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Smoking Cessation  
Leadership Center



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University of California  
San Francisco

*Tobacco Free Policies and Interventions in  
Behavioral Health Care Settings*

Chad D. Morris, PhD  
Timothy Stacey, LPC-S

6/18/19

# Moderator

**Catherine Saucedo**

Deputy Director

Smoking Cessation Leadership Center  
University of California, San Francisco

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# Disclosures

This UCSF CME activity was planned and developed to uphold academic standards to ensure balance, independence, objectivity, and scientific rigor; adhere to requirements to protect health information under the Health Insurance Portability and Accountability Act of 1996 (HIPAA); and include a mechanism to inform learners when unapproved or unlabeled uses of therapeutic products or agents are discussed or referenced.

The following faculty speakers, moderators, and planning committee members have disclosed they have no financial interest/arrangement or affiliation with any commercial companies who have provided products or services relating to their presentation(s) or commercial support for this continuing medical education activity:

**Christine Cheng, Brian Clark, Jennifer Lucero, MA, MS, Jennifer Matekuare, Chad D. Morris, PhD, Jessica Safier, MA, Catherine Saucedo, Steven A. Schroeder, MD, Timothy Stacey, LPC-S**

# Thank you to our funders



Robert Wood Johnson Foundation



**truth initiative**  
INSPIRING TOBACCO-FREE LIVES



**National Behavioral Health Network**  
*For Tobacco & Cancer Control*

***SAMHSA***

Substance Abuse and Mental Health  
Services Administration

# Housekeeping

- All participants will be in **listen only mode**.
- Please **make sure your speakers are on** and adjust the volume accordingly.
- If you do not have speakers, please request the dial-in via the chat box.
- **This webinar is being recorded** and will be available on SCLC's website, along with the slides.
- **Use the chat box to send questions** at any time for the presenters.

# CME/CEU Statement

## **Accreditation:**

The University of California, San Francisco (UCSF) School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

UCSF designates this live activity for a maximum of *1.5 AMA PRA Category 1 Credit™*. Physicians should claim only the credit commensurate with the extent of their participation in the webinar activity.

**Advance Practice Registered Nurses and Registered Nurses:** For the purpose of recertification, the American Nurses Credentialing Center accepts *AMA PRA Category 1 Credit™* issued by organizations accredited by the ACCME.

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Course meets the qualifications for 1.5 hours of continuing education credit for **LMFTs, LCSWs, LPCCs, and/or LEPs** as required by the California Board of Behavioral Sciences.

**Respiratory Therapists:** This program has been approved for a maximum of 1.5 contact hours Continuing Respiratory Care Education (CRCE) credit by the American Association for Respiratory Care, 9425 N. MacArthur Blvd. Suite 100 Irving TX 75063, Course # 181426000.

# American Association for Respiratory Care (AARC)



- Free Continuing Respiratory Care Education credits (CRCEs) are available to Respiratory Therapists who attend this live webinar
- Instructions on how to claim credit will be included in our post-webinar email

# Behavioral Health Accreditation

California Association of Marriage and Family Therapists (CAMFT)

This webinar is accredited through the CAMFT for up to **1.5 CEUs** for the following eligible California providers:

- Licensed Marriage and Family Therapists (LMFTs)
- Licensed Clinical Social Workers (LCSWs)
- Licensed Professional Clinical Counselors (LPCCs)
- Licensed Educational Psychologists (LEPs)

Instructions to claim credit for these CEU opportunities will be included in the post-webinar email and posted to our website.



