SCHOOL FOR PREVENTION LEADERSHIP

Training Summary

PARTNERS for RECOVERY
SERVING PEOPLE BY IMPROVING SYSTEMS
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Executive Summary

Possessing technical competencies in any discipline is very important for success, but it is only half the battle. Understanding one’s personality type, leadership styles, ability to manage conflict, and remaining cognizant of others’ perceptions are equally important in leadership roles. The Partners for Recovery (PFR) initiative has incorporated training in these areas in a series of leadership institutes focusing mainly on professionals in the discipline of behavioral health treatment and recovery. As the field of substance abuse prevention has matured, the need for training professionals in this field was also recognized. This new PFR leadership institute—called the School for Prevention Leadership (SPL)—provided prevention professionals a “marriage” of broad leadership skills with relevant substance abuse prevention training.

This report describes the SPL and includes a synopsis of the School’s objectives, structure, participants’ feedback, and lessons learned.

Overview

Background on the Project

Since 2006, the Substance Abuse and Mental Health Services Administration’s (SAMHSA) PFR contract has supported several leadership institutes for behavioral health care professionals. With the advent of the Affordable Care Act of 2010, preventive care has received heightened prominence, and there will be an increased emphasis on substance abuse prevention and mental health promotion in the nation’s health care delivery system. It is in this context that PFR decided to pilot the SPL and design it specifically for substance abuse prevention professionals. This pilot integrated general leadership skill-building exercises for professionals with specific knowledge relevant to the prevention field. The SPL assisted in preparing community-level and state-level prevention professionals in developing a set of leadership skills and a knowledge base to effectively navigate the anticipated changes brought about by health reform. Twenty “scholars” and five “mentors” from across the nation attended the inaugural SPL. They were selected from a pool of competitive applications based on their leadership skills and ability to promote public health prevention strategies. Abt Associates partnered with the Community Anti-Drug Coalitions of America (CADCA) and the Graduate School USA to plan and deliver this eight-month training program.

Objectives of the SPL

Collectively, the learning objectives for SPL scholars were:

- To understand their own personality types and leadership styles and how to work with other leaders with different personality types and leadership styles;
- To understand the various aspects of transformational leadership and apply these to practical, team-based problem-solving;
To learn the “business” of providing prevention services (e.g., federal and state funding, Medicaid, new funding sources through the Affordable Care Act);

To understand policy and advocacy to promote substance abuse prevention; and

To understand the provisions of the Affordable Care Act related to prevention, as well as behavioral health care’s integration with primary care.

Structure of the Program

The SPL pilot began with a nationwide call for applications in August 2011. From that process, 20 scholars and five mentors representing state and city government, as well as community-based prevention coalitions, were selected for the program. This diverse group of scholars and mentors represented 20 states, the District of Columbia, and Puerto Rico. In order to be considered for the School, scholars needed to understand the time commitment involved and needed to demonstrate a commitment to the prevention field, as evidenced in their individual resumes or through personal recommendations. Potential scholars had to demonstrate leadership capacity for a minimum of three years. Mentors—in addition to demonstrating a professional commitment to the field of substance abuse prevention—were required to have a minimum of eight years in the prevention field and to have demonstrated leadership experience providing training, coaching, or other forms of technical assistance. See Appendix A for the list of participants.

This intensive eight-month SPL program consisted of scholar assessments, five-day immersion training, development of Individual Development Plans (IDPs), experiential learning/mentorship, distance learning, a two-and-a-half-day re-immersion session, and a presentation of projects and graduation. (See Appendix B for the agendas of the three face-to-face meetings.)

Before convening for the immersion training in October 2011, comprehensive online assessments were administered to each scholar. The assessments were comprised of the Myers-Briggs Type Indicator (MBTI) and the Leadership Effectiveness Inventory (LEI). Taken together, these assessments identified personality traits, values and skills, leadership/management interest, and others’ perceptions of the individuals. The MBTI described the participants’ personality types and provided a deeper understanding of how they interact and manage others. Additionally, the LEI was administered to the scholars. It evaluated the participants’ leadership/management interests, values, and skills across 27 leadership effectiveness competencies.

