House District		
Senate District		

THE TWENTY- FOURTH LEGISLATURE

Log No: 36-0

Senate District	TE LEGISLATURE	7 30-0
APPLICATION FOR	GRANTS & SUBSIDIES	For Legislature's Use Only
UNAPIER TAI , I IAT	VAI'I REVISED STATUTES	
Type of Grant or Subsidy Request:		
☐ GRANT REQUEST — OPERATING ☐ GRANT I	REQUEST - CAPITAL SUB	BSIDY REQUEST
"Grant" means an award of state funds by the legislature, be activities of the recipient and permit the community to bene		ipient, to support the
"Subsidy" means an award of state funds by the legislature appropriation, to reduce the costs incurred by the organization members of the public.	, by an appropriation to a recipient so tion or individual in providing a servic	pecified in the se available to some or all
"Recipient" means any organization or person receiving a g	grant or subsidy.	
STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST ((LEAVE BLANK IF UNKNOWN):	
STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNOWN):		
1. APPLICANT INFORMATION:	2. CONTACT PERSON FOR MATTERS APPLICATION:	S INVOLVING THIS
Legal Name of Requesting Organization or Individual: Coalition for a Tobacco-Free Hawaii	Name <u>DEBORAH ZYSMAN</u>	
Street Address:1500 S. Beretania St. #309	Title Executive Director	· .
Honolulu, HI 96826	Phone # 808-946-6851 X203	
Mailing Address: same	Fax # <u>808-946-6197</u>	
	e-mail <u>Deborah@tobaccofreehawai</u>	ali.org
3. Type of business entity:	7. DESCRIPTIVE TITLE OF APPLICAN	-
Non profit Corporation For profit Corporation Limited Liability Company Sole Proprietorship/Individual	Community education, outreach and prevention and control. Efforts focus and underserved populations; reductions and creating healthier neighborhood	sused on reaching rural ucing health care costs; ods.
4. FEDERAL TAX ID #:	8. FISCAL YEARS AND AMOUNT OF S	STATE FUNDS REQUESTED:
5. STATE TAX ID #: 6. SSN (IF AN INDIVIDUAL):		
	FY 2008-2009 \$ _400,000	<u></u>
9. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:		
	PECIFY THE AMOUNT BY SOURCES OF FU I THE TIME OF THIS REQUEST:	JNDS AVAILABLE
·	STATE \$_0 FEDERAL \$_0	_
	COUNTY \$0_	- -
	PRIVATE/OTHER \$_198,078	
TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:		
	- 10	31/08
AUTHORIZED SIGNATURE DEBORAH ZYSMAN NAN	EXEC. DIRECTOR	51 O O DATE SIGNED

Application for Grants and Subsidies

I. Background and Summary

1. A BRIEF description of the applicant's background;

The Coalition for a Tobacco-Free Hawaii (Coalition) is the only independent organization in the islands whose sole mission is to reduce tobacco use through education, community systems change and advocacy. The Coalition provides leadership and professional development for the tobacco control community, develops networks, coordinates tobacco control programs and builds community awareness. The Coalition works to improve the quality of life in Hawaii by preventing death and disease from tobacco use and exposure.

The goal of the Coalition is to create a healthier community for our residents to live, work and play. We are supported by the community—more than 2,500 organizations and individuals, who are all working together to eliminate the negative impact tobacco has on the health of our community.

Mission: The mission of the Coalition for a Tobacco-Free Hawaii is to sustain and enhance a statewide association of organizations and individuals committed to working together for the reduction of tobacco use and the creation of a tobacco-free environment in Hawaii.

Vision: Our vision is a Hawaii where death and disability from tobacco use or exposure is no longer a major public health concern.

Focus: The Coalition focuses on three components that are important to meeting Hawaii's tobacco control goals. These components are:

- Community policy and social norms change in tobacco control. To educate
 the public and policy makers about sound tobacco control policy. To build the
 capacity of the tobacco control community to pass and implement policy changes
 that reduce tobacco use.
- 2) **Network development.** To increase coordination, collaboration and communication in tobacco control to maximize existing resources.
- Community capacity building. To build the knowledge and skills of the tobacco control community and engage more people and organizations in tobacco control through training, technical assistance, resources and tools.

Guiding Principles: The Coalition uses these guiding principles in all of its work:

- 1) Include diverse population groups in all aspects of our work;
- 2) Collaborate with other organizations and agencies to achieve the common goal of a healthy tobacco-free Hawaii; and

3) Assure that our efforts are based on available scientific evidence and evaluated appropriately.

History: The Coalition for a Tobacco-Free Hawaii was formed in 1996 as a grassroots effort between many organizations who believed that tobacco use is a complex community issue that must be addressed collaboratively. Founders included American Heart Association, American Cancer Society, Cancer Research Center of Hawaii, American Lung Association and the Hawaii State Department of Health and Education. For the first ten years, the Coalition operated under the fiscal sponsorship of the American Cancer Society (ACS.) However, in many ways the Coalition operated as a stand-alone program. In early 2006, the Coalition's governing board decided to separate from American Cancer Society. The Coalition for a Tobacco-Free Hawaii incorporated in 2006 and was granted 501(c)(3) non-profit status by the IRS in 2007.

