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VAPING ECHO FOR EDUCATION: COHORT II EVALUATION OF THE PILOT INITIATIVE IN KANSAS

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VAPING ECHO FOR EDUCATION: COHORT II EVALUATION OF THE PILOT INITIATIVE IN KANSAS

MARCH 2024

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Executive Summary

E-cigarette use among students is a significant public health concern in the U.S. However, schools have limited resources to address this problem, especially in rural and frontier areas. This report presents the evaluation findings of the Vaping ECHO for Education Pilot Initiative in Kansas for the 2022-2023 school year.

Fifty-three participants registered across seven high schools and six Jr/Sr high schools. Of the 13 registered schools, one urban, three semi-urban, four densely-settled rural, three rural and two frontier school districts participated. Team members learned about vaping cessation topics, presented their cases and developed action plans during the 2022-2023 school year. The Vaping ECHO for Education curriculum included an orientation, a summit, core ECHO sessions and development of a School Action Plan.

This evaluation assesses Year 2 of the three-year pilot program with a focus on school teams and individual participants, individual-level outcomes, school-level process and outcomes, program management and improvement, and lessons learned for Cohort III.

- Vaping ECHO for Education school teams were required to have engagement of one administrative staff member for their school team. However, school teams engaged administration beyond this minimum with about one third of registered participants (32.1 percent) who served in an administrative role at their school. This demonstrates the high level of commitment school teams had for the program.
- School staff participation varied across core ECHO sessions, which were delivered from September to November, with the greatest participation in Vaping ECHO Session 1 (94.3 percent) and the lowest participation in Session 5 (52.8 percent). Staff shortages and competing priorities were often cited as possible hindrances.
- School team participation also dropped, particularly as the sessions moved from the core ECHO sessions into the school team action plan development and implementation stages. Schools mentioned capacity needs (i.e., staff shortages, competing priorities) during that timeframe, which was from November-April.
- More than half (59.5 percent) of participants had an increase in the overall confidence to address vaping with students. Among the actions related to student intervention, the biggest increases were for non-punitive actions such as student referral to a toll-free

tobacco or vaping Quitline (40.5 percent) and referral of students to tobacco or vaping counseling (37.8 percent).

- Nearly all (94.6 percent) respondents perceived one or more barriers prior to the training. This percentage decreased to 70.3 percent after the training.
- Ten of the 13 schools submitted an action plan for review. Key themes for goals in action plans focused on: vaping cessation for students (5 of 10 action plans), policy change (4 of 10 action plans), education or awareness initiatives (3 of 10 action plans), and establishment of the student Resist chapter (1 of 10 action plans).
- About one-third (38.5 percent) of school teams implemented a new vaping policy, and more than two-thirds of school teams (69.3 percent) reported starting development or completing development of community partnerships to address vaping.
- The majority of respondents indicated they would recommend the Vaping ECHO for Education program to others (81.1 percent). Reasons for recommending the program to others included the usefulness of resources and information provided, value of discussions and shared perspectives, program design and student-centered approach.
- Based on feedback from participants and lessons learned, a number of changes were made for ECHO Cohort III, including increased scale variation on survey questions, Follow-up surveys in December and April to determine short-term and intermediate-term outcomes, and incentives for participation such as survey stipends and mini-grants for implementation.

Background

Electronic cigarettes, or e-cigarettes, entered the U.S. market in 2007, and their use quickly became widespread. In 2021, more than 1 in 10 (14.4 percent) Kansas high school students reported using e-cigarettes in the past 30 days.¹ In an effort to curb vaping in schools, a subgroup of the Kansas Vaping Task Force recommended the implementation of a Project Extension for Community Healthcare Outcomes (ECHO).² The Vaping ECHO for Education Pilot Initiative in Kansas was developed by the ECHO Hub team, a Kansas collaborative which included academic, nonprofit, state agency, school personnel and other organizations, to address e-cigarette use in schools statewide, and utilized the Project ECHO® model.

The core ECHO sessions consist of five 90-minute learning sessions with specialized training using the ECHO model and supporting sessions for orientation, school action plan presentations and sharing progress. The learning objectives of the pilot include:

- Develop a network of stakeholders to help design, tailor, implement and evaluate strategies and interventions to reduce vaping in schools.
- Build capacity to increase the confidence of schools and school personnel to address vaping cessation.
- Develop skills of school health professionals to provide support and referrals for vaping cessation.
- Evaluate the quality, effectiveness and impact of the program on schools.

The Cohort II progress report continues the work of [Cohort I evaluation report, Evaluation of the Vaping ECHO for Education Pilot Initiative in Kansas](#), with an increased focus on the School Action Plan, a unique feature of the Kansas pilot. This evaluation report assesses Cohort II, the second year of the three-year pilot, in the following areas: program management and participant satisfaction, development and implementation of action plans and participant and school-level outcomes.

¹ Centers for Disease Control and Prevention. (2021). *Youth Risk Behavior Survey*. Retrieved from: [Youth Online: High School YRBS - Kansas 2021 Results | DASH | CDC](#).

² The University of New Mexico. (2010). *Project ECHO®*. Retrieved from: [Project ECHO - Moving Knowledge, Not People \(unm.edu\)](#).

Methods

Like Cohort I of the pilot program, the Cohort II evaluation examined process and outcome measures for participants at the individual and school levels. Data were collected through surveys completed by participants and school team leads, program documentation and action plan submissions. Additionally, KHI replicated the analysis approach used in Cohort I with the statistical software SAS v9.4 to conduct descriptive analysis of survey data, as well as the Wilcoxon signed-rank test for pairwise comparisons of some outcome measures collected during the baseline assessment and follow-up surveys. KHI analyzed the open-ended survey questions and action plans using thematic analysis in the qualitative data software, NVivo. For more information about the analysis approach, see [Evaluation of Vaping ECHO for Education Pilot Initiative in Kansas](#). Building on lessons learned from Cohort I of the pilot, improvements were made to the Vaping ECHO for Education program and the evaluation for Cohort II.

Programmatic Improvements

The following improvements were made to the program:

- **Breakout Room Composition:** Instead of maintaining consistent breakout room assignments by region for school teams across sessions as done in Cohort I, the Cohort II breakout room assignments were changed each session. This was based on feedback from participants in Cohort I, suggesting that diversifying breakout room composition would assist with building a community of practice among attendees.³
- **Change in ECHO Session Offerings:** One core ECHO learning session from Cohort I was removed, ECHO Session 1 - “Tobacco Prevention in a School Setting,” since participants in Cohort I indicated this content overlapped with the summit pre-session.³ In addition, the session “Developing Community Partnerships” was added after Cohort I participants identified capacity and lack of community support as barriers to effective policy and practice change in their schools.³ See *Appendix A* for the session timeline and titles used in Cohort II.

³ Kansas Health Institute (2023). *Evaluation of the Vaping ECHO for Education Pilot Initiative in Kansas*. Retrieved from: khi.org/articles/evaluation-of-the-vaping-echo-for-education-pilot-initiative-in-kansas/

Evaluation Improvements

The following improvements were made to the evaluation:

- **Survey Software:** For Cohort I, all surveys were administered by REDCap. In Cohort II, the registration and baseline assessment survey were completed in REDCap, while all other surveys were programmed and administered through Qualtrics XM to registered participants. This modification took place when the ECHO Hub team moved from the Masonic Cancer Alliance (MCA) to the KHI due to staff changes.
- **Measuring Learning Objectives:** Following each session, a program improvement question was added to all post-session surveys to assess the extent to which participants felt the session addressed each of its respective learning objectives . See *Appendix A* for session learning objectives. These questions asked participants to rate the extent to which a learning objective was met on a five-point Likert scale (Not at all, Slightly, Moderately, Very much and Completely). This change improved the ability to measure participant understanding of the content and alignment with curriculum.
- **Action Plan Implementation Survey:** Following the four-month break between mid-December to mid-April for implementation of school action plans, school team leads were asked to complete a survey measuring implementation of their action plan's objectives and share their school team's successes, challenges and plans for the future. This new survey improved the ability to measure progress toward the Vaping ECHO for Education Pilot Initiative's long-term outcomes.

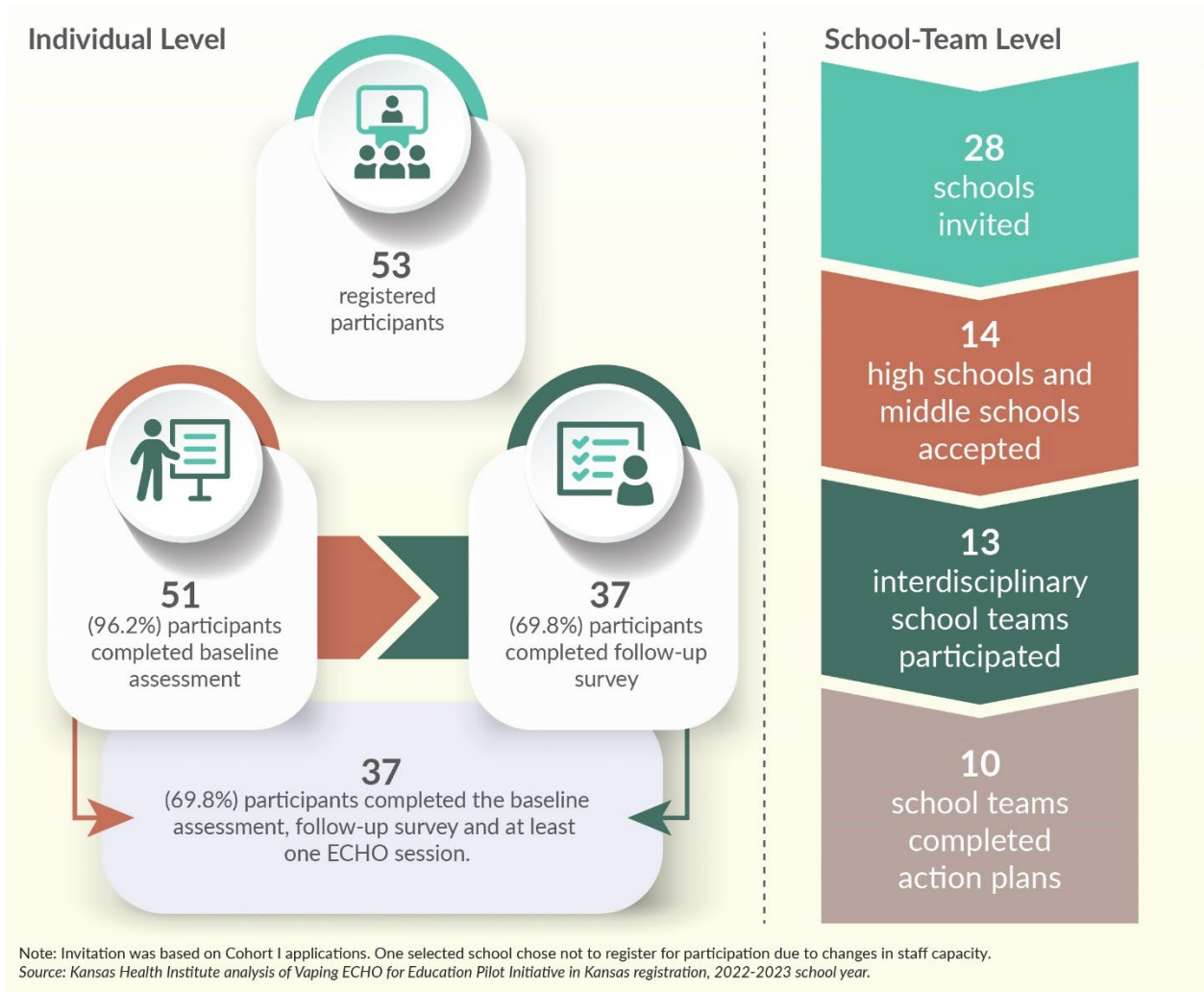
Results

An overview of key evaluation results for Cohort II of the Vaping ECHO for Education Pilot Initiative are provided below and include characteristics of participating school teams and individual participants, school-team level outcomes, individual-level outcomes and program management and improvement. *School Teams and Registered Participants* provides details on the selection process of school teams, demographics of selected school teams and their registered individuals and denominators used for the outcome evaluation. *Individual Level Outcomes* discusses how well the pilot resulted in participant's self-assessed changes in knowledge, ability and confidence, as well as a reduction in perceived barriers in Cohort II. *School-Team Level Outcomes* describes the school team reported successes in the pilot program and in implementing their action plans. Then, *Program Management and Improvement* describes process measures of how well the pilot was managed and implemented in Cohort II.