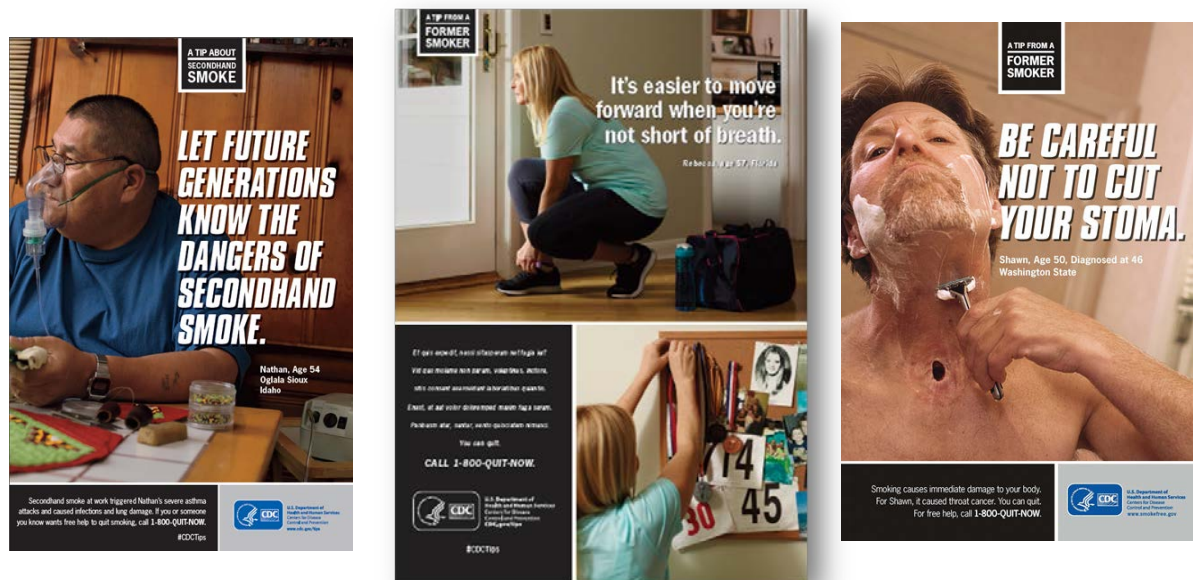
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Visit [CABHWI.ucsf.edu](https://CABHWI.ucsf.edu) for more information.

# Tips® Campaign Overview



1. CDC. Current Cigarette Smoking Among Adults—United States, 2005–2014. *MMWR* 2015;64(44):1233–40
2. The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General. Atlanta: HHS, CDC, NCCDPHP, OSH, 2014

## Free 1-800 QUIT NOW cards

Take Control  
**1-800-QUIT-NOW**  
Call. It's free. It works.  
1-800-784-8669  
For details on your state services, go to: <http://map.naquitline.org>



- ✓ Refer your clients to cessation services



- The California Behavioral Health and Wellness Initiative (CABHWI) helps to create equal access to cessation services for all smokers and tobacco-free recovery in California, specifically those with a behavioral health condition.
- UCSF's Smoking Cessation Leadership Center provides in-person training, customized virtual training and education through webinars, technical assistance, and social marketing targeting behavioral health agencies, providers, and the clients they serve throughout the state of California.
- Free CME/CEUs are available for all eligible California providers who join SCLC's live webinars and enduring/recorded (14 units). The access code for CA providers is: **CADPH23**
- <http://CABHWI.ucsf.edu>



- Funding opportunities for 3 rounds of up to 15 agencies each serving behavioral health population
  - The total amount of funding available is up to \$540,000 to fund up to 15 projects at \$36,000 each for an 18-month grant period
- Applicants must be residential behavioral health treatment, recovery & rehabilitation services, or other health or social service organizations. Minimum 20 bed residential
- 18 months comprehensive training & technical assistance included to help each cohort agency:
  - 1) adopt and implement tobacco-free campus policies &
  - 2) systematically implement evidence based tobacco cessation treatment
- The RFA closes **July 31, 2019**.
- The mandatory letter of intent for potential applicant is **due July 9, 2019 by 5 pm**.
- Visit [CABHWI.ucsf.edu](http://CABHWI.ucsf.edu) for link to apply