Recent Accomplishments:

- Spearheaded the passage and implementation of Hawaii's Smoke-Free Law designed to protect people from secondhand smoke while at work and in most public places.
- Coordinated the development of a statewide strategic plan to reduce tobacco use in Hawaii from 2005-2010. Involved over 40 organizations and 150 individuals in the planning process.
- Brought national attention to new "Kauai Kolada" pineapple flavored cigarettes being marketed to children and had the product discontinued.
- Passed legislation requiring retail outlets to have a permit to sell tobacco products to ensure that they are kept away from children
- Provided an annual calendar of trainings to professionals and the community to improve the quality of tobacco prevention and cessation services in Hawaii.
- Created and continue to support six local tobacco-prevention hui: Maui, Kauai, Hawaii (East and West), Oahu and Molokai.

2. The goals and objectives related to the request;

GOAL I. ADDRESSING TOBACCO CONTROL IN DISPARATE & UNDERSERVED POPULATIONS

Native Hawaiians, Filipinos, young women, Medicaid beneficiaries, the mentally ill, those living in small, relatively isolated neighborhoods, and those of low socioeconomic status are some of the most underserved populations in tobacco control in Hawaii. This disparity is true for both the direct use of tobacco and in secondhand smoke exposure. The Coalition focuses efforts to address these disparities.

OBJECTIVES

- Provide financial and technical support to local tobacco-free hui (groups) that are focused on serving the health and wellness needs of priority populations.
 These groups work to increase access to and quality of tobacco prevention and cessation services in hard-to-reach communities.
- Increase access to tobacco prevention and cessation services for Hawaii Medicaid recipients.
- Increase access to tobacco cessation treatment for those people with mental illnesses.
- Increase the number of voluntary smoke-free policies in public housing.

GOAL II. REDUCING THE FINANCIAL BURDEN OF TOBACCO

The cost of tobacco use in Hawaii affects private business, home owners, government, and tax payers. The Coalition is planning and implementing programs that help to reduce the costs of the negative health effects of tobacco, as well as the costs incurred from secondhand smoke exposure. Ultimately, whether cost is incurred in a private or public forum, the state economy suffers.

OBJECTIVES

- Increase the number of businesses statewide that provide and promote tobacco cessation health care benefits to their employees.
- Work with health insurance carriers to increase reimbursement of tobacco cessation benefits.
- Increase access to tobacco prevention and cessation services for Hawaii Medicaid recipients.

GOAL III. CREATING HEALTHY NEIGHBORHOODS

Neighborhoods of people are affected every day by tobacco use. The use of tobacco hurts neighborhoods by direct use by its citizens, but also by exposing our neighbors to harmful secondhand smoke. The Coalition seeks to expand prevention and cessation

programming through aggressive support of local efforts to reduce tobacco use and secondhand smoke exposure, neighborhood by neighborhood.

OBJECTIVES

- Increase the skills and knowledge of tobacco control stakeholders to plan, implement and evaluate neighborhood tobacco control programming and policy.
- Build, develop, and support neighborhood based leadership in tobacco control.
- Increase capacity of local tobacco-free hui to change local policies and social norms.
- Increase the number of smoke-free condominiums, apartments, public housing, and other multi-unit dwellings in Hawaii.
- Increase the number of local level tobacco-free policies and practices such as tobacco free beaches, parks and recreation sites, and sports events.
- Increase the number of youth programs, athletic teams, clubs, churches and other community groups that have tobacco-free policies and practices.
- Remove barriers to access for proven cessation products and services in hard to reach neighborhoods.
- Expand a coordinated system of training and technical assistance to build the capacity and skills of tobacco control providers at the State and local level.

3. State the public purpose and need to be served;

Tobacco use is still the number one cause of death and disability in Hawaii. Sadly, it is still rare to encounter anyone in Hawaii who has not lost a family member from tobacco use. Tobacco use costs us the lives of loved ones and places an enormous burden on our economy. Certain groups in Hawaii continue to be the most disadvantaged with regard to the negative health effects of tobacco. These disparately impacted populations include: Native Hawaiians, youth, persons with respiratory illnesses (asthma, cardio obstructive pulmonary disease, etc), the mentally ill, and those of low socioeconomic status. There is an urgent need to expand the current capacity and resources statewide to increase access to comprehensive, evidence-based tobacco prevention and cessation services to these populations. In many cases, the expansion of existing organizations and programming can facilitate increased health outcomes and decrease the financial burden of tobacco use in these disparate populations. However, in other cases, new programming, such as smoke-free homes and business outreach, is necessary to bring about long-term positive health outcomes and cost savings statewide.

