Rhode Island Behavioral Health System of Care Program Component #1 Detailed Plan: Prevention

The Prevention Work Group identified eleven equity categories for which they created goals. Each goal has specific objectives. We have not included Outcome Metrics or Data Sources here, but will include them when the final activities for the Goal are chosen.

<table>
<thead>
<tr>
<th>GOAL 1: PREVENTION FOR CHILDREN AND YOUTH MENTAL HEALTH CONDITIONS</th>
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</thead>
<tbody>
<tr>
<td><strong>Objective 1.1:</strong></td>
</tr>
<tr>
<td>By January 2022, develop and begin implementation of a comprehensive awareness and outreach plan to educate, train, and reduce stigma on mental health and wellness—with a specific focus on reaching marginalized populations and/or those underutilizing the system of care.</td>
</tr>
</tbody>
</table>

**Objective 1.2:**
By June 2022, implement strategies to sustain, expand, and maximize use of existing mental health prevention services, resources, and opportunities for specific, identified population groups.

**Objective 1.3:**
By September 2023, scale up investments in student assistance, social emotional learning, peer support, and mental health first aid resources within all school districts in Rhode Island.

<table>
<thead>
<tr>
<th>SYSTEM DESCRIPTION—FOR EXISTING STRENGTHS AND EVIDENCE-BASED OPPORTUNITIES. This applies to the whole Prevention plan.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STRENGTHS OF PREVENTION IN THE CHILDREN’S BEHAVIORAL HEALTH SYSTEM OF CARE</strong></td>
</tr>
<tr>
<td>In discussing Rhode Island’s system with community partners, the following strengths were highlighted as essential building blocks upon which to further create and sustain a robust prevention program:</td>
</tr>
<tr>
<td>• Regional Prevention Coalitions</td>
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<tr>
<td>• FCCPs</td>
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<tr>
<td>• Health Equity Zones</td>
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<tr>
<td>• Project AWARE, School-Based Mental Health Capacity, School-Based Climate Transformation grant opportunities</td>
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<tr>
<td>• Youth Suicide Prevention program</td>
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<tr>
<td>• PCMH-Kids</td>
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<tr>
<td>• Mental Health Clinic within Family Court</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>OPPORTUNITIES TO STRENGTHEN PREVENTION IN THE CHILDREN’S BEHAVIORAL HEALTH SYSTEM OF CARE</th>
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</thead>
<tbody>
<tr>
<td>In discussing Rhode Island’s system with community partners, the following opportunities to expand and scale up were highlighted to further expand and resource a robust prevention program:</td>
</tr>
<tr>
<td>• Healthy Transitions Guidebook (need hub, portal, e-version of all of this to increase access)</td>
</tr>
<tr>
<td>• Mental Health Promotion (need statewide coverage; time limited, mostly grant funded)</td>
</tr>
<tr>
<td>• Substance Use (opioid versus non opioid focus; enforcement gaps—ENDS, alcohol; intentionality; marijuana perceptions; targeted communications by audience; safe medical uses)</td>
</tr>
<tr>
<td>• Social and Child Welfare Supports</td>
</tr>
<tr>
<td>• Wraparound services for all</td>
</tr>
<tr>
<td>• Educational Systems (Expanded learning, COZ, after-school programs)</td>
</tr>
<tr>
<td>• Health Services (see recommendations; equity, coverage; preventative care gaps, sb-health centers, medical model mind shift)</td>
</tr>
<tr>
<td>• Youth Transitions (need to optimally sustain cohorts; resolve up to 21 versus adult at 18 system issue; provider-Medicaid payment-service delivery alignment)</td>
</tr>
<tr>
<td>• Juvenile justice (discharge transition and prevention)</td>
</tr>
</tbody>
</table>
In addition, regarding recreation, there are ample opportunities in Rhode Island for youth and families to engage in outdoor recreation or accessing virtual education of outdoor and nature programs offered through various state and non-profit agencies. Rhode Island benefits from the extensive work of the RI Department of Environmental Management and their team of naturalists and educators who have teamed up with the Audubon Society of Rhode Island and Rhode Island Environmental Educators Association to create resources for backyard learning, virtual learning, and other hands on opportunities. There are many other organizations involved such as the Rhode Island Land Trust Council and local land trusts who provide hiking and outdoor activities throughout the state as well as Explore RI providing information on the Green Ways and Blue Ways to view the state. Other ways Rhode Islanders can engage are water-based recreational activities including the Rhode Island Salt Ponds Coalition who organize events such as Salt Pond Safari’s to engage young people in learning about our state’s vast ocean ecosystem. In addition to this large variety of state resources, the U.S. Fish and Wildlife Refuges located in Rhode Island also offer a number of outdoor recreational activities throughout the year. Each City and Town in Rhode Island offers many programs as well through their own Parks and Recreation Departments as well as numerous opportunities through programs offered through your local libraries. Many libraries offer free or discounted passes to area attractions and opportunities for families, some with reciprocal agreements for other parks. A library card allows Rhode Island families to borrow passes, when available, from any library in the state.