“[This process] has made me re-evaluate my leadership practices, and focus on my deficiencies while polishing my strengths. I am glad that I was chosen to participate…. I have learned a lot.”

T.C., Tennessee

After completing their online assessments, all participants—scholars and mentors—convened in October 2011 for the initial weeklong face-to-face session (“Immersion”) in Washington, D.C.
assignments had been prepared beforehand, and participants were seated accordingly and had the opportunity to become acquainted with each other as the week progressed.

A highlight—and undoubtedly the most intensive feature of the week’s activities—was the personal feedback distributed based on the online MBTI and LEI assessments. Curriculum during that week included leadership-specific modules, such as emotional intelligence, leadership/team development, and the LEI. Cutting-edge topics relevant to substance abuse prevention that included training transfer, recovery-oriented systems of care, and transformational leadership in prevention were also delivered.

During the immersion training, participants were exposed to the prevention-specific components of the Affordable Care Act, including the National Prevention Strategy, Community Transformation Grants, the Prevention and Public Health Fund, and health care activity within the states. To this end, the PFR team created and distributed to the SPL participants a set of “Health Care Reform Informational Sheets”—one for each state, the District of Columbia, and Puerto Rico. Each informational sheet presents the following at-a-glance data:

- **State statistics**: Information is provided on health spending per capita, the percentage of the population that is currently uninsured, and the percentage of uninsured children.

- **Health insurance exchanges**: Information is provided on the state’s efforts to create a health insurance exchange, including the authorizing legislation, whether or not the legislation was successfully enacted, and the exchange website (if applicable).

- **Health insurance enrollment**: Information is provided on the enrollment services offered in the state, either online or paper-based.

- **Additional enrollment opportunities offered**: Information is provided on other enrollment opportunities offered by the state, such as Medicaid, the Children’s Health Insurance Program (CHIP), as well as other miscellaneous assistance such as benefits for senior citizens and heating assistance.

"The individual growth that occurred through the process for me was the best thing.”

H.M., South Carolina
The 52 informational sheets can be found by clicking this link: [http://PartnersForRecovery.samhsa.gov/Leadership_Development.html](http://PartnersForRecovery.samhsa.gov/Leadership_Development.html). Figure 1 is a display of a typical Health Care Reform Informational Sheet.

Each scholar was also required to formulate and implement an IDP during the course of the SPL. The IDP was based on an area of development identified in each scholar’s self-assessment, and formed the framework for the scholar’s experiential learning phase. Mentors were asked to assist their assigned mentees with the crafting of the IDPs.

Superimposed upon the IDP, each team (four scholars, one mentor) was required to identify a group project that would span the eight months of the SPL, the results of which would be presented at the final Graduation. Planning time for each of the teams was built into the week’s agenda. Abt staff provided extensive assistance to the teams in reaching consensus on their team projects. On the final day of the weeklong Immersion, each team presented its project, including its rationale and how the team would convene in the period between trainings. Each team devised a name and motto as part of the group-building exercise, which helped solidify each team’s cohesion and uniqueness.

One month after the Immersion concluded, each scholar was required to send his/her IDP to Abt staff, who provided comments and encouragement to each member. Two months following the Immersion’s conclusion, each team was asked to submit additional details about its team project, including roles and responsibilities, timelines, interim and final deliverables, and rationales for the project.

The second in-person event was held February 28–March 1, 2012 in Washington, D.C., and served as a “Re-immersion” training. By this second face-to-face session, considerable group bonding had occurred among the participants. The curriculum for the Re-immersion included conflict management, critical thinking and peer problem-solving, and prevention’s role in the Affordable Care Act.

Additional time for group project planning and discussions were built into the agenda. At this point in the SPL schedule, two scholars had dropped out due to unforeseen circumstances. As a result, two teams each lost one team member.

