



END-OF-YEAR REPORT

January 1, 2020 – June 30, 2020
IA (OPASS-20-18579-G)

“MDQuit Resource Center: Training, Implementation, and Evaluation
of a Multi-Session Behavioral Health Smoking Cessation Initiative
for Maryland Behavioral Health Programs”

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All staff are part-time on this project

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Overview

This progress report reflects activities completed by Maryland Resource Center for Quitting Use and Initiation of Tobacco (MDQuit) during the reporting period from January 1, 2020 to June 30, 2020 according to the Interagency Agreement between the Behavioral Health Administration (BHA) and MDQuit.

Date	Activity	Notes
January 2020	MDQuit Team Meetings	MDQuit staff dedicates a portion of meeting time to discuss, review, and plan BHA project aspects.
January 22, 2020	Training Consultation with Helping Up Mission: Phone Call	Dr. DiClemente, Project Director Roy, and Project Assistant Link spoke with Norman Robinson and Matt Joseph from Helping Up Mission to determine peer training needs.
January 30, 2020	MDQuit Best Practices Conference	MDQuit hosted its 14 th Best Practices Conference with a focus on addressing initiation and cessation of nicotine addiction among youth and special populations.
February 2020	MDQuit Team Meetings	MDQuit staff dedicates a portion of meeting time to discuss, review, and plan BHA project aspects.
February 10, 2020	Phone Call with Peer Recovery Specialist at Helping Up Mission	Dr. DiClemente, Project Director Roy, and Project Assistant Link had a call with Todd Starkey to discuss potential content and participation in peer videos.
February 13, 2020	Phone Call with Peer Recovery Specialist at Instruments of Healing	Dr. DiClemente and Project Director Roy had a call with Sabrina Schram to discuss potential content and participation in peer videos.
February 20, 2020	Consultation with Mountain Manor: Phone Call	Project Director Roy and Project Assistant Link spoke with Mountain Manor Provider Patricia Allford to discuss how MDQuit can support tobacco cessation at Mountain Manor.
February 25, 2020	Consultation with Gaudenzia: Site Visit	Dr. DiClemente and Project Director Roy visited Gaudenzia to meet with Program Director Secret Scott and her team to learn about tobacco use at Gaudenzia and discuss strategies to decrease tobacco use on site.
February 26, 2020	Consultation with Cameo House: Phone Call	Dr. DiClemente and Project Director Roy spoke with Cameo House Administrative Specialist Shya Williams to discuss how MDQuit can support tobacco cessation at Cameo House.
February 28, 2020	BH2 Single and Multiple Session Provider Training (UMBC)	Training was hosted at UMBC's South Campus Location by Project Assistant Lee and Consultant Pegram. Three (3) trainees completed the half-day single-session and four (4) completed the full-day multiple-session training for a total of seven (7) individuals trained.



Date	Activity	Notes
February 28, 2020	NBHN Technical Assistance CoP: Phone Call	Dr. DiClemente, Project Director Roy, and Project Coordinator Sutherland joined MDH CTCP staff in National Behavioral Health Network for Tobacco and Cancer Control’s (NBHN) Community of Practice (CoP) to discuss strategies to further tobacco cessation in the behavioral health population.
March 2020	MDQuit Team Meetings	MDQuit staff dedicates a portion of meeting time to discuss, review, and plan BHA project aspects.
March 3, 2020	Substance-Using Pregnant Women and Integrated Care Workshop: Presentation	Dr. DiClemente gave a presentation on Substance Exposed Pregnant Women, highlighting tobacco risks, at Anne Arundel County Health Department Infant Mortality Review Committee’s Substance-Using Pregnant Women and Integrated Care Workshop.
March 5, 2020	BH2 Single Session Provider Training (Mountain Manor)	Training was conducted at pregnant women and women with children provider Mountain Manor by Dr. DiClemente. Nine (9) trainees attended and completed the half-day single-session training.
March 6, 2020	BH2 Single Session Provider Training (Chrysalis House)	Training was conducted at pregnant women and women with children provider Chrysalis House by Dr. DiClemente. Ten (10) trainees attended and completed the half-day single-session training.
March 10, 2020	CAYAS Conference: Workshop	Dr. DiClemente conducted a workshop on Vaping and Nicotine Addiction at BHA’s 16 th Annual Child, Adolescent & Young Adult Services Conference (CAYAS).
March 10, 2020	UMBC New Media Studio Meeting	Dr. DiClemente, Project Director Roy, and Project Assistant Moran met with New Media Studio Manager Dustin Roddy to discuss peer video shooting and editing.
March 11, 2020	BH2 Single Session Provider Training for Peer Recovery Specialists (HUM)	Training was conducted for peer recovery specialists at Helping Up Mission (HUM) by Dr. DiClemente and Project Assistant Link. Thirty-two (32) trainees attended and completed the half-day single-session training.
<i>March 19, 2020</i>	<i>UMBC Campus Closure</i>	<i>UMBC closed its campus due to the COVID-19 Outbreak. All of the following activities were conducted remotely.</i>
March 30, 2020	Training Consultation with Back on My Feet: Phone Call	Dr. DiClemente, Project Director Roy, and Project Assistant Link spoke with Zoe Cumberland and Taylor Wright from Back on My Feet to determine peer training needs.
April 2020	MDQuit Team Meetings	MDQuit staff dedicates a portion of meeting time to discuss, review, and plan BHA project aspects.