School Teams and Registered Participants

In 2021, 49 schools applied to participate in Cohort I of the Vaping ECHO for Education Pilot during the 2021-2022 school year. Only 21 schools (20 school teams) were selected for Cohort I. For Cohort II, the remaining 28 schools not selected in Cohort I were contacted by the team with the opportunity to participate in Cohort II during the 2022-2023 school year. Fourteen schools accepted the opportunity; however, one of these schools decided not to participate due to changes in staff capacity. Thirteen schools and 53 participants registered for the program. *Figure 1* (page 5) provides an overview of Cohort II participant selection and participation in the Vaping ECHO for Education Pilot Initiative.

Figure 1: Vaping ECHO for Education in Kansas Cohort II Participant Overview, 2022



Geographic Location of School Teams

Figure 2 (page 6) and Figure 3 (page 7) demonstrate that participating school districts were located across Kansas and represented both urban and rural communities. To further expand on the pilot program, different schools were selected for Cohort II than for Cohort I. Of the 13 registered Cohort II school teams, one urban, three semi-urban, four densely-settled rural, three rural and two frontier school districts participated.⁴ Fifty-three participants registered across seven high schools (grades 9-12) and six junior/senior high schools (grades 7-12).

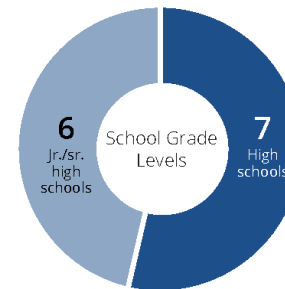
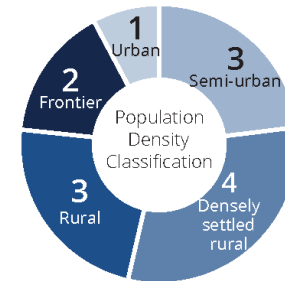
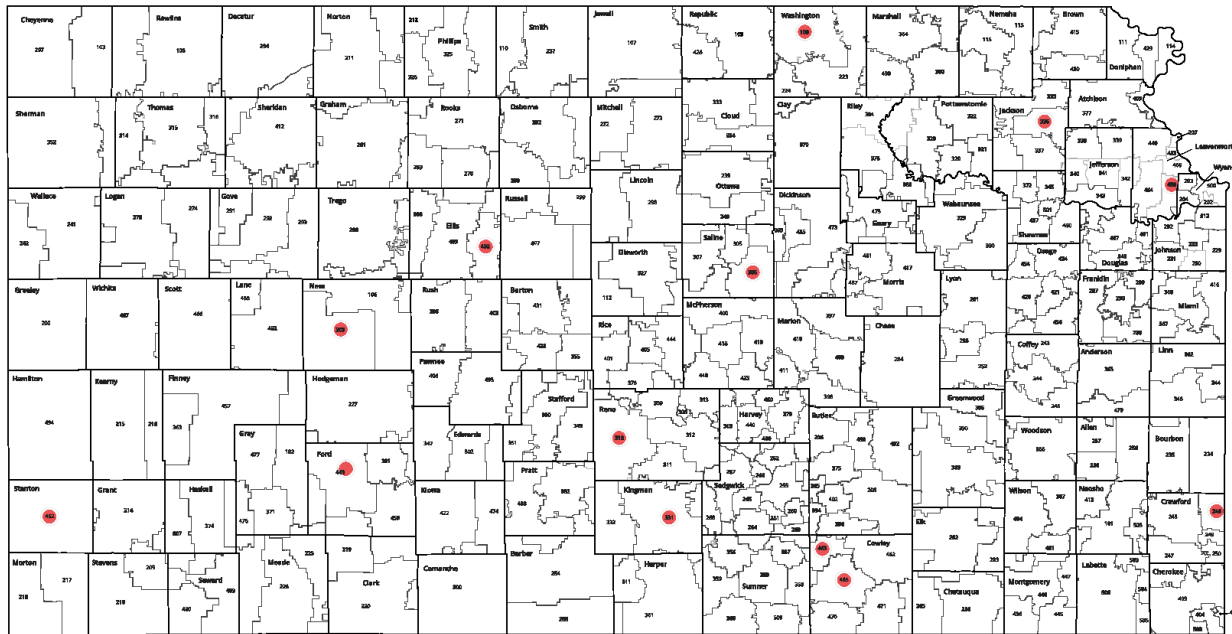
⁴ Kansas Department of Health and Environment (2020). *Annual Summary of Vital Statistics*. Retrieved from <https://www.kdhe.ks.gov/DocumentCenter/View/15354/2020-Annual-Summary-Full-Report-PDF>

Figure 2: Vaping ECHO for Education School Map, Cohort II

Vaping ECHO for Education



● Cohort 2 (2022-2023): 13



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January 25, 2024

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas registration, 2022-2023

Figure 3. Vaping ECHO for Education Pilot Initiative in Kansas Selected Schools by District and Participants Registered, 2022-2023 School Year

USD#	District	School	Number of registered participants
108	Washington County	Washington County High	4
246	Northeast	Arma High School	6
306	Southeast of Saline	Southeast of Saline Jr/Sr High	4
310	Fairfield	Fairfield Middle/High	3
331	Kingman-Norwich	Kingman Middle/High	4
432	Victoria	Victoria Jr/Sr High	2
443	Dodge City	Dodge City High	6
463	Udall	Udall Middle/High	4
465	Winfield	Winfield High	2
452	Stanton County	Stanton County High	5
336	Holton	Holton High	5
303	Ness County	Ness City Jr/Sr High	4
500	Kansas City	FL Schlagle High	4

Note: Number of registered participants = 53. Number of school teams = 13.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas registration, 2022-2023 school year.

Participant Demographics

Most participants were White (92.5 percent) and Non-Hispanic, Latino or Spanish origin (94.3 percent). Two-thirds (66.0 percent) were female. More than half (54.7 percent) of participants were between the ages of 25-44 (*Figure 4*).

Figure 4. Vaping ECHO for Education Pilot Initiative in Kansas Participant Demographics, 2022

Characteristic	Number of registered participants	Percentage
Age		
18-24	1	1.9%
25-44	29	54.7%
45 and older	23	43.4%
Missing responses	0	0
Gender		
Female	35	66.0%
Male	18	34.0%
Nonbinary	0	0
Prefer not to say	0	0
Other	0	0
Missing responses	0	0

Figure 4 (continued). Vaping ECHO for Education Pilot Initiative in Kansas Participant Demographics, 2022

Characteristic	Number of registered participants	Percentage
Race (select all that apply)		
White	49	92.5%
American Indian/Alaska Native/Hawaiian/Pacific Islander	4	7.5%
Black/ African American	2	3.8%
Asian	0	0
Other	0	0
Missing responses	1	1.9%
Ethnicity		
Non-Hispanic, Latino/a or Spanish Origin	50	94.3%
Hispanic, Latino/a or Spanish Origin	3	5.7%
Missing responses	0	0

Note: Number of registered participants = 53.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas registration, 2022-2023 school year.

Each school team was required to involve at least one administrative staff member. About one third of registered participants (32.1 percent) served in an administrative role at their school, beyond the minimum required (*Figure 5*). The remaining two-thirds (67.9 percent) did not have an administrative role at their school. The most common professional role reported by participants was teacher (26.4 percent), nurse (20.8 percent), and principal (18.9 percent). Some participants (15.1 percent) also reported acting in multiple professional roles, for example, as a teacher and coach.

Figure 5. Vaping ECHO for Education Pilot Initiative in Kansas Participant Roles, 2022

Role	Number of registered participants	Percentage
Administrative role at school		
No	36	67.9%
Yes	17	32.1%
Missing Response	0	0
Professional role (select all that apply)		
Teacher	14	26.4%
Nurse	11	20.8%
Principal	10	18.9%
Coach	4	7.5%

Figure 5 (continued). Vaping ECHO for Education Pilot Initiative in Kansas Participant Roles, 2022

Role	Number of registered participants	Percentage
School Counselor	4	7.5%
Athletic Director	1	1.9%
Assistant Principal	3	5.7%
Superintendent	3	5.7%
Law Enforcement Officer/ School Resource Officer	1	1.9%
School Board Member	1	1.9%
Social Worker	1	1.9%
Other	8	15.1%
Missing Responses	0	0

Note: Number of registered participants = 53. Respondents could select multiple professional roles. Participants who selected “Other” included but were not limited to working for a local health department, acting as a grant or program coordinator and coordinating social services.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas registration, 2022-2023 school year.

Participation in Vaping ECHO for Education Pilot Initiative

For Vaping ECHO for Education, school teams were instructed that at least one member must attend all sessions. School teams regularly sent multiple members to sessions. Participation was high throughout the core ECHO sessions with all 13 school teams represented at ECHO sessions 1-4 and 12 of 13 school teams represented at ECHO Session 5 (*Figure 6*, page 10). ECHO Session 1, “Introduction to Addiction and Cessation,” had the greatest participation (94.3 percent) with 50 school team members across 13 school teams. The remaining core ECHO sessions and School Action Plan session consistently had more than half of registered participants in attendance. The final two sessions, “Sharing School Action Plans” held after a one-month break to develop action plans and “Sharing School’s Progress” held after a four-month break to implement those action plans, had decreased participation. School team leads and participants across all school teams reported staff shortages and competing priorities as the primary reasons for not attending an ECHO session. “Sharing School Progress” had the lowest participation of all core and implementation sessions with just 46.3 percent of registered participants across eight school teams. However, schools tended to send smaller teams to present during sharing of school progress session.

Figure 6. Percentage of Registrants Participating, Cohort II

Session Attendance			Survey Participation		
Session	Number of school teams	Number (percent) of registered participants	Survey tool	Number of school teams	Number (percent) of registered participants in attendance
Orientation	12	23 (43.4%)	Post-Orientation Survey	11	14 (60.9%)
Summit	12	26 (49.1%)	Post-Summit Survey	6	8 (30.8%)
ECHO Session 1	13	50 (94.3%)	Post-ECHO Session 1 Survey	12	23 (46.0%)
ECHO Session 2	13	34 (64.2%)	Post-ECHO Session 2 Survey	13	22 (64.7%)
ECHO Session 3	13	30 (56.6%)	Post-ECHO Session 3 Survey	9	13 (43.3%)
ECHO Session 4	13	29 (54.7%)	Post-ECHO Session 4 Survey	12	22 (75.9%)
ECHO Session 5	12	28 (52.8%)	Post-ECHO Session 5 Survey	11	18 (64.3%)
One-Month Break for Development of School Action Plans					
Sharing School Action Plans	11	29 (54.7%)	Post-ECHO Session 6 Survey	8	12 (41.4%)
Four-Month Break for Implementation of School Action Plans					
Sharing School Progress	8	23 (43.4%)	Post-ECHO Session 7 Survey	6	8 (34.8%)

Note: Total number of schools = 13. Total number of registered participants = 53. The percentage of registered participants in attendance is calculated as the number attending the session divided by the total number of registered participants. Survey participation is calculated as the number of registered participants who attended the session and completed the survey divided by the total number of registered participants who attended the session. For example, 50 participants or 94.3 percent of all registered participants attended ECHO Session 1. Following the session, 23 registered participants who attended the session, or 46.0 percent, completed the Post-ECHO Session 1 Survey. For the Sharing School Progress session, schools outside of the Cohort II schools were invited to attend as well to hear presentations. However, the attendance and survey participation refer only to Cohort II schools.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas registration, 2022-2023 school year and attendance.

Individual-Level Outcomes

Changes in Ability, Commitment, Confidence and Perceived Barriers

Participants self-reported their level of confidence, skills and ability at baseline and at follow-up in many areas, such as confidence to address vaping with students (*Figure 7, page 12*). The overall confidence to address vaping with students increased for more than half (59.5 percent) of the respondents. Almost half reported an increase in their level of overall ability to address vaping with students (48.7 percent) and confidence in the ability to make impactful policy or practice changes (48.7 percent). However, nearly as many respondents saw no change (43.2 percent) in their ability to address vaping with students. *Figure 9* (page 14) also illustrates that self-reported utilization of many types of interventions with students did not change, such as disciplining a student for vaping (78.4 percent) and arranging an appointment for cessation counseling (70.3 percent). Almost a third (32.4 percent) saw a decrease in the level of confidence in the ability to make impactful policy or practice changes. Participant-reported barriers to effective practice of policy change around vaping (*Figure 8, page 13*) suggest that lack of ability to build culture (32.4 percent of participants after the program) and competing priorities (29.7 percent of participants after the program) may have diminished confidence in this area. About half of the respondents (54.1 percent) reported no change in their level of commitment to address student vaping. This was also the action with the lowest percentage of increase (21.6 percent). However, at baseline, the participants already had a high level of commitment, which may have allowed only minimal room for improvement.