The third and final meeting served as the participants’ “Graduation,” in which all scholars, with the support of their mentors, presented the results from their group projects and shared their personal reflections from their IDPs. The teams presented five creative and practical projects of benefit to other
prevention professionals and the communities they serve. Each project allowed the scholars to demonstrate their leadership competencies and to produce a tangible deliverable. A summary of the project is as follows:

<table>
<thead>
<tr>
<th>TEAM</th>
<th>PROJECT DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>TEAM 1  “The Turbochicks with Bill”</td>
<td>The group presented a toolkit designed to assist other prevention coalition professionals in understanding the major aspects of the Affordable Care Act. In addition to presenting information about the act, this product encourages substance abuse prevention coalition members to proactively engage with their counterparts in public health.</td>
</tr>
<tr>
<td>TEAM 2  “ENTJ”</td>
<td>This group created a set of automated text messages (and related links) to military families (parents and their children). This pilot promotes the Center for Substance Abuse Prevention’s strategies by targeting a subset of children (whose parents are deployed) who demonstrate statistically higher rates of substance abuse. Text messages will prompt parents/caregivers to have conversations with their kids and to disseminate facts about substance use and prevention.</td>
</tr>
<tr>
<td>TEAM 3  “The Determinators”</td>
<td>The group produced a toolkit called What Is Prevention? A Practical Guide that helps raise awareness and support for substance abuse prevention and mental health promotion. The toolkit contains a variety of products (e.g., PowerPoints, media templates, social media messages) that target prevention coalitions.</td>
</tr>
<tr>
<td>TEAM 4  “Team VISION”</td>
<td>This team project involved the production of a podcast as a means of sharing information. This popular form of media educates coalition members about the prevention-specific attributes of the Affordable Care Act. A series of three podcasts have been posted to <a href="http://www.cadca.org">www.cadca.org</a>.</td>
</tr>
<tr>
<td>TEAM 5  “The JESTers”</td>
<td>This group’s project involved the creation of a smartphone “app” that coalition members can use to increase the ability to share information with other coalition members, as well as leaders at the state and national levels. The prototype app includes quick-links to the parent coalition’s Facebook page, YouTube videos, and a list of mentions in the local press. It also allows the user to send an email directly to the coalition and to donate money, among other things.</td>
</tr>
</tbody>
</table>
Following the project presentations and discussion of the participants’ IDPs, all participants received national-level recognition from SAMHSA officials, continuing education units (CEUs) from the Graduate School, and a certificate of completion.

Throughout the three in-person meetings, a variety of facilitators and speakers—representing Abt Associates, CADCA, and the Graduate School USA—delivered the comprehensive leadership curriculum. Additional speakers included:

- Fran Harding, Director, Center for Substance Abuse Prevention
- Peter Delany, Interim Director, Center for Substance Abuse Treatment
- Shannon Taitt, Partners for Recovery Coordinator, SAMHSA
- Melanie Whitter, PFR, Abt Associates
- Sue Thau, Public Policy Consultant, CADCA
- Ronald Manderscheid, Executive Director, National Association of County Behavioral Health and Developmental Disability Directors
- Jane Callahan, Director, CADCA Coalition Institute

Participants’ Feedback
Approximately two weeks following the Graduation, SPL participants were asked to respond to an online questionnaire regarding their experience. All 23 participants responded. Key highlights are presented below:

<table>
<thead>
<tr>
<th>In participating in the School for Prevention Leadership, how would you rate your ability to take action on the following issues (% reporting “good” or “very good”):</th>
<th>PRE</th>
<th>POST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilize policy and advocacy to promote substance abuse prevention</td>
<td>69%</td>
<td>100%</td>
</tr>
<tr>
<td>Articulate the provisions of the Affordable Care Act that relate to prevention and integration with primary care</td>
<td>0%</td>
<td>89%</td>
</tr>
<tr>
<td>Articulate the elements of transformational leadership</td>
<td>5%</td>
<td>100%</td>
</tr>
<tr>
<td>Apply the elements of transformational leadership to help your staff/volunteers/members to take on leadership roles</td>
<td>5%</td>
<td>100%</td>
</tr>
<tr>
<td>Transfer training to your work environment</td>
<td>47%</td>
<td>100%</td>
</tr>
<tr>
<td>Implement effective conflict management techniques</td>
<td>37%</td>
<td>100%</td>
</tr>
<tr>
<td>Implement effective critical problem-solving skills</td>
<td>58%</td>
<td>100%</td>
</tr>
</tbody>
</table>