Date	Activity	Notes
April 1, 2020	Washington County Welfare Workshop: Presentation – CANCELLED	Dr. DiClemente was scheduled to present on The Rise in Youth Substance Use at the Washington County Welfare Workshop.
April 7, 2020	Webinar #2	MDQuit hosted Webinar #2, titled: Creating a Culture of Change: Tobacco Cessation Strategies for Long-Term Treatment, with guest presenter, Dr. Amber Norwood. Seventy-seven (77) individuals registered for the webinar and fifty-three (53) participated live. Additional details can be found in the “Community Engagement and Webinars” section.
April 15, 2020	NADAAC Peer Recovery Support Webinar: Presentation	Dr. DiClemente presented a Peer Recovery Support Webinar, titled: Principles of Addiction and Recovery and the Process of Change. The webinar was hosted by the Association for Addiction Professionals (NAADAC).
April 21, 2020	Phone Call with Peer Recovery Specialist at Peer Wellness and Recovery Services	Dr. DiClemente and Project Director Roy had a call with Miriam Yarmolinsky to discuss potential content and participation in peer videos.
April 22, 2020	BH2 Single and Multiple Session Provider Training (UMBC) – CANCELLED	Training was scheduled to be hosted at UMBC’s South Campus Location.
April 28, 2020	Online BH2 Single Session Provider Training for Peer Recovery Specialists (BOMF): Part I	Part I (90 minutes) of the online training was conducted for peer recovery specialists at Back on My Feet (BOMF) by Dr. DiClemente, Project Director Roy, and Project Assistant Link. Twelve (12) trainees participated in the first half of the single-session training.
April 30, 2020	Online BH2 Single Session Provider Training for Peer Recovery Specialists (BOMF): Part II	Part II (90 minutes) of the online training was conducted for peer recovery specialists at Back on My Feet (BOMF) by Dr. DiClemente, Project Director Roy, and Project Assistant Link. Twelve (12) trainees participated in the second half of the single-session training.
May 2020	MDQuit Team Meetings	MDQuit staff dedicates a portion of meeting time to discuss, review, and plan BHA project aspects.
May 6, 2020	Behavioral Health Administration Annual Conference: Presentation – CANCELLED	Dr. DiClemente was scheduled to give aa presentation at the Behavioral Health Administration’s Annual Conference.