**Mandatory letter of intent due July 9, 2019!**

# Presenter

## **Chad D. Morris, PhD**

Professor of Psychiatry,  
University of Colorado- School of Medicine

Director of the Behavioral Health &  
Wellness Program



# Presenter

**Timothy Stacey, LPC-S**

Integrated Care Systems Program  
Manager

Integral Care, Austin, TX





Behavioral Health &  
Wellness Program

# Tobacco Free Policy Fundamentals

Chad Morris, PhD



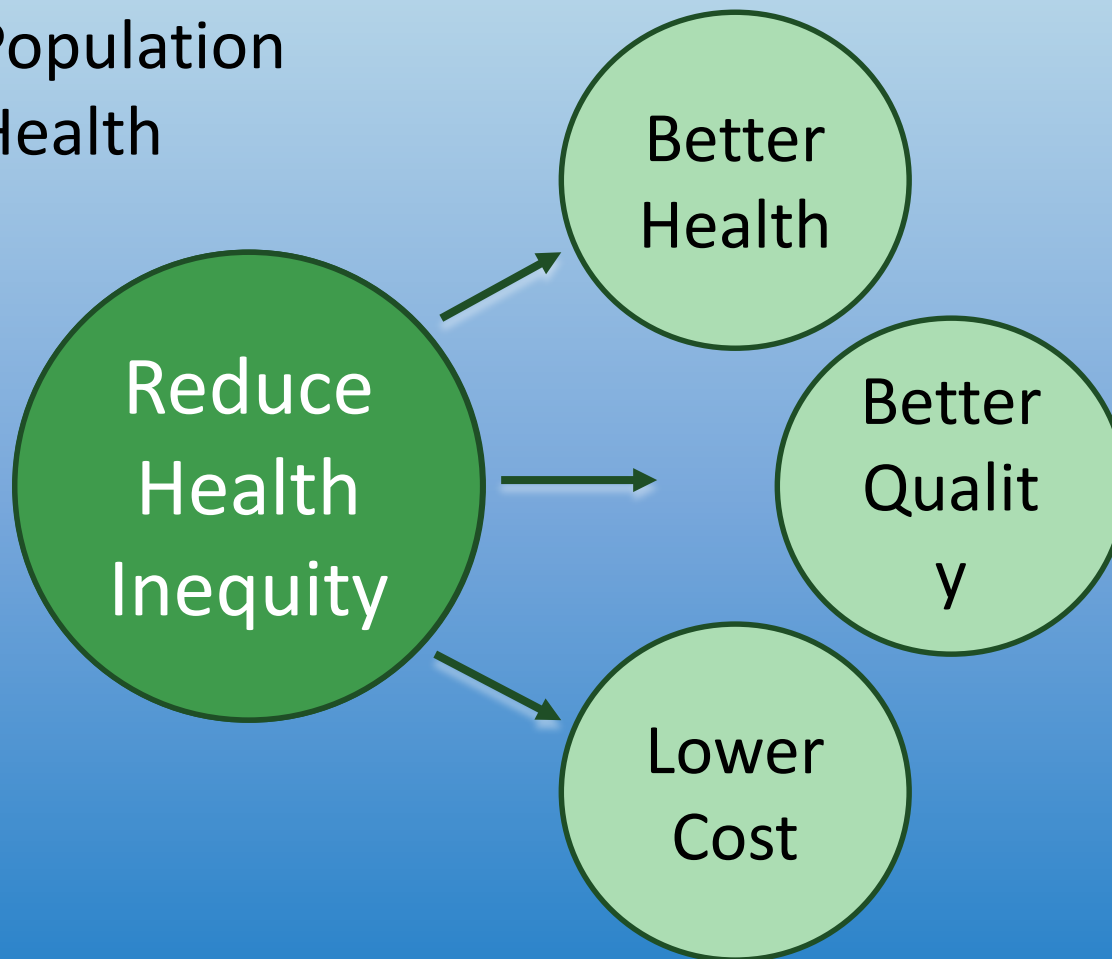
School of Medicine

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ANSCHUTZ MEDICAL CAMPUS

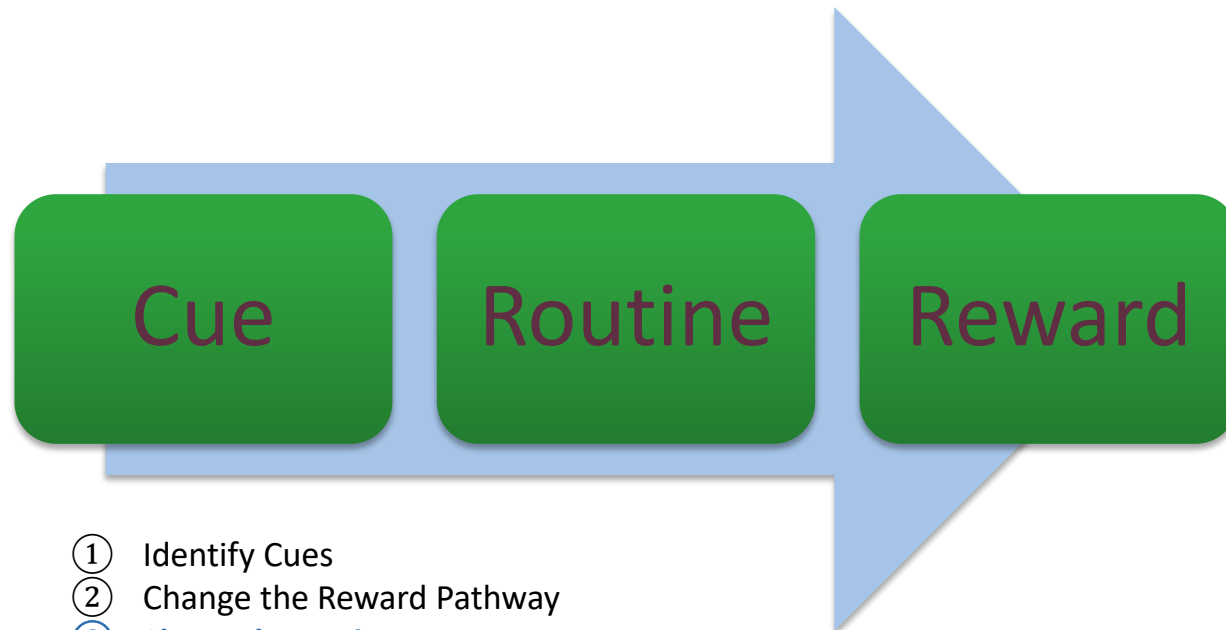




Population  
Health

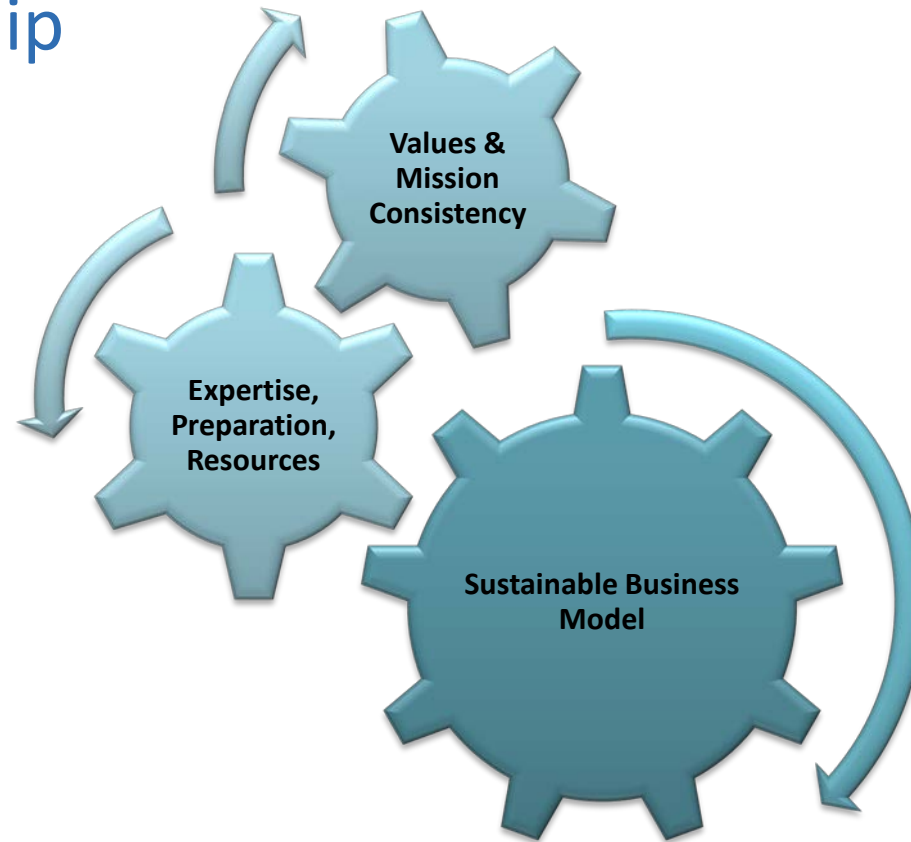


# Creating Healthy Habits



- ① Identify Cues
- ② Change the Reward Pathway
- ③ **Shape the Environment**

# Leadership Buy-In



# Tobacco Free Policy is not Prohibition

*“We are developing this policy to provide a healthy and safe environment for employees, clients, and visitors and to promote positive health behaviors.”*

*“We are not saying you must quit smoking. But we are saying you cannot use tobacco while you are at work. If you are ready to quit, we want to support your efforts.”*



# Return on Investment

- Facilities
- Staff
- Clients/Patients
- Visitors



## A Parallel Process

- Client, visitor, and staff policy
- Client and staff resources
  - Facilities
  - Incentives
  - Medications
  - Peer support





Convene Your Wellness Committee



Provide Education



Create Your Change Plan



Offer Tobacco Cessation Services



Draft Your Policy



Launch Your Policy



Communicate Your Plan



Enforce Your Policy



Build Community Support



Evaluate Your Program

[www.bhwellness.org/resources/toolkits](http://www.bhwellness.org/resources/toolkits)

## Convene a Wellness Committee

- One of four essential characteristics of effective, long-lasting tobacco free policies
- Identify, recruit, train, deploy, & maintain Wellness Champions
- Opinion leaders- pro & con



