RAAPS Implementation in Sexual Health Clinics

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Risk Assessment
Because...

✓ Teens have unique needs

✓ Preventable Risks
  o Unintentional injuries and violence
  o Tobacco use
  o Alcohol and other drug use
  o Sexual behaviors that contribute to unintended pregnancy and STI
  o Dietary behaviors
  o Physical activity

✓ Engagement matters
Risk Factors for Sexual Behavior

Research suggests these risk factors contribute to unsafe sexual decision making:

- Substance use prior to sex
- Depression and low self esteem
- Homelessness
- School failure and lack of future goals
- Sexting
- History of abuse
- Dating violence
Youth Risk Behaviors

2017 U.S. RAAPS Data - 35K Youth Screened & Counseled

Mental health issues now rank higher than drugs, alcohol, and tobacco – risks that are often more commonly associated with teens.
Youth Risk Behaviors

2017 U.S. RAAPS Data - 12% of Youth Reported Carrying a Weapon for Protection

- Bullied: 10%
- Anger: 25%
- Depression: 25%

Youth Carrying Weapons vs. All Youth
Rapid Assessment for Adolescent Preventive Services (RAAPS)

Risk Behaviors by AGE

Increases by more than 400% for ages 15+

- Alcohol use
- Drug use
- Tobacco use
- Sexually active

10-14 yr olds
15-19 yr olds
Rapid Assessment for Adolescent Preventive Services (RAAPS)

Sexual Behaviors Over Time

Sexual Behaviors By Age

Ever had any type of sex (vaginal, anal or oral sex)
Rapid Assessment for Adolescent Preventive Services (RAAPS)

**Gender**
Girls are 2-3 times more likely to report mental health risk factors.

- **Sad or depressed**
  - 1 out of 3 girls (36%)
  - 1 out of 5 boys (19%)

- **Bullied or harassed**
  - 1 out of 5 girls (21%)
  - 1 out of 4 boys (11%)

- **Physically or sexually abused**
  - 1 out of 7 girls (14%)
  - 1 out of 5 boys (8%)

- **Self harm/suicidal thoughts**
  - 1 out of 6 girls (15%)
  - 1 out of 6 boys (6%)
Federal Title X Funding Requirements

Organizations must provide adolescent screening for:

- Sexual health
- History related to sexual risk
- Intimate partner violence
- Tobacco, alcohol and other drug use
- Depression
“Screening for risky behaviors and potential untoward consequences of these behaviors, provision of interventions to help mitigate consequences, and provision of clinical reproductive health services are essential.”

CDC Recommendations

Suggestions for ways to improve sexual health services:
- More collaborative public health surveillance to monitor effectiveness
- Expand the use of health information technology (HIT) to improve preventive service delivery
Current Practice - Sexual Health Care

- Zero discussion of sexual health in 1/3 of all adolescent health maintenance exams.
- Zero chlamydia screening in the preceding 12 months for 60% of sexually active females aged 15-21 years
Variability in Risk Screening

- Experience & skill level of each individual provider
- Knowledge of clinical guidelines
- Communication techniques
- Subconscious biases
- Personal comfort level
Your Current Practice

1. How do you screen for risky sexual behaviors in adolescents?

2. How effective are you in counseling adolescents on making safer sexual choices?
TECHNOLOGY
Technology Removes Variability

HOW we ask a question...
“You use condoms, right?”

HOW we look when we’re asking...

HOW we talk about risky behaviors...
“Just say ‘no’ to sex”
Technology Connects Professionals with Connected Teens

- increased honesty
- more risks identified & reduced
- better outcomes
- data about those outcomes
- patient population insights
- better reimbursement
Where do we start...
Rapid Assessment for Adolescent Preventive Services (RAAPS)

RAAPS was born at the University of Michigan

Older Child (9-12yrs)
Standard (13-18yrs)
College Age (19-24yrs)
Public Health
21 question screening tool can be completed in 5 minutes and addresses risk behaviors in:

- Diet & Exercise
- Substance Use
- Depression & Suicide
- Violence & Safety
- Sexual Health
- Unintentional Injury

All questions have been scientifically validated
http://www.possibilitiesforchange.com/publications/
RAAPS - Nationally Recommended

RAAPS has been recognized by several leading health organizations for use as a clinical tool for adolescent risk assessment.