Finally, regarding Vocational Education, RIDED aims to significantly expand career and technical education (CTE) in the state, as a part of Prepare Rhode Island (PrepareRI). PrepareRI is a statewide initiative that unites many partners — including Rhode Island government, private industry leaders, the public education system, universities, and non-profits — around a common strategic plan to improve youth career readiness. PrepareRI aims to close the gap between what students learn in school and what they need for high-demand jobs. The initiative was built on the belief that all young people, regardless of their previous background or intended career, will need some form of postsecondary credential and practical work experience to be successful. RIDED-approved CTE programs play a critical role in this effort.

PrepareRI’s goals are:

- All career CTE programs will be aligned to Rhode Island’s high-skill, high-demand career fields
- All high school students will graduate with college credit or an industry credential
- All high school students will have access to a meaningful work-based learning experience, such as an internship or an industry project in a relevant career field
- All students will have career awareness and exploration opportunities beginning in elementary and middle school, and individualized learning plans based on their unique strengths and interests

<p>| MAJOR ACTIVITIES AND PRIMARY AUDIENCE: |</p>
<table>
<thead>
<tr>
<th>Potential Activities for Objective 1.1 (Target Audience = All)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Continue utilization of EPSDT periodicity schedule for pediatricians to provide health services, including preventative activities to children and youth.</td>
</tr>
<tr>
<td>• Continue primary prevention services through Regional Prevention Coalitions across the state.</td>
</tr>
<tr>
<td>• Redeploy Five Signs to Change Direction campaign in schools in partnership with the Hospital Association of Rhode Island and other key partners.</td>
</tr>
<tr>
<td>• Universally scale up school-based, multi-lingual Mental Health First Aid Training for school staff, educators, parents, and youth peers and offer multi-lingual Mental Health 101 sessions.</td>
</tr>
<tr>
<td>• Launch RIDE’s “Let It Out” Campaign and relaunch EOHHS’ “It’s OK Not to Be OK” campaign in a coordinated manner throughout 2021-2022—including within community forums such as faith-based organizations.</td>
</tr>
<tr>
<td>• Align existing school-based training requirements with existing efforts, best practices, and feedback on design from the community.</td>
</tr>
<tr>
<td>• Support parents in understanding youth social media use, the inherent dangers, safeguards such as parental controls, and signs of cyberbullying and/or harassment.</td>
</tr>
</tbody>
</table>
• Provide parent-focused, multi-lingual training and education on the early identification of mental health concerns and distress and the importance of engagement in appropriate-level care in a timely manner.
• Develop partnership with Health Equity Zones to address cultural barriers and reduce stigma associated with seeking mental health treatment and support among children.

Potential Activities for Objective 1.2 (Target Audience = Indicated Populations)
• Further disseminate and raise awareness on new features of the Behavioral Health Transitions Guidebook, including both the multi-lingual e-copy and hard copy materials.
• Develop and/or modify existing Transitions Guidebook for other specific age-groups.
• Continue Family Home Visiting and Moms PRN screenings for infants, children, and pregnant and post-partum mothers.
• Continue secondary prevention services via established Family Care Community Partnerships to promote regional engagement of at-risk families.
• Expand DCYF’s evidence-based programs that focus on prevention, including within the child welfare, juvenile justice, and other systems.
• Further engage Youth Pride and Thundermist Health Hub to engage and provide mental health prevention to at-risk LGBTQ+ youth populations and parent education.
• Increase utilization of EXCEED and SUCCESS early learning programs through Rhode Island’s Early Childhood Commitment for families.
• Increase firearm injury prevention resources and gun locks within medical, community, and non-traditional settings.

Potential Activities for Objective 1.3 (Target Audience = All)
• Expand Student Assistance Counselors (and other capacities based upon the US DOE grant—to include other school-based health professionals such as school psychologists) universally to all middle and high schools and deploy rotating volunteer mental health teams into elementary schools.
• Scale up Social and Emotional Learning approaches, programs, and curricula (such as CASEL, Conscious Discipline) in all school systems.
• Develop mechanisms to integrate referrals for follow-up and identified needs via Mental Health First Aid Follow-Up First Aid through Unite Us social service platform.
• Pilot the recruitment, training/certification, and implementation of diverse parent Community Health Workers with lived experience of having a child experience trauma, a behavioral health emergency or suicide attempt, inpatient or partial program stays, and the discharge process by embedding these resources in psychiatric facilities (both in-patient, partial, and discharge programs) to facilitate stronger discharge plans, retention, and peer-supported services.

