

Janke, Brenda G HLTH:EX

From: Lambert, Tim HLTH:EX
Sent: Friday, October 24, 2014 12:40 PM
To: Parker, Esther HLTH:EX; Janke, Brenda G HLTH:EX
Subject: RE: Radon health bullets

Hi Folks

Arlene wanted some clear "next steps" if we got \$3M.

Can we add a few bullets for that, as opposed to next steps in the project.

- Develop the "ALAR" and health impediment regulation to guide mitigation (MOH could do this)
- Mitigation plan – like wood stove
- More training of mitigators
- Check other hotspot areas in the interior
- Check other hotspots indicated by HC monitoring – Island?
- Other ideas?

Tim

From: Parker, Esther HLTH:EX
Sent: Friday, October 24, 2014 12:13 PM
To: Lambert, Tim HLTH:EX; Janke, Brenda G HLTH:EX
Subject: Radon health bullets

For your review

Esther Parker, Senior Policy Analyst/ Ministry of Health/ PO BOX 9646 Stn Prov Govt/
Victoria BC V8W 9P1
New Phone#: (250) 952-1463 / Fax: (250) 952-1713 / Email: esther.parker@gov.bc.ca

Radon Health Effects Research

- Breathing is the primary route of exposure to radon. When radon is inhaled, it is deposited along the airways, where it releases radioactive particles that damage the DNA lining lung cells. Damaged cells can become cancerous.
- The relationship between radon and lung cancer was initially researched in uranium miners who were exposed to high levels of radon. Studies have shown that occupational radon exposure is associated with an increased risk of lung cancer¹.
- Researchers have also evaluated whether residential radon exposures also carry risk of lung cancer. Two analyses combined the results of multiple studies in North America and Europe to show that household radon exposures were associated with the development of lung cancer².
- The World Health Organization (WHO) estimates that radon causes between 3% and 14% of all lung cancers globally, depending on the average radon level in a country³.
- Health Canada estimates that radon causes 16% of all lung cancer deaths in Canada (approximately 3,300 deaths every year), with an estimated 219 BC residents dying every year of radon-related lung cancer⁴.
- Not everyone exposed to radon develops lung cancer. The time between exposure and the onset of the disease is usually many years. The risk of developing radon-related lung cancer depends on the concentration of radon in the building, the length of time a person is exposed to radon and a person's smoking habits
- The risk of radon-induced lung cancer is significantly greater for smokers because radon and cigarette smoke have a synergistic effect, meaning that people exposed to both agents have a much higher risk of developing lung cancer than people exposed only to cigarette smoke or only to radon. Non-smokers have a 2% lifetime chance of developing lung cancer when exposed to radon at 200 Bq/m³. For a smoker, these risks increase to 17%⁵.
- The incidence rate of lung cancer per 100,000 people in the Interior (55.25) and Northern (65.03) health authorities is higher than in the Fraser (46.82), Vancouver Coastal (41.64)

¹ Lubin JH, Wang ZY, Boice JD, Jr., Xu ZY, Blot WJ, De Wang L, et al. Risk of lung cancer and residential radon in China: pooled results of two studies. *Int J Cancer*. 2004;109(1):132-7.

² Krewski D, Lubin JH, Zielinski JM, Alavanja M, Catalan VS, Field RW, et al. Residential radon and risk of lung cancer: a combined analysis of 7 North American case-control studies. *Epidemiology*. 2005;16(2):137-45. <http://www.ncbi.nlm.nih.gov/pubmed/15703527>.

³ World Health Organization. WHO handbook on indoor radon: a public health perspective. Zeeb H, Shannoun F, editors. Geneva: WHO Press; 2009. http://whqlibdoc.who.int/publications/2009/9789241547673_eng.pdf

⁴ Chen J, Moir D, Whyte J. Canadian population risk of radon induced lung cancer: a re-assessment based on the recent cross-Canada radon survey. *Radiation Dosimetry*. 2012;152:9-13.

⁵ World Health Organization. WHO handbook on indoor radon: a public health perspective. Zeeb H, Shannoun F, editors. Geneva: WHO Press; 2009. http://whqlibdoc.who.int/publications/2009/9789241547673_eng.pdf

and Island (47.95) health authorities⁶. However, we cannot attribute these higher incidence rates to radon alone as a number of other risk factors, such as higher rates of tobacco smoking, also play a role.

- There are no studies that estimate the economic impact of radon-related lung cancer in Canada but in 2000, cancer accounted for \$17.4 billion (\$2.6 billion in direct costs and \$14.8 billion in indirect costs) Canada-wide. In 2013, 13-14% of new cancer cases were estimated to be due to lung cancer⁷.
- Every year in BC, an estimated 219 radon-related lung cancer deaths (2011 estimate) result in healthcare costs of \$7,884,000/year; an estimate which only takes into account the direct costs of diagnosis and treatment⁸.
- A 2007 study in Alberta estimated the direct cost of treatment of lung cancer to be between \$9,000 and \$21,000 per case⁹. The analysis did not capture community-based end-of-life care, which is approximately \$3,000 to \$4,900 per case. Based on these cost estimates, the direct cost of treatment for the estimated 219 deaths in BC due to radon exposure in 2011 would be \$2.6 million to \$5.7 million. These are direct treatment costs only, and do not include indirect costs, such as the economic impact of life lost due to premature death⁸.

Next Steps

- Inform and educate the public on the health risks posed by radon, how they can test their homes and radon mitigation strategies by:
 - Hosting radon public open house events to share information
 - For example, the BC Lung Association recently held a Community Health Forum in Prince George. 130 people attended the forum and asked a variety of questions about radon exposure limits, health impacts and how to mitigate.
 - Providing information at conferences and workshops
 - Encouraging residents to test their homes for radon
 - Promoting the sale of test kits to other associations in Ontario, Manitoba and Alberta.

⁶ BC Cancer Agency. BC 2011 Regional Cancer Report. Section 8. Incidence, mortality, survival and prevalence. 80. <http://www.bccancer.bc.ca/NR/rdonlyres/910907D3-23C1-40B6-896E-AC99348760A4/59276/Section8IncidenceMortalitySurvivalandPrevalencePar.pdf>

⁷ Canadian Cancer Society. Canadian cancer statistics 2013. 2013; Available from:

<http://www.cancer.ca/en/cancer-information/cancer-101/canadian-cancer-statistics-publication/?region=on>

⁸ BC Centre for Disease Control. Radon in BC: Reducing Exposure Saving Lives - draft. 2014.

⁹ Demeter SJ, Jacobs P, Chmielowiec C, Logus W, Hailey D, Fassbender K, et al. The cost of lung cancer in Alberta. *Can Respir J*. 2007 Mar;14(2):81-6.

Janke, Brenda G HLTH:EX

From: Janke, Brenda G HLTH:EX
Sent: Monday, November 17, 2014 1:20 PM
To: Edwards, Bill B HLTH:EX
Subject: RE: Year End Expenditures

I'm sure it will be. I didn't know what to put in some of the boxes.

From: Edwards, Bill B HLTH:EX
Sent: Monday, November 17, 2014 1:11 PM
To: Janke, Brenda G HLTH:EX
Subject: RE: Year End Expenditures

Ok, thanks. I will ad-lib where I am missing info -- and hope it's close to correct.....

From: Janke, Brenda G HLTH:EX
Sent: Monday, November 17, 2014 12:09 PM
To: Edwards, Bill B HLTH:EX
Subject: RE: Year End Expenditures

s.13,s.17

Radon

\$1 million

The money would go to the BC Lung Association.

The request supports the ministry’s goal of: Effective health promotion, prevention and self-management to improve the health and wellness of British Columbians.

The money would be used to expand the Radon Aware program including the development of a broader radon-testing program in communities in BC, training of additional radon mitigation specialists, and development of a model code for municipalities requiring post construction radon testing of new homes.

Radon is a public health risk and the second leading cause of lung cancer after tobacco smoke.

Criteria Description: clearly describe how the proposed grant meets the following

- | | |
|---|--|
| 1 | Relieves Future Cost Pressures – addresses potential future government expenses
· funding for the initiative this year creates an opportunity to reduce government expenses
· funding the initiative this year supports a government/Ministry commitment |
| 2 | Supports Government Priorities and Ministry Strategic Plan – purpose of funding
· the proposed funding supports the Jobs, Families, and/or Open Government
· the proposed funding produces tangible/visible results (i.e., capital projects) |
| 3 | Value for Money – produces benefits for stakeholder(s), government, and/or the public
· clearly identifies the beneficiaries of the proposed funding and the extent of benefits
· the funding addresses a program/service gap or resolve an outstanding issue (i.e., service) |
| 4 | Meets Financial Accounting Rules and Accountability Relationship Established
· clearly articulates accountability provisions within the funding letter or agreement
· the correct language from the Office of the Comptroller General regarding accountability |
| 5 | Risks to Government are Managed – no major financial, accounting, legal, compliance, or reputational risks
· the recipient is a legal entity and familiar to the Ministry and has a positive track record
· the recipient have the capacity to carry out the project/initiative
· potential funding is consistent with past funding provided |
| 6 | On-going Commitment - this does not set a precedent or constitute a commitment for future funding |

From: Edwards, Bill B HLTH:EX
Sent: Monday, November 17, 2014 11:28 AM
To: Janke, Brenda G HLTH:EX
Subject: FW: Year End Expenditures

Here is what I was referring to. I think 2 of the items Tim's listed on the Word document are yours. What I need is a sentence or two for each of the 6 criteria.

OK? Need soon.....

B

From: Edwards, Bill B HLTH:EX
Sent: Thursday, November 13, 2014 11:14 AM
To: Zemanek, Michael HLTH:EX; Janke, Brenda G HLTH:EX; daphne.siddawaywolf@gov.bc.ca
Cc: Lambert, Tim HLTH:EX
Subject: Year End Expenditures

Tim asked me to send you the attached list of potential year end expenditures and request that you complete the attached spreadsheet (Expenditure Process Submission) providing the input relating to the 6 criteria for each expenditure. In addition, please add any additional potential year end expenditures not included in the list from Tim.

Could you please return this information to be by noon Monday (it is due to Finance on Tuesday)?

Many thanks.

Bill

Janke, Brenda G HLTH:EX

From: Edwards, Bill B HLTH:EX
Sent: Wednesday, November 19, 2014 11:03 AM
To: Janke, Brenda G HLTH:EX
Subject: 14/15 YE Funds
Attachments: Health Protection Expenditure Process Submission Template (1).xlsx

Hi Brenda

Got a question from the Finance folks. In the year end funding exercise,
s.12,s.13,s.17

And I need to get this in the next hour or so. If I don't hear from you I will make something up.....and you'll probably hate it!

Bill Edwards
Health Protection
Ministry of Health
bill.edwards@gov.bc.ca

Ministry of Health 2014/15 Year-End Expenditure Proposal and Review Process

Division Name: Population and Public Health
Branch: Health Protection

Expenditure Description (Rank Ordered)	Proposed Amount (\$ Millions)	s.13,s.17	Criteria 1	Criteria 2	Criteria 3	Criteria 4	Criteria 5	Criteria 6
1		s.13,s.17						
Identify radon 'hot spots' and develop mitigation and testing strategies - Recipient: BC Lung Association	1.0							

s.13,s.17

Page 009 to/à Page 011

Withheld pursuant to/removed as

s.13;s.17

Janke, Brenda G HLTH:EX

From: Janke, Brenda G HLTH:EX
Sent: Monday, February 23, 2015 11:45 AM
To: Paton, Arlene HLTH:EX; Lambert, Tim HLTH:EX
Subject: RE: Radon Testing

We do not have a formal proposal from them. They briefed us in the summer and included this for next year if there was funding:

New MOH funding

s.13,s.17

From: Paton, Arlene HLTH:EX
Sent: Monday, February 23, 2015 11:40 AM
To: Lambert, Tim HLTH:EX
Cc: Janke, Brenda G HLTH:EX
Subject: Re: Radon Testing

So is this all the detail we have from their proposal? Did they send in paper?

Regards,

Arlene Paton
Assistant Deputy Minister
Population and Public Health
Ministry of Health
(250) 952-1731

On Feb 23, 2015, at 11:26 AM, Lambert, Tim HLTH:EX <Tim.Lambert@gov.bc.ca> wrote:

Hi Arlene
This is what HP put forward on our request in November:
Identify radon 'hot spots' and develop mitigation and testing strategies - Recipient: BC Lung Association

The request supports the ministry's goal of: Effective health promotion, prevention and self-management to improve the health and wellness of British Columbians.

s.13,s.17

Tim

From: Paton, Arlene HLTH:EX
Sent: Monday, February 23, 2015 10:40 AM
To: Lambert, Tim HLTH:EX; Janke, Brenda G HLTH:EX
Subject: Re: Radon Testing

s.13,s.17

Regards,

Arlene Paton
Assistant Deputy Minister
Population and Public Health
Ministry of Health
(250) 952-1731

On Feb 23, 2015, at 10:24 AM, Sidhu, Manjit HLTH:EX <Manjit.Sidhu@gov.bc.ca> wrote:

s.13,s.17

(need this asap as MO is asking)

Manjit Sidhu, C.A.
Assistant Deputy Minister
Financial and Corporate Services
Ministry of Health

Janke, Brenda G HLTH:EX

From: Janke, Brenda G HLTH:EX
Sent: Monday, February 23, 2015 2:17 PM
To: Paton, Arlene HLTH:EX; Reicker, Terry HLTH:EX
Cc: Lambert, Tim HLTH:EX
Subject: s.13,s.17

s.13

From: Paton, Arlene HLTH:EX
Sent: Monday, February 23, 2015 1:47 PM
To: Reicker, Terry HLTH:EX
Cc: Lambert, Tim HLTH:EX; Janke, Brenda G HLTH:EX
Subject: s.13,s.17

s.13,s.17

Regards,

Arlene Paton
Assistant Deputy Minister
Population and Public Health
Ministry of Health
PO Box 9646 Stn Prov Govt
Victoria BC V8W 9P1
Tel: 250-952-1731

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From: Reicker, Terry HLTH:EX
Sent: Monday, February 23, 2015 1:39 PM
To: Paton, Arlene HLTH:EX
Cc: Lambert, Tim HLTH:EX; Janke, Brenda G HLTH:EX
Subject: s.13,s.17

Hi Arlene, here it is. I believe it is row 31 you are inquiring about.

From: Paton, Arlene HLTH:EX
Sent: Monday, February 23, 2015 1:35 PM
To: Reicker, Terry HLTH:EX
Cc: Lambert, Tim HLTH:EX; Janke, Brenda G HLTH:EX

Subject: s.13,s.17
Importance: High

s.13,s.17

Regards,

Arlene Paton
Assistant Deputy Minister
Population and Public Health
Ministry of Health
PO Box 9646 Stn Prov Govt
Victoria BC V8W 9P1
Tel: 250-952-1731

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Page 016

Withheld pursuant to/removed as

s.12;s.13

MEETING MATERIAL

Cliff #: 1024098

PREPARED FOR: Honourable Terry Lake, Minister of Health, for meeting on November 24, 2014, Minister's Office, Room 337, Parliament Buildings, Victoria, 10:15 am to 10:45 am.

TITLE: Minister of Health meeting with BC Lung Association (BCLA)

MEETING REQUEST/ISSUE: Scott McDonald, President and CEO, BCLA, requested the meeting to provide an update on BCLA and to discuss health-related issues such as radon gas, the wood stove exchange program, the Quit Now program and electronic cigarettes.

SHOULD MINISTRY STAFF ATTEND THIS MEETING: Yes. Meeting invitations have been forwarded to Lynn Stevenson, Associate Deputy Minister, Health Services, and Arlene Paton, Assistant Deputy Minister, Population and Public Health.

BACKGROUND:

The mission of the BCLA is to promote and improve lung health. BCLA has its headquarters in Vancouver and 35 volunteer directors throughout the province. Volunteers work provincially and regionally to educate, test, provide support and fundraise for lung health activities, with a primary focus on lung disease, tobacco use and air quality.

Radon

- Radon is a colourless, odourless, radioactive gas formed by the breakdown of naturally occurring uranium in soil. It collects in buildings where people live and work unless it is prevented from entering or is removed. Radon exposure is the leading cause of lung cancer among non-smokers, and triples the chance of developing lung cancer among smokers.
- November is national Radon Action Month.
- The Ministry of Health (the Ministry) provided a \$1 million grant to the BCLA in 2012 to develop a one-time Radon Prevention and Mitigation Plan. With this funding, the BCLA Radon Plan project team has achieved the following:

Public resources

- Legislative review – completed survey of radon legislation across North America.
- Website – launched <http://www.radonaware.ca/>, an information portal that provides radon resources including: radon articles; videos on radon testing and mitigation; and online sales of radon test kits.

Industry resources

- Education, training and incentive program – partnered with the Centre for Environmental Research and Technology, Inc. to offer an online radon testing and mitigation course.
- Radon pipe label – developed a warning sticker for use on all current and future radon mitigation systems. Labels are available through Canadian Home Builders Association and BCLA.

- Do-It-Yourself (DIY) radon book – developed a “Canadianized” DIY book for radon measurement and mitigation for homeowners and builders. The book is available for purchase through Amazon. A copy has been placed in all Area 1 libraries (60 copies).

Research projects

- Community-wide testing project – two projects were undertaken to test radon levels in new and existing homes in Castlegar and Prince George. In Prince George, 27 percent (136 homes) were found to have radon levels above 200 Bq/m³. In Castlegar, 59 percent (158 homes) were found to have radon levels above 200 Bq/m³. While individual home owners have received their home test results, reports on the community-wide testing results have not yet been publicly released.
- Code study – tested the effectiveness of radon reduction systems in new homes (built under the 2006 or 2012 code). Eight homes were tested in Prince George and eight were tested in Castlegar. The study found that provisions for radon mitigation in the BC Building Code (BCBC) were ineffective and recommended changes.
- Based on the results of the BCLA code study, the Building and Safety Standards Branch of the Office of Housing and Construction Standards updated the BCBC, requiring the installation of passive radon control systems in homes built in areas with high radon levels. This change takes effect in December 2014.

Wood stove exchange program

- Since 2008, the BC government has partnered with the BCLA to run the wood stove exchange program. The program provides a \$250 rebate on the purchase of a new woodburning, pellet or natural gas stove. To date, the Province has put over \$2.3 million towards the program, resulting in the purchase of over 6,000 cleaner burning models, equating to an estimated reduction of more than 370 tonnes of particulate matter in the air and benefitting air quality in the 27 communities that have participated.
- In 2014, the Province provided \$190,000 to 13 communities/regional districts. The goal is to have close to 630 stoves exchanged across the province this coming year.
- There are approximately 70,000 older model wood stoves still in use throughout the province.

Electronic Cigarettes (e-cigarettes)

- The evidence into the harms and benefits of e-cigarettes is very limited.
- The Government of BC is concerned about the impact these products may have on the developing bodies of children and youth or to non-users who do not want to be exposed to the chemicals in the vapour.
- This concern is reflected in the June 2014 mandate letter from Honourable Christy Clark, Premier of BC, to Honourable Terry Lake, Minister of Health, which directs the Minister to “work with the federal government to regulate the sale of e-cigarettes and flavoured tobacco to minors in British Columbia, or in the absence of a federal strategy, move to introduce legislation.” The Ministry is reviewing legislative options around e-cigarettes.

QuitNow Program

BCLA currently receives an annual grant of ^{s.17} they have requested multi-year funding for QuitNow so that they can avoid the uncertainty that comes with waiting to hear whether they have funds for the next year of operations until well past the start of fiscal. The Ministry is reviewing this request for the 2015/2016 fiscal year.

QuitNow's goal for 2014/15 is to reach about 30,900 BC smokers and recent quitters to ensure they stay tobacco-free. Main areas of actions are:

- User Services (Web Service, Phone Service Text Service, and Resource Development and Distribution - budget: ^{s.17})
- Increasing Reach (Workplace Cessation Workshops, QuitNow Awareness and Tobacco Cessation Presentations, Health Promoter Program, QuitNow Live Training, Leveraging Partnerships, Social Media and Communications. Earned Media Opportunities budget: ^{s.17})
- Quality Assurance (Evaluation, Monitoring and Privacy - budget: ^{s.17})

ADVICE:

This meeting is an opportunity for the BCLA to brief the Minister on its activities to support patients and prevent lung disease.

