Smoking Cessation Leadership Center



University of California San Francisco

Clearing the Air: Comprehensive Approaches to Smoke-Free Public Housing

Leroy L. Ferguson Robert Burns, MPA Ashley LeMaistre, MPH Robin Scala

Moderator

Catherine Saucedo

Deputy Director

Smoking Cessation Leadership Center University of California, San Francisco

catherine.saucedo@ucsf.edu



Disclosures

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

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Leroy L. Ferguson, Robert Burns MPA, Ashley LeMaistre, MPH, Robin Scala, Christine Cheng, Brian Clark, Jennifer Matekuare, Jessica Safier, Roxana Said, MPH, Catherine Saucedo, and Steven A. Schroeder, MD



Thank you to our funders









Medicare FY 2019 Inpatient Psychiatric Facility Quality Reporting Program - Public Comment

- Proposed rule will go into effect in FY 2019
 - Removal of two tobacco measures
 - TOB-1 (Tobacco Use Screening)
 - TOB-3 (Tobacco Use Treatment Provided or Offered at Discharge and Tobacco Use Treatment at Discharge
- All are <u>strongly encouraged to submit a public comment</u> to Center for Medicaid Services (CMS) recommending TOB-1 and TOB-3 tobacco measures are retained
 - Go to https://www.regulations.gov/document?D=CMS-2018-0053-0002 to provide public comment by June 26, 2018





Housekeeping

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

CME/CEU Statement

Accreditation:

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

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

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California Marriage & Family Therapists: University of California, San Francisco School of Medicine (UCSF) is approved by the California Association of Marriage and Family Therapists to sponsor continuing education for behavioral health providers. UCSF maintains responsibility for this program/course and its content.

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

Respiratory Therapists: This program has been approved for a maximum of 1.50 contact hours Continuing Respiratory Care Education (CRCE) credit by the American Association for Respiratory Care, 9425 N. MacArthur Blvd. Suite 100 Irving TX 75063, Course # 151328000.



New Behavioral Health Accreditation

California Association of Marriage and Family Therapists (CAMFT)

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

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

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



California Behavioral Health & Wellness Initiative

For our CA residents, we are starting a new venture in CA helping behavioral health organizations go tobacco free and integrating cessation services into existing services thanks to the support of the CTCP.

Free CME/CEUs will be available for all eligible California providers, who joined this live activity. You will receive a separate post-webinar email with instructions to claim credit.



Leroy L. FergusonHousing Program Specialist

Department of Housing and Urban Development



Bob Burns

Director

National Center for Health in Public Housing



Ashley LeMaistre, MPH Program Coordinator

Chronic Disease and Injury Prevention Austin Public Health





Robin Scala
Health Communication Specialist

Office on Smoking and Health
National Center for Chronic Disease
Prevention and Health Promotion
Centers for Disease Control and Prevention



Smoke-Free Public Housing

Smoking Cessation Leadership Center (SCLC)

June 18, 2018

Presented By
Leroy Ferguson
Housing Program Specialist,
Office of Public Housing



Implementing HUD's SMOKE-FREE POLICY in Public Housing





Agenda

- ✓ Smoke-Free Rule overview.
- ✓ Locations where the rule applies.
- ✓ Prohibited products.
- ✓ Other aspects of the rule.
- ✓ How to customize your policy.

Instituting Smoke-Free Public Housing

- The rule states that all public housing authorities (PHAs) must implement a smoke-free policy by July 30, 2018.
- The goal of the rule is to protect the health of residents, visitors, and staff.
- The rule is also meant to reduce fire risk and lower maintenance costs.
- All local policies must be in accordance with HUD's Rule.

- HUD solicited input from PHAs, public housing residents, industry groups, and the public before issuing the final rule.
- The final rule is the culmination of years of research into the harms and costs of smoking in public housing.
- 600+ PHAs have already voluntarily implemented a smoke-free policy.

Where Does the Rule Apply?

- All public housing dwelling units, except those in mixedfinance developments.
- All PHA administrative office buildings.
- All indoor common areas (e.g., hallways, community facilities, public housing offices, laundry rooms, daycare centers).
- Outdoor areas within 25 feet of public housing and administrative office buildings.





What Products Are Prohibited?

- X All lit tobacco products.
 - Cigarettes.
 - Cigars.
 - Pipes.
 - Other lit tobacco products.
- X Water pipes or hookahs.
- X Residents may use these products, but not in their units or within the restricted areas.



What Else Does the Rule Say?

- The smoke-free policy must be included in:
 - PHA annual and Moving to Work plans
 - ACOP
 - Tenant leases
- Board approval is required if the policy is deemed a "significant amendment."
- The policy must be implemented by July 30, 2018.
- PHAs should establish an enforcement plan as part of the policy.
- PHAs should consider how they will manage requests for reasonable accommodations.

HUD's Rule Promotes Local Flexibility

- HUD's Rule provides discretion when developing your smokefree policy.
- It may reflect your community's circumstances and preferences as long as it is consistent with the final rule.



How to Customize a Policy: Where Is Smoking Allowed?

Mandated by the Rule

- X All public housing dwelling units.
- X All PHA administrative office buildings.
- X All indoor common areas (e.g., hallways, community facilities, public housing offices, laundry rooms, daycare centers).
- X Outdoor areas within25 feet of public housingand PHA administrative officebuildings.

