# Writing Great Final Evaluation Reports

**TCEC 2010 Regional Training Meetings – Agenda**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:30 – 10:00 am</td>
<td>Arrival / Breakfast</td>
<td></td>
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</tbody>
</table>
| 10:00 -10:30 am | **Why Final Evaluation Reports Matter**            | • Introduction from TCEC staff  
• Local Guest Speaker(s) |
| 10:30 am -noon | **Anatomy of a Final Evaluation Report**           | • TCEC staff reviews the sections of the report, scoring criteria, and past scores.  
• Interactive session: Score and discuss a sample FER |
| Noon-1pm      | Lunch                                              |                                             |
| 1:00-2:30 pm  | **Writing the Results Section**                   | • TCEC staff reviews an example  
• Interactive session: Refining the results section of your final evaluation report. (Bring your progress reports, evaluation summaries, etc. for this session.) |
| 2:30pm        | Break / Refreshments                               |                                             |
| 2:30-3:30 pm  | **Making evaluation reports work for multiple audiences.** | • TCEC staff: How to repackage information in the FERs into press releases, briefs for the project website, newsletter articles or mailings to stakeholders. |
| 3:30-4:30 pm  | **Office Hours**                                   | Ask TCEC staff questions about your Final Evaluation Report or evaluation activities.         |
Writing Great Tobacco Control Final Evaluation Reports
Regional Training 2010

Agenda

10:00 - 10:30      Why Final Evaluation Reports Matter
10:30 - 12:00      Anatomy of a Final Evaluation Report
12:00 - 1:00       Lunch
1:00 - 2:30        Writing the Results Section
2:30 - 3:30        Making Evaluation Reports Work for Multiple Audiences
3:30 - 4:30        Office Hour

Why Final Reporting?

• Transitioning
• Contributing
• Learning
• Sharing
Utilization Focused Evaluation

“...the focus in utilization focused evaluation is on intended use by intended users.”

Michael Quinn Patton

Uses for Project

- Knowledge of community
- Strategy replication
- Method replication
- Known barriers
- Carry-over data

Statewide Relevance

Statewide data gathering on indicators
Why Quality Matters

• Things are hard to find
• Not sure what's important and what isn't

Clarity

• Well organized
• Easy to locate "stuff"
• Pleasant to look at

Who Writes the FER?

Project Director
Evaluator
Challenges

- Amount of info
- Staff turnover
- Decisions
- Deadlines
- Guidelines
- Others?

Anatomy of a Final Evaluation Report

FER Scores
2004-2007 LLA Plans
### Reporting Guidelines

![Image](image.png)

### FER Scoring Criteria (maximum 32 points)

<table>
<thead>
<tr>
<th>Report Section</th>
<th>Maximum Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title Page</td>
<td>2</td>
</tr>
<tr>
<td>Abstract</td>
<td>6</td>
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### FER Scoring Criteria (maximum 32 points)

<table>
<thead>
<tr>
<th>Report Section</th>
<th>Maximum Points</th>
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</thead>
<tbody>
<tr>
<td>Project Description</td>
<td>6</td>
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</table>
### FER Scoring Criteria: Evaluation Methods

<table>
<thead>
<tr>
<th>Evaluation Methods</th>
<th>Maximum Points</th>
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<tbody>
<tr>
<td>Evaluation Design</td>
<td>2</td>
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<tr>
<td>Samples</td>
<td>2</td>
</tr>
<tr>
<td>Data Collection</td>
<td>2</td>
</tr>
<tr>
<td>Data Analysis</td>
<td>2</td>
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</tbody>
</table>

### FER Scoring Criteria: Evaluation Results

<table>
<thead>
<tr>
<th>Evaluation Results</th>
<th>Maximum Points</th>
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</thead>
<tbody>
<tr>
<td>Main Findings</td>
<td>2</td>
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<tr>
<td>Objective Presentation</td>
<td>2</td>
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</tbody>
</table>

### FER Scoring Criteria: Conclusions & Recommendations

<table>
<thead>
<tr>
<th>Conclusions &amp; Recommendations</th>
<th>Maximum Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Links intervention to results</td>
<td>2</td>
</tr>
<tr>
<td>Conclusions do not go beyond what the data can support</td>
<td>2</td>
</tr>
<tr>
<td>Recommendations for future work</td>
<td>2</td>
</tr>
</tbody>
</table>
Group Activity: Practice Scoring!

10:45-11:30 Score 1-2 sections of the sample report. Discuss with your group.

11:30-noon Report score and rationale back to the group.

Writing the Results Section

Reporting on Quantitative Data

What to pick?
Or:
Some pumpkins will be left out in the field.

www.gov.bc.ca/.../picking_pumpkins1t.jpg
Survey Question

7. Tell us about your need for training or materials in each of the following areas.

<table>
<thead>
<tr>
<th>Evaluation activity</th>
<th>High need</th>
<th>Moderate need</th>
<th>Low need</th>
<th>Does not apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Writing evaluation plans</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adapting/developing data collection instruments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collecting evaluation data</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Analyzing evaluation data</td>
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<tr>
<td>Interpreting evaluation results</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Writing final evaluation reports</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Using culturally competent evaluation methods</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Report

Table 2: High and moderate needs for evaluation help

<table>
<thead>
<tr>
<th>Evaluation activity</th>
<th>High or moderate need</th>
</tr>
</thead>
<tbody>
<tr>
<td>Using culturally competent evaluation methods</td>
<td>79.4 %</td>
</tr>
<tr>
<td>Writing evaluation plans</td>
<td>59.9 %</td>
</tr>
<tr>
<td>Adapting/developing data collection instruments</td>
<td>57.1 %</td>
</tr>
<tr>
<td>Interpreting evaluation results</td>
<td>54.1 %</td>
</tr>
<tr>
<td>As a reference during evaluation activities</td>
<td>51.3 %</td>
</tr>
</tbody>
</table>

To Graph or not to Graph?

Not recommended

[Graph: Percent male and female survey respondents]

<table>
<thead>
<tr>
<th>Gender</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>60%</td>
<td>20%</td>
</tr>
<tr>
<td></td>
<td>40%</td>
<td>20%</td>
</tr>
<tr>
<td></td>
<td>20%</td>
<td>20%</td>
</tr>
</tbody>
</table>
**Table**

### Not recommended

Table 1: Smokers observed at fair by year

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of smokers</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>260</td>
</tr>
<tr>
<td>2001</td>
<td>255</td>
</tr>
<tr>
<td>2002</td>
<td>278</td>
</tr>
<tr>
<td>2003</td>
<td>259</td>
</tr>
<tr>
<td>2004</td>
<td>189</td>
</tr>
<tr>
<td>2005</td>
<td>160</td>
</tr>
<tr>
<td>2006</td>
<td>43</td>
</tr>
</tbody>
</table>

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**Graph**

**Recommended**

Figure 1: Trend of observed smokers at fair

**Interpretation Needed**

<table>
<thead>
<tr>
<th>count</th>
<th>Crosstab</th>
<th>1 Interested in smoke free complex</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>1=yes</td>
<td>32</td>
<td>11</td>
<td>15</td>
</tr>
<tr>
<td>2=no</td>
<td>87</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>3=don't know</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>119</td>
<td>15</td>
<td>20</td>
</tr>
</tbody>
</table>

**Chi-Square Test**

<table>
<thead>
<tr>
<th>Value</th>
<th>df</th>
<th>Sig</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson Chi-Square</td>
<td></td>
<td>.000</td>
</tr>
</tbody>
</table>
“As predicted, tenants’ smoking behavior predicted interest in a smoke free complex. Those who did not smoke were more likely to want the complex to become smoke free (p= .000) than those who were smokers. However, a great number of Smokers did want the apartment complex to be smoke free. Thirty-two out of the 58 smokers (55%) were in favor of a smoke free policy. Knowing that many apartment owners and managers had concerns that they may be discriminating against smokers or that they might lose business due to a non-smoking policy, this was an important result, which was subsequently shared with policymakers.”

Reporting Qualitative Data

- It’s not about the numbers
- Look for commonalities, trends, surprises
- Weigh the data sources
- Factor perspective into interpretation

Deciding What Is Important

- Go back to purpose of evaluation activity
- Remain focused on key findings
- Report on what is essential to audience
What to Include in the Report?
- Revisit the raw data of all eval activities
- New patterns/meanings may emerge
- Look for triangulation
- Look for variance

Interpreting the Data
Interpretation should:
- Confirm what we expected to find as supported by the data
- Dispel what we thought was true, but isn’t
- Bring to light what we didn’t know, but should know

Making Recommendations
- Draw conclusions about relevance to your program
- What changes or next steps should result from this new knowledge?
Making Evaluation Reports Work for Multiple Audiences

Disseminating Program Achievements and Evaluation Findings to Garner Support

Reasons to Disseminate:
- Create positive publicity
- Enables your organization to be more competitive in acquiring future funding
- Influence change in programs, policies, or practices

Matching Information to Particular Audiences

- Who is your audience?
- What does your audience need to know or what are their specific interests?
- What do you hope to gain by disseminating this information or these results?
Targeting an Audience

Who Is the Audience?

Who Is the Audience?
Who is the audience?

Who Is the Audience?

Channels and Formats
Social Media

When to Disseminate Information

- Special events
- New achievements
- Recognition or awards
- Fundraising campaigns

- After the submission of your Final Evaluation Report!!!
News Releases

- Relatively easy
- Complements the work you’re doing nicely
- Creates positive publicity
- Provides venue to let the public know the great things you and your colleagues are doing

News Releases — Tips

- Follow the standard format
- Look up other examples on the web
- Write it as if you were the reporter
- Use your data
- Bring in the human element

Using FER Data with Policymakers

- Celebrate successes
- Document levels of enforcement
- Demonstrate community readiness
- Present policy options
Communicate Effectively

- Gain access
- Get to the point
- Use data to leverage action
- Leave no doubt

Use What Is Convincing

Make Information Easy to Digest
What Is Key

- Keep it clear, keep it short
- Indicate why they should care
- Identify what other jurisdictions are doing
- Show that it won’t alienate constituents
- Ask for their action

Workshop Recap

- Why Final Evaluation Reports matter
- The essential components of a report
- How to write the results section
- Using FERS information with multiple audiences

Evaluation

Please fill out your evaluation form!

Thank you!
### Final Evaluation Report Rating Form

**Project Name:**

**Indicator/Asset:**

**Contract #:**

**Contract Term:**

**Report Reviewer:** Diana Cassady  
**Date review completed:**

The following scale will be used to rate the key elements of a high quality evaluation report:

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Not addressed</td>
</tr>
<tr>
<td>1</td>
<td>Partially addressed</td>
</tr>
<tr>
<td>2</td>
<td>Fully addressed</td>
</tr>
</tbody>
</table>

#### 1. Title Page

- Title of the study
- Agency Project Director’s name
- Current agency name, mailing address, email address, phone number and FAX number
- Names and affiliations of report authors
- Date of submission to TCS
- TCS contract # and contract period
- DHS attribution
- Suggested citation

**Rater Comments for Section 1:**

**TITLE PAGE:** Fax, email and suggested citation should be included.

#### 2. Abstract: one to two pages, summarizing the following information:

- Statement of objective and indicator/asset #
- Project description, including project context and rationale, and intervention setting(s), target(s), and activities
- Evaluation methods, including study design, sample selection and size, and data collection procedures
- Main results
- Conclusions and recommendations

**Rater Comments for Section 2:**

**ABSTRACT:** Nice but should also include brief description of study design (non, quasi-, or experimental) as well as sample selection and size.

#### 3. Project Description

**Background**

- Brief description of project context, including relevant aspects of the political/historical background, geographical considerations, and social norms/attitudes around tobacco control of the community in which the intervention took place

**Objective**

- Clear statement of objective and indicator/asset number
- Logical connection between project context and rationale for choosing the objective

**Intervention**

- Intervention activities, including any changes in planned activities that took place during the implementation of the program
- Intervention target(s) (who or what the activities are designed to influence or change)
- Project setting (the specific locations where the intervention activities took place)

**Rater Comments for Section 3:**
### 4. Evaluation Methods

**Evaluation design**
- Type of design (experimental, quasi-experimental, or non-experimental)
- Reason for selecting the design used
- # of times data are collected, when data are collected (pre-tests, during the intervention, and/or post-tests), # of groups compared (if any), and whether activities varied by group
- Any limitations to the design as a way to assess the intervention process and/or outcome

**Sample(s) from which data were collected**
- The population (could be people, places, times, etc.) from which the sample was drawn
- The process used to select the sample
- Sample size
- Response rate (if appropriate, such as for the Youth Tobacco Purchase Survey)
- Any limitations of the sample (e.g., small sample size, low response rate, or use of a convenience sample)

**Data collection instruments and procedures**
- The type and source of the data collection instrument
- Who collected the data, what training was provided to the data collectors, and where and when data were collected
- Limitations of data collection procedures (such as inability to collect data as planned, sources of bias in data collection instruments)
- If appropriate, sample copies of all data collection instruments are attached to the report. Unmodified standardized instruments need not be attached. For unstructured instruments, the topics that were covered should be described as part of the type and source of the instrument

**Data analysis**: The description of data analysis is sufficiently described for a reader to assess whether the analysis approach was appropriate for the type of data collected (e.g., content analysis of qualitative data, statistical tests of significance or descriptive statistics for quantitative data)

### 5. Evaluation Results

- Details of the main evaluation findings are clearly and logically presented in a narrative summary. This may involve descriptive or inferential statistics, the results of content analysis, or other kinds of findings. Tables and figures are used when appropriate and are clearly labeled
- Presentation of evaluation findings is objective and includes relevant negative and positive findings

### 6. Conclusions and Recommendations

- Findings of outcome evaluation are discussed in terms of whether they suggest or demonstrate that intervention activities led to the achievement of the stated objective. Findings of process evaluation describe the strengths and weaknesses of the intervention activities, and/or other aspects of the implementation of the intervention
- Conclusions do not go beyond what the data can support, given any limitations of the evaluation methods. (For example, if the sample is a convenience sample, conclusions should not be drawn about the population as a whole.)
- Based on the process of implementing the project and on the evaluation results, recommendations for future work in tobacco control around this and similar objectives are provided

Rater Comments for Section 4:

Rater Comments for Section 5:

Rater Comments for Section 6:
Overall Assessment:

Would you recommend this report to someone interested in:

1) The **intervention** planned to achieve the objective?  
   □ Yes  □ No  □ Maybe

2) The **evaluation** used for the type of objective?  
   □ Yes  □ No  □ Maybe
Sample Final Evaluation Report

Abstract

In Bear County, the population of Latinos is estimated to be 30,000. With the growth of this particular ethnic group during the past three decades, Bear County has experienced a significant increase in the number of non-profit self-help organizations and businesses that are owned or operated by Latinos or cater to a Latino clientele. The Bear Center for New Americans (BCNA), which has provided a variety of social services for Southeast Asian refugees and immigrants, targeted a minimum of eight (8) of these businesses in an effort to promote their adoption and implementation of a smoke-free policy that would prohibit smoking within 20 feet or more doorways. Because smoking is a common practice among Latino men and often seen as a tool for social situations in groups, it was necessary for BCNA to conduct this project to deliver the education and promotion of the policy in a culturally and linguistically appropriate manner that would meet the goal of reducing tobacco use and exposure among Latino residents. Initial observations noted that few businesses were likely to have a smoke-free doorway policy, especially those of Latino businesses, which have seen minimal efforts to support policy adoption or implementation and a lack of culturally and linguistically appropriate resources. 14 of the 22 known Latino-owned businesses and businesses frequented by Latino clientele were targeted for this project. A community opinion poll was conducted to gauge general attitudes of secondhand smoke exposure and possible policies at these businesses. Patrons indicated they were bothered by secondhand smoke and that a smoke-free doorway policy would not discourage their patronage of businesses that had one. Information packets and interview tools were developed in Spanish and English to be used in meeting with business owners and managers. Of the 14 targeted businesses, 9 agreed to meet with BCNA staff to consider the policy. After sharing the information of the poll and the information packets, 8 businesses agreed to adopt the smoke-free doorway policy. After 60 days from adoption, 6 of the 8 businesses were observed to check whether implementation was on-going. The provision of signage was the most effective tool for businesses to implement the policy. With the appropriate education and policy support provided by BCNA staff, adoption and implementation of the smoke-free doorway policy was shown to be effective in raising the awareness of the community regarding secondhand smoke. This was supported by the concurrent media efforts to educate the Spanish radio program listeners as well as recognition of the businesses that had successfully adopted the policy, as indicated in the evaluation of the project.
Final Report

Contract Number: 05-4593269  
Agency Name: Bear Center for New Americans  
Project Name: Tobacco Project  
Contract Term: 10/01/2005 – 6/30/08

Objective 2  
Primary Priority Area: (2) Reduce Exposure to Secondhand Smoke  
By June 30, 2008, a minimum of 8 Latino-owned businesses and/or businesses frequented by Latino patrons in Bear County will adopt a smoke-free policy that prohibits smoking within 20 feet or more of doorways.

Target Audience: Business/Merchants  
Population: Latino

I. Project Description  

A. Background

In Bear County, the population of Latinos is estimated to be 30,000. The majority of Latinos in Bear County are from Mexico, although about 20% are from El Salvavador, Nicaragua, and Panama. Many have settled in the area during the past three decades. With the growth of this particular ethnic group, Bear County experienced a significant increase in the number of non-profit self-help organizations, along with establishment of businesses owned or operated by Latinos and businesses who cater to a Latino clientele. These businesses are located in neighborhoods with high concentrations of Latino families, primarily in the Southeast section of the City of Bear.

Along with the growth of these small businesses, the Bear Center for New Americans (BCNA) was also established. For more than 20 years, BCNA has provided a variety of social services for Southeast Asian refugees and immigrants. This organization’s strength is their ability to deliver culturally and linguistically appropriate services to the Latino community.

Smoking is a common practice among Latino men, often seen as a tool for conversational social situations in groups. Cigarette smoking is acknowledged to be an unhealthy activity for the individual, but second hand smoke is not well understood.

B. Objectives & Rationale

Prior to the implementation of BCNA’s Tobacco Education Project, efforts through a previously Proposition 99-funded program by the California Health Collaborative, a few Latino businesses and businesses who cater to a Latino clientele had adopted and implemented a voluntary smoke-free doorway policy. Due to this community’s limited-English proficiency, a majority of the Latino population lack awareness, knowledge and access to information and resources on the dangers of second hand smoke (SHS).
BCNA’s Tobacco Project provides tobacco prevention education in Bear County. The goal of the project is to reduce tobacco use and exposure among Latino residents through the adoption and implementation of smoke-free or tobacco-free policies. The local Community Planning Group (CPG), BCNA’s own program coalition, noted that a few voluntary policies had been adopted by the targeted businesses through past efforts of other Proposition 99 grantees. However, BCNA staff and the CPG continue to observe presently smoking within 20 feet of doorways among many businesses that are owned and operated by Latino or serve Latino patrons. The CPG through an informal review concluded that:

- while a few local businesses have adopted a voluntary smoke-free doorway policy, many of the Latino business owners and businesses that cater to Latino patrons are like the newly arrived Latino refugees: they lack awareness, knowledge and access to information and resources on the dangers of SHS;
- there had not been any significantly impactful past or present efforts to provide tobacco education or technical support in policy adoption or implementation to Latino businesses or businesses catering to a Latino clientele about the dangers of secondhand smoke and its health impact upon their patrons and community members.
- no Latino-specific culturally or linguistically targeted resource was available.

In 2006, the CPG through CX concluded that this community concern must be addressed and that a service be established to provide culturally and linguistically appropriate technical assistance to these businesses to encourage a voluntary policy adoption of smoke-free policy that prohibits smoking within 20 feet or more of doorways. Through the delivery of such a service, the business owners would assist members of the Latino community to better understand the implications of their behavior.

As part of the Reducing Exposure to Secondhand Smoke priority area, the desired outcome of the project was to increase by 8 the number of Latino owned and/or businesses frequented by Latino patrons in Bear County to adopt a smoke-free doorway policy that prohibits smoking within 20 feet or more of doorways by June 30, 2008.
C. Project Activities

To reach the project outcome of 8 Latino owned and/or businesses frequented by Latino patrons in Bear County to adopt a smoke-free doorway policy that prohibits smoking within 20 feet or more of doorways, the following activities were conducted:

1. Compile a Database of Businesses

A database of 22 Latino-owned businesses and businesses frequented by a significant Latino clientele was compiled. Most of these businesses were family-owned, small businesses. The type of businesses varied; they included a health clinic, restaurants, food stores, professional business offices, and hair salons. The majority of these businesses were located in Southeast Bear.

2. Conduct A Community/Public Opinion Poll

In consultation with TECC, a linguistic and culturally appropriate Community/Public Opinion Poll instrument was developed to gauge general attitude of secondhand smoke at doorways of businesses. Patrons at eight businesses were surveyed. These eight business sites were the Kings Winery Medical Clinic (6), Fiesta Market (10), Empire Food Market (8), AC Market (6), BK Restaurant (6), KC Super Market (6), and 524 Café (8), and the annual Cinco de Mayo event held at the County Fairgrounds (53). A total of 110 responses were collected. The sample consisted of 38 (34.5%) males and 72 (65.5%) females. Of the respondents, 5 (4.5%) indicated that they were a smoker, and 16 (14.5%) had at least one member in their household that was a smoker. The poll was conducted during 2006-2007. A detailed report of this poll was prepared and submitted in a prior report period. The responses overwhelmingly confirmed that:

- patrons were bothered by secondhand smoke, and
- a smoke-free doorway policy would not discourage individuals from patronizing a particular business.

3. Develop culturally and linguistic appropriate materials on second hand smoke and sample smoke-free doorway policies for businesses.

In consultation with TECC, a packet of materials was developed in Spanish and English for the targeted business owners. This packet was given to the business owner during the initial Key Informant Interview. Items included in this packet were:

a. Bear Center for New American’s Tobacco Project Brochure
b. 3 Fact Sheets
   1. SHS for Businesses (translated in Spanish)
   2. Why Adopt A Smoke-Free Policy
   3. Benefits of Being Smoke Free
c. Sample Policy
d. Smoke Free Cars (New Law)
e. Universal No Smoking Sign (from TECC Catalogue)
f. Copy of Report Develop from Community/Public Opinion Poll
4. Conduct Key Informant Interviews (Face-to-face Business Owner Interviews) and Delivery of Technical Assistance

From the database of 22 businesses owners, 14 businesses were contacted to schedule key informant interviews, inquiry into policy adoption, presentation of a packet, follow-up calls to verify interest in policy adoption and implementation, and a call to invite her/him to the media event if the business adopted and implemented a policy.

Appointments were scheduled with these businesses from May 2007 through December 2007. Of the 14 businesses, 9 agreed to be interviewed. Approximately 10 - 15 minutes were set aside for each face-to-face interview. At each interview, a packet of materials was provided to the owner or manager. As the interviews were concluded, each business owner/manager was asked if he/she would be interested in more information or assistance in developing a smoke-free doorway policy, and if s/he would be interested in being contacted again. All 9 agreed to be contacted again.

The interview tool for these business owners was designed in consultation with TECC. This tool was not translated into Spanish, because it was used as a guide to conduct an oral interview with the business owner to gauge his/her interest in policy adoption. The majority of the interviews were conducted bilingually in Spanish and English. One business owner was Vietnamese and communication with this business owner was conducted in English. Of the 9 business owners who were interviewed:

- 5 were male and 4 were female
- 8 respondents were Latino, 1 Vietnamese.
- 8 respondents chose to communicate in Spanish, 1 in English.
- 5 stated his/her age (range 30 – 43), and 4 did not note his/her age
- 2 were smokers, 7 were non-smokers
- 2 noted awareness of employees as smokers, 7 noted no knowledge of smoking status of employees
- 3 noted that SHS bothered customers, 6 did not think SHS bothered customers
- All noted that SHS bothered her/him.
- All noted interest in adoption and implementation of a smoke-free doorway policy.

Additional comments received from these interviews include (all comments below were made in Spanish. These comments were translated into English and noted on the Key Informant Interview forms):

- SHS is a nuisance
- [A smoke-free policy will] keep business clean, [attract] more business
- [A smoke-free policy will] increase businesses
- Healthier environment, able to breathe cleaner air
- [A smoke-free policy will mean] no smoke drifting in store and safer because there would not be a crowd gathered outside business door.
- Don’t like smoke. Smells bad and loses customers.