APPROVED BY: Arlene Paton, ADM, Population and Public Health

DATE APPROVED: November 18, 2014

Chan, Jennifer K HLTH:EX

From: HLTH PPH Documents Processing HLTH:EX
Sent: Friday, November 14, 2014 4:05 PM
To: Benson, Stacey HLTH:EX; Codner, Tamara A HLTH:EX; Nisbet, Corinna HLTH:EX; Herman, Matt HLTH:EX; Canitz, Shelley L HLTH:EX; Lambert, Tim HLTH:EX; Janke, Brenda G HLTH:EX
Cc: Cowan, Darynn HLTH:EX; HLTH PPH Documents Processing HLTH:EX
Subject: 1024098 FW: Material for Nov 24: Minister meeting with the BC Lung Association (x ref #1023196)
Attachments: FW: Lung Association Request for a Meeting With Minister Lake; Meeting Material.docx
Importance: High

Hello everyone,

As eApprovals is not allowing me to do anything with these assignments, I am assigning via email and hoping to be able to send the eApprovals on Monday. The eApproval/ cliff number is 1024098. The MO is expecting this on the 20th. This is due to the ADMO on the 18th.

HL: Quit Now and E-Cigs

HP: Radon and woodstoves

Thanks,

Arlene Chan

Documents Coordinator | Assistant Deputy Minister's Office, Population and Public Health
250-952-1447

From: Cowan, Darynn HLTH:EX
Sent: Thursday, November 13, 2014 3:58 PM
To: Lambert, Tim HLTH:EX; Herman, Matt HLTH:EX
Cc: Canitz, Shelley L HLTH:EX; HLTH PPH Documents Processing HLTH:EX; Benson, Stacey HLTH:EX; Janke, Brenda G HLTH:EX
Subject: Material for Nov 24: Minister meeting with the BC Lung Association (x ref #1023196)
Importance: High

Just a heads up that there will be a request for meeting material for this meeting coming shortly however eApps is still down – material will be due in MO next Thursday so need a quick turnaround. I understand they want to discuss the following...pls start drafting and material can be uploaded later. (I will be confirming staffing with Arlene next week)

- Radon gas
- Woodstoves
- Quit Now
- E-Cigs

Thx so much!

From: Casanova, Tamara HLTH:EX
Sent: Thursday, November 13, 2014 12:00 PM
To: Cowan, Darynn HLTH:EX; Marsh, Jania HLTH:EX
Cc: Foran, Grace E HLTH:EX; Docs Processing HLTH:EX; O'Callaghan, Jacqueline HLTH:EX
Subject: Nov 24: Minister meeting with the BC Lung Association (x ref #1023196)
Importance: High

Hi Darynn,

As discussed this morning, please be advised the MO has now confirmed a meeting with the BC Lung Association. Details are below.

Date: Monday, November 24th
Time: 10:15 to 10:45 am
Location: Minister's Office, Room 337 (Parliament Buildings, Victoria)

Calendar invites will be sent to Lynn and Arlene to attend. Please advise if any additional staff will need to be included.

Materials: DocsProcessing will assign formally for materials as per usual process. Due date for final materials to the MO is Thursday, November 20.

Please don't hesitate to give me a call if there are any concerns.

Thank you,
Tamara

Tamara Casanova | Executive Operations | Office of the Deputy Minister | Ministry of Health | P: 250.952.1908 | C: 250.217.3655 | F: 250.952.1909 | tamara.casanova@gov.bc.ca

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From: outlook_6d6349eb52dd856f@outlook.com [mailto:outlook_6d6349eb52dd856f@outlook.com] **On Behalf Of** Scott McDonald
Sent: October-24-14 10:52 AM
To: Loiacono, Sabrina HLTH:EX
Subject: Lung Association Request for a Meeting With Minister Lake

Dear Sabrina,

I am writing to respectfully request a meeting with Minister Lake at a convenient time on Monday, November 24th at your office in Victoria.

We would greatly appreciate it if the Minister could afford us some time on November 24th because the BC Lung Association is in Victoria on that day meeting with the Government Caucus and a number of other Cabinet Ministers; so any time you could provide us on that day would be greatly appreciated.

The purpose of this meeting is to provide the Minister with an update on the BC Lung Association, and discuss health related issues such as radon gas, the wood stove reduction program, the Quit Now program and electronic cigarettes.

The BC Lung Association began as the Anti-Tuberculosis Society in 1906 in response to the rapid spread of TB, the number one killer at the turn of the century. In July 1978, the Society changed its name to the BC Lung Association, and now focuses on the entire scope of respiratory disease including asthma, COPD (chronic bronchitis and emphysema), lung cancer, sleep apnea and tuberculosis. A non-profit and volunteer-based health charity, The BC Lung Association depends on donations from the public to support lung health research, education, prevention and advocacy.

Please feel free to contact me at (604) 731-5864, if you have any questions. Thank you in advance for your time and consideration.

Scott McDonald
President and CEO
BC Lung Association
2675 Oak Street
Vancouver, BC Canada
V6H 2K2

Office (604) 731-5864
Mobile (604) 603-5864
Fax (604) 731-5810
email: mcdonald@bc.lung.ca



From: [Reicker, Terry HLTH:EX](#)
To: [Canitz, Shelley L HLTH:EX](#)
Subject: **s.12,s.13,s.17**
Date: Thursday, April 3, 2014 12:07:28 PM

Nope, haven't heard a peep about this year.

From: Canitz, Shelley L HLTH:EX
Sent: April-03-14 12:06 PM
To: Reicker, Terry HLTH:EX
Subject: **s.12,s.13,s.17**
Shelley Canitz
Director, Tobacco Control and Injury Prevention
Healthy Living Branch Population and Public Health Division Ministry of Health
250 952 2304

From: [Reicker, Terry HLTH:EX](#)
To: [Canitz, Shelley L HLTH:EX](#)
Subject: RE: QuitNow Grant for 2014-2015
Date: Friday, April 25, 2014 4:15:10 PM
Attachments: [image001.jpg](#)

I have sent a note to Budgets to prompt for info on grants...in particular the QuitNow one.

From: Canitz, Shelley L HLTH:EX
Sent: April-25-14 2:31 PM
To: Reicker, Terry HLTH:EX
Subject: FW: QuitNow Grant for 2014-2015
[Any word?](#)

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]

Sent: April-25-14 2:19 PM

To: Canitz, Shelley L HLTH:EX

Subject: QuitNow Grant for 2014-2015

Hi Shelley,

By the way, has there been any word about the grant for BC Lung for cessation work for 2014/15?

Thanks,

Suzanne Gaby

Manager, QuitNow Services

BC Lung Association

2675 Oak Street

Vancouver, BC V6H 2K2

Tel 250.655.1983

Fax 250.721.4205

[quitnowblue_small](#)



Janicker, Maria HLTH:EX

From: Suzanne Gaby <sgaby@contextresearch.ca>
Sent: Friday, April 25, 2014 3:47 PM
To: Canitz, Shelley L HLTH:EX
Subject: RE: QuitNow Grant for 2014-2015

Thanks for checking.

Enjoy your weekend,

Suzanne

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]
Sent: April-25-14 3:10 PM
To: Suzanne Gaby
Subject: RE: QuitNow Grant for 2014-2015

No but I will let you know when we do. I have been checking – just nothing to report yet

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]
Sent: April-25-14 2:19 PM
To: Canitz, Shelley L HLTH:EX
Subject: QuitNow Grant for 2014-2015

Hi Shelley,

By the way, has there been any word about the grant for BC Lung for cessation work for 2014/15?

Thanks,

Suzanne Gaby
Manager, QuitNow Services
BC Lung Association
2675 Oak Street
Vancouver, BC V6H 2K2
Tel 250.655.1983
Fax 250.721.4205



From: [Canitz, Shelley L HLTH:EX](#)
To: [White, Stacy HLTH:EX](#); [Scalzo, Lee G HLTH:EX](#)
Subject: FW: 140515 QuitNow Report 2013 2014 FINAL Ministry
Date: Tuesday, May 20, 2014 2:31:00 PM
Attachments: [image003.jpg](#)
[140515 QuitNow Report 2013 2014 FINAL Ministry.docx](#)

Stacy – please review for a sense of the work QN does. Lee, any issues that you see with the numbers?

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]
Sent: May-15-14 8:20 AM
To: Canitz, Shelley L HLTH:EX
Cc: 'Scott McDonald'; 'Jack Boomer'
Subject: 140515 QuitNow Report 2013 2014 FINAL Ministry

Good Morning Shelley,

I have attached the QuitNow Report for 2013-2014. Please let me know if you have any questions or need further details in the report. The BC Lung/QuitNow team has developed a draft strategic plan for the current fiscal year which will get finalized once we know the specifics for the grant for this year. It has been a pleasure working with you and your team at the Ministry over the past year and look forward to increasing success in the coming year.

Kind regards,

Suzanne Gaby

Manager, QuitNow Services

BC Lung Association

2675 Oak Street

Vancouver, BC V6H 2K2

Tel 250.655.1983

Fax 250.721.4205

[quitnowblue_small](#)



BC Lung Association QuitNow Final Report

April 2013 – March 2014

Introduction: The BC Lung Association receives a grant from the Ministry of Health to provide cessation services to British Columbians. The BC Lung Association has developed QuitNow to support British Columbians to quit smoking. This report outlines activities that have occurred between April 2013 and March 2014.

In 2013/14, QuitNow required the support of several service providers. Overall, QuitNow is managed by Context Research; Phone service is supported by Sykes Assistance Services; Online and TEXT service is supported by Smallbox Inc.; graphic design is supported by variety of sub-contractors; social media expertise is supported by Junction Inc.; resource distribution is supported by Rebel Communications, and evaluation/analytics by Feltracco Consulting and SR Innovations.

Category	Description and Highlights for 2013/2014	Budget	Expenditure
Core Services	Web Service <ul style="list-style-type: none"> The primary gateway for clients to access the core services and tools offered by QuitNow. Includes: My Quit Centre homepage, Interactive Quit Plan, Expert Chat service, Quit Coach Moderated Forum, Quit Stats Tracker, Personalized Milestone Certificates, Text and Video Stories, Downloadable resources, Directory of Local Programs and an Online Order Form for print material Highlights 2013/2014 <ul style="list-style-type: none"> ❖ Shortened registration finalized in April 2013 ❖ Launched refreshed website and new navigation May 2013 ❖ Launched the online referral form for healthcare providers ❖ Partnered with the Harmonization Project in the North to add Stop Smoking Before Surgery content onto the website ❖ Completed an audit on conversions for subscriptions ❖ Revised My Quit Centre to improve subscriptions Sept 2013 ❖ Launched another revision of the registration on Dec 11, 2013 ❖ Partnered with UBC on QuitNow Men's microsite (pilot development to June 2014 and then launch January 2015) 	s.17	
	Phone Service <ul style="list-style-type: none"> Free tobacco cessation phone coaching serviced by Care Coaches or Assistants 24/7. Offered to all smokers in BC. Clients can access the phone service by calling 8-1-1 or 1-877-455-2233, registering through www.quitnow.ca or receiving a proactive call after a referral from their healthcare provider. Extra budget is assigned to the phone service in order to cover any unexpected call volume. Highlights 2013/2014 <ul style="list-style-type: none"> ❖ Extracted intake data from the Care Coach application in order to begin the Health Canada evaluation of the Quitline May 2013 ❖ Integrated CareCoaches into Forum & Facebook moderation ❖ Launched the expanded 8-call service with interactive voice response technology in November 2013. This was done in consultation with the NAQC and Health Authorities 		s.17

Category	Description and Highlights from 2013/2014	Budget	Expenditure
Core Services (cont.)	Text Service <ul style="list-style-type: none"> A 14-week motivational text messaging service that can be accessed using a short code through a cell phone or through an online registration process. Highlights 2013/2014 <ul style="list-style-type: none"> ❖ The text service has seen a healthy growth in registration since the changes were made to improve the profile of the subscription section ❖ Discussions to develop targeted programming for 2014/2015 	s.17	
	Resource Development & Distribution <ul style="list-style-type: none"> Development and distribution of branded resources that promote the core services and help smokers quit smoking. Distributed through an online order form that is promoted to stakeholders and healthcare providers throughout the province Extra budget is assigned for resource distribution as the volume of online orders can't be accurately predicted from one year to another. Highlights 2013/2014 <ul style="list-style-type: none"> ❖ Completed the QuitNow Branding Guidelines to assist with the development of a consistent look and feel for QuitNow ❖ Created the QuitNow PowerPoint Presentation template ❖ Created the rack card, general business, General Smart Step, Youth Smart Steps and the Aboriginal Smart Steps to align with new Branding Guidelines ❖ Translated rack cards in a downloadable format ❖ Revised the retractable banners to align with the new rack cards 	s.17	

Category	Description and Highlights for 2013/2014	Budget	Expenditure
Increasing Reach	Health Promoters <ul style="list-style-type: none"> Health Promoters are locally contracted personnel who can increase the reach of QuitNow throughout the province by making personal contact with healthcare providers, employers, pharmacists, Aboriginal communities and tobacco stakeholders. Highlights for 2013/2014 <ul style="list-style-type: none"> ❖ Reached 70% of pharmacies in BC with information about QuitNow (724 of 1035) with 607 in-person visits of which 255 disclosed they had never heard of QuitNow ❖ Reached dental health professionals through six lunch & learn office visits and spoke with 280 of the 12,700 attendees at the annual Pacific Dental Conference (either at the exhibit table or in one of the sessions). Working with the UBC Dental Clinic to integrate QuitNow referrals into the clinic ❖ Made personal contact through the delivery of thank you card and recognition certificates to more than 75% of those who have previously referred to QuitNow. 377 certificates and thank you cards delivered with 152 of them hand-delivered ❖ Reached more than 55 Aboriginal health representatives/organizations through meetings/presentations/exhibits throughout the province ❖ Responded to an increase demand for service in remote communities which are resource intensive 	s.17	
	Health Promoters: Workplace Cessation Workshops <ul style="list-style-type: none"> Health promoters will continue to facilitate Workplace Cessation Workshops with large employers and municipalities to help them develop a workplace tobacco cessation plan that integrates a process for referring to QuitNow as a key component. Human resource personnel are the target group for the workshops. Highlights for 2013/2014 <ul style="list-style-type: none"> ❖ Completed workplace Cessation workshops/presentations/meetings with 32 municipalities throughout the province ❖ Completed workplace cessation workshops/presentation or meeting with more than 25 different medium to large organizations. The sectors included: education, hospitality, oil/gas, telecommunications, health, shipping, insurance, and grocery 		
	Health Promoters: QuitNow Pharmacist Training <ul style="list-style-type: none"> QuitNow will continue to reach and train pharmacists to make referrals to QuitNow using the fax referrals. Highlights for 2013/2014 <ul style="list-style-type: none"> ❖ Reached new communities with Pharmacist training included: Cranbrook, Nanaimo, Victoria, Abbotsford, Squamish ❖ Launched webinar booster sessions for pharmacists trained by QuitNow or the Catalyst program ❖ Completed nine QuitNow Pharmacist Training sessions ❖ Encouraged other healthcare providers to participate when capacity was available 		

Category	Description and Highlights for 2013/2014	Budget	
Increasing Reach (cont.)	Health Promoters: Leveraging Partnerships <ul style="list-style-type: none"> QuitNow can increase reach to more smokers by leveraging our stakeholder partnerships. HealthLinkBC, Canadian Cancer Society's Wellness Fits Program, researchers, hospitals and Regional Collaboratives are examples. Highlights 2013/2014 <ul style="list-style-type: none"> ❖ Presented to the BC Medical Association Prevention Committee ❖ Reached out 50% of the Divisions of Family Practice in the province ❖ Worked closely with the Northern Harmonization Committee on the Stop Smoking Before Surgery Project ❖ Connected with Aboriginal leadership within the First Nations Health Authority to facilitate connection with local Hub coordinators and health directors ❖ Worked closely with the Canadian Cancer Society through regular meetings to ensure small to large workplaces had support to integrate tobacco cessation into their wellness plans ❖ Partnered with UBC researchers in developing the QuitNow Men's Website ❖ Supported the champions with RebalanceMD Clinic to integrate tobacco cessation into their clinic ❖ Presented to all the Health Service Representatives at HealthLinkBC to encourage ongoing referrals to QuitNow ❖ Facilitated regular teleconference updates for provincial stakeholders 		
	Social Media and Communications <ul style="list-style-type: none"> Use social media venues and other communications strategies to engage with and expand reach to British Columbians who struggle with their tobacco use. Highlights 2013/2014 <ul style="list-style-type: none"> ❖ Completed an Analytics Dashboard in collaboration with an analytics consultant ❖ Shared findings about Facebook at the National Conference, with the Ministry of Health staff and with provincial stakeholders ❖ Reached over 11,000 likes on the QuitNow Facebook page ❖ Launched a successful Facebook Selfie Contest in February ❖ Continued with the monthly Tobacco Free Tuesday Contest with 4580 entries with an average of 380 per month ❖ Received an average of 2 media opportunities per month as a result of the profile of BC Lung as a leader in tobacco cessation (e-cigarettes, flavoured tobacco, NNSW) 	s.17	

Category	Description and Highlights for 2013/2014	Budget	Expenditure
Quality Assurance	Evaluation, Monitoring & Privacy <ul style="list-style-type: none"> In order to provide a quality service for smokers and other tobacco cessation stakeholders in BC, QuitNow integrates privacy protection, measurable metrics and evaluation into all initiatives Highlights 2013/2014 <ul style="list-style-type: none"> ❖ Developed Analytics Dashboard for Facebook ❖ Finalized Google Analytics Dashboard for QuitNow.ca ❖ Surveyed Facebook participants for greater insight ❖ Surveyed Pharmacy Training Participants for greater insight ❖ Supported the evaluation work being done by EKOS on behalf of Health Canada ❖ Monitored privacy issues on a monthly basis ❖ Monitored monthly targets for registration to the services 	s.17	
Admin	BC Lung Administration Fee (includes grant and Health Canada contributions)		s.17
TOTAL	Total Expenditures		s.17

Summary 2013/14 Revenue and Expenses

2013/14 Revenue	Revenue Totals	Expenditure Totals
Deferred Revenues from previous year	s.17	
2013/14 Grant		
Health Canada Additional calls/on-line requests (transfer under agreement from Ministry of Health invoicing Jul + Nov 2013)		
PHSA-Stop Smoking Before Surgery reimbursement		
Total Revenue		
2013/14 Expenditures (from tables above)		s.17
Carry forward for 2014/15 fiscal year	s.17	
Commitments to the end of June 2014		
Remainder for July 2014-March 31, 2014		

From: [Scalzo, Lee G HLTH:EX](#)
To: [White, Stacy HLTH:EX](#)
Subject: RE: BC Lung 2014-15 - Transfer Agreement - **s.12,s.17**
Date: Tuesday, May 27, 2014 2:19:42 PM

you are correct... 4(b) can be deleted and all the following numbering changed. You may want to check with Shelley to see if she wants any new reporting added. **s.13**
s.13

From: White, Stacy HLTH:EX
Sent: Tuesday, May 27, 2014 12:04 PM
To: Scalzo, Lee G HLTH:EX
Subject: BC Lung 2014-15 - Transfer Agreement - **s.12,s.17**

Hi Lee –

I have completed the 2014/15 grant template using the new template form.
I hope you are able to quickly review this. (I just imported old info).

There were a few items that I wasn't sure about so I left them highlighted in yellow.
I am pretty sure 4(b) can be deleted and this can be adjusted to reflect this. I have replaced all 'Projects' with 'Programs'.

Let me know if you have any thoughts?

Stacy

Page 033 to/à Page 041

Withheld pursuant to/removed as

s.13

BC Lung Association Final QuitNow Plan

April 2014-March 2015

Introduction: The BC Lung Association receives funds from the Ministry of Health to provide cessation services to British Columbians. The BC Lung Association has developed QuitNow, a provincial program, with the intent of supporting British Columbians in their quit.

The following plan outlines the direction for QuitNow for 2014/2015. QuitNow strives to be on the cutting edge of cessation work. As such, priorities are based on ongoing evaluation, research into QuitNow's user base and trends in tobacco control. This tentative plan is subject to change based on government priorities as per discussions with Ministry of Health Tobacco Control Program.

QuitNow Goal: To provide a variety of evidence-based supports and services to approximately 30,900 (6% of 515,000) smokers and recent quitters in BC during 2014-2015.