THE PROBLEM OF TOBACCO IN HAWAII

<u>Tobacco use remains a major health issue for Hawaii's diverse people.</u> Each year more than 1,200 people die of smoking related illnesses in our state. In addition, almost one-half a billion dollars is spent in Hawaii annually on healthcare and lost productivity

due to tobacco use.¹ The Hawaii Department of Health reports that 17.5% of adults² and nearly 15.4% of all high school students³ in Hawaii smoke cigarettes. Socioeconomics and ethnicity influence whether a Hawaii resident smokes or is exposed to secondhand smoke. In 2005, smoking prevalence was 27.9% for Native Hawaiians, compared to 17.6% for Caucasians, and 14.2% for Filipinos.⁴

In Hawaii, there are an estimated 50,000 residents that suffer from severe, persistent mental illness, and 170,000 that suffer from other mental illnesses that are considered less severe. Evidence shows that this population suffers the highest rates of smoking in the state. Currently, there are no dedicated tobacco cessation services for the mentally ill.⁵

Approximately 48% of current adult smokers have a household income of less than 25,000. In 2006, the health care cost of tobacco use in Hawaii was \$336 million. 1 It is estimated that 26% of Medicaid recipients are current smokers and Hawaii Medicaid spends \$117 million dollars on smoking attributable expenditures each year. Hawaii tax payers pay an estimated \$622 dollars per household each year, whether they smoke or don't smoke. Lost productivity caused by smoking cost the state more than \$300 million in 2006. Access to services to help people quit smoking is still limited in Hawaii.

Exposure to secondhand smoke is also a serious health concern. In June, 2006, a comprehensive scientific report was issued by the U.S. Surgeon General Richard H. Carmona. The report states

- The health effects of secondhand smoke exposure are more pervasive than we previously thought.
- The scientific evidence is now indisputable: secondhand smoke is not a mere annoyance. It is a serious health hazard that can lead to disease and premature death in children and non-smoking adults.
- And concludes that there is no risk-free level of exposure to secondhand smoke.
 Secondhand smoke exposure is linked to heart disease and lung cancer in non-smoking adults and is a known cause of sudden infant death syndrome (SIDS), respiratory problems, ear infections, and asthma attacks in infant and children.

It is estimated that 140,000 Hawaii residents are at risk for secondhand smoke exposure inside the home. A 2005 study completed by the California Environmental Protection Agency found that secondhand smoke not only exacerbates, but also causes asthma in children. Of those at risk, an estimated 40,000 (14%) are children

¹ Campaign for Tobacco Free Kids Report on State Tobacco-Related Costs and Revenues found at http://tobaccofreekids.org/research/factsheets/pdf/0178.pdf

² Hawai'i State Department of Health, Behavioral Risk Factor Surveillance Survey, 2006.

³ Hawai'i Department of Health, Hawai'i Youth Tobacco Survey, 2006.
4 Hawai'i State Department of Health, Behavioral Risk Factor Surveillance Survey, 2006.

⁵ Lasser K, Boyd JW, Woolhandler S. Himmelstine DU, McCormick D, Bor DH. Smoking and mental illness: A population-based prevalence study, *JAMA*. 200;284:2606-10

⁶ The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General, June 27, 2006

⁷ 2003 Hawaii Behavioral Risk Factor Surveillance System, Hawaii State Department of Health

⁸ Proposed Identification of ETS as a Toxic Air Contaminant, California Environmental Protection Agency, June 24, 2005

under the age of 18. More than half of those at risk for exposure to toxic secondhand smoke live in homes with no rules about smoking.⁹

4. Describe the target population to be served

The target population for this grant is those underserved by current tobacco control efforts and those most impacted by tobacco use. In 2008-2009 the Coalition will continue its work to eliminate the tobacco related disparities both in health and health care access. The primary populations will be: Native Hawaiians, Filipinos, Medicaid beneficiaries, the mentally ill, those living in rural areas, and those of low socioeconomic status. To achieve these goals, the Coalition works with local agencies, organizations, businesses and community members. The Coalition does not provide direct services, but rather works to build the capacity of our community to ensure that our children don't begin to smoke and help smokers to quit.

5. Describe the geographic coverage.

The Coalition for a Tobacco-Free Hawaii serves the entire State of Hawaii. The Coalition's main office is based in Honolulu, with financial and management support to local tobacco-free groups on Kauai, Maui, Molokai, the Big Island (both Hilo and Kona) and rural Oahu.

^{9 2005} Hawaii Youth Tobacco Survey, Hawaii State Department of Health

II. Service Summary and Outcomes

1. Describe the scope of work, tasks and responsibilities;

SCOPE OF WORK:

1. Make it Your Business Campaign

This campaign is working to increase the numbers of Hawaii employers who provide and promote tobacco cessation benefits to their employees.

The Coalition has developed step-by-step tools and resources to help business achieve a tobacco-free workforce. The three-year campaign 2007-2010 will work to:

- Educate businesses through outreach, earned media and paid media about the benefits to employers who provide and promote comprehensive tobacco cessation benefits to their employees
- Provide technical support to employers interested in adopting and promoting a new tobacco cessation benefit for their employees.