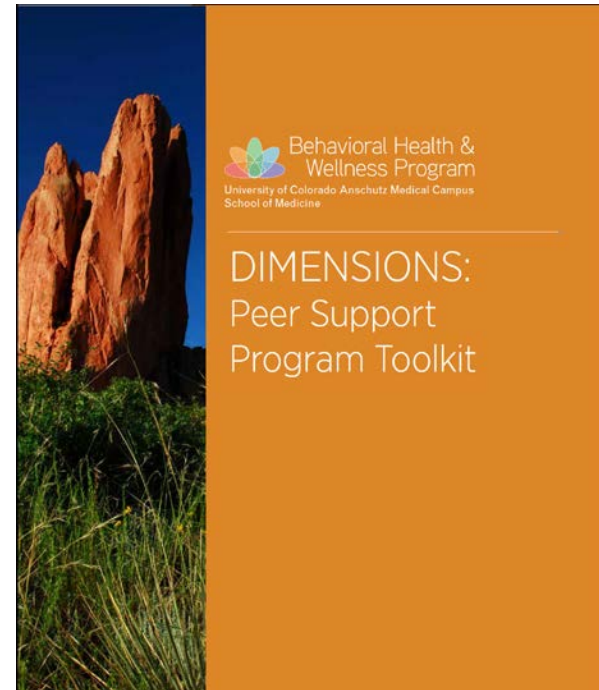


# Wellness Committee & Composition



# Peer Support

“A peer provider is a person who uses his or her lived experience, plus skills learned in formal training, to deliver services in health and public health settings to promote mind-body recovery and resiliency.”



<http://www.bhwellness.org/resources/toolkits/>

# Create a Change Plan

- Begins with a needs assessment
- Identify obstacles to successful implementation
- Three primary activities
  1. Construct a logic model
  2. Build a timeline
  3. Create a budget



# The Logic Model



- A systematic and visual way to present and share relationships between resources and outcomes
- Quickly identify resource gaps
- Reinforces a strengths-based approach to organizational change



# Timeline

- From Planning to Launch is 6-12 months
- Identify and communicate milestones as a means of measuring and celebrating success
- Provides means to appropriately allocate resources



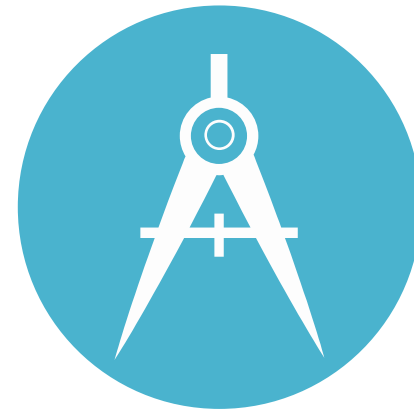
# Budget

- A return on investment (ROI) implies the necessity of an “investment”
- Identify potential costs
- Identify potential resources to mitigate costs (e.g., billing, grants)
- Include anticipated savings
- Consider sustainability



## Draft Your Policy

- Rationale for policy
- Complete vs. partial prohibitions
- Combustible vs. other products
- Who is included
- Where the policy is in effect
- Treatment resources
- Alignment with current policies
- Consequences of non-compliance



## Inclusion of Electronic Nicotine Devices

### Model Language:

“E-cigarettes, electronic vaping devices, personal vaporizers, electronic nicotine delivery systems, or such devices which deliver nicotine or other substances to a person inhaling from the device.”





## Clearly Communicate Your Intentions

- Internet, Intranet
- Pay check messages
- Signage
- Letter from leadership
- Pamphlets for staff & clients
- Notice boards
- HR policies and procedures
- Posters and/or banners inside and outside building
- Appointment card announcements





# Build Community Support

- Inform referrals sources and key partners
- Identify which organizations are part of a tobacco-free continuity-of-care
- Helps create a culture of support and recovery



# The Health Neighborhood



# Provide Education

- Behavioral health and nicotine addiction
- Pharmacotherapy and counseling
- Brief screening & assessment tools
- Treatment & discharge planning
- Priority populations
- Community referrals
  - e.g., quitlines



# Evidence-Based Guidance



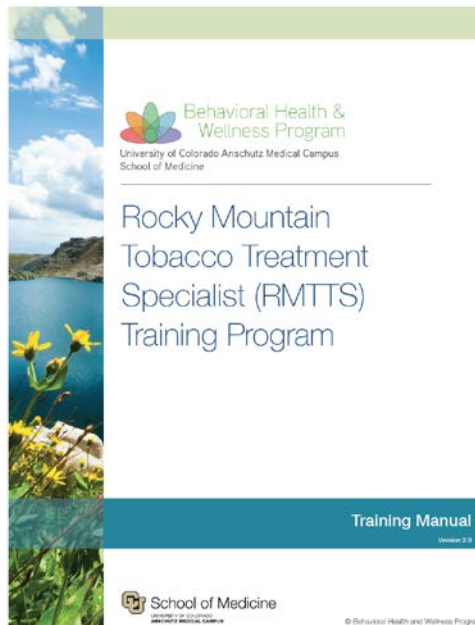
## Supplements

- Behavioral Health
- Youth (Ages 11-18)
- Young Adults (18-25)
- Low-Income
- Pregnant and Post Partum