PREVENTION CATEGORY:

1: Universal Physical, Behavioral, and Social Health Promotion for Children and Caregivers
   - Health and Wellness Policy
   - Mental Health Promotion
   - Social Emotional Development
   - Protective Factors Provision

2: Universal Screening and Early Identification of Children and Caregivers
   - Developmental Screening
   - Behavioral Health Screening
   - Family Psychosocial Screening
   - Social Determinants of Health

3: Enhanced Prevention for At-Risk Populations of Children and Caregivers
   - Target Outreach, Engagement, and Retention
   - Additional Resources Provision
- Transition Coordination
- Severity Escalation Mitigation

4: Tertiary Prevention
- High-Risk Behavior Prevention
- Prevention of the Onset of More Severe/Complex Conditions
- Prevention of Recurrence via Strengthened Step-Down Care Coordination

CATEGORY: This section lays out all of the different prevention categories described in this detailed section of the plan. In subsequent categories, we list just the category for that section rather than this whole list.

A: Mental Health
B: Substance Use
C: Health Services
D: Social and Child Welfare
E: Educational
F: Juvenile Justice
G: Recreational
H: Vocational
I: Transition
J: Early Childhood
K: Overarching

BARRIERS AND CHALLENGES: These Barriers and Challenges apply to all of the goals in this document.

➢ Lack of dedicated funding and current funding is mostly grant-based
➢ Not enough and inconsistent equity in prevention activities
➢ Family caregiver focus is needed in a comprehensive way that can be implemented simultaneously
➢ Workforce shortages
➢ Siloed funding which limits a broader view, strategy, and shared perspectives
➢ Social isolation and reduced community cohesion
➢ Need to leverage research and academic partners and opportunities
➢ Ensuring equity and appropriately engaging Rhode Island’s communities of color
➢ Self-pay and other billing issues for prevention
➢ Current policies focusing more on complex, high-cost patients versus universal prevention
➢ Housing and Employment and Transportation barriers for families
➢ Interagency CBHSOC Prevention Coordination and Information Sharing (cross sector collaboration)
➢ Awareness and understating of issues related to education based and medically driven funding for behavioral health care

TIMELINE CONSIDERATIONS:

See objectives for all timeline considerations.

RECOMMENDED ALIGNMENTS: The Prevention team will be aligning all of the components of this plan with the following planning processes, as appropriate.

➢ Children’s Cabinet Strategic Plan
➢ Regional Prevention Coalition Plans
➢ Health Equity Zone Action Plans
➢ Governor’s Overdose Prevention and Intervention Taskforce
➢ Overdose Evidence Update and Strategic Program Review
➢ Learning, Equity, and Acceleration (LEAP) Recommendations
➢ Bruno-Flatt Act Requirements
➢ Juvenile Justice Report
➢ Families First Prevention Plan (DCYF)
GOAL 2: PREVENTION FOR CHILDREN AND YOUTH SUBSTANCE USE

MAJOR ACTIVITIES AND PRIMARY AUDIENCE:

Potential Activities for Objective 2.1 (Target Audience = All)
- Continue utilization of EPSDT periodicity schedule for pediatricians to provide health services, including preventative activities to children and youth.
- Expand substance use prevention within Regional Prevention Coalitions to include over-the-counter medication, treatment prescriptions, and emerging trends.
- Continue implementation of Capacity-Building for Multi-System of Supports through the Rhode Island Department of Education.
- Diversity language availability and expand dissemination of Regional Prevention Coalition resources, videos, and training available on the Rhode Island Prevention Resource Center (RIPRC) Information Center.
- Expand parent engagement programs for preventing youth substance use.
- Expand prevention efforts to include youth and family marijuana use prevention—including if legalization of adult use is enacted in Rhode Island.
- Promote and integrate evidence-based substance use prevention within district School Health Curricula.

Potential Activities for Objective 2.2 (Target Audience = Hotspots/Indicated Populations)
- Maintain capacity for The Anchor Recovery High School within The Providence Center for youth with substance use disorders.
- Expand hotspot prevention efforts within CODE Collaboratives to address all overdose and addiction for families, youth, and children.

Potential Activities for Objective 2.3 (Target Audience = Healthcare and Education Communities)
- Sustain the First Connections projects funded by the State Opioid Response (SOR) Grant that serve families with addiction.
- Expand the 7 Challenges program modeled within the State Youth Treatment Grant.
- Expand Student Assistance Counselors universally to all middle and high schools and consider deploying rotating volunteer mental health teams into elementary schools.
- Create and resource youth substance use inpatient programs and expand the existing, limited outpatient programs.
- Continue and/or expand SBIRT screening in schools and within pediatric practices when SBIRT Grant ends this year.
- Develop and expand comprehensive school environment transformation investments through multi-tiered systems of support framework to create positive, health-promoting environments and provision of protective factors.

PREVENTION CATEGORY:

1: Universal Physical, Behavioral, and Social Health Promotion for Children and Caregivers
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CONTENT FOCUS WITHIN THE SYSTEM OF CARE:
Substance Use

GOAL 3: PREVENTION FOR CHILDREN AND YOUTH THROUGH HEALTH SERVICES

Objective 3.1:
By September 2021, continue health screenings for all children and youth in schools and at pediatric practices and evaluate need for increased screening for key areas in post-pandemic recovery, such as childhood lead poisoning.