2. Hawaii Smoke-Free Homes Initiative

The goal of this initiative is to increase the number of smoke-free multi-unit (condos/apartments) dwellings and public housing in Hawaii to reduce exposure to secondhand smoke. This is a multi-organizational effort to assist landlords, public housing boards, associations, owners and residents to create voluntary smoke-free policies in their buildings or property. This campaign works to educate the community about the dangers of secondhand smoke in the home and to dispel myths about smoke-free policies. This statewide initiative is using a website www.hawaiismokefreehomes.org, marketing tools and extensive public relations to reach out to communities interested in creating smoke-free homes. The website includes basic tobacco and health information, legal support for smoke-free policies in homes, sample policies; personal stories of others who have created smoke-free homes, and more.

In 2008-2009 the Coalition will focus on media, outreach, public relations and trainings for landlords, tenants, realtors, and housing advocates. The Coalition will provide a statewide conference on smoke-free homes and workshops on neighbor islands.

3. Creating Healthy Communities Initiative

The *Creating Healthy Communities Initiative* gives neighborhood groups the information and tools they need to create simple tobacco-free changes in their community. Examples of these changes include: making a playground or park a tobacco-free zone, or designating youth sports events tobacco-free. These simple changes send clear messages that tobacco use is not a behavior that is condoned where families and young people congregate. The initiative uses a toolkit and hands on trainings to give neighborhood groups the skills and resources to

make healthy changes. The toolkit includes model tobacco-free policies, tobacco-free signage, assessment tools to scan community issues, sample media materials such as a letter to the editor, and step-by-step checklists to making local changes.

4. Increasing access to tobacco cessation treatment among Medicaid recipients In 2008, the Coalition will begin to work with the State Department of Human Services to expand current Medicaid (QUEST) coverage to include all forms of tobacco cessation counseling as well as all forms of pharmacotherapy for all of Hawaii's 200,000+ beneficiaries. Research shows that smokers are 2-3 times more likely to successfully quit when they utilize some type of tobacco cessation treatment. The Coalition will work with the Department of Human Services (DHS) to adopt and implement an expanded benefit. The Coalition will then help DHS to conduct outreach and educate practitioners, clinicians and beneficiaries about the available resources and benefits of tobacco cessation services. In particular, the services will be promoted to facilities serving those with mental health and other substance abuse issues since they have the highest tobacco use rates.

In 2008-2009, the Coalition will also conduct an assessment of the cessation services currently being provided in healthcare systems in Hawaii to address gaps in the future.

5. Increase access to tobacco cessation treatment among the mentally ill, dually-diagnosed, and substance use population

The Coalition proposes a 2008-2009 pilot project to plan, implement, monitor, research and evaluate a comprehensive smoking cessation and wellness program within the mental health system on Oahu. This program adapts the New Jersey Division of Mental Health Services- comprehensive smoking cessation program, "Learning about Healthy Living – Tobacco and You" as a pilot project for use in Oahu outpatient mental health clinic's and clubhouse settings. The Coalition will work with the Hawaii Department of Health's Adult Mental Health Division, the Queen's Hospital's Queen's Counseling Services, and the U.H. Medical School (JABASOM) to implement and research this pilot project. The project will evaluate the barriers to tobacco cessation services in this population, the effectiveness of current efforts, and the long-term sustainability of such programming. It is believed that this model will be effective and sustainable on Oahu and then be expanded for statewide implementation.

6. Building a strong tobacco prevention community in Hawaii

Local Tobacco-Free Hui

The Coalition supports six local tobacco-free hui (groups) across the state: Maui, East and West Hawaii, Kauai, Molokai and rural Oahu. These local hui build networks of

people, agencies, and organizations on each of the islands to ensure that those communities are fully involved in tobacco control work and implementing best practices.

At the local level, groups and organizations can effectively change local laws and policies. The Coalition will provide local hui with funds and technical support to initiate local changes. Some examples of possible local initiatives include: tobacco-free beaches and parks, restrictions on tobacco marketing in certain neighborhoods and improving access to cessation services for the local community.

<u>Professional Development Trainings</u>

The Coalition implements a calendar of trainings each year in order to have a strong tobacco control system in Hawaii. The Coalition provides trainings in partnership with other community agencies including the Department of Health, Cancer Research Center of Hawaii, Coalition for a Drug-Free Hawaii and the University of Hawaii. Examples of training areas include:

- Tobacco Control 101
- Best Practices in Tobacco Control Programs
- Tobacco Treatment Specialist training and certification
- Effective Strategies for Working with Diverse Communities
- Leadership and Group Facilitation Skills Training

The specific trainings to be offered in 2008-2009 will be determined based on an assessment of the community needs that will be conducted in Spring 2008.

2. The applicant shall provide a projected annual timeline for accomplishing the results or outcomes of the service;

Most initiatives of the Coalition are long-range, multi-year projects that involve systems change to make Hawaii a healthier State.

See attached timeline (Attachment A)

 The applicant shall describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; and

All Coalition initiatives are evaluated using both process and outcome measures. See the Evaluation logic model for more detail. Faculty and students at the University of Hawaii Department of Public Health, the Cancer Research Center of Hawaii as well as Epidemiologist at the Hawaii State Department of Health are involved in evaluation design, data collection and analysis.