## MI Video Modules

<http://www.bhwellness.org/resources/toolkits/>

# Rocky Mountain Tobacco Treatment Specialist (RMTTS) Training Program



- Interactive, 4-day course
- Graduates will leave with the confidence and skills to effectively treat tobacco dependence in any healthcare setting

**SAVE THE DATE:**  
October 14-17, 2019



- An organization of providers dedicated to the promotion of and increased access to evidence-based tobacco treatment for the tobacco user
- Listserv provides up-to-date discussion and expert information

<http://www.attud.org>



## Cessation Rates Across Interventions

Treatment Format	Abstinence Rate
Unaided	4-7%
Self-Help	11-14%
Quitline	11-15%
Individual counseling	15-19%
Group counseling	12-16%
Medication alone	22%
Medication/Counseling	25-30%

# Co-Treatment

- Co-Treatment is the only adequate solution
- Bio-psycho-social underpinning are similar
- And unrelated to the age, sex, race and ethnicity, gender identity, or culture



# Medication Assisted Treatment (MAT)



- Combination of behavioral interventions and medications to treat substance use disorders
- Highly effective treatment option for individuals with alcohol, opioid, or **tobacco dependence**
- Reduces illicit drug use and overdose deaths

# Launch Your Policy

- Practice day
- Signage
- Enforcement
- Kick-off Celebration



# Enforce Your Policy

- Employee and client violations
  - Progressive
  - Aligned with other, already existing policies
- Ensure all employees & clients are aware of procedures and protocols
- Create and practice enforcement scripts
- Consistency is key

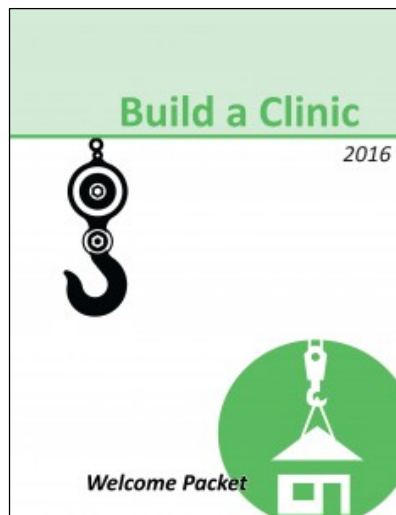


# Evaluate Your Program

- Evaluation begins during the planning phase
- Conduct regular post-implementation evaluations
- Utilize Plan-Do-Study-Act cycles