Category	Description, Ongoing Management and Planned Direction	Budget
User Services	Web Service The primary gateway for clients to access the core services and tools offered by QuitNow. Includes: My Quit Centre homepage, Interactive Quit Plan, Expert Chat service, Quit Coach Moderated Forum, Quit Stats Tracker, Personalized Milestone Certificates, Text and Video Stories, Downloadable resources, Directory of Local Programs and an Online Order Form for print material.	s.17
	Ongoing Management	
	❖ Updates to content using best and emerging practices and emerging practice; assist registrants with issues; create new polls; refresh images; respond to needs of stakeholders; monitor progress towards targets through analytics; work closely with website service provider (Amira) to ensure changes are made based on improving the clients experience and health outcomes.	
	Planned Direction	
	❖ Integrate evaluation follow-up survey at 7-months into website ❖ Upgrade automated email messaging ❖ Streamline referral process ❖ Make our quit plan tool more instructive, effective, and interactive ❖ Develop a QuitNow mobile site to meet the specific needs of quit-ready males age 19 to 45. ❖ Make our quit coaches – and their importance - more visible to end users ❖ Explore expanding forum discussion to include other provinces to help drive participation ❖ Enhance QuitNow website for healthcare providers ○ Includes the ability for providers to track activity of patients/clients referred	
	Key Performance Indicator	
	❖ Track monthly number of unique users (anonymous or registered) who come to QuitNow website	
	❖ Track monthly number of participants in the community forums each month	
	❖ Track monthly number of milestone certificate downloads	

Category	Description, Ongoing Management and Planned Direction	Budget
User Services	<p>Phone Service Free tobacco cessation phone coaching serviced by Care Coaches or Assistants 24/7. Eight-call series that integrates interactive voice response technology is offered to all smokers in BC. Clients can access the phone service by calling 8-1-1 or 1-877-455-2233, registering through www.quitnow.ca or receiving a proactive call after a fax referral from their healthcare provider.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Weekly teleconference with service provider (Sykes); generating reports; monitoring engagement; monitoring quality assurance; responding to client issues/questions; reporting out to stakeholders; monitoring forum within web-service; reviewing expert chat logs; participating in Health Canada evaluation <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Enhance the feedback loop to referral agents ❖ Integrate evaluation follow-up at 7-month ❖ Pilot group quit coaching using teleconferencing technology ❖ Improve the reporting system to ensure they meet funders' needs <p>Key Performance Indicators</p> <ul style="list-style-type: none"> ❖ Track percentage of conversion of referrals to at least one counselling session 	s.17
	<p>Text Service A 14-week motivational text messaging service that can be accessed using a short code through a cell phone or through an online registration process</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Updating messages based on best practices; creating new targeted messages; monitoring engagement; responding to client issues/questions; processing of invoices. <p>Planned Enhancements</p> <ul style="list-style-type: none"> ❖ Promote short code registration to decrease barriers ❖ Complete a literature review on the developments in text messaging ❖ Tailor and personalize messages ❖ Extend the messages for the maintenance period ❖ Increase interactivity ❖ Integrate evaluation ❖ Review engagement with text program, including assessment of customized keywords used <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track number of users who sign and complete 14-week text service 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
User Services	<p>Resource Development & Distribution Development and distribution of branded resources that promote the core services and help smokers quit smoking.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Update content and images on current resources section of the website; design resources to meet our target audience needs; seek input on resources from stakeholders; review resources to ensure they meet brand guidelines; manage inventory; update and maintain the online order system; budgeting and invoicing <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Update QuitNow Live material with input from David Forbes ❖ Create a Smart Steps booklet for Family & Friends ❖ Explore resources that are useful for healthcare providers ❖ Explore refreshing promotional items (swag) <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Ability to provide resources to health promoters and healthcare providers upon request over 90% of the time. 	s.17
Increasing Reach	<p>Workplace Cessation Workshops Health promoters will continue to facilitate Workplace Cessation Workshops with large employers and municipalities to help them develop a workplace tobacco cessation plan that includes referrals to QuitNow as a key component of plan. Human resource personnel are the target group for the workshops.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Respond to requests from workplaces; organize logistics; inventory management of print material; generate reports; regular meetings with Wellness Fits; monitor progress; revise material based on feedback <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Maintain a presence in workplace cessation but not active promotion <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Respond to 100% of requests for assistance with workplace cessation. <p>QuitNow Awareness and Tobacco Cessation Presentations QuitNow is regarded as the provincial expert in tobacco cessation. As a result health promoters receive requests and find opportunities to present to diverse groups on various cessation topics.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Respond to requests and leverage opportunities that are presented by partners and stakeholders; customize powerpoints for the audience; seek feedback to improve presentations; enhance knowledge base through educational opportunities to maintain expertise of health promoters <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Address perceived lack of confidence in cessation interventions among doctors through presentations to Divisions of Family Practice ❖ Raise awareness of QuitNow through regional service groups like Rotary ❖ Conduct 1 hour presentations with healthcare providers prior to their graduation from post-secondary programs <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Respond to 100% of requests that have the potential to raise awareness of QuitNow & tobacco cessation among professionals who care for smokers. 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Health Promoter Program Health Promoters are local contractors who are responsible for increasing the reach of QuitNow throughout the province by making personal contact with healthcare providers, employers, pharmacists, Aboriginal communities, those at-risk for developing COPD and tobacco stakeholders.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Hire new promoters; negotiate yearly contracts; provide mentorship; human resource management; workload management; budgeting; monthly invoicing; inventory control; generating leads/opportunities; update templates & guidelines; ensure quality assurance; problem-solving; monitor progress towards targets <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Leverage relationships with pharmacy cessation champions to identify new training opportunities ❖ Promote QuitNow at dental conferences and divisions of family practice ❖ Make personal contact with healthcare providers actively referring patients to QuitNow ❖ Provide intensive support to larger clinics that have champions <p>Key Performance Indicators</p> <ul style="list-style-type: none"> ❖ Increase the number of fax or online referrals by healthcare providers by 5% each month compared to the same month in the previous year 	(continued from above)
	<p>QuitNow Live Training QuitNow will continue to reach and train pharmacists and other healthcare providers to make referrals to QuitNow using fax and online referrals.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Generate interest in training; meet with pharmaceutical representatives; meet with pharmacy representatives; scheduling of facilitator; organize logistics; inventory management of print material; generate reports; budgeting; invoicing; monitoring and evaluating progress <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Reach into “quit ready” communities that have been identified by partners ❖ Enhance QuitNow accredited cessation training so it appeals to healthcare providers beyond pharmacists ❖ Offer booster sessions to past trained pharmacists and other healthcare providers that need practical help ❖ Survey past participants <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Increase the number of fax or online referrals by healthcare providers by 5% each month compared to the same month in the previous year 	

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Leveraging Partnerships QuitNow can increase reach to more smokers by leveraging our partnerships with stakeholders and those who intervene with smokers.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Schedule meetings; prepare minutes; report on progress; minimize duplication of efforts; ensure regular contact with local tobacco cessation researchers; provide data and feedback when requested; partner on research projects that fill a knowledge gap for tobacco cessation; ensure the QuitNow brand is used consistently by research partners <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Work more closely with membership organizations to find ways to use their expertise and expand reach (e.g. BCMA, BCNU, Dental, Dental Hygienists etc.) ❖ Explore the interest and readiness for an Opt to Quit pilot that could be implemented in clinics, hospitals or entire health authorities. ❖ Continue to strengthen relationships with Aboriginal health leadership to better support Aboriginal smokers to quit <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ The identification of one new key partnership which has been established over the course of the 2014/15 fiscal year. 	(continued from above)
	<p>Social Media and Communications Use social media venues and other communications strategies to engage with and expand reach to British Columbians who are struggling to quit.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Schedule tweets; Post messages and moderate Facebook; plan ad campaigns on Google and Facebook; monitor insights & analytics; adjust plan based on outcomes; respond to client issues/questions; manage monthly Tobacco Free Tuesdays contest and generate online surveys; report generation; monitor progress towards targets <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Develop a Social Media Guideline & Communication Strategy Plan ❖ Create and promote a female user focused contest in May 2014 (World No Tobacco Day, May 31) ❖ Build Coach awareness into the social media platforms ❖ Revitalize QuitNow's contest entry page to include a refer a friend component ❖ Create and promote a male user focused promotion for January 2015 (National Non-Smoking Week) ❖ Leverage theme days/weeks/months and other events through Facebook mini-campaigns and news release ❖ Dig deeper into existing Facebook Survey data to find more insights and ideas for improvement <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Increase engagement on the QuitNow Facebook page and increase community by 20% ❖ Increase number of contest registrations through our new online contest referral system 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Earned Media Opportunities Identify opportunities to promote QuitNow and the BC Lung Association through media-worthy announcements</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Identify opportunities for earned media; pitch stories to press; write press releases; identify potential high-profile projects <p>Potential Opportunities</p> <ul style="list-style-type: none"> ❖ World No Tobacco Day contest ❖ Men's website launch timed with a pre-January National Non-Smoking Week promotion ❖ Profile a quit coach who is an ex-smoker now providing cessation services ❖ Announce sponsors (prize or otherwise) who make large commitments to 'Help B.C. QUIT' ❖ Leverage social themes/theme days (Earth Day, Mother's Day) to drive soft news on reasons to quit and stay quit. Could associate mini-contest/incentive campaigns. ❖ Industry journals or newsletters ❖ New partnerships with large organizations (ex. BCMA, BCNU) <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track number of cases of outside organizations promoting QuitNow 	(continued from above)
Quality Assurance	<p>Evaluation, Monitoring & Privacy In order to provide a quality service for smokers and other tobacco cessation stakeholders in BC, QuitNow integrates privacy protection, measurable metrics and evaluation into all initiatives</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Weekly calls with service providers; service reports; social media reports; review of Facebook Insight; review of Google Analytics; Tobacco Free Tuesday online survey and report; monthly target reporting; year-end reporting <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Assist Health Canada/EKOS Research with the evaluation of the Quitline and website ❖ Fine tune the analytics dashboard for the website ❖ Conduct 10-year retrospective evaluation ❖ Integrate 7-month data gathering into phone and website ❖ Develop new system for evaluating the txt program ❖ Conduct a Privacy Compliance Review for all services ❖ Explore establishing a QuitNow Advisory Council that includes stakeholders, ex-smokers and quit coaches. ❖ Make use of A/B testing through Optimizely.com to assist with piloting new ideas on the website and social media <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ The ability to report progress QuitNow is having on providing evidence-based cessation support and services to BC smokers. 	s.17
QuitNow Budget		s.17
BC Lung Admin fee		
Total Grant Received in 2014/2015 from MOH		

**BC Lung Association
Final QuitNow Plan****April 2014-March 2015**

Introduction: The BC Lung Association receives funds from the Ministry of Health to provide cessation services to British Columbians. The BC Lung Association has developed QuitNow, a provincial program, with the intent of supporting British Columbians in their quit.

The following plan outlines the direction for QuitNow for 2014/2015. QuitNow strives to be on the cutting edge of cessation work. As such, priorities are based on ongoing evaluation, research into QuitNow's user base and trends in tobacco control. This tentative plan is subject to change based on government priorities as per discussions with Ministry of Health Tobacco Control Program.

QuitNow Goal: To provide a variety of evidence-based supports and services to approximately 30,900 (6% of 515,000) smokers and recent quitters in BC during 2014-2015.

Category	Description, Ongoing Management and Planned Direction	Budget
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User Services	<p>Web Service</p> <p>The primary gateway for clients to access the core services and tools offered by QuitNow. Includes: My Quit Centre homepage, Interactive Quit Plan, Expert Chat service, Quit Coach Moderated Forum, Quit Stats Tracker, Personalized Milestone Certificates, Text and Video Stories, Downloadable resources, Directory of Local Programs and an Online Order Form for print material.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Updates to content using best and emerging practices and emerging practice; assist registrants with issues; create new polls; refresh images; respond to needs of stakeholders; monitor progress towards targets through analytics; work closely with website service provider (Amira) to ensure changes are made based on improving the clients experience and health outcomes. <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Integrate evaluation follow-up survey at 7-months into website ❖ Upgrade automated email messaging ❖ Streamline referral process ❖ Make our quit plan tool more instructive, effective, and interactive ❖ Develop a QuitNow mobile site to meet the specific needs of quit-ready males age 19 to 45. ❖ Make our quit coaches – and their importance – more visible to end users ❖ Explore expanding forum discussion to include other provinces to help drive participation ❖ Enhance QuitNow website for healthcare providers <ul style="list-style-type: none"> ○ Includes the ability for providers to track activity of patients/clients referred <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track monthly number of unique users (anonymous or registered) who come to QuitNow website ❖ Track monthly number of participants in the community forums each month ❖ Track monthly number of milestone certificate downloads 	<p>s.17</p>
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Category	Description, Ongoing Management and Planned Direction	Budget
User Services	<p>Phone Service Free tobacco cessation phone coaching serviced by Care Coaches or Assistants 24/7. Eight-call series that integrates interactive voice response technology is offered to all smokers in BC. Clients can access the phone service by calling 8-1-1 or 1-877-455-2233, registering through www.quitnow.ca or receiving a proactive call after a fax referral from their healthcare provider.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Weekly teleconference with service provider (Sykes); generating reports; monitoring engagement; monitoring quality assurance; responding to client issues/questions; reporting out to stakeholders; monitoring forum within web-service; reviewing expert chat logs; participating in Health Canada evaluation <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Enhance the feedback loop to referral agents ❖ Integrate evaluation follow-up at 7-month ❖ Pilot group quit coaching using teleconferencing technology ❖ Improve the reporting system to ensure they meet funders' needs <p>Key Performance Indicators</p> <ul style="list-style-type: none"> ❖ Track percentage of conversion of referrals to at least one counselling session 	s.17
	<p>Text Service A 14-week motivational text messaging service that can be accessed using a short code through a cell phone or through an online registration process</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Updating messages based on best practices; creating new targeted messages; monitoring engagement; responding to client issues/questions; processing of invoices. <p>Planned Enhancements</p> <ul style="list-style-type: none"> ❖ Promote short code registration to decrease barriers ❖ Complete a literature review on the developments in text messaging ❖ Tailor and personalize messages ❖ Extend the messages for the maintenance period ❖ Increase interactivity ❖ Integrate evaluation ❖ Review engagement with text program, including assessment of customized keywords used <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track number of users who sign and complete 14-week text service 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
User Services	<p>Resource Development & Distribution Development and distribution of branded resources that promote the core services and help smokers quit smoking.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Update content and images on current resources section of the website; design resources to meet our target audience needs; seek input on resources from stakeholders; review resources to ensure they meet brand guidelines; manage inventory; update and maintain the online order system; budgeting and invoicing <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Update QuitNow Live material with input from David Forbes ❖ Create a Smart Steps booklet for Family & Friends ❖ Explore resources that are useful for healthcare providers ❖ Explore refreshing promotional items (swag) <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Ability to provide resources to health promoters and healthcare providers upon request over 90% of the time. 	s.17
Increasing Reach	<p>Workplace Cessation Workshops Health promoters will continue to facilitate Workplace Cessation Workshops with large employers and municipalities to help them develop a workplace tobacco cessation plan that includes referrals to QuitNow as a key component of plan. Human resource personnel are the target group for the workshops.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Respond to requests from workplaces; organize logistics; inventory management of print material; generate reports; regular meetings with Wellness Fits; monitor progress; revise material based on feedback <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Maintain a presence in workplace cessation but not active promotion <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Respond to 100% of requests for assistance with workplace cessation. <p>QuitNow Awareness and Tobacco Cessation Presentations QuitNow is regarded as the provincial expert in tobacco cessation. As a result health promoters receive requests and find opportunities to present to diverse groups on various cessation topics.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Respond to requests and leverage opportunities that are presented by partners and stakeholders; customize powerpoints for the audience; seek feedback to improve presentations; enhance knowledge base through educational opportunities to maintain expertise of health promoters <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Address perceived lack of confidence in cessation interventions among doctors through presentations to Divisions of Family Practice ❖ Raise awareness of QuitNow through regional service groups like Rotary ❖ Conduct 1 hour presentations with healthcare providers prior to their graduation from post-secondary programs <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Respond to 100% of requests that have the potential to raise awareness of QuitNow & tobacco cessation among professionals who care for smokers. 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Health Promoter Program Health Promoters are local contractors who are responsible for increasing the reach of QuitNow throughout the province by making personal contact with healthcare providers, employers, pharmacists, Aboriginal communities, those at-risk for developing COPD and tobacco stakeholders.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Hire new promoters; negotiate yearly contracts; provide mentorship; human resource management; workload management; budgeting; monthly invoicing; inventory control; generating leads/opportunities; update templates & guidelines; ensure quality assurance; problem-solving; monitor progress towards targets <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Leverage relationships with pharmacy cessation champions to identify new training opportunities ❖ Promote QuitNow at dental conferences and divisions of family practice ❖ Make personal contact with healthcare providers actively referring patients to QuitNow ❖ Provide intensive support to larger clinics that have champions <p>Key Performance Indicators</p> <ul style="list-style-type: none"> ❖ Increase the number of fax or online referrals by healthcare providers by 5% each month compared to the same month in the previous year 	(continued from above)
	<p>QuitNow Live Training QuitNow will continue to reach and train pharmacists and other healthcare providers to make referrals to QuitNow using fax and online referrals.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Generate interest in training; meet with pharmaceutical representatives; meet with pharmacy representatives; scheduling of facilitator; organize logistics; inventory management of print material; generate reports; budgeting; invoicing; monitoring and evaluating progress <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Reach into “quit ready” communities that have been identified by partners ❖ Enhance QuitNow accredited cessation training so it appeals to healthcare providers beyond pharmacists ❖ Offer booster sessions to past trained pharmacists and other healthcare providers that need practical help ❖ Survey past participants <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Increase the number of fax or online referrals by healthcare providers by 5% each month compared to the same month in the previous year 	

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Leveraging Partnerships QuitNow can increase reach to more smokers by leveraging our partnerships with stakeholders and those who intervene with smokers.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Schedule meetings; prepare minutes; report on progress; minimize duplication of efforts; ensure regular contact with local tobacco cessation researchers; provide data and feedback when requested; partner on research projects that fill a knowledge gap for tobacco cessation; ensure the QuitNow brand is used consistently by research partners <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Work more closely with membership organizations to find ways to use their expertise and expand reach (e.g. BCMA, BCNU, Dental, Dental Hygienists etc.) ❖ Explore the interest and readiness for an Opt to Quit pilot that could be implemented in clinics, hospitals or entire health authorities. ❖ Continue to strengthen relationships with Aboriginal health leadership to better support Aboriginal smokers to quit <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ The identification of one new key partnership which has been established over the course of the 2014/15 fiscal year. 	(continued from above)
	<p>Social Media and Communications Use social media venues and other communications strategies to engage with and expand reach to British Columbians who are struggling to quit.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Schedule tweets; Post messages and moderate Facebook; plan ad campaigns on Google and Facebook; monitor insights & analytics; adjust plan based on outcomes; respond to client issues/questions; manage monthly Tobacco Free Tuesdays contest and generate online surveys; report generation; monitor progress towards targets <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Develop a Social Media Guideline & Communication Strategy Plan ❖ Create and promote a female user focused contest in May 2014 (World No Tobacco Day, May 31) ❖ Build Coach awareness into the social media platforms ❖ Revitalize QuitNow's contest entry page to include a refer a friend component ❖ Create and promote a male user focused promotion for January 2015 (National Non-Smoking Week) ❖ Leverage theme days/weeks/months and other events through Facebook mini-campaigns and news release ❖ Dig deeper into existing Facebook Survey data to find more insights and ideas for improvement <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Increase engagement on the QuitNow Facebook page and increase community by 20% ❖ Increase number of contest registrations through our new online contest referral system 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Earned Media Opportunities Identify opportunities to promote QuitNow and the BC Lung Association through media-worthy announcements</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Identify opportunities for earned media; pitch stories to press; write press releases; identify potential high-profile projects <p>Potential Opportunities</p> <ul style="list-style-type: none"> ❖ World No Tobacco Day contest ❖ Men's website launch timed with a pre-January National Non-Smoking Week promotion ❖ Profile a quit coach who is an ex-smoker now providing cessation services ❖ Announce sponsors (prize or otherwise) who make large commitments to 'Help B.C. QUIT' ❖ Leverage social themes/theme days (Earth Day, Mother's Day) to drive soft news on reasons to quit and stay quit. Could associate mini-contest/incentive campaigns. ❖ Industry journals or newsletters ❖ New partnerships with large organizations (ex. BCMA, BCNU) <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track number of cases of outside organizations promoting QuitNow 	(continued from above)
Quality Assurance	<p>Evaluation, Monitoring & Privacy In order to provide a quality service for smokers and other tobacco cessation stakeholders in BC, QuitNow integrates privacy protection, measurable metrics and evaluation into all initiatives</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Weekly calls with service providers; service reports; social media reports; review of Facebook Insight; review of Google Analytics; Tobacco Free Tuesday online survey and report; monthly target reporting; year-end reporting <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Assist Health Canada/EKOS Research with the evaluation of the Quitline and website ❖ Fine tune the analytics dashboard for the website ❖ Conduct 10-year retrospective evaluation ❖ Integrate 7-month data gathering into phone and website ❖ Develop new system for evaluating the txt program ❖ Conduct a Privacy Compliance Review for all services ❖ Explore establishing a QuitNow Advisory Council that includes stakeholders, ex-smokers and quit coaches. ❖ Make use of A/B testing through Optimizely.com to assist with piloting new ideas on the website and social media <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ The ability to report progress QuitNow is having on providing evidence-based cessation support and services to BC smokers. 	s.17
QuitNow Budget		s.17
BC Lung Admin fee		
Total Grant Received in 2014/2015 from MOH		

From: [Canitz, Shelley L HLTH:EX](#)
To: [XT:HLTH Gaby, Suzanne](#); [White, Stacy HLTH:EX](#)
Cc: ["Scott McDonald \(mcdonald@bc.lung.ca\)"](#); [Jack Boomer](#)
Subject: RE: 140515 QuitNow Report 2013 2014 FINAL Ministry
Date: Thursday, July 3, 2014 12:03:33 PM
Attachments: [image001.jpg](#)

Many thanks

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]
Sent: Thursday, July 3, 2014 11:58 AM
To: Canitz, Shelley L HLTH:EX; White, Stacy HLTH:EX
Cc: 'Scott McDonald (mcdonald@bc.lung.ca)'; Jack Boomer
Subject: RE: 140515 QuitNow Report 2013 2014 FINAL Ministry
Hi Shelley and Stacy,
Here is version 2 of the QuitNow Plan with the changes you requested.
Regards,
Suzanne

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]
Sent: July-03-14 11:38 AM
To: Jack Boomer; White, Stacy HLTH:EX; Suzanne Gaby
Cc: 'Scott McDonald (mcdonald@bc.lung.ca)'
Subject: RE: 140515 QuitNow Report 2013 2014 FINAL Ministry
Suzanne – might we get two edits to the work plan?