4. The applicant shall list the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.

See Attachment B

III. Financial

Budget

1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.

Please note the following about the attached budget:

- 1) Funds from the Tobacco Prevention and Control Trust Fund are listed in column b. to give a complete picture of our overall operating budget. Funds from the Tobacco Prevention and Control Trust Fund are *not* used for the projects (including staff time) detailed in this request with the exception of funding for the local tobacco-free hui.
- Funds from the HMSA Foundation are specifically to support the "Make it Your Business" campaign.
 - 2. The applicant shall provide its anticipated quarterly funding requirements for the fiscal year 2008-2009.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
100,000	100,000	100,000	100,000	400,000

IV. Experience and Capability

A. Necessary Skills and Experience

The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the request. State your experience and appropriateness for providing the service proposed in this application. The applicant shall also provide a listing of verifiable experience of related projects or contracts for the most recent three years that are pertinent to the request.

The Coalition has been conducting the types of work proposed in the request for over a decade. The staff and volunteer leadership have extensive experience coordinating and leading complex projects for systems change that involve many people and agencies (see accomplishments in section I).

The Coalition's Board of Directors is a very active "working Board" with Directors serving on workgroups with many Board members playing leadership roles in Coalition programs. The Board provides strategic oversight to all of the Coalition's activities. Board members bring many skills and talents to the organization and professionally include lawyers, a physician, a CPA, a University of Hawaii professor whose expertise is public health evaluation. Several Board members have extensive work experience in tobacco prevention and control both in Hawaii and in other States. A listing of the current Board of Directors is attached. The Coalition's dedicated staff is one of its greatest strengths with skills spanning the public health, legal and mediation sectors. Additionally, as a "coalition" our focus is to bring the experts to the table to achieve the goals.

The Coalition has a proven record delivering on both large and small grants and contracts. Until 2007, the Coalition was a program under the American Cancer Society. In 2007, the Coalition had a contract with the Hawaii Department of Health/Tobacco Prevention and Control Trust fund for \$500,000 and grants with both the American's for Non-smoker's Rights Foundation and the HMSA Foundation for \$50,000 each, as well as numerous smaller grants and contracts.

The Coalition became an independent non-profit in 2007. The organization's first independent financial audit will be performed in May 2008.

B. Facilities

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the request. If facilities are not presently available, describe plans to secure facilities. Also describe how the facilities meet ADA requirements, as applicable.

The Coalition maintains a small office in Honolulu. Contractors for the neighbor islands work from independent business and home offices. The Coalition office building meets ADA requirements. No new facilities are required for this proposal to be implemented.

V. Personnel: Project Organization and Staffing

A. Proposed Staffing, Staff Qualifications, Supervision and Training

The applicant shall describe the proposed staffing pattern and proposed service capacity appropriate for the viability of the request. The applicant shall provide the qualifications and experience of personnel for the request and shall describe its ability to supervise, train and provide administrative direction relative to the request.

The Staffing for the Coalition is as follows:

Executive Director – 1.0 FTE. Deborah Zysman, MPH has been with the Coalition since 2003. As the Executive Director, Deborah is responsible for coordinating the overall operations of the Coalition including staff management and supervision, administration, strategic plan development/execution, fund development and fiscal management and outreach to partner/potential partner organizations. Deborah provides strategic advice, issue analysis, and technical assistance to the Board of Directors. She maintains strong working relationships with state and local government entities, allied organizations, state and local policy and opinion makers and Coalition members. Deborah brings extensive experience in coalition building, community development, program planning, and coordination of technical assistance and network development.

Assistant Director – 1.0 FTE. The Assistant Director of the Coalition oversees the grants and programs for the Coalition and is the contract manager for the local tobaccofree hui. The Assistant Directors is responsible for coordinating the Coalition's training and technical assistance programs, building capacity in tobacco control, strategic plan development/execution, and outreach to partner/potential partner organizations. S/he also supports the Director in the general operations of the Coalition including, budget management, and fund development.

Policy Director -- 1.0 FTE. George Massengale, JD is the Coalition's Policy and Advocacy Director. He is responsible for working with the Coalition's member organizations, the community coalitions, and individuals to increase statewide grassroots advocacy capacity. He is also responsible for the coordination, development and implementation of strategic plans and campaigns to advocate for and implement statewide tobacco control initiatives and policy changes. He coordinates grassroots advocacy training statewide, and provides opportunities for coalition members to advocate for tobacco control issues. In addition to having a law degree, he brings extensive experience in health advocacy with Community Health Centers and previously worked to improve health care access for seniors.

Community Health Specialist – 1.5 FTE. Ian Kealli Custino M.S. and Maria Reyes are the Community Health Specialists. Ian coordinates the Smoke-Free Homes Initiative and Maria coordinates the Make it Your Business Campaign. They are responsible for organizing and coordinating workshops and trainings in tobacco control, responding to technical assistance requests from tobacco control providers, and maintaining up to date resources related to tobacco control. Both have an extensive background in group facilitation, conflict resolution and mediation. They work to provide technical assistance to the local coalitions, coordinate training, technical assistance, and convening of coalition meetings.