Customizable Options

- ✓ Designate other smoke-free areas on the grounds (e.g., playground, all sidewalks).
- ✓ Designate all grounds smoke-free except for designated smoking areas.
- Designate all grounds smoke-free with no exceptions.



How to Customize a Policy: What Types of Products Are Allowed?

Mandated by the Rule

- X All lit tobacco products.
 - Cigarettes.
 - Cigars.
 - Pipes.
 - Other lit tobacco products.
- X Water pipes.
 - Hookahs.

Optional

✓ E-cigarettes or other electronic nicotine delivery systems.
PHAs have discretion to prohibit e-cigarettes.



Establish Enforcement Procedures

- Define what is evidence of a violation and what constitutes a violation.
 - Resident complaint.
 - Staff observation.
 - Presence of tobacco paraphernalia observed during unit maintenance.

- Consider a graduated enforcement approach including some or all of these steps:
 - Verbal warning.
 - Written warning.
 - Final notice.
 - Eviction proceedings.

Smoke-Free Policy and PHA Plan Process

- The enforcement plan should be developed as part of the smoke-free policy, in consultation with tenants and stakeholders.
- The smoke-free policy must be approved by the board.

- The smoke-free policy must be included in the PHA's annual or 5-year plan (as applicable).
- As determined by the PHA, but will likely constitute a significant amendment to the PHA Plan, and if so, the process for a significant amendment must be followed.

What Is a Reasonable Accommodation?

 A reasonable accommodation is a change in rules, policies, practices, or services so that a person with a disability will have an equal opportunity to use and enjoy a dwelling unit or common space.



- PHAs should do everything it can to assist, but it is not required to make changes that would fundamentally alter the program or create an undue financial and administrative burden.
- Reasonable
 Accommodations must be considered on a case by case basis.

Accommodations for Persons With Disabilities

 HUD encourages PHAs to engage with disabled residents who may require reasonable accommodation when developing the smoke-free policy and to work with social service agencies to identify other alternatives to smoking in their units.

Next Steps

- PHAs must adopt and implement by July 30, 2018.
- Update the PHA, MTW Plan, and ACOP.
- Update the lease and/or lease amendment.
- Make sure all tenants have signed a new lease or lease amendment by your PHA's implementation date.
- Make sure tenants understand that continuing to smoke in their units is prohibited.
- If accommodation requests are made, deal with them on a case by case basis.
- The earlier you start, the easier it will be to implement the new smoke-free policy. Resident buy-in helps with compliance.



PIH SMOKE-FREE TEAM

OFO Smoke-Free Team Members

- Charles Eldridge, Team Lead
- Kelley Lyons
- Grennetta Taylor

OFO/PIH Network Smoke-Free Ambassadors

- Northeast Network, Trenessa Sidney. Chevelle.D.McCray@hud.gov
- Southeast Network, Nzinga Wallace. <u>Nzinga.C.Wallace@hud.gov</u>
- Midwest Network, Mary Tepe. <u>mary.s.tepe@hud.gov</u>
- Southwest Network, Gwenda Lowe and Lorraine Wallsgwenda.j.lowe@hud.gov & lorraine.d.walls@hud.gov
- Upper Midwest Network, Pam Kosuth. <u>pam.kosuth@hud.gov</u>
- Far West Network, Trevor Auser. trevor.t.auser@hud.gov

Program Office/Smoke-Free POCs: Leroy Ferguson, Team Lead, Monica Shepherd



Resources

The webinars, sample presentations, fact sheets, and a guidebook will be available on the HUD website:

https://www.hud.gov/smokefreepublichousing

Thank You!

SmokefreePublicHousing@hud.gov



Smoke Free Public Housing Opportunities for Collaboration

Health Centers



National Center for Health in Public Housing

National Center for Health in Public Housing





Increased Access + Quality of Care → Improved Health Outcomes

Capacity Building For Health Centers Serving Residents of Public Housing

Training & Technical Assistance
Research
Outreach and Collaboration



Resources

NCHPH.ORG, website:

- Abstracts, Best Practices, Factsheets
- OSmoke-free Widget--> Links to partners' information, e.g., CDC Tips Campaign
- **oList of Community Health Centers**
- **OList of Primary Care Associations**
- Maps of Health Centers and PHAs
- Webinars and Training Symposia
- OHealth Center Locator: BPHC.HRSA.GOV
- Smoking Cessation Learning Collaborative

Partnership / Collaboration Assistance

• 703-812-8822 x237, x250, x231







Nearly **26 million** people — **1 in 12** people across the United States rely on a HRSA-funded health center for care, including:



















330,000+ **VETERANS**



ABOUT 2.7 MILLION PUBLICLY HOUSED



NEARLY 1.3 MILLION HOMELESS



NEARLY 1 MILLION AGRICULTURAL WORKERS

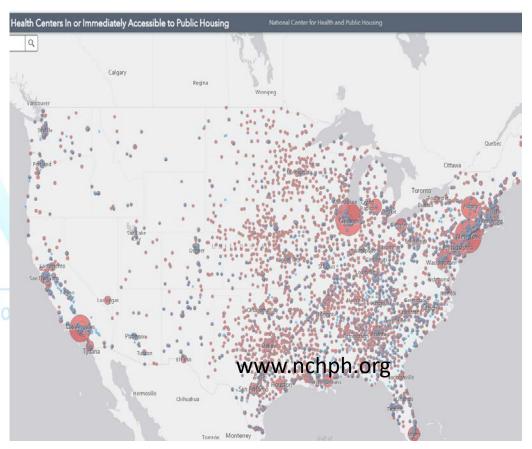


MORE THAN 750,000 SERVED AT SCHOOL-BASED HEALTH CENTERS



Health Centers near Public Housing

- 1,400 Federally
 Qualified Health
 Centers (FQHC)
 =26 million
- 11,000 Clinical Sites
- 341 FQHCs In or Accessible to Public Housing = 2.7 million patients
- 105 Public Housing Primary Care (PHPC)= 609,000 patients