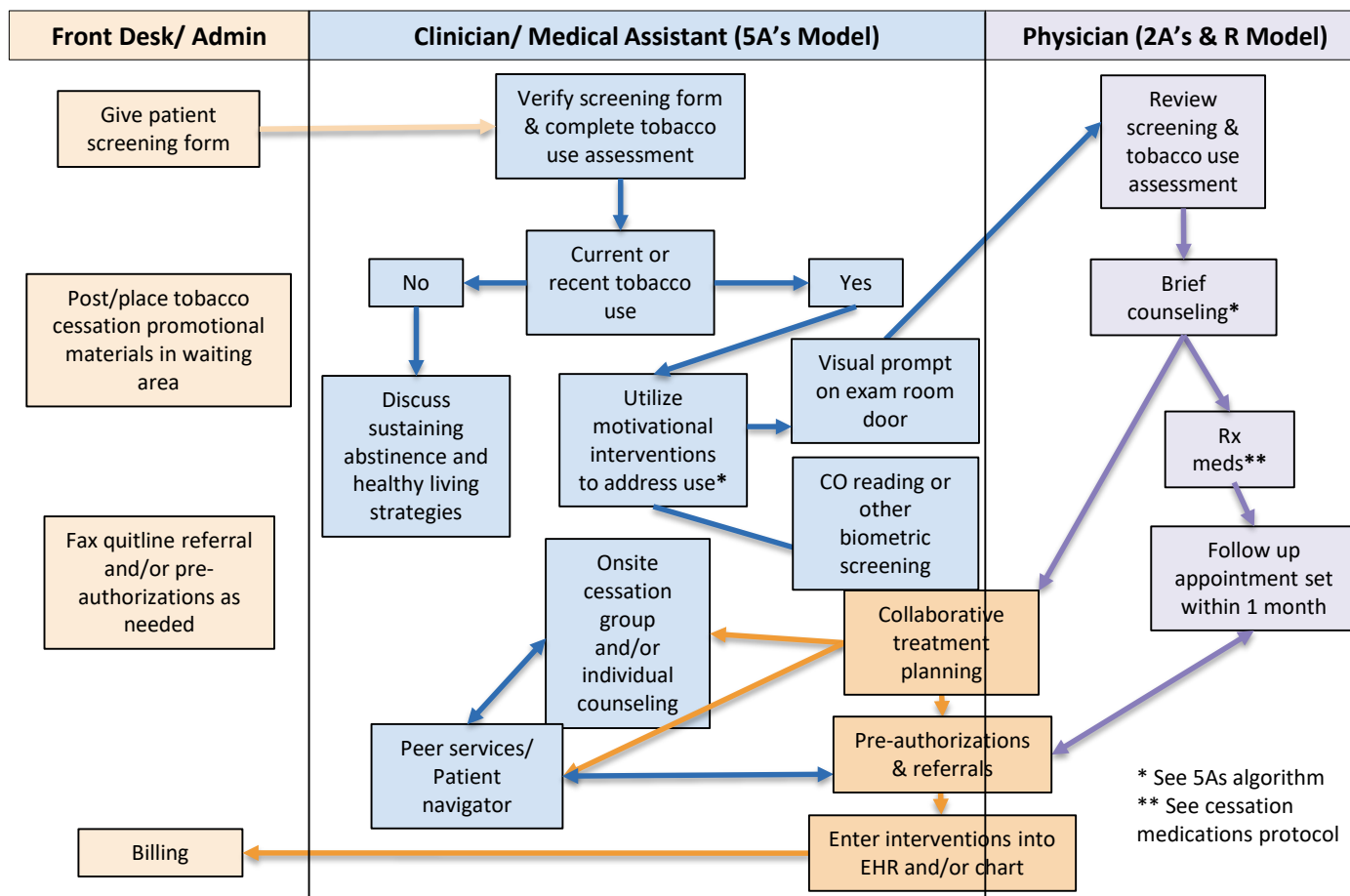


# Communities of Practice



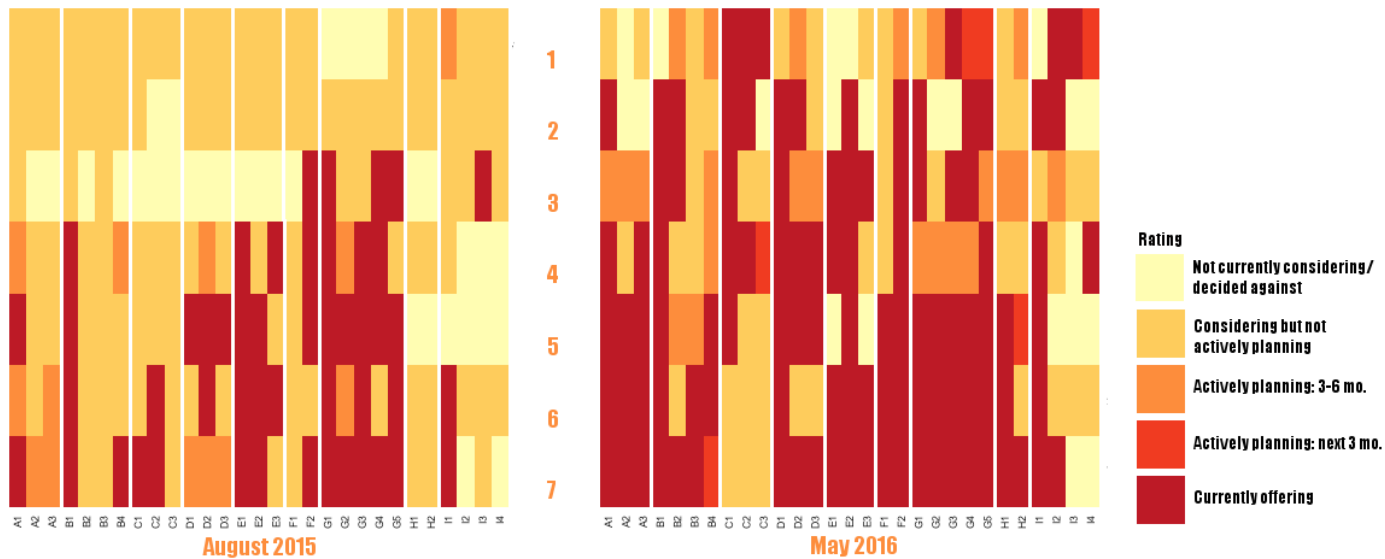
- Evidence-based guidance
- Peer-to-peer dialogue
- Case-based learning
- Scalability