In the section **QuitNow Awareness and Tobacco Cessation Presentations** it says QuitNow is regarded as the provincial expert in tobacco cessation. I don't know that we can say that – as I can think of others who I also might refer to as experts. I would like to avoid any debate about who is or isn't an expert. Can we just have the explanatory para say something like Health promoters receive requests and find opportunities to present to diverse groups on various cessation topics.

In the **Earned Media** section, it says "Identify opportunities to promote QuitNow and the BC Lung Association through media-worthy announcements" – the workplan can promote QuitNow – that fits within the terms of the grant – but I don't think a goal of the workplan should be to promote BC Lung
If you could review these changes and get back to Stacy , she will continue this grant on its journey
I apologize for just catching this now but I am sure we can still get it signed off quickly

From: Jack Boomer [<mailto:jboomer@contextresearch.ca>]
Sent: Monday, June 30, 2014 4:14 PM
To: White, Stacy HLTH:EX; XT:HLTH Gaby, Suzanne; Canitz, Shelley L HLTH:EX
Cc: 'Scott McDonald (mcdonald@bc.lung.ca)'
Subject: RE: 140515 QuitNow Report 2013 2014 FINAL Ministry

Stacy,

I had the final version so here it is.

Thanks.

Jack

Jack Boomer

Principal, Context Research

P. 250 721 4268

C. 250 589 4268

jboomer@contextresearch.ca

www.contextresearch.ca

From: White, Stacy HLTH:EX [<mailto:Stacy.White@gov.bc.ca>]
Sent: Monday, June 30, 2014 3:51 PM
To: Suzanne Gaby; Canitz, Shelley L HLTH:EX
Cc: Jack Boomer
Subject: RE: 140515 QuitNow Report 2013 2014 FINAL Ministry
Hello Suzanne!

Can you please put **Appendix A** at the top of their document and change the footer to remove DRAFT ?

Thanks so much!

Stacy A. White

Health Promotion Policy Analyst, Healthy Living Branch
Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488



Please consider the environment before printing this email

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]
Sent: Monday, June 23, 2014 8:49 AM
To: Canitz, Shelley L HLTH:EX
Cc: White, Stacy HLTH:EX
Subject: RE: 140515 QuitNow Report 2013 2014 FINAL Ministry
Hi Shelley and Stacy,
Here is a pdf of the document. It will make for a neater copy.
Kind regards,
Suzanne

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]
Sent: June-21-14 2:01 PM
To: Suzanne Gaby
Cc: White, Stacy HLTH:EX
Subject: RE: 140515 QuitNow Report 2013 2014 FINAL Ministry
Suzanne – on my version, the borders of the charts blur off the page. Would you please resend so Stacy can make sure the file copy is neat and tidy?
thanks

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]
Sent: Thursday, May 15, 2014 8:20 AM
To: Canitz, Shelley L HLTH:EX
Cc: 'Scott McDonald'; 'Jack Boomer'
Subject: 140515 QuitNow Report 2013 2014 FINAL Ministry
Good Morning Shelley,

I have attached the QuitNow Report for 2013-2014. Please let me know if you have any questions or need further details in the report. The BC Lung/QuitNow team has developed a draft strategic plan for the current fiscal year which will get finalized once we know the specifics for the grant for this year. It has been a pleasure working with you and your team at the Ministry over the past year and look forward to increasing success in the coming year.

Kind regards,

Suzanne Gaby

Manager, QuitNow Services

BC Lung Association

2675 Oak Street

Vancouver, BC V6H 2K2

Tel 250.655.1983

Fax 250.721.4205

quitnowblue_small



From: [White, Stacy HLTH:EX](#)
To: [XT:HLTH Gaby, Suzanne](#)
Subject: RE: QuitNow Plan 2014-15 with budget numbers
Date: Thursday, July 3, 2014 1:54:00 PM

Hi Suzanne,

Can we meet next week?

Stacy

Stacy A. White

Health Promotion Policy Analyst, Healthy Living Branch

Population & Public Health

Ministry of Health

1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8

Telephone: 250 952-2488



Please consider the environment before printing this email

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]

Sent: Thursday, July 3, 2014 12:52 PM

To: White, Stacy HLTH:EX

Subject: RE: QuitNow Plan 2014-15 with budget numbers

Hi Stacy,

Do you have time to meet this week or should we book into next week?

Suzanne

From: White, Stacy HLTH:EX [<mailto:Stacy.White@gov.bc.ca>]

Sent: June-30-14 10:17 AM

To: Jack Boomer; Suzanne Gaby

Subject: RE: QuitNow Plan 2014-15 with budget numbers

Hello Suzanne and Jack!

Thanks so much for sending these numbers along. I was looking at 2013-14 in comparison to 14-15 and was wondering if we can chat about what you see happening differently. (Increasing reach, etc).

Phone is fine but I am always up for a coffee meeting on a sunny day (hint hint).

Thoughts?

Stacy A. White

Health Promotion Policy Analyst, Healthy Living Branch

Population & Public Health

Ministry of Health

1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8

Telephone: 250 952-2488



Please consider the environment before printing this email

From: Jack Boomer [<mailto:jboomer@contextresearch.ca>]

Sent: Saturday, June 28, 2014 10:38 AM

To: Canitz, Shelley L HLTH:EX; XT:HLTH Gaby, Suzanne; 'Scott McDonald'

Cc: White, Stacy HLTH:EX; 'Debora Wong'

Subject: QuitNow Plan 2014-15 with budget numbers

Shelley,

As requested, attached is the BC Lung plan for cessation services delivered through the QuitNow program. Should you have questions on Monday, please

email me and I will call back ASAP. Based on the Health Canada evaluation of the phone service and our preliminary data since HC is now out of the field, we know our service is one of the best in Canada.

Thanks for your ongoing support.

Jack

Jack Boomer

Director, QuitNow

BC Lung Association

P. 250 721 4268

C. 250 589 4268

jboomer@contextresearch.ca

www.contextresearch.ca

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]

Sent: Thursday, June 26, 2014 12:16 PM

To: Suzanne Gaby; 'Scott McDonald'

Cc: Jack Boomer; White, Stacy HLTH:EX

Subject: RE: do you have a draft plan for 14/15

Could you sort it based on a [s.17](#)

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]

Sent: Thursday, June 26, 2014 12:02 PM

To: Canitz, Shelley L HLTH:EX; 'Scott McDonald'

Cc: Jack Boomer; White, Stacy HLTH:EX

Subject: RE: do you have a draft plan for 14/15

Hi Shelley,

I believe this is the same plan that I sent earlier. I don't have any budget attached to the items yet.

Kind regards,

Suzanne

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]

Sent: June-26-14 10:37 AM

To: Suzanne Gaby; 'Scott McDonald'

Cc: Jack Boomer; White, Stacy HLTH:EX

Subject: RE: do you have a draft plan for 14/15

Suzanne – could you send in your plan for 14/15 to Stacy and me?

If there is any new tasks or deletions from 13/14, would you please let us know)
thanks

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]

Sent: Tuesday, June 3, 2014 8:57 AM

To: Canitz, Shelley L HLTH:EX; 'Scott McDonald'

Cc: Jack Boomer

Subject: RE: do you have a draft plan for 14/15

Hi Shelley and Scott,

I have attached the draft QuitNow Plan for 2014-2015. We have not finalized it as we are waiting to hear about the grant amount for this year. The team (Katrina, Jack, Jon, Sharon, Michael, Skylar and me) have been collaborating on the plan since late February. We have scheduled a meeting for June 17th to finalize the budgeting for the plan. I hope we will know about the grant by then:)

Please let me know if you have any questions.

Kind regards,

Suzanne

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]

Sent: June-03-14 8:33 AM

To: Jack Boomer; Suzanne Gaby

Subject: do you have a draft plan for 14/15

That we could attach to the grant template? Apologies if you have already sent this to Stacy or me – s.22 and I am forgetful

Shelley Canitz

Director, Tobacco Control and Injury Prevention

Healthy Living Branch Population and Public Health Division Ministry of Health

250 952 2304

From: [White, Stacy HLTH:EX](#)
To: [Canitz, Shelley L HLTH:EX](#)
Subject: RE: BC Lung Grant
Date: Wednesday, July 9, 2014 11:04:00 AM
Attachments: [image001.jpg](#)

Hi Shelley – just waiting to hear from Tamara on if we can get into Corinna's e-approvals to get this moving. I am on it.

Stacy A. White
Health Promotion Policy Analyst, Healthy Living Branch
Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488



Please consider the environment before printing this email

From: Scott McDonald [mailto:mcdonald@bc.lung.ca]
Sent: Wednesday, July 9, 2014 10:25 AM
To: White, Stacy HLTH:EX
Cc: Canitz, Shelley L HLTH:EX; Nisbet, Corinna HLTH:EX
Subject: RE: BC Lung Grant
Hi Stacy.....Here you go.....

Cheers!

Scott

Scott McDonald
President and CEO
BC Lung Association
2675 Oak Street
Vancouver, BC Canada
V6H 2K2
Office (604) 731-5864
Mobile (604) 603-5864
Fax (604) 731-5810
email: mcdonald@bc.lung.ca
Description: NewBCLALogo



From: White, Stacy HLTH:EX [mailto:Stacy.White@gov.bc.ca]
Sent: July-09-14 9:53 AM
To: 'mcdonald@bc.lung.ca'
Cc: Canitz, Shelley L HLTH:EX; Nisbet, Corinna HLTH:EX
Subject: RE: BC Lung Grant
Hello Scott,

s.22

could you please send the signed documents to Shelly, Corinna, and I to ensure that it continues through the approval process in a timely manner?

Please let me know if you have any questions.

Regards,

Stacy
Stacy A. White
Health Promotion Analyst, Healthy Living Branch
Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488



Please consider the environment before printing this email

From: Nisbet, Corinna HLTH:EX
Sent: Tuesday, July 8, 2014 4:15 PM
To: 'mcdonald@bc.lung.ca'
Cc: White, Stacy HLTH:EX; Canitz, Shelley L HLTH:EX
Subject: BC Lung Grant

Scott McDonald, Executive Director
British Columbia Lung Association

Please find attached the Grant from Ministry of Health, Tobacco Control. Please print, sign, scan and email me back. I will send fully signed version once completed.

Thank you,

Corinna Nisbet, Administrative Assistant

Healthy Living Branch
Tobacco Control Program
Population and Public Health
Ministry of Health Services
1515 Blanshard St., Suite 4-2
Victoria BC V8W 3C8
Tel: 250 952-1533 Fax: 250 952-1570
E-mail: corinna.nisbet@gov.bc.ca

From: [Canitz, Shelley L HLTH:EX](#)
To: [White, Stacy HLTH:EX](#)
Subject: RE: BC Lung Grant
Date: Tuesday, June 10, 2014 12:57:57 PM

From: White, Stacy HLTH:EX
Sent: Thursday, May 29, 2014 8:14 AM
To: Canitz, Shelley L HLTH:EX
Subject: BC Lung Grant
Good Morning,

s.13,s.17

You will find these items highlighted within the attached document. Please clarify and I will adjust the grant as indicated.

- Stacy

Stacy A. White
Health Promotion Policy Analyst, Healthy Living Branch
Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488



Please consider the environment before printing this email

From: [White, Stacy HLTH:EX](#)
To: [Canitz, Shelley L HLTH:EX](#)
Subject: RE: Letter Attached re Grant for 2014-2015
Date: Tuesday, June 10, 2014 11:03:00 AM
Attachments: [image001.jpg](#)

Thanks Shellley,
Can you please advise on where the document I drafted stands?
Stacy
Stacy A. White
Health Promotion Policy Analyst, Healthy Living Branch
Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488



Please consider the environment before printing this email

From: Canitz, Shelley L HLTH:EX
Sent: Tuesday, June 10, 2014 11:02 AM
To: White, Stacy HLTH:EX; Herman, Matt HLTH:EX
Subject: FW: Letter Attached re Grant for 2014-2015
[For your information](#)

From: Scott McDonald [<mailto:mcdonald@bc.lung.ca>]
Sent: Tuesday, June 10, 2014 10:21 AM
To: Canitz, Shelley L HLTH:EX
Cc: XT:HLTH Gaby, Suzanne; 'Jack Boomer '; 'Debora Wong'
Subject: Letter Attached re Grant for 2014-2015
Hi Shelley..... Please see the attached letter regarding the 2014-2015 tobacco cessation program grant.

Many thanks for your assistance.

Cheers!

Scott

Scott McDonald

President and CEO

BC Lung Association

2675 Oak Street

Vancouver, BC Canada

V6H 2K2

Office (604) 731-5864

Mobile (604) 603-5864

Fax (604) 731-5810

email: mcdonald@bc.lung.ca

Description: NewBCLALogo



June 10, 2014

Lung Health Information Line
1-888-566-5864 (LUNG)

Ms. Shelley Canitz
Director, Tobacco Control Program
Chronic Disease/Injury Prevention and the Built Environment
Population and Public Health
BC Ministry of Health

By email

Dear Shelley:

Now that we are in the third month of our fiscal year, I'm very concerned that we have not yet received the annual grant from the Ministry of Health to enable us to continue to provide provincial tobacco cessation services, as we have for the past decade. s.21

s.21

I would appreciate your advice and action to remedy this situation as soon as possible.

Thank you for your assistance.

Sincerely,



Scott McDonald
President and CEO

SRM/

From: [Herman, Matt HLTH:EX](#)
To: [Canitz, Shelley L HLTH:EX](#); [White, Stacy HLTH:EX](#)
Subject: RE: Terminating Contracts for QuitNow
Date: Tuesday, June 24, 2014 2:17:42 PM
Attachments: [image001.jpg](#)

What was the response to Scott. If you haven't sent, can you copy me please?

From: Canitz, Shelley L HLTH:EX
Sent: Tuesday, June 24, 2014 1:02 PM
To: Herman, Matt HLTH:EX; White, Stacy HLTH:EX
Subject: FW: Terminating Contracts for QuitNow
FYI – I will be drafting something up to let GCPE know about this

From: Scott McDonald [<mailto:mcdonald@bc.lung.ca>]
Sent: Tuesday, June 24, 2014 12:30 PM
To: Canitz, Shelley L HLTH:EX
Cc: 'Jack Boomer '; 'Debora Wong'
Subject: Terminating Contracts for QuitNow
Dear Shelley,

s.21

Thank you for your consideration.

Scott McDonald
President and CEO
BC Lung Association
2675 Oak Street
Vancouver, BC Canada
V6H 2K2
Office (604) 731-5864
Mobile (604) 603-5864
Fax (604) 731-5810
email: mcdonald@bc.lung.ca

Description: NewBCLALogo



From: [jackboomer](#)
To: [Canitz, Shelley L HLTH:EX](#); ["Scott McDonald"](#); [XT:HLTH Gaby, Suzanne](#)
Cc: [White, Stacy HLTH:EX](#)
Subject: Re: What are the core QNS for 14/15
Date: Wednesday, June 25, 2014 3:57:02 AM

Shelley I will call you later today to discuss. Scott asked me too follow up work you.

Jack

Sent from my Samsung Galaxy smartphone.

----- Original message -----

From: "Canitz, Shelley L HLTH:EX"
Date: 06-24-2014 5:28 PM (GMT-05:00)
To: 'Scott McDonald', 'Jack Boomer', "XT:HLTH Gaby, Suzanne"
Cc: "White, Stacy HLTH:EX"
Subject: What are the core QNS for 14/15

Hello, all – could we talk for a moment about costing QN's core services for 14/15. Primarily, I want to be ready in case funding is reduced but I DO NOT KNOW IF THAT IS THE CASE. I have had no word – things are still frozen – I am just preparing for scenarios.

In last year's year end report, the web, telephone, text, and materials services came to ^{s.17}

<!--[if !supportLists]-->- <!--[endif]-->web ^{s.17}

<!--[if !supportLists]-->- <!--[endif]-->phone ^{s.17}

<!--[if !supportLists]-->- <!--[endif]-->text ^{s.17}

<!--[if !supportLists]-->- <!--[endif]-->materials ^{s.17}

<!--[if !supportLists]-->- <!--[endif]-->

Would you expect those costs to be similar in 14/15, based on current use rates?

thanks

From: Suzanne Gaby [mailto:sgaby@contextresearch.ca]
Sent: Monday, June 23, 2014 8:49 AM
To: Canitz, Shelley L HLTH:EX
Cc: White, Stacy HLTH:EX
Subject: RE: 140515 QuitNow Report 2013 2014 FINAL Ministry

Hi Shelley and Stacy,

Here is a pdf of the document. It will make for a neater copy.

Kind regards,

Suzanne

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]
Sent: June-21-14 2:01 PM
To: Suzanne Gaby
Cc: White, Stacy HLTH:EX
Subject: RE: 140515 QuitNow Report 2013 2014 FINAL Ministry

Suzanne – on my version, the borders of the charts blur off the page. Would you please resend so Stacy can make sure the file copy is neat and tidy?

thanks

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]
Sent: Thursday, May 15, 2014 8:20 AM
To: Canitz, Shelley L HLTH:EX
Cc: 'Scott McDonald'; 'Jack Boomer'
Subject: 140515 QuitNow Report 2013 2014 FINAL Ministry

Good Morning Shelley,

I have attached the QuitNow Report for 2013-2014. Please let me know if you have any questions or need further details in the report. The BC Lung/QuitNow team has developed a draft strategic plan for the current fiscal year which will get finalized once we know the specifics for the grant for this year. It has been a pleasure working with you and your team at the Ministry over the past year and look forward to increasing success in the coming year.