Objective 3.2:
By June 2022, evaluate need and plan for expansion of health- and/or special healthcare need-specific health service programs for specific, identified population groups, such as those with Long COVID, disabilities, and chronic health conditions.

Objective 3.3:
By September 2023, scale up investments in comprehensive medial homes, social emotional screening, toxic stress identification and referral mechanisms, and obesity prevention for children and youth in Rhode Island—particularly those families who do not frequently engage in care.

Objective 3.4
By June 2022, develop a plan to strengthen psychiatric health services, discharge planning, and related supports to incorporate additional prevention strategies and mitigate more severe recurrence of illness.

MAJOR ACTIVITIES AND PRIMARY AUDIENCE:

Proposed Activities for Objective 3.1 (Target Audience = Providers and Patients)
- Continue utilization of EPSDT periodicity schedule for pediatricians to provide health services, including preventative activities to children and youth.
- Support universal school-based health screenings and benchmark tracking for all children and youth.
- Continue childhood lead poisoning screenings and expand prevention supports for mitigation, remediation, and second screening promotion.

Proposed Activities for Objective 3.2 (Target Audience = Indicated Families)
- Ensure specialized activities for children and youth with specific health concerns, such as Camp Hope for children with cancer and other camps for children with diabetes.
- Develop an approach to leverage the US DOE policy making Long-COVID Symptoms a qualifier as a disability to reach children and youth affected by COVID-19.
- Maintain and/or expand critical access and supportive programs for marginalized children and youth populations, such the Open Doors Clinic and PASS programs.

Proposed Activities for Objective 3.3 (Target Audience = Health Services Providers)
- Invest in implementation supports for the 2021 mental health and social emotional learning screenings in all Rhode Island schools.
• Develop additional PCMH-Kids pediatric practices to create comprehensive medical homes for children and youth.
• Develop incentives, facilitation, and referral resources for universal implementation of the Toxic Stress Toolkit within the health system.
• Enhance referral options and link into Unite Us for school-based health screenings and implement a rescreening schedule.
• Invest in obesity prevention within the state for those children and youth experiencing the greatest health disparities, food system inequities, and other environmental burdens.

Proposed Activities for Objective 3.4 (Target Audience = Clinical Providers)
• Implement universal medication lock bag distribution for all youth psychiatric emergency department or inpatient visits upon discharge from any facility in Rhode Island.
• Develop a Family Behavioral Health Crisis Plan template and implement within provider, school, and community settings.
• Develop and provide guidance for storing, reviewing, and updating Safety Plans for youth and families who experienced a psychiatric emergency.
• Increase care coordination during transitions between levels of care (e.g., in-patient to partial to outpatient) using peer supports upon discharge and through increased records sharing between psychiatric facilities (e.g., Bradley, Hasbro, Butler).
• Further increase utilization of Pedi PRN (Psychiatric Referral Network) among pediatricians to assist with medication management in non-psychiatric settings.
• Increase provider-facilitated conversations with families about the dangers of prescribed and over-the-counter medications and safety considerations.
• Work to standardize admission/discharge thresholds, provide guidance on criteria statewide for psychiatric services, and review administrative discharges from behavioral health to identify opportunities to close retention in care gaps.
• Develop a multidisciplinary, health student-focused clinic that serves as a transitions clinic or holding space for families awaiting engagement in the next level of care.
• Evaluate and consider removing requirements that children be admitted into/complete a program prior to being able to come back into care in outpatient and/or other settings (e.g., schools).
• Increase available in-home or in-community programs as step-down or intermediary levels of care to reduce risk while children are awaiting admission into treatment programs.
• Review referral process to avoid children being discharged from existing services upon coming into or being admitted into a higher-level of care.
• Improve culturally-informed prevention and treatment to increase efficacy within target populations and work to diversify the provider workforce.

PREVENTION CATEGORY:

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CONTENT FOCUS WITHIN THE SYSTEM OF CARE:
C: Health Services

GOAL 4: PREVENTION FOR CHILDREN AND YOUTH THROUGH SOCIAL AND CHILD WELFARE SUPPORTS

Objective 4.1: By January 2022, increase awareness of existing, available, and recommended community-based resources (such as Health Equity Zones, Family Resource Centers, pediatric screening, and other programming suggestions) to address social and child welfare concerns using a place-based lens.

Objective 4.2: By June 2022, resource and implement additional social and child welfare activities aimed at identifying, reaching, servicing, and retaining involved and at-risk families to help children and youth thrive.

Objective 4.3: By September 2023, scale up investments in parent education, family services, peer support pilots, enhanced children and youth programming, and enrichment activities in Rhode Island.