ORGANIZATIONS INCLUDING:

- US Department of Health and Human Services (HHS)
- Agency for Healthcare Research and Quality (AHRQ)
- The Society of Adolescent Health and Medicine (SAHM)
- The National School Based Health Alliance (SBHA)
- The Michigan Quality Improvement Consortium (MQIC)
Electronic RAAPS was developed to help professionals:

- ✓ Get honest risk information from teens
- ✓ Navigate difficult conversations
- ✓ Access data to highlight need and show effectiveness
Innovative Features for Teens and Young Adults

- Designed to engage
- Technology based
- Tablet, iPad, Smartphone
- Audio & multilingual options
- Health messages geared toward teens
Question:
When you are driving or riding in a car, truck, or van do you always wear a lap/seat belt?

Yes  No
Safety

Car crashes can happen at any time and at any speed. No one thinks they will be in an accident which is why it's important to wear a seat belt, even if you are just driving around the corner. In fact, most crashes happen very close to home.

To protect yourself:

- Wear a seatbelt whether you are in the front or the back seat.
- When you get in a car/truck adjust your seatbelt to make it more comfortable.
- Make a reminder sign or symbol and put it in the car somewhere that everyone will see it to remind them to buckle up.
- Make a rule in your car that the car isn’t turned on until everyone is buckled up.
- Make putting on your seatbelt the first thing you do when you get in the car.

Car crashes aren’t always your fault, but wearing a seat belt can be the thing that saves your life. Be a role model and ask everyone in the car to wear a seat belt with you.

http://www.cdc.gov/Motorvehiclesafety/seatbelts/facts.html
http://www.teendriversource.org/teen
Adolescent Counseling Technology (ACT) Virtual Health Educator

ACT-SH: Assessment + Risk Reduction Coaching = High Tech Transformation
ACT - Supporting Professionals

Developed to Support Professionals by Utilizing Technology to:

- Standardize sexual health care for adolescents
- Ensure consistent implementation of current national screening guidelines and counseling recommendations
- Provide comprehensive documentation of risk history and education provided to adolescents
- Reduce face to face visit time
ACT - *Prevention and Intervention*

Adolescent Counseling Technologies - Sexual Health - virtual health educator:

- **Technology:** 10 min for completing the assessment plus individualized feedback and health education

- **In Person:** follow-up discussion with healthcare provider during visit

- **Follow up:** text message reminders for teen with feedback to healthcare provider
Question:

The last time you had sex (vaginal or anal), did you use a condom (either one that goes over a penis or that goes inside a vagina or anus)?

No    Yes
Question:
How confident are you that you will be able to use a condom every time you have sex?

1. not sure
2. might work
3. absolutely sure

Next Question
Did you know?

If you are having sex with a partner that won't result in pregnancy, it is still important to protect yourself from STIs.

It can be a challenge to practice safer sex. We’ll find out more about you and give you some tips and tools to help you protect yourself.
ACT Action Card for: Act Student One

This is your personalized action plan from ACT. We’ll be here when you need us, just refer to this card any time you need a willpower boost or a refresher.

Your Goal

You said you were going to use condoms with every sexual encounter.

Your Motivational Boost

Drained of willpower? Remember the reasons you are committing to safer sex:

- You care about your health.
- You want to keep your partner safe.
- Your friend or boyfriend/girlfriend wants to.

Keeping On Track

Remember some of the things you thought could help:

- Talking to your partner before you have sex.
- Keeping condoms with you.