Figure 7. Changes in Self-Assessed Level between Baseline Assessment and Follow-up Survey

Action	Increased (%)	No change (%)	Decreased (%)	Missing responses (%)
Changes in the level of overall ability to address vaping with students	48.7%	43.2%	5.4%	2.7%
Changes in the level of overall commitment to take action to address vaping with students	21.6%	54.1%	21.6%	2.7%
Changes in the overall confidence to address vaping with students	59.5%	27.0%	10.8%	2.7%
Changes in the level of confidence in ability to make impactful policy or practice changes	48.7%	16.2%	32.4%	2.7%

Note: Total number of survey respondents completing Baseline Assessment and Follow-Up Survey = 37. Percentages may not sum to 100 percent because of rounding. One person did not respond to this question in the Follow-Up Survey.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas Baseline Assessment and Follow-Up Survey, 2022-2023 school year.

Nearly all (94.6 percent) respondents perceived one or more barriers prior to the training. The percentage decreased to 70.3 percent after the training. Lack of knowledge was the barrier listed most often at baseline with 59.5 percent of respondents, while only 13.5 percent of respondents listed lack of knowledge as a barrier at follow-up (*Figure 8*, page 13). Competing priorities (48.6 percent) and lack of ability to build culture (40.5 percent) were also indicated as barriers at the baseline, but still a barrier for many at follow-up (29.7 percent and 32.4 percent, respectively).

Figure 8. Barriers to Effective Practice or Policy Change Around Vaping

Barrier types	Baseline responses (%)	Follow-up Survey responses (%)	Relative change (%)
Lack of knowledge.	59.5%	13.5%	-77.3%
Competing priorities (i.e. COVID-19).	48.6%	29.7%	-38.9%
Lack of ability to build culture.	40.5%	32.4%	-20.0%
Lack of modifying curriculum.	N/A	21.6%	N/A
Lack of leadership buy-in.	18.9%	8.1%	-57.1%
Lack of political will.	13.5%	8.1%	-40.0%
Lack of ability to modify curriculum.	13.5%	N/A	N/A
Unable to get approval to modify curriculum.	8.1%	8.1%	0
Other	5.4%	16.2%	200.0%
No barriers	5.4%	29.7%	450.0%
Missing responses	0	2.7%	N/A

Note: Total number of survey respondents completing baseline assessment and follow-up Survey = 37. Relative change is calculated by subtracting the baseline percentage from the follow-up survey percentage and then dividing the difference by the baseline percentage. Because survey respondents could select more than one type of barrier as a response, percentages may not sum to 100 percent. Barrier “Lack of ability to modify curriculum” was not included in the follow-up survey. Barrier “Lack of modifying curriculum” was not included in the Baseline Assessment.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas Baseline Assessment and Follow-Up Survey, 2022-2023 school year.

Changes in Behavior

Participants were asked how the Vaping ECHO for Education Pilot Initiative changed the type and frequency of their actions with students from the baseline assessment in August 2022 to follow-up survey in April 2023. Among the actions related to student intervention, the biggest increases were in referring a student to a toll-free tobacco or vaping Quitline (40.5 percent) and in referring a student to tobacco or vaping counseling (37.8 percent) (*Figure 9, page 14*).

Figure 9. Changes in the Frequency of Actions Related to Interventions with Students Between Baseline Assessment and Follow-Up Survey

Action	Changes in the frequency of actions			
	Increased (%)	No change (%)	Decreased (%)	Missing responses (%)
Ask a student about vaping.	29.7%	45.9%	21.6%	2.7%
Advise a student to quit vaping.	18.9%	56.8%	21.6%	2.7%
Refer a student to a toll-free tobacco or vaping cessation quit line such as My Life, My Quit.	40.5%	51.4%	5.4%	2.7%
Refer a student for tobacco or vaping cessation counseling.	37.8%	56.8%	2.7%	2.7%
Arrange an appointment for tobacco or vaping cessation counseling.	21.6%	70.3%	5.4%	2.7%
Discipline a student for vaping such as detention or suspension.	8.1%	78.4%	10.8%	2.7%
Use motivational interviewing techniques when talking with students about vaping.	32.4%	35.1%	29.7%	2.7%

Note: Total number of survey respondents completing baseline assessment and follow-up survey = 37. Percentages may not sum to 100 percent because of rounding. One person did not respond to this question in the follow-up survey.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas baseline assessment and follow-up survey, 2022-2023 school year.

School Team-Level Outcomes

Action Plan Development

Ten of the 13 schools submitted an action plan. The three schools did not provide action plans due to staff shortages, competing priorities or technology issues. Action plans asked school teams to identify SMART goals (Specific, Measurable, Achievable, Relevant and Time-Bound). The average number of goals was 1.5 per action plan and the average number of objectives was 2.7, with the typical action plan including two goals and two objectives (*Figure B.6*, page B-5).

Key themes for goals in action plans (*Figure B.7*, page B-6) focused on four main areas: vaping cessation for students (5 of 10 action plans), policy change (4 of 10 action plans), education or

awareness initiatives (3 of 10 action plans), and establishment of student Resist chapter (one of 10 action plans). Five school team action plans included a goal to decrease use of vaping and nicotine among students through interventions and cessation programs rather than punitive measures. Four school team action plans included a goal to change their school policy. Policy changes were described as “student-centered” or “support-centered.”

Key themes for objectives in school active plans are outlined in *Figure 10*. The most common theme for objectives was education initiatives. Seven out of 10 of the action plans included objectives to increase education or awareness across stakeholders through numerous activities. Six out of the 10 action plans included efforts to reduce vaping through cessation programs, student interventions or other means.

Figure 10. Key Themes for Objectives in School Team Action Plans

Qualitative Theme	Count	Description and Representative Quotations
Education initiatives	14 (7 of 10 school action plans)	14 school team objectives described education or awareness building activities across stakeholders including students, teachers, staff, parents and community members.
Cessation strategies	8 (6 of 10 school action plans)	Eight school team objectives described efforts to reduce vaping use through a cessation program, individual student interventions or other means.
Policy change	5 (5 of 10 school action plans)	Five objectives described efforts to change their school policy, particularly related to reducing punitive approaches in disciplinary policy. One school described the objective as adjusting their policy “to be in-line with the Kansas Board of Education’s disciplinary policy.”
Staff capacity	5 (4 of 10 school action plans)	Five objectives described efforts to increase staff capacity through training around best practices such as learning or implementing motivational interviewing techniques, compilation of information and resources related to cessation.
Student engagement	4 (3 of 10 schools action plans)	Four objectives described student engagement either through building a Resist chapter or other means of achieving student buy-in and involvement.
Community support	1 (1 of 10 school action plans)	One objective described using community support.
Professional speakers	1 (1 of 10 school action plans)	One objective described having an assembly with a professional medical speaker.

Note: Number of action plans reviewed = 10. Only 10 of 13 school teams submitted action plans for review. Count = Total number of objectives across school action plans which provided similar qualitative responses for each theme. Some objectives in school action plans may be counted across multiple themes if more than one distinct theme emerged from the same response.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas School action plan document review, 2022-2023 school year.

School Team Action Plan Implementation

School teams reported progress during the final session of the Vaping ECHO for Education Pilot Initiative. School teams were asked what progress they made toward specific actions highlighted in the vaping ECHO (*Figure B.9*, page B-7). About a third of the school teams that responded (38.5 percent) implemented a new vaping policy. One-fourth of school teams (23.1 percent) indicated that while a new vaping policy had been implemented, this policy work was ongoing, and 15.4 percent indicated the new vaping policy had been implemented and no further policy work was needed. More than two-thirds of school teams (69.3 percent) reported working to develop community partnerships to address vaping, with 7.7 percent of school teams indicated this activity had been completed, 15.4 percent reported it was completed but additional work was still needed, and 46.2 percent had started but not yet completed it. School teams also reported on activities they plan to do in the 2023-2024 school year and beyond (*Figure B.13*, page B-11). Six school teams plan to implement activities related to information sharing or public awareness on vaping, including informational packets, family nights or events, education through a guest speaker, communication with students and spirit weeks. Five school teams mentioned starting, expanding or sustaining their resist chapters. Three school teams mentioned modifying the curriculum to bring vaping education for the first time or to new grade levels.

Program Management and Improvement

Perceived Value of the Vaping ECHO for Education Program

The majority of respondents indicated they would recommend the Vaping ECHO for Education program to others (81.1 percent). Reasons for recommending the program to others included the usefulness of resources and information provided, value of discussions and shared perspectives, program design and student-centered approach. None of the participants stated that they wouldn't recommend the program, while 16.2 percent indicated that they might recommend it, citing time commitment and factors related to their school context for not responding in the affirmative (*Figures B.16 and B.17*, page B-14).

Participants were also asked about their level of agreement with relevance, helpfulness, content appropriateness, and gaining new insight to respondent's work at school (*Figures B.26 - B.29*, pages B-21 - B-23). Across all sessions, respondents had a high level of agreement, either agree or strongly agree, within each of these categories (87.5 percent to 100.0 percent).

Adherence to Program Objectives

Objectives of the pilot program include to build confidence of and develop skills among school personnel to address vaping cessation. Participants perceived the ECHO sessions enhanced their areas of knowledge, competence and performance (*Figure 11*) with nearly all indicating an increase in principles learned (86.5 percent), ability to apply knowledge (75.7 percent), and skills, abilities and strategic implementation in practice (64.9 percent).

Figure 11. Self-Assessment of Areas of Practice Enhanced

General domain enhanced	Number of respondents	Percentage
Knowledge (principles learned)	32	86.5%
Competence (ability to apply knowledge)	28	75.7%
Performance (skills, abilities and strategic implementation in practice)	24	64.9%
Continuing education units (CEUs)	13	35.1%
Missing responses	1	2.7%

Note: Total number of follow-up survey respondents = 37. Because participants could select more than one type of domain as a response, percentages may not sum to 100 percent.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas follow-up survey, 2022-2023 school year.

The extent to which the learning objectives were addressed in each of the sessions was assessed after each session. Throughout the sessions, ECHO objectives were consistently achieved. For the specific learning objectives of each session and the proportion of responses see *Figures B.34 - B.42* (pages B-27 - B-33). Nearly all respondents indicated moderately, very much or completely for each of the learning objectives in each of the sessions.

Action Planning Process

Action plan development is a unique feature of the pilot. School teams were required to submit an individualized school team action plan as part of their participation. Action plan development was included in each learning session by setting aside 15 minutes at the end of every session for each school team to convene and discuss session content and develop an action plan. Additionally, two sessions following the core ECHO sessions were allocated to discussing plans and implementation progress. The school team action plan template supported the goal approach when developing plans. Most respondents (73.0 percent) indicated the school team

action plan template was somewhat or very useful for organizing the school team’s goals and objectives. The majority of respondents (70.3 percent) also found it useful for implementing policy change and practice.

Learning from action plans presented by other school teams was consistently rated somewhat agree and strongly agree across all categories including relevance, helpfulness and appropriateness of content (*Figure B.18*, page B-16). Four out of five participants (81.1 percent) strongly agreed or somewhat agreed they gained new ideas and insights from the action plans of other school teams and three out of four participants (75.7 percent) applied the information gained from the presented action plans to their work at school.

Curriculum Improvement

Participants were asked to provide feedback on how the sessions could be improved (*Figure 12*). The feedback was positive and the majority did not have specific suggestions for improvements. Overarching themes across all sessions included the challenges of participating during the day, wanting more participation from schools, and sharing resources in advance.

Figure 12. Key Themes for Improvements to ECHO Sessions — Includes pre-sessions (orientation and summit), core-sessions (ECHO sessions 1-5) and post-sessions (sessions 6 and 7)

Qualitative Theme	Count	Description and Representative Quotations
<i>Overarching Themes Across All Sessions</i>		
Positive feedback.	37	When asked how a session could be improved, participants often provided positive feedback about the session. <ul style="list-style-type: none"> - “I learned so much; not sure I could have handled more info. :)” - “It was a great session. Thank You!”
No improvements.	34	Many participants either indicated that no improvements were necessary or did not offer any suggestions for enhancing the sessions. <ul style="list-style-type: none"> - “I don’t feel there needs to be improvement for session.”

