Number of	Number of
Program/Strategy Name	Projected Students	Participating Students
Great American Smoke Out	75	75
Red Ribbon Week (Tobacco focus)	250	250
Teens Kick Butts / Ash	0	0
Schoolwide contests	0	0
Tobacco & Hollywood Campaign	0	0
Mission Possible	0	0
Youth Quest	0	0
Assembly Speaker	0	0

10. If a non-curricula activity not listed in the table above was offered, please specify the name of the activity along with the number of projected and participating students.

None

11. If you selected *School-wide contest* as a non-curricular activity, indicate the name of the contest:

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None

12. If you selected <i>Assembly Speaker</i> as a non-curricula activity, indicate the name of the sp
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None

- 13. Comments pertaining to question 9 are located in the appendix. (Optional)
- 14. Which TUPE Specific Youth Development Activities (e.g., STAKE Act "stings", local community tobacco control ordinance development/enforcement, media literacy, media production to counter tobacco industry influence) were offered to students in the general population during the 2011/12 school year?

Program/Strategy Name	Number of Projected Students	Number of Actual Students
Youth Involvement in Stop Tobacco Access to Kids Enforcement (STAKE) Act	0	0
Youth Involvement in Anti-tobacco Advocacy	0	0
Media Literacy and Youth Media Production to Counter the Influence of the Tobacco Industry	58	58
Tobacco use prevention Peer Educator	0	0
Tobacco use prevention focused Service-Learning Projects	0	0

15. If a TUPE Specific Youth Development activity not listed in the table above was offered, please specify the name of the activity along with the number of projected and participating students.

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None

- 16. Comments pertaining to question 14 are located in the appendix. (Optional)
- 17. How many students from the following priority populations participated in one or more of the youth development strategies listed below during the 2011/12 school year under this grant?

	Stop Tobacco Access to Kids Enforcement (STAKE) Act	Anti- Tobacco Advocacy	Counter the Influence of the Tobacco Industry	Peer Educator	Service- Learning Projects
American Indian or Alaska Native	0	0	0	0	0
Asian	0	0	0	0	0
Pacific Islander	0	0	1	0	0
Hispanic/ Latino	0	0	20	0	0
African American	0	0	2	0	0
White (non Hispanic)	0	0	35	0	0
Lesbian, Gay, Bisexual, Transgendered, & Questioning	0	0	0	0	0
Low Socio Economic Status	0	0	0	0	0

18. Comments pertaining to question 17 are located in the appendix. (Optional)

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19. Which of the intervention programs listed below were offered during the 2011/12 school year? For each program offered provide the number of students, identified and served, under this grant.

Intervention Programs	Number of students identified	Number of students served
Project Life	0	0
Smokeless Schooldays: Smokeless Saturday School	0	0
Intervention with Teen Tobacco Users (TEG)	0	0
Residential Student Assistance Program	0	0
Spit Tobacco Intervention	0	0
Tobacco-Free Generations	0	0

20. If an intervention program not listed in the table above was offered, please specify the name of the program and the number of project and participating students.

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None

21. Comments pertaining to question 19 are located in the appendix. (Optional)

22. Please indicate which Cessation Services were implemented. For each program offered provide the number of identified and served tobacco-using students.

	rogram/Strategy Name	Number of students identified	Number of students served
Adolescent Sn and Tobacco (noking Cessation - Escaping Nicotine ASCENT)	0	0
Enough Stuff:	A Guide to Quitting for Smokeless Tobacco	0	0
Helping Teens	Stop Using Tobacco (TAP)	0	0
California Sm	oker's Helpline	0	0
Project EX: To	een Tobacco Use Cessation Program	0	0
Project N-O-T	(Not on Tobacco)	0	0

23. If a cessation program not listed in the table above was offered, specify the name of the program along with the number of students identified and the number of students served.

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None

24. Comments pertaining to question 22 are located in the appendix. (Optional)

25. How many parenting and/or pregnant minors were identified and served during the 2011/12 school year under this grant?

Category	Number of students
Number of parenting and/or pregnant minors identified	0
Number of parenting and/or pregnant minors served	0
Number of parenting and/or pregnant minors in school based programs	0
Number of parenting and/or pregnant minors referred to community program	ms 0

- 26. Comments pertaining to question 25 are located in the appendix. (Optional)
- 27. How many classified and/or certificated staff were trained in the areas listed in the table below?

Training Type	Classified	Certificated
Trained to deliver program curriculum	0	31
Trained to deliver youth development strategies	0	0
Trained to deliver intervention strategies	0	4
Trained to deliver cessation strategies	0	2
General TUPE information	50	35

28.	8. If staff were trained in areas not listed in the table above please specify the type of training and how many classified and/or certificated staff were trained in the box below.		
	VCOE Special Education Certificated and Paraeducator staff (245) received training in implementation of Wellness Curriruculum, Physical Fitness, and Relaxation/Coping strategies during the 2009, 2010 and 2011 school year. During the 2011/12 School Year Certificated and Paraeducator Staff in our mild/moderate programs received training and began implementation of CHAMPS (Schoolwide Systems of Behavior). Paraeducators in our Moderate/Severe Programs received training in facilitating student communication and independence.		
29.	Comments pertaining to question 27 are located in the appendix. (Optional)		
30.	How many parents received general TUPE information during the 2011/12 school year under this grant?		
	350		
31.	If parents received training other than general TUPE information, please specify in the space below the type of trainings or information they received and the number of parents participating in each activity.		
	None		
22	Comments partaining to questions 30 and 31 are located in the appendix (Optional)		
32.	Comments pertaining to questions 30 and 31 are located in the appendix. (Optional)		

33. Were the activities listed in the table below offered in collaboration or coordination with LEAs, community agencies or other organizations?

Activity Type	Local Education Agency	Local public health agency	Local governmental agency	Local non-governmental organization
Curriculum Implementation	Yes	Yes	Yes	No
Youth Development activities	No	No	No	No
Cessation activities	Yes	Yes	Yes	No
Intervention activities	Yes	Yes	Yes	No
Local tobacco control coalition planning meetings	Yes	Yes	Yes	No

34. If an activity other than those listed in the table above was offered, please specify the type of activity and if the activity was in collaboration with an LEA, community agency, local coalitions, or another agency.

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None

35. Comments pertaining to question 33 are located in the appendix. (Optional)

Comments regarding question 2:		
None		
Comments regarding question 4:		
Students in our moderate/severe programs received modified instruction.		
Comments regarding question 6:		
None		

Comments regarding question 9:		
None		
Comments regarding question 14:		
Students in our Phoenix High School Program created media presentations that were shared at Science Night and event for students in all of our Phoenix Programs (elementary, middle, high) as well as parents and the general public.		
Comments regarding question 17:		
None		

Comments regarding question 19:			
TEG was available intervention for students. No reported need			
Comments regarding question 22:			
School Nurse and staff were trained and the program available to students. Students had option of working with Ventura County Behavioral Health counselor for a referral to programs as well.			

Comments regarding question 25:	
None	
Comments regarding question 27:	
None	

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Comments regarding question 30 and 31:			
None			
Comments regarding question 33:			
None			