Date	Activity	Notes
May 8, 2020	Practice for Scripted Peer Video #1: Virtual Meeting	Video rehearsal conducted with peer recovery specialists Matt Joseph and Todd Starkey, during which Dr. DiClemente, Project Director Roy, and Project Assistant Link provided direction for acting out Peer Video Script #1.
May 8, 2020	Practice for Scripted Peer Video #2: Virtual Meeting	Video rehearsal conducted with peer recovery specialists Sabrina Schram and Matt Joseph, during which Dr. DiClemente, Project Director Roy, and Project Assistant Link provided direction for acting out Peer Video Script #2.
May 8, 2020	Practice for Scripted Peer Video #3: Virtual Meeting	Video rehearsal conducted with peer recovery specialists Miriam Yarmolinsky and Sabrina Schram, during which Dr. DiClemente, Project Director Roy, and Project Assistant Link provided direction for acting out Peer Video Script #3.
May 28, 2020	Interview Video #1: Conference Call & Video Recording	Dr. DiClemente, Project Director Roy, and Project Assistant Link conducted a video interview with peer recovery specialist Sabrina Schram.
May 28, 2020	Interview Video #2: Conference Call & Video Recording	Dr. DiClemente, Project Director Roy, and Project Assistant Link conducted a video interview with peer recovery specialist Matt Joseph.
June 2020	MDQuit Team Meetings	MDQuit staff dedicates a portion of meeting time to discuss, review, and plan BHA project aspects.
June 2, 2020	Interview Video #3: Conference Call & Video Recording	Dr. DiClemente and Project Director Roy conducted a video interview with peer recovery specialist Miriam Yarmolinsky.
June 3, 2020	Interview Video #4: Conference Call & Video Recording	Dr. DiClemente, Project Director Roy, and Project Assistant Link conducted a video interview with peer recovery specialist Todd Starkey.
June 5, 2020	BH2 Single and Multiple Session Provider Training (UMBC) – CANCELLED	Training was scheduled to be hosted at UMBC’s South Campus Location.
June 10, 2020	Prenatal/Postpartum Behavioral Health Network Meeting: Presentation	Dr. DiClemente and Project Director Roy participated in the meeting. Dr. DiClemente delivered a presentation on Tobacco Use and COVID-19.



Date	Activity	Notes
June 19, 2020	BH2 Single Session Provider Training (Talbot County) – CANCELLED	Training was scheduled to be hosted at Talbot County Health Department.
June 26, 2020	Webinar #3	MDQuit hosted Webinar #3, titled: CHIME IN!: Possibilities for a Positive Recovery Framework to Enhance Smoking Cessation Efforts, with guest presenter Dr. Daniel Knoblach. Forty-six (46) individuals registered for the webinar and nineteen (19) participated live. Additional details can be found in the “Community Engagement and Webinars” section.
June 30, 2020	Online BH2 Single Session Provider Training (Centralized)	Online training was conducted by Dr. DiClemente, Project Director Roy, and Project Assistant Link. Forty-nine (49) individuals registered for the training and thirty-two (32) participated live in the single session training.

Trainings

MDQuit will provide four Breaking the Habit in Behavioral Health (BH2) Smoking Cessation trainings on a regional basis; and six centralized trainings to providers, staff and administrators will be offered. Evaluation of trainee attitudes, skills, and satisfaction as well as post-training implementation of cessation activities will be conducted by survey and interviews by the Contractor.

Throughout this funding period, MDQuit continued to offer the BH2 training curriculum to behavioral health providers, staff, administrators, and agencies across the state. Trainings are promoted at all meetings, events, other trainings, and via communication with stakeholders and partners. Both the single session training format, which offers trainees a half-day training to deliver the brief, single-session cessation intervention, and the combined training format, which offers trainees a full-day training to deliver the single-session and more extensive multiple-session group interventions, were employed. MDQuit updated the language in the presentation materials according to the Positive Language Guidelines issued by the Substance Use Disorders Institute and the training provider manuals with up-to-date information on smoking cessation treatments.

Trainings Conducted

Over the full contract year, from July 1, 2019 to June 30, 2020, a total of five (5) centralized/on-site trainings and five (5) regional trainings were conducted (Table 1). Of these, two (2) centralized trainings and four (4) regional trainings were conducted during this reporting period. Three (3) CEUs were awarded to trainees who attended the single session and six (6) CEUs were awarded to trainees who attended the multiple session. A total of one hundred and seventy-four (174) individuals from sixty-seven (67) agencies were trained over the contract year, with one hundred and two (102) individuals from thirty-five (35) agencies trained during the current reporting period.