Figure 12 (continued). Key Themes for Improvements to ECHO Sessions — Includes pre-sessions (orientation and summit), core-sessions (ECHO sessions 1-5) and post-sessions (sessions 6 and 7)

Qualitative Theme	Count	Description and Representative Quotations
The session times were challenging for participants.	6	Some participants shared concern about the ECHO session being held during the school day due to conflicting responsibilities and interruptions. <ul style="list-style-type: none"> - <i>“A time that is not so busy in the school day. It’s so hard to attend the entire session without interruptions.</i> - <i>“Had to step away to handle a student situation. Sometimes it is difficult to provide full attention to the sessions since they are during the school day.”</i>
Provided a reason for inaction.	6	Some participants instead of providing feedback about the session, or in addition to providing feedback, provided explanations for the work moving slowly or not having capacity to complete the work. <ul style="list-style-type: none"> - <i>“Nothing on your end. Need more time to devote to this. Too many jobs on my plate. Not enough staff to do it at my building. We are all spread too thin..”</i>
Wanted more participant involvement.	5	Some participants said the ECHO sessions could be improved with more participation of schools and school participants. Sometimes, participants referred to their own school team and other times they referred to other participating school teams. <ul style="list-style-type: none"> - <i>“I wish the group would ask more questions of the presenters; I wish I had more participants on my team; I wish my nurse would be active in this area. I wish my PE teacher was able to attend and was on board. This is a WONDERFUL opportunity and resource tool for our school. Thank you!!”</i> - <i>“More participation from schools?”</i>
Wanted the resources shared during the session shared with all participants.	3	A few participants requested that some resources shared during the session be shared with the full group in advance (slides) or after the session in an email (links or resources shared in chat). <ul style="list-style-type: none"> - <i>“Share resources from each breakout.”</i> - <i>“Providing the slides ahead of time for people who like to take notes.”</i>
Requested more tips or applied examples from schools.	11	Some participants after the core ECHO sessions requested additional examples or tips for application of the concepts or skills discussed during the session. A common request was more examples around motivational interviewing, resource procurement, and connecting with community partners and stakeholders. <ul style="list-style-type: none"> - <i>“Actual tips on how to connect and involve community partners for success.”</i> <p><i>“Practice sessions based on how to talk with individuals or groups concerning vaping.”</i></p>

Figure 12 (continued). Key Themes for Improvements to ECHO Sessions — Includes pre-sessions (orientation and summit), core-sessions (ECHO sessions 1-5) and post-sessions (sessions 6 and 7)

Qualitative Theme	Count	Description and Representative Quotations
<i>Additional Key Themes from Only Core-sessions (ECHO sessions 1-5) Post-Session surveys</i>		
Requested changes to facilitation or ECHO structure.	5	Some participants requested changes to the ECHO structure or facilitation during the core sessions, including reducing the number of case studies covered in each session, providing additional guidance or discipline around schools using potentially identifiable information to describe students in their case studies, and additional technological support. - <i>“Too many case studies for one session”</i>
Requested changes to curriculum content.	5	Some participants requested additional time in the curriculum be spent to review the tool kit and also provided additional topics they were interested in that they felt should be included such as the mental health aspect, school policy comparisons and tracking a student’s cessation journey. - <i>“Compare school policies as they are and where they need to be revised.”</i>
Described taking action or applying material.	2	Two participants described plans or efforts to take action using the information that they learned in the Vaping ECHO for Education session. - <i>“Was good information, that we are already trying to use.”</i>
Described trying to think about how to use the information.	2	Two participants described their process of thinking about how they will use the information from the core Vaping ECHO for Education session. - <i>“I liked the format and I thought the content delivery was successful (great speaker). We will see how this will help inform the project we are trying to make happen.”</i>

Note: Count = Total number of respondents who provided similar qualitative responses for each theme. Some participant quotes may be counted across multiple themes if more than one distinct theme emerged from the same response. Although it did not rise to the level of key themes, the orientation post-session survey did result in a few additional recommendations including reducing the origination length or streamlining the content because “we have already bought into the idea of Project ECHO”, spending more time to cover what to expect including with case study selections and time commitment, and for the facilitators to go slower so people can take notes and ask questions as needed.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in post-session surveys, 2022-2023 school year.

Lessons Learned for Cohort III

Based on feedback from participants and lessons learned, a number of changes were made for ECHO Cohort III that began on August 11, 2023.

Key Changes for Cohort III Evaluation

There were a few limitations encountered for the evaluation of Cohort II. The following changes were made for the Cohort III evaluation of the pilot to address these limitations:

- **Increased Scale Variation:** In Cohort I and II of the pilot, questions on the baseline assessment and follow-up survey use either Likert scales or ask participants to use a scale from 0-10. It is possible that this scale was not sensitive enough for some of the participants that experienced no change. For Cohort III, participants were asked to rate their ability from zero (no ability) to 100 percent (mastery of the ability) using specific, individual statements tied to the learning objectives and program objectives of the ECHO program.
- **Two Outcome Evaluation Surveys:** In Cohort I and II, the follow-up survey was delivered in April of the cohort year, five months after the core ECHO sessions were completed. However, the evaluation assessed both the short-term and intermediate-term outcomes of the initiative. For Cohort III, a short-term outcome evaluation will be provided in December to assess the outcomes related to learning and understanding from the core ECHO sessions. Then, the intermediate-term outcome evaluation will be conducted in April to evaluate retention and application of these topics.
- **Incentives for Participation:** In Cohort II, evaluation participation dropped, particularly as the sessions moved into the school team action plan development and implementation stages. Some participants suggested this decline was related to capacity needs (i.e., staff shortages, competing priorities) during the school team action plan development period. For Cohort III, school teams will be offered survey stipends and a mini-grant for implementation of their school team action plan, contingent on participation in the programmatic and evaluation activities.

Changes to Course Materials and Session Format

Participants had an opportunity to provide feedback and suggestions for opportunities to improve the course materials and session format. The following changes were made for Cohort III to address feedback received by participants.

- **ECHO Session 5:** In Cohort II, a session on “Developing Community Partnerships” was added to the curriculum. The session was informative; however, there were several questions around the statewide grant programs. For Cohort III, a panel was assembled including two statewide grantors (KDHE and BCBS) and a past Cohort I participant/ECHO Hub team member to respond to feedback. In addition, a toolkit was developed to complement the session.
- **Toolkit:** Based on feedback from Cohorts I and II, an ECHO Hub team member highlighted information in the toolkit before the didactic portion of each core learning session. This was done to preview for participants the toolkit, didactic component and case studies that would be discussed later in the session. The toolkit was provided at least one week prior to the session, during the session and included in an email after the session. It also was available at any time on the webpage.

Appendix A: Timeline and Learning Objectives

Figure A.1: Vaping ECHO for Education Initiative Timeline for Cohort II

Session	Learning objectives	Date(s)	Survey tool(s) used
Registration	N/A	August 2022	Registration/Baseline Assessment (<i>Individual Level</i>)
Orientation	N/A – Purpose was an overview of the Vaping ECHO for Education program.	August 17 and 23, 2022	Post-Orientation Survey (<i>Individual Level</i>)
Summit	<p>Discuss importance of addressing e-cigarette use/vaping in schools.</p> <p>Discuss challenges and successes of implementing a vaping policy or practice change.</p> <p>Provide best practices for implementing policy or practice change.</p>	August 31, 2022	Post-Summit Survey (<i>Individual Level</i>)
ECHO Session 1: Introduction to Addiction and Cessation	<p>Understand the basic physiological and psychological principles of addiction and nicotine dependence.</p> <p>Identify and understand cessation best practices.</p> <p>Define, review, and apply cessation resources in the context of best practices.</p>	September 21, 2022	Post-ECHO Session 1 Survey (<i>Individual Level</i>)

Figure A.1 (continued). Vaping ECHO for Education Initiative Timeline for Cohort II

Session	Learning objectives	Date(s)	Survey tool(s) used
<p>ECHO Session 2: Putting Cessation into Practice</p>	<p>Understand the evidence base behind effective communication regarding behavior change.</p> <p>Identify barriers to and facilitators of behavior change.</p> <p>Understand principles of effective conversations to promote behavior change.</p>	<p>October 5, 2022</p>	<p>Post-ECHO Session 2 Survey (<i>Individual Level</i>)</p>
<p>ECHO Session 3: Policy Best Practices & Legal Challenges</p>	<p>Understand components of best practice recommendations for tobacco free school policies.</p> <p>Discuss the legal challenges of comprehensive policies, restorative approaches to discipline, and connecting youth to cessation resources and programs.</p>	<p>October 19, 2022</p>	<p>Post-ECHO Session 3 Survey (<i>Individual Level</i>)</p>
<p>ECHO Session 4: Student- Centered Approach</p>	<p>Identify the policies and protocols outlined by KSHSAA for students involved in extra-curricular activities.</p> <p>Recognize the impact of nicotine on social-emotional and mental health of students.</p> <p>Discuss the different experiences of marginalized students and the impact of these experiences on their nicotine use.</p>	<p>November 2, 2022</p>	<p>Post-ECHO Session 4 Survey (<i>Individual Level</i>)</p>

Figure A.1 (continued). Vaping ECHO for Education Initiative Timeline for Cohort II

Session	Learning objectives	Date(s)	Survey tool(s) used
ECHO Session 5: Developing Community Partnerships	<p>Understand the role of community partners.</p> <p>Identify types of community partners and consider non-traditional partnerships (e.g., faith based, realtors, chambers of commerce).</p> <p>Discuss who and how to connect with community partners.</p>	November 16, 2022	Post-ECHO Session 5 Survey (<i>Individual Level</i>)
One-Month Break for Development of School Team Action Plans			Mid-Year Progress Survey (<i>School Team Level</i>)
Sharing School Team Action Plans	<p>Discuss school action plans.</p> <p>Identify themes across school action plans.</p> <p>Describe successes in school vaping programs.</p>	December 14, 2022	Post-Sharing School Action Plans Survey (<i>Individual Level</i>)
Four-Month Break for Implementation of School Action Plans			<p>April Action Plan Follow-Up (<i>School-Team Level</i>)</p> <p>Follow-Up Survey (<i>Individual Level</i>)</p>
Sharing School Progress	<p>Discuss school policy and practice changes.</p> <p>Describe successes in school vaping programs.</p> <p>Identify barriers to implementation.</p>	April 26, 2023	Post-Sharing School Progress Survey (<i>Individual Level</i>)

Appendix B: Additional Results

School Teams and Registered Participants

Figure B.1. Vaping ECHO for Education Pilot Initiative in Kansas School Participation

USD#	District	School	County
108	Washington County	Washington County High	Washington
246	Northeast	Northeast Arma High School	Crawford
303	Ness County	Ness City Jr/Sr High	Ness
306	Southeast of Saline	Southeast of Saline Jr/Sr High	Saline
310	Fairfield	Fairfield Middle/High	Reno
331	Kingman-Norwich	Norwich Kingman Middle/High	Kingman
336	Holton	Holton High	Jackson
432	Victoria	Victoria Jr/Sr High	Ellis
443	Dodge City	Dodge City High	Ford
452	Stanton County	Stanton County High	Stanton
463	Udall	Udall Middle/High	Cowley
465	Winfield	Winfield High	Cowley
500	Kansas City	FL Schlagle High	Wyandotte
Total	13 School Districts	13 School Teams	12 Counties

Note: Number of registered participants = 53. Number of school teams = 13.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas registration, 2022-2023 school year.

Figure B.2. Percentage of Schools Participating by Session, Cohort II

Session	Number of Cohort II schools	Percentage of schools
Orientation	12	92.3%
Summit	12	92.3%
ECHO Session 1	13	100%
ECHO Session 2	13	100%
ECHO Session 3	13	100%
ECHO Session 4	13	100%
ECHO Session 5	12	92.3%
Sharing School Action Plans	11	84.6%
Sharing School Progress	8	61.5%

Note: Total number of schools = 13. Sharing School Progress included schools across all three cohorts.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas registration and attendance, 2022-2023 school year.

Individual Level Outcomes

Figure B.3. Changes in the Frequency of Actions Related to Interventions with Parents Between Baseline Assessment and Follow-Up Survey

Action	Changes in the frequency of actions			
	Increased (%)	No change (%)	Decreased (%)	Missing responses (%)
Ask a parent about their child vaping.	10.8%	67.6%	18.9%	2.7%
Advise a parent on how to help their child quit vaping.	24.3%	62.2%	10.8%	2.7%
Refer a parent to a toll-free tobacco or vaping cessation quit line such as My Life, My Quit for their child.	35.1%	62.2%	0	2.7%
Refer a parent to tobacco or vaping cessation counseling resources for their child.	32.4%	62.2%	2.7%	2.7%

Note: Total number of survey respondents completing baseline assessment and follow-up survey = 37. Percentages may not sum to 100 percent because of rounding. One person did not respond to this question in the follow-up survey.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas baseline assessment and follow-up survey, 2022-2023 school year.