5. Conduct observations of business utilizing an Observation Tool
Working with TECC, a culturally and linguistically appropriate Observation Tool was developed and finalized during the first quarter of 2008. The questions on this tool included the following:

- Are no smoking signs posted?
- How many signs are posted?
- Are signs language-appropriate?
- Are garbage/cigarette receptacles present?
- How many feet are receptacles from entrance?
- How many cigarette butts/pieces of tobacco litter are on the ground?
- How many people are observed smoking within 20 feet of the entrance?
- If more than just a greeting, was the conversation about policy?
- Was there any conversation between the observer and individuals outside?
- Notable comments or observations.

Six observations were conducted from April through May of 2008. Three observations were conducted in the morning and three in the afternoon, each taking approximately 8 – 15 minutes. Four of the 6 businesses continue to maintain no-smoking signage at the entry way, one of the businesses maintained posting of 2 signs, 5 of the businesses maintained a garbage or cigarette receptacle near the entry way, 1 smoker was observed within 20 feet of the entry of one business, and 1 smoker was observed smoking more than 20 feet of the entry way of another business. And at 2 of the businesses, staff conversed with the business owner. Comments and observations included:

- The sign provided is not posted. The smoker was smoking about 20 ft away from the entryway.
- The no-smoking sign is somewhat hidden by other ads and what vendors are selling.
- [The] Area looks cleaner than before. [and] The owner is pleased that he has adopted the no smoking policy.
- Owner likes that smokers are respectful of signs. Does not like secondhand smoke.
- [Business] Had a few cigarette butts and debris at entryway but appeared old. It seems weather conditions could have blown debris to entryway.
- Fairly new establishment that wants to keep entryway and parking lot clean.

The intent was to conduct observations of businesses within 60 days of policy adoption and implementation. However, the late development of the observation tool resulted in the actual observations conducted from April through May 2008. Three businesses adopted a policy in November and December of 2007. Observations of these businesses occurred during the 5th and 6th months of policy adoption. Two businesses adopted a policy in February 2008, and observations were conducted within 1 and 2 months of adoption and implementation.

6. Conduct Media Activities

The media activities included development and dissemination of 2 PSAs, a press release, a health fair, and participation in 3 Spanish language radio programs.

PSA on Secondhand Smoke
A PSA specific to the encouragement of voluntary business policy adoption to prohibit no smoking within 20 feet of doorways was developed in the third quarter of 2007. KBIF 900AM,
an ethnic radio station ran 10 spots of this PSA as a community service at no cost to the project during the months of December 2007 – January 2008.

Ethnic Radio Programming
A total of 3 half-hour radio shows were aired on KBIF 900AM in February 2008 and April 2008. There were 10 paid PSA spots that aired the business PSA during the month of April 2008. The 2 shows in April also promoted the Fresh Air Friday Media Event where there was public recognition of the businesses that adopted policies through a live feed with KBIF 900AM. The shows provided information to the Latino community of the implications of secondhand smoke, benefits of policy adoption, acknowledged the businesses that had adopted voluntary policies, and encouraged policy adoption among other businesses within the Latino community.

Press Release
A press release was developed and sent out 2 weeks before the media event on April 18, 2008. This press release was sent to mainstream media as well as to the ethnic stations. The local mainstream media outlets that received the press release was KSEE 24, KFSN 30, KGPE 47, and the Bear Bee. The ethnic media outlets were Latino American Broadcasting, and KBGV 650 AM.

Fresh Air Friday Media Event, May 2, 2008
This media event/health fair was broadcasted on a live feed by Spanish radio, KBGV 650 AM to publicly recognize the businesses that had adopted voluntary policies and included the participation of dignitaries who also gave recognition to the businesses. Community organizations were invited to take part to share their resources with Latino community members in attendance.

a. Sutter Medical
b. Valley Burn Foundation
c. Anthem Blue Cross
d. CH/MCAH Babies First
e. Bear Center for New Americans
f. Bear County Department of Public Health Children’s Dental Program
g. Bear County Tobacco Prevention Program

Recognition of Business Owners
BCNA’s Tobacco Project presented each owner with an award. In addition, the following elected officials attended the event and presented certificates of recognition to the business owners who adopted the smoke-free doorway policy:

• California State Assembly Member, XXXXXXX
• Bear County Board of Supervisor, XXXXXX
• Bear City Council President, XXXXX
• Bear City Councilmember, XXXXXXX

During the Assembly Member’s remarks, he shared his struggles with his attempts to quit smoking.

The following six businesses were recognized at this event for their efforts to adopt a smoke-free doorway policy:
a. Bear Pharmacy  
b. Fiesta Supermarket  
c. Hair Mode  
d. KC Super Market  
e. Mr. Garcia’s Kitchen  
f. Tres Hermana’s Restaurant  
g. 524 Cafe  

7. Consultation with TECC, TALC and CPG  

During this project period, consultations occurred regularly with TALC, TECC, and other TCS funded grantees to obtain sample smoke-free doorway policies, sample public opinion polls, key informant instruments, and observation tools. Through review and interviews with these other resources, tools were customized for this project. This project was the only one in the State working with this target population.

Utilizing the Midwest Academy Strategy Chart, strategic planning sessions were conducted with project staff and the CPG. The CPG met quarterly during this project period. During Jan – June 2008, the CPG met twice to discuss updates, progress, project update, issues and concerns.

II. Evaluation Methods  

The Overall Evaluation Design was to examine multiple policy adoption and implementation of the smoke-free doorway policy of the Latino businesses. This was a quasi-experimental approach, with no comparison group, which utilized multiple measures of process data and a final set of observational outcome data. A qualitative analysis was conducted to tabulate responses for the Community/Public Opinion Poll, the Key Informant Interview (business owner interview), and the Observation Tool. A summary of Community/Public Opinion responses was compiled and compared and submitted in a prior report period. This report highlighted patrons’ thoughts and attitudes on smoking and secondhand smoke, and if and how a smoke-free doorway policy would influence their patronage.

Interventions with business owners were focused on shaping perceptions of the likelihood of exposure to secondhand smoke in outdoor areas, attitudes toward the behavior, beliefs about whether most people approve or disapprove of the behavior, identification of barriers that influence business owners to not adopt such a policy, and an understanding of business owners’ control over the behavior of their customers through policy adoption and implementation. Demographic data was collected (age, gender, smoking status, ethnicity of business owner, identify the desire for the policy (strong or not), accessibility to any previous tobacco education efforts, and barriers to adoption of a policy. In addition, information from observations conducted at the business sites, prior to provision of education and technical assistance to adopt/implement a policy, during and post implementation were summarized and compared.

III. Conclusions and Recommendations  

In general, all who participated in this project agreed that second hand smoke was a nuisance. With knowledge from the Community/Public Opinion Poll, language appropriate technical assistance, language specific education and bilingual written materials provided by BCNA’s Tobacco Project, 8 business owners were persuaded to adopt and implement a smoke-free doorway policy. Since policy adoption and implementation, one of these businesses has since shut down.
The approach utilized to engage business owners in the Key Informant Interviews were conducted on an individual basis. This one-on-one relationship building approach helped to break down barriers for staff to impart information about the dangers of second hand smoke. At one business, the business owner agreed to learn more and get help to develop a policy. However, at the follow-up appointment, when it was clarified that while project staff was affiliated with the Bear County Tobacco Project but that project staff were employees of a non-profit organization, the business owner became less inclined to choose to pursue policy adoption/implementation. Project staff concluded that this business owner may have felt that the policy adoption was originally a government mandate, and during a second visit staff clarified that the adoption and implementation was totally a voluntary effort. Because of this, the business owner declined to pursue the policy adoption.

This unique scenario would indicate that cultural acceptance of some mandates from a governmental policy level would be more strictly adhered to than a request for voluntary participation in a policy. Because the Latino community has had a history of respecting governmental authority, approaches to policy change and adoption may be most effective when those in authority provide mandates to change, rather than a voluntary adoption.

Successful implementation of project activities were achieved because of the cultural and linguistic competencies of the project staff. Without these capabilities, communication between these business owners and the targeted community (the Latino patrons), would have severely hampered the completion of project tasks and goals. Because of the Latino language media spots and public recognition of these businesses, BCNA was successful in increasing the Latino community’s awareness of:

- the dangers of secondhand smoke, and
- empowered many to adopt smoke-free policies for their homes and cars, too.

Two additional observations should be highlighted, they are:

- A neighboring business that did not adopt and implement a policy designed and posted its own no-smoking sign to deter smokers from loitering at its entryway.
- Business owners, themselves, who adopted and implemented a policy, were seen smoking more than 20 feet from their entryways.

These are significant positive behavior changes of business owners and business owners who are smokers. It is important to note too, that individual behavior can affect and generate change from others, and that these business owners realized that the voluntary policy of one business can and will impact the conduct of a neighboring business.

A challenge encountered during this project period was the state moratorium placed on the distribution of incentive items. Incentive items (items purchased for this project along with those donated to this project) were stockpiled with no recycle or disposal plan, i.e. urns or cigarette butt receptacles were donated to BCNA but could not be distributed to the businesses. The moratorium has since been lifted, and with the conclusion of this project, BCNA will need to develop a plan for dissemination of the remainder of these items.

With the success of this project, recommendations for future activities that may be considered are as follows:

- Provide resources for follow-up (at 6 months intervals for the next year) of businesses that adopted and implemented a policy so that the voluntary enforcement of these policies can be measured over time;
- Continue development and dissemination of language specific written materials and/or visual materials for the Latino communities to continue to increase community awareness;
• Establish a consistent and uniform approach to educate and outreach to blocks of businesses to adopt and implement smoke-free doorway policies; and
• Approach property owners with outreach and education activities along with business owners. This may result in motivating an entire property, such as an entire mini-mall to policy adoption and/or implementation.
To be conducted following observation, data collection, and analysis of public opinion poll.

Introduction with business owner:

You may remember we had a staff member here recently to conduct our public opinion poll. We asked a few questions about smoking and/or secondhand smoke to some of your customers.

I/we are here to talk with you about the answers that we received from your customers, and some of the customers at other local businesses.

Before I tell about their answers... I would like to ask you a few questions.

<table>
<thead>
<tr>
<th>Business Name/ Address/ Contact Person</th>
<th>Age:</th>
<th>Gender:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you smoke?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Do you know if any of your employees smoke?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Does secondhand smoke bother you?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Do you know if secondhand smoke bothers your customers?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

1. If your customers would prefer a smoke-free entrance to your business, would you consider adopting a smoke-free entrance policy?
   __ Yes       __ No

2. If such a policy would be adopted, what would be the positive effects in your opinion?
   ______________________________________________________________________________________
   ______________________________________________________________________________________

3. If you are not supportive of such a policy, what are your reasons?
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________

Thank you very much for your time in answering our questions. Now I would like to share some information with you from our public opinion poll administered to Latino community members about their thoughts on smoking and secondhand smoke.

1. 98% of respondents are bothered by second hand smoke.

2. 99% of respondents would support a no smoking doorway/entryway policy.
A. Would you be interested in learning more about adopting a smoke free doorway policy?

___ Yes    ___ No

Type of information given:

___ Employer Packet
___ Declined Information
___ Other (specify) _______________________

B. If yes, let’s set up another date and time so that we can talk more about how we can help you prepare and implement a smoke free doorway policy.

Date:  ______________________________
Time:  ______________________________
Specific information to bring/requested:

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

C. Do you have any other concerns and questions?
Observation survey to be conducted within 60 days of business policy adoption prohibiting smoking within 20 feet doorways:

Observation Date: ______________ Observation Time: ____________ am/pm

Name of Observer: ________________________________________________________

Business Name:  ______________________________________________________

Business Address:  ______________________________________________________

City:  ____________________________ Zip:________________

1. Are no smoking signs posted?  Yes   No

2. How many signs are posted?  

3. Are signs language-appropriate?  Yes   No

4. Are garbage/cigarette receptacles present?  Yes   No

5. How many feet are receptacles from entrance?  

6. How many cigarette butts/pieces of tobacco litter are on the ground?  

7. How many people are observed smoking within 20 feet of the entrance?  

8. Was there any conversation between the observer and individuals outside?  Yes   No

9. If more than just a greeting, was the conversation about policy?  Yes   No

10. Were policy comments positive?  Yes   No

11. Notable comments or observations
Writing Quality Final Evaluation Reports

Robin Kipke, Evaluation Associate

At the end of every funding cycle, California tobacco control projects are required to submit a final evaluation report for each primary objective to their funder, the state Tobacco Control Program. Many find this task nerve-racking or, at the very least, onerous. So why must you go to all that trouble? What is the purpose of a final evaluation report and how can it be useful to the program?

A well-written final evaluation report provides an opportunity for a project to examine the effectiveness of its intervention approach. The report does this by summarizing information collected from intervention and evaluation activities, interpreting the data for possible meanings, and concluding how the findings might shape subsequent activities or campaigns. Of course, this should be an ongoing process throughout the project, not just a reflection on accomplishments and lessons learned at the end of a funding cycle.

Final evaluation reports are submitted to TCP to be rated by the Tobacco Control Evaluation Center according to the guidelines identified in Tell Your Story. Project directors are notified when reports have been scored. The rating sheet can either be viewed online (if the report was submitted in OTIS) or can be requested as a hard copy from TCEC. Our hope is that project staff and evaluators will use the feedback to strengthen future evaluation design, methods and reporting.

Final reports are also useful as a means to document project history, inform and influence stakeholders, allies and policymakers, or even serve as a basis for obtaining outside funding. High quality reports worthy of sharing are made available through TECC on the ROVER system so that other tobacco control projects can view them to garner ideas for specific intervention strategies and look for recommendations and lessons learned.

So what makes a report “high quality”? Here are some recommendations from the scoring team at TCEC based on patterns we’ve seen in the reports that we’ve rated so far:

ABSTRACT
The abstract should be a concise overview of the project, covering each of the components of the report briefly, yet with enough detail for the reader to understand what the project attempted to achieve and how the process and/or outcome was assessed.

PROJECT DESCRIPTION & BACKGROUND INFORMATION
The project description section provides the context of the problem, the rationale for the objective, and a summary of the intervention activities. Often in the background section, reports describe the size of the area, the number of cities or the prevalent economic activities in the county. These can be useful elements if they help explain the nature and dimension of the problem. However, what’s often lacking is an account of the circumstances surrounding the specific
tobacco control issue – demographic statistics about the population, who is particularly affected by the tobacco control issue and the social norms/attitudes about tobacco use. These all should be included in order to demonstrate the need for intervention.

Background information should be chosen to support the rationale for why this particular objective (out of all the possible objectives) seemed the best way to address the problem. Merely stating that the objective was the result of a CX process is not a sufficient rationale. Explain what data or experiences led to this choice.

**INTERVENTION**

For the intervention, summarize what was done, which segment of the population was targeted, where activities occurred, when (giving dates for each phase is sufficient) and most of all, why – how each type of activity supported the objective. Don't just list all of the activities in the intervention (or even worse, paste in the activities list from your plan!).

**EVALUATION METHODS & RESULTS**

The evaluation section is one of the most important parts of the final report because it helps show whether your findings have merit and were not the result of faulty evaluation design, sampling, data collection or analysis. However, in most of the reports we’ve read, the evaluation methods section was the weakest. Often, not enough detail is provided for readers to ascertain the logic of the evaluation design, how the sample was selected, how data was collected, how data collectors were trained or what methods were used to analyze the data. Attaching data collection instruments as appendices helps readers assess the quality of your data collection. This also gives TCEC the opportunity to collect your surveys, observations, key informant interview and focus group guides for its repository for other tobacco control programs to access.

Evaluation results should be presented and interpreted in an objective manner, discussing the positive along with the negative. Make it easy for readers to arrive at your conclusions by summarizing information in tables, graphs, pie charts, etc. Use the narrative to discuss possible meanings of the data. You need to interpret the results and provide justification for your interpretation.

**CONCLUSION & RECOMMENDATIONS**

The conclusion and recommendations section is the heart of the report. It is here that you have an opportunity to state what your project learned from the whole process of doing intervention and evaluation activities on this objective. Don't just repeat suggestions from key informant interviews or focus groups; you need to weigh the merit of those comments and draw your own conclusions. Here, too, is where you draw the roadmap for future efforts on similar objectives – either for your own project or those across the state. How should approaches, strategies and activities differ the next time around in order to have a greater impact?

Now that the secrets to writing a quality final evaluation report are demystified, the scoring team is expecting great things from you! Remember to follow the guidelines laid out in Tell Your Story (downloadable at the TCEC website) or contact TCEC with any questions you might have.
SAMPLE EXCERPTS FROM WELL-WRITTEN REPORTS

To illustrate what the various components of a well-written final evaluation report might look like, we’ve pulled a few excerpts from the reports of local lead agencies that we recently scored.

Project Description – Background. Excerpt from: Reducing Youth Access to Tobacco in San Diego County
The objective was to reduce the illegal sales rates of tobacco to minors. In addition to describing the physical borders of the area, the size and characteristics of the population in the county and its major cities, the section provided a description of the target population (immigrant convenience store and gas station owners). It also outlined the context of retail licensing efforts:

The city of El Cajon has a history of leadership in tobacco control. After a youth purchase survey revealed that 40% of El Cajon’s retailers were selling tobacco to minors, City Council showed immediate interest in addressing the issue. Consultations with the City Attorney and TALC regarding a model ordinance resulted in a draft ordinance for the city that was championed by an influential Councilmember. In June 2004, just prior to the start of the grant term, the Council adopted a TRL ordinance for its approximately 125 tobacco retailers and imposed an annual licensing fee of $511.

The section went on to describe further details of the problem and the climate for policy adoption. What this example shows is that the specifics included in the background should provide a context and a framework for the rationale for choosing this objective.

Project Description – Intervention. Excerpt from: Inyo County’s report Youth Access to Tobacco
The intervention for this objective consisted of four phases: 1) planning of collaboration with local officials, 2) merchant and community education regarding illegal tobacco sales, 3) training of local law enforcement, and 4) enforcement of PC 308(a). Collaboration planning (the first phase) began with lengthy discussions between Inyo County TCP staff and elected and appointed officials to ascertain opinions and beliefs of these officials regarding illegal sales to minors and the importance of enforcing existing tobacco laws. Meetings were held with the two local Superior Court judges, the District Attorney and his staff, and the Chief of Probation. These meetings were also important in soliciting support for increased enforcement of PC 308(a) by local law enforcement…

Once key officials were supportive of increased enforcement, research was conducted to determine how tobacco citations and violations were handled in Inyo County and similar communities throughout California. The purpose was to identify the most efficient manner for these violation cases to traverse the court system.

Notice how this description of intervention activities begins with a succinct summary of each phase. This is followed by a narrative that outlines key program activities, their outcomes AND how each moved the work forward to achieving the objective. It is much more than a mere listing of activities that took place. The only element missing are the dates.

Evaluation Methods – Sample. Excerpt from: Santa Barbara’s report on Outdoor Dining
The section describes the sampling, data collection and analysis by each evaluation activity. Observational Survey: A comprehensive list of all food-serving establishments was obtained from the Environmental Health Services of the Public Health Department. The initial list included all food-serving locations in Santa Barbara City regardless of patio status (n=349). A series of telephone contacts were made to determine the outdoor dining status of each restaurant, and the list was culled to exclude: establishments without outdoor dining areas, those with a patio reported as 100% smoke-free, those not located in Santa Barbara City, those that had since closed, those that could not be reached via telephone (such that their status and inclusion criteria could not be verified). Thus the final sample for inclusion in the study was 230.

What is excellent in this example is that it clearly describes HOW the sample was derived. Any reader can tell that this process was well-planned and the sample was valid.
Conclusions and Recommendations. Excerpt from: Solano County’s report Reducing Signage on Store Windows
This report has an incredible wealth of detail which described the challenges encountered, the limitations of the intervention and evaluation activities, as well as wonderfully specific recommendations for future actions by this or other projects. While TCEC does not require this level of detail, you can easily see how a report like this becomes a resource for other projects working on similar objectives because of this detail.

Conclusions. Without a champion among the city staff, TPEP and the Reducing Advertising Committee members were not privy to crucial information about relationships within the city government or how various processes worked. This led to an underestimation of the role the Planning Division and Planning Commission both play in preparing the way for the City Council to consider proposed changes to a legislated policy.

Recommendations. Do as complete and thorough an assessment of the political environment and the required processes and players involved as early in the project as possible. Aim for capturing the support of a champion inside the system that sees merit in the project and who has influence over those who may guard the status quo….Ensure that survey instruments and procedures are NOT pilot tested on stores selected in the sample….Begin drafting the final report soon after the intervention begins and keep updating it.
Fact Sheet

Law Summary
Effective January 1, 2008, H&S Code §118947 bans the smoking of any cigarette, pipe, or cigar in a moving or parked vehicle while a youth younger than the age of 18 is present.

Purpose of the Law
As a result of this law, children in cars will breathe less secondhand smoke. It may also help reduce cigarette litter on streets and highways, reduce roadside fires, and help smokers to quit.

Children are especially at risk to the harmful health effects caused by breathing secondhand smoke in confined spaces, such as a car or truck. The level of toxic air in a vehicle when someone is smoking is up to ten times greater than the level which the United States Environmental Protection Agency considers hazardous.

The harmful chemicals in secondhand smoke can remain in the air and on surfaces in a car or truck for many hours, and even days, after a cigarette has been smoked. These chemicals stick to surfaces, such as a child’s car seat, making it a potential hidden source of danger for children.

What types of vehicles does the law apply to?
Smoking is banned in all vehicles when youth are present.

What is the fine for violators of this law?
Smokers can be fined up to $100 for smoking in vehicles when youth are present.

Who has the authority to enforce the law?
H&S Code §118947 will be enforced by law enforcement officers such as: City Police officers, Sheriff Deputies, and California Highway Patrol officers. Law enforcement officials may not stop a vehicle for a smoking violation alone.

Where can I get more information?
Contact your local health department’s tobacco control program; the California Department of Public Health, Tobacco Control Section at www.cdph.ca.gov; or the California Clean Air Project at www.ccap.etr.org.

Where can I find helpful information on quitting smoking?
Californians who would like help to quit smoking can contact the California Smokers’ Helpline at 1-800-NO-BUTTS (English), 1-800-45-NO-FUME (Spanish) or www.NoButts.org for a free personalized quitting plan.

“\nThe debate is over. The science is clear. Secondhand smoke is not a mere annoyance but a serious health hazard.”
– 2006 Surgeon General’s Report

1 Department of Health and Human Services, Surgeon General’s Report on involuntary secondhand smoke exposure. 2006
2 Ott, Klepeis, and Switzer. Air Change Rates of Motor Vehicle and In-Vehicle Pollutant Concentration for Secondhand Smoke. 2007
3 Matt. Households Contaminated by Environmental Tobacco Smoke: Sources of Infant Exposure. 2004
Summary of Key Findings: Aides to the San Francisco Board of Supervisors
Objective 2: Key Informant Interviews with Aides to the Board

The California LGBT Tobacco Education Partnership (LGBT Partnership) outlined three objectives, one of which was to advocate for the San Francisco Board of Supervisors to pass a voluntary resolution urging pharmacies to cease selling tobacco products in the City and County of San Francisco. However, in 2008, the Mayor and San Francisco Board of Supervisors (SF BOS) took a bold step, passing Ordinance 194-08, the first ordinance in the United States to prohibit pharmacies from selling tobacco products.

In light of the passage of Ordinance 194-08, the LGBT Partnership’s evaluation team (LFA Group) recognized the challenge of contacting Board members regarding their recent decision. Therefore, the evaluation team reached out to aides to the Supervisors to better understand the factors that led to the ordinance’s success, as well as their experiences, or the experiences of their Supervisor's, with the LGBT Tobacco Education Partnership. Three of the four aides contacted participated in a brief interview to discuss the successful passage of the ordinance. A basic summary is provided below.

Key Findings

What propelled the passage of the San Francisco pharmacy ordinance?

The San Francisco Board of Supervisors’ successful passage of Ordinance 194-08 to prohibit pharmacies from selling tobacco products was influenced by a number of factors. These factors include Mayor Gavin Newsom’s support of the ordinance, the City Attorney’s skilled legal writing, and advocacy and lobbying groups opposed to the tobacco industry. According to one aide, the City Attorney “worked very hard to make [the ordinance’s language] narrow and legal.” Additionally, the aides mentioned that there was a large advocacy movement occurring once the ordinance was drafted and people were beginning to mobilize and organize in support of its passage.