MAJOR ACTIVITIES AND PRIMARY AUDIENCE:

Proposed Activities for Objective 4.1 (Target Audience = All)
- Continue pediatric screening for social emotional health and provide appropriate referrals for needs-based services.
- Provide education to cities, towns, and potential partners on the value of Health Equity Zones for geographic regions currently unserved to begin improvements in social determinants of health.
- Provide guidance for activities that improve social capital, social cohesion, connectedness within local cities/towns.
- Increase awareness of Family Resource Center services within specific cities and towns.

Proposed Activities for Objective 4.2 (Target Audience = Children and youth at risk of involvement with child welfare, juvenile justice and/or those with behavioral health needs)
- Continue DCYF and RIDOH collaboration aimed at identifying involved and at-risk families and providing enhanced services and supports to these families.
- Continue investment and service array offered by the Family Care Community Partnerships (FCCPs) regionally throughout the state to provide secondary prevention programs and serve the juvenile justice population.
- Resource and implement DCYF evidence-based programs and home-grown contracted services (such as Tides Preserving Families Network) working within the child welfare, juvenile justice, and other related systems.
- Continue partnership with the Safe and Secure Baby Court.

Proposed Activities for Objective 4.3 (Target Audience = All)
- Continue and/or expand 21st Century Grants and summer programming opportunities through RIDE.
• Expand Incredible Years parent education and support groups beyond the funding through BHDDH.
• Expand DCYF access to evidence-based services and home-grown supports to additional populations with enhanced state match and new Federal funding.
• Expand upon the existing Child Opportunity Zones (10) and existing community school models to develop additional summer and after-school structured programming in Rhode Island to further coverage and reach for vulnerable families and at-risk youth.
• Develop and resource a plan to implement comprehensive youth civic engagement, social connectedness, and volunteerism programs within Health Equity Zones and High-Density Communities in Rhode Island.
• Develop a plan to increase positive youth programming opportunities (aka Free-Time) for all children and youth—with a specific focus on young girls ages 12-18.
• Expand (perhaps through the 1115 Medicaid Waiver) both family and youth peer support partner roles (e.g., akin to Wraparound Milwaukie) and expand based on evaluation findings.

PREVENTION CATEGORY:
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   - Transition Coordination
   - Severity Escalation Mitigation

4: Tertiary Prevention
   - High-Risk Behavior Prevention
   - Prevention of the Onset of More Severe/Complex Conditions
   - Prevention of Recurrence via Strengthened Step-Down Care Coordination

PROGRAM PRIORITY ALIGNMENT WITHIN THE SYSTEM OF CARE:
SELECT WORKGROUPS THAT THIS GOAL APPLIES TO...
A: Mobile Crisis and Single Point of Entry
B: Care Authorization and Coordination
C: Broad Service Array
D: Workforce Transformation
E: Community Outreach and Education
F: Data Systems for Outcomes Measurement and Evaluation
G: Prevention

CONTENT FOCUS WITHIN THE SYSTEM OF CARE:
D: Social and Child Welfare
<table>
<thead>
<tr>
<th>GOAL 5: PREVENTION FOR CHILDREN AND YOUTH THROUGH EDUCATIONAL SYSTEMS AND PROGRAMS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective 5.1:</strong></td>
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<tr>
<td>By June 2022, develop guidelines and plans to assist schools educate, train, and empower youth to reach their full potential, care for one another, and understand behavioral health concerns.</td>
</tr>
<tr>
<td><strong>Objective 5.2:</strong></td>
</tr>
<tr>
<td>By June 2022, identify needs and develop plans to further resource Individualized Education Plan services and apply learnings from the mental health capacity-building grant to other districts.</td>
</tr>
<tr>
<td><strong>Objective 5.3:</strong></td>
</tr>
<tr>
<td>By September 2023, scale up investments in pre-kindergarten, social emotional learning programs, quality day care services, school-based services/residencies, and behavioral health career programs within all school districts in Rhode Island.</td>
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</tbody>
</table>