Federally Qualified Health Centers (FQHCs)

- Community Based for over 50 Years
- Comprehensive Primary Healthcare Providers
- Approved by HHS/HRSA
- Sliding Fee Scale
- Boards Include Patients
- Care for Medically Underserved
- Serve Vulnerable and Special Populations including Residents of Public Housing
- Collaboration and Partnership Focused



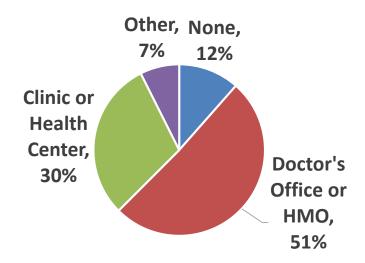
Public Housing Primary Care (PHPC)

- Health Care for Residents of Public Housing
- Clinics located in or accessible to Public Housing
- Public housing (PH) means agency-developed, owned, or assisted low income housing, including mixed finance projects, excludes units with no PH agency support other than section 8 vouchers.
- Resident Resources → Community Health Workers
- Serving PH residents for over 25 years -- Existing relationships with PHAs and residents.

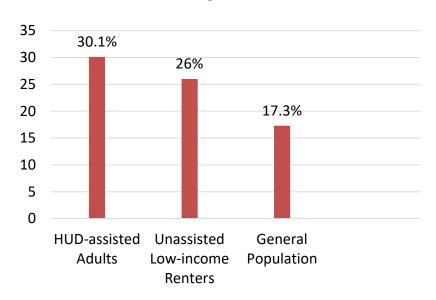


Source of Care

Usual Source of Care for HUD-assisted Adults, 2006-2012



Percentage of Adults who Reported Usual Source of Care as Clinic or Health Center, 2006-2012



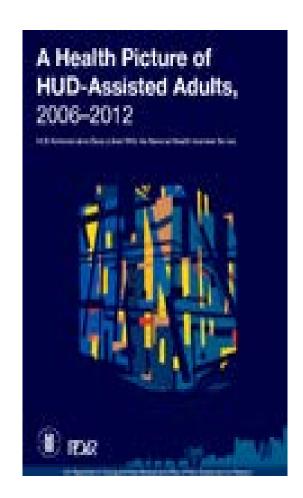
Source: A Health Picture of HUD-Assisted Adults, 2006-2012



A Health Picture of HUD-Assisted Adults, 2006-2012

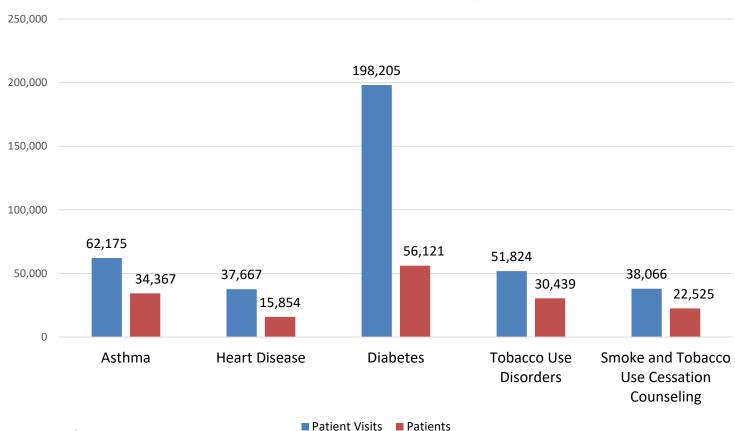
Adults in HUD-assisted housing have higher rates of chronic health conditions and are greater utilizers of health care than the general population.

- 33.5% are current smokers vs. 22% of other adults
- 35.8% are in fair or poor health vs. 13.8% of other adults
- 71% are overweight or obese vs. 64% of other adults
- 61% have a disability vs. 35.4% of other adults
- 17.6% have diabetes vs. 9.5% of other adults
- 13.6% have COPD vs. 6.3% of other adults
- 16.3% have asthma vs. 8.7% of other adults



2016 UDS Tobacco Data

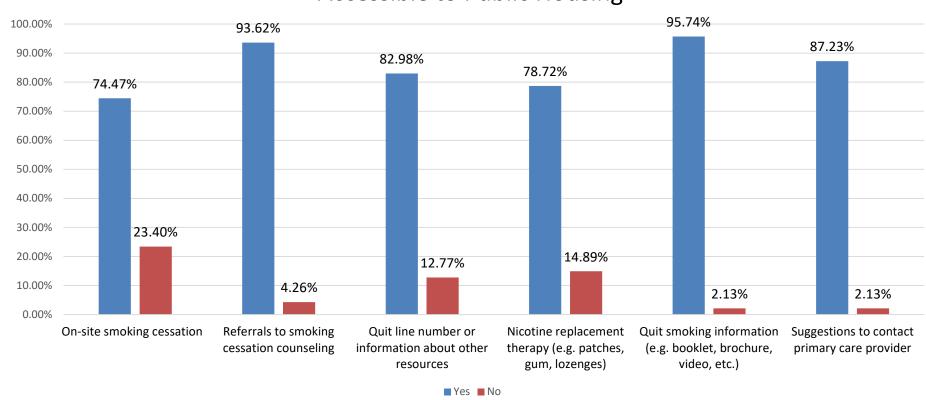
Tobacco-Related Illnesses/ Health Conditions Exacerbated by Secondhand Smoke and Tobacco Use in PHPCs, 2016





