





**3. Has the grantee provided any TUPE services to K - 5th grade Students?**

GRADE	Y/N	Total # of Unduplicated students	Funding Source
5 <sup>th</sup>	Y	1	TUPE Student Wellness Coordinator
4 <sup>th</sup>			
3 <sup>rd</sup>			
2 <sup>nd</sup>			
1 <sup>st</sup>			
K			

III. Detailed Student Participation Information

**4. Indicate which of the research-validated or evidence-based programs listed below were implemented under this grant during the school year by entering the numbers of students that received instruction for each program.**

	Number of Participating Students
Botvin's Life Skills Training	0
Keepin' It Real	0
Minnesota Smoking Prevention Program	0
Project Alert	1244
Project Northland	0
Project SUCCESS	0
Project TND (Toward No Drug Abuse)	0
Project TNT (Toward No Tobacco Use)	0
SPORT	0
Stanford Tobacco Prevention Program	1244
State-Wide Indian Drug Prevention Program	0



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4a. If a researched-validated or evidence-based program not listed in the table above was implemented, please specify the name of the program along with the number of participating students in the space below.  
*(Please do not use acronyms)*

**5. Please provide an effectiveness rating for each one of the curricula that you have adopted, 5 being outstanding and 1 being insufficient.**

Botvin's Life Skills Training	
Keepin' It Real	
Minnesota Smoking Prevention Program	
Project Alert	3
Project Northland	
Project SUCCESS	
Project TND (Toward No Drug Abuse)	
Project TNT (Toward No Tobacco Use)	
SPORT	
Stanford Tobacco Prevention Program	4
State-Wide Indian Drug Prevention Program	
Other (listed in 4a)	



6. Which other 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 school year? Provide the number of participating students for each program that was offered under this grant.

Other Curriculum-Based Programs	Number of 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	26



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6a. 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 participating students in the space below.  
*(Please do not use acronyms)*

The 1227 6th grade students in our district participated in Gang Resistance Education and Training (G.R.E.A.T.) which is an evidence based curriculum taught by a classroom teacher and local police officers. The refusal and resiliency skills are applied to tobacco and other drug prevention. In addition, 24 students participated in movie screenings, vape informational events, wellness fairs and the SMFCSD Education Foundation Wellness events.

**7. Which of the non-curricula activities listed below were offered to students in the general population during the school year? Provide the number of participating students in the fields below for each activity that was offered under this grant.**

Non-Curricula Activities	Number of Participating Students
Assembly Presentation	1222
Law enforcement sting operations to monitor tobacco sales to minors (i.e., Stop Tobacco Access to Kids Enforcement (STAKE) Act or others)	0
Media Literacy and Youth Media Production to Counter the Influence of the Tobacco Industry	31
Youth Involvement in Anti-Tobacco Advocacy (i.e., Red Ribbon Week, Great American Smoke Out, World No Tobacco Day, Teens Kick Butts/Ash, Youth Quest, Tobacco & Hollywood Campaign, School-Wide Contest, Mission Possible)	1243
Tobacco use prevention Peer Educator	31
Tobacco use prevention focused Service-Learning Projects	31

7a. If you offered a non-curricula activity not listed in the table above, please specify the name of the activity along with the number of participating students in the space below.  
*(Please do not use acronyms)*

Seventh and eighth grade students at each middle school were encouraged to become Student Wellness Team members. Out of all students, 31 students became members and provided peer education to 6th grade students during wellness fairs held at each school.

7b. If you selected “Assembly Presentation” as an activity, please specify the name(s) of the speaker(s) and program, and a brief description of the presentation in the space below.

*(Please do not use acronyms)*

Audrey Abadilla and Maeve Forster from Breathe California presented at two of our four comprehensive middle schools. At each school, students were taken through a visual presentation outlining the risks of tobacco use and then through a series of questions/answers. Students were encouraged to pair/share their thinking around the questions they were asked. At another middle school, Scott Castillo and Juliet Vimahi from the Peninsula Conflict Resolution Center presented similar content and engaged students in a game show formatted activity.

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

<b>Intervention Programs</b>	<b>Number of Students Referred for Intervention</b>	<b>Number of Students Received Service</b>	<b>Number of Students Completed Service</b>
Brief Intervention	1	1	1
Craving Identification and Management (CIM)	0	0	0
Intervention with Teen Tobacco Users (TEG)	0	0	0
Project Life	0	0	0
Smokeless Schooldays Smokeless Saturday School	0	0	0
Tobacco-Free Generations	0	0	0

8a. If an intervention program not listed in the table above was offered, please specify the name of the program and the number of identified and served students.

*(Please do not use acronyms)*

Diversion-joint program with San Mateo Police Department/Probation and the YMCA. One student was referred and received services but did not complete the program.