# Tobacco Cessation Workflow





# Prepared Practices Turning Up the Heat





# Behavioral Health & Wellness Program

303.724.3713

[bh.wellness@ucdenver.edu](mailto:bh.wellness@ucdenver.edu)

[www.bhwellness.org](http://www.bhwellness.org)



Behavioral Health and  
Wellness Program



BHWP\_UCD

# Learning Objectives

- Learn how to integrate tobacco cessation interventions into clinical practice.
- Identify and overcome common barriers experienced during tobacco free policy implementation.

# Integral Care's Tobacco Free Policy

- Integral Care is the Local Mental Health Authority in Travis County (Austin, TX)
- Became 100% tobacco free campus in 2010
- Received Chronic Disease Management Grant from 2013-2016
  - Included the development of tobacco cessation services
  - Tobacco cessation services and trainings have evolved since the initial policy was implemented



# Tobacco Use Assessments

- Tobacco Use Assessment (TUA)
  - Independent form in electronic health record
  - All clients receive TUA- regardless of tobacco use status
    - Annually for clients that do not use tobacco products
    - Every 3 months for clients that use tobacco products
    - Every month for clients receiving nicotine replacement therapy from Integral Care
  - TUA assesses:
    - Current tobacco use status
    - Type/amount of tobacco used
    - Previous quit attempts
      - How many times/what modalities have you used in the past?
    - Readiness to quit



# Access to Cessation Medications

- Nicotine replacement therapy (NRT)
  - At Integral Care – NRT is available at no cost to all clients over the age of 18 who wish to quit tobacco
  - Patches, gum lozenges- available through the pharmacy
  - Electronic nicotine replacement therapy voucher
    - Two weeks of NRT provided at each encounter
    - Staff must have completed tobacco training to complete vouchers
    - Staff must document tobacco education provided at completion of voucher
    - Voucher “final approved” by psychiatrist



# Access to Cessation Medications

- NRT access- Integral Care includes purchasing of NRT in annual budget
  - Other ways to access NRT
    - Quitline
    - Community Partners
    - Grants
- Referrals to psychiatrist for prescription medications
  - Chantix/Wellbutrin
  - Staff may accompany clients to psychiatric appointments

# Tobacco Cessation Resources

- Tobacco Cessation resources easily available to staff
  - Online resource library
    - Quit plans
    - Identifying triggers
    - What happens when you quit smoking
    - I am not ready to quit but...
  - Wellness groups
    - Higher attendance with groups that focus on health/wellness, which includes tobacco cessation
  - CO Monitors



# Tobacco Cessation Interventions Into Clinical Practice

- Training
  - Integral Care has 4 hour Tobacco Cessation Intervention Training- offered quarterly
  - Diverse training appropriate for all staff
  - Refresher training available online
- Topics Covered in Training
  - Tobacco use and serious Mental Illness
  - Tobacco use/prevention for children and adolescents
  - Tobacco use for individuals with intellectual and developmental disabilities
  - Tobacco use and psychiatric medications
  - Tobacco cessation medications
  - Assisting with quit attempts
  - Documentation of tobacco cessation services



# Barriers to Tobacco Free Policy/Services

- Individuals continuing to use tobacco on tobacco free campus
  - Signage
  - Opportunity to provide intervention vs “tobacco police”
  - Everyone’s responsibility to enforce tobacco free policy
- Maintaining staff buy in
  - Staff resistant to tobacco free policies/interventions
  - ADKAR Model
    - Awareness for need to change
    - Desire to support the change
    - Knowledge of how to change
    - Ability to demonstrate skills and behavior
    - Reinforcement to make the change last
  - Targeted trainings
  - Obtaining staff buy in is ongoing process

# Q&A

- Submit questions via the [chat box](#)



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- FREE CME/CEUs of up to 1.5 credits are available to all attendees who participate in this live session. Instructions will be emailed after the webinar.



## Save the Date

- SCLC's next live webinar is co-hosted by ACS
- July 31, 2019 at 1:00 pm EDT
- Smoke-Free Housing Project: Early Lessons Learned
- Registration coming soon!

# SCLC Recorded Webinar Promotion

SCLC is offering FREE CME/CEUs for our 2016 and 2017 recorded webinar collections for a total of 19.5 units.

Visit SCLC's website at:

<https://smokingcessationleadership.ucsf.edu/webinar-promotion>  
for more information.

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- Call us toll-free at **877-509-3786**
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