| **MAJOR ACTIVITIES AND PRIMARY AUDIENCE:** |
| **Potential Activities for Objective 5.1** |
| • Continue to support all children reaching at grade level by the third grade in Rhode Island. |
| • Continue universal enrollment in and availability of All-Day Kindergarten for Rhode Island children. |
| • Support development of Gay-Straight Alliances using the GLSEN GSA Toolkit within all Rhode Island schools. |
| • Redeploy Five Signs to Change Direction campaign in schools in partnership with the Hospital Association of Rhode Island and other key partners. |
| • Universally scale up school-based, peer-led Youth Mental Health First Aid programs in all Rhode Island Schools. |
| • Launch RIDE’s “Let It Out” Campaign and relaunch EOHHS’ “It’s OK Not to Be OK” campaign in a coordinated manner throughout 2021-2022—including within community forums such as faith-based organizations. |
| • Distribute and raise awareness on RIDE’s School Health Profiles to assist with educational program planning efforts. |
| • Continue engagement of RIDE’s School Health Advisory Council and other community stakeholders. |
| **Potential Activities for Objective 5.2** |
| • Continue Individualized Education Plans (IEP) and provide additional supports and programs that address the behavioral health needs of students. |
| • Implement and consider scaling of the US Department of Education (USDOE)’s school-based mental health capacity grant in Providence, Central Falls, and a rural district and SAMHSA’s Project AWARE (Providence, Pawtucket, Woonsocket). |
| • Support the aims of the USDOE’s school climate transformation and the development of the multi-tiered systems of support to provide safe, supportive, and predictive environments that support the academic and behavioral health needs of all students. |
| • Further statewide efforts to support Youth Mental Health First Aid and Teen Mental Health First Aid. |
| • Support districts in implementing the RULER training program through the Yale Center for Emotional Intelligence. |
| • Scale signs of Suicide curriculum to middle and high schools statewide. |
| **Potential Activities for Objective 5.3** |
| • Develop a plan for resourcing, incentivizing, and assessing the quality of day care services within Rhode Island. |
| • Expand school-based services and residency/fellowship opportunities in other communities to build on PROJECT AWARE successes in Providence, Pawtucket, and Woonsocket. |
| • Develop additional learning opportunities focused on behavioral health and wellness using the Bridge RI Professional Development Hub. |
- Implement behavioral health career awareness programs and develop behavioral health career pathways for Rhode Island youth, parents, and school professionals.
- Build on statewide efforts to support Signs of Suicide curricula in middle and high schools in Rhode Island.
- Develop model policy on suicide prevention, intervention and postvention per the requirements of the Nathan Bruno Act.

**PREVENTION CATEGORY:**

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   - Social Emotional Development
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   - Transition Coordination
   - Severity Escalation Mitigation

4: Tertiary Prevention
   - High-Risk Behavior Prevention
   - Prevention of the Onset of More Severe/Complex Conditions
   - Prevention of Recurrence via Strengthened Step-Down Care Coordination

**CONTENT FOCUS WITHIN THE SYSTEM OF CARE:**

E: Educational

**GOAL 6: PREVENTION FOR CHILDREN AND YOUTH THROUGH JUVENILE JUSTICE PROGRAMS**

**Objective 6.1:**
By January 2022, continue, build, and expand partnerships and innovative evidence-based programming to prevent and/or transition out of justice system involvement for Rhode Island children and youth.

**MAJOR ACTIVITIES AND PRIMARY AUDIENCE:**

Potential Activities for Objective 6.1 (Target Audience = Indicated Populations and Corresponding Systems)

- Continue partnerships and engagement with established Juvenile Hearing Boards in Rhode Island.
- Ensure services for youth engaged within the juvenile justice system are available, utilized, and retained within Family Care Community Partnerships (FCCP) as part of secondary prevention programming.
- Provide, and where applicable, evaluate and expand, DCYF/BHDDH evidence-based programs for those engaged in the juvenile justice system (e.g., Healthy Transitions access for select court-ordered youth and young adults).
- Continue Kent and Providence County Mental Health Clinics as part of the Juvenile Justice Court System and consider expansion to other Courts.
- Develop and expand prevention activities focused on changing the narrative between law enforcement, the justice system, and youth populations—particularly in marginalized communities (e.g., Police Go Program (FSRI)).
**PREVENTION CATEGORY:**

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3: Enhanced Prevention for At-Risk Populations of Children and Caregivers
   - Target Outreach, Engagement, and Retention
   - Additional Resources Provision
   - Transition Coordination
   - Severity Escalation Mitigation

4: Tertiary Prevention
   - High-Risk Behavior Prevention
   - Prevention of the Onset of More Severe/Complex Conditions
   - Prevention of Recurrence via Strengthened Step-Down Care Coordination

**CONTENT FOCUS WITHIN THE SYSTEM OF CARE:**

F: Juvenile Justice

**GOAL 7: PREVENTION FOR CHILDREN AND YOUTH THROUGH RECREATIONAL PROGRAMS**

**Objective 7.1:**
By January 2022, increase visibility of and no-barrier access to existing community-based recreational activities that are children-, youth-, and family-engaging.

**Objective 7.2:**
By June 2022, develop plans to invest in community recreation, youth leadership, and drop-in spaces to increase access to developmentally-appropriate recreation.

**MAJOR ACTIVITIES AND PRIMARY AUDIENCE:**

**Potential Activities for Objective 7.1**
- Ensure community awareness of local programs that have membership assistance and scholarships for families (e.g., YMCA/YWCA, Boys and Girls Club, Town Recreation Programs).
- Promote local team-based recreational activities for youth (e.g., Little Leagues, scholastic leagues, camps, field trips, teen alliances, youth groups, affinity groups).
- Provide diverse recreational activities for children, youth, and families within the state (e.g., arts/music/theater programs, library programs, community night out, block parties, summer drop-in programs).
- Ensure engaging opportunities for youth within school-based recreation and enrichment programs (e.g., recess, field trips, bookmobiles, awards ceremonies, clubs, 21st Century community learning centers, STEM programs/summer camps, after-school programs).