Table 1. BH2 Trainings Conducted

Date	Type	Agency and Location	Number of agencies			Number of trainees		
			Single Session	Multiple Session	Total	Single Session	Multiple Session	Total
PREVIOUS REPORTING PERIOD: JULY 1, 2019 – DECEMBER 31, 2019								
10/11/19	Centralized: Combined Single/ Multiple Session	UMBC, South Campus	0	11	11	0	13	13
11/13/19	Centralized: Combined Single/ Multiple Session	UMBC, South Campus	3	9	12	3	18	21
12/13/19	Centralized: Combined Single/ Multiple Session	UMBC, South Campus	2	7	9	2	8	10
12/13/19	Regional: Combined Single/ Multiple Session	Arundel Lodge Inc., Edgewater, MD	1	2	3	9	19	28
CURRENT REPORTING PERIOD: JANUARY 1, 2020 – JUNE 30, 2020								
02/28/20	Centralized: Combined Single/ Multiple Session	UMBC, South Campus	2	3	5	3	4	7
03/05/20	Regional: Single Session (Pregnant Woman and Women with Children Provider)	Mountain Manor, Emmitsburg, MD	2	N/A	2	9	N/A	9
03/06/20	Regional: Single Session (Pregnant Woman and Women with Children Provider)	Chrysalis House, Crownsville, MD	1	N/A	1	10	N/A	10
03/11/20	Regional: Single Session (Peer Recovery Specialists)	Helping Up Mission, Baltimore, MD	2	N/A	2	32	N/A	32
04/28/20 04/30/20	Regional: Single Session (Peer Recovery Specialists)	Back on My Feet, Online*	1	N/A	1	12	N/A	12
06/30/20	Centralized: Single Session	UMBC, Online	24	N/A	24	32	N/A	32

Note. The number of trainees reflects those in attendance and may be higher than the total number of evaluations.

* This Single Session training was split into two parts and conducted over two days.



It is important to note that three (3) additional trainings were planned for the current reporting period:

- Centralized Combined Single/Multiple Session training at UMBC on Wednesday, April 22, 2020
- Centralized Combined Single/Multiple Session training at UMBC on Friday, June 5, 2020
- Regional Combined Single/Multiple Session training in Talbot County on Friday, June 19, 2020

Although the registration process had begun, these trainings were cancelled due to the ongoing COVID-19 outbreak. In order to continue providing BH2 trainings safely, MDQuit began modifying the Single Session training program to be conducted remotely, through Webex. As a substitute to the BH2 training bags provided during in-person trainings, the single session manual and other training materials were updated and compiled into a Box folder to be shared with participants the day before the training. The virtual Single Session BH2 training was piloted among peer recovery specialists at Back on My Feet as a two-part training on April 28 and April 30, 2020, at the request of the organization. Since this was well-received by trainees, MDQuit then conducted a centralized Single Session training remotely on June 30, 2020. Although a higher registration cap was set for this training than in-person trainings, registration filled up quickly over the span of a few hours. In order to meet this overwhelming demand for smoking cessation training, MDQuit plans to offer additional BH2 trainings remotely.

MDQuit offered CEU credits for the trainings that were done virtually. However, due to the outbreak, the Office of Workforce Development and Technology Transfer (OWDTT) staff informed trainees that the CEU certificates will only be mailed out when they return to the office.

Training Evaluation

MDQuit continued to evaluate its trainings via pre- and post-training surveys, which were administered before and after the training, respectively, to assess trainee satisfaction and confidence with using and knowledge of training materials.

Table 2 presents the averages for post-training satisfaction responses during this reporting period. Responses were consistently high, with mean ratings ranging from 9.1 to 9.9 out of 10. Trainees continued to be enthusiastic about the training materials, rated 9.4 out of 10.

Table 2. Average Training Satisfaction Ratings

Statement	Rating
The overall quality of the training was good	9.4
The trainers were effective	9.3
The materials provided were helpful	9.4

Note. Based on eighty-four (84) post-training evaluations. Ratings were on a scale of 1-10, where 1 = Strongly Disagree and 10 = Strongly Agree.

Post-Training Implementation

MDQuit also sent out follow-up surveys and conducted phone interviews with trainees three months after each BH2 training to assess post-training implementation of smoking cessation services, allowing sufficient time after trainings for attendees to implement or work on implementing smoking cessation activities at their agencies. Questions were not exclusive; respondents were able to select all applicable cessation activities.

Although one hundred and two (102) individuals were trained during the current reporting period, follow-up evaluations were only sent to seventy (70) individuals. The remaining thirty-two (32) trainees took part in the remote Single Session BH2 training on June 30, 2020 and will be sent the follow-up survey at the three-month follow-up point at the end of September. Of the seventy (70) individuals who received the follow-up assessment, forty-six (46) individuals responded (response rate = 65.7%).