**9. Which of the cessation services listed below were offered during the school year? For each program offered provide the number of students identified and served under this grant.**

<b>Cessation Services</b>	<b>Number of Students Referred for Cessation</b>	<b>Number of Students Received Service</b>	<b>Number of Students Completed Service</b>
Adolescent Smoking Cessation-Escaping Nicotine and Tobacco (ASCENT)	0	0	0
Enough Snuff: A Guide for Quitting Smokeless Tobacco	0	0	0
Helping Teens Stop Using Tobacco (TAP)	0	0	0
California Smoker's Helpline	0	0	0
Project EX: Teen Tobacco Use Cessation Program	0	0	0
Project N-O-T (Not on Tobacco)	0	0	0

9a. If a cessation program not listed in the table above was offered, please specify the name of the program along with the number of students identified to be served and the number of students served in the space below.  
*(Please do not use acronyms)*









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V. Staff, Parent, and Local Agency Engagement

**14. Report the total number of classified and/or certificated staff trained in one or more of the areas listed in the table below. Then identify how many individuals received each type of training.**

Training Type	Classified	Certificated
Total number of all staff in participating schools	504	664
Total number of staff receiving general tobacco use prevention training and TUPE program training	0	13
Total number of TUPE staff at participating schools	0	0
Total number of TUPE staff trained to deliver program curriculum	0	0
Total number of TUPE staff trained to deliver youth development strategies	0	1
Total number of TUPE staff trained to deliver intervention strategies	0	1
Total number of TUPE staff trained to deliver cessation strategies	0	1

14a. 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 space below.

*(Please do not use acronyms)*



15. How many parents received general TUPE information during the school year under this grant, in terms of the following subcategories?	Number of Parents/Legal Guardians
Dangers of youth tobacco (including e-cigarettes and vaping) and marijuana use	6
Nicotine damage to youth brain development	6
Tobacco prohibition policy on school properties	

15a. 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.

PTA sponsored vape information night where approx 80 parents and students attended. Team members from the Stanford Toolkit presented at this information night.

<b>16. Were the activities listed in the table below offered in collaboration or coordination with the four organization types shown?</b> <b>Please type in a "Yes" or "No" for each activity and organization type.</b>				
Activities	Other Local Education Agency	Local public health agency	Local governmental agency	Local nongovernmental Organization (NGO)
Curriculum implementation	Yes	No	Yes	No
Youth Development activities	Yes	Yes	Yes	Yes
Cessation activities	No	No	No	No
Intervention activities	Yes	Yes	Yes	Yes
Local tobacco control coalition planning meetings	Yes	Yes	No	No
CA Friday Night Live Clubs	No	No	No	No



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16a. If you answered “Yes” to any of the above, please provide the name of the Local Agencies you were in collaboration with. *(Please do not use acronyms)*

San Mateo and Foster City Police Departments, San Mateo County Office of Education, San Mateo County Health, San Mateo Union High School District vape nights, San Mateo-Foster City PTA, San Mateo Tobacco Education Coalition

16b. 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, a local public health agency, a local governmental agency, or a local non-governmental organization (NGO) in the space below. *(Please do not use acronyms)*

**17. If you are the lead agency for a consortium, please list in the space provided below which districts in your consortium contributed to this report.**



18. CHKS Participation	Number of Schools
A. How many schools participate in this grant?	20
B. How many schools participated in CHKS in the 2015-16 academic year? (7/2015 to 6/2016)	20
C. How many schools participated in CHKS in the 2016-17 academic year?	20
D. How many schools participated in CHKS in the 2017-18 academic year?	20
E. How many schools participated in CHKS in the 2018-19 academic year?	19
F. How many schools did not participate in CHKS at the duration of the grant?	1

**18a.. If the answer to question F is other than "0" or none, please identify each of the schools by CDS code, school, district, grantee CHKS implementation lead, justification of not completing CHKS as required, and projected CHKS completion date.**

<b>CDS:</b> <b>District:</b> SMFCSD <b>Lead:</b> Lori Fukumoto n	<b>Grantee:</b> SMFCSD	<b>Projected Completion Date:</b>  <b>School:</b> Sunnybrae <b>Justification:</b> new administration
<b>CDS:</b> <b>District:</b> <b>Lead:</b>	<b>Grantee:</b>	<b>Projected Completion Date:</b>  <b>School:</b> <b>Justification:</b>
<b>CDS:</b> <b>District:</b> <b>Lead:</b>	<b>Grantee:</b>	<b>Projected Completion Date:</b>  <b>School:</b> <b>Justification:</b>
<b>CDS:</b> <b>District:</b> <b>Lead:</b>	<b>Grantee:</b>	<b>Projected Completion Date:</b>  <b>School:</b> <b>Justification:</b>



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<b>CDS:</b>	<b>Grantee:</b>	<b>Projected Completion Date:</b>
<b>District:</b>		<b>School:</b>
<b>Lead:</b>		<b>Justification:</b>

Q1. Comments or Explanations (Optional)

Q2. Comments or Explanations (Optional)





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**Q3. Comments or Explanations (Optional)**

One of our 5th grade students was suspended for vaping tobacco and the school administration needed intervention strategies for this student.

**Q4. Comments or Explanations (Optional)**

**Q5. Comments or Explanations (Optional)**

We have decided to use both Project Alert and the Stanford Tobacco Prevention Program. The toolkit provides additional activities to engage students in their learning.



Q6. Comments or Explanations (Optional)

Q7. Comments or Explanations (Optional)

Q8. Comments or Explanations (Optional)



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Q9. Comments or Explanations (Optional)

Q10. Comments or Explanations (Optional)

Q11. Comments or Explanations (Optional)

Both middle school assistant principals and counselors provided support for first time users. Parent Education nights were held to provide current information to parents around vaping.



Q12. Comments or Explanations (Optional)

Q13. Comments or Explanations (Optional)

Q14. Comments or Explanations (Optional)



Q15. Comments or Explanations (Optional)

Q16. Comments or Explanations (Optional)

Q18. Comments or Explanations (Optional)



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