Aides to the SF BOS also commented on barriers that the ordinance came up against—the most significant being lobbyists from drug stores such as Walgreens. One aide noted, “[The stores] felt that they were being unfairly penalized. They felt that they do everything they can to prevent children under 18 from buying cigarettes and they are very strict about that policy. So, if they are no longer enforcing the policy, then kids will just go into liquor stores to buy cigarettes.” To overcome barriers such as drug store lobbyists, one aide commented that it was not the Board who defeated the challenges, but rather the coalition building supported by anti-tobacco advocates.
While the aides could not give specific credit to the LGBT Partnership’s advocacy work in support of a pharmacy resolution, two of the three aides mentioned prior contact with Bob Gordon of the LGBT Partnership. Additionally, two of the aides clearly remember the LGBT Partnership’s ad campaign supporting the removal of tobacco products from pharmacies. The ad included a picture of cough syrup and a cigarette, and the caption read “To help with a persistent cough go to aisle 8. To get a persistent cough go to aisle 14.” When recalling this ad, which was posted throughout San Francisco, one aide noted that it made great sense and effectively told the story of what the LGBT Partnership hoped to accomplish.

How can advocates concerned with similar public health issues effectively communicate their concerns to public officials?

To effectively campaign with public officials and harness their attention, aides to the San Francisco Board of Supervisors provided a few suggestions that advocates can employ. The suggested activities include contacting Board aides directly, providing concise facts and sticking with the facts, and clearly identifying the official’s role in the issue.

The LGBT Partnership expects to be able to utilize the information provided by the SF BOS aides to contribute to an advocacy guidebook for other municipalities pursuing similar ordinances or concerned with similar public health issues.

“Say what [Board members] have the power to do and why they should do it.”
-Board Aide

“Contacting Board aides is the best. Board members are incredibly busy and contacting the aides through email or phone is the most effective way to get their attention”
-Board Aide

“You just have to have your facts. Stick to your facts and keep it short and sweet.”
-Board Aide
Matrix of Strong Local Tobacco Retailer Licensing Ordinances

May 2009

In order to reduce illegal sales of tobacco products to minors, many cities and counties in California have adopted strong local tobacco retailer licensing ordinances. This document highlights sixty-three ordinances in which the fee and enforcement provisions are particularly noteworthy. Although over eighty communities throughout the state have passed tobacco retailer licenses, some of them do not contain provisions that would make them effective. A strong local tobacco licensing law is defined as one that includes the following four components:

- Requirements that all retailers that sell tobacco products must obtain a license and renew it annually.
- A fee set high enough to sufficiently fund an effective program including administration of the program and enforcement efforts. An enforcement plan, that includes compliance checks, should be clearly stated.
- Coordination of tobacco regulations so that a violation of any existing local, state or federal tobacco regulation violates the license.
- A financial deterrent through fines and penalties including the suspension and revocation of the license. Fines and penalties should be outlined in the ordinance.

The sixty-three communities that have adopted these strong ordinances are detailed on the following pages in reverse chronological order from most recently passed and listed here in alphabetical order: Arroyo Grande, Baldwin Park, Banning, Beaumont, Berkeley, Burbank, California City, Calimesa, Carson, Coachella, Compton, Concord, Contra Costa County, Corona, Davis, Delano, Desert Hot Springs, El Cajon, Elk Grove, Gardena, Glendale, Goleta, Grover Beach, Hemet, Hollister, Inglewood, Kern County, Lake Elsinore, Lomita, Long Beach, Los Angeles (City), Los Angeles County, McFarland, Moreno Valley, Murrieta, Nevada City, Norco, Oakland, Pacifica, Pasadena, Perris, Rancho Cordova, Richmond, Riverside (City), Riverside County, Sacramento (City), Sacramento County, San Fernando, San Francisco, San Jacinto, San Luis Obispo (City), San Luis Obispo County, Santa Ana, Santa Barbara (City), Santa Barbara County, Santa Monica, Sierra Madre, South Pasadena, Tehachapi, Temecula, Vista, Wasco, and Yolo County.

For each ordinance, the Matrix contains information about the population of the city or county, the fee amount, enforcement details, the schedule of license suspensions/revocations, any additional provisions and local contact information.

The details of the ordinances outlined in the Matrix demonstrate that strong ordinances can be adopted in many communities and that the details are flexible enough to be tailored to the specific community realities and needs. Strong licensing ordinances have been adopted by cities in fifteen different counties in both rural and urban areas. In addition, ordinances have been adopted in both small (Nevada City – pop. 3,074, Calimesa – pop. 7,536) and large cities (Los Angeles – pop. 4,045,873, San Francisco – pop. 824,925). The fees range from $30 for some smaller cities with only a couple of retailers to $635, with the majority of fees between $200 - $350. Enforcement and
compliance checks for these ordinances are handled by a variety of different agencies including the police department, sheriff’s department, public health department, code enforcement and others.

The Technical Assistance Legal Center (TALC) has a model tobacco retailer licensing ordinance available at [http://talc.phlaw.org/pdf_files/0018.pdf](http://talc.phlaw.org/pdf_files/0018.pdf). For questions about the model ordinance, contact Ian McLaughlin with TALC at 510-302-3315. While all the ordinances on this matrix are considered strong, they are not all exactly like the TALC model ordinance. Most significantly, some communities pay for compliance checks through other sustainable funding sources. Although finding alternative funding sources may not be possible in most communities, we have included these ordinances because there may be locations where these strategies make sense.

The Center has additional documents on tobacco retailer licensing, including a fact sheet on the effectiveness of these ordinances and a document with answers to tough questions from opponents and elected officials about tobacco retailer licensing, available at [www.Center4TobaccoPolicy.org/localpolicies-licensing](http://www.Center4TobaccoPolicy.org/localpolicies-licensing).

<table>
<thead>
<tr>
<th>Community/Date Passed</th>
<th>Fee</th>
<th>Enforcement Activities</th>
<th>Suspension/Revocation Schedule</th>
<th>Additional Provisions</th>
<th>Local Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>City of South Pasadena February 2009 Population: 25,792</td>
<td>$120/Annual</td>
<td>The Finance Department is responsible for compliance. Any peace officer may enforce the provisions of the law. Compliance checks will be conducted for each retailer at least once per year. More frequent compliance checks may be conducted for new retailers and those who have committed previous violations.</td>
<td>1st violation within one year – 15 day suspension</td>
<td>Bans mobile sales. Requires retailers to check the age of purchasers who appear to be under the age of 27. Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309 <a href="mailto:chrreyes@ph.lacounty.gov">chrreyes@ph.lacounty.gov</a> or Wesley Reutimann, Day One: (626) 229-9750 <a href="mailto:wesley@dayonepasadena.com">wesley@dayonepasadena.com</a></td>
</tr>
<tr>
<td>City of Santa Monica November 2008 Population: 91,439</td>
<td>$135.45/Annual</td>
<td>The City Manager or Manager’s designee is responsible for suspension and revocation of the license.</td>
<td>1st violation within 5 years – up to 30 day suspension</td>
<td>Bans mobile sales. Requires retailers to check the age of purchasers who appear to be under the age of 27. Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309 <a href="mailto:chrreyes@ph.lacounty.gov">chrreyes@ph.lacounty.gov</a></td>
</tr>
<tr>
<td>City of Baldwin Park October 2008 Population: 81,281</td>
<td>Fee not set yet but ordinance requires it to be sufficient to cover administration and</td>
<td>The Community Development Department shall be responsible for compliance. Any peace officer or may enforce the provisions of this law. The number of compliance checks per year will be</td>
<td>1st violation within 5 years – 10 day revocation</td>
<td>Bans mobile sales. Requires retailers to check the age of purchasers who appear to be under the age of 27. Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309 <a href="mailto:chrreyes@ph.lacounty.gov">chrreyes@ph.lacounty.gov</a></td>
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| County of San Luis Obispo October 2008 Population: 116,716 | $342/Annual | The Sheriff’s Department will be responsible for compliance. At least four compliance checks per year will be conducted. | 1<sup>st</sup> violation within 5 years – 30 day suspension  
2<sup>nd</sup> violation within 5 years – 90 day suspension  
3<sup>rd</sup> violation within 5 years – 1 year suspension  
4<sup>th</sup> violation within 5 years – 5 year suspension | Bans mobile sales.  
Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.  
Requires that no license may be granted to any business offering food or alcoholic beverages for sale for consumption on the premises.  
Requires that no license may be issued for any location that is exclusively zoned for residential uses. | Amber Alewine, Health Education Specialist, County of San Luis Obispo Health Agency: (805) 781-1157 aalewine@co.slo.ca.us |
<p>| City of San Fernando October 2008 Population: 25,230 (note: the original license with no fee was passed in 2002) | $250/Annual | The administrative services department shall be responsible for enforcement. | 1&lt;sup&gt;st&lt;/sup&gt; violation within one year – 30 day suspension unless the retailer submits a training plan with the administrative services department for the training of all sales employees in the laws pertaining to the sales of tobacco and shows evidence that the training has been completed | Bans mobile sales. | Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health; (213) 351-7309 <a href="mailto:chrreyes@ph.lacounty.gov">chrreyes@ph.lacounty.gov</a> |</p>
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<th>Suspension/Revocation Schedule</th>
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<tbody>
<tr>
<td>City of Perris</td>
<td>$350/Annual Fee paid to the</td>
<td>The Riverside County Health Department is responsible for the enforcement of the ordinance.</td>
<td>2&lt;sup&gt;nd&lt;/sup&gt; violation within one year – 90 day suspension</td>
<td>Bans mobile sales.</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222 <a href="mailto:mbaxter@co.riverside.ca.us">mbaxter@co.riverside.ca.us</a></td>
</tr>
<tr>
<td>August 2008</td>
<td>County of Riverside to conduct the administration and enforcement of the ordinance.</td>
<td>The Department will check compliance with the law at each retailer at least three times per year.</td>
<td>3&lt;sup&gt;rd&lt;/sup&gt; violation within one year – One year suspension</td>
<td>Requires retailers to check the age of purchasers who reasonably appear to be under the age of 27.</td>
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<tr>
<td>Population: 53,605</td>
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<td></td>
<td>1&lt;sup&gt;st&lt;/sup&gt; violation within 5 years – 10 day revocation</td>
<td>Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).</td>
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</tr>
<tr>
<td>City of Gardena</td>
<td>$167 Initial $120 Renewal</td>
<td>The police department and administrative services department shall be responsible for compliance. Any peace officer or may enforce the provisions of this law. The police department will conduct compliance checks on at least 50 percent of the retailers each year.</td>
<td>2&lt;sup&gt;nd&lt;/sup&gt; violation within 5 years – 30 day revocation</td>
<td>Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309 <a href="mailto:chrreyes@ph.lacounty.gov">chrreyes@ph.lacounty.gov</a></td>
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<tr>
<td>July 2008</td>
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<td>3&lt;sup&gt;rd&lt;/sup&gt; violation within 5 years – 90 day revocation</td>
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<td>Population: 61,781</td>
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<td>4&lt;sup&gt;th&lt;/sup&gt; violation within 5 years – 5 year revocation</td>
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<tr>
<td>City of Delano</td>
<td>$165/Annual Compliance monitored by the Delano Police Department.</td>
<td>Violators are subject to license suspension, administrative penalties, or both. License Suspension: 1&lt;sup&gt;st&lt;/sup&gt; violation within 5 years – up to 30-day suspension</td>
<td>Bans mobile sales.</td>
<td>Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Nsele Nsuangani, Project Director, Kern County Department of Public Health: (661) 868-0488, <a href="mailto:nsuanganin@co.kern.ca.us">nsuanganin@co.kern.ca.us</a></td>
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<tr>
<td>June 2008</td>
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<td>Requires retailers to check the age of</td>
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<td>City of Oakland</td>
<td>$50/Annual application fee&lt;br&gt;$1500/Annual inspection fee (businesses selling alcohol with deemed approve permits are exempted from the inspection fee since they already pay for an inspection fee)</td>
<td>The Oakland Police Department is responsible for compliance. Any peace officer can enforce the provisions of the law. The City Administrator is responsible for adopting rules of procedures and regulations for carrying out the provisions of this chapter.</td>
<td>1st violation within 5 years – 10 day revocation&lt;br&gt;2nd violation within 5 years – 30 day revocation&lt;br&gt;3rd violation within 5 years – 90 day revocation&lt;br&gt;4th violation within 5 years – Five year revocation&lt;br&gt;Tobacco retailers may engage in a settlement agreement with the City Administrator after a first or second violation. The settlement agreement after a first violation would include a 1-day suspension of selling tobacco, at least a $1,000 fine, and an admission that the violation occurred. The settlement agreement after a second violation would include a 10-day suspension of selling tobacco, at least a $5,000 fine, and an admission that the violation occurred.</td>
<td>No license will be issued to any retailer that sells drug paraphernalia. All retailers must sign a statement that no drug paraphernalia is or will be sold. Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. Bans mobile sales. Requires retailers to check the age of purchasers who appear to be under the age of 27. Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Establishes violation of this permit to be a public nuisance and therefore subject to administrative fines of $1,000 per day as long as the problem is not abated.</td>
<td>Serena Chen, Tobacco and Policy Director, American Lung Association of California: (510) 893-5474 x303 <a href="mailto:schen@alac.org">schen@alac.org</a></td>
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<td>April 2008</td>
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<td>Population: 420,183</td>
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<tr>
<td>City of Hemet</td>
<td>$350/Annual</td>
<td>The Riverside County Health Department is responsible for the enforcement of the ordinance. The Department will check compliance with the law at each retailer at least three times per year.</td>
<td>1\textsuperscript{st} violation within 5 years – 10 day revocation 2\textsuperscript{nd} violation within 5 years – 30 day revocation 3\textsuperscript{rd} violation within 5 years – 90 day revocation 4\textsuperscript{th} violation within 5 years – 5 year revocation</td>
<td>Bans mobile sales. Requires retailers to check the age of purchasers who reasonably appear to be under the age of 27. Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222 <a href="mailto:mbaxter@co.riverside.ca.us">mbaxter@co.riverside.ca.us</a></td>
</tr>
<tr>
<td>March 2008</td>
<td></td>
<td>Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance.</td>
<td>For the first and second violation the retailer can enter a settlement with the County to pay a fine and get a reduced revocation.</td>
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<td>Population: 74,185</td>
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<tr>
<td>City of Long Beach</td>
<td>$442/Annual</td>
<td>The Long Beach Police Department is responsible for compliance checks for illegal sales to minors. The Department of Health and Human Services, City Attorney and City Prosecutor are responsible for inspections and enforcement of all other tobacco laws.</td>
<td>1\textsuperscript{st} violation within 5 years – up to 10 day suspension 2\textsuperscript{nd} violation within 5 years – up to 30 day suspension 3\textsuperscript{rd} violation within 5 years – permit may be revoked If permit is revoked, may not apply for new permit for 120 calendar days Any decision to suspend or revoke may be appealed</td>
<td>Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Margaret (Peggy) Preacely, Project Director, City of Long Beach, Tobacco Retail Enforcement Program: (562) 570-7955 <a href="mailto:Margaret.preacely@longbeach.gov">Margaret.preacely@longbeach.gov</a> Or Melanie Gabriel, Assistant TREP Coordinator: (562) 570-7926 <a href="mailto:Melanie.gabriel@longbeach.gov">Melanie.gabriel@longbeach.gov</a></td>
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<td>February 2008</td>
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<td>Population: 492,642</td>
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<td>City of Pacifica</td>
<td>$300/Annual</td>
<td>The police department, business license department, and code enforcement officials are responsible for monitoring compliance. Any peace officer or code enforcement official may enforce the provisions. At least two compliance checks will be conducted for each tobacco retailer annually.</td>
<td>1\textsuperscript{st} violation within 5 years – 10 day revocation 2\textsuperscript{nd} violation within 5 years – 30 day revocation 3\textsuperscript{rd} violation within 5 years – 90 day revocation 4\textsuperscript{th} violation within 5 years – 5 year revocation Tobacco retailers may engage in a settlement agreement with the city attorney after a first or second violation.</td>
<td>Bans mobile sales. Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. Requires that no license may be granted to any business offering food or alcoholic beverages for sale for consumption on the premises. Requires retailers to check the age of purchasers who appear to be under the age of 27.</td>
<td>Derek Smith, Program Director, Tobacco Prevention Program, San Mateo County Health Department: (650) 573-2012 <a href="mailto:Dsmith1@co.sanmateo.ca.us">Dsmith1@co.sanmateo.ca.us</a> Or Amanda Cue, Senior Director of Prevention, Youth Leadership Institute: (650) 347-4963 <a href="mailto:acue@yli.org">acue@yli.org</a></td>
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<td>February 2008</td>
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<tr>
<td>Population: 39,616</td>
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| County of Los Angeles | $235/Annual| Compliance checks are divided up between the County Sheriff’s Department and the County Department of Public Health’s Environmental Health Program. The Sheriff’s Department is responsible for compliance checks that include youth decoy operations. The Health Department will perform compliance checks for all other violations of the ordinance (such as proper posting of the license) and will perform at least one compliance check per retailer each year. | 1st violation within 5 years – up to 30 day suspension  
2nd violation within 5 years – up to 90 day suspension  
3rd violation within 5 years – up to 120 day suspension  
4th violation within 5 years – license revoked | Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).  
Smoking is prohibited inside the premises of all tobacco retailers and within 20 feet of any entrance, exit or window to the store. | Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309 chrreyes@ph.lacounty.gov |
| City of Inglewood     | $350/Annual| Enforcement will be conducted by the Inglewood Police Department, the Business License Division, or the Code Enforcement Division. | 1st violation within 5 years – up to 30 day suspension  
2nd violation within 5 years – up to 90 day suspension  
3rd violation within 5 years – license may be revoked | Bans mobile sales.  
Requires retailers to check the age of purchasers who appear to be under the age of 27.  
Requires that clerks are the minimum legal age to purchase tobacco products.  
Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. | Michael Franklin, Dakota Communications, (310) 815-8444, mfinglewood@aol.com or Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309 chrreyes@ph.lacounty.gov |
| City of Glendale      | $225/Annual| Enforcement will be conducted by the Glendale Police                                                       | 1st violation within 5 years – up to 30 day suspension | Bans mobile sales.                                                                                       | Guadulesa Rivera, Glendale Adventist Medical Center: |

- 7 -  

Center for Tobacco Policy & Organizing, May 4, 2009
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<td>City of Moreno Valley</td>
<td>$350/Annual</td>
<td>The Riverside County Health Department is responsible for the enforcement of the ordinance. The Department will check compliance with the law at each retailer at least three times per year.</td>
<td>1st violation within 5 years – 10 day revocation 2nd violation within 5 years – 30 day revocation 3rd violation within 5 years – 90 day revocation 4th violation within 5 years – 5 year revocation</td>
<td>Bans mobile sales. Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18 Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222 <a href="mailto:mbaxter@co.riverside.ca.us">mbaxter@co.riverside.ca.us</a></td>
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<td>September 2007</td>
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<td>Population: 183,680</td>
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<td>City of Davis</td>
<td>$348/Annual</td>
<td>The Yolo County Department of Environmental Health is responsible for administration of the ordinance. The Yolo County District Attorney’s office handles enforcement and three sting operations per year.</td>
<td>1st violation within 5 years – 10 day revocation 2nd violation within 5 years – 90 day revocation 3rd violation within 5 years – 1 year revocation 4th violation within 5 years – 5 year revocation</td>
<td>Bans mobile sales. Requires that clerks are the minimum legal age to purchase tobacco products. Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. Bans tobacco sales or giveaways at bars or any location licensed to serve alcohol for on-site consumption.</td>
<td>Steven Jensen Yolo County Health Department, Tobacco Education Program: (530) 666-8616, <a href="mailto:steven.jensen@yolocounty.org">steven.jensen@yolocounty.org</a></td>
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<td>August 2007</td>
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<td>Population: 65,814</td>
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<tr>
<td>City of Desert Hot</td>
<td>$350/Annual</td>
<td>The Riverside County Health Department is responsible for the enforcement of the ordinance.</td>
<td>1st violation within 5 years – 10 day revocation 2nd violation within 5 years – 30 day revocation</td>
<td>Bans mobile sales. Requires retailers to check the age of purchasers who reasonably appear to be under the age of 27.</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222</td>
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<td>Springs</td>
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<td>August 2007</td>
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<td>Population: 207,157</td>
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<td>Department, neighborhood services inspectors and code enforcement, and permit investigators.</td>
<td>2nd violation within 5 years – up to 90 day suspension 3rd violation within 5 years – permit may be revoked</td>
<td>Requires retailers to check the age of purchasers who appear to be under the age of 27.</td>
<td>(323) 255-9030, <a href="mailto:guadulE1@ah.org">guadulE1@ah.org</a> or Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309 <a href="mailto:chrreyes@ph.lacounty.gov">chrreyes@ph.lacounty.gov</a></td>
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| **City of Compton**   | $500/Annual Municipal Law Enforcement Services shall be responsible for compliance. Any peace officer or law enforcement officer may enforce the provisions of this law. Compliance checks will be conducted for each retailer at least once per year. | 1\(^{st}\) violation within 3 years – (1) written warning; (2) advised of penalties for additional violations; (3) required to provide documentation that all employees have engaged in the retail sales of tobacco have received training in a city-approved program within 60 days after the warning; and (4) license suspended for 30 to 90 days  
2\(^{nd}\) violation within 3 years – up to one year suspension  
3\(^{rd}\) violation within 3 years – license may be revoked | Bans mobile sales.  
Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. | Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health:  
(213) 351-7309  
chrreyes@ph.lacounty.gov |
| **City of Lake Elsinore**  
August 2007 | $350/Annual Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance. | The Riverside County Health Department is responsible for the enforcement of the ordinance.  
The Department will check compliance with the law at each retailer at least three times per year. | 1\(^{st}\) violation within 5 years – 10 day revocation  
2\(^{nd}\) violation within 5 years – 30 day revocation  
3\(^{rd}\) violation within 5 years – 90 day revocation  
4\(^{th}\) violation within 5 years – 5 year revocation  
For the first and second violation the retailer can enter a settlement with the County to pay a fine and get a reduced revocation. | Bans mobile sales.  
Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18  
Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).  
Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. | Martin Baxter, Senior Health Educator, Riverside County Public Health Department:  
(760) 778-2222  
mbaxter@co.riverside.ca.us |
| **Population: 26,068** | Riverside to conduct the administration and enforcement of the ordinance. | The Department will check compliance with the law at each retailer at least three times per year. | day revocation  
3\(^{rd}\) violation within 5 years – 90 day revocation  
4\(^{th}\) violation within 5 years – 5 year revocation  
For the first and second violation the retailer can enter a settlement with the County to pay a fine and get a reduced revocation. | to be under the age of 18  
Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).  
Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. | mbaxter@co.riverside.ca.us |
| **Population: 26,068** | $350/Annual Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance. | The Department will check compliance with the law at each retailer at least three times per year. | 1\(^{st}\) violation within 5 years – 10 day revocation  
2\(^{nd}\) violation within 5 years – 30 day revocation  
3\(^{rd}\) violation within 5 years – 90 day revocation  
4\(^{th}\) violation within 5 years – 5 year revocation  
For the first and second violation the retailer can enter a settlement with the County to pay a fine and get a reduced revocation. | to be under the age of 18  
Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).  
Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. | mbaxter@co.riverside.ca.us |
| **City of Compton**   | $500/Annual Municipal Law Enforcement Services shall be responsible for compliance. Any peace officer or law enforcement officer may enforce the provisions of this law. Compliance checks will be conducted for each retailer at least once per year. | 1\(^{st}\) violation within 3 years – (1) written warning; (2) advised of penalties for additional violations; (3) required to provide documentation that all employees have engaged in the retail sales of tobacco have received training in a city-approved program within 60 days after the warning; and (4) license suspended for 30 to 90 days  
2\(^{nd}\) violation within 3 years – up to one year suspension  
3\(^{rd}\) violation within 3 years – license may be revoked | Bans mobile sales.  
Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. | Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health:  
(213) 351-7309  
chrreyes@ph.lacounty.gov |
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<th>Additional Provisions</th>
<th>Local Contact</th>
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</thead>
<tbody>
<tr>
<td>City of Coachella</td>
<td>$350/Annual</td>
<td>Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance.</td>
<td>For a first or second violation, the retailer may enter a settlement with the city to pay a fine and get a reduced revocation.</td>
<td>Bans mobile sales. Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18 Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222 <a href="mailto:mbaxter@co.riverside.ca.us">mbaxter@co.riverside.ca.us</a></td>
</tr>
</tbody>
</table>
| July 2007             |     | The Riverside County Health Department is responsible for the enforcement of the ordinance. The Department will check compliance with the law at each retailer at least three times per year. | 1
| Population: 40,517    |     | violation within 5 years – 10 day revocation | 2
|                       |     | 2
|                       |     | nd violation within 5 years – 30 day revocation | 3
|                       |     | 3
|                       |     | rd violation within 5 years – 90 day revocation | 4
|                       |     | 4
|                       |     | th violation within 5 years – 5 year revocation For the first and second violation the retailer can enter a settlement with the County to pay a fine and get a reduced revocation. | | |
| City of Calimesa      | $350/Annual | Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance. | The Riverside County Health Department is responsible for the enforcement of the ordinance. The Department will check compliance with the law at each retailer at least three times per year. | Bans mobile sales. Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18 Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. | Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222 mbaxter@co.riverside.ca.us |
| June 2007             |     | The Riverside County Health Department is responsible for the enforcement of the ordinance. The Department will check compliance with the law at each retailer at least three times per year. | 1
| Population: 7,536     |     | violation within 5 years – 10 day revocation | 2
|                       |     | 2
|                       |     | nd violation within 5 years – 30 day revocation | 3
|                       |     | 3
|                       |     | rd violation within 5 years – 90 day revocation | 4
|                       |     | 4
|                       |     | th violation within 5 years – 5 year revocation For the first and second violation the retailer can enter a settlement with the County to pay a fine and get a reduced revocation. | | |
| City of Lomita        | $150/Annual | The administrative services department, business license division and the community development department, neighborhood preservation division, shall be responsible for compliance. Any peace officer | The administrative services department, business license division and the community development department, neighborhood preservation division, shall be responsible for compliance. Any peace officer | Bans mobile sales. Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18 Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. | Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309 chrreyes@ph.lacounty.gov |
| May 2007              |     | | 1
<p>| Population: 21,056    |     | violation within 3 years – (1) written warning; (2) advised of penalties for additional violations; (3) required to provide documentation that all employees have engaged in the retail sales of tobacco have | | |</p>
<table>
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<tbody>
<tr>
<td>City of McFarland, May 2007</td>
<td>$165/Annual</td>
<td>Compliance monitored by the Kern County Environmental Health Services Department.</td>
<td>1st violation within 5 years – letter of reprimand 2nd violation within 5 years – up to 30-day suspension 3rd violation within 5 years – up to 90-day suspension 4th violation within 5 years – up to 180-day suspension or revocation Administrative Penalties: 1st violation within 1 year – penalty up to $250 2nd violation within 1 year – penalty up to $500 3rd violation within 1 year – penalty up to $1,000</td>
<td>Bans mobile sales. Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Nsele Nsuangani, Project Director, Kern County Department of Public Health: (661) 868-0489, <a href="mailto:nsuanganin@co.kern.ca.us">nsuanganin@co.kern.ca.us</a></td>
</tr>
<tr>
<td>City of Wasco, March 2007</td>
<td>$165/Annual</td>
<td>Compliance monitored by the Kern County Environmental Health Services Department.</td>
<td>1st violation within 5 years – received training in a city-approved program within 60 days after the warning 2nd violation within 3 years – up to 30-day suspension 3rd violation within 3 years – up to 90-day suspension 4th violation within 3 years – up to one year suspension 5th violation within 3 years – license may be revoked</td>
<td>Bans mobile sales. Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Nsele Nsuangani, Project Director, Kern County Department of Public Health: (661) 868-0489, <a href="mailto:nsuanganin@co.kern.ca.us">nsuanganin@co.kern.ca.us</a></td>
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<tr>
<td>City of California</td>
<td>$165/Annual</td>
<td>Compliance monitored by the Kern County Environmental Health Services Department.</td>
<td>letter of reprimand</td>
<td>All applicants for a Tobacco Retailer’s Permit must submit verification that they have attended a training program provided or approved by the County’s Public Health Services Department on the laws related to the sale of tobacco products in California.</td>
<td>Nsele Nsuangani, Project Director, Kern County Department of Public Health: (661) 868-0489, <a href="mailto:nsuanganin@co.kern.ca.us">nsuanganin@co.kern.ca.us</a></td>
</tr>
<tr>
<td>City of Tehachapi</td>
<td>$165/Annual</td>
<td>Compliance monitored by the Kern County Environmental Health Services Department.</td>
<td>letter of reprimand</td>
<td>Bans mobile sales.</td>
<td>Nsele Nsuangani, Project Director, Kern County Department of Public Health: (661) 868-0489, <a href="mailto:nsuanganin@co.kern.ca.us">nsuanganin@co.kern.ca.us</a></td>
</tr>
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Additional Provisions:
- Compliance monitored by the Kern County Environmental Health Services Department.