Source: 2016 UDS Data

Smoking Cessation Services Offered at Health Centers Located in or Accessible to Public Housing



Source: NCHPH 2016 Needs Assessment

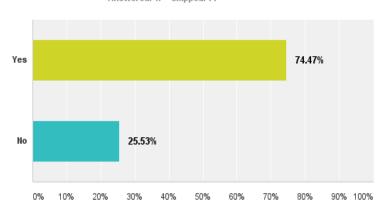


COLLABORATION between Health Centers and Public Housing Authorities

64% of all Health centers in or accessible to PH have collaborative agreements with a PHA

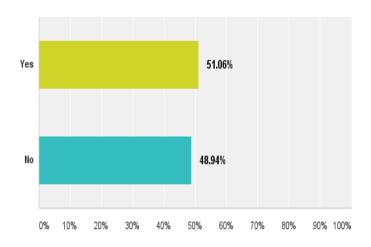
Q43 Are you familiar with a new HUD rule prohibiting lit tobacco in all living units, outdoor areas (25 feet from the housing) and indoor common areas in public housing?

Answered: 47 Skipped: 14



Q44 Are you collaborating with your PHA to implement a smoke-free policy?

Answered: 47 Skipped: 14

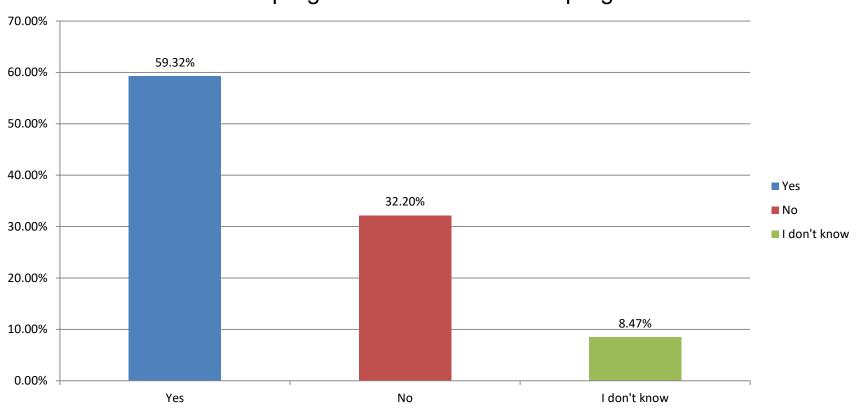


Source: NCHPH Needs Assessment 2016



Collaboration with State/Local Tobacco/Cancer Control Program

Are you working with a state or local comprehensive cancer control program or tobacco control program?

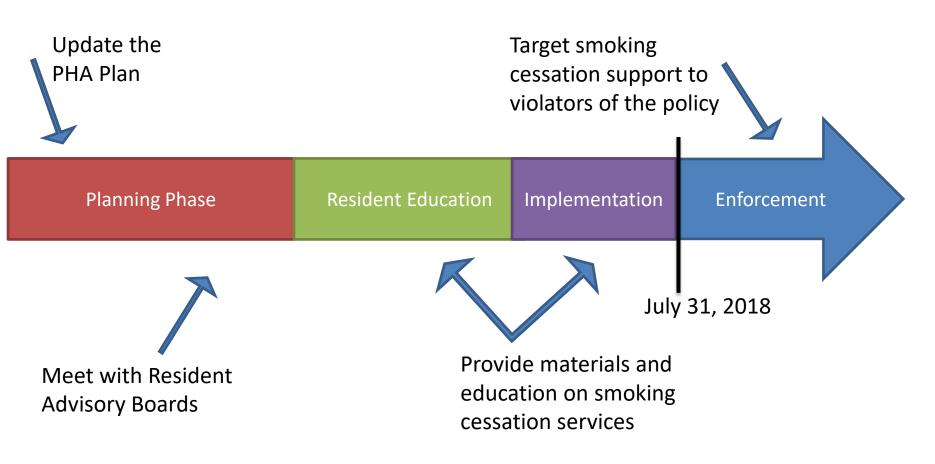


Collaboration Attributes

- Relationships
- Trust
- Process
- Frequent
- Reciprocal
- Outcome Focused
- Positive
- Ongoing



Opportunities for Health Center Involvement During Implementation of the Smoking Ban





Barriers for PHAs and Health Centers

PHAS

- Resources
- Resident push back
- Lack of support
- Need for education

Health Centers

- Resources
- Competing Priorities
- Active Engagement
- Quit Rate Challenge



Case Examples

TCA Health, Inc.-Chicago, IL



- Health Partnerships
- Lease agreements

Public Health
Management
Corporation (PHMC)Philadelphia, PA



- Long term relationship
- Strategic Partners



Case Examples

Community Healthcare Center- Wichita Falls, TX

South End CHC Boston, MA





- Community Engagement
- Commitment
- **Incentives**



- **Community Focus**
- **Community Team**
- Behavioral Health a **Priority**



Individual Cessation Counseling

- Harvard University and Boston University working with Boston Housing Authority
- Intensive training for residents as Tobacco Cessation Specialists to provide individualized counseling to public housing residents who smoke
- A control group received traditional group education
- Training involved a combination of Tobacco Cessation Education and Counseling Training, particularly Motivational Interviewing
- Resulted in improving the quit rate from 7% to 14%, a 100% improvement!!!