Project Specialist -- 1.0 FTE. Diane Lobre, provides administrative support for the Coalition staff and the Coalition. As Project Specialist, she manages and oversees all administrative functions and community events of the Coalition. This includes coordinating logistics of Coalition meeting and trainings, maintaining the Coalition listservs and database. She has been instrumental in coordinating logistics for technical trainings and special meetings. She brings experience, knowledge and ability to handle logistics for large or small group conferences.

Administrative Assistant- 1.0 FTE The Administrative Assistant provides administrative support for the Coalition staff and the Coalition. She assists with the maintenance of the Coalition listservs and database, coordinates logistics of Coalition meetings, trainings, and handles day-to-day office and administrative details.

B. Organization Chart

The applicant shall illustrate the position of each staff and line of responsibility/supervision. If the request is part of a large, multi-purpose organization, include an organizational chart that illustrates the placement of this request.

See Attachment C

VI. Other

A. Litigation

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgment. If applicable, please explain.

N/A

B. Licensure or Accreditation

Specify any special qualifications, including but not limited to licensure or accreditation that applicant possesses relevant to this request.

N/A

BUDGET REQUEST BY SOURCE OF FUNDS

(Period: July 1, 2008 to June 30, 2009)

Applicant: Coalition for a Tobacco-Free Hawaii

	BUDGET	Total State	Tobacco Trust	HMSA Foundation	Donations and oth
(CATEGORIES	Funds Requested		, ,	
┡	 -	(a)	(b)	(c) ,	(d)
A.	PERSONNEL COST			Ĭ	ŀ
	1. Salaries	108,435	150,000	15,000	13,065
	2. Payroll Taxes & Assessments	7,000	8,000	700	700
	3. Fringe Benefits	21,687	30,000	3,000	2,613
	TOTAL PERSONNEL COST	137,122	188,000	18,700	16,378
В.	OTHER CURRENT EXPENSES				
	1. Airfare, Inter-Island & Mainland & other Travel (gas, auto)	10,000	22,000	500	5,000
	2. Insurance	1,000			2,500
	3. Lease/Rental of Equipment	1,500	1,000		500
	4. Lease/Rental of Space	10,000	18,000		3,000
	5. Staff Training	8,000	0		2,000
	6. Supplies	3,378	5,000	1,000	2,000
	7. Telecommunication	2,000	7,200		500
	8. Utilities	0	0	0	0
	9. Printing, Web Design and Communication	50,000	13,000	7,000	2,000
	10. Surveys and reports	10,000			4,000
	11. Professional Trainers	17,000			5,000
	12. Meetings, Events and Trainings	30,000	10,000	6,000	8,000
	13. Contract for Evaluation (UH Public Hea	20,000	0	2,000	
	14. Contract for Public Relations	30,000	0	9,000	3,000
	15. Contracts - local tobacco-free hui	70,000	90,000		10,000
	16				-
	17				
	<u>18</u> 19			····	,
	20				
	TOTAL OTHER CURRENT EXPENSES	262,878	166,200	25,500	47,500
О.	EQUIPMENT PURCHASES	0	0	0	0
D.	MOTOR VEHICLE PURCHASES	0	0	0	0
Ε	CAPITAL				
TO	TAL (A+B+C+D+E)	400,000	354,200	44,200	63,878
			Budget Prepared I	Bv:	
ടവ	URCES OF FUNDING		_ :-3 (opensor)	- , -	
	(a) Total State Funds Requested	400,000	Dahasah 7		040 0054
			Deborah Zysman Name (Places fund or n		946-6851 Phone
	(b) Tobacco Trust Fund	354,200			1/3/108
	c) HMSA Foundation	44,200			1 1 511 00
	(d) Other grants and donations	63,878	Signature of Authorized	Official V	Date
			Deborah Zysman I	Executive Director	
TO	TAL REVENUE	F	Name and Title (Please		
. •				-7F1 k.m.s/	•
	<u> </u>				

Page 5 Application for Grants and Subsidies

BUDGET JUSTIFICATION PERSONNEL - SALARIES AND WAGES

Applicant: Coalition for a Tobacco-Free Hawaii

Period: July 1, 2008 to June 30, 2009

POSITION TITLE		FULL TIME EQUIVALENT	ANNUAL SALARY	% OF TIME BUDGETED TO REQUEST	TOTAL SALARY BUDGETED IN REQUEST	ARY ED ST
Executive Director			\$53.000.00	%UU UC	AXB	10 800 00
Assistant Director		←	\$49.000.00	40 00%	÷ +	10,000,00
Policy Director		-	\$51,000.00	%000	÷ 45	
Community Health Specialist		1.5	\$70,500.00	67.00%	₩ ₩	47.235.00
Project Specialist			\$37,000.00	20.00%	₩	18.500.00
Administrative Assistant		_	\$25,000.00	20.00%	₩	12,500.00
					₩	1
					₩	1
					. 69	,
					· 69	,
					₩ €9	,
					€	
					€	r ·
					69	,
TOTAL:		6.5	285500.00			108.435.00
JUSTIFICATION/COMMENTS:						
This reflects the complete staffing for the Coalition for a Tobacco-Free Hawaii.	Coalition for a Tobacco-l	Free Hawaii.				