Kind regards,

Suzanne Gaby

Manager, QuitNow Services

BC Lung Association

2675 Oak Street

Vancouver, BC V6H 2K2

Tel 250.655.1983

Fax 250.721.4205

[quitnowblue_small](#)



From: [White, Stacy HLTH:EX](#)
To: [Canitz, Shelley L HLTH:EX](#)
Subject: FW: BC Lung Grant
Date: Thursday, June 26, 2014 8:43:00 AM
Attachments: [BC Lung 2014-15 - Transfer Agreement - Grant STOB 77.doc](#)
Importance: High

Here is the grant draft I sent you. I wanted to be sure that we weren't adding any further stipulations and that items in yellow were correct.

Stacy A. White
Health Promotion Policy Analyst, Healthy Living Branch
Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488
Please consider the environment before printing this email

-----Original Message-----

From: White, Stacy HLTH:EX
Sent: Tuesday, May 27, 2014 12:26 PM
To: Canitz, Shelley L HLTH:EX
Subject: BC Lung Grant

Yes, they complete schedule A, correct (that highlights how they will spend the \$?)

Stacy A. White
Health Promotion Policy Analyst, Healthy Living Branch Population & Public Health Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488
P Please consider the environment before printing this email

-----Original Message-----

From: Canitz, Shelley L HLTH:EX
Sent: Tuesday, May 27, 2014 12:08 PM
To: White, Stacy HLTH:EX
Subject: RE: This afternoon

you did it already??

From: White, Stacy HLTH:EX
Sent: May 27, 2014 12:06 PM
To: Canitz, Shelley L HLTH:EX
Subject: RE: This afternoon

Perfect. I have completed this and it was sent to Lee for a quick look to make sure it's consistent with last year (there were a few 'new' sections that I wasn't clear on and wanted her input).

Stacy

Stacy A. White
Health Promotion Policy Analyst, Healthy Living Branch Population & Public Health Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488
P Please consider the environment before printing this email

-----Original Message-----

From: Canitz, Shelley L HLTH:EX
Sent: Tuesday, May 27, 2014 9:14 AM
To: White, Stacy HLTH:EX
Subject: RE: This afternoon

correct - but in the interim, ask Terry for a copy of the current grant template.

The majority of it is boilerplate language - but there is a section for us to put in the terms of the grant - that is where the past years language may be helpful

Shelley

From: White, Stacy HLTH:EX
Sent: May 27, 2014 9:07 AM
To: Canitz, Shelley L HLTH:EX
Subject: RE: This afternoon

I am waiting for Lee to show me where things live on the LAN. I have access, and have found the folder. I have not written a grant before and Lee mentioned that it's much easier if I have the past copies to go by.

Stacy

Stacy A. White
Health Promotion Policy Analyst, Healthy Living Branch Population & Public Health Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488
P Please consider the environment before printing this email

-----Original Message-----

From: Canitz, Shelley L HLTH:EX
Sent: Tuesday, May 27, 2014 8:58 AM
To: White, Stacy HLTH:EX
Subject: RE: This afternoon

yes - please let Karen and Tamara know where you are and how they can get ahold of you if they need to.

we you able to start work on the QuitNow grant and letter?

From: White, Stacy HLTH:EX
Sent: May 27, 2014 8:56 AM
To: Canitz, Shelley L HLTH:EX
Subject: This afternoon

Hello Shellev.

s.22

I would like to cover more ground on the OTRU course.

- Stacy

Stacy A. White
Health Promotion Policy Analyst, Healthy Living Branch Population & Public Health Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488
P Please consider the environment before printing this email

From: [White, Stacy HLTH:EX](#)
To: [Canitz, Shelley L HLTH:EX](#)
Subject: RE: 2. BC Lung 2014-15 - Transfer Agreement - **s.17**
Date: Thursday, June 26, 2014 3:38:00 PM

Darynn said that anything coming to Arlene should have ED approval first.

Stacy A. White
Health Promotion Policy Analyst, Healthy Living Branch
Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488



Please consider the environment before printing this email

From: Canitz, Shelley L HLTH:EX
Sent: Thursday, June 26, 2014 2:35 PM
To: White, Stacy HLTH:EX
Subject: RE: 2. BC Lung 2014-15 - Transfer Agreement - **s.17**
We will discuss – are you in tomorrow/

From: White, Stacy HLTH:EX
Sent: Thursday, June 26, 2014 1:42 PM
To: Canitz, Shelley L HLTH:EX
Subject: RE: 2. BC Lung 2014-15 - Transfer Agreement - **s.17**
Would I ask Terry about this? I am sorry I have never done anything like this before.

Stacy A. White
Health Promotion Policy Analyst, Healthy Living Branch
Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488



Please consider the environment before printing this email

From: Canitz, Shelley L HLTH:EX
Sent: Thursday, June 26, 2014 1:03 PM
To: White, Stacy HLTH:EX
Subject: RE: 2. BC Lung 2014-15 - Transfer Agreement - **s.17**
Appreciate the highlighting **s.17**
Please check if matt can sign **s.17 or if it is Arlene's alone to sign – and see if she is here tomorrow or who will sign on her behalf**
As you can see from my last email to Suzanne, I'm asking her to resend their chart with the numbers attached – it will then be the Appendix A. Will the chart, once it is filled in with numbers, meet the terms of the agreement in terms of information etc?
Please also start to think what the agreement says are the things that must be reported on in 14/.15 – does the fundraising item require a section in the final report? You will need to flag that for teh

From: White, Stacy HLTH:EX
Sent: Thursday, June 26, 2014 9:17 AM
To: Canitz, Shelley L HLTH:EX
Subject: 2. BC Lung 2014-15 - Transfer Agreement - **s.17**
This is with the optional additional stipulation removed and the document updated. There is a small highlighted “fundraising” note that is not in their last contract.

From: [White, Stacy HLTH:EX](#)
To: [Canitz, Shelley L HLTH:EX](#)
Subject: BC Lung 2014-15 - Transfer Agreement - s.17
Date: Friday, June 27, 2014 11:53:51 AM

Thank you Shelley,

As I mentioned – I spoke with Darynn and she said that items coming to Arlene should have ED signoff first.

Second, when we receive the chart from Suzanne as Appendix A, I will compare it to their document from last year. As a whole, I am not aware if it will meet the terms of the agreement in terms of information, etc. I believe it will, as that is what worked last year and the language of the grant hasn't changed very much. Again, this depends on any changes in the document. However if we have someone who has done contract management in the past I would like them to review and give their expert opinion. Could you please advise on who we can talk to regarding this? Does this need legal review?

3. I have thoroughly reviewed the agreement and what things must be reported on in 14/.15. The fundraising item does not appear to require a section in the final report. (It doesn't state if it does or doesn't) – I believe this would be at our request. Schedule B states that reporting is at the discretion of the Province.

I am not comfortable on advising on the language and deliverables of this contract as I have not been involved with Quit Now long enough to determine if new items should be reported on, and if the chart on Appendix A will fulfill the requirements for the agreement. At a very general level, I am happy to say it looks good with my very limited knowledge on the program, but I would like a second opinion. Has Lee done this contract in the past?

Stacy A. White

Health Promotion Policy Analyst, Healthy Living Branch

Population & Public Health

Ministry of Health

1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8

Telephone: 250 952-2488



Please consider the environment before printing this email

From: Canitz, Shelley L HLTH:EX
Sent: Thursday, June 26, 2014 1:03 PM
To: White, Stacy HLTH:EX
Subject: RE: 2. BC Lung 2014-15 - Transfer Agreement - s.17
Appreciate the highlighting

Please check if matt can sign s.17 or if it is Arlene's alone to sign – and see if she is here tomorrow or who will sign on her behalf

As you can see from my last email to Suzanne, I'm asking her to resend their chart with the numbers attached – it will then be the Appendix A. Will the chart, once it is filled in with numbers, meet the terms of the agreement in terms of information etc?

Please also start to think what the agreement says are the things that must be reported on in 14/.15 – does the fundraising item require a section in the final report? You will need to flag that for them

From: White, Stacy HLTH:EX
Sent: Thursday, June 26, 2014 9:17 AM
To: Canitz, Shelley L HLTH:EX
Subject: 2. BC Lung 2014-15 - Transfer Agreement - s.17

This is with the optional additional stipulation removed and the document updated. There is a small highlighted "fundraising" note that is not in their last contract.

Appendix A: BC Lung Association - QuitNow Plan

	April 2013 – March 2014	April 2014-March 2015
Web Service	s.17	s.17
Phone Service		
Text Service		
Resource Development & Distribution		
Health Promoters		
Workplace Cessation Workshops		s.17
QuitNow Awareness and Tobacco Cessation Presentations		
Health Promoter Program		
QuitNow Live Training		
Leveraging Partnerships		
QuitNow Pharmacist Training		
Social Media and Communications		
Earned Media Opportunities		
Evaluation Monitoring & Policy		
BC Lung Admin Costs/Fee		
Total:		

2014/15: Includes the addition of 'Key Performance Indicators' on all items.

From: [Canitz, Shelley L HLTH:EX](#)
To: [White, Stacy HLTH:EX](#)
Subject: FW: quit now
Date: Monday, June 30, 2014 4:04:31 PM

From: Reicker, Terry HLTH:EX
Sent: Thursday, June 26, 2014 7:52 AM
To: Paton, Arlene HLTH:EX; Herman, Matt HLTH:EX
Cc: Canitz, Shelley L HLTH:EX
Subject: Re: quit now
Matt, if you can get the grant doc to me I will walk it through quickly.

From: Paton, Arlene HLTH:EX
Sent: Thursday, June 26, 2014 7:37 AM
To: Herman, Matt HLTH:EX
Cc: Reicker, Terry HLTH:EX; Canitz, Shelley L HLTH:EX
Subject: Re: quit now

s.17

----- Original Message -----
From: Herman, Matt HLTH:EX
Sent: Thursday, June 26, 2014 07:28 AM Pacific Standard Time
To: Paton, Arlene HLTH:EX
Cc: Reicker, Terry HLTH:EX; Canitz, Shelley L HLTH:EX
Subject: Re: quit now

Will do, thx

> On Jun 26, 2014, at 7:24, "Paton, Arlene HLTH:EX" <Arlene.Paton@gov.bc.ca> wrote:

>

> Just saw Jack boomer, so asked him to let Scott know.

>

>

> ----- Original Message -----

> From: Paton, Arlene HLTH:EX

> Sent: Thursday, June 26, 2014 07:21 AM Pacific Standard Time

> To: Herman, Matt HLTH:EX

> Cc: Reicker, Terry HLTH:EX

> Subject: Re: quit now

>

> Please do it quickly and work with manjit to get it out quickly. Thx!

>

> ----- Original Message -----

> From: Herman, Matt HLTH:EX

> Sent: Wednesday, June 25, 2014 11:44 PM Pacific Standard Time

> To: Paton, Arlene HLTH:EX

> Cc: Reicker, Terry HLTH:EX

> Subject: Re: quit now

>

> Excellent news. We do the letter.

>

>

>

>> On Jun 25, 2014, at 23:30, "Paton, Arlene HLTH:EX" <Arlene.Paton@gov.bc.ca> wrote:

>>
>> So please proceed - do we do the funding letter or does FCR?
>>
>>
>> ----- Original Message -----
>> From: Sidhu, Manjit HLTH:EX
>> Sent: Wednesday, June 25, 2014 08:38 PM Pacific Standard Time
>> To: Stevenson, Lynn HLTH:EX; Paton, Arlene HLTH:EX
>> Cc: Marsh, Jania HLTH:EX
>> Subject: Re: quit now
>>
>> Yes,
>>
>>
>> ----- Original Message -----
>> From: Stevenson, Lynn HLTH:EX
>> Sent: Wednesday, June 25, 2014 05:18 PM
>> To: Paton, Arlene HLTH:EX
>> Cc: Sidhu, Manjit HLTH:EX; Marsh, Jania HLTH:EX
>> Subject: Re: quit now
>>
>> So Manjit can it be released ?
>>
>> Sent from my iPhone
>>
>>> On Jun 25, 2014, at 4:10 PM, "Paton, Arlene HLTH:EX" <Arlene.Paton@gov.bc.ca> wrote:
>>>
>>> Yes, it is in my budget and I would have funded it by now except for the stob review. It is a core, evidence-based service that supports people to quit smoking -- and has been funded for years.
>>>
>>> Regards,
>>>
>>> Arlene Paton
>>> Assistant Deputy Minister
>>> Population and Public Health
>>> Ministry of Health
>>> Tel: 250-952-1731
>>>
>>> -----Original Message-----
>>> From: Sidhu, Manjit HLTH:EX
>>> Sent: Wednesday, June 25, 2014 3:04 PM
>>> To: Stevenson, Lynn HLTH:EX; Paton, Arlene HLTH:EX
>>> Cc: Marsh, Jania HLTH:EX
>>> Subject: Re: quit now
>>>
>>> I understand its funded from Arlene's budget. Arlene?
>>>
>>>
>>> ----- Original Message -----
>>> From: Stevenson, Lynn HLTH:EX
>>> Sent: Wednesday, June 25, 2014 02:55 PM
>>> To: Paton, Arlene HLTH:EX
>>> Cc: Marsh, Jania HLTH:EX; Sidhu, Manjit HLTH:EX
>>> Subject: Re: quit now
>>>
>>> i guess i am asking are we not going to fund this if the answer is yes then what is the explanation....and if no what is the explanation....think the answer cannot be that it is caught in the stob review...manjit could you please let

us know the status of this..lynn

>>>

>>> Sent from my iPad

>>>

>>>> On Jun 25, 2014, at 2:31 PM, "Paton, Arlene HLTH:EX" <Arlene.Paton@gov.bc.ca> wrote:

>>>>

>>>> If you give Manjit the go ahead, we can send the funding letter within the week. It's caught in the Stob review.

>>>>

>>>> Regards,

>>>>

>>>> Arlene Paton

>>>> Assistant Deputy Minister

>>>> Population and Public Health

>>>> Ministry of Health

>>>> (250) 952-1731

>>>>

>>>>

>>>>> On Jun 25, 2014, at 2:27 PM, "Stevenson, Lynn HLTH:EX" <Lynn.Stevenson@gov.bc.ca> wrote:

>>>>>

>>>>> mtl wants to know when the \$ will be sent..lynn

>>>>>

>>>>> Sent from my iPad

>>>>>

>>>>>> On Jun 25, 2014, at 2:24 PM, "Paton, Arlene HLTH:EX" <Arlene.Paton@gov.bc.ca> wrote:

>>>>>>

s.17

us. We've never been so late getting their funds out.

>>>>>>

>>>>>> Regards,

>>>>>>

>>>>>> Arlene Paton

>>>>>> Assistant Deputy Minister

>>>>>> Population and Public Health

>>>>>> Ministry of Health

>>>>>> (250) 952-1731

>>>>>>

>>>>>>

>>>>>>> On Jun 25, 2014, at 2:13 PM, "Stevenson, Lynn HLTH:EX" <Lynn.Stevenson@gov.bc.ca> wrote:

>>>>>>>

>>>>>>> do you know anything about this funding to bc lung association...is this the same as what you were concerned about being held up by manjit et al...mtl is asking

>>>>>>>

>>>>>>> Sent from my iPad

It's a s.17 grant to BC Lung who runs the quit line for

From: [Canitz, Shelley L HLTH:EX](#)
To: [White, Stacy HLTH:EX](#)
Cc: [Scalzo, Lee G HLTH:EX](#)
Subject: FW: QuitNow Plan 2014-15 with budget numbers
Date: Monday, June 30, 2014 2:14:00 PM
Attachments: [140627 Final QuitNow Plan 2014-2015 FINAL.pdf](#)

Stacy – please cut and paste this, or add it as an attachment, to the draft grant template you filled out – I didn't have any changes to the template (was there something I was to get back to you on?). This chart will be Appendix A. You can use today's date or July 2 – whichever works - on the grant.

Lee – would you help Stacy with this first grant (and assure her it is an easy process, just a number of steps), making sure everything looks good from your eye. If you would also let her know what has to be done to make sure we have an official file that meets the auditor's standards.

Any questions?

From: Jack Boomer [mailto:jboomer@contextresearch.ca]
Sent: Saturday, June 28, 2014 10:38 AM
To: Canitz, Shelley L HLTH:EX; XT:HLTH Gaby, Suzanne; 'Scott McDonald'
Cc: White, Stacy HLTH:EX; 'Debora Wong'
Subject: QuitNow Plan 2014-15 with budget numbers

Shelley,

As requested, attached is the BC Lung plan for cessation services delivered through the QuitNow program. Should you have questions on Monday, please email me and I will call back ASAP. Based on the Health Canada evaluation of the phone service and our preliminary data since HC is now out of the field, we know our service is one of the best in Canada.

Thanks for your ongoing support.

Jack

Jack Boomer

Director, QuitNow

BC Lung Association

P. 250 721 4268

C. 250 589 4268

jboomer@contextresearch.ca

www.contextresearch.ca

From: Canitz, Shelley L HLTH:EX [mailto:Shelley.Canitz@gov.bc.ca]
Sent: Thursday, June 26, 2014 12:16 PM
To: Suzanne Gaby; 'Scott McDonald'
Cc: Jack Boomer; White, Stacy HLTH:EX
Subject: RE: do you have a draft plan for 14/15
Could you sort it based on a ^{s.17} budget?

From: Suzanne Gaby [mailto:sgaby@contextresearch.ca]
Sent: Thursday, June 26, 2014 12:02 PM
To: Canitz, Shelley L HLTH:EX; 'Scott McDonald'
Cc: Jack Boomer; White, Stacy HLTH:EX
Subject: RE: do you have a draft plan for 14/15

Hi Shelley,
I believe this is the same plan that I sent earlier. I don't have any budget attached to the items yet.
Kind regards,
Suzanne

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]
Sent: June-26-14 10:37 AM
To: Suzanne Gaby; 'Scott McDonald'
Cc: Jack Boomer; White, Stacy HLTH:EX
Subject: RE: do you have a draft plan for 14/15
Suzanne – could you send in your plan for 14/15 to Stacy and me?
If there is any new tasks or deletions from 13/14, would you please let us know)
thanks

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]
Sent: Tuesday, June 3, 2014 8:57 AM
To: Canitz, Shelley L HLTH:EX; 'Scott McDonald'
Cc: Jack Boomer
Subject: RE: do you have a draft plan for 14/15
Hi Shelley and Scott,
I have attached the draft QuitNow Plan for 2014-2015. We have not finalized it as we are waiting to hear about the grant amount for this year. The team (Katrina, Jack, Jon, Sharon, Michael, Skylar and me) have been collaborating on the plan since late February. We have scheduled a meeting for June 17th to finalize the budgeting for the plan. I hope we will know about the grant by then:)
Please let me know if you have any questions.
Kind regards,
Suzanne

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]
Sent: June-03-14 8:33 AM
To: Jack Boomer; Suzanne Gaby
Subject: do you have a draft plan for 14/15
That we could attach to the grant template? Apologies if you have already sent this to Stacy or me – s.22
Shelley Canitz
Director, Tobacco Control and Injury Prevention
Healthy Living Branch Population and Public Health Division Ministry of Health
250 952 2304

From: [Canitz, Shelley L HLTH:EX](#)
To: [White, Stacy HLTH:EX](#)
Subject: RE: QuitNow Plan 2014-15 with budget numbers
Date: Monday, June 30, 2014 9:23:00 AM

Ok, you earned points for that - do you have time to call Suzanne and make sure you are clear with what the differences are (was your 13/14 column planned or spent dollars)? Particularly the **s.17** for workplace workshops - if you could get the detail on that

All those things seem within a range of reasonableness or appropriateness - so I'm not worried about that - I just want you to be able to speak with some understanding as you move through the year during any discussions you might have

-----Original Message-----

From: White, Stacy HLTH:EX
Sent: Monday, June 30, 2014 9:04 AM
To: Canitz, Shelley L HLTH:EX
Subject: RE: QuitNow Plan 2014-15 with budget numbers

I have had a quick look at 2014-15 v 2013-14 Please see the attached for a breakdown .

Stacy A. White
Health Promotion Policy Analyst, Healthy Living Branch Population & Public Health Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488
P Please consider the environment before printing this email

-----Original Message-----

From: Canitz, Shelley L HLTH:EX
Sent: Saturday, June 28, 2014 3:28 PM
To: Jack Boomer; XT:HLTH Gaby, Suzanne; 'Scott McDonald'
Cc: White, Stacy HLTH:EX; 'Debora Wong'
Subject: RE: QuitNow Plan 2014-15 with budget numbers

thanks for this - Stacy or I will get back to you Monday with any questions

From: Jack Boomer [jboomer@contextresearch.ca]
Sent: June 28, 2014 10:37 AM
To: Canitz, Shelley L HLTH:EX; XT:HLTH Gaby, Suzanne; 'Scott McDonald'
Cc: White, Stacy HLTH:EX; 'Debora Wong'
Subject: QuitNow Plan 2014-15 with budget numbers

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Thanks for your ongoing support.