**Potential Activities for Objective 7.2**
- Fund the creation of additional public playgrounds, splash pads, community pools, community recreation centers, parks (including DEM Parks programs), and community gardens for all neighborhoods in Rhode Island.
- Invest in youth leadership development opportunities, particularly for at-risk children and youth, through mentorship (e.g., Big Brothers/Big Sisters, Princes to Kings) and leadership academies (e.g., Teen Institute, Leadership RI, Dare to Dream).
- Develop youth-focused convenings and teen-based drop-in centers within local communities (e.g., faith-based events, midnight basketball leagues, sports centers such as martial arts studios, Foster Forward, Youth Pride).
- Develop mechanisms to link children and youth back with local community systems (e.g., schools) and to supportive recreational activities as a formal part of psychiatric and behavioral health discharge planning.

**PREVENTION CATEGORY:**

1: Universal Physical, Behavioral, and Social Health Promotion for Children and Caregivers
   - Health and Wellness Policy
   - Mental Health Promotion
   - Social Emotional Development
   - Protective Factors Provision

2: Universal Screening and Early Identification of Children and Caregivers
   - Developmental Screening
   - Behavioral Health Screening
   - Family Psychosocial Screening
   - Social Determinants of Health

3: Enhanced Prevention for At-Risk Populations of Children and Caregivers
   - Target Outreach, Engagement, and Retention
   - Additional Resources Provision
   - Transition Coordination
   - Severity Escalation Mitigation

4: Tertiary Prevention
   - High-Risk Behavior Prevention
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   - Prevention of Recurrence via Strengthened Step-Down Care Coordination

**CONTENT FOCUS WITHIN THE SYSTEM OF CARE:**

G: Recreational

**GOAL 8: PREVENTION FOR CHILDREN AND YOUTH THROUGH VOCATIONAL PROGRAMS**

**Objective 8.1:**
By September 2022, assess, evaluate, and recommend changes to the diversity, availability, and awareness of vocational, career, and technical programs in Rhode Island.

**Objective 8.2:**
By September 2022, implement non-traditional and/or supportive strategies to expand the development of life skills, soft skills, and other strengths among the state’s youth.

**MAJOR ACTIVITIES AND PRIMARY AUDIENCE:**

**Potential Activities for Objective 8.1**
- Further develop middle- and high-school awareness of and access to career and technical pathways via Prepare-RI career/technical schools, specialty schools, on-the-job training opportunities (e.g., Youth Build and Harvest Kitchen), Kids in Life Skills programs, and RI’s Promise Program.
• Increase high school career pathway options and awareness by providing a deeper understanding of diverse career options, broadening opportunities for students to see/visit careers in the field, supporting school visits, and district career days.
• Leverage Teen Mental Health First Aid, social work career shadowing with RISAS Counselors, and RI Promise Program to pilot a career pathway for diverse Social Workers leveraging high school credits, etc.

Potential Activities for Objective 8.2
• Integrate of Clifton Strengths into youth programming (similar to the PREPARE RI program) in a variety of settings.
• Explore full CPR training requirements prior to high school graduation and/or in conjunction with Driver’s Education programs.
• Increase student activation through voter registration, trainings such as Listen First, and civic engagement discussions and volunteer opportunities.
• Expand peer-led Teen Mental Health First Aid and job shadow opportunities in behavioral health.
• Increase student internships, networking opportunities, and professional mentorship in local communities.
• Integrate academic and social emotional competencies through RIDE’s Social & Emotional Learning Standards and a Community of Practice.

PREVENTION CATEGORY:

1: Universal Physical, Behavioral, and Social Health Promotion for Children and Caregivers
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   - Mental Health Promotion
   - Social Emotional Development
   - Protective Factors Provision

2: Universal Screening and Early Identification of Children and Caregivers
   - Developmental Screening
   - Behavioral Health Screening
   - Family Psychosocial Screening
   - Social Determinants of Health

3: Enhanced Prevention for At-Risk Populations of Children and Caregivers
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   - Additional Resources Provision
   - Transition Coordination
   - Severity Escalation Mitigation

4: Tertiary Prevention
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CONTENT FOCUS WITHIN THE SYSTEM OF CARE:

H: Vocational

GOAL 9: PREVENTION FOR YOUTH TRANSITIONS TO ADULT SERVICES

Objective 9.1:
By January 2022, develop an outreach and engagement plan for educating families, caregivers, providers, and youth about the unique needs of transition-aged youth, services available, and resources that exist to ensure no gaps in needed services arise.
Objective 9.2:  
By June 2022, complete a resource map of existing prevention resources and opportunities to engage youth who are identified populations at-risk of uncoordinated transitions in systems of care.