Table 3. Steps Taken to Implement Smoking Cessation Interventions Post-Training

Activity	n	Percent
Talking with administrators	8	17.4
Training others to implement smoking cessation activities	9	19.6
Working with individual clients	27	58.7
Conducting group sessions	6	13.0
Using brief interventions	20	43.5
Working on smoke-free policies in the workplace	3	6.52

The majority of respondents (78.3%, n = 36) reported using BH2 training materials (manuals, client worksheets, providers handouts and resources, videos, and laminated session outlines and expansion guides) after the training. Most respondents (78.3%, n = 36) had taken steps to implement smoking cessation interventions in the workplace after attending the training (Table 3). Many respondents (76.1%, n = 35) also reported engaging in smoking cessation activities in the past 30 days (Table 4).

Table 4. Smoking Cessation Activities Conducted Post-Training, in the Past 30 Days

Activity	n	Percent
Working with individual clients	25	54.4
Conducting group sessions	4	8.7
Using brief interventions	20	43.5
Working on smoke-free policies in the workplace	2	4.35

Community Engagement and Webinars

In an effort to strengthen relationships with families and collaborative efforts with community support groups, the Contractor will implement several activities to guide parents and family members on how to support tobacco cessation among their family members with Severe Mental Illness (SMI). The contractor will collaborate with mental health Core Services Agencies, peer support programs, and community support groups such as NAMI Maryland, On Our Own Maryland, and Smart Recovery to provide information and trainings that would enhance the provision of tobacco cessation for the mentally ill. Additionally, the Contractor will host up to four (4) webinars targeting mental health and substance abuse counselors, including counselors who use tobacco. Focus will be on dispelling myths, offering best practices, recent research, identify billable services, providing tobacco cessation programming and smoking control policy information to counselors and/or administrators in a behavioral health setting.

MDQuit continued to collaborate with Back On My Feet, an organization that partners with five (5) mental health and substance use recovery facilities throughout Baltimore City and uses running as a platform to combat homelessness. MDQuit conducted a two-part virtual training for peer recovery specialists at Back On My Feet on April 28, 2020 and April 30, 2020. In addition to this, MDQuit collaborated with Helping Up Mission, one of the five (5) recovery facilities that partners with Back On My Feet, to conduct a training for the peer recovery specialists at Helping Up Mission on March 11, 2020. MDQuit has also continued working with four (4) peer recovery specialists from Helping Up Mission, Instruments of Healing, and Peer Wellness



and Recovery Services to develop videos for peer recovery specialists. Additional details can be found in the *Smoking Cessation Among Peers* section of this report.

MDQuit also worked with four (4) pregnant women and women with children providers in Maryland to varying degrees to enhance the smoking cessation services provided at these facilities. Two trainings were conducted on March 5, 2020 and March 6, 2020, at Mountain Manor and Chrysalis House, respectively. Additional details can be found in the *Pregnant Women and Women with Providers* section of this report.

Webinars

During the previous reporting period, MDQuit hosted a webinar, "I've Already Started to Quit!": Smoking Cessation in Hospital-Based Health Settings, on December 4th from 12 pm to 1 pm. Dr. Rachel Smolowitz, the smoking cessation coordinator at Sheppard Pratt Health System, served as the guest presenter. She discussed how she developed, implemented, and sustained a comprehensive smoking cessation program at Sheppard Pratt, customized smoking cessation counseling to the needs of different individuals, and addressed roadblocks in planning and implementing the smoking cessation program at Sheppard Pratt along the way. Out of twenty-nine (29) registrants, sixteen (16) individuals participated live. At the conclusion of the webinar, attendees completed a brief-post-webinar evaluation, which was used to gather feedback on the webinar. Three (3) responses were received (response rate = 18.8%):

- On a scale from 1 (poor) to 10 (excellent), the average rating for the quality of the webinar was 9.0.
- All respondents (100%) agreed that they had a better understanding of how to build and sustain a smoking cessation program, as a result of the webinar.
- All respondents (100%) agreed that they felt better prepared to customize smoking cessation counseling to the needs of an individual after the webinar.