Overcoming Challenges

Even if you intend to use condoms and/or another form of birth control, things can get in the way. Here are some of the challenges you might face:

- "I don't feel comfortable buying condoms."
  It can be uncomfortable to buy condoms or other forms of birth control. Maybe you're afraid someone will see you and judge you. Often, health clinics or doctors' offices will give out condoms for free. Or you can buy them from a store farther away from people you know or online to help ensure your privacy.
• 19% have been in an abusive relationship in the last 12 months and 16% report being forced to participate in unwanted sexual activity
• Nearly 1 in 4 (23%) had a partner who refused to use condoms or prevented the youth from using birth control
• And 16% of youth report having bartered sex
ACT SH Data

Youth care about their health and were interested in receiving sexual health information.

- 86% opted in to health education
- 54% opted in to text message follow up
- 88% created a safer sex action plan

Teen Experience: Nearly 100% say they liked interacting with ACT-SH, learned new information, and thought it was comprehensive.
ACT-SH Provider Results

Self-rating provider’s ability to **consistently gather comprehensive sexual health histories and create safer sex action plans**

Self-rating provider’s **effectiveness in counseling teens on reducing their risky sexual behaviors**

- **Before Participating in Project**
  - Self-Rating BEFORE Participating in Project
  - Self-Rating AFTER Participating in Project
Billing Codes for Sexual Health Services

96127 or 96160: Brief Behavioral/Risk Assessment
G0445: High Intensity Behavioral Counseling

HEDIS bonus payments annually:
Adolescent Well Visit
Chlamydia Screening

HRSA payments based on quality
An Effective Tool for Professionals

- EHR format for documentation
- Health education via technology
- Integrated care
- Referral tracking
- Easy to access data
- Meet PCMH Standards
- Saves time
Initial Visit Clinic Flow

- After SH clinic registration is complete
- Clerical staff register the client in RAAPS
- Ipad along with user name and password is given to client
- Client completes the assessment
Initial Visit Clinic Flow

Clinician views Clinician Dashboard-Today’s Assessments
Initial Visit Clinic Flow

Clinician reviews RAAPS assessment
Initial Visit Clinic Flow

• Clinician prints health messages and reviews assessment and health messages with the client

• Client sets goals

RAAPS Messages

Violence

You never deserve to be treated badly. Abuse can happen in lots of ways to all kinds of people. But it is never okay. It doesn't matter where you live, who you live with, or how much money your family has. It can happen anywhere. If you have been or are being abused, it is not your fault and it needs to stop. Talk to somebody you trust such as a friend, family member, your physician, or counselor for help. If you feel you are in danger, tell someone you trust or contact a helper immediately. It takes a lot of courage to talk about things that have happened to you, but you can do it! You are not alone. There are people who care about you, who believe you, and who want to help you.

http://www.nhi.org/health/patients/index.cfm?c=20715
http://www.nhi.org/health/patients/index.cfm?c=20715
National Domestic Violence hotline: 1-800-799-SAFE (7233)
Online Chat: http://www.thehotline.org
National Sexual Assault Hotline: 1-800-656-HOPE (4673)
Online Chat: http://www.rainn.org/onlinehotlines-all-service.jsp

Sometimes carrying a weapon may seem like the only way to stay safe. Even if you don’t plan to use it, it can be dangerous. You can get in trouble for just having it, you could hurt or kill someone, or someone could use your own weapon on you.

If you feel you are in danger, here are some other ways to stay safe instead of carrying a weapon:

• If you feel unsafe at school or someone is bullying or harassing you, tell someone you trust or report the situation. Never try to deal with the problem with violence.
• Try not to go places alone and stay with a group of friends.
• Stay on sidewalks and paths that are well lit at night.
• Even if it takes longer, take different ways that you know are safer. If there isn’t a safe walking route, take a cab or get a ride.
• Get to know the area you are going before you go.
• Tell a resident advisor, your school or the police for help.

Being safe is important. There are people who care about you and want to help make sure you always feel safe.

http://www.epcs.org/programs/what-is-speak-2001-and-friends/
Students can safely and anonymously report suspected threats 24/7 by calling 1-866-SPEAK-UP.