Figure B.4. Changes in the Frequency of Actions Related to Interventions with Other School Staff Members Between the Baseline Assessment and Follow-Up Survey

Action	Changes in the frequency of actions			
	Increased (%)	No change (%)	Decreased (%)	Missing responses (%)
Engage or converse with a staff member about vaping.	32.4%	29.7%	35.1%	2.7%
Share tobacco or vaping cessation resources with staff members to help students quit vaping.	32.4%	48.6%	16.2%	2.7%

Note: Total number of survey respondents completing baseline assessment and follow-up survey = 37. Percentages may not sum to 100 percent because of rounding. One person did not respond to this question in the follow-up survey.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas baseline assessment and follow-up survey, 2022-2023 school year.

School Team-Level Outcomes

Figure B.5. Key Themes for School Team Successes and Challenges Reported in Mid-Year Progress Survey

Qualitative Theme	Count	Description and Representative Quotations
<i>Successes during the Fall</i>		
Conversations with students.	4	<p>Four school teams described successes that involved having improved conversations with students as a result of the Vaping ECHO for Education program, resulting in improved relationships and cessation efforts.</p> <ul style="list-style-type: none"> - <i>“Motivational Interviewing allowed us to get students to open up and form relationships that have led to progress in cessation.”</i> - <i>“The plethora of resources and the knowledge base of focusing on the reason, not the behavior, have given us a better direction when dealing with students and their use of vaping products. In one specific case, we were able to have a conversation with a student about his use and the reason for that use. After a conversation with the student and parent, we were able to arrange counseling and medical appointments for this student. Huge success for this young man!”</i>
Resist chapters.	2	<p>Two school teams described either starting or expanding their Resist chapters detailing positive activities that the Resist chapter had completed including engaging in state-level activities and events and providing education to peers.</p> <ul style="list-style-type: none"> - <i>“The youth will continue to do proactive measures through using Tobacco 101 education with middle School and monthly events to increase awareness of the harms of all tobacco through the school year.”</i> - <i>“We have also started a middle school Resist chapter.”</i>

Figure B.5 (continued). Key Themes for School Team Successes and Challenges Reported in Mid-Year Progress Survey

Qualitative Theme	Count	Description and Representative Quotations
Moved away from punitive discipline.	2	<p>Two school teams described efforts to move away from punitive discipline for first time offenses of vaping. One school team described working with their school board to change policies and another school team described replacing out-of-school suspension (OSS) with in-school-suspension (ISS) and education.</p> <ul style="list-style-type: none"> - <i>“Rather than assigning OSS for first violations we began assigning ISS with two short courses on substance abuse and electronic smoking devices.”</i>
Increased surveillance of students.	2	<p>Two school teams described a success as increased surveillance of vaping. One school shared that they’ve seen students more comfortable reporting their peers’ vaping activity, framing this as doing “the right thing.” Another school described implementing SmartPass, a digital hall pass that allowed administrators to see where students were any time they were out of class.</p> <ul style="list-style-type: none"> - <i>“We have had an increase in students reporting vaping at school. In the past, it seemed as if students were afraid to report their peers for vaping, but this year, our students have stepped up and done the right thing by reporting vaping that was going on during the school day.”</i> - <i>“We implemented SmartPass to help us track students and to help them avoid situations that involved vaping.”</i>
Challenges during the Fall		
Lack of staff capacity.	4	<p>Four school teams shared that a challenge they encountered was having enough time and staff to do this work. The time, training, and manpower to pursue vaping cessation efforts was highlighted as a barrier to their work.</p> <ul style="list-style-type: none"> - <i>“The largest barrier we have is lack of staffing. We would love to start a Resist group or provide education on vaping; however, we have no extra hands to get the ball rolling.”</i> - <i>“We also have many issues that compete with making vaping a priority: time, training, etc.”</i>

Figure B.5 (continued). Key Themes for School Team Successes and Challenges Reported in Mid-Year Progress Survey

Qualitative Theme	Count	Description and Representative Quotations
Student buy-in.	3	<p>Three school teams shared that a challenge they encountered was student buy-in or engagement with vaping cessation work. This was described in different ways including being able to identify students who vape, finding students who want to lead the Resist efforts and having students in mandatory vaping cessation programs want to engage.</p> <ul style="list-style-type: none"> - <i>“The student that was involved in the mandatory cessation program did not want to do it, so I do not feel that it will be as successful.”</i> - <i>“Trying to find students who want to lead the Resist team.”</i>

Note: Count = Total number of respondents who provided similar qualitative responses for each theme. Some participant quotes may be counted across multiple themes if more than one distinct theme emerged from the same response. Note: Although it did not rise to the level of key themes, individual school team participants also identified the following challenges: availability of THC products and current school policies being too punitive. One school team when asked about challenges said “Honestly, nothing. Our school community needed this change and all were of support!”

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas mid-year progress survey, 2022-2023 school year.

Figure B.6. SMART Goals and Objectives Included in School Action Plans

Measurement	Goals	Objectives
Mean	1.5	2.7
Median	2	2
Mode	2	2
Minimum	0	0
Maximum	3	10

Note: Total number of schools = 13.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas April action plan follow-up survey, 2022-2023 school year.

Figure B.7. Key Themes for Goals in School Team Action Plans

Qualitative Theme	Count	Description and Representative Quotations
Vaping cessation for Students.	6 (5 of 10 school action plans)	Six school team goals were to decrease use of vaping and nicotine among students including interventions such as cessation programs rather than punitive measures.
Policy change.	4 (4 of 10 school action plans)	Four school team goals were to change their school policy. Policy changes were described as “student-centered” or “support-centered.”
Education or awareness initiatives.	3 (3 of 10 school action plans)	Three school team goals described a focus on education or awareness initiatives related to vaping for both students and other community stakeholders. One school team described this as “danger awareness.”
Creation of a Resist chapter.	1 (1 of 10 school action plans)	One school team goal described a goal to start and grow a Resist chapter at their high school.

Note: Number of action plans reviewed = 10. Only 10 of 13 school teams submitted an action plan for review. Count = Total number of goals across school action plans which provided similar qualitative responses for each theme. Some goals in school action plans may be counted across multiple themes if more than one distinct theme emerged from the same response.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas school action plan document review, 2022-2023 school year.

Figure B.8. SMART Goals and Objectives Completed in School Action Plans

Measurement	Goals	Objectives
Mean	0.9	1.6
Median	1	1
Mode	0	1
Minimum	0	0
Maximum	2	6

Note: Number of school teams = 13.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas April action plan follow-up survey, 2022-2023 school year.

Figure B.9. School Team Progress Toward Specific Actions Highlighted in the Vaping ECHO for Education Program

Activity	Activity was completed and no further work on this activity is needed. (%)	Activity was completed but further work on this activity is still ongoing. (%)	Activity was started but not yet completed. (%)	Activity is not yet started but our school plans to do this during the 2022-2023 school year.(%)	Not applicable – Our school does not plan to do this activity during the 2022-2023 school year. (%)
Activity 1: School team presented a policy change recommendation to school board.	15.4%	0	38.5%	7.7%	38.5%
Activity 2: School board passed a new vaping related policy.	7.7%	15.4%	23.1%	7.7%	46.2%
Activity 3: School implemented a new vaping related policy.	15.4%	23.1%	30.8%	0	30.8%
Activity 4: School provided vaping related presentations (for example, to staff, students, PTA and/or parents).	7.7%	15.4%	30.8%	0	46.2%
Activity 5: School developed partnerships (with parents, students and/or the community) to address vaping.	7.7%	15.4%	46.2%	0	30.8%
Activity 6: School offered vaping cessation treatment to students.	15.4%	23.1%	38.5%	0	23.1%
Activity 7: School started a Resist chapter.	15.4%	15.4%	15.4%	7.7%	46.2%

Note: Number of school teams = 13.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas April action plan follow-up survey, 2022-2023 school year.

Figure B.10. Number of Activities in Action Plans No Longer Being Pursued

Number of activities	Number of schools	Percentage
0 activities	8	61.5%
1	4	30.8%
2	1	7.7%
3	0	0
4	0	0
5 or more	0	0

Note: Number of school teams = 13. Survey question: How many activities in your school’s action plan did your school decide to no longer pursue during the 2022-2023 school year?

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas April action plan follow-up survey, 2022-2023 school year.

Figure B.11. Key Themes for Activities School Teams Decided to No Longer Pursue

Qualitative Theme	Count	Description and Representative Quotations
Overall		
Capacity constraints.	4	Of the 5 school teams that responded to this question, 4 provided the reason of capacity constraints for why they decided to no longer pursue the activity. The most frequently mentioned capacity constraint by school teams was a lack of time, with three school teams citing it. However, staffing (two school teams) and competing priorities (one school team) were also mentioned . <ul style="list-style-type: none"> - <i>“We want to do some education in elementary, but got started too late in the year. Hopeful to have plans and do instruction in the fall or winter. Too hard to work around state assessment prep and testing, then spring field trips.”</i>
Specific Activities		
Education at different school levels.	2	Two schools described planning to do vaping education at different school levels but decided to no longer pursue it during the 2022-2023 school year due to capacity constraints such as limited time and competing priorities like standardized testing preparation. <ul style="list-style-type: none"> - <i>“Implement tobacco and vaping education across grade levels and for all stakeholders. This was not done because we are running out of time.”</i>
Offering education instead of suspension.	1	One school team said they will not offer education in place of suspension describing staffing constraints and that this role should be the responsibility of parents. <ul style="list-style-type: none"> - <i>“We will not offer education vs suspension. We do not have the manpower to change anything and we feel strongly that parents need to be parents and not expect the school to do all the training.”</i>

Figure B.11 (continued). Key Themes for Activities School Teams Decided to No Longer Pursue

Qualitative Theme	Count	Description and Representative Quotations
Starting a Resist group.	1	One school team said they did not start a Resist group for the main reason that students they had asked to join had competing priorities. <ul style="list-style-type: none"> - <i>“Starting Resist group this school year for many reasons. Mainly students who were asked to join declined due to other club/group responsibilities.”</i>
Hosting a speaker.	1	One school team said they planned to have a speaker come and talk about vaping but had challenges completing it this year due to capacity constraints and will plan to complete next year. <ul style="list-style-type: none"> - <i>“Speaker- time did not allow it to happen- will do next year. Our health champion had challenges to make it happen.”</i>

Note: Count = Total number of respondents who provided similar qualitative responses for each theme. Some participant quotes may be counted across multiple themes if more than one distinct theme emerged from the same response.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas April action plan follow-up survey, 2022-2023 school year.

Figure B.12. Key Themes for Biggest Source of Accomplishment Among Completed Activities

Qualitative Theme	Count	Description and Representative Quotations
Policy change.	7	Most of the school teams mentioned efforts to change policy at their school. Schools that had completed policy change mentioned moving to less punitive measures or switching from out-of-school suspension to in-school suspension with education. Some school teams said they were still in the planning stages and discussions for policy change but that having these conversations was on its own a big accomplishment. <ul style="list-style-type: none"> - <i>“Changing our discipline policy. Students who were caught vaping were given three days of OSS, this allowed them to be at home unsupervised. Changing this policy does not give them the option to stay at home and do as they like.”</i> - <i>“The development of our protocol for students who are using or in possession of tobacco products while in school. Even in our team, there were different opinions and values that we had to discuss to come up with our plan.”</i> - <i>“Changing policy to support education and less punitive measures for vaping.”</i>

Figure B.12 (continued). Key Themes for Biggest Source of Accomplishment Among Completed Activities

Qualitative Theme	Count	Description and Representative Quotations
Communication efforts.	3	<p>Three school teams mentioned communication efforts, specifically implementing motivational interviewing, as a major accomplishment because it improved relationships and helped them share effective cessation strategies.</p> <ul style="list-style-type: none"> - <i>“Motivational interviewing - it has helped build relationships with students and create connections and conversations.”</i> - <i>“Communicating with parents/students on the most impactful ways to cease vaping/tobacco use. The ability to discuss that as part of an ECHO Cohort and the knowledge base that was provided we can confidently state and support ways to stop.”</i>
Resist chapters.	2	<p>Two school teams mentioned the activity and work of their Resist chapters being the biggest accomplishment for their school because of the large amount of engagement and peer-to-peer outreach.</p> <ul style="list-style-type: none"> - <i>“Implementation of a Resist chapter and vape-free school ground signs posted for display. This is important because student lead prevention and outreach is more received peer to peer.”</i>
Student surveillance.	2	<p>Two school teams mentioned their biggest accomplishment for their school being the implementation of surveillance tools including the SmartPass virtual hall pass and vape detectors.</p> <ul style="list-style-type: none"> - <i>“The SmartPass has slowed the groups gathering in the bathrooms that vape together.”</i>

Note: Count = Total number of respondents who provided similar qualitative responses for each theme. Some participant quotes may be counted across multiple themes if more than one distinct theme emerged from the same response. Responses are to question “What one completed activity related to vaping does your school team believe is the biggest source of accomplishment and why?”. Under the theme of student surveillance, vape detectors were mentioned as a tool a school team saw as their biggest accomplishment. The Vaping ECHO for Education curriculum emphasized that vape detectors were not an evidence-based strategy.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas April action plan follow-up survey, 2022-2023 school year.