Two (2) additional webinars were conducted during the current reporting period. On April 7, 2020, from 12 pm to 1 pm, MDQuit hosted the "Creating a Culture of Change: Tobacco Cessation Strategies for Long-Term Treatment" webinar. Guest presenter, Dr. Amber Norwood, who is the Assistant Professor of Psychology at Shippensburg University, discussed how providers can be involved in a culture of tobacco cessation at their agencies, potential barriers to incorporating tobacco cessation, and systemic, group, and individual strategies for addressing tobacco cessation in long-term treatment. Out of seventy-seven (77) registrants, fifty-three (53) individuals participated live. At the conclusion of the webinar, attendees completed a brief-post-webinar evaluation, which was used to gather feedback on the webinar. Thirty-one (31) responses were received (response rate = 58.5%):

- On a scale from 1 (poor) to 10 (excellent), the average rating for the quality of the webinar was 8.7.
- The majority of participants (87.1%) agreed that they had a better understanding of how to build and sustain a smoking cessation program at their agencies, as a result of the webinar.
- Most participants (80.6%) also agreed that they felt better prepared to customize smoking cessation counseling to the needs of an individual after the webinar.

On June 26, 2020, from 12 pm to 1 pm, MDQuit hosted the "CHIME IN!: Possibilities for a Positive Recovery Framework to Enhance Smoking Cessation Efforts" webinar. Guest presenter, Dr. Daniel Knoblach, a post-doctoral fellow at the Baltimore VA Medical Center, discussed the potential applications of CHIME, a transdiagnostic recovery-oriented framework that prioritizes quality of life over symptom reduction through its focus on Connection, Hope, Identity, Meaning in Life, and Empowerment to assist in relapse prevention. Out of forty-six (46) registrants, nineteen (19) individuals participated live.



At the conclusion of the webinar, attendees completed a brief-post-webinar evaluation, which was used to gather feedback on the webinar. Fourteen (14) responses were received (response rate = 73.7%):

- On a scale from 1 (poor) to 10 (excellent), the average rating for the quality of the webinar was 7.8.
- All participants (100%) agreed that they had a better understanding of the importance of placing more focus on positive, recovery-oriented themes than on symptom reduction, as a result of the webinar.
- Most participants (85.7%) also agreed that they felt better prepared to use CHIME to broaden smoking cessation programming in their workplaces after the webinar.

All three (3) webinars were advertised through the MDQuit website and listserv and promoted via communications to stakeholders and partners. Attendees included mental health and substance use providers and tobacco control personnel from local health departments. Attendees submitted questions and comments during the webinars, which were addressed throughout the presentations as well as during the designated Question and Answer session at the end of each webinar. The webinars were also recorded and are available on the MDQuit website for on-demand viewing.

Data Elements for Measuring Tobacco Cessation

The Contractor will consult with BHA, local agencies and affiliates to examine existing data elements for measuring tobacco cessation at the patient and agency level for behavioral health programs. Further, the Contractor will also consult on the development of new core data elements as appropriate to comprehensively measure patient outcomes. Data collected and analyzed will be made available to BHA to inform training and policy implementation efforts.

MDQuit continued to review and disseminate OMS data in support of MDQuit initiatives relating to behavioral health populations, including the use of OMS data in BH2 trainings to highlight the need to address high rates of smoking among residents of Maryland with behavioral health conditions. MDQuit also continued to modify our website and resources using feedback from providers, agencies, and local health departments to increase the visibility of available data.

Training as a Licensure Requirement

The Contractor will pursue the issue of tobacco cessation intervention training as a requirement for licensure of counselors and therapists. The contractor will explore and provide a report on the feasibility of incorporating training on tobacco cessation as a requirement/condition for licensure and/or certification for counselors and therapists affiliated with the Maryland Board of Professional Counselors and Therapists.

On January 18, 2019, MDQuit provided a formal presentation on the purpose, actual outcomes, and intended outcomes for tobacco use and cessation within the behavioral health community as a result of the implementations of the BH2 curriculum to the Maryland Board of Professional Counselors and Therapists (MBPCT). MDQuit then made a formal proposal asking MBPCT to consider the adoption of a training course (e.g., BH2) as a part of the mandatory or optional requirements for licensure for counselors and therapists.

The Executive Director of MBPCT, Kimberly Link, then informed MDQuit that a change to the Code of Maryland Regulations (COMAR) would be required to classify new trainings or courses as mandatory or eligible to offer CEUs. As a result, BH2 trainings will not be incorporated into the mandatory (or elective) curriculum for counselors and therapists. However, MDQuit will continue to reach out to groups and agencies to provide trainings on request. As discussed during the call with Soula Lambropoulos and Eugenia Conolly on October 3rd, 2019, and indicated in the previous report, no further action could be taken by MDQuit regarding licensure requirements.