Objective 9.3:  
By September 2023, scale up investments and resources that promote coordinated healthy transitions in Rhode Island.

MAJOR ACTIVITIES AND PRIMARY AUDIENCE:

Potential Activities for Objective 9.1
- Convene a communications team to organize and implement a comprehensive outreach and education plan that leverages community and cultural events. Train providers to raise awareness of transition supports.

Potential Activities for Objective 9.2
- Continue service delivery via Office of Rehabilitative Services/RIDE MOU.
- Continue further refinement, expansion, and distribution of the BHDDH Youth Transition Guidebook in multiple languages.
- Engage with RIDOH Dare to Dream, Dream Team Leadership Group/Youth Advisory Council, and Special Healthcare Needs Internship Program to reach key populations.
- Integrate healthy transitions resource mapping within the developmentally disabled consent decree work.

Potential Activities for Objective 9.3
- Resource implementation and expansion of the RIDOH Blueprint for Transition from Pediatric to Adult Healthcare.
- Enhance/create additional transition resources and safety nets for “non-IEP” students.
- Create local Service Hubs for Transition Age Youth across Rhode Island.
- Develop incentives for increased workforce recruitment and retention for Youth/Young Adult specialists.

PREVENTION CATEGORY:

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CONTENT FOCUS WITHIN THE SYSTEM OF CARE:
I: Transition

GOAL 10: PREVENTION FOR CHILDREN AND YOUTH THROUGH EARLY CHILDHOOD PROGRAMS

Objective 10.1:
By June 2022, implement strategies to sustain, expand, and coordinate prevention services, resources, and opportunities for systemically marginalized populations within early childhood environments.

Objective 10.2:
By September 2022, scale up quality investments to support families throughout early childhood to promote healthy development for infants and children in Rhode Island.

MAJOR ACTIVITIES AND PRIMARY AUDIENCE:

Potential Activities for Objective 10.1
- Continue Safe and Secure Baby Court in partnership with the justice system and consider replication within other juvenile justice settings.
- Develop, resource, and implement a substance-exposed newborn system of care.
- Further expand and implement the Rhode Island Safe Model within DCYF.

Potential Activities for Objective 10.2
- Scale up evidence-based family home visiting programs to achieve universal access and high levels of utilization.
- Support the Infant and Early Childhood Mental Health Consultation between various settings, including family home visiting, early childhood programs, and childcare agencies.
- Further invest in Head Start, Incredible Years parent education and support, and Pre-Kindergarten for all localities.
- Maximize expansion and utilization of integrated behavioral health within primary care (pediatrics, OB/GYN)
- Maximize utilization of Moms PRN (Psychiatry Referral Network) and Pedi PRN within the provider community.
- Support emerging work to expand and fund the Doula workforce—particularly to address cultural beliefs, preferences, and other determinants of health.
- Fund the Infant/Toddler Mental Health Endorsement Certification within Rhode Island across all three levels of certification (providers, program managers, community providers, etc.).
- Explore new programming opportunities, such as non-home visiting models for early childcare.

PREVENTION CATEGORY:

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   - Protective Factors Provision

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CONTENT FOCUS WITHIN THE SYSTEM OF CARE:
J: Early Childhood

GOAL 11: OVERARCHING PREVENTION EFFORTS FOR CHILDREN AND YOUTH
Objective 11.1:
By September 2022, identify existing plans and/or develop plans to implement overarching support and assistance programs that address the socioeconomic and environmental determinants of health affecting Rhode Island families.

MAJOR ACTIVITIES AND PRIMARY AUDIENCE:
Proposed Activities for Objective 11.1
- Obtain universal participation in free and reduced meals program for schools.
- Increase overarching trauma-informed care for all providers, community partners, and parents.
- Increase provider and parent comfort with and skills in assessing youth suicidality.
- Develop mechanism to provide parent/caregiver/family supports, services, education, and resources as a component of prevention when providing any services to an infant, child, or youth.
- Improve quality, affordable, and safe/healthy housing as a component of prevention.
- Increase physical activity opportunities and engagement for infants, children, and youth throughout Rhode Island.
- Expand place-based initiatives (e.g., Health Equity Zones) that improve community resiliency and address the social determinants of health to have full geographic coverage in Rhode Island.
- Decrease community, domestic, and sexual violence across all settings and localities in Rhode Island to create safe environments for families.
- Maximize engagement in assistance programs such as SNAP/TANF, WIC, and Medicaid.

PREVENTION CATEGORY:
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- Additional Resources Provision
### Transition Coordination
- Severity Escalation Mitigation

### 4: Tertiary Prevention
- **High-Risk Behavior Prevention**
- **Prevention of the Onset of More Severe/Complex Conditions**
- **Prevention of Recurrence via Strengthened Step-Down Care Coordination**

### CONTENT FOCUS WITHIN THE SYSTEM OF CARE:
**K: Overarching**