“I wanted to thank you again for such a thought-provoking and motivational experience that I wish everyone could have! Thank you for the support and for all you and your peers do in our field.”

J.G., Iowa

\[\text{School for Prevention Leadership, Training Summary} \quad \text{October 2011–May 2012}\]
Lessons Learned

The SPL pilot provided helpful lessons for improving future leadership programs. These included:

- **Personal consultation on the 360-degree feedback results**: Nearly all participants indicated a desire for one-on-one feedback and discussion regarding their LEI/360-degree results immediately following the session on the topic.

- **Greater clarity on roles and expectations for the scholars and mentors**: Participants indicated they would have benefited from additional details regarding the roles and responsibilities of scholars and mentors.

- **More group planning time**: A few participants indicated that they would have found additional “unstructured” time to meet/plan team projects beneficial.

- **Dedicated IDP reporting**: Scholars required dedicated time to report on their accomplishments vis-à-vis the IDP to hold them accountable not only to their team goals but to their individual goals.

Next Steps

As PFR and the SPL participants look to the future, planning has occurred to ensure the sustainability of the SPL team projects beyond the life of the program. For example, the text messaging and prevention “app” project teams indicated their projects will be pilot-tested on a local or regional basis, with the aid of local/regional resources. The Ohio and Iowa National Guard Bureaus will assist with testing the program with National Guard members in those states. The prevention app project will continue to utilize expertise at Arizona State University, which will assist in piloting the app for the Phoenix-area coalition whose member developed it for his group project.

Additionally, PFR will continue to work with its partners—and with the graduates—to disseminate information about the SPL products and to apply the knowledge gained through this pilot. As was repeatedly affirmed by the program participants, the SPL provided an extraordinary opportunity to advance the knowledge and leadership skills of professionals in the substance abuse prevention field.
Appendix A

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“Class of 2012”

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Appendix B

Agenda for Immersion

NOTE: Breakfast throughout the week will be on your own. The hotel provides a complimentary breakfast for hotel guests.

**Monday, October 17, 2011**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Presenter</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00–9:15 AM</td>
<td>Welcome and overview of School for Prevention Leadership</td>
<td>PFR/Abt Associates</td>
</tr>
<tr>
<td>9:15–9:45 AM</td>
<td>Introductions</td>
<td>All participants</td>
</tr>
<tr>
<td>9:45–10:00 AM</td>
<td>Overview of the agenda</td>
<td>PFR/Abt Associates</td>
</tr>
<tr>
<td>10:00–10:15 AM</td>
<td>Our expectations for you</td>
<td>PFR/Abt Associates</td>
</tr>
<tr>
<td>10:15–10:30 AM</td>
<td>BREAK</td>
<td></td>
</tr>
<tr>
<td>10:30–12:00 PM</td>
<td>Team-building</td>
<td>William Hines (Graduate School USA)</td>
</tr>
<tr>
<td>12:00–1:15 PM</td>
<td>LUNCH ON OWN</td>
<td></td>
</tr>
<tr>
<td>1:15–2:45 PM</td>
<td>Team-building (continued)</td>
<td>William Hines (Graduate School USA)</td>
</tr>
<tr>
<td>2:45–3:00 PM</td>
<td>BREAK</td>
<td></td>
</tr>
<tr>
<td>3:00–4:30 PM</td>
<td>Team-building (continued)</td>
<td>William Hines (Graduate School USA)</td>
</tr>
<tr>
<td>4:30 PM</td>
<td>ADJOURN</td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Please be sure to complete and submit your evaluations for today.
**Tuesday, October 18, 2011**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00–9:45 AM</td>
<td>Individual Development Plans and group projects—an overview</td>
</tr>
<tr>
<td></td>
<td>PFR/Abt Associates</td>
</tr>
<tr>
<td>9:45–12:15 PM</td>
<td>Leadership Effectiveness Inventory—the power of feedback</td>
</tr>
<tr>
<td></td>
<td>Mickey Donovan (Graduate School USA)</td>
</tr>
<tr>
<td>10:45–12:15 PM</td>
<td>Mentor training (times approximate)</td>
</tr>
<tr>
<td></td>
<td>PFR/Abt Associates</td>
</tr>
<tr>
<td>12:15–1:45 PM</td>
<td>LUNCH ON OWN</td>
</tr>
<tr>
<td>1:45–5:00 PM</td>
<td>Leadership Effectiveness Inventory—the power of feedback (continued)</td>
</tr>
<tr>
<td></td>
<td>Mickey Donovan (Graduate School USA)</td>
</tr>
<tr>
<td>5:00 PM</td>
<td>ADJOURN</td>
</tr>
</tbody>
</table>