National Center for Health in Public Housing

Individual Cessation Counseling

- •Issue: How to provide similar, cost effective training on a larger scale???
- Exploring use of Peer Specialists or other lower cost-effective provider
- Identified states where with PS and TTS training and Medicaid reimbursement
- Conducted survey among health centers regarding current and potential use of peer specialists for tobacco cessation counseling



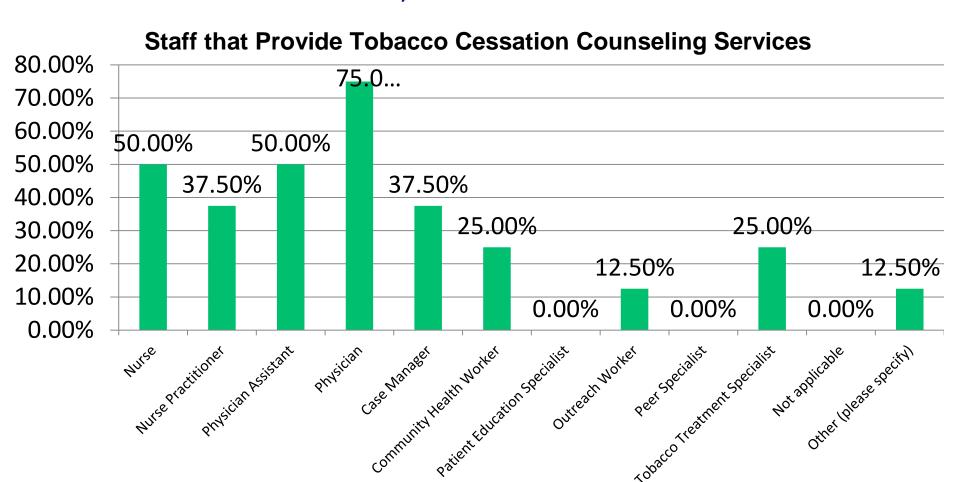
Survey Findings

- Peer Specialist: 31%
- Tobacco Treatment Specialist: 23%
- If not using Peer Specialist or Tobacco
 Treatment Specialist, would consider it: 60%
- Individual Tobacco Cessation Counseling: 38%





If Yes, Please Check All Staff that Provide Tobacco Cessation Counseling Services at your Health Center.





Summary/Recommendations

- Establish Reciprocal Partnerships, e.g., board members
- Engage with the community
- Provide culturally appropriate health education materials
- Case Management- ID Needs monitor progress
- Leverage resources
- Expand smoking cessation services
- Create incentives for participation
- Foster a supportive environment



Resources

NCHPH.ORG, website:

- Abstracts, Best Practices, Factsheets
- OSmoke-free Widget--> Links to partners' information, e.g., CDC Tips Campaign
- **oList of Community Health Centers**
- List of Primary Care Associations
- Maps of Health Centers and PHAs
- Webinars and Training Symposia
- OHealth Center Locator: BPHC.HRSA.GOV
- OSmoking Cessation Learning Collaborative-You're Invited!





Partnership / Collaboration Assistance

• 703-812-8822 x237, x250, x231



Contact Information

Bob Burns, Director

National Center for Health in Public Housing

Tel: (703) 812-8822

Email: bob.burns@namgt.com

www.nchph.org



Communicating and Engaging With Pubic Housing Authority Residents: A Case Study of the Housing Authority of the City of Austin

ASHLEY LEMAISTRE, MPH
AUSTIN PUBLIC HEALTH

JUNE 18, 2018

SMOKING CESSATION LEADERSHIP CENTER WEBINAR

Objective

Identify communication and engagement strategies for reaching residents of public housing authorities adopting smoke-free policies.



Outline

- Background
- •Implementation Team
- Resident Forums
- Resident Contributions
- Communication Strategies
- Support & Incentives



Background

- Housing Authority of the City of Austin (HACA)
 - 18 properties in Austin, Travis County, Texas
 - 1,839 housing units
 - Over 4,300 residents
 - Family and Senior/Disabled Properties
 - Process started in 2013
 - Implemented smoke-free housing 9/1/2015

HACA Resident Survey - 2013 N=496		
	n	%
Supports Policy	262	53.0
Smokers	83	43.9
Non-Smokers	191	63.0
Current smoker	189	38.1
Planning to Quit in Next 30 Days	91	18.3
Stopped Smoking in Last 6 Months	103	20.8
Bothered by SHS (a little or a lot)	249	50.2
SHS Enters Apartment (Every day to a few times a month)	186	37.5



Implementation Team

- Diverse members
- Created a timeline
- Drafted the smoke-free policy
- •Researched, brainstormed, and promoted cessation resources
- Communication Plan





Resident Forums

- Initial Introduction
 - Introduction to the policy concept
 - Tobacco 101
 - Cessation support
- Follow-up Introduction
 - Introduce finalized policy
 - Reviewed cessation support
 - Q&A