Mental Health

Everyone gets angry. Anger is a strong feeling that can energize you and make you want to take action. It’s not hard to figure out what to do with angry feelings. What you do or say when you are angry may be hurtful to you or others. That is why it is important to learn to manage your
Initial Visit Clinic Flow

Clinician documents and saves notes
Initial Visit Clinic Flow
Clinician documents high risks and goals

<table>
<thead>
<tr>
<th>High Risks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health: Reports serious problems or worries</td>
</tr>
<tr>
<td>Mental Health: Reports suicidal ideation or self-harming behaviors</td>
</tr>
<tr>
<td>Violence: Reports difficulties managing anger</td>
</tr>
<tr>
<td>Violence: History of physical, emotional or sexual abuse</td>
</tr>
<tr>
<td>Mental Health: Reports feeling sad or down within the past month</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Assigned Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keep appt with behavioral health referral</td>
</tr>
<tr>
<td>Due: 07-24-2019</td>
</tr>
<tr>
<td>Status: Not Started</td>
</tr>
<tr>
<td>If suicidal thoughts will talk with mother and friends</td>
</tr>
<tr>
<td>Due: 07-24-2019</td>
</tr>
<tr>
<td>Status: Not Started</td>
</tr>
<tr>
<td>Keep support systems intact by keeping in touch with friends with Ehlers-Danlos syndrome via text and social media</td>
</tr>
<tr>
<td>Due: 07-24-2019</td>
</tr>
<tr>
<td>Status: Not Started</td>
</tr>
</tbody>
</table>

Update Goals

<table>
<thead>
<tr>
<th>Goal</th>
<th>Set Date</th>
<th>Target Date</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keep appt with behavioral health referral</td>
<td>07-25-2018</td>
<td>07-24-2019</td>
<td>Assigned</td>
</tr>
<tr>
<td>If suicidal thoughts will talk with mother and friends</td>
<td>07-25-2018</td>
<td>07-24-2019</td>
<td>Assigned</td>
</tr>
<tr>
<td>Keep support systems intact by keeping in touch with friends with Ehlers-Danlos syndrome via text and social media</td>
<td>07-25-2018</td>
<td>07-24-2019</td>
<td>Assigned</td>
</tr>
</tbody>
</table>
Initial Visit Clinic Flow

Clinician adds flag to EMR to alert future staff that follow up is due
Follow Up Visit Clinic Flow

Follow up visit is assigned to staff seeing the client

Possibilities for Change

Select your appointment options.  

Followup

Please fill out the following fields to create a followup.

Create Followup

Past Assessments

RAAPS

Location

Niles Site

Choose Clinician

Fat Small

Followup Date

07-31-2018

Followup Notes

Add Additional Notes or Comments
Follow Up Visit Clinic Flow

Clinician (RN or NP) reviews assessment summary report

RAAPS-CA Assessment Report

Report For:

Account Name: Denton County Health Department
Location: Denton Harbor Site
Clinician: Jennifer Parete

Student ID: --
Student Name: --
Birthdate: --
Date Taken: July 31, 2018
Date Reviewed: Aug 01, 2018
Date Approved: Aug 01, 2018

Reason for Assessment:

Review/Approval Notes:

[Reason for assessment details]

RAAPS Risk Category Summary

<table>
<thead>
<tr>
<th>Date</th>
<th>Total Score</th>
<th>Safety</th>
<th>NPA</th>
<th>Sexual</th>
<th>Mental</th>
<th>Substance Use</th>
<th>Violence</th>
<th>Protective</th>
<th>Academic</th>
</tr>
</thead>
<tbody>
<tr>
<td>07-31-2018</td>
<td>7</td>
<td>0</td>
<td>5</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Risk Assessment