**NOTE:** Please be sure to complete and submit your evaluations for today.

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**Wednesday, October 19, 2011**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00–10:30 AM</td>
<td>Emotional intelligence</td>
</tr>
<tr>
<td></td>
<td>Shelley Price Khatib (Graduate School USA)</td>
</tr>
<tr>
<td>10:30–10:45 AM</td>
<td>BREAK</td>
</tr>
<tr>
<td>10:45–12:00 PM</td>
<td>Emotional intelligence (continued)</td>
</tr>
<tr>
<td></td>
<td>Shelley Price Khatib (Graduate School USA)</td>
</tr>
<tr>
<td>12:00–1:15 PM</td>
<td>LUNCH ON OWN</td>
</tr>
<tr>
<td>1:15–3:00 PM</td>
<td>Prevention Advocacy</td>
</tr>
<tr>
<td></td>
<td>Sue Thau (CADCA)</td>
</tr>
<tr>
<td>3:00–3:15 PM</td>
<td>BREAK</td>
</tr>
<tr>
<td>3:15–4:30 PM</td>
<td>Emotional intelligence (continued)</td>
</tr>
<tr>
<td></td>
<td>Shelley Price Khatib (Graduate School USA)</td>
</tr>
<tr>
<td>4:30–5:30 PM</td>
<td>Team planning time</td>
</tr>
<tr>
<td>5:30 PM</td>
<td>ADJOURN</td>
</tr>
</tbody>
</table>

**NOTE:** Please be sure to complete and submit your evaluations for today.
Thursday, October 20, 2011

9:00–10:15 AM  Transformational leadership
William Geary (CADCA)

10:15–10:30 AM  BREAK

10:30–11:45 AM  Transformational leadership (continued)
William Geary (CADCA)

11:45–1:45 PM  LUNCH ON OWN/team planning time
All participants

1:45–3:45 PM  Health care reform/community transformation
Fran Harding and Fred Volpe (CSAP) / Jane Callahan (CADCA)

3:45–4:00 PM  BREAK

4:00–5:00 PM  Training transfer—putting training into action
Evelyn Yang (CADCA)

5:00 PM  ADJOURN

NOTE: Please be sure to complete and submit your evaluations for today.

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Friday, October 21, 2011

NOTE: We will reconvene a bit later, in order to accommodate participants’ hotel check-out.

9:30–10:10 AM  Supporting Resiliency and Recovery in the Community
Melanie Whitter (PFR/Abt Associates)

10:10–11:45 AM  Team report-outs
All participants

11:45–12:00 PM  Next steps(expectations
PFR/Abt Associates

12:00 PM  ADJOURN

NOTE: Please be sure to complete and submit your evaluations for today.
Agenda

NOTE: Breakfast, lunch, and dinner throughout the week will be on your own. The hotel provides a complimentary breakfast for hotel guests.