Jack

Jack Boomer
Director, QuitNow
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P. 250 721 4268
C. 250 589 4268
jboomer@contextresearch.ca<<mailto:jboomer@contextresearch.ca>>

www.contextresearch.ca<<http://www.contextresearch.ca>>

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]
Sent: Thursday, June 26, 2014 12:16 PM
To: Suzanne Gaby; 'Scott McDonald'
Cc: Jack Boomer; White, Stacy HLTH:EX
Subject: RE: do you have a draft plan for 14/15

Could you sort it based on a ^{s.17} budget?

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]
Sent: Thursday, June 26, 2014 12:02 PM
To: Canitz, Shelley L HLTH:EX; 'Scott McDonald'
Cc: Jack Boomer; White, Stacy HLTH:EX
Subject: RE: do you have a draft plan for 14/15

Hi Shelley,

I believe this is the same plan that I sent earlier. I don't have any budget attached to the items yet.

Kind regards,

Suzanne

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]
Sent: June-26-14 10:37 AM
To: Suzanne Gaby; 'Scott McDonald'
Cc: Jack Boomer; White, Stacy HLTH:EX
Subject: RE: do you have a draft plan for 14/15

Suzanne – could you send in your plan for 14/15 to Stacy and me?

If there is any new tasks or deletions from 13/14, would you please let us know)

thanks

From: Suzanne Gaby [<mailto:sgaby@contextresearch.ca>]
Sent: Tuesday, June 3, 2014 8:57 AM
To: Canitz, Shelley L HLTH:EX; 'Scott McDonald'
Cc: Jack Boomer
Subject: RE: do you have a draft plan for 14/15

Hi Shelley and Scott,

I have attached the draft QuitNow Plan for 2014-2015. We have not finalized it as we are waiting to hear about the grant amount for this year. The team (Katrina, Jack, Jon, Sharon, Michael, Skylar and me) have been collaborating on the plan since late February. We have scheduled a meeting for June 17th to finalize the budgeting for the plan. I hope we will know about the grant by then:)

Please let me know if you have any questions.

Kind regards,

Suzanne

From: Canitz, Shelley L HLTH:EX [<mailto:Shelley.Canitz@gov.bc.ca>]
Sent: June-03-14 8:33 AM
To: Jack Boomer; Suzanne Gaby
Subject: do you have a draft plan for 14/15

That we could attach to the grant template? Apologies if you have already sent this to Stacy or me –
s.22

Shelley Canitz
Director, Tobacco Control and Injury Prevention
Healthy Living Branch Population and Public Health Division Ministry of Health
250 952 2304

From: [Codner, Tamara A HLTH:EX](#)
To: [White, Stacy HLTH:EX](#)
Subject: RE: QuitNow Grant
Date: Wednesday, July 2, 2014 12:22:13 PM
Attachments: [image001.jpg](#)

Hi Stacy,
Do you have word document for this grant? Could you please send to me ASAP, for me to add it to the Eapproval system for routing?
If you have any questions, please feel free to contact me.
Thanks,

Tamara

250-952-2311

Dream as if you'll live forever! Live as if you'll die tomorrow! Dance as if no one is watching!



From: White, Stacy HLTH:EX
Sent: Wednesday, July 2, 2014 10:45 AM
To: Codner, Tamara A HLTH:EX; Nisbet, Corinna HLTH:EX
Cc: Canitz, Shelley L HLTH:EX
Subject: RE: QuitNow Grant
Thanks so much, Tamara!

Attached is the grant for approvals and a supporting email.

Approval route = Shelley, Matt, Terry, Silas, maybe Arlene, Sheila Stott, Leoni Gingras, Darlene Ell and maybe Manjit because of the \$\$ value. Then to Scott McDonald at BC Lung.

Please let me know if there is anything else I can do.

Stacy A. White

Health Promotion Policy Analyst, Healthy Living Branch

Population & Public Health

Ministry of Health

1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8

Telephone: 250 952-2488



Please consider the environment before printing this email

From: Codner, Tamara A HLTH:EX
Sent: Wednesday, July 2, 2014 6:57 AM
To: White, Stacy HLTH:EX; Nisbet, Corinna HLTH:EX
Cc: Canitz, Shelley L HLTH:EX
Subject: RE: QuitNow Grant

Good morning Stacy,

Yes this can go thru e-approvals. Once you have all the paperwork ready, just let me know and I can create the e-approval for routing for approvals.

If you have any questions, please feel free to contact me.

Thanks,

Tamara

250-952-2311

Dream as if you'll live forever! Live as if you'll die tomorrow! Dance as if no one is watching!

This Grant Agreement dated for reference the 02 day of July , 2014

BETWEEN

HER MAJESTY THE QUEEN IN RIGHT OF THE PROVINCE OF BRITISH COLUMBIA,
represented by the Minister of Health (the "Province")

AND

BC Lung Association (the "Recipient")

For the promotion and delivery of tobacco cessation services to British Columbians through
QuitNow Services(the "Program")

WHEREAS:

- A. The Province has approved funding for the Program defined in this Agreement and such funding is to be paid by the Province to the Recipient pursuant to the Stipulations of this Agreement.
- B. The Recipient has met the eligibility criteria by providing to government a 2014/2015 workplan, attached as Appendix A to this agreement.

DEFINITIONS

- 1. In this Agreement and its Schedules the following definitions apply:

"Agreement" means this Grant Agreement and any schedules attached hereto;

"Commencement Date" means the date identified in Schedule A;

"Contract" means a contract between the Recipient and a Third Party whereby the latter agrees to contribute a product or service to the Program in return for financial consideration which may be claimed as an Eligible Cost;

"Eligible Costs" means all the direct costs properly and reasonably incurred by a Recipient or a Third Party on behalf of the Recipient with respect to the Program and is for public use or benefit and are incurred between the Program Commencement Date and the Completion Date;

"Eligibility Criteria" means the terms imposed by the Province and which must be met in order to qualify for funding.

"Fiscal Year" means the period beginning April 1 of a year and ending March 31 of the following year;

"Program" means the Program described in Schedule A;

"Stipulations" mean the terms and conditions set out in this Agreement that must be met in order for the Recipient to retain the funds it receives for the Program; and

"Third Party" means any person or entity or its officers, employees or agents, other than a party to this Agreement that is involved in the Program.

SCHEDULES

2. The Schedules to this Agreement are:

Schedule A: Program Description and Dates

Schedule B: Payment and Reporting Requirements

TERM OF AGREEMENT

3. Notwithstanding the actual date of execution of this agreement, the term of this agreement begins on the Commencement Date, and expires on March 31, 2015

STIPULATIONS

4. The Recipient agrees to:

- (a) carry out the Program in a diligent and professional manner;
- (b) commence carrying out the Program upon the signing of this Agreement;
- (c) complete the Program no later than the Completion Date; and,
- (d) provide evidence satisfactory to the Province that the Recipient has commenced work on the Program in accordance with section 4(b). Such evidence may consist of telephone/internet/text volume reports, financial statements of fundraising activity, if applicable or other evidence deemed appropriate by the Province.

5. If, in the opinion of the Province, the Recipient has failed to provide evidence satisfactory to the Province in accordance with section 4(b) of this Agreement, the Province may terminate this Agreement, effective immediately, and require the refund of all funds advanced to the Recipient.

6. The Recipient will comply with all applicable laws.

7. The Recipient agrees to:

- (a) establish and maintain books of account, administrative records, invoices, receipts and vouchers for all expenses incurred in a form and content satisfactory to the Province;
- (b) permit the Province to inspect at all reasonable times, any books of account or records (both printed and electronic, including, but not limited to, hard disk),

whether complete or not, that are produced, received or otherwise acquired by the Recipient as a result of this Agreement;

- (c) maintain all such accounts and records for a period of five years after the Completion Date;
 - (d) ensure that all Contracts entered into by the Recipient with any Third Parties contain the provision in section 6 above; and
 - (e) If requested by the Province, the Recipient will deliver within 90 days to the Province a copy of its audited Financial Statements for any period up to five years beyond completion and commissioning of the Program.
8. The Recipient will ensure that the financial contribution of the Province is to be used solely for the purpose of defraying the Eligible Costs incurred by the Recipient in carrying out and completing the Program as described in Schedule A.
 9. The Recipient acknowledges that Eligible Costs that have received funding from any other federal or provincial sources may not be reimbursed under this Agreement, and that the Recipient agrees to promptly notify the Province in writing of any such funding received.
 10. The Recipient acknowledges that it is not the agent of the Province and will do no act which might be construed as authorizing any contract or permitting any other liability or obligation to be incurred on behalf of the Province.
 11. The Recipient will not make any material change in or to the Program as described in Appendix A without prior written consent of the Province; The Recipient will not make any material change in or to the intended use of the resulting Program as described in Appendix A, without prior written consent of the Province.
 12. In the event the funding exceeds the Recipient's requirements in respect of this Agreement, the Recipient will notify the Province. The Province may require the excess funding to be returned or may permit the use of the excess funding as directed by the Province. Funds identified by the Province to be returned to the Province shall constitute a debt due to the Province.

OBLIGATIONS OF THE PROVINCE

13. Provided the Recipient is in compliance with its obligations under this Agreement, the Province will pay the Recipient the amount and in the manner set out in Schedule B of this Agreement.
14. The Province will not have any obligation to provide a financial contribution under section 13 unless the Recipient has complied with the provisions set out in Schedule B.

COMMUNICATIONS

15. The Recipient agrees that all public information material pertaining to the Program will clearly indicate that the Program is funded through the Province. The recipient acknowledges that the Province would like at least 15 working days notice of any scheduled communications material or public events relating to the Program.
16. All announcements will be coordinated with the British Columbia Communications and Public Engagement.

DEFAULT

17. Any of the following events will constitute an Event of Default whether any such event be voluntary, involuntary or result from the operation of law of any judgment or order of any court or administrative or government body:
 - (a) the Recipient fails to comply with any provision of this Agreement;
 - (b) any representation or warranty made by the Recipient in connection with this Agreement is untrue or incorrect;
 - (c) any information, statement, certificate, report or other document furnished or submitted by or on behalf of the Recipient pursuant to or as a result of this Agreement is untrue or incorrect; or,
 - (d) the Recipient fails to provide positive confirmation that the Program has been completed by the Completion Date.

TERMINATION

18. Upon the occurrence of any Event of Default and at any time thereafter the Province may, notwithstanding any other provision of the Agreement, at its sole option, elect to do any one or more of the following:
 - (a) terminate this Agreement and the Recipient shall repay such amounts as determined by the Province, such amounts shall constitute a debt due to the Province;
 - (b) pursue any other remedy available at law or in equity.
19. If the Province terminates this Agreement under paragraph 18 (a), then such termination may take place on ten (10) days' written notice.

APPROPRIATION

20. Notwithstanding any other provision of this Agreement, the payment of money by the Province to the Recipient under this Agreement is subject to:
 - (a) there being sufficient monies available in an appropriation, as defined in the Financial Administration Act to enable the Province, in any fiscal year or part thereof when any payment by the Province to the Recipient falls due under this Agreement, to make that payment; and
 - (b) Treasury Board, as defined in the Financial Administration Act, not having controlled or limited expenditure under any appropriation referred to in subsection (a) of this section.

AUDIT

21. In addition to any other rights of inspection the Province may have under statute or otherwise, the Province may at any reasonable time and on reasonable notice to the Recipient, enter on the Recipient's premises to inspect and, at the Province's discretion, copy any of the Material and the Recipient must permit, and provide reasonable assistance to, the exercise by the Province of the Province's rights under this section.

NO FURTHER OBLIGATIONS

22. The Recipient acknowledges that nothing in this Agreement will bind the Province to provide additional provincial funding for the development and on-going operational costs of the Program or any financing for any addition or improvement to the Program, or any cost overruns of the Program and that no partnership, joint venture or agency will be created or will be deemed to be created by this Agreement or any action of the parties under this Agreement.

SURVIVAL OF TERMS

23. Sections 7(b) and (c), 15, 18(a) and (b) or any other terms which by their nature or intent should continue after the term of this Agreement continue in force indefinitely, even after this agreement ends.

NOTICE

24. (a) Any written communication from the Recipient to the Province must be mailed, personally delivered, faxed, or electronically transmitted to the following address:

Ministry of Health
4-2, 1515 Blanshard Street
Victoria, BC V8W 3C8

Fax: 250 952-1570
Shelley.Canitz@gov.bc.ca

Attention: Shelley Canitz, Director, Tobacco Control Program

- (b) Any written communication from the Province to the Recipient must be mailed, personally delivered, faxed or electronically transmitted to the following address:

BC Lung Association
2675 Oak Street
Vancouver, BC V6H 2K2

Fax: 250 731-5810
macdonald@bc.lung.ca

Attention: Scott MacDonald, President and Chief Executive Officer

- (c) Any written communication from either party will be deemed to have been received by the other party on the tenth business day after mailing in British Columbia; on the date of personal delivery if personally delivered; or on the date of transmission if faxed.

- (d) Either party may, from time to time, notify the other by notice in writing of a change of address and following the receipt of such notice, the new address will, for the purposes of paragraph 23 (a) or (b) of this Agreement, be deemed to be the address or facsimile of the party giving such notice.

MISCELLANEOUS

25. This Agreement will be governed by and construed in accordance with the laws of the Province of British Columbia.

- IN WITNESS WHEREOF each of the parties has executed this Agreement on the dates set out below.

Date July 9 / 2014

Date July 9, 2014

Schedule A: PROGRAM DESCRIPTION AND DATES

- A.1 Program Title: Tobacco Cessation
- A.2 The Commencement Date is on the signing of this agreement
- A.3 The Completion Date is no later than March 31, 2015.
- A.4 The Program will consist of the following:
 - Provision and promotion of smoking cessation services to British Columbians as detailed in Appendix A.

Schedule B: PAYMENT AND REPORTING REQUIREMENTS

B.1 Financial Contribution by the Province:

The Recipient, having met the Eligibility Criteria and agreeing to the Stipulations in this Agreement, the Province will make a financial contribution toward the Eligible Program Costs of the Recipient equal to \$2,100,000 being the maximum amount of funding approved by the Province.

B.2 Timing of Payment to the Recipient:

The Province will make one payment for its portion of the Eligible Costs that will become due and payable upon the signing of this Grant Agreement.

B.3 Final Report:

The Recipient agrees to provide to the Province a Final Program Status Report, in a form established by the Province.

NOTE: Reports submitted by the Recipient under the terms of this section are for the Province's information and Program accountability only, and their review by the Province in no way endorses, approves or verifies the findings, technical data, results, quality statements, representations or recommendations therein, and the Recipient warrants that all information contained in any report is true and correct.

B.4 Other Information:

The Recipient will provide the Province, upon request, interim reports and all such other information concerning the progress of the Program to completion and payment of Eligible Costs, as may be required by the Province.

Page 093 to/à Page 101

Withheld pursuant to/removed as

s.13;s.17

**BC Lung Association
Final QuitNow Plan****April 2014-March 2015**

Introduction: The BC Lung Association receives funds from the Ministry of Health to provide cessation services to British Columbians. The BC Lung Association has developed QuitNow, a provincial program, with the intent of supporting British Columbians in their quit.

The following plan outlines the direction for QuitNow for 2014/2015. QuitNow strives to be on the cutting edge of cessation work. As such, priorities are based on ongoing evaluation, research into QuitNow's user base and trends in tobacco control. This tentative plan is subject to change based on government priorities as per discussions with Ministry of Health Tobacco Control Program.

QuitNow Goal: To provide a variety of evidence-based supports and services to approximately 30,900 (6% of 515,000) smokers and recent quitters in BC during 2014-2015.

Category	Description, Ongoing Management and Planned Direction	Budget
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<p style="writing-mode: vertical-rl; transform: rotate(180deg);">User Services</p>	<p>Web Service The primary gateway for clients to access the core services and tools offered by QuitNow. Includes: My Quit Centre homepage, Interactive Quit Plan, Expert Chat service, Quit Coach Moderated Forum, Quit Stats Tracker, Personalized Milestone Certificates, Text and Video Stories, Downloadable resources, Directory of Local Programs and an Online Order Form for print material.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Updates to content using best and emerging practices and emerging practice; assist registrants with issues; create new polls; refresh images; respond to needs of stakeholders; monitor progress towards targets through analytics; work closely with website service provider (Amira) to ensure changes are made based on improving the clients experience and health outcomes. <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Integrate evaluation follow-up survey at 7-months into website ❖ Upgrade automated email messaging ❖ Streamline referral process ❖ Make our quit plan tool more instructive, effective, and interactive ❖ Develop a QuitNow mobile site to meet the specific needs of quit-ready males age 19 to 45. ❖ Make our quit coaches – and their importance – more visible to end users ❖ Explore expanding forum discussion to include other provinces to help drive participation ❖ Enhance QuitNow website for healthcare providers <ul style="list-style-type: none"> ○ Includes the ability for providers to track activity of patients/clients referred <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track monthly number of unique users (anonymous or registered) who come to QuitNow website ❖ Track monthly number of participants in the community forums each month ❖ Track monthly number of milestone certificate downloads 	<p>s.17</p>
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Category	Description, Ongoing Management and Planned Direction	Budget
User Services	<p>Phone Service Free tobacco cessation phone coaching serviced by Care Coaches or Assistants 24/7. Eight-call series that integrates interactive voice response technology is offered to all smokers in BC. Clients can access the phone service by calling 8-1-1 or 1-877-455-2233, registering through www.quitnow.ca or receiving a proactive call after a fax referral from their healthcare provider.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Weekly teleconference with service provider (Sykes); generating reports; monitoring engagement; monitoring quality assurance; responding to client issues/questions; reporting out to stakeholders; monitoring forum within web-service; reviewing expert chat logs; participating in Health Canada evaluation <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Enhance the feedback loop to referral agents ❖ Integrate evaluation follow-up at 7-month ❖ Pilot group quit coaching using teleconferencing technology ❖ Improve the reporting system to ensure they meet funders' needs <p>Key Performance Indicators</p> <ul style="list-style-type: none"> ❖ Track percentage of conversion of referrals to at least one counselling session 	s.17
	<p>Text Service A 14-week motivational text messaging service that can be accessed using a short code through a cell phone or through an online registration process</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Updating messages based on best practices; creating new targeted messages; monitoring engagement; responding to client issues/questions; processing of invoices. <p>Planned Enhancements</p> <ul style="list-style-type: none"> ❖ Promote short code registration to decrease barriers ❖ Complete a literature review on the developments in text messaging ❖ Tailor and personalize messages ❖ Extend the messages for the maintenance period ❖ Increase interactivity ❖ Integrate evaluation ❖ Review engagement with text program, including assessment of customized keywords used <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track number of users who sign and complete 14-week text service 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
User Services	<p>Resource Development & Distribution Development and distribution of branded resources that promote the core services and help smokers quit smoking.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Update content and images on current resources section of the website; design resources to meet our target audience needs; seek input on resources from stakeholders; review resources to ensure they meet brand guidelines; manage inventory; update and maintain the online order system; budgeting and invoicing <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Update QuitNow Live material with input from David Forbes ❖ Create a Smart Steps booklet for Family & Friends ❖ Explore resources that are useful for healthcare providers ❖ Explore refreshing promotional items (swag) <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Ability to provide resources to health promoters and healthcare providers upon request over 90% of the time. 	s.17
Increasing Reach	<p>Workplace Cessation Workshops Health promoters will continue to facilitate Workplace Cessation Workshops with large employers and municipalities to help them develop a workplace tobacco cessation plan that includes referrals to QuitNow as a key component of plan. Human resource personnel are the target group for the workshops.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Respond to requests from workplaces; organize logistics; inventory management of print material; generate reports; regular meetings with Wellness Fits; monitor progress; revise material based on feedback <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Maintain a presence in workplace cessation but not active promotion <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Respond to 100% of requests for assistance with workplace cessation. <p>QuitNow Awareness and Tobacco Cessation Presentations QuitNow is regarded as the provincial expert in tobacco cessation. As a result health promoters receive requests and find opportunities to present to diverse groups on various cessation topics.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Respond to requests and leverage opportunities that are presented by partners and stakeholders; customize powerpoints for the audience; seek feedback to improve presentations; enhance knowledge base through educational opportunities to maintain expertise of health promoters <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Address perceived lack of confidence in cessation interventions among doctors through presentations to Divisions of Family Practice ❖ Raise awareness of QuitNow through regional service groups like Rotary ❖ Conduct 1 hour presentations with healthcare providers prior to their graduation from post-secondary programs <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Respond to 100% of requests that have the potential to raise awareness of QuitNow & tobacco cessation among professionals who care for smokers. 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Health Promoter Program Health Promoters are local contractors who are responsible for increasing the reach of QuitNow throughout the province by making personal contact with healthcare providers, employers, pharmacists, Aboriginal communities, those at-risk for developing COPD and tobacco stakeholders.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Hire new promoters; negotiate yearly contracts; provide mentorship; human resource management; workload management; budgeting; monthly invoicing; inventory control; generating leads/opportunities; update templates & guidelines; ensure quality assurance; problem-solving; monitor progress towards targets <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Leverage relationships with pharmacy cessation champions to identify new training opportunities ❖ Promote QuitNow at dental conferences and divisions of family practice ❖ Make personal contact with healthcare providers actively referring patients to QuitNow ❖ Provide intensive support to larger clinics that have champions <p>Key Performance Indicators</p> <ul style="list-style-type: none"> ❖ Increase the number of fax or online referrals by healthcare providers by 5% each month compared to the same month in the previous year 	(continued from above)
	<p>QuitNow Live Training QuitNow will continue to reach and train pharmacists and other healthcare providers to make referrals to QuitNow using fax and online referrals.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Generate interest in training; meet with pharmaceutical representatives; meet with pharmacy representatives; scheduling of facilitator; organize logistics; inventory management of print material; generate reports; budgeting; invoicing; monitoring and evaluating progress <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Reach into “quit ready” communities that have been identified by partners ❖ Enhance QuitNow accredited cessation training so it appeals to healthcare providers beyond pharmacists ❖ Offer booster sessions to past trained pharmacists and other healthcare providers that need practical help ❖ Survey past participants <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Increase the number of fax or online referrals by healthcare providers by 5% each month compared to the same month in the previous year 	