Figure B.13. Key Themes for Activities School Teams Plan to Work on in 2023-2024 School Year and Beyond

Qualitative Theme	Count	Description and Representative Quotations
Information sharing or public awareness.	6	Six school teams mentioned activities for information sharing or public awareness of vaping including informational packets at family nights or events, education through a guest speaker, communication with students and spirit weeks. <ul style="list-style-type: none"> - <i>“Add prevention curriculum to health classes and provide informational packets to parents during family nights and school events.”</i>
Resist chapter or student organization.	5	Five school teams mentioned starting, expanding or sustaining their Resist chapters. One school also mentioned creating a student organization, not necessarily Resist-branded. <ul style="list-style-type: none"> - <i>“More active Resist chapter, recruit more members. Also get education program in the fifth grade with hopes to expand to sixth grade”</i>
New vaping education in curriculum.	3	Three school teams mentioned modifications to the curriculum to bring vaping education to different grade levels or to include it for the first time. <ul style="list-style-type: none"> - <i>“Add prevention curriculum to health classes and provide informational packets to parents during family nights and school events.”</i>
Identification of cessation resources.	2	Two school teams discussed assembling easily accessible cessation resources for students and parents. One school described using these in combination with establishing a cessation program. <ul style="list-style-type: none"> - <i>“School policy and focus on resources that parents/students can seek comfortably.”</i>
School policy creation.	2	Two school teams described creating and implementing school policy related to vaping. <ul style="list-style-type: none"> - <i>“Hoping to create and then implement a vaping policy.”</i>
Collaboration with community partners.	2	Two school teams described collaboration with community partners to strengthen or complement their efforts. <ul style="list-style-type: none"> - <i>“Resist chapter, vaping education into curriculum, speaker, education help from hospital RT w/background in vaping education.”</i>

Figure B.13 (continued). Key Themes for Activities School Teams Plan to Work on in 2023-2024 School Year and Beyond

Qualitative Theme	Count	Description and Representative Quotations
Student surveillance.	2	Two schools described student surveillance efforts including the installation of vape detectors and regular inspections of student's backpacks and lockers. <ul style="list-style-type: none"> - <i>"We are going to implement inspections regularly on backpacks and lockers."</i>

Note: Count = Total number of respondents who provided similar qualitative responses for each theme. Some participant quotes may be counted across multiple themes if more than one distinct theme emerged from the same response. Responses are to the question "Thinking about the 2023-2024 school year and beyond, what activities related to vaping does your school plan to work on?" Under the theme of student surveillance, vape detectors were mentioned as a tool a school team saw as their biggest accomplishment. The Vaping ECHO for Education curriculum emphasized that vape detectors were not an evidence-based strategy. Although it did not rise to the level of key themes, one school team said they were currently undecided about their future efforts related to vaping cessation at their school.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas April action plan follow-up survey, 2022-2023 school year.

Figure B.14. Key Themes for Future Activities the School Team is Most Excited About

Qualitative Theme	Count	Description and Representative Quotations
New cessation programs or resources.	3	Three school teams were most excited about beginning to apply the resources and strategies they had learned through the ECHO cohort, a local cessation program and additional efforts supporting students with their addictions. <ul style="list-style-type: none"> - <i>"We are excited to help students quit tobacco through the different methods we learned through the cohort. Previous actions were not helping students with the main issue which is addiction to nicotine."</i>
Resist chapter.	2	Two school teams were most excited about the efforts of their Resist chapter because they said student-led efforts will result in students being more likely to seek help. <ul style="list-style-type: none"> - <i>"Resist chapter-Students are more likely to seek help from peers where it doesn't have to be reported to parent/guardian."</i>

Figure B.14 (continued). Key Themes for Future Activities the School Team is Most Excited About

Qualitative Theme	Count	Description and Representative Quotations
School curriculum change.	2	Two school teams said they were most excited about changing the curriculum to include vaping education or bringing existing curriculum to younger students in elementary schools. “Adding prevention curriculum to health classes will educate students about the effects of Big Tobacco.”
Nothing.	2	Two school teams wrote “N/A” to this question. Of note, prior responses from these school teams about their future efforts related to vaping focused on student surveillance. - “N/A”

Note: Count = Total number of respondents who provided similar qualitative responses for each theme. Some participant quotes may be counted across multiple themes if more than one distinct theme emerged from the same response. Note: Although it did not rise to the level of key themes, some schools provided some additional activities including seeing a culture change at student level with more students reporting their peer’s vaping than in previous years, a future spirit week related to vaping, policy change and educational efforts with staff, school board and community overall.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas April action plan follow-up survey, 2022-2023 school year.

Program Management and Improvement

Figure B.15. Novelty of Information in the Vaping ECHO for Education series, 2022-23 School Year

Level of novelty	Number of respondents	Percentage
0 – 25%	1	2.7%
26% – 50%	19	51.4%
51% – 75%	15	43.2%
76% – 100%	1	2.7%
Missing Response	1	2.7%

Note: Number of follow-up survey respondents = 37. Percentages may not sum to 100 percent because of rounding. Survey question: Overall, what percentage of the information in the Vaping ECHO Pilot program was new to you?

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas Follow-up Survey, 2022-2023 school year.

Figure B.16. Recommending the Vaping ECHO for Education Program to Others

Whether the respondent will recommend the Vaping ECHO for Education program to others.	Number of respondents	Percentage
Yes	30	81.1%
No	0	0
Maybe	6	16.2%
Missing Response	1	2.7%

Note: Number of follow-up survey respondents = 37. Percentages may not sum to 100 percent because of rounding. Survey question: Reflecting on your experience with the Vaping ECHO for Education program overall, would you recommend the program to others?

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas follow-up survey, 2022-2023 school year.

Figure B.17. Key Themes for Why or Why Not Respondent Would Recommend Vaping ECHO Education Program

Qualitative Theme	Count	Description and Representative Quotations
<i>Yes, I would recommend the program to others because:</i>		
Resources and information provided are valuable	10	<p>Participants said that they would recommend the Vaping ECHO for Education program because the resources and information were very useful and helpful to them and their schools. A few participants specifically mentioned being provided tools to help them in their work.</p> <ul style="list-style-type: none"> - <i>“The awareness of all the tools and how to get all entities on the same page is priceless.”</i> - <i>“The resources and information were extremely helpful, especially to members who did not have a medical background. It helped them to understand the addiction and to help implement change from punitive to being proactive vs proactive and to get the student the resources they may need.”</i>
Discussion or perspectives shared are valuable.	6	<p>Participants said they would recommend the Vaping ECHO for Education program because they found the discussions during sessions to be valuable. Participants said it was useful to learn from each other and hear points of view from others and about the similar challenges experienced by schools around the state. One participant described the program changing their views.</p> <ul style="list-style-type: none"> - <i>“It is good to bring groups together to discuss an issue and have a set time to work on it. We learn more from what others are doing because one little nugget can translate to something we can implement.”</i> - <i>“I think it is good because you find out that problems are very much the same across the state.”</i>

Figure B.17 (continued). Key Themes for Why or Why Not Respondent Would Recommend Vaping ECHO Education Program

Qualitative Theme	Count	Description and Representative Quotations
Appreciated program design.	4	Participants said they would recommend the Vaping ECHO for Education program because of the program design. <ul style="list-style-type: none"> - <i>“Excellent program, helped us get started from scratch, helpful to know so many schools are in the same boat.as us, broken down to address the many factors playing into vaping and how to help students”</i> - <i>“I feel that the concept of the program is ideal. It is a struggle everywhere, so any and all information surrounding vaping proves to be beneficial in some ways.”</i>
Helped move away from punitive discipline.	3	Participants said they would recommend the Vaping ECHO for Education program because it helped their team shift away from punitive discipline approaches to more proactive and student need- centered approaches. <ul style="list-style-type: none"> - <i>“The program allowed me to look at what I perceived.as a discipline issue, as an issue that is more of an addiction problem. I, like most administrators have handed out plenty of punishment, multiple times to some students. This gives us another tool to try to get.to the root cause of the problem.”</i> - <i>“The resources and information were extremely helpful, especially to members who did not have a medical background. It helped them to understand the addiction and to help implement change from punitive to being proactive vs proactive and to get the student the resources they may need.”</i>
Helped create action.	3	Participants said they would recommend the Vaping ECHO for Education program because it helped them take action at their school. <ul style="list-style-type: none"> - <i>“Excellent program, helped us get started from scratch, helpful to know so many schools are in the same boat.as us, broken down to address the many factors playing into vaping and how to help students.”</i> - <i>“Really helped jump start our needs for our students.”</i>
<i>Maybe, I would recommend the program to others because:</i>		
Of factors about the ECHO program itself.	2	Participants shared that they might recommend the Vaping ECHO for Education program but said the time commitment was challenging and they felt THC-related (marijuana) vaping should be a priority to be addressed. <ul style="list-style-type: none"> - <i>“There should be more discussion/resources for THC-related vaping as this is quickly becoming more prominent than tobacco.”</i> - <i>“The time commitment was difficult to meet, so I was not able to take real advantage of the program.”</i>
Of factors about their school context.	2	Participants shared that they might recommend the Vaping ECHO for Education program and described needs or challenges within their school context. <ul style="list-style-type: none"> - <i>“As an HD participant we were reliant on the school principal to work with us. After two or so sessions she was too busy to attend”</i>

Note: Count = Total number of respondents who provided similar qualitative responses for each theme. Some participant quotes may be counted across multiple themes if more than one distinct theme emerged from the same response.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas follow-up survey, 2022-2023 school year.

Figure B.18. Perceived Value of School Team Action Plans Presented by Other Schools

	Strongly disagree (%)	Somewhat disagree (%)	Neither agree or disagree (%)	Somewhat agree (%)	Strongly agree (%)	Missing responses (%)
The action plans presented by other schools were relevant to my work at the school.	0	5.4%	8.1%	45.9%	37.8%	2.7%
The action plans presented by other schools were helpful to my work at the school.	0	5.4%	10.8%	48.6%	32.4%	2.7%
The content of the action plans was appropriate.	0	2.7%	13.5%	43.2%	37.8%	2.7%
I gained new ideas and insights from the action plans presented by other schools.	0	2.7%	13.5%	48.6%	32.4%	2.7%
The action plan presentation format was effective.	0	2.7%	16.2%	43.2%	35.1%	2.7%
I applied the information gained from the action plans presented by other schools to my work at the school.	0	2.7%	18.9%	48.6%	27.0%	2.7%

Note: Number of follow-up survey respondents = 37. Percentages may not sum to 100 percent because of rounding.
 Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas follow-up survey, 2022-2023 school year.

Figure B.19. Respondent Perceived Usefulness of the Vaping ECHO for Education School Team Action Plan Template as a Tool for Organizing School Team’s Goals and Objectives for Addressing Vaping.

Level of usefulness	Number of respondents	Percentage
Not at all useful	0	0
Slightly useful	1	2.7%
Neutral	4	10.8%
Somewhat useful	14	37.8%
Very useful	13	35.1%
Unsure	4	10.8%
Missing responses	1	2.7%

Note: Number of follow-up survey respondents = 37. Percentages may not sum to 100 percent because of rounding. Survey question: How useful did you find the Vaping ECHO for Education Action Plan Template as a tool for organizing your school team’s goals and objectives for addressing vaping?

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas follow-up survey, 2022-2023 school year.

Figure B.20. Respondent Perceived Usefulness of the Vaping ECHO for Education School Team Action Plan Template as a Tool for Implementing Policy and Practice Changes.

Level of usefulness	Number of respondents	Percentage
Not at all useful	0	0
Slightly useful	1	2.7%
Neutral	5	13.5%
Somewhat useful	11	29.7%
Very useful	15	40.5%
Unsure	4	10.8%
Missing responses	1	2.7%

Note: Number of follow-up survey respondents = 37. Percentages may not sum to 100 percent because of rounding. Survey question: How useful did you find the Vaping ECHO Action Plan Template as a tool for implementing policy and practice changes related to vaping?

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas follow-up survey, 2022-2023 school year.

Figure B.21. Key Themes for Improvements to the Vaping ECHO for Education School Team Action Plan Template

Qualitative Theme	Count	Description and Representative Quotations
No changes	21	Participants did not recommend any additional changes to the action plan template describing it as “fine the way it was”. One participant did not recommend changes but shared their team did not have time to meet as group to discuss the template. <ul style="list-style-type: none"> - “It worked fine for its purpose” - “None, the school I was involved in did not seem to have time to meet as a group.”