- All applicants for a Tobacco Retailer’s Permit must submit verification that they have attended a training program provided or approved by the County’s Public Health Services Department on the laws related to the sale of tobacco products in California.

Administrative Penalties:
- 1st violation within 1 year – penalty up to $250
- 2nd violation within 1 year – penalty up to $500
- 3rd violation within 1 year – penalty up to $1,000
- 4th violation within 5 years – up to 30-day suspension
- 3rd violation within 5 years – up to 90-day suspension
- 4th violation within 5 years – up to 180-day suspension or revocation

License Suspension:
- 1st violation within 5 years – letter of reprimand
- 2nd violation within 5 years – up to 30-day suspension
- 3rd violation within 5 years – up to 90-day suspension
- 4th violation within 5 years – up to 180-day suspension or revocation

Administrative Penalties:
- 1st violation within 1 year – penalty up to $250
- 2nd violation within 1 year – penalty up to $500
- 3rd violation within 1 year – penalty up to $1,000
- 4th violation within 5 years – up to 30-day suspension
- 3rd violation within 5 years – up to 90-day suspension
- 4th violation within 5 years – up to 180-day suspension or revocation

Administrative Penalties:
- 1st violation within 1 year – penalty up to $250
- 2nd violation within 1 year – penalty up to $500
- 3rd violation within 1 year – penalty up to $1,000
- 4th violation within 5 years – up to 30-day suspension
- 3rd violation within 5 years – up to 90-day suspension
- 4th violation within 5 years – up to 180-day suspension or revocation

License Suspension:
- 1st violation within 5 years – letter of reprimand
- 2nd violation within 5 years – up to 30-day suspension
- 3rd violation within 5 years – up to 90-day suspension
- 4th violation within 5 years – up to 180-day suspension or revocation

Administrative Penalties:
- 1st violation within 1 year – penalty up to $250
- 2nd violation within 1 year – penalty up to $500
- 3rd violation within 1 year – penalty up to $1,000
- 4th violation within 5 years – up to 30-day suspension
- 3rd violation within 5 years – up to 90-day suspension
- 4th violation within 5 years – up to 180-day suspension or revocation

License Suspension:
- 1st violation within 5 years – letter of reprimand
- 2nd violation within 5 years – up to 30-day suspension
- 3rd violation within 5 years – up to 90-day suspension
- 4th violation within 5 years – up to 180-day suspension or revocation

Bans mobile sales.

Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.

Nsele Nsuangani, Project Director, Kern County Department of Public Health: (661) 868-0489, nsuanganin@co.kern.ca.us
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| City of Burbank       | $235 Initially $200 Renewal | Compliance monitored by the Burbank Police Department. | 1st violation – up to 30-day suspension  
2nd violation within 5 years – up to 30-day suspension  
3rd violation within 5 years – up to 90-day suspension  
4th violation within 5 years – up to 180-day suspension or revocation  
Administrative Penalties:  
1st violation within 1 year – penalty up to $250  
2nd violation within 1 year – penalty up to $500  
3rd violation within 1 year – penalty up to $1,000 | Bans mobile sales.  
Requires retailers to check the age of purchasers who appear to be under the age of 27.  
Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). | Alisha Lopez, Director, Tobacco Prevention Program, Valley Community Clinic: (818) 301-6311, aclopez@valleyclinic.org  
or  
Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309 chrreyes@ph.lacounty.gov |
| City of Beaumont       | $350/Annual Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance. | The Riverside County Health Department is responsible for the enforcement of the ordinance.  
The Department will check compliance with the law at each retailer at least three times per year. | 1st violation within 5 years – 10 day revocation  
2nd violation within 5 years – 30 day revocation  
3rd violation within 5 years – 90 day revocation  
4th violation within 5 years – 5 year revocation | Bans mobile sales.  
Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18  
Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).  
Requires that all tobacco-related products and advertising must be | Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222 mbaxter@co.riverside.ca.us |
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<tr>
<td><strong>City of Nevada City</strong> &lt;br&gt; November 2006 &lt;br&gt; Population: 3,074</td>
<td>$100/annual</td>
<td>Compliance is monitored by the Nevada City Police Department. The Department will check compliance with youth access laws at least one time per year. License will be revoked after a violation of the ordinance. 1st violation within 5 years – no new license may be issued until 10 days after revocation 2nd violation within 5 years – no new license may be issued until 30 days after revocation 3rd violation within 5 years – no new license may be issued until 90 days after revocation 4th violation within 5 years – no new license may be issued until 5 years after revocation</td>
<td>Bans mobile sales. Requires retailers to check the age of purchasers who appear to be under the age of 27. Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).</td>
<td>removed from public view during periods of suspension or revocation.</td>
<td>Felicia Sobonya, Nevada County Tobacco Use Prevention Coordinator: (530) 265-7018, <a href="mailto:Felicia.sobonya@co.nevada.ca.us">Felicia.sobonya@co.nevada.ca.us</a></td>
</tr>
<tr>
<td><strong>City of Sierra Madre</strong> &lt;br&gt; November 2006 &lt;br&gt; Population: 11,116</td>
<td>$30/annual</td>
<td>Compliance monitored by the Sierra Madre Police Department. 1st violation within 1 year – 30-day suspension or retailer must submit a training plan on tobacco laws for all employees and provide evidence that training has been completed 2nd violation within 1 year – 90-day suspension 3rd violation within 1 year – 1-year suspension and retailer must display a sign that it has violated public health laws regarding tobacco and that sales are currently banned</td>
<td>Bans mobile sales. Contains a “shame clause” which requires retailers who commit a third violation in one year to display a readily visible sign for the duration of the one-year suspension that states, “This retailer has violated important public health laws regulating tobacco. Tobacco sales are currently banned at this location.”</td>
<td></td>
<td>Wesley Reutimann, Day One: (626) 229-9750 <a href="mailto:wesley@dayonepasadena.com">wesley@dayonepasadena.com</a> or Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309 <a href="mailto:chrreyes@ph.lacounty.gov">chrreyes@ph.lacounty.gov</a></td>
</tr>
<tr>
<td><strong>City of Carson</strong> &lt;br&gt; November 2006 &lt;br&gt; Population: 97,960</td>
<td>$500/annual</td>
<td>Compliance monitored by the LA County Sheriff’s Department – Carson Station. City peace officers and code enforcement officers are authorized to enforce the ordinance. Enforcement officers shall 1st violation within 3 years – written warning, advised of penalties for further violations, or required to have all employees engaged in tobacco sales to undergo training by the City.</td>
<td>Bans mobile sales. Requires that all tobacco-related products must be removed from public view during periods of suspension or revocation.</td>
<td></td>
<td>Seumaninoa Puaina, Outreach Worker, Office of Samoan Affairs: (310) 538-0556, <a href="mailto:spuaina@sampanaffairs.org">spuaina@sampanaffairs.org</a> or</td>
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<tr>
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<tr>
<td>Kern County</td>
<td>$165/Annual</td>
<td>Compliance monitored by the Kern County Environmental Health Services Department.</td>
<td>2nd violation within 3 years – up to 30-day suspension</td>
<td>Bans mobile sales.</td>
<td>Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7305 <a href="mailto:chrreyes@ph.lacounty.gov">chrreyes@ph.lacounty.gov</a></td>
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<tr>
<td>November 2006</td>
<td></td>
<td></td>
<td>3rd violation within 3 years – up to 90-day suspension</td>
<td>Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
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<tr>
<td>Population: 298,603</td>
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<td>4th violation within 3 years – up to 1-year suspension</td>
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<td>(in unincorporated</td>
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<td>5th violation within 3 years – permit may be revoked</td>
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<td>areas)</td>
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<td>License Suspension:</td>
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<td></td>
<td>1st violation within 5 years – letter of reprimand</td>
<td>Administrative Penalties:</td>
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<td></td>
<td>2nd violation within 5 years – up to 30-day suspension</td>
<td>1st violation within 1 year – penalty up to $250</td>
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<td></td>
<td>3rd violation within 5 years – up to 90-day suspension</td>
<td>2nd violation within 1 year – penalty up to $500</td>
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<td>4th violation within 5 years – up to 180-day suspension or revocation</td>
<td>3rd violation within 1 year – penalty up to $1,000</td>
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<td></td>
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<td>Administrative Penalties:</td>
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<td>License Suspension:</td>
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<td></td>
<td>1st violation within 5 years – up to 30-day suspension</td>
<td>Administrative Penalties:</td>
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<td></td>
<td>2nd violation within 5 years – up to 90-day suspension</td>
<td>1st violation within 1 year – penalty up to $250</td>
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<td></td>
<td>3rd violation within 5 years – up to 90-day suspension</td>
<td>2nd violation within 1 year – penalty up to $500</td>
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<td>4th violation within 5 years – up to 180-day suspension or revocation</td>
<td>3rd violation within 1 year – penalty up to $1,000</td>
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<td>Violators are subject to license suspension, administrative penalties, or both.</td>
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<td>All applicants for a Tobacco Retailer’s Permit must submit verification that they have attended a training program provided or approved by the County’s Public Health Services Department on the laws related to the sale of tobacco products in California.</td>
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<td>Bans mobile sales.</td>
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<tr>
<td>City of Santa Ana</td>
<td>$635/annual</td>
<td>Compliance monitored by the Santa Ana Police Department and the City will contract with the California Department of Health Services, Food &amp; Drug Branch to do regular compliance checks.</td>
<td>1st violation – up to 60-day suspension</td>
<td></td>
<td>Andrea Portenier, Health Educator, Tobacco Use Prevention Program: (714) 834-7408, <a href="mailto:aportenier@ochca.com">aportenier@ochca.com</a></td>
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<td>October 2006</td>
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<td>2nd violation within 5 years – up to 120-day suspension</td>
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<td>Population: 353,184</td>
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<td>3rd violation within 5 years – up to 180-day suspension</td>
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<td>4th violation – license may be revoked</td>
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| **City of Concord**  
September 2006  
Population: 123,776 | $160/Annual  
Fee paid to the Concord Police Department and any other City designee. | Compliance monitored by the Concord Police Department and any other City designee. | 1st violation within 2 years – up to 30-day suspension.  
2nd violation within 2 years – up to 90-day suspension.  
Subsequent violations within 2 years – 1 Year suspension. | Requires retailers to check the age of purchasers who appear to be under the age of 27.  
Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).  
Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. | Denice Dennis, Project Director, Contra Costa Health Services:  
(925) 313-6825,  
ddenis@hsd.cccounty.us |
| **City of Banning**  
August 2006  
Population: 28,348 | $350/Annual  
Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance. | The Riverside County Health Department is responsible for the enforcement of the ordinance.  
The Department will check compliance with the law at each retailer at least three times per year. | 1st violation within 5 years – 10 day revocation  
2nd violation within 5 years – 30 day revocation  
3rd violation within 5 years – 90 day revocation  
4th violation within 5 years – 5 year revocation  
For the first and second violation the retailer can enter a settlement with the County to pay a fine and get a reduced revocation. | Bans mobile sales.  
Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18  
Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).  
Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. | Martin Baxter, Senior Health Educator, Riverside County Public Health Department:  
(760) 778-2222  
mbaxter@co.riverside.ca.us |
| **City of San Jacinto**  
June 2006  
Population: 35,672 | $350/Annual  
Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance. | The Riverside County Health Department is responsible for the enforcement of the ordinance.  
The Department will check compliance with the law at each retailer at least three times per year. | 1st violation within 5 years – 10 day revocation  
2nd violation within 5 years – 30-day revocation  
3rd violation within 5 years – 90-day revocation  
4th violation within 5 years – 5 year revocation  
For the first and second violation the retailer can enter a settlement with the County to pay a fine and get a reduced revocation. | Bans mobile sales.  
Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18  
Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).  
Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation. | Martin Baxter, Senior Health Educator, Riverside County Public Health Department:  
(760) 778-2222  
mbaxter@co.riverside.ca.us |
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<tr>
<td><strong>City of Riverside</strong>&lt;br&gt;May 2006&lt;br&gt;Population: 296,842</td>
<td>$350/Annual  Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance.</td>
<td>The Riverside County Health Department is responsible for the enforcement of the ordinance. The Department will check compliance with the law at each retailer at least three times per year.</td>
<td>1st violation within 5 years – 10 day revocation&lt;br&gt;2nd violation within 5 years – 30-day revocation&lt;br&gt;3rd violation within 5 years – 90-day revocation&lt;br&gt;4th violation within 5 years – 5 year revocation</td>
<td>Bans mobile sales.&lt;br&gt;Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18&lt;br&gt;Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).&lt;br&gt;Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222&lt;br&gt;<a href="mailto:mbaxter@co.riverside.ca.us">mbaxter@co.riverside.ca.us</a></td>
</tr>
<tr>
<td><strong>Yolo County</strong>&lt;br&gt;May 2006&lt;br&gt;Population: 23,265&lt;br&gt;(in unincorporated areas)</td>
<td>$340/Annual</td>
<td>The Department of Environmental Health is responsible for administration of the ordinance. The District Attorney’s office handles enforcement and three sting operations per year.</td>
<td>1st violation within 5 years – 10 day revocation&lt;br&gt;2nd violation within 5 years – 90 day revocation&lt;br&gt;3rd violation within 5 years – 1 year revocation&lt;br&gt;4th violation within 5 years – 5 year revocation</td>
<td>Bans mobile sales.&lt;br&gt;Requires that clerks are the minimum legal age to purchase tobacco products.&lt;br&gt;Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.&lt;br&gt;Bans tobacco sales or giveaways at bars or any location licensed to serve alcohol for on-site consumption.&lt;br&gt;Provides that a violation of the ordinance is a public and private nuisance and can be enforced by the District Attorney or any member of the public.</td>
<td>Steven Jensen Yolo County Health Department, Tobacco Education Program: (530) 666-8616,&lt;br&gt;<a href="mailto:steven.jensen@yolocounty.org">steven.jensen@yolocounty.org</a></td>
</tr>
<tr>
<td><strong>City of Murrieta</strong>&lt;br&gt;May 2006&lt;br&gt;Population: 100,173</td>
<td>$350/Annual  Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance.</td>
<td>The Riverside County Health Department is responsible for the enforcement of the ordinance. The Department will check compliance with the law at each retailer at least three times per year.</td>
<td>1st violation within 5 years – 10 day revocation&lt;br&gt;2nd violation within 5 years – 30 day revocation&lt;br&gt;3rd violation within 5 years – 90 day revocation&lt;br&gt;4th violation within 5 years – 5 year revocation</td>
<td>Bans mobile sales.&lt;br&gt;Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18&lt;br&gt;Requires that clerks are the minimum legal age to purchase tobacco products (currently 18).&lt;br&gt;Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222&lt;br&gt;<a href="mailto:mbaxter@co.riverside.ca.us">mbaxter@co.riverside.ca.us</a></td>
</tr>
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<td>City of Hollister May 2006</td>
<td>$269/annual</td>
<td>Code enforcement and peace officers are responsible for enforcement of the ordinance. Each tobacco retailer shall be monitored for compliance at least one time per year.</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; violation within 5 years – 10 day revocation &lt;br&gt;2&lt;sup&gt;nd&lt;/sup&gt; violation within 5 years – 30 day revocation; if violation occurs within one year of first violation, there is also a $250 fine. &lt;br&gt;3&lt;sup&gt;rd&lt;/sup&gt; violation within 5 years – 90 day revocation; if violation occurs within one year of second violation, there is also a $500 fine. &lt;br&gt;4&lt;sup&gt;th&lt;/sup&gt; violation within 5 years – 5 year revocation and $1,000 fine.</td>
<td>Bans mobile sales. &lt;br&gt;Requires retailers to check the age of purchasers who appear to be under the age of 27. &lt;br&gt;Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). &lt;br&gt;Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Samela Perez &lt;br&gt;San Benito County Public Health Services, Tobacco Education and Prevention Program: (831)636-4011, <a href="mailto:sam@sanbenitoco.org">sam@sanbenitoco.org</a></td>
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<tr>
<td>City of Norco March 2006</td>
<td>$350/Annual</td>
<td>The Riverside County Health Department is responsible for the enforcement of the ordinance. The Department will check compliance with the law at each retailer at least three times per year.</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; violation within 5 years – 10 day revocation &lt;br&gt;2&lt;sup&gt;nd&lt;/sup&gt; violation within 5 years – 30-day revocation &lt;br&gt;3&lt;sup&gt;rd&lt;/sup&gt; violation within 5 years – 90-day revocation &lt;br&gt;4&lt;sup&gt;th&lt;/sup&gt; violation within 5 years – 5 year revocation</td>
<td>Bans mobile sales. &lt;br&gt;Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18 &lt;br&gt;Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). &lt;br&gt;Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222 <a href="mailto:mbaxter@co.riverside.ca.us">mbaxter@co.riverside.ca.us</a></td>
</tr>
<tr>
<td>City of Richmond January 2006</td>
<td>Fee not set yet by City</td>
<td>Compliance shall be monitored by the Richmond Police Department and the Chief of Police.</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; violation within 2 years –up to 60 day suspension &lt;br&gt;2&lt;sup&gt;nd&lt;/sup&gt; violation within 2 years –up to 120 day suspension</td>
<td>Requires that all tobacco-related products and paraphernalia must be removed from public view during periods of suspension.</td>
<td>Denice Dennis, Project Director, Contra Costa Health Services: (925) 313-6825, <a href="mailto:ddennis@hsd.cccounty.us">ddennis@hsd.cccounty.us</a></td>
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<td>Richmond Police Department</td>
<td>Retailers must notify the Police Department if an employee sells tobacco products to minors.</td>
<td>3rd violation within 2 years – up to 1 year suspension</td>
<td>Provides for timely appeals and hearings before the City Manager.</td>
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<tr>
<td>City of Vista May 2005</td>
<td>$250/Annual</td>
<td>Compliance shall be monitored by the San Diego Sheriffs Department. At least one compliance checks of each tobacco retailer shall be conducted during each twelve-month period.</td>
<td>Bans mobile sales. Requires that all tobacco-related products and paraphernalia must be removed from public view during periods of suspension or revocation.</td>
<td>Gena Knutson, Vista Community Clinic (760) 407-1220 ext. 165, <a href="mailto:gena@vistacommunityclinic.org">gena@vistacommunityclinic.org</a></td>
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<tr>
<td>Population: 95,770</td>
<td>The ordinance also provides incentives for retailers to lower the cost of the fee: see &quot;Additional Provisions&quot; at right.</td>
<td>1st violation within 3 years – licensee issued a written warning and required to train employees within 60 days. 2nd violation within 3 years – up to 30-day suspension 3rd violation within 3 years – up to 90-day suspension 4th violation within 3 years – up to one year suspension 5th violation within 3 years – the license may be revoked</td>
<td>The ordinance also provides incentives for retailers to lower the cost of the fee: $50 - No violations the prior year $25 - Using a cash register that reads the magnetic strip on a drivers' license and verifies age $25 - Being approved (by the Sheriff's Department) training program with at least annual training for all employees $25 - Having no tobacco advertising on the windows or doors</td>
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<tr>
<td>City of Corona October 2005</td>
<td>$350/Annual</td>
<td>The Riverside County Health Department is responsible for the enforcement of the ordinance. The Department will check compliance with the law at each retailer at least three times per year.</td>
<td>Bans mobile sales. Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222 <a href="mailto:mbaxter@co.riverside.ca.us">mbaxter@co.riverside.ca.us</a></td>
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<tr>
<td>Population: 147,428</td>
<td>Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance.</td>
<td>1st violation within 5 years – 10-day revocation 2nd violation within 5 years – 30-day revocation 3rd violation within 5 years – 90-day revocation 4th violation within 5 years – 5 year revocation For the first and second violation the retailer can enter a settlement with the County to pay a fine and get a reduced revocation.</td>
<td>Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
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<tr>
<td>City of Grover Beach September 2005</td>
<td>$224/Annual</td>
<td>Compliance shall be monitored by the Grover Beach Police Department. At least four compliance checks of each tobacco retailer shall be conducted during each twelve-month period.</td>
<td>Bans mobile sales. Bans sales in businesses that sells alcohol for consumption on the premises (restaurants and bars).</td>
<td>Amber Alewine, Health Education Specialist, County of San Luis Obispo Health Agency: (805) 781-1157 <a href="mailto:aalewine@co.slo.ca.us">aalewine@co.slo.ca.us</a></td>
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<tr>
<td>Population: 13,213</td>
<td></td>
<td>1st violation within 5 years – 30-day revocation. 2nd violation within 5 years – 90-day revocation. 3rd violation within 5 years - one</td>
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<tr>
<td>City of Vista May 2005</td>
<td>$250/Annual</td>
<td>Compliance shall be monitored by the San Diego Sheriffs Department. At least one compliance checks of each tobacco retailer shall be conducted during each twelve-month period.</td>
<td>Bans mobile sales. Requires that all tobacco-related products and paraphernalia must be removed from public view during periods of suspension or revocation.</td>
<td>Gena Knutson, Vista Community Clinic (760) 407-1220 ext. 165, <a href="mailto:gena@vistacommunityclinic.org">gena@vistacommunityclinic.org</a></td>
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<tr>
<td>Population: 95,770</td>
<td>The ordinance also provides incentives for retailers to lower the cost of the fee: see &quot;Additional Provisions&quot; at right.</td>
<td>1st violation within 3 years – licensee issued a written warning and required to train employees within 60 days. 2nd violation within 3 years – up to 30-day suspension 3rd violation within 3 years – up to 90-day suspension 4th violation within 3 years – up to one year suspension 5th violation within 3 years – the license may be revoked</td>
<td>The ordinance also provides incentives for retailers to lower the cost of the fee: $50 - No violations the prior year $25 - Using a cash register that reads the magnetic strip on a drivers' license and verifies age $25 - Being approved (by the Sheriff's Department) training program with at least annual training for all employees $25 - Having no tobacco advertising on the windows or doors</td>
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<td>City of Corona October 2005</td>
<td>$350/Annual</td>
<td>The Riverside County Health Department is responsible for the enforcement of the ordinance. The Department will check compliance with the law at each retailer at least three times per year.</td>
<td>Bans mobile sales. Requires retailers to check the age of purchasers who reasonably appear to be under the age of 18</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222 <a href="mailto:mbaxter@co.riverside.ca.us">mbaxter@co.riverside.ca.us</a></td>
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<tr>
<td>Population: 147,428</td>
<td>Fee paid to the County of Riverside to conduct the administration and enforcement of the ordinance.</td>
<td>1st violation within 5 years – 10-day revocation 2nd violation within 5 years – 30-day revocation 3rd violation within 5 years – 90-day revocation 4th violation within 5 years – 5 year revocation For the first and second violation the retailer can enter a settlement with the County to pay a fine and get a reduced revocation.</td>
<td>Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products and advertising must be removed from public view during periods of suspension or revocation.</td>
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<tr>
<td>City of Grover Beach September 2005</td>
<td>$224/Annual</td>
<td>Compliance shall be monitored by the Grover Beach Police Department. At least four compliance checks of each tobacco retailer shall be conducted during each twelve-month period.</td>
<td>Bans mobile sales. Bans sales in businesses that sells alcohol for consumption on the premises (restaurants and bars).</td>
<td>Amber Alewine, Health Education Specialist, County of San Luis Obispo Health Agency: (805) 781-1157 <a href="mailto:aalewine@co.slo.ca.us">aalewine@co.slo.ca.us</a></td>
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<td>Riverside County</td>
<td>$350/Annual</td>
<td>The Riverside County Health Department is responsible for the enforcement of the ordinance. The Department will check compliance with the law at each retailer at least three times per year. The Department may check known compliers less than three times per year in order to increase visits to known offenders.</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; violation within 5 years – 10 day revocation. 2&lt;sup&gt;nd&lt;/sup&gt; violation within 5 years – 30-day revocation. 3&lt;sup&gt;rd&lt;/sup&gt; violation within 5 years – 90-day revocation. 4&lt;sup&gt;th&lt;/sup&gt; violation within 5 years – 5 year revocation. For the first and second violation the retailer can enter a settlement with the County to pay a fine and get a reduced revocation.</td>
<td>Bans mobile sales. Requires that all tobacco-related products and advertising must be removed from public view during periods of license revocation.</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222 <a href="mailto:mbaxter@co.riverside.ca.us">mbaxter@co.riverside.ca.us</a></td>
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<td>September 2005</td>
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<td>Population: 554,571 (in unincorporated areas)</td>
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<td>City of Los Angeles</td>
<td>$300/Annual</td>
<td>The City Attorney’s office contracts with the California Department of Health Services, Food &amp; Drug Branch to do regular compliance checks. Investigatory program staff conducts citywide retailer inspections. There is a dedicated city prosecutor for this program.</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; violation within 5 years – letter of reprimand from the City Attorney. 2&lt;sup&gt;nd&lt;/sup&gt; violation within 5 years – 30-day suspension. 3&lt;sup&gt;rd&lt;/sup&gt; violation within 5 years – 90-day suspension. 4&lt;sup&gt;th&lt;/sup&gt; violation within 5 years – one year suspension.</td>
<td>Bans mobile sales. Requires that all tobacco-related products and paraphernalia must be removed from public view during periods of suspension. Sets up a system for appeals and review hearings in a timely manner before the Police Permit Review Panel. Provides criminal penalties for unlicensed retailers and those who fail to comply with suspension periods.</td>
<td>Nora Manzanilla, City Attorney’s Office: (213) 978-7742, <a href="mailto:nmanzan@atty.lacity.org">nmanzan@atty.lacity.org</a> or Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309 <a href="mailto:chrreyes@ph.lacounty.gov">chrreyes@ph.lacounty.gov</a></td>
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<td>September 2005</td>
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<td>Population: 4,045,873</td>
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<td>(note: the original license with no fee was passed in May, 2000)</td>
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<td>City of Arroyo Grande</td>
<td>$208/Annual</td>
<td>The Arroyo Grande Police Department will conduct at least 4 compliance checks of each tobacco retailer each year.</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; violation within 5 years – 30-day suspension. 2&lt;sup&gt;nd&lt;/sup&gt; violation within 5 years – 90-day suspension. 3&lt;sup&gt;rd&lt;/sup&gt; violation within 5 years - one year suspension.</td>
<td>Bans mobile sales. Bans sales at locations licensed to sale alcoholic beverages for consumption on the premises (bars). Requires that all tobacco-related products be removed from public view during periods of suspension.</td>
<td>Amber Alewine, Health Education Specialist, County of San Luis Obispo Health Agency: (805) 781-1157 <a href="mailto:aalewine@co.slo.ca.us">aalewine@co.slo.ca.us</a></td>
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<td>February 2005</td>
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<td>Population: 17,036</td>
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<td>City of Los Angeles</td>
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<td>City of Rancho Cordova February 2005 Population: 60,975</td>
<td>$287/Annual</td>
<td>Police will conduct compliance checks of all retailers several times per year. Code enforcement will check on violations other than youth access.</td>
<td>1st violation within 5 years – 30-day suspension. 2nd violation within 5 years – 90-day suspension. 3rd violation within 5 years - one year suspension. 4th violation within 5 years – the license shall be revoked.</td>
<td>Requires that all tobacco-related products and paraphernalia must be removed from public view during periods of suspension or revocation.</td>
<td>Yvonne Rodriguez, Health Program Coordinator County of Sacramento Chronic Disease Prevention Program: (916) 875-6494, <a href="mailto:rodriguezyv@saccounty.net">rodriguezyv@saccounty.net</a> Or Carolyn Martin, Sacramento Tobacco Retail Licensing Task Force: (916) 489-5293 <a href="mailto:Marcb76@aol.com">Marcb76@aol.com</a></td>
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<tr>
<td>City of Elk Grove September 2004 Population: 139,542</td>
<td>$270/Annual</td>
<td>The Elk Grove Police Department will conduct an annual inspection of all retailers as well as quarterly youth decoy operations of randomly selected retailers.</td>
<td>1st violation within 5 years – 30-day suspension. 2nd violation within 5 years – 90-day suspension. 3rd violation within 5 years – one year suspension. 4th violation within 5 years – the license shall be revoked.</td>
<td>Bans mobile sales.</td>
<td>Yvonne Rodriguez, Health Program Coordinator County of Sacramento Chronic Disease Prevention Program: (916) 875-6494, <a href="mailto:rodriguezyv@saccounty.net">rodriguezyv@saccounty.net</a> Or Carolyn Martin, Sacramento Tobacco Retail Licensing Task Force: 916-489-5293 <a href="mailto:Marcb76@aol.com">Marcb76@aol.com</a></td>
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<tr>
<td>City of El Cajon June 2004 Population: 97,934</td>
<td>$198/Annual</td>
<td>The City Finance Department will conduct compliance checks of each retailer once per year per retailer. Any peace officer or code enforcement officer may also enforce the ordinance.</td>
<td>1st violation within 5 years - 30-day suspension. Alternatively, the retailer may pay an administrative fine in lieu of the suspension. The fine does not expunge the violation. 2nd violation within 5 years – 90-day suspension. And if the violation occurs within 12 months of the first, an administrative fine will be issued. 3rd violation within 5 years – one year suspension. And if the violation occurs within 12 months of the first, an additional 30-day suspension will be added.</td>
<td>Bans mobile sales. Bans sales in businesses that sell either food or alcohol for consumption on the premises (restaurants and bars). Requires retailers to check the age of purchasers who “reasonably appear” to be under the age of 27. Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco-related products, paraphernalia, and advertising must be removed from public view.</td>
<td>Debbie Kelley, American Lung Association of San Diego: (619) 297-3901 <a href="mailto:debbie@lungsandiego.org">debbie@lungsandiego.org</a> Or Lorenzo Higley, Director of Program Services at Communities Against Substance Abuse: (619) 442-2727, <a href="mailto:programservicesdir@eccasa.org">programservicesdir@eccasa.org</a></td>
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<td>Sacramento County May 2004</td>
<td>$324/Annual</td>
<td>Each store will receive a visual inspection annually by the Environmental Health Division (code inspectors). The Sheriff’s department will conduct compliance checks at a percentage of retailers each year.</td>
<td>administrative fine will be issued. 4th violation within 5 years – the license shall be revoked. And if the violation occurs within 12 months of the first, an administrative fine will be issued.</td>
<td>public view during periods of suspension or revocation. For a first or second violation, however, the retailer may post a sign during suspension stating “Tobacco Products Not for Sale because this store has violated a public health law regulating tobacco.” Specifies the right of a private citizen (“private enforcer”) to enforce this ordinance.</td>
<td>Yvonne Rodriguez, Health Program Coordinator County of Sacramento Chronic Disease Prevention Program: (916) 875-6494, <a href="mailto:rodriguezyv@saccounty.net">rodriguezyv@saccounty.net</a> Or Carolyn Martin, Sacramento Tobacco Retail Licensing Task Force: (916) 489-5293, <a href="mailto:Marcb76@aol.com">Marcb76@aol.com</a></td>
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<tr>
<td>City of Sacramento March 2004</td>
<td>$300/Annual</td>
<td>Together, the city police department and the code enforcement division will conduct youth decoy enforcement (compliance checks).</td>
<td>1st violation within 5 years – 30-day suspension. 2nd violation within 5 years – 90-day suspension. 3rd violation within 5 years – 1 Year suspension. 4th violation within 5 years – the license shall be revoked For all other violations of the license (for example, self-service displays, not posting license, etc.): First, a written warning will be sent to the retailer. Then there will be a re-inspection, with the cost charged to the retailer. If the violation has not been fixed the license will be suspended or revoked.</td>
<td>Bans mobile sales. In addition to youth decoy operations, the fee pays for the Health Department’s youth purchase surveys.</td>
<td>Yvonne Rodriguez, Health Program Coordinator County of Sacramento Chronic Disease Prevention Program: (916) 875-6494, <a href="mailto:rodriguezyv@saccounty.net">rodriguezyv@saccounty.net</a></td>
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| City of Pasadena      | $225/Annual  | Code Enforcement Officers will also conduct visual site inspections. 2.0 FTE were added to the Code Enforcement Division. | one year suspension.  
4th violation within 5 years – the license shall be revoked.                                            | In addition to youth decoy operations, the fee pays for the Health Department’s youth purchase surveys.                | Or  
Carolyn Martin,  
Sacramento Tobacco Retail Licensing Task Force: (916) 489-5293,  
Marcb76@aol.com                                                                                          |
| February 2004         |              |                                                                                        |                                                                                                |                                                                                                                       |                                                                                                  |
| City of San Luis Obispo | $278/Annual  | The Police Vice-Narcotics unit will conduct quarterly compliance checks of randomly selected retailers (the equivalent of one compliance check per retailer per year) and Environmental Health will conduct visual site inspections of stores. | 1st violation – up to 30 day suspension  
2nd violation within 5 years – up to 90 day suspension  
3rd violation within 5 years – the license may be revoked. | The Ordinance passed in Pasadena includes the following provisions, some of which relates to the retailer license and some does not:  
Bans mobile sales.  
Requires that all tobacco-related advertising must be removed from public view during periods of suspension or revocation.  
Establishes a conditional use permit (CUP) for significant tobacco retailers  
Created smoke-free city parks. | Statice Wilmore,  
Tobacco Control Project Coordinator,  
City of Pasadena Health Department: (626) 744-6051,  
swilmore@cityofpasadena.net  
or  
Christina Reyes, MPH, Research Analyst, Tobacco Control and Prevention Program, LA County Dept. of Public Health: (213) 351-7309  
chrreyes@ph.lacounty.gov                                                                                         |
| August 2003           |              | Three police officers and one police sergeant will conduct 4 compliance checks per-retailer per-year on a part time basis. | 1st violation within 5 years – 30 day suspension  
2nd violation within 5 years – 90 day suspension  
3rd violation within 5 years – One year suspension.  
4th violation within 5 years – the license shall be revoked. | Bans mobile sales  
Bans sales at locations licensed to sale alcoholic beverages for consumption on the premises (bars).  
Requires that all tobacco products must be removed from public view during periods of suspension or revocation. | Amber Alewine, Health Education Specialist, County of San Luis Obispo Health Agency: (805) 781-1157  
aalewine@co.slo.ca.us                                                                                         |
Other Retailer Licensing Ordinances