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Leveraging Partnerships QuitNow can increase reach to more smokers by leveraging our partnerships with stakeholders and those who intervene with smokers.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Schedule meetings; prepare minutes; report on progress; minimize duplication of efforts; ensure regular contact with local tobacco cessation researchers; provide data and feedback when requested; partner on research projects that fill a knowledge gap for tobacco cessation; ensure the QuitNow brand is used consistently by research partners <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Work more closely with membership organizations to find ways to use their expertise and expand reach (e.g. BCMA, BCNU, Dental, Dental Hygienists etc.) ❖ Explore the interest and readiness for an Opt to Quit pilot that could be implemented in clinics, hospitals or entire health authorities. ❖ Continue to strengthen relationships with Aboriginal health leadership to better support Aboriginal smokers to quit <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ The identification of one new key partnership which has been established over the course of the 2014/15 fiscal year. 	(continued from above)
	<p>Social Media and Communications Use social media venues and other communications strategies to engage with and expand reach to British Columbians who are struggling to quit.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Schedule tweets; Post messages and moderate Facebook; plan ad campaigns on Google and Facebook; monitor insights & analytics; adjust plan based on outcomes; respond to client issues/questions; manage monthly Tobacco Free Tuesdays contest and generate online surveys; report generation; monitor progress towards targets <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Develop a Social Media Guideline & Communication Strategy Plan ❖ Create and promote a female user focused contest in May 2014 (World No Tobacco Day, May 31) ❖ Build Coach awareness into the social media platforms ❖ Revitalize QuitNow's contest entry page to include a refer a friend component ❖ Create and promote a male user focused promotion for January 2015 (National Non-Smoking Week) ❖ Leverage theme days/weeks/months and other events through Facebook mini-campaigns and news release ❖ Dig deeper into existing Facebook Survey data to find more insights and ideas for improvement <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Increase engagement on the QuitNow Facebook page and increase community by 20% ❖ Increase number of contest registrations through our new online contest referral system 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Earned Media Opportunities Identify opportunities to promote QuitNow and the BC Lung Association through media-worthy announcements</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Identify opportunities for earned media; pitch stories to press; write press releases; identify potential high-profile projects <p>Potential Opportunities</p> <ul style="list-style-type: none"> ❖ World No Tobacco Day contest ❖ Men's website launch timed with a pre-January National Non-Smoking Week promotion ❖ Profile a quit coach who is an ex-smoker now providing cessation services ❖ Announce sponsors (prize or otherwise) who make large commitments to 'Help B.C. QUIT' ❖ Leverage social themes/theme days (Earth Day, Mother's Day) to drive soft news on reasons to quit and stay quit. Could associate mini-contest/incentive campaigns. ❖ Industry journals or newsletters ❖ New partnerships with large organizations (ex. BCMA, BCNU) <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track number of cases of outside organizations promoting QuitNow 	(continued from above)
Quality Assurance	<p>Evaluation, Monitoring & Privacy In order to provide a quality service for smokers and other tobacco cessation stakeholders in BC, QuitNow integrates privacy protection, measurable metrics and evaluation into all initiatives</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Weekly calls with service providers; service reports; social media reports; review of Facebook Insight; review of Google Analytics; Tobacco Free Tuesday online survey and report; monthly target reporting; year-end reporting <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Assist Health Canada/EKOS Research with the evaluation of the Quitline and website ❖ Fine tune the analytics dashboard for the website ❖ Conduct 10-year retrospective evaluation ❖ Integrate 7-month data gathering into phone and website ❖ Develop new system for evaluating the txt program ❖ Conduct a Privacy Compliance Review for all services ❖ Explore establishing a QuitNow Advisory Council that includes stakeholders, ex-smokers and quit coaches. ❖ Make use of A/B testing through Optimizely.com to assist with piloting new ideas on the website and social media <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ The ability to report progress QuitNow is having on providing evidence-based cessation support and services to BC smokers. 	s.17
QuitNow Budget		s.17
BC Lung Admin fee		
Total Grant Received in 2014/2015 from MOH		

**BC Lung Association
Final QuitNow Plan****April 2014-March 2015**

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	<p>Text Service A 14-week motivational text messaging service that can be accessed using a short code through a cell phone or through an online registration process</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Updating messages based on best practices; creating new targeted messages; monitoring engagement; responding to client issues/questions; processing of invoices. <p>Planned Enhancements</p> <ul style="list-style-type: none"> ❖ Promote short code registration to decrease barriers ❖ Complete a literature review on the developments in text messaging ❖ Tailor and personalize messages ❖ Extend the messages for the maintenance period ❖ Increase interactivity ❖ Integrate evaluation ❖ Review engagement with text program, including assessment of customized keywords used <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track number of users who sign and complete 14-week text service 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
User Services	<p>Resource Development & Distribution Development and distribution of branded resources that promote the core services and help smokers quit smoking.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Update content and images on current resources section of the website; design resources to meet our target audience needs; seek input on resources from stakeholders; review resources to ensure they meet brand guidelines; manage inventory; update and maintain the online order system; budgeting and invoicing <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Update QuitNow Live material with input from David Forbes ❖ Create a Smart Steps booklet for Family & Friends ❖ Explore resources that are useful for healthcare providers ❖ Explore refreshing promotional items (swag) <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Ability to provide resources to health promoters and healthcare providers upon request over 90% of the time. 	s.17
Increasing Reach	<p>Workplace Cessation Workshops Health promoters will continue to facilitate Workplace Cessation Workshops with large employers and municipalities to help them develop a workplace tobacco cessation plan that includes referrals to QuitNow as a key component of plan. Human resource personnel are the target group for the workshops.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Respond to requests from workplaces; organize logistics; inventory management of print material; generate reports; regular meetings with Wellness Fits; monitor progress; revise material based on feedback <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Maintain a presence in workplace cessation but not active promotion <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Respond to 100% of requests for assistance with workplace cessation. <p>QuitNow Awareness and Tobacco Cessation Presentations QuitNow is regarded as the provincial expert in tobacco cessation. As a result health promoters receive requests and find opportunities to present to diverse groups on various cessation topics.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Respond to requests and leverage opportunities that are presented by partners and stakeholders; customize powerpoints for the audience; seek feedback to improve presentations; enhance knowledge base through educational opportunities to maintain expertise of health promoters <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Address perceived lack of confidence in cessation interventions among doctors through presentations to Divisions of Family Practice ❖ Raise awareness of QuitNow through regional service groups like Rotary ❖ Conduct 1 hour presentations with healthcare providers prior to their graduation from post-secondary programs <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Respond to 100% of requests that have the potential to raise awareness of QuitNow & tobacco cessation among professionals who care for smokers. 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Health Promoter Program Health Promoters are local contractors who are responsible for increasing the reach of QuitNow throughout the province by making personal contact with healthcare providers, employers, pharmacists, Aboriginal communities, those at-risk for developing COPD and tobacco stakeholders.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Hire new promoters; negotiate yearly contracts; provide mentorship; human resource management; workload management; budgeting; monthly invoicing; inventory control; generating leads/opportunities; update templates & guidelines; ensure quality assurance; problem-solving; monitor progress towards targets <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Leverage relationships with pharmacy cessation champions to identify new training opportunities ❖ Promote QuitNow at dental conferences and divisions of family practice ❖ Make personal contact with healthcare providers actively referring patients to QuitNow ❖ Provide intensive support to larger clinics that have champions <p>Key Performance Indicators</p> <ul style="list-style-type: none"> ❖ Increase the number of fax or online referrals by healthcare providers by 5% each month compared to the same month in the previous year 	(continued from above)
	<p>QuitNow Live Training QuitNow will continue to reach and train pharmacists and other healthcare providers to make referrals to QuitNow using fax and online referrals.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Generate interest in training; meet with pharmaceutical representatives; meet with pharmacy representatives; scheduling of facilitator; organize logistics; inventory management of print material; generate reports; budgeting; invoicing; monitoring and evaluating progress <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Reach into “quit ready” communities that have been identified by partners ❖ Enhance QuitNow accredited cessation training so it appeals to healthcare providers beyond pharmacists ❖ Offer booster sessions to past trained pharmacists and other healthcare providers that need practical help ❖ Survey past participants <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Increase the number of fax or online referrals by healthcare providers by 5% each month compared to the same month in the previous year 	

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Leveraging Partnerships QuitNow can increase reach to more smokers by leveraging our partnerships with stakeholders and those who intervene with smokers.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Schedule meetings; prepare minutes; report on progress; minimize duplication of efforts; ensure regular contact with local tobacco cessation researchers; provide data and feedback when requested; partner on research projects that fill a knowledge gap for tobacco cessation; ensure the QuitNow brand is used consistently by research partners <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Work more closely with membership organizations to find ways to use their expertise and expand reach (e.g. BCMA, BCNU, Dental, Dental Hygienists etc.) ❖ Explore the interest and readiness for an Opt to Quit pilot that could be implemented in clinics, hospitals or entire health authorities. ❖ Continue to strengthen relationships with Aboriginal health leadership to better support Aboriginal smokers to quit <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ The identification of one new key partnership which has been established over the course of the 2014/15 fiscal year. 	(continued from above)
	<p>Social Media and Communications Use social media venues and other communications strategies to engage with and expand reach to British Columbians who are struggling to quit.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Schedule tweets; Post messages and moderate Facebook; plan ad campaigns on Google and Facebook; monitor insights & analytics; adjust plan based on outcomes; respond to client issues/questions; manage monthly Tobacco Free Tuesdays contest and generate online surveys; report generation; monitor progress towards targets <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Develop a Social Media Guideline & Communication Strategy Plan ❖ Create and promote a female user focused contest in May 2014 (World No Tobacco Day, May 31) ❖ Build Coach awareness into the social media platforms ❖ Revitalize QuitNow's contest entry page to include a refer a friend component ❖ Create and promote a male user focused promotion for January 2015 (National Non-Smoking Week) ❖ Leverage theme days/weeks/months and other events through Facebook mini-campaigns and news release ❖ Dig deeper into existing Facebook Survey data to find more insights and ideas for improvement <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Increase engagement on the QuitNow Facebook page and increase community by 20% ❖ Increase number of contest registrations through our new online contest referral system 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Earned Media Opportunities Identify opportunities to promote QuitNow and the BC Lung Association through media-worthy announcements</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Identify opportunities for earned media; pitch stories to press; write press releases; identify potential high-profile projects <p>Potential Opportunities</p> <ul style="list-style-type: none"> ❖ World No Tobacco Day contest ❖ Men's website launch timed with a pre-January National Non-Smoking Week promotion ❖ Profile a quit coach who is an ex-smoker now providing cessation services ❖ Announce sponsors (prize or otherwise) who make large commitments to 'Help B.C. QUIT' ❖ Leverage social themes/theme days (Earth Day, Mother's Day) to drive soft news on reasons to quit and stay quit. Could associate mini-contest/incentive campaigns. ❖ Industry journals or newsletters ❖ New partnerships with large organizations (ex. BCMA, BCNU) <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track number of cases of outside organizations promoting QuitNow 	(continued from above)
Quality Assurance	<p>Evaluation, Monitoring & Privacy In order to provide a quality service for smokers and other tobacco cessation stakeholders in BC, QuitNow integrates privacy protection, measurable metrics and evaluation into all initiatives</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Weekly calls with service providers; service reports; social media reports; review of Facebook Insight; review of Google Analytics; Tobacco Free Tuesday online survey and report; monthly target reporting; year-end reporting <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Assist Health Canada/EKOS Research with the evaluation of the Quitline and website ❖ Fine tune the analytics dashboard for the website ❖ Conduct 10-year retrospective evaluation ❖ Integrate 7-month data gathering into phone and website ❖ Develop new system for evaluating the txt program ❖ Conduct a Privacy Compliance Review for all services ❖ Explore establishing a QuitNow Advisory Council that includes stakeholders, ex-smokers and quit coaches. ❖ Make use of A/B testing through Optimizely.com to assist with piloting new ideas on the website and social media <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ The ability to report progress QuitNow is having on providing evidence-based cessation support and services to BC smokers. 	s.17
QuitNow Budget		s.17
BC Lung Admin fee		
Total Grant Received in 2014/2015 from MOH		

BC Lung Association Final QuitNow Plan

April 2014-March 2015

Introduction: The BC Lung Association receives funds from the Ministry of Health to provide cessation services to British Columbians. The BC Lung Association has developed QuitNow, a provincial program, with the intent of supporting British Columbians in their quit.

The following plan outlines the direction for QuitNow for 2014/2015. QuitNow strives to be on the cutting edge of cessation work. As such, priorities are based on ongoing evaluation, research into QuitNow's user base and trends in tobacco control. This tentative plan is subject to change based on government priorities as per discussions with Ministry of Health Tobacco Control Program.

QuitNow Goal: To provide a variety of evidence-based supports and services to approximately 30,900 (6% of 515,000) smokers and recent quitters in BC during 2014-2015.

Category	Description, Ongoing Management and Planned Direction	Budget
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<p style="writing-mode: vertical-rl; transform: rotate(180deg);">User Services</p>	<p>Web Service The primary gateway for clients to access the core services and tools offered by QuitNow. Includes: My Quit Centre homepage, Interactive Quit Plan, Expert Chat service, Quit Coach Moderated Forum, Quit Stats Tracker, Personalized Milestone Certificates, Text and Video Stories, Downloadable resources, Directory of Local Programs and an Online Order Form for print material.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Updates to content using best and emerging practices and emerging practice; assist registrants with issues; create new polls; refresh images; respond to needs of stakeholders; monitor progress towards targets through analytics; work closely with website service provider (Amira) to ensure changes are made based on improving the clients experience and health outcomes. <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Integrate evaluation follow-up survey at 7-months into website ❖ Upgrade automated email messaging ❖ Streamline referral process ❖ Make our quit plan tool more instructive, effective, and interactive ❖ Develop a QuitNow mobile site to meet the specific needs of quit-ready males age 19 to 45. ❖ Make our quit coaches – and their importance – more visible to end users ❖ Explore expanding forum discussion to include other provinces to help drive participation ❖ Enhance QuitNow website for healthcare providers <ul style="list-style-type: none"> ○ Includes the ability for providers to track activity of patients/clients referred <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track monthly number of unique users (anonymous or registered) who come to QuitNow website ❖ Track monthly number of participants in the community forums each month ❖ Track monthly number of milestone certificate downloads 	<p>s.17</p>
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Category	Description, Ongoing Management and Planned Direction	Budget
User Services	<p>Phone Service Free tobacco cessation phone coaching serviced by Care Coaches or Assistants 24/7. Eight-call series that integrates interactive voice response technology is offered to all smokers in BC. Clients can access the phone service by calling 8-1-1 or 1-877-455-2233, registering through www.quitnow.ca or receiving a proactive call after a fax referral from their healthcare provider.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Weekly teleconference with service provider (Sykes); generating reports; monitoring engagement; monitoring quality assurance; responding to client issues/questions; reporting out to stakeholders; monitoring forum within web-service; reviewing expert chat logs; participating in Health Canada evaluation <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Enhance the feedback loop to referral agents ❖ Integrate evaluation follow-up at 7-month ❖ Pilot group quit coaching using teleconferencing technology ❖ Improve the reporting system to ensure they meet funders' needs <p>Key Performance Indicators</p> <ul style="list-style-type: none"> ❖ Track percentage of conversion of referrals to at least one counselling session 	s.17
	<p>Text Service A 14-week motivational text messaging service that can be accessed using a short code through a cell phone or through an online registration process</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Updating messages based on best practices; creating new targeted messages; monitoring engagement; responding to client issues/questions; processing of invoices. <p>Planned Enhancements</p> <ul style="list-style-type: none"> ❖ Promote short code registration to decrease barriers ❖ Complete a literature review on the developments in text messaging ❖ Tailor and personalize messages ❖ Extend the messages for the maintenance period ❖ Increase interactivity ❖ Integrate evaluation ❖ Review engagement with text program, including assessment of customized keywords used <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track number of users who sign and complete 14-week text service 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
User Services	<p>Resource Development & Distribution Development and distribution of branded resources that promote the core services and help smokers quit smoking.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Update content and images on current resources section of the website; design resources to meet our target audience needs; seek input on resources from stakeholders; review resources to ensure they meet brand guidelines; manage inventory; update and maintain the online order system; budgeting and invoicing <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Update QuitNow Live material with input from David Forbes ❖ Create a Smart Steps booklet for Family & Friends ❖ Explore resources that are useful for healthcare providers ❖ Explore refreshing promotional items (swag) <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Ability to provide resources to health promoters and healthcare providers upon request over 90% of the time. 	s.17
Increasing Reach	<p>Workplace Cessation Workshops Health promoters will continue to facilitate Workplace Cessation Workshops with large employers and municipalities to help them develop a workplace tobacco cessation plan that includes referrals to QuitNow as a key component of plan. Human resource personnel are the target group for the workshops.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Respond to requests from workplaces; organize logistics; inventory management of print material; generate reports; regular meetings with Wellness Fits; monitor progress; revise material based on feedback <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Maintain a presence in workplace cessation but not active promotion <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Respond to 100% of requests for assistance with workplace cessation. <p>QuitNow Awareness and Tobacco Cessation Presentations QuitNow is regarded as the provincial expert in tobacco cessation. As a result health promoters receive requests and find opportunities to present to diverse groups on various cessation topics.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Respond to requests and leverage opportunities that are presented by partners and stakeholders; customize powerpoints for the audience; seek feedback to improve presentations; enhance knowledge base through educational opportunities to maintain expertise of health promoters <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Address perceived lack of confidence in cessation interventions among doctors through presentations to Divisions of Family Practice ❖ Raise awareness of QuitNow through regional service groups like Rotary ❖ Conduct 1 hour presentations with healthcare providers prior to their graduation from post-secondary programs <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Respond to 100% of requests that have the potential to raise awareness of QuitNow & tobacco cessation among professionals who care for smokers. 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Health Promoter Program Health Promoters are local contractors who are responsible for increasing the reach of QuitNow throughout the province by making personal contact with healthcare providers, employers, pharmacists, Aboriginal communities, those at-risk for developing COPD and tobacco stakeholders.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Hire new promoters; negotiate yearly contracts; provide mentorship; human resource management; workload management; budgeting; monthly invoicing; inventory control; generating leads/opportunities; update templates & guidelines; ensure quality assurance; problem-solving; monitor progress towards targets <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Leverage relationships with pharmacy cessation champions to identify new training opportunities ❖ Promote QuitNow at dental conferences and divisions of family practice ❖ Make personal contact with healthcare providers actively referring patients to QuitNow ❖ Provide intensive support to larger clinics that have champions <p>Key Performance Indicators</p> <ul style="list-style-type: none"> ❖ Increase the number of fax or online referrals by healthcare providers by 5% each month compared to the same month in the previous year 	(continued from above)
	<p>QuitNow Live Training QuitNow will continue to reach and train pharmacists and other healthcare providers to make referrals to QuitNow using fax and online referrals.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Generate interest in training; meet with pharmaceutical representatives; meet with pharmacy representatives; scheduling of facilitator; organize logistics; inventory management of print material; generate reports; budgeting; invoicing; monitoring and evaluating progress <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Reach into “quit ready” communities that have been identified by partners ❖ Enhance QuitNow accredited cessation training so it appeals to healthcare providers beyond pharmacists ❖ Offer booster sessions to past trained pharmacists and other healthcare providers that need practical help ❖ Survey past participants <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Increase the number of fax or online referrals by healthcare providers by 5% each month compared to the same month in the previous year 	