Tuesday, February 28, 2012

9:00–9:15 AM  Welcome and re-introductions
All participants

9:15–9:30 AM  Overview of this week’s agenda
PFR/Abt Associates

9:30–10:30 AM  Mini-team building exercise
Sharon Barcellos (Graduate School USA)

10:30–10:45 AM  BREAK

10:45–12:15 PM  Conflict management and the Thomas-Kilmann assessment instrument
Susan Levin (Graduate School USA)

12:15–1:30 PM  LUNCH ON OWN

1:30–3:00 PM  Conflict management (continued)
Susan Levin (Graduate School USA)

3:00–3:15 PM  BREAK

3:15 onwards  Team planning time (includes dinnertime and thereafter)
All participants

NOTE: Please be sure to complete and submit your evaluations for today.
Wednesday, February 29, 2012

9:00–10:00 AM  Critical thinking and peer problem-solving  
Arlene Karpas (Graduate School USA)

10:00–10:40 AM  Health care reform—what is prevention’s role?  
Jane Callahan, Alan Moghul (CADCA Coalition Institute, Abt Associates)

10:40–10:55 AM  BREAK

10:55–12:30 PM  Critical thinking and peer problem-solving (continued)  
Arlene Karpas (Graduate School USA)

12:30–1:40 PM  LUNCH ON OWN

1:40–3:00 PM  Critical thinking and peer problem-solving (continued)  
Arlene Karpas (Graduate School USA)

3:00 onwards  Team planning time (includes dinnertime and thereafter)  
All participants

NOTE: Please be sure to complete and submit your evaluations for today.

Thursday, March 1, 2012

9:00–9:30 AM  Tools to stay connected  
CADCA Coalition Institute

9:30–10:30 AM  Report-outs from previous day’s challenge  
All participants

10:30–10:45 AM  BREAK

10:45–11:45 AM  Report-outs from previous day’s challenge  
All participants

11:45–12:00 PM  Final questions and next steps  
All participants

12:00 PM  ADJOURN—TRAVEL SAFELY!

NOTE: Please be sure to complete and submit your evaluations for today.
Graduation Agenda

Tuesday, May 8, 2012

9:00 AM  Welcome and introductions  
Shannon Taitt, Partners for Recovery Coordinator  
All Participants

Fran Harding, Director, Center for Substance Abuse Prevention

Peter Delany, Interim Director, Center for Substance Abuse Treatment

10:20 AM  BREAK

10:30 AM  Team and individual presentations  
Team “Turbochicks With Bill” (An Affordable Care Act Toolkit)  
Team “ENTJ” (Prevention Text Messages)

12:00 PM  LUNCH ON OWN

1:30 PM  Team and individual presentations (continued)  
Team “Vision” (A Podcast)

3:00 PM  BREAK

3:15 PM  Team and individual presentations (continued)  
Team “JESTers” (A Prevention App)

4:00 PM  ADJOURN

5:45 PM  Graduation Dinner at Maggiano’s

6:15 PM  Remarks  
Arthur T. Dean, Chairman and CEO, CADCA

NOTE: Please be sure to complete and submit your evaluations for today.
Wednesday, May 9, 2012

9:30 AM    Reconvene

9:35 AM    Introduction of Guest Speaker
Melanie Whitter, Partners for Recovery Project Director

9:40 AM    Remarks, "Promoting Social Justice: One Person at a Time"
Ronald Manderscheid, Executive Director, National Association of County
Behavioral Health and Developmental Disability Directors

10:15 AM    Awarding of Graduates
Shannon Taitt, Partners for Recovery Coordinator
All Mentors and Scholars

11:00 AM    Closing Thoughts
Alan Moghul, School for Prevention Leadership Project Lead
All Participants

11:30 AM    Pose for Photographs

12:00 PM    ADJOURN

NOTE: Please be sure to complete and submit your evaluations for today.