The ordinances passed by the previous communities listed include fees that pay for comprehensive enforcement programs and compliance checks. These ordinances, along with the TALC model ordinance, are the best examples because of the fees that cover administration and enforcement. The last seven ordinances are still strong, but they do not have dedicated fees to pay for enforcement. The enforcement and compliance checks in these ordinances are funded through other stable and sustainable sources.

<table>
<thead>
<tr>
<th>Community/Date Passed</th>
<th>Fee</th>
<th>Enforcement Activities</th>
<th>Suspension/Revocation Schedule</th>
<th>Additional Provisions</th>
<th>Local Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>City of Temecula</td>
<td></td>
<td>Compliance can be monitored by any peace officer. City pays for enforcement activities through existing funds</td>
<td>1\textsuperscript{st} violation within 5 years – 10 day revocation. 2\textsuperscript{nd} violation within 5 years – 30-day revocation. 3\textsuperscript{rd} violation within 5 years – 90-day revocation. 4\textsuperscript{th} violation within 5 years – 5 year revocation.</td>
<td>Requires retailers to check the age of purchasers who reasonably appear to be under the age of 27. Requires that clerks are the minimum legal age to purchase tobacco products (currently 18). Requires that all tobacco products and advertisements must be removed from public view during periods of suspension or revocation. Bans mobile sales.</td>
<td>Martin Baxter, Senior Health Educator, Riverside County Public Health Department: (760) 778-2222 <a href="mailto:mbaxter@co.riverside.ca.us">mbaxter@co.riverside.ca.us</a></td>
</tr>
<tr>
<td>June 2006</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population: 101,057</td>
<td>No fee planned, but could be adopted later.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>City of San Francisco</td>
<td>$175/Annual Licensing Fee $50/one time application and initial inspection fee</td>
<td>Environmental Health Inspectors will conduct 2 routine visual site inspections per-retailer per-year. (Note: San Francisco had a strong ongoing enforcement program in place before their licensing ordinance was passed. The police department does approximately 45 enforcement operations at retail outlets every month. The cost of this program is paid for through MSA monies and therefore these enforcement costs were not included in the license fee.)</td>
<td>1\textsuperscript{st} violation – up to 90-day suspension 2\textsuperscript{nd} violation within 12 months – up to 6-month suspension Each subsequent violation within 12 months – up to one year suspension.</td>
<td>In addition to the suspension schedule, the following administrative penalties may be assessed: $100 for the first violation, $200 for a second violation, and not to exceed $500 for the third and each subsequent violation.</td>
<td>Alyonik Hrushow Project Director, Tobacco Control, San Francisco Department of Public Health: (415) 581-2447, <a href="mailto:Alyonik.Hrushow@sfdph.org">Alyonik.Hrushow@sfdph.org</a></td>
</tr>
<tr>
<td>November 2003</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population: 824,825</td>
<td></td>
<td></td>
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<tr>
<td>Contra Costa County</td>
<td>$160/Annual</td>
<td>Health Services Department (tobacco) staff will conduct site visits to the stores on an annual basis to enforce the licensing</td>
<td>1\textsuperscript{st} violation – up to 30-day suspension. 2\textsuperscript{nd} violation within 2 years – up</td>
<td>Bans mobile sales. Requires that all tobacco-related products must be removed from public</td>
<td>Denice Dennis, Project Director, Contra Costa Health Services: (925) 313-6825,</td>
</tr>
<tr>
<td>January 2003</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population: 173,573</td>
<td></td>
<td></td>
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<tr>
<td>Community/Date Passed</td>
<td>Fee</td>
<td>Enforcement Activities</td>
<td>Suspension/Revocation Schedule</td>
<td>Additional Provisions</td>
<td>Local Contact</td>
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<td>----------------------------------------------------</td>
</tr>
<tr>
<td>unincorporated areas)</td>
<td></td>
<td>ordinance and self-service display ban. This activity is paid for through the license fee. The Sheriff’s Office will conduct 100 sting operations each year using other funding sources.</td>
<td>to 90-day suspension. 3rd violation and subsequent violations within 2 years – up to one year suspension.</td>
<td>view during periods of suspension or revocation.</td>
<td><a href="mailto:ddennis@hsd.cccounty.us">ddennis@hsd.cccounty.us</a></td>
</tr>
<tr>
<td>City of Berkeley</td>
<td>$427/Annual</td>
<td>Environmental Health Specialists will conduct three visual site inspections per retailer per year. 0.5 FTE was added to the Environmental Health Department. (Note: Berkeley’s fee does not pay for PC 308 compliance checks. The city’s police department had an ongoing program to conduct bi-annual compliance checks of randomly selected stores. The police department absorbs the related costs of these operations.)</td>
<td>1st violation within 5 years – up to 30 day suspension. 2nd violation within 5 years – up to 90 day suspension. 3rd violation within 5 years – up to one year suspension. 4th violation within 5 years – the license may be revoked</td>
<td>Requires that all tobacco products must be removed from public view during periods of suspension or revocation.</td>
<td>Marcia Brown-Machen, Tobacco Prevention Program Director, City of Berkeley Health Department: (510) 981-5309, <a href="mailto:MBrown-Machen@ci.berkeley.ca.us">MBrown-Machen@ci.berkeley.ca.us</a></td>
</tr>
<tr>
<td>December 2002</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population: 106,697</td>
<td></td>
<td></td>
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<tr>
<td>City of Santa Barbara</td>
<td>$30/Annual</td>
<td>Enforcement will be handled by the Santa Barbara Police Department. MSA funds are used to conduct compliance checks.</td>
<td>1st violation within 2 years – letter of warning 2nd violation within 2 years – 30-day suspension 3rd violation within 2 years – 90-day suspension 4th violation within 2 years – 1-year suspension</td>
<td>Bans mobile sales.</td>
<td>Dawn Dunn, Program Administrator, Tobacco Prevention Settlement Program, Santa Barbara County Public Health Department: (805) 681-5407, <a href="mailto:Dawn.dunn@sbcphd.org">Dawn.dunn@sbcphd.org</a></td>
</tr>
<tr>
<td>June 2002</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population: 90,305</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>City of Goleta</td>
<td>$30/Annual</td>
<td>Enforcement will be handled by the Santa Barbara County Public Health Department. MSA funds are used to conduct compliance checks.</td>
<td>1st violation within 2 years – letter of warning 2nd violation within 2 years – 30-day suspension 3rd violation within 2 years – 90-day suspension 4th violation within 2 years – 1-year suspension</td>
<td>Bans mobile sales.</td>
<td>Dawn Dunn, Program Administrator, Tobacco Prevention Settlement Program, Santa Barbara County Public Health Department: (805) 681-5407, <a href="mailto:Dawn.dunn@sbcphd.org">Dawn.dunn@sbcphd.org</a></td>
</tr>
<tr>
<td>November 2001</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population: 30,400</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>County of Santa</td>
<td>$30/Annual</td>
<td>Enforcement will be handled by the Public Health Department.</td>
<td>1st violation within 2 years – letter of warning</td>
<td>Bans mobile sales.</td>
<td>Dawn Dunn, Program Administrator, Tobacco Prevention Settlement Program, Santa Barbara County Public Health Department: (805) 681-5407, <a href="mailto:Dawn.dunn@sbcphd.org">Dawn.dunn@sbcphd.org</a></td>
</tr>
<tr>
<td>Barbara</td>
<td></td>
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</tbody>
</table>

"Center for Tobacco Policy & Organizing, May 4, 2009"
<table>
<thead>
<tr>
<th>Community/Date Passed</th>
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<th>Enforcement Activities</th>
<th>Suspension/Revocation Schedule</th>
<th>Additional Provisions</th>
<th>Local Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2001</td>
<td></td>
<td>MSA funds are used to conduct compliance checks.</td>
<td>2nd violation within 2 years – 30-day suspension</td>
<td></td>
<td>Prevention Settlement Program, Santa Barbara County Public Health Department: (805) 681-5407, <a href="mailto:Dawn.dunn@sbcphd.org">Dawn.dunn@sbcphd.org</a></td>
</tr>
<tr>
<td>Population: 142,816</td>
<td></td>
<td></td>
<td>3rd violation within 2 years – 90-day suspension</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(in unincorporated areas)</td>
<td></td>
<td></td>
<td>4th violation within 2 years – 1-year suspension</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sources: Population figures are from the State of California, Department of Finance, *E-1 Population Estimates for Cities, Counties and the State with Annual Percent Change — January 1, 2007 and 2008*

This material was made possible by funds received from the California Department of Public Health, under contract #04-35335.
<table>
<thead>
<tr>
<th>Statistic</th>
<th>Percentage/Value</th>
</tr>
</thead>
<tbody>
<tr>
<td># of smokers that begin at or before the age of 18</td>
<td>90%</td>
</tr>
<tr>
<td># of youth in the United States that try their first cigarette each day</td>
<td>3,500</td>
</tr>
<tr>
<td># of youth under 18 years of age that become new regular, daily smokers</td>
<td>1,000</td>
</tr>
<tr>
<td># of convenience stores that sell tobacco</td>
<td>99.4%</td>
</tr>
<tr>
<td># of California retailers selling tobacco to youth in 2008</td>
<td>12.6%</td>
</tr>
<tr>
<td># of California high school students who smoke</td>
<td>14.6%</td>
</tr>
<tr>
<td># of California adults who think a license should be required to sell tobacco</td>
<td>80%</td>
</tr>
<tr>
<td># of teens who shop at a convenience store at least once a week</td>
<td>75%</td>
</tr>
<tr>
<td># of convenience stores that sell tobacco</td>
<td>75%</td>
</tr>
<tr>
<td># of teens who shop at a convenience store at least once a week</td>
<td>75%</td>
</tr>
<tr>
<td># of average sales of cigarettes per store in 2006</td>
<td>$393,327</td>
</tr>
<tr>
<td># of cigarette packs bought or smoked by youth each year</td>
<td>78,000,000</td>
</tr>
</tbody>
</table>

2. Substance Abuse and Mental Health Services Administration (SAMHSA), HHS, Results from the National Survey on Drug Use and Health, NSDUH: Detailed Tables.
3. Substance Abuse and Mental Health Services Administration (SAMHSA), HHS, Results from the National Survey on Drug Use and Health, NSDUH: Detailed Tables.
State Health Officials Announce New Law Banning Smoking in Cars with Minors; 
Live Demonstration To Show Rise of Toxic Pollutants 
As Smoker Lights Up for Two Minutes Inside a Car

WHAT: Kick-off California’s new “Smoke-free Cars with Minors” law with a real-time demonstration showing dramatic increases in the level of toxic pollutants as someone smokes a cigarette inside a car. The “Smoke-free Cars with Minors” law takes effect on January 1, 2008 and bans smoking in cars carrying minors ages 17 and under.

WHO: Secretary Kimberly Belshé California Health and Human Services Agency
Dr. Mark B Horton, director, California Department of Public Health
Dr. Neil Klepeis, environmental health scientist, Stanford University

WHERE: Parking lot adjacent to:
Hollywood United Methodist Church
6817 Franklin Avenue
Hollywood, CA 90028

WHEN: Thursday, January 3, 2008 – 11 a.m.