Page 6 Application for Grants and Subsidies

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Applicant: Coalition for a Tobacco-Free Hawaii

Period: July 1, 2008 to June 30, 2009

DESCRIPTION	NO. OF	COST PER	TOTAL	TOTAL
EQUIPMENT	ITEMS	ITEM	COST	BUDGETED
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TOTAL:				
JUSTIFICATION/COMMENTS:				

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TOTAL:				
JUSTIFICATION/COMMENTS:				

Page 7 Application for Grants and Subsidies

BUDGET JUSTIFICATION CAPITAL PROJECT DETAILS

Applicant: Coalition for a Tobacco-Free Hawaii

Period: July 1, 2008 to June 30, 2009

	FUNDIN	FUNDING AMOUNT REQUESTED	UESTED			
TOTAL PROJECT COST	ANY OTHER SOURCE OF FUNDS RECEIVED IN PRIOR YEARS	IRCE OF FUNDS PRIOR YEARS	STATE FUNDS REQUESTED	FUNDS	FUNDING REQUIRED IN SUCCEEDING YEARS	EQUIRED IN
	FY: 2005-2006	FY: 2006-2007	FY:2007-2008	FY:2008-2009	FY:2009-2010	FY:2010-2011
PLANS						,
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
TOTAL:	0	0	0	0	0	0
JUSTIFICATION/COMMENTS:					9	

DECLARATION STATEMENT APPLICANTS FOR GRANTS AND SUBSIDIES CHAPTER 42F, HAWAI'I REVISED STATUTES

The undersigned authorized representative of the applicant acknowledges that said applicant meets and will comply with all of the following standards for the award of grants and subsidies pursuant to section 42F-103, Hawai'i Revised Statutes:

- (1) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant or subsidy is awarded;
- (2) Comply with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
- (3) Agree not to use state funds for entertainment or lobbying activities; and
- (4) Allow the state agency to which funds for the grant or subsidy were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and assuring the proper expenditure of the grant or subsidy.

In addition, a grant or subsidy may be made to an organization only if the organization:

- (1) Is incorporated under the laws of the State; and
- (2) Has bylaws or policies that describe the manner in which the activities or services for which a grant or subsidy is awarded shall be conducted or provided.

Further, a grant or subsidy may be awarded to a non-profit organization only if the organization:

- (1) Has been determined and designated to be a non-profit organization by the Internal Revenue Service; and
- (2) Has a governing board whose members have no material conflict of interest and serve without compensation.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

Coalition for a Tobacco-Free Hawaii(Typed Name of Individual or Organization)	1. 1.0
	1/31/08
(Signature)	(Date)
Deborah Zysman(Typed Name)	Executive Director (Title)
(1) pour 1 mino)	(,

Milestone Timeline: July 2008 - July 2009

2008

<u>July</u>

Disseminate the "Creating Tobacco-Free Communities" toolkit and provide trainings on environmental change.

 The six local island hui and community organizations will receive printed and electronic copies of the toolkit

Smoke-Free Homes

- · Research Nationwide resources on smoke-free home
- · Launch media campaign and increased community outreach

Assist community-based organizations on implementing neighborhood tobacco-free policy and activities

 Develop social norms change and policy training for community-based organizations community-based organizations.

Continue meetings with Department of Human Services on increased access for Medicaid recipients

<u>August</u>

"Make It Your Business" campaign Disseminate toolkit and other materials to at least 40 businesses.

Smoke-Free Homes

- Develop educational literature on smoke-free homes issues, to include dangers of dangers of secondhand smoke, cost/benefit analysis, legal analysis, and model lease policy.
- Develop marketing plan and materials.

Create statewide committee focused on building a model for a cessation system in Hawaii.

 Research National models in infrastructure, sustainability and quality assurance for statewide tobacco control.

September

Increasing Access to Tobacco Cessation among Medicaid recipients

Conduct research on cost/benefits and disseminate/publish results

Attachment A Coalition for a Tobacco-Free Hawaii,

Begin implementation of training plan based on the annual needs.

• Contract with outside sources to provide specific training in improving outreach to disparate & underserved populations

October

Increasing Access to Tobacco Cessation among Medicaid recipients

- Hold meetings with key community and administration stakeholders
- Discuss the need for and benefits of Medicaid coverage for cessation services.

November

Provide assessments and reports on the state of tobacco control in Hawaii.

- Identify gaps in disparate & underserved populations statistics
- Contract with outside source to propose and draft a study that would focus on attaining more accurate data on disparate & underserved populations

December

Increasing Access to Tobacco Cessation among Medicaid recipients

Develop benefit language within the Medicaid coverage plan.

2009

<u>January</u>

Increasing Access to Tobacco Cessation among Medicaid recipients

 Create and disseminate informational and marketing brochures highlighting the new cessation service.