Resident Contributions: Policy & Enforcement

Policy inclusion: Smoking and electronic cigarettes

- •1st Violation—verbal warning
- •2nd Violation—1st written letter of lease violation
- •3rd Violation—2nd written warning letter of lease violation
- •4th Violation—30-day notice of lease termination



Final Intervention Point: Cessation Class & Certificate



Communication Strategies

Residents

- Resident Council Meetings
- Flyers
- Forums
- Educational Opportunities
- Cessation support
- Implementation reminders
- FAQ document
- Signage
- Lease signing events
- Post-implementation celebrations

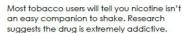
Organization

- Employees and vendors
- Follow-up survey

RESIDENT SPOTLIGHT:

The Smoke-Free Policy Helped Me Quit

North Loop resident Thelma Pannell dumped her longtime "buddy" last year. After 53 years together, Pannell said the relationship had become toxic - causing her to suffer a heart attack, COPD and emphysema.





"I enjoyed smoking - it was relaxation," said Pannell, a former HACA commissioner and resident council president. "I smoked like a pack a day at that time."

But to quit smoking is not impossible. Since 2002, the number of former smokers in the U.S. has been greater than the number of current smokers.

Pannell said she made up her mind to ditch cigarettes after attending free smoking cessation classes offered by Austin/ Travis County Health and Human Services as a part of HACA's smoke-free housing policy, which took effect in September

The policy prohibits smoking in HACA's 1,839 public housing

"I'm just thrilled that I have quit [smoking] I wish I could get everybody to quit, but I know that's a hard job.

Thelma Pannell

units. The rules apply to all residents, quests, contractors and employees. Smoking is only allowed in designated areas.

As of March 2016, Pannell had been smoke free for nine

www.hacanet.org 14



Support & Incentives

- Cessation
 - Convenience
 - Consider barriers
- Cessation Incentives
 - Air duct cleaning
 - Apartment painting



Contact Information

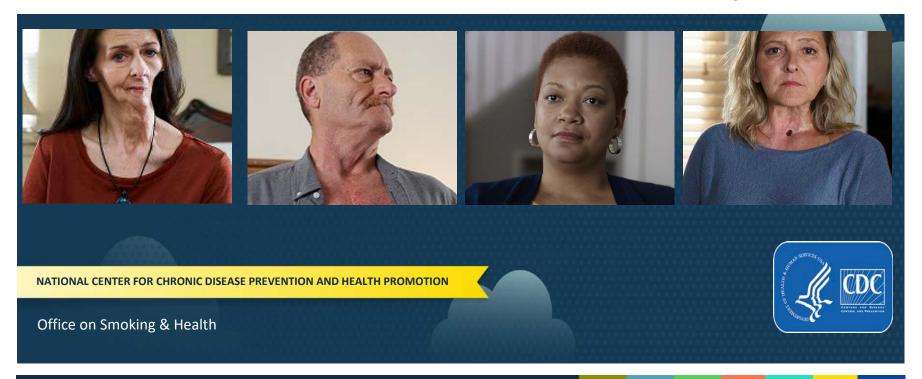
Ashley LeMaistre

Ashley.LeMaistre@austintexas.gov

512-972-6464

2018 TIPS FROM FORMER SMOKERS® CAMPAIGN RESOURCES TO SUPPORT HUD'S SMOKEFREE POLICY

Robin Scala, Health Communications Branch, Office on Smoking and Health



2018 TIPS® CAMPAIGN OVERVIEW



New Ads



Media Buy



Campaign Resources



Sharon and Christine thought cigarettes would always be there for them. They both smoked and they both got cancer. Cigarettes hurt them. What kind of friend would do that?

You can quit smoking. For free help, call 1-800-QUIT-NOW.



Tips® Motivates Smokers to Make Quit Attempts by....

Focusing on living with the health consequences of smoking, rather than dying.



Disrupting their belief that: "I will quit later."
"I'm going to die anyway."

Offering new information linking smoking to health conditions that they may not be aware of.



Providing free resources to encourage cessation.

1-800-QUIT-NOW CDC.gov/tips

2018 Tips® Campaign

We are combining previous and new campaign ads, that focus on health issues caused or made worse by smoking or exposure to secondhand smoke, including:



Tips® Impact & Results

From 2012 to 2015, CDC estimates that millions of Americans have tried to quit smoking cigarettes because of the campaign, and at least half a million have quit for good. TIPS FROM cdc.gov/tips

2018 Media Buy

April 23rd - October 14th 2018

New Ads

National TV, digital

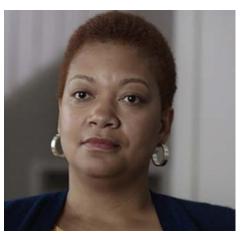
Local placements 37 high prevalence media markets