Note: Count = Total number of respondents who provided similar qualitative responses for each theme. Some participant quotes may be counted across multiple themes if more than one distinct theme emerged from the same response. One response that did not rise to the level of key theme but included a recommendation was the request that the School action plan template be made “more concise and compressed.”

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas follow-up survey, 2022-2023 school year.

Figure B.22. Number of Times the Vaping ECHO for Education Toolkit was Reviewed During the School Year, 2022-2023

Times reviewed	Number of respondents	Percentage
0 times	2	5.4%
1-2 times	5	13.5%
3-4 times	9	24.3%
5-6 times	9	24.3%
7-8 times	2	5.4%
9-10 time	1	2.7%
More than 10 times	3	8.1%
Unsure	5	13.5%
Missing responses	1	2.7%

Note: Number of follow-up survey respondents = 37. Percentages may not sum to 100 percent because of rounding. Survey question: During the 2022-2023 school year, how many times did you review the Vaping ECHO for Education Toolkit?

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas follow-up survey, 2022-2023 school year

Figure B.23. Usefulness of the Vaping ECHO for Education Toolkit

How useful did participants find the Vaping ECHO for Education Toolkit?	Number of respondents	Percentage
Not at all useful	0	0
Slightly useful	1	2.7%
Neutral	4	10.8%
Somewhat useful	9	24.3%
Very useful	18	48.6%
Unsure	3	8.1%
Missing responses	2	5.4%

Note: Number of follow-up survey respondents = 37. Percentages may not sum to 100 percent because of rounding. Survey question: How useful did you find the Vaping ECHO for Education Toolkit as a tool for implementing policy and practice changes related to vaping?

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas follow-up survey, 2022-2023 school year.

Figure B.24. Key Themes for Improvements to the Vaping ECHO for Education Toolkit

Qualitative Theme	Count	Description and Representative Quotations
No changes.	19	Participants did not recommend any additional changes to the toolkit with one participant adding that they “loved it.” <ul style="list-style-type: none"> - “Nothing to add, loved it” - “None at this time.”
Increased access to or distribution of the toolkit.	2	Participants suggested that the toolkit be more widely available and accessible outside of the ECHO participants. <ul style="list-style-type: none"> - “I believe more publicity on the toolkit would help with getting the word out to other schools to use as a resource.” - “Ease of access, maybe the ability to share with other staff members and administration”
Updated content of the toolkit.	2	Participants suggested continued updates to the toolkit including updating it with summaries of challenges and effective strategies across all school participants. <ul style="list-style-type: none"> - “Summaries of issues all schools are dealing with and techniques that are working or not working. Only heard from schools in your breakout session”

Note: Count = Total number of respondents who provided similar qualitative responses for each theme. Some participant quotes may be counted across multiple themes if more than one distinct theme emerged from the same response. One response that did not rise to the level of key theme but included a recommendation was the request that the toolkit be made “more concise and compressed.”

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas follow-up survey, 2022-2023 school year.

Case Study Summary

School teams were invited to submit case studies for the Vaping ECHO for Education Cohort to discuss. The ECHO Hub team determined which case studies would be discussed during ECHO Session 1, ECHO Session 2, ECHO Session 3, and ECHO Session 4. While ECHO Session 5 did not have case studies it focused on “case-like” questions submitted by schools. Case-like questions included discussion of policy and program implementation as well as specific best practices for specific adaptive challenges such as community perception, accountability and community culture change.

Thirteen case studies were submitted by school teams. Of these case studies, 7 were reported by school teams as being “student-related” case studies. The remaining case studies (6) were identified as “system-wide” case studies. Only six case studies were discussed between ECHO sessions 1-4. All six case studies discussed were “student-related.”

School submitted “student-related” cases were generally described by participants as a student being caught with vaping or being a “repeat offender” or defying disciplinary action in some way. These cases involved multiple school stakeholders including building-level administrators (7 of 7), counselors (4 of 7), teachers (3 of 7), school resource officers or law enforcement (2 of 7), coaches (2 of 7) or social workers (2 of 7). Case studies also included the superintendent (1 of 7) and dean of students (1 of 7). Schools requested help with information such as how to engage parents of these students (5 of 7), help the student receive support to quit or succeed academically (4 of 7), prevent other students or youth from trying vaping (2 of 7), or appropriately discipline the student (2 of 7).

School submitted “system-related” cases generally included school personnel discussed in student-level cases as well as the school nurse (5 of 6) and community partners such as the local health department or mental health center (2 of 6). These types of case studies focused on disciplinary policy change such as moving toward education rather than punitive approaches like out-of-school suspension (3 of 6), creating access to cessation or education resources (3 of 6), creating a culture change (1 of 6) or detection of student vaping (1 of 6). One school team also specifically mentioned the challenge they face with THC vapes being more prevalent in their school than nicotine vapes.

Figure B.25. Level of Agreement During Orientations with Topics, Content and Format

Statement	Disagree (%)	Somewhat disagree (%)	Neutral (%)	Somewhat agree (%)	Agree (%)
The topics covered were <u>relevant</u> to my work at the school.	0	0	0	28.6%	71.4%
The content was appropriate.	0	0	0	21.4%	78.6%
I gained new ideas and insights.	0	0	14.3%	35.7%	50.0%
The format was effective.	0	0	21.4%	14.3%	64.3%

Note: Number of post-orientation survey respondents = 14. Percentages may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-orientation survey, 2022-2023 school year.

Figure B.26. Level of Agreement with Session’s Relevance to Respondent’s Work at School

Session	Number of respondents	Strongly disagree (%)	Disagree (%)	Neither agree or disagree (%)	Agree (%)	Strongly agree (%)	Missing response (%)
Summit	8	0	0	0	37.5%	50.0%	12.5%
ECHO Session 1	23	0	0	0	60.9%	39.1%	0
ECHO Session 2	22	4.6%	0	4.6%	45.5%	45.5%	0
ECHO Session 3	13	0	0	0	46.2%	53.9%	0
ECHO Session 4	22	0	0	4.5%	63.6%	31.8%	0
ECHO Session 5	18	0	0	0	61.1%	38.9%	0
Sharing School Action Plans	12	0	0	0	66.7%	33.3%	0
Sharing School’ Progress	8	0	0	0	62.5%	37.5%	0

Note: Number of respondents varied at each session. Percentages for each session may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-session surveys, 2022-2023 school year.

Figure B.27. Level of Agreement with the Session’s Helpfulness to Work at School

Session	Number of respondents	Strongly disagree (%)	Disagree (%)	Neither agree or disagree (%)	Agree (%)	Strongly agree (%)	Missing response (%)
Summit	8	0	0	0	25.0%	62.5%	12.5%
ECHO Session 1	23	0	0	0	56.5%	43.5%	0
ECHO Session 2	22	4.6%	0	9.1%	36.4%	50.0%	0
ECHO Session 3	13	0	0	0	61.5%	38.5%	0
ECHO Session 4	22	0	0	9.1%	59.1%	31.8%	0
ECHO Session 5	18	0	0	11.1%	44.4%	44.4%	0
Sharing School Action Plans	12	0	0	0	50.0%	50.0%	0
Sharing School Progress	8	0	0	0	62.5%	37.5%	0

Note: Number of respondents varied at each session. Percentages for each session may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-session surveys, 2022-2023 school year.

Figure B.28. Level of Agreement with the Session’s Content Appropriateness

Session	Number of respondents	Strongly disagree (%)	Disagree (%)	Neither agree or disagree (%)	Agree (%)	Strongly agree (%)	Missing response (%)
Summit	8	0	0	0	37.5%	50.0%	12.5%
ECHO Session 1	23	0	0	0	52.2%	47.8%	0
ECHO Session 2	22	4.6%	0	0	40.9%	54.6%	0
ECHO Session 3	13	0	0	0	46.2%	53.9%	0

Figure B.28 (continued). Level of Agreement with the Session’s Content Appropriateness

Session	Number of respondents	Strongly disagree (%)	Disagree (%)	Neither agree or disagree (%)	Agree (%)	Strongly agree (%)	Missing response (%)
ECHO Session 4	22	0	0	4.5%	63.6%	31.8%	0
ECHO Session 5	18	0	0	5.6%	44.4%	50.0%	0
Sharing School Action Plans	12	0	0	0	58.3%	41.7%	0
Sharing School Progress	8	0	0	12.5%	62.5%	25.0%	0

Note: Number of respondents varied at each session. Percentages for each session may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-session surveys, 2022-2023 school year.

Figure B.29. Level of Agreement with Gaining New Ideas and Insights from the Session

Session	Number of respondents	Strongly disagree (%)	Disagree (%)	Neither agree or disagree (%)	Agree (%)	Strongly agree (%)	Missing response (%)
Summit	8	0	0	0	25.0%	62.5%	12.5%
ECHO Session 1	23	0	4.4%	4.4%	52.2%	39.1%	0
ECHO Session 2	22	4.6%	0	4.6%	50.0%	40.9%	0
ECHO Session 3	13	0	0	7.7%	61.5%	30.8%	0
ECHO Session 4	22	0	0	18.2%	50.0%	31.8%	0
ECHO Session 5	18	0	11.1%	0	44.4%	44.4%	0
Sharing School Action Plans	12	0	0	8.3%	25.0%	66.7%	0
Sharing School Progress	8	0	0	12.5%	75.0%	12.5%	0

Note: Number of respondents varied at each session. Percentages for each session may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-session surveys, 2022-2023 school year.

Figure B.30. Level of Agreement with Effectiveness of the Session’s Format

Session	Number of respondents	Strongly disagree (%)	Disagree (%)	Neither agree or disagree (%)	Agree (%)	Strongly agree (%)	Missing response (%)
Summit	8	0	0	12.5%	37.5%	37.5%	12.5%
ECHO Session 1	23	0	0	4.4%	60.9%	34.8%	0
ECHO Session 2	22	4.6%	0	0	59.1%	36.4%	0
ECHO Session 3	13	0	0	15.4%	38.5%	46.2%	0
ECHO Session 4	22	0	0	0	68.2%	31.8%	0
ECHO Session 5	18	0	11.1%	5.6%	44.4%	38.9%	0
Sharing School Action Plans	12	0	0	0	50.0%	50.0%	0
Sharing School Progress	8	0	0	12.5%	62.5%	25.0%	0

Note: Number of respondents varied at each session. Percentages for each session may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-session surveys, 2022-2023 school year.

Figure B.31. Level of Agreement with Willingness to Apply Session’s Content to Respondent’s Work at School

Session	Number of respondents	Strongly disagree (%)	Disagree (%)	Neither agree or disagree (%)	Agree (%)	Strongly agree (%)	Missing responses (%)
Summit	8	0	0	0	37.5%	50.0%	12.5%
ECHO Session 1	23	0	4.4%	8.7%	43.5%	43.5%	0
ECHO Session 2	22	4.6%	0	9.1%	45.5%	40.9%	0

Figure B.31 (continued). Level of Agreement with Willingness to Apply Session’s Content to Respondent’s Work at School

Session	Number of respondents	Strongly disagree (%)	Disagree (%)	Neither agree or disagree (%)	Agree (%)	Strongly agree (%)	Missing responses (%)
ECHO Session 3	13	0	0	7.7%	53.9%	38.5%	0
ECHO Session 4	22	0	0	13.6%	59.1%	27.3%	0
ECHO Session 5	18	0	0	11.1%	55.6%	33.3%	0
Sharing School Action Plans	12	0	0	0	41.7%	58.3%	0
Sharing School Progress	8	0	0	12.5%	62.5%	25.0%	0

Note: Number of respondents varied at each session. Percentages for each session may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-session surveys, 2022-2023 school year.

Figure B.32. Level of Satisfaction with Orientation Session

Session	Number of respondents	Dissatisfied (%)	Somewhat dissatisfied (%)	Neutral (%)	Somewhat satisfied (%)	Satisfied (%)
Orientation	14	0	7.1%	7.1%	21.4%	64.3%

Note: Number of post-orientation survey respondents = 14. Percentages may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-orientation survey, 2022-2023 school year.

Figure B.33. Level of Satisfaction with Vaping ECHO Sessions

Session	Total number of respondents	Very dissatisfied (%)	Dissatisfied (%)	Neither satisfied or dissatisfied (%)	Satisfied (%)	Very satisfied (%)	Missing responses (%)
Summit	8	0	0	0	37.5%	50.0%	12.5%
ECHO Session 1	23	4.4%	0	0	56.5%	39.1%	0
ECHO Session 2	22	9.1%	0	0	50.0%	40.9%	0
ECHO Session 3	13	0	0	0	69.2%	30.8%	0
ECHO Session 4	22	4.5%	0	4.5%	77.3%	13.6%	0
ECHO Session 5	18	0	0	22.2%	44.4%	33.3%	0
Sharing School Action Plans	12	8.3%	0	0	25.0%	66.7%	0
Sharing School Progress	8	0	0	0	62.5%	37.5%	0

Note: Number of respondents varied at each session. Percentages for each session may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-session surveys, 2022-2023 school year.

