

Leadership Academy At a Glance

Background

The Substance Abuse Mental Health Services Administration (SAMHSA) has conducted a series of policy academies to help state, local, tribal, and federal entities improve services for people with and at-risk for substance use and/or mental health disorders. The Smoking Cessation Leadership Center has conducted many summits using the [Performance Partnership Model](#) to encourage a wide range of groups to help smokers quit. Drawing from elements of both the Policy Academies and the Performance Partnership Model, the [Leadership Academies for Wellness and Tobacco-Free Recovery](#) state strategy sessions have produced action plans with specific strategies, expected outcomes, benchmarks and completion dates in nearly 20 states across the Nation.

States are selected and supported with technical assistance to design and conduct a two-day leadership academy that will produce an action plan for reducing smoking and fostering smoke-free living among behavioral health consumers and staff. This summit brings together participants from the behavioral health and tobacco control fields, as well as leaders in state advocacy organizations, insurance companies, academic institutions, and other entities. The meeting is preceded by training activities and planning committee calls to prepare participants. The preparations are led by SCLC staff with support from SAMHSA and our strategic partner the CDC [National Behavioral Health Network for Tobacco and Cancer Control](#). The summit will include up to 40 participants, drawn from categories suggested during the preparation phase.

The summit draws on the SAMHSA policy academy process:

1. Planning committee preparations, including a content training webinar
2. Formal academy meeting with onsite technical assistance from SCLC and NBHN staff and a SCLC-designated Results-Based Accountability facilitator
3. Post-meeting consultation and administrative support from SCLC and NBHN
4. Ongoing implementation of the action plan by the State with technical assistance as needed

Goals of Leadership Academy

The goals of the Leadership Academy are to reduce smoking rates among behavioral health consumers and staff and to create an environment of cooperation and collaboration among the fields of public health, including tobacco cessation, mental health, addiction treatment, and cancer control that will improve wellness among behavioral health populations. In addition, the summits are models for future collaborations bridging public health and behavioral health.

The Leadership Academy State Strategy Session Summit

The purpose of the Leadership Academy on the summit day is to develop an action plan for a State to reduce smoking prevalence among people with behavioral health disorders.

By the end of the summit, the partners will have answered the following questions:

1. Where are we now? (Baseline)
 - Adopt a baseline to measure progress of smoking prevalence among people with mental illness and substance use disorders.
 - Understand the facts about their State and tobacco dependence treatment
 - Understand the basic science of smoking cessation and innovations in treatment
2. Where do we want to be and by when? (Target)
 - Agree on a single measurable outcome
 - Agree on the what versus the how
 - Adopt a goal of reducing smoking prevalence among people with behavioral health disorders and set a target (% in # of years)
3. How will we get there? (Multiple Strategies)
 - Develop an action plan with multiple strategies to achieve the goal and the target
4. How will we know if we are getting there? (Evaluation)
 - Decide on what evidence will be gathered to track progress towards the goal and the targets
 - Include both process and outcome measures
5. What will each of us do and by when? (Next Steps)
 - Commit to the next steps to implement the action plan (at least 3 months out with longer milestones identified)

Process

Through a competitive application process, states with demonstrated readiness to proceed with cross-agency partnerships, as determined by SAMHSA and SCLC, are chosen to participate.

Selection criteria will include:

- Core capacity and readiness
- Ability to identify a baseline
- Geographic diversity
- Cross-sector partnership ability - existing state infrastructure and potential to build relationships between public health, tobacco control and behavioral health agencies
- Demonstrated commitment to wellness and smoking cessation
- Ability to pursue sustainability and achieve the target set by the group; and willingness to share lessons learned

A convener will be identified in each state and trained by SCLC staff to understand the role. The four question Performance Partnership model will be used for the academy meeting, establishing baseline, target, strategies, and impact measurement plan. A facilitator who is an expert in the model will be engaged for each meeting and will be supported during the summit by a lead recorder.

Pre-summit calls will provide planning committee with a full understanding of pertinent tobacco and behavioral health issues. It is recommended that the lead person for each state be a mental health and/or substance use, public health, or tobacco control stakeholder who is well-connected in the state. **Participants must include at least one executive level decision maker from the state's tobacco control, mental health, and substance use divisions.** Other participants, for a total of 20-40, may come from the following:

- State tobacco quit line (vendor)
- State Medicaid agency
- Insurance agencies/MCOs/ACOs
- Consumer organizations, hospitals, healthcare systems
- Behavioral health and primary care provider organization
- Comprehensive cancer control organizations/coalition
- Nonprofit agencies including those serving vulnerable populations such as people experiencing homelessness
- VA and/or active military (if your state has a large contingent of bases)
- Mental and addictions disorders treatment advocacy groups
- State department epidemiologist for evaluation or statistical analysis
- Additional state's choice of priority populations such as Tribal Nations, the justice involved, low or lower Social Economic Status (SES), or those in rural settings
- SAMHSA tobacco policy liaison and/or Regional Administrator

States are notified of their selection to participate at least 3 months in advance of a summit. Each state will produce a draft action plan by the end of the summit. Technical assistance will be provided before, during, and after the meeting by the SCLC and NBHN staff. Six months after the summit, states will fill out a survey to capture progress, challenges, etc. for SAMHSA with quantitative and qualitative data.

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