Brian, Christine, Sharon & Tiffany









2018 Media Buy

Targeted Outreach

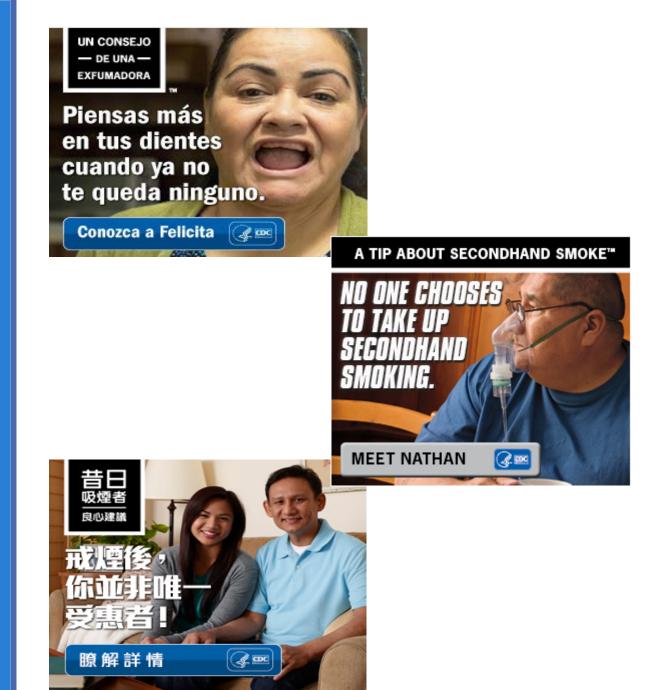
Hispanic/Latino

LGBT

Black/African American

American Indian/Alaska Native

Asian - Chinese, Korean, Vietnamese, Filipino



2018 Media Buy

Targeted Outreach

HUD Smokefree Public Housing Audiences

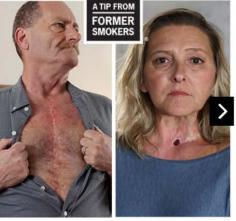
May 21 – October 14

Digital Banner Ads

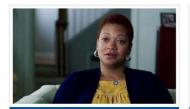
www.cdc.gov/quit











REAL STORIES

Hear the real stories of people living with smoking-related diseases and disabilities.



DISEASES AND CONDITIONS

Learn how smoking affects illnesses and conditions



ALL VIDEOS

View all commercials and videos from the *Tips* * campaign



TIPS IMPACT AND RESULTS

Learn how more than 5 million smokers have attempted to quit because of the Tips $^{\oplus}$ campaign.

TIPS® WEBSITE: CDC.GOV/TIPS

- + Campaign Background Information
- + Ads, Participant Vignettes and Bios
- + Social Media, Digital, Print Materials
- + Cessation Content
- + Impact & Results

TIPS® WEBSITE PARTNER PAGES

Faith-Based Organizations (FBO)

Health Care Providers

Organizations Serving Military Members and Veterans

Organizations Serving Public Housing Residents

Partners and Public Health
Professionals

Tips From Former Smokers®



To receive email updates

about the Tips From Former Smokers® campaign, enter CDC > Tips From Former Smokers ® > Partners

Organizations Serving Public Housing Residents



Resources for HUD Housing Managers on Going Smokefree

The Centers for Disease Control and Prevention (CDC) is supporting the U.S. Department of Housing and Urban Development (HUD) in its effort to protect staff and residents working and living in federally owned and operated public housing units from the dangers of secondhand smoke exposure.

HUD's Smokefree Rule: What You Need to Know

HUD's smokefree rule [PDF - 488KB] & .4 which became effective on February 3, 2017, requires that within 18 months, every public housing agency (PHA) implement a policy prohibiting lit tobacco products (e.g., cigarettes, cigars, pipes, and hookahs) in all living units and indoor common areas in federally owned and operated multiunit public housing, and in PHA administrative office buildings.

Since 2009, HUD has strongly encouraged PHAs to adopt smokefree policies covering living units and common areas, a policy many private housing developments already have in place. During this time, more than 600 PHAs and Tribally Designated Housing Entities (TDHEs) have adopted at least partia smokefree policies. Through this voluntary effort and local initiatives, more than 228,000 public housing units are already smokefree. Once fully implemented, the HUD smokefree rule will expand the impact to more than 940,000 public housing units, including more than 500,000 units inhabited by elderly residents. Importantly, the rule will protect the 760,000 children living in public housing."²

What is Secondhand Smoke and How is it Harmful?

Secondhand smoke is smoke from burning tobacco products or smoke that has been exhaled by a person smoking 2 Tobacco smoke contains more than 7,000 chemicals, including hundreds that are toxic and about 70 that can cause cancer. Exposure to secondhand smoke causes disease and premature death among nonsmokers 2 There is no risk-free level of secondhand smoke. The U.S. Surgeon General has warned that breathing secondhand smoke for even a short time is dangerous.

Secondhand smoke has been shown to travel between units in multiunit housing, such as apartment buildings. Persons who live in rental housing are especially likely to be exposed to secondhand smoke. Other populations that are present in large numbers in public housing, including children, African Americans, and persons living below the poverty level, are also more likely to be exposed to secondhand smoke. African American children are especially likely to be exposed to secondhand smoke is conditionally likely to be exposed to secondhand smoke.

. Secondhand smoke causes numerous health problems in infants and children, including sudden infant death syndrome (SIDS), more frequent and

TIPS® CAMPAIGN CESSATION SUPPORT

State & local cessation resources (e.g., state quitlines)

1-800-QUIT-NOW

1-855-DEJELO-YA (Spanish)

Asian Smokers Quitline (Chinese, Vietnamese, Korean)

NCI text messaging service

NCI smokefree.gov

Coordination of resident cessation support with partners



Tips® Posters for Smokefree Housing

AVAILABLE IN ENGLISH AND SPANISH







Tips® Posters in the Community





Health Centers



Community Centers



WIC Clinics



Smokefree Resource Flyers

AVAILABLE IN ENGLISH AND SPANISH

WHEN YOUR BUILDING GOES SMOKEFREE, WILL YOU?