VISUALS/ SOUNDBITES:
- Real-time live demonstration with a meter attached to a child safety seat inside a car showing the dramatic increase in toxic air pollutants as someone smokes a cigarette in the car
• Secretary Belshé commemorates the 10-year anniversary of a law banning smoke in bars in California and speaks about California’s history of leadership in protecting the public from the dangerous health effects of secondhand smoke
• Senator Oropeza discusses the importance of the new law she authored, the Marco Firebaugh Memorial Children’s Health and Safety (H&S) Act of 2007,
• Dr. Horton, a pediatrician, speaks on the harmful effects of secondhand smoke on children

###
New “Smoke-Free Cars with Minors” Law Protects California’s Children from Secondhand Smoke in Cars

State Health Officials Commemorate the 10-Year Anniversary of Smoke-free Bars and Tout Importance of New Law

Los Angeles—California state health officials today commemorated the ten-year anniversary of smoke-free bars in California and highlighted a new law that protects Californians against the danger of secondhand smoke. The “Smoke-free Cars with Minors” law, which took effect January 1, bans smoking in a car carrying a minor.

“Our efforts to address the dangers of secondhand smoke in California began over a decade ago,” said Kimberly Belshé, Secretary of California’s Health and Human Services Agency. “Today, our state continues to be a leader by ensuring that children and youth traveling in cars are not exposed to secondhand smoke.”

California’s “Smoke-free Cars with Minors” law, authored by Senator Jenny Oropeza, D-Long Beach, prohibits smoking in a motor vehicle when a minor (17 years old and under) is present. A violation is punishable by a fine of up to $100.

“Infants and children are especially susceptible to the harmful effects of secondhand smoke,” said Dr. Mark Horton, Director of the California Department of Public Health. “Smoking in a car, or any confined space, increases the level of pollution inhaled by children and adults, thereby increasing the likelihood of suffering from the negative health effects of secondhand smoke.”

Studies of secondhand smoke exposure have shown that levels of secondhand smoke caused by one person smoking in a car can make the air inside the vehicle up to 10 times more toxic than the level the U.S. Environmental Protection Agency says is hazardous for breathing.
Evidence suggests that children are especially vulnerable to the health effects caused by secondhand smoke. Exposure to secondhand smoke by children increases the risk of asthma attacks, ear infections, bronchitis and pneumonia. Long-term exposure also has been linked to heart disease and lung cancer in adults.

California’s leadership and commitment to protecting residents from secondhand smoke began in 1994 with the passage of California’s Law for a Smoke-free Workplace. The smoke-free bar provision of this law took effect in January 1998.

California’s public health policies are major contributing factors to the state’s low smoking rates. California also has the lowest cigarette consumption per capita in the U.S. and serves as a model for other states and countries.

The California Department of Public Health’s Tobacco Control Program is the nation’s longest running and most comprehensive anti-tobacco program. More information about the “Smoke-free Cars with Minors” law and the state’s tobacco control efforts is available at www.cdph.ca.gov

###
# News Release Template/Tip Sheet for Local Programs

Below is a news release template/tip sheet for CTCP-funded programs to utilize when reaching out to your local media regarding a newly passed ordinance, as well as way to promote the Helpline for those wishing to quit now that the ordinance is in effect. The left column includes examples of items contained in a news release, as well as sample copy and data to be revised to specifically address your community and ordinance. The right column includes tips which correspond with the number in parentheses on the left.

| (1) Logo: Insert your agency or program logo, if one exists. |
| (2) Header: Include a large header that specifically states it is a “News Release” to grab attention of the editor, as well as the name of the organization that released it. |
| (3) Contact info: Provide a contact who is authorized to represent the program, is readily accessible and knowledgeable on the topic. |
| (4) Contact number: Use a cell phone number if contact will be out of office the day of the release. |
| (5) Headline: The headline is one of the most important components of a press release as this needs to "grab the attention" of the media. It should be in bold type and a font that is larger than the body text. Keep the headline to 80-125 characters maximum. Capitalize every word with the exception of "a", "an", "of" and "the" or use all caps. |
| (6) Sub-head: Include an informative sub-headline, provide data when possible and differentiate the font from the headline (e.g. italicize). |
| (7) Opening paragraph: Should contain: who, what, when, where, why in 25 words or less. Never take for granted that the reader has read your headline. It needs to contain information that will "entice" the reader. |
| (8) Body copy: The remainder of body text should include specific details of the law and any relevant information to your services. |
| (9) Continuation note: Add "-more-" to the bottom of each page if there are more pages to the release to follow. |

---

## News Release

**(INSERT PROGRAM’S NAME)**

**FOR IMMEDIATE RELEASE**

Program website

[www.NoButts.org](http://www.NoButts.org) (if desired to include)

**DATE:**

**CONTACT:** (3)

**PHONE:** (4)

**EMAIL:**

---

**XX PROGRAM ANNOUNCES PASSAGE OF XX SMOKE-FREE ORDINANCE** (5)

_New Law Prompts Protects Residents from Secondhand Smoke and Motivates Smokers to Quit_ (6)

**ORGANIZATION’S CITY, CA** - The XXX program announced today at (location) the passage of the XX city/county’s smoke-free outdoor ordinance, which will protect citizens against the harmful effects of secondhand smoke. The law will go into effect on XX, XX 20XX. (7)

The Ordinance prohibits smoking in all public places in the City of XX at times when other persons can be exposed to secondhand smoke. These places include indoor and outdoor businesses, hotels, parks, sidewalks, restaurants and bars where people can be reasonably expected to congregate or meet. (8)

-more- (9)
“I am very pleased to see this ordinance pass to protect the citizens of XX,” Mayor XX XX said. “This law will allow them to work and spend time outside without being exposed to the devastating health effects secondhand smoke imposes.”

According the American Cancer Society, secondhand smoke causes 35,000 heart disease deaths, as well as 3,000 lung cancer deaths in non-smoking adults each year.

With the passage of the new law, it is expected a number of tobacco users in XX City/County will make an attempt to quit. According to the National Cancer Institute, such policies not only protect the public from exposure to secondhand smoke, but also encourage smokers to quit.

The California Smokers’ Helpline (1-800-NO-BUTTS), launched in 1992, was the nation’s first statewide telephone counseling service. Research has shown the Helpline doubles a smoker’s chance of success.

Since its debut, the Helpline has provided free and confidential statewide telephone counseling services to nearly 500,000 Californians from diverse communities throughout the state. Quitting assistance is offered in English, Spanish, Mandarin, Cantonese, Vietnamese, and Korean as well as TDD for the hard of hearing.

“Despite a great deal of progress in tobacco control, many children and adults are still exposed to secondhand smoke,” XX XX, director of XX program said. “The California Smokers’ Helpline is a valuable resource that can help XX County/City’s smokers quit to protect their loved ones.”

Adult smoking rates in California declined from 22.7 percent in 1988 to 13.3 percent in 2008. This reflects a 41 percent overall decline and a decrease in per capita cigarette consumption of 67 percent in twenty years. The implementation of local smoke-free policies is one factor that is attributed to the significant decline in smoking.

For more information on the smoke-free ordinance, contact the XX program at (555) 555-1234 or XXX.org. For assistance in quitting tobacco, contact the Smokers’ Helpline at 1-800-NO-BUTTS or www.nobutts.org.

# # #
Overall tips:

- Answer the questions "who", "what", "when", "where", "why" and "how" as quickly as possible. Press releases should be written with the most important information up front to the least important. This assists editors who need to trim your article for space, who will cut from the bottom up. It also is important for readers who do not always read the complete article.

- Your text should include pertinent information about your service or event. Make sure to include details on when it is occurring, where it will be held and the cost.

- Write at a 5th grade level so it is easy for all to understand.

- Keep your sentences and paragraphs short; a paragraph should be no more than 3-4 sentences. Your release should be between 500 to 800 words, spell checked and proofread for errors by multiple people.

- The mood of the release should be factual, not hyped; do not use a sales pitch as it will ruin your credibility with the reader. Also, avoid using contractions, such as “don’t” and “isn’t.”

- Do not use jargon, acronyms or uncommonly used words. You might eat, sleep and breathe “SHS” in “MUH” and “cessation” services offered by “LLAs”, but your target audience does not.

- Email the story to journalists in your local area preferably in PDF format (to ensure layout stays intact). Follow up with a phone call to ask if they have any questions or would like a one-on-one interview.

- Always place a hyperlink of your website in the press release for better online search engine optimization and visibility.

For an example of local ordinance news release and other materials, visit the City of Calabasas’s website: [http://www.cityofcalabasas.com/secondhandsmoke.html](http://www.cityofcalabasas.com/secondhandsmoke.html).
News Release
Bear Center for New Americans’ Tobacco Project

FOR IMMEDIATE RELEASE

April 7, 2010
Contact: Pat Hoffa – (555) 878-4444 – Pathoffa1@gac.org

THE BEAR CENTER FOR NEW AMERICANS ANNOUNCES PASSAGE OF SMOKE-FREE DOORWAY POLICY IN LOCAL DOWNTOWN BUSINESSES

New Voluntary Policy Prohibits Smoking Within 20 Feet of Doorways and Raises Community Awareness Regarding the Dangers of Secondhand Smoke

BEAR CITY, CA – The Bear Center for New Americans (BCNA) announced the adoption of a smoke-free doorway policy in downtown Bear City. The policy protects patrons and passersby from the harmful effects of secondhand smoke, and went into effect January 10, 2010.

The voluntary policy prohibits smoking within 20 feet or more of doorways. It was enacted after survey results demonstrated that downtown Bear City patrons were bothered by secondhand smoke and that a smoke-free doorway policy would not discourage their patronage of businesses that implemented such a policy.

“The voluntary enactment of this smoke-free doorway policy speaks volumes to the type of people and businesses we have in Bear City,” Mayor Diana Burbank said. “This policy will allow citizens of Bear City and tourists to patronize these downtown businesses without being exposed to the awful health effects of secondhand smoke. This is just the beginning.”

-more-
The Bear Center for New Americans Announces Smoke-Free Policy – page 2

As part of their effort to recognize merchants who are participating, the Bear Center for New Americans Tobacco Project presented each business owner who adopted the smoke-free doorway policy a certificate of recognition at the annual Secondhand Smoke Awareness in Our Community Night. Elected officials including California State Assembly Member, Jane Simmons, Bear County Board of Supervisor, Jim Fitz, Bear City Council President, Diana Burbank, and Bear City Councilmember, Bob Ruskie, all attended an awards ceremony held at the Bear City VFW Memorial Building, which honored the business owners. Receiving recognition were the owners of Bear Pharmacy, Fiesta Supermarket, Hair Mode, KC Super Market, Mr. Garcia’s Kitchen, Tres Hermana’s Restaurant, and 524 Café.

The work of the Bear Center for New Americans’ (BCNA) Tobacco Project was vital in getting the voluntary policy adopted by the local businesses, finding that downtown patrons thought highly of smoke-free doorway policies.

“It was evident from day one when we began conducting the community opinion poll that Bear City residents were in favor of smoke-free policies and that any policies would not negatively affect business,” stated Robin Cash, Project Director for BCNA. “The Bear Center for New Americans’ Tobacco Project wants to help other businesses adopt this fantastic policy.”

Research suggests that businesses that implement smoke-free policies are not negatively affected by the policies. In fact, behavioral scientists collaborating with economists at the University of California, San Francisco, have found that smoke-free policies have no detrimental economic effect on restaurants and bars in California. The implementation of local smoke-free policies has also been cited as one factor attributed to the significant decline of smoking within the last 20 years in California.

For more information on the smoke-free doorway ordinance, contact the Bear Center for New Americans’ Tobacco Program at (555) 878-4444 or bcnatobaccoprogram@gac.org.

###
Communicating Evaluation Results to Policymakers

Play the Name Game
Policymakers (and their staff) care about numbers — of constituents, that is. The first thing they will look for when given some material is who is behind it. If the document is being put forward by an organization they recognize, one that represents a significant constituency, they are more likely to take the time to read it. Therefore, it is important to do several things:

1) Early on, establish long-term relationships with policymakers (as many as you hope to someday work with or persuade).
2) If your organization is somewhat of an unknown to the lawmaker, it could be advantageous to partner with a program that has a substantial base and name recognition. County health departments or well-known organizations like the American Lung Association carry a certain amount of weight with policymakers because they represent such large populations/memberships.
3) Label your documents with your organization's logo (at the highest level of the organization's umbrella rather than just the tobacco project name (for example, the UC Davis name and logo would carry much more weight than our small office, The Tobacco Control Evaluation Center). If you aren't a known entity to the policymaker, mention other organizations that you partner with or represent (you could list the organizations in your coalition, among others).

This way, you have the best chance of getting someone to actually read your materials.

Access the Right Gatekeepers
Policymakers usually insulate themselves from the pesky public with the defensive positioning of several layers of staffers and volunteers. Rarely (unless you are an important bigwig) will you be able to access an elected official directly without going through one or more gatekeepers. When you walk into a policymaker's office, the first person you are likely to encounter is a volunteer rather than a paid staffer. Ask to speak to a legislative aide so that you can have a few minutes to brief her/him on your key points. This is the person who has the supervisor’s or city council member’s ear. Give your info packet to the aide and tell her/him what you would like the official to know. If an aide is not available to speak with you, then brief the volunteer and ask her/him to pass your message and materials on to the policymaker.

Get to the Point
Elected officials (and their staff) are busy people, so it’s important to convey your message concisely, clearly and factually. Usually, you only have about 15-30 seconds to capture their attention with written materials. Don’t overwhelm them with statistics or pages and pages of materials. Synthesize your main points down to one page. More detailed information can be included as attachments, should anyone care to delve into greater depth about the issue.

What Data to Include
Depending on what you are trying to achieve with your document, briefly outline:

- the scope of the problem and who it is affecting (e.g., Drifting secondhand smoke affects the health of apartment dwellers. An estimated 42,000 or 22% of families in your district live in apartments.)
- data from your evaluation results to prove your point (e.g., A public opinion survey conducted in six neighborhoods of the city show that a large majority of renters (84%) would prefer to live in smoke-free apartment complexes).
- what you want the policymaker to do with that information (A city ordinance requiring apartment and condominium complexes to make at least 50% of their individual units smoke-free is needed).

In other words, just include the facts about the issue, your program’s efforts and/or your evaluation findings. (Adding the human interest component to the information comes at a later point once the policymaker becomes interested in taking up the issue and asks for more details and corroboration.)
The evidence that will be most convincing to officials are results from quantitative rather than qualitative data collection activities, as these methods can provide more representativeness (and larger sample sizes) than key informant interviews or focus groups. So stick to sharing the results of your public opinion surveys on secondhand smoke exposure, tenant surveys, illegal sales rates documented by youth tobacco purchase surveys, tobacco litter captured during park observations and the like.

Elected officials want to know what is happening in their district, but they also will want to know how that compares with the rest of the city or county. Therefore, break down your data by location so that you can present and compare local data to citywide or countywide data. In larger municipalities where elected officials represent different districts, it’s helpful to include maps that show district lines and where your data comes from. (You can get district maps from the city council website or can download some using GIS.)

To be able to do this effectively, you’ll need to be strategic when designing your sample for data collection activities. If you plan to do observations in five parks, sample at least one park in each city council/supervisor district. That way when you approach officials about the need to protect children from secondhand smoke and tobacco litter, they can’t say, “Oh that doesn’t happen in my district!”

In the end, what is most persuasive to policymakers is to see that other cities or jurisdictions have passed an ordinance like one which your agency is seeking. This assures them a policy will not adversely affect the business community. Because cities or counties often don’t like to be surpassed by their counterparts, frame the need for an ordinance in terms of what other cities are doing. For example, “Our city is a leader in the county (or region) and should be on par with other cities on this issue. Therefore, we need a tobacco retail licensing ordinance.”

Use Easy-to-Read Formats
Make your main points easy to find. If your organization doesn’t already have a relationship with the policymaker’s office, it’s best to provide a short summary sheet with more in-depth information attached. No one has time to read through 20 pages of content to see what point you are trying to make.

Use bullet points, statistics, charts, pictures or pulled quotes to describe the scope of the problem, potential policy options, or the success achieved. For example: “Almost 1,000 pieces of tobacco litter were recently found in parks where our children play. Exposure to secondhand smoke can lead to or aggravate asthma in children. Already 48,000 children in our jurisdiction have asthma. It’s time for our city to protect our children from secondhand smoke.”

Tell Them What You Want
Presumably, you are presenting decision-makers with data from your final evaluation report (or evaluation activities) for one of two reasons — either to congratulate them on their role in reducing the presence or impact of tobacco (or secondhand smoke) on local communities, OR to illustrate the scope of a tobacco-related problem and the need for some type of policy to address it. So if your data shows a decline in the illegal sales rate of tobacco to minors, use the data to demonstrate how wonderful the ordinance is and congratulate elected officials and law enforcement for doing a good job. However, if your youth tobacco purchase surveys show that the policy is not being implemented sufficiently, use your data to illustrate the need for better enforcement and ask policymakers to take action. In other words, let the data do the heavy lifting. Use it to leverage the desired action — and spell out what type of action is needed and from whom.

Be a Resource
Once you do find allies in the halls of government, become a resource for them as they grapple with the nuances of drafting policy language. Offer your technical assistance and be willing to provide any information on the issue when they need it. Gather a pool of people in the community who will speak at council meetings or press conferences about how the issue affects them personally. This gives all of your data a human face, which can be more convincing for the TV cameras.

Many thanks for the insights provided by a legislative aide to a city/county supervisor, project directors Alyonik Hrushow and Bob Gordon, and Vanessa Marvin at the Center for Tobacco Policy & Organizing
More than sixty communities in California have adopted strong local tobacco retailer licensing ordinances in order to reduce illegal sales of tobacco products to minors. These ordinances require tobacco retailers to obtain a license to sell tobacco, include an annual licensing fee high enough to fund strong enforcement programs and include financial deterrents for violators through fines and penalties that include the suspension and revocation of the license.

The table below lists illegal sales rates to minors before and after a strong licensing law was enacted in 26 communities where data is available and enough time (usually at least a year) has passed after the ordinance was enacted to determine results. These sales rates were determined by youth tobacco purchase surveys administered by local agencies. It is important to note that results from the youth tobacco purchase surveys are somewhat dependent on certain factors that differ in each community, such as the age of the youth and the number of stores surveyed.

The results overwhelmingly demonstrate that local tobacco retailer licensing ordinances with strong enforcement provisions are effective. Rates of illegal tobacco sales to minors have decreased, often significantly, in almost every California community that has passed strong tobacco retailer licensing ordinances. However, a licensing ordinance by itself will not automatically decrease sales rates; proper education and enforcement about the local ordinance and state youth access laws are always needed.

For more resources on tobacco retailer licensing ordinances visit www.Center4TobaccoPolicy.org/localpolicies-licensing and for model ordinance language, visit the Technical Assistance Legal Center at http://talc.phi.org.

<table>
<thead>
<tr>
<th>City/County</th>
<th>Date Passed</th>
<th>Annual Fee</th>
<th>Youth Sales Rate Before Ordinance</th>
<th>Most Recent Youth Sales Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Banning</td>
<td>August 2006</td>
<td>$350</td>
<td>77%</td>
<td>21%</td>
</tr>
<tr>
<td>Beaumont</td>
<td>December 2006</td>
<td>$350</td>
<td>63%</td>
<td>20%</td>
</tr>
<tr>
<td>Berkeley</td>
<td>December 2002</td>
<td>$427</td>
<td>38%</td>
<td>4.2%</td>
</tr>
<tr>
<td>Burbank</td>
<td>February 2007</td>
<td>$235</td>
<td>26.7%</td>
<td>17%</td>
</tr>
<tr>
<td>Coachella</td>
<td>July 2007</td>
<td>$350</td>
<td>69%</td>
<td>11%</td>
</tr>
<tr>
<td>Contra Costa County</td>
<td>January 2003</td>
<td>$160</td>
<td>37%</td>
<td>19%</td>
</tr>
<tr>
<td>Corona</td>
<td>October 2005</td>
<td>$350</td>
<td>50%</td>
<td>17%</td>
</tr>
<tr>
<td>Davis</td>
<td>August 2007</td>
<td>$348</td>
<td>30.5%</td>
<td>4.7%</td>
</tr>
<tr>
<td>Delano</td>
<td>June 2008</td>
<td>$165</td>
<td>23%</td>
<td>7%</td>
</tr>
<tr>
<td>Desert Hot Springs</td>
<td>August 2007</td>
<td>$350</td>
<td>48%</td>
<td>4%</td>
</tr>
<tr>
<td>El Cajon</td>
<td>June 2004</td>
<td>$198</td>
<td>40%</td>
<td>10%</td>
</tr>
<tr>
<td>Elk Grove</td>
<td>September 2004</td>
<td>$270</td>
<td>17%</td>
<td>0%</td>
</tr>
<tr>
<td>Grover Beach</td>
<td>September 2005</td>
<td>$224</td>
<td>46%</td>
<td>14%</td>
</tr>
<tr>
<td>Hollister</td>
<td>May 2006</td>
<td>$269</td>
<td>33%</td>
<td>4%</td>
</tr>
<tr>
<td>Kern County</td>
<td>November 2006</td>
<td>$165</td>
<td>34%</td>
<td>3%</td>
</tr>
<tr>
<td>Murrieta</td>
<td>May 2006</td>
<td>$350</td>
<td>31%</td>
<td>7%</td>
</tr>
<tr>
<td>Norco</td>
<td>March 2006</td>
<td>$350</td>
<td>40%</td>
<td>6%</td>
</tr>
<tr>
<td>Pasadena</td>
<td>January 2004</td>
<td>$225</td>
<td>20%</td>
<td>0%</td>
</tr>
<tr>
<td>Riverside</td>
<td>May 2006</td>
<td>$350</td>
<td>65%</td>
<td>31%</td>
</tr>
<tr>
<td>Sacramento</td>
<td>March 2004</td>
<td>$324</td>
<td>27%</td>
<td>10.1%</td>
</tr>
<tr>
<td>Sacramento County</td>
<td>May 2004</td>
<td>$287</td>
<td>21%</td>
<td>8.4%</td>
</tr>
<tr>
<td>San Francisco</td>
<td>November 2003</td>
<td>$175</td>
<td>22.3%</td>
<td>11.3%</td>
</tr>
<tr>
<td>San Luis Obispo</td>
<td>August 2003</td>
<td>$255</td>
<td>17%</td>
<td>0%</td>
</tr>
<tr>
<td>Tehachapi</td>
<td>February 2007</td>
<td>$165</td>
<td>8%</td>
<td>15%</td>
</tr>
<tr>
<td>Vista</td>
<td>May 2005</td>
<td>$250</td>
<td>39%</td>
<td>7%</td>
</tr>
<tr>
<td>Yolo County</td>
<td>May 2006</td>
<td>$340</td>
<td>28%</td>
<td>11%</td>
</tr>
</tbody>
</table>
## Overview of Proposed Policy to Expand Protections from Second Hand Smoke Exposure

### Sponsored by Supervisor Mar

<table>
<thead>
<tr>
<th>POLICY</th>
<th>CURRENT</th>
<th>PROPOSED EXPANDED PROTECTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ENCLOSED AREAS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hotel, motel lobbies</td>
<td>Option to designate up to 50% of lobby area of hotels, motels as smoking areas.</td>
<td>Prohibit smoking in entire lobby of all tourist lodging facilities including youth hostels, bed and breakfast inns.</td>
</tr>
<tr>
<td>Hotel, motel guest rooms</td>
<td>Option to designate up to 65% of hotel and motel guest rooms as smoking rooms.</td>
<td>At least 75% of guest rooms designated as smoke free in tourist lodging facilities including youth hostels, bed and breakfast inns.</td>
</tr>
<tr>
<td>Bars and Bingo Parlors</td>
<td>Smoking allowed at bars that are operated by the owner with no employees.</td>
<td>No smoking in all bars and charity bingo games. Existing bars with Department of Public Health approved applications for owner operated exemptions that are not located in mixed use/residential buildings would be grandfathered in. Smoking will not be permitted in any owner operated bar that opens after the adoption of the ordinance.</td>
</tr>
<tr>
<td>Tobacco shops</td>
<td>Smoking allowed at tobacco shops.</td>
<td>No smoking in tobacco shops. Existing tobacco shops will be grandfathered in with the exception of tobacco shops that are located in mixed use/residential buildings.</td>
</tr>
<tr>
<td><strong>OUTDOOR AREAS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outdoor dining areas</td>
<td>Smoking allowed in outdoor areas of restaurants, cafes and coffee shops where food is served.</td>
<td>Prohibit smoking in outdoor areas of restaurants, cafes and coffee shops or other establishments where food is served.</td>
</tr>
<tr>
<td>Outdoor waiting lines</td>
<td>Smoking banned at public transit stops but allowed in outdoor waiting lines for movie theaters, sporting events, music concerts, etc.</td>
<td>Prohibit smoking in outdoor service areas including ATMs, ticket lines, movie theater lines, athletic event lines, performance/concert event lines, cab stands.</td>
</tr>
<tr>
<td>Building entrances.</td>
<td>Smoking allowed at private building entrances but prohibited within 20 feet of main entrances, exits and operable windows of city, county and state buildings.</td>
<td>Smoking permitted only at the curb outside of private commercial, multi-unit residential and mixed use building entrances, exits and operable windows. If there is no curb, no smoking within 15 feet of the entryway.</td>
</tr>
<tr>
<td>Outdoor recreation areas</td>
<td>Smoking banned in unenclosed of City/County property under jurisdiction of a city department including parks, gardens, squares, golf courses. Smoking permitted on commercial piers such as street fairs and Pier 39 and farmers markets.</td>
<td>Prohibit smoking at farmers markets.</td>
</tr>
<tr>
<td><strong>HOUSING</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enclosed common areas of multi unit residences</td>
<td>Smoking allowed in enclosed common areas of multi unit residences if there are no employees working in the building.</td>
<td>No smoking in enclosed common areas of multi-unit residences including common halls, elevators, parking areas, lobbies, waiting areas, bathrooms, cooking, dining, lounge, laundry facilities and recreation areas. Tenant smoking in their private unit must keep front door of their private unit closed while smoking.</td>
</tr>
</tbody>
</table>
Tell Your Story
Guidelines for Preparing a Complete, High Quality Final Evaluation Report

California Department of Health Services
Tobacco Control Section
This guide is a revision of *Tell Your Story: Guidelines for Preparing an Evaluation Report* (1998). It first highlights the critical role that evaluation plays in California’s Comprehensive Tobacco Control Program. Next, it describes the value of Final Evaluation Reports for funded projects, as well as for the broader tobacco control community. *Tell Your Story* then answers a number of commonly asked questions about completing and submitting reports. The final section of the guide provides detailed guidelines for writing a Final Evaluation Report. The guide is followed by four appendices: Appendix A - a sample evaluation report; Appendix B - the rating form that states the Tobacco Control Section’s (TCS) expectations for the Final Evaluation Reports and is used to score the reports; Appendix C - a checklist with the required components of the Final Evaluation Report for primary objectives; and Appendix D - an outline of the information to be included in the Brief Evaluation Report for non-primary objectives.
The Role of Evaluation in Tobacco Control

Projects funded by the Tobacco Control Section (TCS) are required to carry out evaluation activities to assess their tobacco control efforts. Evaluation is a way of examining and understanding the relative effectiveness of various tobacco control interventions. By knowing what is working and what is not working, for whom, and in what context, TCS projects can be more successful in changing norms toward a tobacco-free California. Evaluation of TCS-funded projects helps to:

- Identify ways to improve interventions;
- Identify strategies that do not work or are too labor- or resource-intensive in relation to the outcome or sustainability of the outcome;
- Demonstrate which tobacco control practices could be usefully applied by other projects and which are unlikely to be effective elsewhere;
- Identify needs for technical assistance;
- Demonstrate the need for stronger tobacco control policy interventions;
- Galvanize community support for strong policy interventions; and
- Ensure efficient use of the tobacco tax revenue.