Create statewide committee focused on building a model for a cessation system in Hawaii.

Implement a statewide tobacco control gaps analysis.

February

"Creating Tobacco-Free Communities"

• The six local island hui and other organizations will be trained in implementing interventions that focus on positive outcomes for underserved populations

Attachment A Coalition for a Tobacco-Free Hawaii

Assist community-based organizations on implementing neighborhood tobacco-free policy and activities

- Provide technical assistance to community-based organizations in carrying out activities in their neighborhoods.
- Compile a statewide database of community-based organizations with interest in tobacco control
- Link community-based organizations with other organizations and agencies doing similar work, and encourage a sharing of information between them.

March

"Make It Your Business"

• Complete outreach and presentations for at least 6 business/HR gatherings

Increasing Access to Tobacco Cessation among Medicaid recipients

• Conduct a comprehensive assessment of the tobacco cessation services currently being provided in health care systems in Hawaii.

Smoke-Free Homes

 Hold a statewide smoke-free homes conference to highlight to educate the public on the benefits of the initiative.

<u>April</u>

"Make It Your Business" campaign.

Provide technical support to at least 10 businesses.

May

Develop and implement the "Creating Tobacco-Free Communities" toolkit and provide trainings on environmental change.

- Provide support and technical assistance to extend outreach of the six local island hui into hard to reach, rural areas in Hawaii.
- Collaborate and meet with community stakeholders and government administration to gain feedback on proposed model and strategize implementation of it.

Addressing Tobacco Control In Disparate & Underserved Populations

uth program unity groups to-reach cor tobacco-free tobacco-free for the		Increasing Access to Tobacco Cessation Treatment for those people with Mental Illnesses Develop and implement materials Conduct an assessment of barriers to the provision of services Provide technical support to up to 10 mental health outpatient and club house programs to integrate services Coordinate a training of Hawaii mental health providers on techniques used in New Jersey Increase the number of mental health and substance abuse facilities in Hawaii that integrate services for a comprehensive tobacco-free campus and tobacco-free staff and clients.	•Provide financial support and technical assistance to extend outreach of the six local island hui into hard to reach, rural areas in Hawaii. By 2009, six local hui will develop and implement a workplan of evidence-based initiatives to change the social norms and practices about tobacco use in their community. By 2009, six local hui will develop Increase access to and quality of tobacco prevention and cessation services in hard-to-reach communities. Hawaii. By 2009, six local hui will develop Increase access to and quality of tobacco prevention and cessation services in hard-to-reach communities. Increase access to and quality of tobacco prevention and practices about tobacco prevention and practices about tobacco prevention and practices and social norms.	•The six local huis and at least 20 community groups will receive printed and electronic copies of the toolkit. •Six trainings will be held on implementing interventions that focus on positive outcomes for underserved populations By 2009, increase the number of local evel tobacco-free policies including parks, beaches, youth sports, and playgrounds. Baseline survey will be conducted in 2008.
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Creating Healthy Neighborhoods

	•	
Activities	Outputs	Outcomes
Smoke-Free Multi-Unit Homes		
 Research Nationwide resources on smoke- free home 	Increase the number of smoke-free	Increase the number of smoke-free homes in Hawaii.
•Expand educational literature on smoke-free homes issues, to include dangers of dangers of secondhand smoke, cost/benefit analysis, legal analysis, and model lease policy.	Department of Health Survey - 16% of multi-unit dwellings report a smoke-free policy)	Decrease the proportion of youth reporting exposure to secondhand smoke in a room. (Baseline 39.6% on 2005 Hawaii Youth Tobacco Survey).
 Develop and implement marketing plan and materials. 		Decrease the number of people in Hawaii reporting
•Plan and hold a statewide smoke-free homes conference to highlight the program and educate the muhic on the benefit of the		exposure to secondhand smoke in the home. (Baseline 13% Hawaii Adult Tobacco Survey)
initiative.		Increase the number of smoke-free condominiums,
 Speakers bureau for smoke-free homes presentations created. 		apartments, public housing, and other multi-unit dwellings in Hawaii.
 Expand website toolkit for smoke-free homes initiative. 		
Develop smoke-free apartments/condos		
registry.		
Coordinate and implement a coordinated system of training and technical assistance based on the annual needs assessment.	All trainings will be evaluated with preamd post test measures	Increase the capacity and skills of tobacco control providers at the State and local level.
 Provide 6-8 trainings in Honolulu and on Neighbor Islands 		Increase skills and knowledge in the tobacco control community.
•Contract with outside sources to provide specific training in improving outreach to disparate & underserved populations		Increase the number of evidence-based and best-practice tobacco control activities that are implemented in Hawaii communities.
		Build, develop, and support neighborhood based leadership in tobacco control.

Creating Healthy Neighborhoods

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Administrative Assistant COALITION FOR A TOBACCO-FREE HAWAI'I Program Specialist Attachment C Assistant Director Director Community Health Specialist Policy/Advocacy Director



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Current Service: 2008-2010

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Chair

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Coalition Immediate Past Chair

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