<table>
<thead>
<tr>
<th>Risk</th>
<th>Question</th>
<th>Answer</th>
<th>Update</th>
<th>Assessed Risk</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>In the past 12 months, have you taken diet pills or creatives, made yourself vomit (throw up) after eating, or starved yourself or obsessively exercised to lose weight?</td>
<td>Yes</td>
<td></td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>In the past 6 months, have you had any type of sex (vaginal, anal or oral sex)?</td>
<td>Yes</td>
<td></td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>In the past 3 months, have you drunk more than a few sips of alcohol (beer, wine, cocktails, liquor, others)?</td>
<td>Yes</td>
<td></td>
<td>Low</td>
<td></td>
</tr>
</tbody>
</table>

Do you have any serious problems or worries?

No

During the past month, did you often feel sad or down as though you had nothing to look forward to?

No

When you get angry, is it hard for you to control yourself?

No
Follow Up Visit Clinic Flow

Clinician reviews, updates, and sets new goals as needed with client.

Update Goals

<table>
<thead>
<tr>
<th>Goal</th>
<th>Set Date</th>
<th>Target Date</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Talk with NP leading wt loss program about changing program for self to include whole foods instead of all meal replacement bars/shakes exclusively</td>
<td>08-01-2018</td>
<td>07-31-2019</td>
<td>Assigned</td>
</tr>
<tr>
<td>use birth control with every sexual encounter</td>
<td>07-31-2018</td>
<td>08-30-2019</td>
<td>Haven't started yet</td>
</tr>
</tbody>
</table>

Assigned Goals

- Talk with NP leading wt loss program about changing program for self to include whole foods instead of all meal replacement bars/shakes exclusively (Due: 07-31-2019)

- Use birth control with every sexual encounter (Due: 08-30-2019)
Follow Up Visit Clinic Flow

Clinician reviews, updates, and sets new goals as needed with client

### Update Goals

<table>
<thead>
<tr>
<th>Goal</th>
<th>Set Date</th>
<th>Target Date</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Will think about quitting smoking, not interested in quitting now</td>
<td>04-30-2018</td>
<td>04-30-2019</td>
<td>Haven’t started yet</td>
</tr>
<tr>
<td>Will choose healthy foods if appetite increase with depo</td>
<td>04-30-2018</td>
<td>04-30-2019</td>
<td>Starting to work on this</td>
</tr>
<tr>
<td>Working on getting drivers license and GED now through LMC now</td>
<td>04-30-2018</td>
<td>04-30-2019</td>
<td>Starting to work on this</td>
</tr>
<tr>
<td>Will use condoms</td>
<td>04-30-2018</td>
<td>04-30-2019</td>
<td>Starting to work on this</td>
</tr>
</tbody>
</table>
Follow Up Visit Clinic Flow

Clinician documents Notes and Follow Up Status

Possibilities for Change

Fill out the following fields to modify this Followup

<table>
<thead>
<tr>
<th>Reason</th>
<th>Assmt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Meeting</td>
<td>Time of Meeting</td>
</tr>
<tr>
<td>07-23-2018</td>
<td>02:15 PM</td>
</tr>
</tbody>
</table>

Followup Notes

Still not interested in quitting smoking, states she will consider it and discuss at next depo. Using condoms more often than before first visit, praised for this. Has had 2lb wt gain since starting depo, she is happy with this as she has had rapid wt gain with past depo use. Praised for healthy food choices, in process for obtaining drivers license and GED.

Followup Status

Completed
ACT SH Health History

Clinician reviews SH history before seeing the client

ACT Sexual Health Assessment Review

Summary
- Identifies as heterosexual.
Most likely to have sex
- your home.
- partner’s home.
Most likely place to meet sexual partners
- introduced by a friend, family member or someone else.
Stage of Change
Stage Of Change for practicing safer sex is maintenance. Feels it would be easy to consistently use condoms.
History of STI Testing
- No history of chlamydia or gonorrhea
- Has not had chlamydia or gonorrhea testing in last 6 months
- Has never been tested for HIV
STI and HIV screening may be indicated based on reported behaviors