Residential Treatment Recovery Houses

The Contractor will work within residential treatment recovery settings to help implement tobacco-free policies and programming. In collaboration with the BHA's Residential Recovery Housing staff, the Contractor will meet with various community-based residential recovery houses in the state to educate them on how to develop and enforce tobacco-free policies and implement a tobacco cessation program for those individuals who want to quit.

As a part of connecting MDQuit with BHA's Residential Recovery Housing Staff, Soula Lambropoulos reached out to Patricia Konyeaso and Brendan Welsh asking them to let MDQuit know if they were still interested in discussing ways that MDQuit can work with residential treatment recovery providers to help implement tobacco-free policies and programming. No response was provided on their behalf.

MDQuit reached out to Patricia Konyeaso and Brendan Welsh again on December 11, 2019 to see if they were interested. No response was provided by the recipients. MDQuit reached out once again on May 20, 2020. Brendan Welsh let MDQuit know that his office does not interact directly with Maryland's Residential Treatment Programs. Patricia Konyeaso indicated that Maryland RecoveryNet is currently understaffed and that she would get back in touch at a later date when her team is better prepared to work on tobacco-free policies and programming. MDQuit looks forward to working with RecoveryNet at that time.

Smoking Cessation among Peers

In collaboration with the BHA's Office of Customer Affairs, the Contractor will design an intervention program, conduct 2 trainings for peer recovery specialists, and create 2 videos to assist in interactions between peers and clients. The Contractor will develop a curriculum for peer tobacco cessation training classes. This training will be an evidence-based, effective tobacco use prevention tool for peers to use when engaging with behavioral health clients who smoke.

MDQuit continued its efforts to reach peer recovery specialists who would be able to implement tobacco cessation activities with clients in behavioral health settings.

Peer Recovery Specialist Trainings

The core BH2 curriculum components currently offered to providers were modified to make it more relevant to the work and interactions of peer recovery specialists in behavioral health and community-based settings. The resulting training curriculum, piloted in the peer recovery specialist training on May 31, 2019, was used to conduct two additional BH2 trainings for this group during the current reporting period.

On March 11, 2020 MDQuit conducted an in-person Single Session training at Helping Up Mission, which was attended by thirty-two (32) peer recovery specialists.

On April 28, 2020 and April 30, 2020, MDQuit conducted another Single Session training for peer recovery specialists at Back on My Feet. This training was split into two ninety-minute segments per Back on My Feet's request to better fit their schedules and was conducted remotely through Webex.

Table 5. Average Training Satisfaction Ratings

Statement	Rating
The overall quality of the training was good	9.7
The trainers were effective	9.0
The materials provided were helpful	9.2

Note. Based on forty-one (41) post-training evaluations. Ratings were on a scale of 1-10, where 1 = Strongly Disagree and 10 = Strongly Agree.



Twelve (12) peer recovery specialists took part. This training was also recorded and provided to Back on My Feet to train other peer recovery specialists who were unable to attend the live training. Both peer recovery specialist trainings were well-received (Table 5).

Peer Recovery Specialist Videos

Four (4) peer recovery specialists agreed to assist MDQuit with video development:

- Matthew Joseph, Helping Up Mission
- Miriam Yarmolinsky, Peer Wellness and Recovery Services
- Todd Starkey, Helping Up Mission
- Sabrina Schram, Instruments of Healing

Based on discussions with the four consultants, MDQuit decided to develop two types of videos:

Narrative Videos

Three (3) narrative videos are being developed from interviews with each of the four (4) consultants, in which their smoking and quitting journeys and work with other peer specialists and clients are discussed:

1. Smoking Journey: how/why each consultant started and continued smoking.
2. Quitting Stories: quit attempts, motivations, and smoking cessation aids used.
3. Recommendations: strategies and tips for peer recovery specialists to discuss smoking cessation with other peer recovery specialists and clients.

MDQuit planned to shoot the interview videos at the New Media Studio at UMBC. However, due to the COVID-19 outbreak, the interviews with the four peer recovery specialists were conducted virtually. MDQuit created a list of interview questions, which was fine-tuned based on the feedback of the consultants, to guide each interview. MDQuit asked interview questions over the phone while each peer recovery specialist recorded the interview on his/her device. MDQuit is currently working with New Media Studio at UMBC to edit the four (4) video recordings to create the narrative videos, which will then be used in ongoing trainings and ultimately shared on the MDQuit website. Through these videos, MDQuit hopes to encourage smoking cessation among other peer recovery specialists and their clients.