Usefulness of Reports

For evaluation to contribute to future tobacco control activities, evaluation results must be communicated effectively. A well-written Final Evaluation Report can be used to inform state and local stakeholders and policy-makers about the impact of your program. In addition, abstracts or full reports from other funded projects may provide promising approaches to achieving an objective or effective methods of evaluating an intervention that could be adapted for use in your own tobacco control program. Given the limited resources available for tobacco control programs, Final Evaluation Reports are a valuable tool for channeling tobacco control efforts toward the activities and interventions that have the greatest public health impact and the greatest likelihood of success.
Answers to Commonly Asked Questions

When are Final Evaluation Reports submitted? How do they differ from the Final Comprehensive Progress Report?
The Final Evaluation Report is a stand-alone deliverable completed for each primary objective identified in the scope of work. It is usually submitted with the Final Comprehensive Progress Report or, if completed earlier, with an interim progress report. A Final Evaluation Report addresses each of the elements in the Checklist found in Appendix C of this document, including information about the primary objective, the intervention activities conducted to achieve the objective, and the evaluation methods, findings, conclusions, and recommendations. While the Final Evaluation Report describes the evaluation of a single primary objective, the Final Comprehensive Progress Report describes efforts made toward completion of all deliverables in the scope of work, including the level of collaboration, coalition activities, staffing, and other project details.

What are the TCS evaluation reporting expectations for non-primary objectives?
A Brief Evaluation Report summarizing the main components of the intervention and evaluation findings is required for each non-primary objective. The Brief Evaluation Report for a non-primary objective must include a statement of the objective and indicator or asset number, an overview of the project, a brief description of the evaluation design and methods, and a synopsis of the evaluation results, conclusions, and recommendations. (See Appendix D for an outline of the information to be included in the Brief Evaluation Report for non-primary objectives.) The recommended length for a Brief Evaluation Report is one to three pages.

What are the evaluation reporting expectations for an evaluation that used a case study approach?
The guidelines in this document are applicable to reports of evaluations using experimental, quasi-experimental, or non-experimental designs. Case studies are one type of non-experimental design because they do not involve the use of comparison groups or pre-tests and post-tests. While the guidebook, Using Case Studies to Do Program Evaluation, has useful information about qualitative methods, it is not meant to be used as a guide on how to write an evaluation report.¹

¹ Using Case Studies to Do Program Evaluation (currently available on the TCS website: http://www.dhs.ca.gov/tobacco/documents/eval/ProgramEvaluation.pdf, accessed 11/05) is being revised and reformatted into a set of online tip sheets intended to make the information about qualitative methods more accessible.
Will our project be penalized by TCS for not achieving an objective?
No. A project is not penalized if it does not achieve an objective stated in the scope of work. However, project funds may be withheld if deliverables (including Interim Progress Reports, Final Evaluation Reports, and Brief Evaluation Reports) within the scope of work are not completed or are missing critical information.

What does TCS do with the Final Evaluation Reports?
When Final Evaluation Reports are received, they are reviewed and rated for completeness and quality. (See the next section and Appendix B for details on the criteria used in rating.) Reports are then catalogued in a searchable TCS database, and those with a medium to high rating are available to TCS agencies upon request. Copies of well-written Final Evaluation Reports are also posted on TCS Web sites and shared with researchers and national organizations upon request.

How is the information in the evaluation reports used?
TCS uses information from the Final Evaluation Reports and Brief Evaluation Reports to communicate the effectiveness of funded projects to policy-makers in the California Department of Health Services and other state government agencies. Evaluation findings have influenced analysis of proposed tobacco control legislation and provided data for reports provided to the governor, state legislature, and federal agencies. The evaluation reports are also used by TCS administrators as a communication tool to justify the need for continued funding and to offer accountability to the public for the use of state taxpayer funds. The Tobacco Control Evaluation Center (TC Evaluation Center) uses the Final Evaluation Reports rated “high” as models in the technical assistance it provides to TCS-funded projects.

General Guidelines

- Submit a separate Final Evaluation Report for each primary objective and a separate Brief Evaluation Report for each nonprimary objective.

- Write the report for the general reader who may be unfamiliar with issues in tobacco control; report results in concise, straightforward language. Prepare and format the Final Evaluation Report using the section headings and subheadings displayed in the Final Evaluation Report Rating Form and the Checklist (Appendices B and C).

- Keep in mind that there is often more than one way to interpret the results of a project. It is important that agency staff and the evaluator discuss the results and proposed conclusions before writing an evaluation report. Reaching consensus about the interpretation of findings improves the validity and accuracy of the report.

The outline in Appendix D serves the same purpose for the Brief Evaluation Report, which is submitted for non-primary objectives.
Elements of a High Quality Final Evaluation Report

1. Title Page
The title page provides the information needed to ensure that appropriate credit is given to the project, authors, and funding source. The specific details required for the title page are the following:

- Title of the study
- Agency Project Director’s name
- Current agency name, mailing address, email address, phone number, and fax number
- Names and affiliations of report author(s)
- Date of submission to TCS
- TCS contract number and contract period
- Attribution statement: “Made possible by funds received from the California Department of Health Services, Tobacco Control Section under contract number XX-XXXX, contract term: 07/01/01-06/30/04
- Suggested citation: The citation should include the following information: author(s), year, title of report, the place where the report was produced (California), and the name of the project. Present the information in the Chicago Manual of Style format as shown in the example below.


2. Abstract
The abstract provides an overview of the entire Final Evaluation Report. It is the most widely distributed section of the report, so it is important that it is complete and concise. It is usually more efficient to write the abstract after completing all other sections of the report. The abstract should be one to two pages in length and should summarize the following information:

- Statement of the objective and indicator/asset number
- Description of the project, including project context and rationale, intervention setting(s), target(s), and activities
- Evaluation methods, including study design, sample selection and size, and data collection procedures
- Main results
- Conclusions and recommendations

See the Local Program Evaluation Planning Guide, California Department of Health Services, Tobacco Control Section, for a description of evaluation designs and evaluation terms. www.dhs.ca.gov/tobacco/
3. Project Description
The body of the report begins with a description of the background of the project, including a discussion of the context for the project. The rest of the project description section describes in detail what was done to achieve the objective. The following components should be included in the project description:

**Background**
- **Project Context:** Describe the social norms and attitudes around tobacco control that were identified during the CX or other needs assessment activities, including any relevant political, historical, and/or geographical issues in the community.

**Objective**
- **Project Objective and Indicator/Asset Number:** Clearly state the objective and indicator or asset number to orient the reader to all the information that follows.
- **Rationale:** Briefly state the rationale for selecting the objective, relating it to the project context.

**Intervention**
- **Intervention Activities:** Describe the specific activities that were carried out in order to achieve the project objective, including the development, timing, and implementation of the activities. Indicate whether the activities were fully implemented as intended. Report any unanticipated changes to the planned activities and explain why the changes were made.

- **Intervention Target(s):** Identify who the activities were designed to influence (such as policy makers or merchants), and/or what the project was designed to change (such as stores, organizations, or events).

- **Project Setting(s):** Describe the specific locations where the intervention activities took place, such as convenience stores, bars, worksites, or schools.

4. Evaluation Methods
The evaluation methods section needs to be detailed enough for the reader to understand all aspects of the evaluation process, including the design, sample, data collection, and data analysis.

**Evaluation Design**—The evaluation design provides the overall framework for the evaluation. The evaluation design section should include a description of the following:

- **Type of design:** State whether an experimental, quasi-experimental, or non-experimental design was used and explain why the evaluation design was selected. For example, a non-experimental design with a case study approach might be used to collect rich information on process in addition to documenting outcomes. As mentioned above, the case study approach is a non-experimental design because it has no comparison group and does not use pre-tests and post-tests.
• **Details of the design**: Describe the key elements of the specific evaluation design used to assess the process and/or outcome of the intervention. This description should include when (before, during, and/or after the intervention) and how often data were collected, the number of groups compared (if any), and whether intervention activities varied by group.

• **Design limitations**: Describe the limitations in the design’s ability to assess whether the project activities led to the achievement of the objective. Examples may include a lack of baseline (pre-intervention) data, absence of a comparison group, or insufficient process data to understand strengths and weaknesses of the intervention.

**Sample**—Depending on the objective, the sample may be comprised of businesses, housing complexes, people, activities, time periods, locations, documents, organizations, or any other entity from which data were collected. The sample description should include the following:

• **Sample selection**: First, identify the population (the group from which the sample is drawn). Then, specify the characteristics on which the sample was based, including the rules used to include or exclude individuals, businesses, time periods, locations, etc. For some projects, sample selection is based on random selection of groups or group members using a table of random numbers. For others, it is based on systematic sampling (polling every 10th patron exiting a concert venue, for example). In other situations, a purposive sampling approach is used, such as selecting individuals for key informant interviews because they are members of the city council.

• **Sample size and response rate**: State the number of units (businesses, housing complexes, people, etc.) that were selected for the sample. Then, describe the number and percentage of units from which data were actually collected (the “response rate”). For example, when describing a sample of retail stores for the Youth Tobacco Purchase Survey, the report should describe how the retail stores were selected, the number of retail stores that were selected, and how many of the selected retail stores were actually surveyed.

• **Sample limitations**: Describe sample issues that limit the strength of the evaluation, such as small sample size, low response rate, or use of a convenience sample.

**Data Collection Instruments and Procedures**—Describe the data collection instruments and procedures used to collect the data. This description should include information on the following:

• **The type and source of data collection instruments**: Some of the commonly used types of instruments are mail questionnaires, phone surveys, email/internet surveys, face-to-face interviews, observation forms/protocols, focus group interviews, document review forms, and public opinion polls. Sources of data collection instruments include (a) standardized instruments (such as the Youth Tobacco Purchase Survey), (b) standardized...
instruments modified by the project, (c) existing, but not standardized, instruments adapted for the purposes of the project, and (d) original instruments developed by the evaluator and/or project staff.

- **Data collection procedures**: The description of the data collection process includes who collected the data, what training was provided to data collectors, and where and when data were actually collected.

- **Limitations of the data collection procedures**: Issues in data collection that affect the quality of the evaluation include inadequate training of data collectors, poorly worded questions, inability to collect data as planned, and others.

**Data Analysis**—Describe how the data were analyzed and, if appropriate, the software and statistical methods used to analyze the data. The description of data analysis should be sufficiently detailed for a reader to assess whether the analysis approach was appropriate for the type of data collected. For example, a project might use content analysis for data from open-ended questions and statistical tests of significance for quantitative data (assuming the sample size is large enough for statistical tests to be meaningful).

5. **Evaluation Results**

The evaluation results section presents the major evaluation findings. The presentation should focus on the analyses that are most relevant to the objective and most likely to be useful to the report’s audiences.

- Present the details of the major evaluation findings clearly and logically by describing the results of descriptive or inferential statistics, content analysis, or other kinds of analyses. When appropriate, use tables or figures to display key data, avoiding total reliance on narrative.

- Present evaluation findings objectively; include relevant negative and positive results.

- It is important that the reader is able to follow the connection between the results described in this section and the conclusions drawn in the final section.

Sample copies of the data collection instruments must be attached to the report unless they have not been modified in any way from standardized instruments; however, the source of the instruments must be clearly referenced in the report and the process of obtaining them should be described.
6. Conclusions and Recommendations
After providing a clear description of the evaluation findings, the Final Evaluation Report comes full circle by returning to the objective that was stated at the beginning of the report. A well-written Conclusions section will meet the following standards:

- Evaluation results clearly suggest or demonstrate whether intervention activities led to the achievement of the stated objective. Results of process data collection are used to identify the strengths and weaknesses of the intervention plan and its implementation.

- Conclusions do not go beyond what the data can support, given any limitations of the evaluation methods. (For example, if the sample is a convenience sample, conclusions should not be drawn about the population as a whole.) Alternative ways in which the results might be interpreted should be considered. For example, were there events or circumstances that might have influenced the intervention target more than the intervention activities?

- Based on the process of implementing the project and on the evaluation results, recommendations for future work in tobacco control around this and similar objectives are provided. Remember that negative as well as positive results are useful in guiding future endeavors.

7. List of cited sources
Any references made in the body of the report to relevant theories, research, or data from sources other than the evaluation being described should be listed at the end of the report. Each citation should include the author(s), name of the document, year of publication, and publisher or other source. For information taken from Web sites, the name and URL of the Web site and the date the information was obtained from the Web site should be provided. It is recommended that you use *The Chicago Manual of Style* citation guide to cite sources.

Optional Elements of the Final Evaluation Report

In addition to the required sections of a Final Evaluation Report, you may want to include one or more of the following four optional components as a preface to your report:

- *Acknowledgment Section*: The acknowledgment section can be on a separate page or included on the title page. A carefully written acknowledgment may have historic value, documenting who was instrumental in the accomplishment of the project’s goals. Thanking contributors for the specific skills, tasks, or qualities they brought to the project also provides proof of participation and encourages future support.
• **Table of Contents**: A table of contents makes it easy for readers to find specific sections. It is particularly useful for long reports.

• **List of Tables, Figures, and Appendices**: Lists of tables, figures, and/or appendices help the reader identify and find important information.

• **List of Acronyms or Abbreviations**: When a report uses several acronyms, providing a list that spells them out is a handy guide for the reader.

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**Conclusion**

Evaluation reports are a valuable resource in working toward a tobacco-free California. A complete, high quality Final Evaluation Report can serve many audiences and many purposes, from sparking action and improving capacity at the local level to demonstrating effectiveness and generating support at the state level. Even when evaluation results are negative, an evaluation report can shed light on how to improve future interventions. However, to be credible and useful, the report must include complete and detailed descriptions of project activities and evaluation methods. The information in this guide will help you “tell your story” in a way that will enable you, TCS, and others to get the most out of your tobacco control efforts.
Appendix A – Sample Report

Smoke-free Entrances Final Evaluation Report
Bear County, 2001 – 2004

Project Director: Jane Smith
Bear County Tobacco Reduction Program
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Phone: (530) 297-4659
Fax: (530) 757-8303
E-mail: jsmith@bearcounty.ca.us

Report Author: Joe Smith, Local Evaluator, Bear Research Company
Report Submitted: June 30, 2004
Made possible by funds received from the Tobacco Tax Health Protection Act of 1988 - Proposition 99, through the California Department of Health Services, TCS contract # 0-00-00, contract term: 07/01/01 – 06/30/04

Abstract

The Bear County Tobacco Reduction Program (BCTRP) received numerous complaints over a period of several years about smokers congregating near doorways of public and private buildings throughout the county. These public complaints, along with other data collected during the BCTRP’s Communities of Excellence (CX) needs assessment, prompted staff and coalition members to decide to address the problem of secondhand smoke exposure in entryways.

The BCTRP developed the following objective for this project: By June 30, 2004, three cities within Bear County will adopt and implement a policy to prohibit smoking within 25 feet (or more) outside of doorways, open windows, and intake vents of publicly-owned buildings and privately-owned buildings that are open to the public. This is a primary objective and addresses CX indicator # 2.2.8.

Project activities focused on city council members because they were the decision-makers with the authority to adopt and monitor implementation of smoke-free entrance policies for their cities. In the first phase of intervention, city council members in all six cities in the county were sent educational packets with information on smoke-free entrances and sample policies. As a way to focus limited resources and maximize the potential of success, the three cities expressing the most interest in adopting a smoke-free entrance policy (determined during follow-up phone calls to city council members by BCTRP staff) were selected for the second phase of in-depth intervention. In these cities:

- Project staff conducted observational surveys to document the extent of secondhand smoke in doorways and public opinion surveys to assess public support for a smoke-free entryway policy.
- Project staff presented the data on public exposure to secondhand smoke and support for the policy to the councils of each of the three cities. Information on the smoke-free entryway policy was also given. Coalition members made educational visits to individual city council members to provide additional information and answer questions that may not have been covered during the council meetings.
- Local media were provided with press releases about the results of the public opinion survey and the risks of secondhand smoke.

After the BCTRP’s second phase of intervention, the three cities adopted and began implementation of smoke-free entryway policies. In those three cities, staff and coalition members held press conferences to announce the new policy and to recognize the action of the city council. In addition, the cities that adopted smoke-free entryway policies were given “no smoking” signs for placement at entryways to ensure high visibility of the new policies and tobacco receptacles to be placed beyond the 25-foot no-smoking boundaries.

Evaluation of this project was two-fold. To evaluate the effectiveness of the intervention in achieving policy adoption, the project compared cities receiving information packet and in-depth intervention and cities receiving the information packet only. The information from the initial phone calls to city council members were used to establish that the cities did not already have smoke-free entryway policies. After the interventions, reviews of city council meeting minutes and passed policies were used to assess the passage of smoke-free entryway policies in each city. Policy implementation was evaluated with a non-experimental design through data collected from cities in the intervention group only. Pre- and post-intervention data were collected for smoking behavior and signage in the intervention cities. Process data, such as public opinion surveys and key informant interviews, were also collected in these cities.

BCTRP achieved its objective: Three cities adopted and implemented smoke-free entrance policies. Observations showed that all three cities posted “no smoking” signs. Compared to pre-adoptions data, significant decreases in smoking within 25 feet of entryways were also observed in those three cities. The data on public support for the policy was the most frequently cited reason given by the city council members for supporting the policy. In addition, media support was important in getting the policy accepted by the public.
Bear County Smoke-free Entrances
Final Evaluation Report

Project Description

**Background** – Bear County is a rural community with a population of approximately 184,000 people. The county contains six small to mid-sized cities (ranging in population from 10,250 to 62,200 people). The county’s economic base includes several large manufacturing plants and a substantial retail sector, as well as outdoor recreational activities that attract tourists. The Bear County Tobacco Reduction Program received numerous complaints over a period of several years regarding smokers congregating around doorways of public and private buildings and realized that this was an issue that needed to be addressed.

**Objective** – By June 30, 2004, three cities within Bear County will adopt and implement a policy to prohibit smoking within 25 feet (or more) outside of doorways, open windows, and intake vents of publicly-owned buildings and privately-owned buildings that are open to the public. This is a primary objective, addressing Communities of Excellence indicator # 2.2.8.

This objective was chosen by staff and coalition members through the Communities of Excellence (CX) needs assessment in January 2001. Thirty-six members of the community, including staff, adult and youth coalition members, and partners representing law enforcement, the schools, media, and youth groups participated in a three-hour community forum. Of the CX indicators discussed, attendees rated smoke-free entrances as the highest priority to be included in the upcoming comprehensive three-year county tobacco control plan. Compelling data presented at the forum included complaints received by county tobacco control project staff from people who were being exposed to secondhand smoke as a result of smokers congregating near exit doors of businesses and public buildings. Additionally, cigarette smoke was pulled into these buildings whenever the outside doors opened, exposing people inside the buildings to secondhand smoke. While some legislation already existed regarding smoking in entryways, these complaints indicated the public’s awareness of the dangers of secondhand smoke and demand for stricter policies to protect their health.

At the time the intervention began in 2001, state law required a five-foot smoke-free area in front of entryways of state-owned and occupied or state-leased and occupied buildings, but no state law mandated smoke-free entryways of privately-owned buildings open to the public. Mid-way through the project, Assemblyman Juan Vargas began shepherding Assembly Bill 846 (AB 846) through the legislative process. Under the provisions of AB 846, which became effective on January 1, 2004, Government Code Sections 7596-7598 prohibit smoking within 20 feet of all main entrances, exits, and operable windows of all public buildings, including buildings on the campuses of the University of California, California State University, and California community colleges. These restrictions are limited to state and local government buildings.
Because of intervening state legislative activity, this objective evolved to have two parts: (1) to expand the state-mandated 20 foot smoke-free zone in front of entryways, operable windows, and vents of public buildings to at least 25 feet, and (2) to create a smoke-free boundary of at least 25 feet in front of entryways, operable windows, and vents of privately-owned worksites and other buildings that are open to the public.

**Intervention** – The intervention had two phases. The first phase targeted all six cities in the county. For this phase, educational materials regarding smoke-free entrances and sample policies were obtained from the Tobacco Education Clearinghouse of California (TECC) and Technical Assistance Legal Center (TALC), respectively. These materials were modified for Bear County by adding the appropriate local information, such as demographic data and contact information. An educational packet was sent to city council members in the six cities. Included in the packet were frequently asked questions, a sample policy, and sample signage. Letters of support were included from the American Cancer Society and from BREATH, the California Smoke-Free Bars, Workplaces and Communities Program. The educational packet was followed up with phone calls to the city council members in each city to gauge support for a smoke-free entryway policy. Based on the phone calls, the three cities whose city council members expressed the most interest in the policy were selected for the second phase of in-depth intervention. This strategy of targeting only areas expressing interest was used in order to focus limited resources and maximize the potential of success.

The second phase of the intervention targeted city council members in the three cities that seemed most likely to adopt a smoke-free entryway policy. In these cities:

- Observational surveys were conducted to document the problem of secondhand smoke in entryways.
- Public opinion surveys were conducted to document public support for a smoke-free entryway policy.
- Project staff presented the data on public exposure to secondhand smoke and support for the policy to the councils of each of the three cities. Information on the smoke-free entryway policy was also given. Presentations were augmented with individual educational visits to city council members.
- Local media were provided with press releases about the results of the public opinion survey and the risks of secondhand smoke.