Figure B.34. Extent that the Orientation Session Addressed Learning Objectives

Learning objective	Not at all (%)	Slightly (%)	Moderately (%)	Very much (%)	Completely (%)	Missing responses (%)
Expectations for participants.	0	0	7.1%	50.0%	42.9%	0
Time commitment.	0	0	21.4%	28.6%	50.0%	0
Understanding of the ECHO Model.	0	0	21.4%	14.3%	57.1%	7.1%
Assigned tasks (e.g. Case Submission Form; Action Plan).	0	0	14.3%	50.0%	35.7%	0
Other: (please specify).	0	0	7.1%	7.1%	14.3%	71.4%

Note: Total number of post-orientation survey respondents = 14. Percentages may not sum to 100 percent because of rounding. Respondents selecting “Other” were provided the opportunity to specify but did not provide a text response for this question.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-orientation survey, 2022-2023 school year.

Figure B.35. Extent that the Summit Session Addressed Learning Objectives

Learning objective	Not at all (%)	Slightly (%)	Moderately (%)	Very much (%)	Completely (%)	Missing response (%)
Summarize the importance of addressing e-cigarette use/vaping in schools.	0	0	12.5%	25.0%	50.0%	12.5%
Provide examples of <u>challenges</u> implementing a vaping policy or practice change.	0	0	25.0%	25.0%	37.5%	12.5%

Figure B.35 (continued). Extent that the Summit Session Addressed Learning Objectives

Learning objective	Not at all (%)	Slightly (%)	Moderately (%)	Very much (%)	Completely (%)	Missing response (%)
Provide examples of <u>successes</u> implementing a vaping policy or practice change.	12.5%	0	12.5%	50.0%	12.5%	12.5%
Describe best practices for implementing policy or practice change.	0	12.5%	25.0%	37.5%	12.5%	12.5%

Note: Total number of post-summit survey respondents = 8. Percentages may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-summit survey, 2022-2023 school year.

Figure B.36. Extent that ECHO Session 1, Introduction to Addiction and Cessation, Addressed Learning Objectives

Learning objective	Not at all (%)	Slightly (%)	Moderately (%)	Very much (%)	Completely (%)
Define the basic physiological and psychological principles of addiction and nicotine dependence.	0	0	43.5%	34.8%	21.7%
Identify cessation best practices.	0	0	39.1%	34.8%	26.1%
Review cessation resources in the context of best practices.	0	0	39.1%	39.1%	21.7%
Apply cessation resources in the context of best practices.	0	4.4%	52.2%	21.7%	21.7%

Note: Total number of post-ECHO session 1 survey respondents = 23. Percentages may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-ECHO #1 survey, 2022-2023 school year.

Figure B.37. Extent that ECHO Session 2, Putting Cessation into Practice, Addressed Learning Objectives

Learning objective	Not at all (%)	Slightly (%)	Moderately (%)	Very much (%)	Completely (%)
Summarize the evidence base behind effective communication regarding behavior change.	0	0	27.3%	50.0%	22.7%
Identify facilitators of behavior change.	0	4.6%	27.3%	45.5%	22.7%
Identify barriers to behavior change .	0	4.6%	13.6%	59.1%	22.7%
Explain principles of effective conversations to promote behavior change.	0	0	22.7%	45.5%	31.8%
Implement cessation best practices.	4.6%	0	31.8%	45.5%	18.2%

Note: Total number of post-ECHO session 2 Survey respondents = 22. Percentages may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-ECHO 2 survey, 2022-2023 school year.

Figure B.38. Extent that ECHO Session 3 ,Policy Best Practices and Legal Challenges, Addressed Learning Objectives

Learning objective	Not at all (%)	Slightly (%)	Moderately (%)	Very much (%)	Completely (%)
Summarize the components of best practice recommendations for tobacco free school policies.	0	0	38.5%	61.5%	0
Discuss the legal challenges of comprehensive tobacco free school policies	0	0	38.5%	61.5%	0
Discuss the legal challenges of restorative approaches to discipline related to tobacco free school policies	0	0	46.2%	53.9%	0
Discuss the legal challenges of connecting youth to cessation resources and programs.	0	0	53.9%	46.2%	0
Describe the Kansas State Board of Education's Comprehensive Tobacco-Free School Grounds Policy.	0	0	38.5%	53.9%	7.7%

Note: Total number of post-ECHO session 3 survey respondents = 13. Percentages may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-ECHO 3 survey, 2022-2023 school year.

Figure B.39. Extent that ECHO Session 4, Student-Centered Approach, Addressed Learning Objectives

Learning objective	Not at all (%)	Slightly (%)	Moderately (%)	Very much (%)	Completely (%)
Identify the policies and protocols outlined by KSHSAA for students involved in extra-curricular activities.	4.5%	0	18.2%	50.0%	27.3%
Recognize the impact of nicotine on social-emotional and mental health of students.	0	4.5%	4.5%	63.6%	27.3%
Describe the different experiences of marginalized students.	0	4.5%	31.8%	59.1%	4.5%
Discuss the impact of marginalized students' different experiences on their nicotine use.	0	4.5%	27.3%	63.6%	4.5%

Note: Number of post-ECHO session 4 survey respondents = 22. Percentages may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-ECHO 4 survey, 2022-2023 school year.

Figure B.40. Extent that ECHO Session 5, Developing Community Partnerships, Addressed Learning Objectives

Learning objectives	Not at all (%)	Slightly (%)	Moderately (%)	Very much (%)	Completely (%)
Define the role of community partners.	5.6%	11.1%	27.8%	38.9%	16.7%
Identify types of community partners.	11.1%	0	27.8%	50.0%	11.1%
Develop non-traditional partnerships (e.g., faith based, realtors, chambers of commerce).	11.1%	5.6%	50.0%	27.8%	5.6%
Demonstrate how to connect with partners	11.1%	5.6%	33.3%	38.9%	11.1%

Note: Number of post-ECHO session 5 survey respondents = 18. Percentages may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-ECHO 5 survey, 2022-2023 school year.

Figure B.41. Extent that the session, Sharing School Action Plans, Addressed Learning Objectives

Learning Objectives	Not at all (%)	Slightly (%)	Moderately (%)	Very Much (%)	Completely (%)
Discuss school action plans.	0	0	8.3%	58.3%	33.3%
Summarize themes across school action plans.	0	8.3%	0	75.0%	16.7%
Describe successes in school vaping programs.	0	8.3%	25.0%	50.0%	16.7%

Note: Number of post-sharing school action plans survey respondents = 12. Percentages may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-sharing school action plans survey, 2022-2023 school year.

Figure B.42. Extent that the session, Sharing Progress, Addressed Learning Objectives

Learning Objectives	Not at all (%)	Slightly (%)	Moderately (%)	Very Much (%)	Completely (%)
Discuss school policy and practice changes.	0	0	25.0%	62.5%	12.5%
Describe successes in school vaping programs.	0	0	37.5%	37.5%	25.0%
Identify barriers to action plan implementation.	0	0	25.0%	62.5%	12.5%

Note: Number of post-sharing school progress survey respondents = 8. Percentages may not sum to 100 percent because of rounding.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-sharing school progress survey, 2022-2023 school year.

Figure B.43. Areas of Work Addressed in Vaping ECHO Summit and Sessions

Session	No. of School team member attendees	No. of Post Session Survey Respondents (N)	Policy change (%)	Practice change (%)	Communication about smoking/vaping (%)	Equity and inclusion (%)	School team collaboration (%)	Relationships with students (%)	Making referrals (%)	Other: (please specify) (%)	None of the above (%)
Summit	26	8	62.5%	62.5%	50.0%	12.5%	37.5%	50.0%	25.0%	0	12.5%
ECHO Session 1	50	23	52.2%	69.6%	78.3%	13.0%	43.5%	34.8%	39.1%	8.7%	0
ECHO Session 2	34	22	59.1%	63.6%	81.8%	13.6%	50.0%	72.7%	18.2%	4.6%	0
ECHO Session 3	30	13	76.9%	76.9%	61.5%	0	23.1%	30.8%	7.7%	0	0
ECHO Session 4	29	22	45.5%	50.0%	72.7%	18.2%	54.5%	72.7%	13.6%	45.5%	0
ECHO Session 5	28	18	72.2%	61.1%	44.4%	11.1%	50.0%	22.2%	0	5.6%	5.6%
Sharing School Action Plans	29	12	50.0%	75.0%	33.3%	8.3%	41.7%	33.3%	16.7%	8.3%	8.3%
Sharing School Progress	23	8	62.5%	75.0%	75.0%	12.5%	62.5%	50.0%	25.0%	0	0

Note: Number of respondents varied at each session.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-session surveys, 2022-2023 school year.

Figure B.44. Willingness to Use the Knowledge Gain During Vaping ECHO for Education Session, 2022-2023 school year

Session	Number of Post-Session Survey Respondents (N)	Yes (%)	No (%)	Don't know (%)
ECHO Session 1	23	95.7%	0	4.4%
ECHO Session 2	22	86.4%	0	13.6%
ECHO Session 3	13	84.6%	0	15.4%
ECHO Session 4	22	81.8%	0	18.2%
ECHO Session 5	18	83.3%	0	16.7%
Sharing School Action Plans	12	91.7%	0	8.3%
Sharing School Progress	8	87.5%	12.5%	0

Note: Number of respondents varied at each session. Survey question: *Will you use the knowledge gained during the ECHO Session?*

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-session surveys, 2022-2023 school year.

Figure B.45. Intention to Apply Learning from Vaping ECHO for Education Session, 2022-2023 School Year

Session	Number of Post-Session Survey Respondents (N)	Yes (%)	No (%)	Don't know (%)
ECHO Session 1	23	91.3%	0	8.7%
ECHO Session 2	22	86.4%	0	13.6%
ECHO Session 3	13	84.6%	0	15.4%
ECHO Session 4	22	86.4%	0	13.6%
ECHO Session 5	18	88.9%	0	11.1%
Sharing School Action Plans	12	91.7%	0	8.3%
Sharing School Progress	8	100.0%	0	0

Note: Number of respondents varied at each session.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas post-session surveys, 2022-2023 school year.

Figure B.46. Key Themes of Participant Preference for Breakout Rooms or Large-Group Discussion

Qualitative Theme	Count	Description and Representative Quotations
Breakout Rooms	12	<p>Participants who preferred breakout rooms said it was easier to discuss and hear from people because there was more time to ask questions, share advice and talk about their specific context. Some participants also said they believed people were more likely to talk in breakout sessions. However, a few participants did say they wish they knew what the discussion in other breakout rooms included.</p> <ul style="list-style-type: none"> - <i>“I would prefer breakout groups. I feel vaping is a different challenge for different schools. A lot depends on GEO location and type of district you teach in”</i> - <i>“Breakout allowed for more people to discuss in a smaller setting, I did, however, wonder what the other schools had to say or situations they were dealing with.”</i>
Large-Group Discussion	5	<p>Participants who preferred large group discussion often did not provide a reason. However, two participants described learning more in large group and being able to listen to everyone’s ideas.</p> <ul style="list-style-type: none"> - <i>“Large group”</i> - <i>“Large group because I could listen to everyone's ideas and situations.”</i>
Single-Group Discussion	5	<p>Some participants instead identified single discussion as their preference. After discussing with the ECHO facilitation team, the evaluation team is defining this as time provided for the ECHO school teams to discuss within their own school teams.</p> <ul style="list-style-type: none"> - <i>“Single discussion because it was more personable.”</i> - <i>“We were able to attend in a large group, I enjoyed the discussions we had with our group members.”</i>
No Preference	5	<p>Some participants had no preference between the two and said they were both useful for certain contexts.</p> <ul style="list-style-type: none"> - <i>“I actually like both methods as it helps the networking part of the discussion and the follow-ups that can occur at a later date.”</i> - <i>“No, they were all insightful for various reasons.”</i>

Note: Count = Total number of respondents who provided similar qualitative responses for each theme. Some participant quotes may be counted across multiple themes if more than one distinct theme emerged from the same response. This question was unclear to participants. Four participant responses were excluded because it was unclear what option they identified. This question will be modified or removed in future evaluations. Results can be used to inform session development, but caution regarding interpretation is recommended.

Source: Kansas Health Institute analysis of Vaping ECHO for Education Pilot Initiative in Kansas follow-up survey, 2022-2023 school year.

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