CDC identified high risk sexual behaviors
- Sex in the last 3 months
Other Risk Factors
- Has used a condom 75% of sexual encounters in the last 12 months
- Used no form of hormonal birth control at last sexual encounter
- Feels has an adult to talk with about sexual experiences
Additional Behaviors or Experiences that may impact sexual decision making

STI Testing Completed

Notes:
- HIV testing completed
  Five goals
ACT-SH Action Card and Discussion

Clinician prints action card and discussion
Reviews with and gives to client

ACT Sexual Health Assessment Review

Report For: Nicor Site
Location: Nicor Site
Reason for Assessment: Self-assigned based on RHAPS answer

| ACT SH Sexual Health History | ACT SH Active Card | ACT SH Discussion |

ACT Action Card for:

This is your personalized action plan from ACT. Write here when you need us, just refer to this card any time you need a willpower boost or a refresher.

Your Goal: You said you were going to use condoms with every sexual encounter.

Your Motivational Boost: Drained of willpower? Remember the reasons you are committing to safer sex:
1. You do not want to get pregnant or get your partner pregnant.
2. You do not want to get a STI.
3. You care about your health.
4. You want to keep your partner safe.
5. Your friend or boyfriend/girlfriend wants to.
6. You want to be a good role model to others.

Keeping On Track: You didn’t think anything would help. Getting condoms and keeping them with you is a good place to start.

Overcoming Challenges: You said there is nothing that would get in your way.
## ACT-SH Text Message

### Text Messaging Enrollment

<table>
<thead>
<tr>
<th>Reminder Program</th>
<th>Start Date</th>
<th>Time</th>
<th>Status</th>
<th>Phone No</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACT SH Cant Maint Program</td>
<td>Monday 07-02-2018</td>
<td>7:00 PM</td>
<td>on</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Text Reminders Log

<table>
<thead>
<tr>
<th>Sent Date</th>
<th>Reminder</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday 07-23-2018</td>
<td>- want to be a good role model.</td>
</tr>
<tr>
<td>Monday 07-23-2018</td>
<td>- said</td>
</tr>
<tr>
<td>Monday 07-23-2018</td>
<td>- want to keep you and your partner safe.</td>
</tr>
<tr>
<td>Monday 07-23-2018</td>
<td>- feel it's important to your partner.</td>
</tr>
<tr>
<td>Monday 07-23-2018</td>
<td>- don't want to get pregnant or got your partner pregnant.</td>
</tr>
<tr>
<td>Monday 07-25-2018</td>
<td>- don't want to get STI</td>
</tr>
<tr>
<td>Monday 07-33-2018</td>
<td>- care about your health</td>
</tr>
<tr>
<td>Monday 07-25-2018</td>
<td>- have you thought anymore about what might motivate you to practice safer sex? Most teens and adults say avoiding getting an STI is what motivates them.</td>
</tr>
<tr>
<td>Monday 07-25-2018</td>
<td>- Align your choices with what you care about! Remember, you want to practice safer sex because you or your partner wants to.</td>
</tr>
<tr>
<td>Monday 07-16-2018</td>
<td>- ACT is here to support you! Go to publinc.com and sign in to review the information from your last visit.</td>
</tr>
<tr>
<td>Monday 07-09-2018</td>
<td>- It's been a week since ACT and you said you were going to use K100. What are your thoughts now? (Reply 1) I don't think I can do it, (Reply 2) I'm thinking about it, (Reply 3) I'm going to start, (Reply 4) I am doing it.</td>
</tr>
<tr>
<td>Thursday 07-09-2018</td>
<td>- Have you thought more about what might help you practice safer sex? Getting condoms and keeping them with you is a good place to start.</td>
</tr>
<tr>
<td>Monday 07-02-2018</td>
<td>- Thanks for signing up! We'll be following up with you over the next few weeks. To stop, text STOP. Receive weekly tips on sex and health by texting K100 to 87777.</td>
</tr>
<tr>
<td>Rank</td>
<td>Question</td>
</tr>
<tr>
<td>------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>1</td>
<td>When you do any of these activities: ride a bike, rollerblade, skateboard, ride a motorcycle or snowmobile, ski or snowboard, do you always wear a helmet?</td>
</tr>
<tr>
<td>2</td>
<td>Have you ever had any type of sex (vaginal, anal or oral sex)?</td>
</tr>
<tr>
<td>3</td>
<td>If you have had sex, do you always use a condom and/or another method of birth control to prevent sexually transmitted infections and pregnancy?</td>
</tr>
<tr>
<td>4</td>
<td>Are you active after school or on weekends (walking, running, dancing, swimming, biking, playing sports) for at least 1 hour, on at least 3 or more days each week?</td>
</tr>
<tr>
<td>5</td>
<td>When you are angry, do you do things that get you in trouble?</td>
</tr>
<tr>
<td>6</td>
<td>In the last 3 months, have you drunk more than a few sips of alcohol (beer, wine, coolers, liquor, other)?</td>
</tr>
<tr>
<td>7</td>
<td>In the last 3 months, have you smoked any form of tobacco (cigarettes, cigars, black and mild, hookah, vape pens) or used smokeless tobacco (chew, snus)?</td>
</tr>
<tr>
<td>8</td>
<td>During the last month, did you often feel sad or down as though you had nothing to look forward to?</td>
</tr>
<tr>
<td>9</td>
<td>Do you eat some fruits and vegetables every day?</td>
</tr>
<tr>
<td>10</td>
<td>Have you ever carried a weapon (gun, knife, club, other) to protect yourself?</td>
</tr>
</tbody>
</table>
## Initial Costs of Implementing RAAPS