Scripted Videos

Three (3) scripted videos will be made to assist peer recovery specialists in discussing tobacco cessation in their interactions with other peer recovery specialists and clients. Two (2) consultants will act in each video. The scripts were sent to the consultants for review. MDQuit arranged virtual practices with each of the three (3) peer-recovery-specialist-pairs to finalize the scripts based on their feedback, and to then run through the scripts until they were comfortable with acting.

Since it was uncertain when the New Media Studio would reopen to shoot the videos in person, MDQuit tested out several online platforms including Zoom, Webex, Skype, Facetime, Stream Yard, and Google Hangouts to record the scripted videos virtually. However, due to lag associated with the use of online platforms, the tests resulted in poor-quality videos. MDQuit thus plans to shoot these videos in the studio when the UMBC campus reopens to ensure the production of high-quality videos. Once this is done, the videos will be edited, used in trainings, and ultimately shared on the MDQuit website.

Once all of the videos are complete, MDQuit will isolate important and interesting clips from these videos to incorporate into future presentations and trainings.



Pregnant Women and Women with Children Providers

The Contractor will work with pregnant women and women with children providers to enhance tobacco cessation services. It will partner with the four (4) BHA state-funded residential behavioral health providers that offer services to pregnant women and women with children to develop and implement specific cessation services for residents.

MDQuit had a conversation with the Executive Director of Chrysalis House, Chris McCabe, and his team, to discuss ways in which MDQuit can support Chrysalis House with tobacco cessation. MDQuit also conducted a site visit of Chrysalis House to better understand the setting, organizational culture, and tobacco use on the site. Upon learning that staff tobacco use onsite was high, MDQuit and Chrysalis House came to an agreement that the best strategy to address tobacco use at Chrysalis House was to provide an onsite Single Session BH2 training for the staff on March 6, 2020. Ten (10) participants took part in this training.

Table 6. Average Training Satisfaction Ratings

Statement	Rating
The overall quality of the training was good	9.1
The trainers were effective	9.5
The materials provided were helpful	9.6

Note. Based on eighteen (18) post-training evaluations. Ratings were on a scale of 1-10, where 1 = Strongly Disagree and 10 = Strongly Agree.

MDQuit spoke with Patricia Allford, a provider at Mountain Manor, who expressed a strong interest in MDQuit conducting a Single Session BH2 training for the providers at Mountain Manor to enhance their smoking cessation efforts on February 20, 2020.

MDQuit and Patricia Allford agreed to forego a site visit to conduct the training as soon as possible. The training, conducted on March 5, 2020, was attended by nine (9) participants.

The Single Session BH2 trainings conducted for pregnant women and women with children providers at Chrysalis House and Mountain Manor were well-received (Table 6).

MDQuit also explored supporting tobacco cessation objectives at Gaudenzia through a phone consultation with the Program Director, Secret Scott. MDQuit conducted a site visit on February 25, 2020 to attain a better understanding of tobacco use onsite and discuss the best strategies to enhance tobacco cessation at Gaudenzia. After the visit, Secret Scott indicated that she would reach back out to MDQuit to determine next steps. After two weeks of no follow-up, MDQuit reached out to Secret Scott, but no response was received. MDQuit reached out again on March 25, 2020 encouraging Gaudenzia to get back in touch with MDQuit when they were ready to revisit supporting tobacco cessation at Gaudenzia. MDQuit looks forward to working with Gaudenzia at that time.

MDQuit discussed enhancing tobacco cessation at Cameo House with Administrative Specialist Shya Williams on February 26, 2020. By the end of the call, it was determined that the best strategy to support tobacco cessation at Cameo House would be to conduct a Single Session BH2 training for staff. Shya Williams agreed and said she would get back in touch with MDQuit after discussing this with her team the next day. Since MDQuit did not hear back the next day, a follow-up email was sent on February 28, 2020 providing more information about the training that she could share with her team if she had not already done so. No response was received from the recipient again. On March 30, 2020, MDQuit reached out to Shya Williams again encouraging her to get back in touch with MDQuit when Cameo House was ready to revisit enhancing tobacco cessation onsite. MDQuit looks forward to working with Cameo House at that time.