Quitting smoking improves your health. It lowers your chances of getting:

- · Heart disease and stroke
- . Lung disease, including COPD
- · Other smoking-related illnesses

"You have the power to make the decision to quit smoking. Some of the best things for me about quitting are enjoying food again, and being able to walk and not feel so out of breath."

Tiffany

Smoked a pack a day for 15 years.



Secondhand smoke contains poisons. Breathing even a little can be harmful: especially for kids, older people, and those with health problems made worse by secondhand smoke. Smokefree policies protect everyone's health.

GET FREE SUPPORT TO QUIT SMOKING.



1-800-QUIT-NOW (1-800-784-8669) Speak with a quit smoking coach

1-855-DÉJELO-YA (1-855-335-3569) For help in Spanish



Smokefree.gov Online tools and support to ault smokina



Text QUIT to 47848

24/7 text messaging

program

OultGuide Mobile app to build your skills to guit





Visit CDC.gov/tips for real stories and resources from the Tips From Former Smokers™ campaign.

YOUR BUILDING IS SMOKEFREE... **HOW ABOUT YOU?**

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Smoked a pack a day for 15 years. Now ... smokefree



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Online tools and support to quit smoking



Text START to 47848 24/7 text messaging program



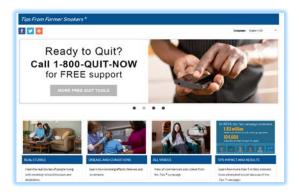
Mobile app to build your skills to quit





Accessing Tips® Materials

Many free and low-cost *Tips* materials are available to support media, communications and partnership efforts.



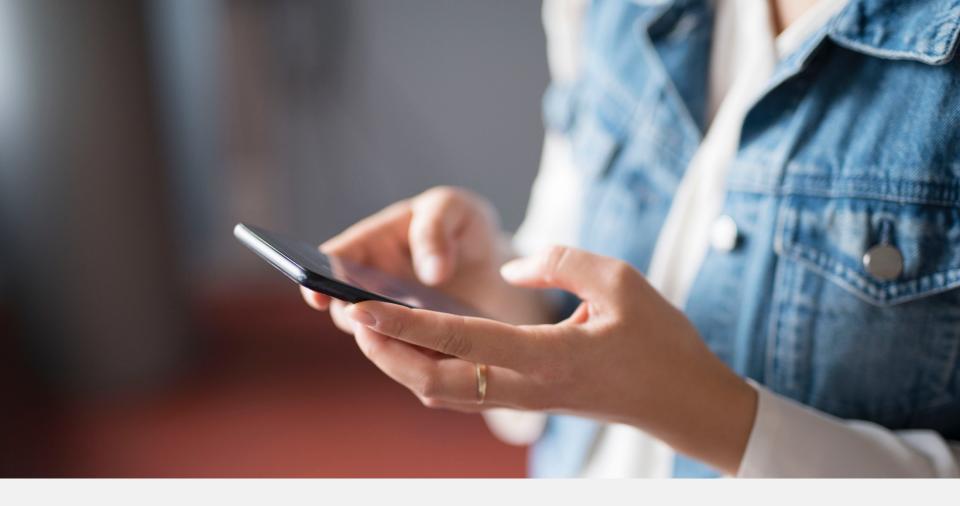
OSH Tips® Web Site www.cdc.gov/tips



Tips® Download Center www.plowsharegroup.com/cdctips



Media Campaign Resource Center www.cdc.gov/tobacco/mcrc



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TIPS® PARTNERSHIP CONTACTS

ROBIN SCALA
RScala@cdc.gov
www.cdc.gov/tips

SHELLEY HAMMOND aqq7@cdc.gov
www.cdc.gov/tips

General *Tips*® campaign inquiries: TobaccoMediaCampaign@cdc.gov

For more information

contact CDC 1-800-CDC-INFO (232-4636)

TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



Q&A

Submit questions via the chat box





Post Webinar Information

- You will receive the webinar recording, presentation slides, information on certificates of attendance, and other resources, in our follow-up email. All of this information will be posted to our website.
- Free CME/CEUs of up to 1.5 credits are available to all attendees who participate in this live session. Instructions will be emailed after the webinar.



CME/CEU Statement

Accreditation:

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

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California Marriage & Family Therapists: University of California, San Francisco School of Medicine (UCSF) is approved by the California Association of Marriage and Family Therapists to sponsor continuing education for behavioral health providers. UCSF maintains responsibility for this program/course and its content.

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

Respiratory Therapists: This program has been approved for a maximum of 1.50 contact hours Continuing Respiratory Care Education (CRCE) credit by the American Association for Respiratory Care, 9425 N. MacArthur Blvd. Suite 100 Irving TX 75063, Course # 151328000.



American Association for Respiratory Care (AARC)



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

New Behavioral Health Accreditation

California Association of Marriage and Family Therapists (CAMFT)

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

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

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



California Behavioral Health & Wellness Initiative

For our CA residents, we are starting a new venture in CA helping behavioral health organizations go tobacco free and integrating cessation services into existing services thanks to the support of the CTCP.

Free CME/CEUs will be available for all eligible California providers, who joined this live activity. You will receive a separate post-webinar email with instructions to claim credit.



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Contact us for technical assistance

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- Call us toll-free at 877-509-3786
- Please complete the post-webinar survey





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