<table>
<thead>
<tr>
<th></th>
<th>1 Site</th>
<th>3 Sites</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual RAAPS Software License</td>
<td>$300.00 per site</td>
<td>$900.00</td>
</tr>
<tr>
<td>ACT Annual RAAPS Software</td>
<td>$500.00 per site</td>
<td>$1,500.00</td>
</tr>
<tr>
<td>Implementation</td>
<td>$500.00</td>
<td>$500.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$1,300.00</td>
<td>$2,900.00</td>
</tr>
</tbody>
</table>
Initial Costs of Implementing RAAPS

<table>
<thead>
<tr>
<th></th>
<th>1 Tablet</th>
<th>5 Tablets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apple Tablet</td>
<td>$394.00</td>
<td>$1,970.00</td>
</tr>
<tr>
<td>Apple Tablet Covers</td>
<td>$36.00</td>
<td>$180.00</td>
</tr>
<tr>
<td>Total</td>
<td>$430.00</td>
<td>$2,150.00</td>
</tr>
</tbody>
</table>
## Total RAAPS Implementation Costs

<table>
<thead>
<tr>
<th></th>
<th>1 Site</th>
<th>3 Sites</th>
</tr>
</thead>
<tbody>
<tr>
<td>RAAPS &amp; ACT Annual</td>
<td>$1,300.00</td>
<td>$2,900.00</td>
</tr>
<tr>
<td>Software Licenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Apple Tablets and</td>
<td>$430.00</td>
<td>$2,150.00</td>
</tr>
<tr>
<td>Covers</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$1,730.00</td>
<td>$5,050.00</td>
</tr>
</tbody>
</table>
## Annual RAAPS Costs

<table>
<thead>
<tr>
<th></th>
<th>1 Site</th>
<th>3 Sites</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual renewal of RAAPS</td>
<td>$300.00</td>
<td>$900.00</td>
</tr>
<tr>
<td>ACT Modules</td>
<td>$1,000.00</td>
<td>$1,000.00</td>
</tr>
<tr>
<td>Total</td>
<td>$1,300.00</td>
<td>$1,900.00</td>
</tr>
</tbody>
</table>

- Staff Training Time - 4-6 hours
- Implementation and continuation of RAAPS supported by MCH funds