In those cities that adopted a smoke-free entryway policy, press conferences were held to announce the new policy and to recognize the action of the city council, and signs were provided for placement at entryways to ensure high visibility of the new policy. Additionally, tobacco receptacles were provided for placement beyond the 25 foot no-smoking boundaries.
Evaluation Methods

Evaluation Design

The evaluation for this objective was two-fold. To evaluate the effectiveness of the intervention in achieving the policy adoption, cities receiving the information packet and the in-depth intervention were compared to the cities that received the information packet only. As described above, phone calls were made to the city council members in the six cities after the educational materials were sent. These phone calls determined that the six cities were similar in that none already had a smoke-free entryway policy and that they were dissimilar in their interest in such a policy (with three having an interest and three indicating that they were not ready for a smoke-free entryway policy). After the intervention, the three cities that received the in-depth intervention were compared to those that received the information packet only. The expectation was that the cities that received the in-depth intervention and that had expressed an interest in the policy would be more likely to pass smoke-free entryway policies than the cities in the other group.

Because of resource limitations, there was no comparison group for the assessment of policy implementation. Instead, in the cities that received the in-depth intervention, the evaluation of policy implementation consisted of the collection of pre- and post-intervention data on evidence of smoking and signage. With no comparison group and collection of data at only two times, this is a non-experimental design.

In addition to evaluating the outcomes of the intervention, the project also collected process data. Specifically, in the three in-depth intervention cities, public opinion surveys were conducted before the intervention and key informant interviews were conducted after the intervention. More information on these surveys is provided below.

The major strength of this evaluation design is the comparison of the low intensity intervention (information packet only) and the in-depth intervention (information packet, data on smoking behavior and public support for the policy, and in-person visits and presentations to the city councils). In addition, observations of signage provided evidence of implementation in the cities that adopted smoke-free entryway policies. The collection of process data from interviews with city council members is another strength of the design; it helped the project learn which aspects of the intervention were particularly effective. The major limitation of this design is that smoking behavior is measured only in the cities receiving the in-depth intervention and only once before and once after the intervention. Without a comparison group, the evaluation does not provide a strong test of whether any observed changes in smoking behavior were the result of the intervention or due to other factors.

Sampling, Data Collection, and Analysis

Data were collected from all three cities that received the in-depth intervention. In each of these cities, observational surveys, public opinion surveys, and key informant interviews were conducted. The samples, data collection procedures, and data analyses for each method are described in detail below.
Observational survey – To assess the implementation of the 25-foot policy, observations of smoking, tobacco litter, and signage near entryways of public, non-governmental buildings were made prior to and following policy adoption and implementation. The pre-intervention observations took place two weeks before meeting with city council members. Post-intervention observations were conducted three months after the policy was adopted.

In each city, five locations were purposively selected based on where the largest proportions of the public were likely to be exposed to secondhand smoke in entryways. The locations included major employers, movie theaters, shopping centers, and shopping mall/department stores. Project staff made observations during 15-minute intervals at two different times on the same day for each location selected. Times for data collection were selected in order to observe when smoking activity was likely to be high. For example, at the businesses where employees work a standard business day and at the shopping centers that the public visit during a lunch break or after work, observations took place during the lunch hour (approximately 12:00 - 12:15 pm) and again at the end of the day (approximately 5:00 - 5:15 pm). At movie theaters, observations took place when people were most likely to be standing in line waiting for tickets or to get into the theater. Therefore, for each city targeted, data were collected at two different times in five locations throughout the city both before and after the intervention, for a total of 10 observations per city pre-intervention and 10 observations per city post-intervention. All observations were done on weekdays. In each city, pre- and post-observations were conducted at the same locations and at roughly the same period during the day so that pre-intervention and post-intervention comparisons would be appropriate.

The same observation form was used both pre-intervention and post-intervention. The form was developed by the local evaluator with assistance from the Tobacco Control Evaluation Center (TC Evaluation Center). Information collected through the observational survey included the following:

- amount and location of tobacco litter;
- any smoking behavior observed (yes/no) within 25 feet of entryways and/or windows;
- presence and location of “no smoking” signs;
- presence and location of tobacco receptacles.

This observation form, along with other data collection instruments used, is attached to this report. The evaluator developed instructions for using the observation form and then provided training to the project staff who conducted the observations. The training included a review of the observation protocol and form, and an activity where staff members practiced observations until they felt comfortable with the form and the evaluator was confident that they would be able to use the form consistently.

NOTE: If it would add useful information about the type or geographic distribution of the sample, a report could include a list of the specific locations in an appendix.

NOTE: In your report, the data collection instruments (observation instrument, public opinion survey, and key informant interview questions) would be included as appendices. However, for this sample report, data collection instruments are not attached. Please contact the TC Evaluation Center (www.tobaccoeval.ucdavis.edu) if you would like assistance developing data collection instruments.
After the observations were completed, staff entered the data into a spreadsheet developed by the evaluator. Data from the pre-intervention observations were used in presentations to city council members to describe the problem of smoking at building entrances. Post-intervention data were used to assess signage and smoking behavior after the policy was adopted. Data on signage were dichotomous: signs were either present or absent. Data on smoking activity during each observation period were also analyzed as a yes/no variable, with “yes” indicating that smoking had been observed within 25 feet of the entryway during the observation period and “no” indicating that it had not been observed.

Frequencies and percentages were calculated and a chi-square analysis was used to assess statistical significance of the difference between the smoking behavior before and after the intervention. Data from the observations were analyzed using the Statistical Package for the Social Sciences (SPSS).

**Public opinion survey** – Public opinion surveys were conducted in each of the three cities targeted for in-depth intervention activities. The surveys were conducted in May and June 2002, prior to the presentations to the city councils so that the data could be part of the presentation. The samples for the public opinion surveys were obtained from the same locations that the observations were conducted. These locations had already been identified as places where large numbers of people either worked or congregated, so it was efficient to go there to get people to answer the surveys. In addition, the locations were in various neighborhoods in the cities so the responses represented a cross-section of the public. Surveys were conducted the week after the observations so that they would not affect the behavior that was being observed. Altogether, 473 surveys were completed (147 in Bear City, 165 in Gold Town, and 161 in Pacific Canyon).

The public opinion survey was developed by the local evaluator in partnership with the TC Evaluation Center. Respondents to the survey were asked whether smoking outside business entrances bothered them, whether they supported implementing a 25-foot smoke-free entrance policy, and whether they currently smoke. Survey protocol and instructions were developed by the evaluator, with training provided to the project staff that collected the data from members of the public. Project staff entered survey data into a spreadsheet developed by the evaluator.

Data from the public opinion surveys were analyzed by calculating frequencies and percentages for yes/no questions. Responses were analyzed for the three cities individually, as well as combined for an overall indication of support.

**Key informant interviews** – Key informant interviews were conducted with city council members in each of the three targeted cities three months after policies were adopted. Of the 15 city council members (five in each city), project staff were able to interview only eight (three in Bear City, three in Gold Town, and two in Pacific Canyon), for an overall response rate of 53 percent.

The surveys were conducted by telephone. The questions, which were developed by the local evaluator, asked about key factors in deciding to support or oppose the policy; barriers to and facilitators of policy adoption/implementation; and suggestions for other cities implementing similar smoke-free entryway policies.

Content analysis of the open-ended responses was used to identify strengths and weaknesses of the project’s intervention, and recommendations for the future.
Evaluation Results

*Adoption and Implementation of Smoke-free Entrance Policies (Outcome Data)* – As shown in Table 1, all three of the cities that received the in-depth intervention passed and implemented the policy by the end of the project period. One of the comparison cities (Green Valley) that received the information packet only contacted the Bear County Tobacco Reduction Program (BCTRP) staff on their own and is contemplating the adoption of a smoke-free entryway policy. Table 1 also reports results from the post-adoptions observations of signage in the three targeted cities. (Due to limited resources, observation data were only collected in cities that received the in-depth intervention.) As can be seen, all three cities that adopted the policy were found to have “no smoking” signs posted at the post-intervention observations.

<table>
<thead>
<tr>
<th>City</th>
<th>Policy Adopted?</th>
<th>Signage Posted?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>In-Depth Intervention</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bear City</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Gold Town</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Pacific Canyon</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Education Materials Only</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Green Valley</td>
<td>No*</td>
<td>N/A**</td>
</tr>
<tr>
<td>Middleton</td>
<td>No</td>
<td>N/A**</td>
</tr>
<tr>
<td>Pine Creek</td>
<td>No</td>
<td>N/A**</td>
</tr>
</tbody>
</table>

*Green Valley is considering adoption of the policy and is currently working with BCTRP staff.*

**Not Applicable**

Observations of smoking behavior before and after the intervention provide information about public compliance with the new policies. As described in the Evaluation Methods section, observations were made in five locations in each city and were conducted twice at each location. A total of 10 observations per city were made prior to the intervention and again following the intervention. A total of 30 observations were made in the pretest and 30 in the posttest.

Figure 1 compares the number of observations in which smoking was observed before and after the policy combined across the three cities. A chi-square analysis of these data indicates a statistically significant difference between pre-intervention and post-intervention observations of smoking (X2 = 17.38, df(1), p<.001). Breaking the post-intervention data out by city, smoking was seen in 1 of the 10 observations in Bear City, 1 of the 10 observations in Gold Town, and 3 of the 10 observations in Pacific Canyon.
Process Results

Public Opinion Survey – Pre-adoption public opinion surveys were completed by 473 respondents (3 targeted cities combined). Many of the respondents were bothered by smoking near entrances and windows, and reported a high level of support for adopting the smoke-free entrance policy. Overall, 68 percent of the respondents reported that smoking outside building entrances, windows, or vents bothered them. Slightly more, 72 percent, said that they supported a city-wide 25-foot smoke-free entrance, window, and vent policy. Nine percent of the respondents identified themselves as smokers. Table 2 shows the data broken out by city.

Table 2. Extent of Support for Smoke-free Entrances by City

<table>
<thead>
<tr>
<th>Survey Questions</th>
<th>Bear City (n=147)</th>
<th>Gold Town (n=165)</th>
<th>Pacific Canyon (n=161)</th>
<th>Total (n=473)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does smoking outside building entrances, windows or vents bother you?</td>
<td>95 (65%)</td>
<td>112 (68%)</td>
<td>115 (71%)</td>
<td>322 (68%)</td>
</tr>
<tr>
<td>Do you support a city-wide 25 foot smoke-free entrance, window and vent policy?</td>
<td>99 (67%)</td>
<td>111 (67%)</td>
<td>130 (81%)</td>
<td>340 (72%)</td>
</tr>
<tr>
<td>Do you currently smoke?</td>
<td>16 (11%)</td>
<td>20 (12%)</td>
<td>7 (4%)</td>
<td>43 (9%)</td>
</tr>
</tbody>
</table>
The information on smoking status was used to examine support for the policy by smoking status. With 29 (68%) of the 43 smokers and 293 (68%) of the 430 nonsmokers, equal proportions of smokers and nonsmokers reported that they were bothered by smoking outside building entrances, windows, or vents. Although a somewhat higher proportion of nonsmokers (73%) than smokers (65%) reported supporting a city-wide policy, the fact that a majority of both groups favored the policy helped generate support from the city councils in the targeted cities.

**Key Informant Interviews** – The responses to the key informant survey from the eight city council members were analyzed, and the findings are summarized below. (Note that respondents may have given more than one answer to a question.)

- Of the eight respondents, six supported the smoke-free entryway policy in their city. They cited the following factors as helping them support the policy:
  - Public opinion data in support of the policy that came from across the city (five respondents)
  - The sample policy in the informational packet (three respondents)
  - A strong awareness of the dangers of secondhand smoke before the project (two respondents)
  - Information about other California cities that had already passed similar ordinances (one respondent)

- The two respondents who did not support the policy identified the following reasons for their opposition:
  - Doubt that the policy would be enforceable (two respondents)
  - Belief that such policies violate personal freedoms (one respondent)
  - Lack of interest in health-related policies at the local level (one respondent)

- Respondents cited the following as facilitators of policy implementation:
  - No-smoking signs (seven respondents)
  - Public support after media announcements (four respondents)

- Three of the respondents said that they could not identify any barriers to implementing the policy. The other five identified the following potential barriers:
  - Public resistance to the policy (four respondents)
  - Cold or rainy weather (two respondents)
  - People defacing the no-smoking signs (one respondent)

- The council members made the following suggestions for other cities considering a smoke-free entrance policy:
  - Ask for public input first (four respondents)
  - Provide a comfortable place for smokers outside the 25-foot boundary (three respondents)
  - Use the media to get public support (two respondents)
Conclusions and Recommendations

The objective of getting three cities to adopt and implement smoke-free entryway policies was met. Three cities adopted and implemented policies prohibiting smoking within 25 feet of all doorways, open windows, and intake vents. In addition, the evaluation shows that, in the locations selected for observation, “no smoking” signs had been posted and a decrease in smoking was observed. Because the cities that received the in-depth intervention adopted smoke-free entryway policies and the cities that did not receive the in-depth intervention did not adopt smoke-free entryway policies, it seems clear that the intervention activities were responsible for the change in policy. However, a stronger evaluation design would be needed to conclude that the intervention caused the decrease in smoking behavior that was observed.

Lessons learned from this project and recommendations for future projects include the following:

- Of the six potential cities for the intervention, only the three cities that expressed interest in the policy received the full intervention. Targeting cities that are interested in adopting the policy can be advantageous to the project: It increases the likelihood of a positive outcome and is less likely to waste resources.

- Targeting cities that are already interested in the policy raises the question of whether the in-depth intervention was needed. However, the key informant interviews indicate that the intervention was effective. For example, the data on public support for the policy was the most frequently cited reason given by the city council members for supporting the policy.

- Media support was important in getting the policy accepted by the public, but public interest may decrease as the newness of the policy fades. Future interventions may want to build in some kind of ongoing support for policy implementation.

- The evidence of the effect of the policy on exposure to secondhand smoke was weak. Stronger evaluation designs would help strengthen the statements that can be made about the impact of intervention activities. For example, designs could be strengthened by including data on exposure to secondhand smoke in entryways in the comparison cities, gathering information on the process of implementation from other stakeholders, such as business leaders, and conducting a post-intervention public opinion survey to measure public awareness of the new policy.

This project shows that city councils are open to adopting and implementing policies that ban smoking within 25 feet of doorways, open windows, and intake vents. According to the key informant interviews, the intervention activities used in the project can be influential in getting these policies passed. Future work should focus on educating other local governments about smoke-free entrance policies. The lessons learned from this project would be useful in accomplishing this goal.
Your evaluation report is to include two components that are not included in this sample report. First, any sources that you cited should be included in a list of references at the end of the report. Second, the data collection instruments used in the evaluation should be attached to the report. In addition, copies of ordinances, photos of signs, or other documentation of the results of the project can be added as additional appendices.
Appendix B - Rating Form

Final Evaluation Report Rating Form

<table>
<thead>
<tr>
<th>Project Name:</th>
<th>Auto Fill by Online Tobacco Information System (OTIS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indicator or Asset:</td>
<td>Auto Fill by OTIS</td>
</tr>
<tr>
<td>Contract #:</td>
<td>Auto Fill by OTIS</td>
</tr>
<tr>
<td>Contract Term:</td>
<td>Auto Fill by OTIS</td>
</tr>
<tr>
<td>Report Title</td>
<td>Date report submitted to OTIS by the Contractor</td>
</tr>
<tr>
<td>Report Reviewer:</td>
<td>Auto Fill by OTIS</td>
</tr>
<tr>
<td>Date review submitted</td>
<td>Auto fill OTIS by TCEC</td>
</tr>
</tbody>
</table>

The following scale will be used to rate the key elements of a high quality evaluation report:

0=Not addressed  1=Partially addressed  2=Fully addressed

<table>
<thead>
<tr>
<th>1. Title Page</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>■ Title of the study</td>
<td>■ Names and affiliations of report authors</td>
</tr>
<tr>
<td>■ Agency Project Director’s name</td>
<td>■ Date of submission to TCS</td>
</tr>
<tr>
<td>■ Current agency name, mailing address, email address, phone number and FAX number</td>
<td>■ TCS contract # and contract period</td>
</tr>
<tr>
<td>■</td>
<td>■ DHS attribution</td>
</tr>
<tr>
<td>■</td>
<td>■ Suggested citation</td>
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</table>

<table>
<thead>
<tr>
<th>2. Abstract: One to two pages, summarizing the following information:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>■ Statement of objective and indicator/asset number</td>
<td>0 1 2</td>
</tr>
<tr>
<td>■ Project description, including project context and rationale; and intervention setting(s), target(s), and activities</td>
<td>0 1 2</td>
</tr>
<tr>
<td>■ Evaluation methods, including study design, sample selection and size, and data collection procedures</td>
<td>0 1 2</td>
</tr>
<tr>
<td>■ Main results</td>
<td>0 1 2</td>
</tr>
<tr>
<td>■ Conclusions and recommendations</td>
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</table>

<table>
<thead>
<tr>
<th>3. Project Description</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Background</td>
<td>0 1 2</td>
</tr>
<tr>
<td>■ Brief description of project context, including relevant aspects of the political/historical background, geographical considerations, and social norms/attitudes around tobacco control of the community in which the intervention took place</td>
<td>0 1 2</td>
</tr>
<tr>
<td>Objective</td>
<td>0 1 2</td>
</tr>
<tr>
<td>■ Clear statement of objective and indicator/asset number</td>
<td>0 1 2</td>
</tr>
<tr>
<td>■ Logical connection between project context and rationale for choosing the objective</td>
<td>0 1 2</td>
</tr>
<tr>
<td>Intervention</td>
<td>0 1 2</td>
</tr>
<tr>
<td>■ Intervention activities, including any changes in planned activities that took place during the implementation of the program</td>
<td>0 1 2</td>
</tr>
<tr>
<td>■ Intervention target(s) (who or what the activities are designed to influence or change)</td>
<td>0 1 2</td>
</tr>
<tr>
<td>■ Project setting (the specific locations where the intervention activities took place)</td>
<td>0 1 2</td>
</tr>
</tbody>
</table>

Rater Comments for sections 1-3:
### 4. Evaluation Methods

**Evaluation design**
- Type of design (experimental, quasi-experimental, or non-experimental)
- Reason for selecting the design used
- # of times data are collected, when data are collected (pre-tests, during the intervention, and/or post-tests), # of groups compared (if any), and whether activities varied by group
- Any limitations to the design as a way to assess the intervention process and/or outcome

**Sample(s) from which data were collected**
- The population (could be people, places, times, etc.) from which sample was drawn
- The process used to select the sample
- Sample size
- Response rate (if appropriate, such as for the Youth Tobacco Purchase Survey)
- Any limitations of the sample (e.g., small sample size, low response rate, or use of a convenience sample)

**Data collection instruments and procedures**
- The type and source of the data collection instrument
- Who collected the data, what training was provided to the data collectors, and where and when data were collected
- Limitations of data collection procedures (such as inability to collect data as planned, sources of bias in data collection instruments)
- If appropriate, sample copies of all data collection instruments are attached to the report. Unmodified standardized instruments need not be attached. For unstructured instruments, the topics covered should be described as part of the type and source of the instrument.

**Data analysis:** The description of data analysis is sufficiently detailed for a reader to assess whether the analysis approach was appropriate for the type of data collected (e.g., content analysis of qualitative data, statistical tests of significance or descriptive statistics for quantitative data).

### 5. Evaluation Results

- Details of the main evaluation findings are clearly and logically presented in a narrative summary. This may involve descriptive or inferential statistics, the results of content analysis, or other kinds of analyses. Tables and figures are used when appropriate and are clearly labeled.
- Presentation of evaluation findings is objective and includes relevant negative and positive findings.

### 6. Conclusions and Recommendations

- Findings of outcome evaluation are discussed in terms of whether they suggest or demonstrate that intervention activities led to the achievement of the stated objective. Findings of process evaluation describe the strengths and weaknesses of the intervention activities, and/or other aspects of the implementation of the intervention.
- Conclusions do not go beyond what the data can support, given any limitations of the evaluation methods. (For example, if the sample is a convenience sample, conclusions should not be drawn about the population as a whole.)
- Based on the process of implementing the project and on the evaluation results, recommendations for future work in tobacco control around this and similar objectives are provided.

**Rater Comments for sections 4-6:**
GUIDELINES FOR PREPARING A COMPLETE, HIGH QUALITY FINAL EVALUATION REPORT

Total score: ________ (out of 32 possible points)
Rating: _____ High (32-24)  _____ Medium (23-16)  _____ Low (15-0)

Overall Assessment:
Would you recommend this report to someone interested in:
1) The intervention activities used for the objective? _____ Yes  _____ No  _____ Maybe
2) The evaluation used for the type of objective? _____ Yes  _____ No  _____ Maybe
Appendix C - Final Evaluation Report Checklist

Checklist for Final Evaluation Reports (for Primary Objectives)

1. **Title Page**
   - Title of the study
   - Agency Project Director’s name
   - Current agency name, mailing address, email address, phone number and FAX number
   - Names and affiliations of report authors
   - Date of submission to TCS
   - TCS contract # and contract period
   - DHS attribution
   - Suggested citation

2. **Abstract** *(One to two pages)*
   - Statement of objective and indicator/asset #
   - Project description, including project context, rationale, and intervention setting(s), target(s), and activities
   - Evaluation methods, including study design, sample selection and size, and data collection procedures
   - Main results
   - Conclusions and recommendations

3. **Project Description**
   - Brief description of project context (relevant political/historical background, geographical considerations, and social norms/attitudes around tobacco control in the community)
   - Statement of objective and indicator/asset #
   - Rationale for the chosen objective stated, logically linking the objective to the project context
   - Intervention activities, including any changes in planned activities that took place during the implementation of the program
   - Intervention target(s) *(who or what the project was designed to influence or change)*
   - Project setting *(specific locations where the intervention took place)*

4. **Evaluation Methods**
   - *Evaluation design*
     - Type of design (experimental, quasi-experimental, or non-experimental) and reason for selecting the design
     - Details of the design (# of times data are collected, when data are collected (pre-tests, during the intervention, and/or post-tests), # of groups compared (if any), and whether activities varied by group)
     - Limitations of the design in assessing the process or outcome of the intervention
   - *Sample(s) from which data were collected*
     - The population (could be people, places, times, etc.) from which the sample was drawn
     - The process used to select the sample
     - Sample size and, if appropriate, response rate
     - Limitations to the sample (e.g., small sample size, low response rate, or use of convenience sample)
Data collection instruments and procedures
☐ The type and source of the data collection instrument
☐ Data collection procedures (including who collected the data, what training was provided for data collectors, and where and when data were collected)
☐ Limitations of data collection procedures (e.g., inability to collect data as planned, sources of bias in data collection instruments)
☐ Sample copies of data collection instruments attached to the report, except as described in the “Required Elements” section of the guide

Data analysis
☐ Description of how the evaluation data were analyzed

5. Evaluation Results
☐ Clear, logical narrative summary of main evaluation findings
☐ Use of tables and figures when appropriate (clearly labeled)
☐ Objective presentation of evaluation findings, including relevant negative as well as positive findings

6. Conclusions and Recommendations
☐ Discussion of whether the outcome evaluation findings indicate that intervention activities led to the achievement of the stated objective; or, for process evaluation, the strengths and weaknesses or aspects of the implementation of the intervention activities
☐ Conclusions appropriately qualified, given any limitations of the evaluation methods
☐ Recommendations for future work in tobacco control

7. Citations
☐ List of sources for any references made in the body of the report to relevant theories, research, or data from sources other than the evaluation being described
Appendix D - Brief Evaluation Report Checklist

Brief Evaluation Report Checklist (for Non-Primary Objectives)

Suggested length: Three pages, plus the title page.

1. Title Page
   - Title of the study
   - Agency Project Director’s name
   - Current agency name, mailing address, email address, phone number and FAX number
   - Names and affiliations of report authors
   - Date of submission to TCS
   - TCS contract # and contract period
   - DHS attribution

2. Brief Report
   - Brief description of the project context – i.e., relevant aspects of the community’s:
     - Political/historical/geographical background
     - Social norms/attitudes around tobacco control
   - Statement of objective and indicator/asset number
   - Brief description of the rationale for choosing the objective
     - Why the objective was selected: logical connection made with project context
   - Overview of the intervention activities
     - What the activities were and where they took place
     - Who or what the activities were designed to influence or change
   - Brief description of the evaluation design
     - Whether it was non-experimental, quasi-experimental, or experimental
     - Sample selection and size
     - Instrument(s) and procedures used for data collection
     - How data were analyzed (i.e., content analysis of qualitative data, descriptive statistics and/or statistical tests of significance of quantitative data)
   - Synopsis of main evaluation findings
     - Results of data analysis presented in a brief narrative or in a table or figure
   - Conclusions and recommendations
     - The extent to which the findings indicate achievement of the objective, in light of any limitations in the intervention or evaluation methods
     - What was learned that might be useful for others working on similar objectives