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Leveraging Partnerships QuitNow can increase reach to more smokers by leveraging our partnerships with stakeholders and those who intervene with smokers.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Schedule meetings; prepare minutes; report on progress; minimize duplication of efforts; ensure regular contact with local tobacco cessation researchers; provide data and feedback when requested; partner on research projects that fill a knowledge gap for tobacco cessation; ensure the QuitNow brand is used consistently by research partners <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Work more closely with membership organizations to find ways to use their expertise and expand reach (e.g. BCMA, BCNU, Dental, Dental Hygienists etc.) ❖ Explore the interest and readiness for an Opt to Quit pilot that could be implemented in clinics, hospitals or entire health authorities. ❖ Continue to strengthen relationships with Aboriginal health leadership to better support Aboriginal smokers to quit <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ The identification of one new key partnership which has been established over the course of the 2014/15 fiscal year. 	(continued from above)
	<p>Social Media and Communications Use social media venues and other communications strategies to engage with and expand reach to British Columbians who are struggling to quit.</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Schedule tweets; Post messages and moderate Facebook; plan ad campaigns on Google and Facebook; monitor insights & analytics; adjust plan based on outcomes; respond to client issues/questions; manage monthly Tobacco Free Tuesdays contest and generate online surveys; report generation; monitor progress towards targets <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Develop a Social Media Guideline & Communication Strategy Plan ❖ Create and promote a female user focused contest in May 2014 (World No Tobacco Day, May 31) ❖ Build Coach awareness into the social media platforms ❖ Revitalize QuitNow's contest entry page to include a refer a friend component ❖ Create and promote a male user focused promotion for January 2015 (National Non-Smoking Week) ❖ Leverage theme days/weeks/months and other events through Facebook mini-campaigns and news release ❖ Dig deeper into existing Facebook Survey data to find more insights and ideas for improvement <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Increase engagement on the QuitNow Facebook page and increase community by 20% ❖ Increase number of contest registrations through our new online contest referral system 	s.17

Category	Description, Ongoing Management and Planned Direction	Budget
Increasing Reach	<p>Earned Media Opportunities Identify opportunities to promote QuitNow and the BC Lung Association through media-worthy announcements</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Identify opportunities for earned media; pitch stories to press; write press releases; identify potential high-profile projects <p>Potential Opportunities</p> <ul style="list-style-type: none"> ❖ World No Tobacco Day contest ❖ Men's website launch timed with a pre-January National Non-Smoking Week promotion ❖ Profile a quit coach who is an ex-smoker now providing cessation services ❖ Announce sponsors (prize or otherwise) who make large commitments to 'Help B.C. QUIT' ❖ Leverage social themes/theme days (Earth Day, Mother's Day) to drive soft news on reasons to quit and stay quit. Could associate mini-contest/incentive campaigns. ❖ Industry journals or newsletters ❖ New partnerships with large organizations (ex. BCMA, BCNU) <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ Track number of cases of outside organizations promoting QuitNow 	(continued from above)
Quality Assurance	<p>Evaluation, Monitoring & Privacy In order to provide a quality service for smokers and other tobacco cessation stakeholders in BC, QuitNow integrates privacy protection, measurable metrics and evaluation into all initiatives</p> <p>Ongoing Management</p> <ul style="list-style-type: none"> ❖ Weekly calls with service providers; service reports; social media reports; review of Facebook Insight; review of Google Analytics; Tobacco Free Tuesday online survey and report; monthly target reporting; year-end reporting <p>Planned Direction</p> <ul style="list-style-type: none"> ❖ Assist Health Canada/EKOS Research with the evaluation of the Quitline and website ❖ Fine tune the analytics dashboard for the website ❖ Conduct 10-year retrospective evaluation ❖ Integrate 7-month data gathering into phone and website ❖ Develop new system for evaluating the txt program ❖ Conduct a Privacy Compliance Review for all services ❖ Explore establishing a QuitNow Advisory Council that includes stakeholders, ex-smokers and quit coaches. ❖ Make use of A/B testing through Optimizely.com to assist with piloting new ideas on the website and social media <p>Key Performance Indicator</p> <ul style="list-style-type: none"> ❖ The ability to report progress QuitNow is having on providing evidence-based cessation support and services to BC smokers. 	s.17
QuitNow Budget		s.17
BC Lung Admin fee		
Total Grant Received in 2014/2015 from MOH		

Janicker, Maria HLTH:EX

From: Richards, Elizabeth HLTH:EX
Sent: Friday, July 11, 2014 8:22 AM
To: Codner, Tamara A HLTH:EX
Cc: Nisbet, Corinna HLTH:EX; Canitz, Shelley L HLTH:EX; White, Stacy HLTH:EX
Subject: RE: 2014-15 BC Lung Association grant

Great, thank you Tamara for the signed agreement. ☺ I have just forwarded to Sheila for processing. Cheers, Elizabeth

From: Codner, Tamara A HLTH:EX
Sent: Friday, July 11, 2014 8:13 AM
To: Richards, Elizabeth HLTH:EX; White, Stacy HLTH:EX
Cc: Nisbet, Corinna HLTH:EX; Canitz, Shelley L HLTH:EX
Subject: RE: 2014-15 BC Lung Association grant

Hi Elizabeth,

Please find attached the signed copy of the QuitNow Grant for your records.

If you have any questions, please feel free to contact me.

Thanks,

Tamara

250-952-2311

Dream as if you'll live forever! Live as if you'll die tomorrow! Dance as if no one is watching!



From: Richards, Elizabeth HLTH:EX
Sent: Friday, July 11, 2014 7:57 AM
To: White, Stacy HLTH:EX
Cc: Nisbet, Corinna HLTH:EX; Codner, Tamara A HLTH:EX; Canitz, Shelley L HLTH:EX
Subject: RE: 2014-15 BC Lung Association grant

Hi Stacy, Looks like you haven't included the attachment with your email. Could you please forward to me when you get a chance? Thanks! Elizabeth

From: White, Stacy HLTH:EX
Sent: Thursday, July 10, 2014 3:00 PM
To: Richards, Elizabeth HLTH:EX
Cc: Nisbet, Corinna HLTH:EX; Codner, Tamara A HLTH:EX; Canitz, Shelley L HLTH:EX
Subject: RE: 2014-15 BC Lung Association grant

Good Afternoon,

Please find attached the signed and approved 2014-15 BC Lung Association grant for QuitNow Services for processing.

Please let us know if you require any further information. Thanks so much.

Regards,
Stacy

Stacy A. White
Health Promotion Analyst, Healthy Living Branch
Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488



Please consider the environment before printing this email

From: [White, Stacy HLTH:EX](#)
To: ["Scott McDonald"](#)
Subject: RE: 2014-15 BC Lung Association grant
Date: Friday, July 11, 2014 6:40:00 AM
Attachments: [image001.jpg](#)

Fantastic. Have a great weekend!

Stacy A. White
Health Promotion Analyst, Healthy Living Branch
Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488



Please consider the environment before printing this email

From: Scott McDonald [mailto:mcdonald@bc.lung.ca]
Sent: Friday, July 11, 2014 6:38 AM
To: White, Stacy HLTH:EX
Subject: RE: 2014-15 BC Lung Association grant
Got it! Thank you!

Cheers!

Scott

Scott McDonald
President and CEO
BC Lung Association
2675 Oak Street
Vancouver, BC Canada
V6H 2K2
Office (604) 731-5864
Mobile (604) 603-5864
Fax (604) 731-5810
email: mcdonald@bc.lung.ca
Description: NewBCLALogo



From: White, Stacy HLTH:EX [mailto:Stacy.White@gov.bc.ca]
Sent: July-10-14 2:59 PM
To: Canitz, Shelley L HLTH:EX; 'Scott McDonald'
Cc: Nisbet, Corinna HLTH:EX; Codner, Tamara A HLTH:EX
Subject: 2014-15 BC Lung Association grant

Good Afternoon,

Please find attached the signed and approved 2014-15 BC Lung Association grant for QuitNow Services.

Thanks so much for your support in getting this completed and signed.

Regards,

Stacy

Stacy A. White
Health Promotion Analyst, Healthy Living Branch

Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488



Please consider the environment before printing this email

MINISTRY OF HEALTH GOVERNMENT TRANSFER REQUEST CFO APPROVAL FORM

Transfer Recipient: BC Lung Association

Transfer Type:

s.17

Program/Division: Tobacco Control Division, Healthy Living Branch

Program Contact/Phone Number: Shelley Canitz, 250 952-2304

Background and Strategic Context

Describe the nature of the transfer and the recipient. What program need or benefit does the transfer fulfill and how does it align with the Ministry's Service Plan.

The BC Lung Association receives funds from the Ministry of Health to provide 24/7 tobacco cessation services to British Columbians. The BC Lung Association has developed QuitNow, a provincial program, to help people quit using tobacco. As tobacco is the leading cause of preventable disease and death in BC, helping smokers quit is a key health objective. Tobacco reduction is a strategy within Goal 1 of the Ministry Service Plan: Support the health and wellbeing of British Columbians – Targeted and effective primary prevention and health promotion.

Financial Impact

What is the total fiscal impact on the Ministry's budget (by year if multiyear) Is the transfer onetime or will there be an ongoing need? Do the stipulations support 1yr or multiyear funding?

The Ministry grants \$2.1M per year to the BC Lung Association to provide a comprehensive suite of smoking cessation services to British Columbians (telephone, text, web, video, Facebook/Twitter, and print resources). BC Lung has received a grant to operate QuitNow for almost 10 years and as the need to help smokers quit is ongoing, it is expected that they will continue to need this grant for future years.

Transfer Recipient/Benefits

Describe the scope or extent of benefits that would be created, describe the nature of the client group that would benefit (seniors, community groups etc.) Was the Recipient chosen using a fair, open and transparent process? Is the Recipient expected to match funds and will they have the ability to pay back funds if stipulations are not met?

QuitNow is targeted at smokers and health professionals. Services are designed to help smokers plan, implement and maintain a quit; services also help health professionals talk to smokers about quitting and ensure resources are easily available for their patients. QuitNow also provides the behavioural support for the BC Smoking Cessation Program.

MINISTRY OF HEALTH

GOVERNMENT TRANSFER REQUEST

CFO APPROVAL FORM

Identify Risks

Identify specific risks of the initiative, including the risk of not moving forward. How will you mitigate these risks?

If funding is not given for QuitNow, smokers in BC will lose the primary source of cessation counselling in BC and it is likely that BC's smoking rate (presently the lowest in Canada) would increase. BC also has a MOA with Health Canada to provide cessation counselling – there is a 6 month notice of cancellation clause in that agreement. BC would need a communications strategy to handle any cancellation of service.

Evaluation and monitoring

How will you know whether the objectives have been met, do you have clear success criteria? Have you addressed performance targets or milestones that are required to be met and included a reporting requirement?

As part of the multi-year 1-800 package change initiative with Health Canada, Health Canada is evaluating telephone and web quit services in BC. The evaluation is expected to be finished in 2015. As part of the grant to BC Lung, they provide a yearly report on activities and related budget costs.

Additional approvals

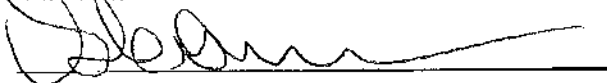
Are there any additional approvals needed from either Cabinet or Treasury Board? Is legislation required?

No further approvals are needed

Expense Authority Approval Terry Raicker for Matt Herman

(Print Name)

CFO Approval



21.3.1 Approval Process

2. A government transfer must be supported by a government transfer request that is approved by a ministry officer who has been delegated expense authority for this purpose. The approved government transfer request must also be submitted to the ministry Chief Financial Officer for review and sign off for the purpose of attesting that due diligence has been performed on the government transfer request to address the following requirements and expectations:
 - The request clarifies the organization's objectives, provides justification, and determines the minimum requirements to proceed with the government transfer initiative; and
 - The request provides the framework for meeting the organization's accountability requirements in the planning, monitoring, and reporting of government transfers.

See the Government Transfer Request Guide for requirements and expectations to consider in completing the government transfer request.

From: [Stott, Sheila A HLTH:EX](#)
To: [Codner, Tamara A HLTH:EX](#)
Cc: [Reicker, Terry HLTH:EX](#)
Subject: RE: 2014-15 BC Lung Association grant pymt
Date: Tuesday, July 22, 2014 10:06:44 AM
Attachments: [image001.jpg](#)
Importance: High

Hi Tamara,

I initiated the ^{s.17} payment to BC LUNG yesterday, can you please confirm that this is ok?
Normally the program area would request me to initiate the payment directly. Arlene Paton would be the EA due the \$ amount, & I put her name on the invoice as EA.

Many thanks,
Sheila

Sheila Stott

Finance & Decision Support – PPH & MBPSD | Ministry of Health | 2-1, 1515 Blanshard St. Victoria, BC
V8W 3C8 | Ph: (250) 952-1745 | E-mail: Sheila.Stott@gov.bc.ca

From: Codner, Tamara A HLTH:EX
Sent: Friday, July 11, 2014 9:07 AM
To: Stott, Sheila A HLTH:EX
Subject: RE: 2014-15 BC Lung Association grant

Hi Sheila,

Please find attached the documents as per your request.

If you have any questions, please feel free to contact me.

Thanks,

Tamara

250-952-2311

Dream as if you'll live forever! Live as if you'll die tomorrow! Dance as if no one is watching!



From: Stott, Sheila A HLTH:EX
Sent: Friday, July 11, 2014 8:57 AM
To: Codner, Tamara A HLTH:EX
Subject: RE: 2014-15 BC Lung Association grant

Hi Tamara – Can you please send me the Executive Routing Form/ E approvals, & your approved CFO approval form to complete this grant pkg for our records.

Thanks,
Sheila

Sheila Stott

Finance & Decision Support – PPH & MBPSD | Ministry of Health | 2-1, 1515 Blanshard St. Victoria, BC
V8W 3C8 | Ph: (250) 952-1745 | Email: Sheila.Stott@gov.bc.ca

From: Richards, Elizabeth HLTH:EX
Sent: Friday, July 11, 2014 8:21 AM
To: Stott, Sheila A HLTH:EX
Subject: FW: 2014-15 BC Lung Association grant

Hi Sheila, Please find attached the signed Quit Now Services grant. Thanks, Elizabeth

From: Codner, Tamara A HLTH:EX
Sent: Friday, July 11, 2014 8:13 AM
To: Richards, Elizabeth HLTH:EX; White, Stacy HLTH:EX
Cc: Nisbet, Corinna HLTH:EX; Canitz, Shelley L HLTH:EX
Subject: RE: 2014-15 BC Lung Association grant

Hi Elizabeth,

Please find attached the signed copy of the QuitNow Grant for your records.

If you have any questions, please feel free to contact me.

Thanks,

Tamara

250-952-2311

Dream as if you'll live forever! Live as if you'll die tomorrow! Dance as if no one is watching!



From: Richards, Elizabeth HLTH:EX
Sent: Friday, July 11, 2014 7:57 AM
To: White, Stacy HLTH:EX
Cc: Nisbet, Corinna HLTH:EX; Codner, Tamara A HLTH:EX; Canitz, Shelley L HLTH:EX
Subject: RE: 2014-15 BC Lung Association grant

Hi Stacy, Looks like you haven't included the attachment with your email. Could you please forward

to me when you get a chance? Thanks! Elizabeth

From: White, Stacy HLTH:EX
Sent: Thursday, July 10, 2014 3:00 PM
To: Richards, Elizabeth HLTH:EX
Cc: Nisbet, Corinna HLTH:EX; Codner, Tamara A HLTH:EX; Canitz, Shelley L HLTH:EX
Subject: RE: 2014-15 BC Lung Association grant

Good Afternoon,

Please find attached the signed and approved 2014-15 BC Lung Association grant for QuitNow Services for processing.

Please let us know if you require any further information. Thanks so much.

Regards,
Stacy

Stacy A. White
Health Promotion Analyst, Healthy Living Branch
Population & Public Health
Ministry of Health
1515 Blanshard St, 4-2 / Victoria BC / V8W 3C8
Telephone: 250 952-2488



Please consider the environment before printing this email

What's New?

QuitNow 2014/15 Plan Overview

The overview is broken into 3 sections, with subsections: User Services (Web Service, Phone Service Text Service, and Resource Development & Distribution), Increasing Reach (Workplace Cessation Workshops, QuitNow Awareness and Tobacco Cessation Presentations, Health Promoter Program, QuitNow Live Training, Leveraging Partnerships, Social Media and Communications. Earned Media Opportunities), and Quality Assurance (Evaluation, Monitoring and Privacy). Within each subsection 'Potential Opportunities' and 'Key Performance Indicator' have been added.

QuitNow is also conducting a 10 Year Retrospective* (identified in their work plan)

- Audience = stakeholders, Health Authorities, MoH, professional etc.
- To be published on the website and used for promotions.
- Will include a placeholder for the Health Canada evaluation data.
- A review of utilization rates, trends, factors, outcome, reach, research, and gaps in research will be done/ identified.
- No new data will be used.

**Outline available if you would like to review.*

User Services

➤ Web Service

- NEW: See Planned Direction & Key Performance Indicators
- 2013/14 marked the launch of the 'Smokin Women' contest. This year (January) will see a microsite for men launched. UBC is currently doing a pilot study on this site with 100 men.
- Changes will be made based on improving the clients experience and health outcomes.
- It is planned that healthcare providers will see enhancements in the areas of registration, referrals and statistics.

➤ Phone Service

- NEW: See Planned Direction & Key Performance Indicators

➤ Text Service

- NEW: See Planned Enhancements & Key Performance Indicators
- A literature review will be done as well, and the concept of customized texts will be reviewed.

➤ Resource Development & Distribution

- NEW: See Planned Direction & Key Performance Indicators
- Review resources to ensure they meet brand guidelines
- Less printing and increased social media
- Smart Steps update will coincide with website update.

Increasing Reach

- Workplace Cessation Workshops
 - NEW: See Ongoing Management, Planned Direction & Key Performance Indicators
 - Health Promoters to focus on 'bigger wins'
- NEW: QuitNow Awareness and Tobacco Cessation Presentations
 - Last year this was focused on Pharmacist training and Division of Family Practice. This year this will increase to post-secondary presentations to students and requests for curriculum.
 - There has also been an interest in youth presentations in schools. This will be reviewed.
- Health Promoter Program
 - NEW: See Planned Direction & Key Performance Indicators
- NEW: QuitNow Live Training
 - All new.
- Leveraging Partnerships
 - NEW: See Planned Direction & Key Performance Indicators
 - Form new relationships with the (new) FNHA.
- Social Media and Communications
 - NEW: See Planned Direction & Key Performance Indicators
 - Launch men's campaign in January
 - Build a social media guide.
- NEW: Earned Media Opportunities
 - All New

Quality Assurance

- Evaluation, Monitoring, & Privacy
 - NEW: See Planned Direction & Key Performance Indicators
 - As per Privacy Compliance Review (Hooper et al.) Review all contracts, for consent and IA

MINISTRY OF HEALTH INFORMATION BRIEFING NOTE

Cliff # 1019274

PREPARED FOR: Honourable Terry Lake, Minister - FOR INFORMATION

TITLE: QuitNow Update: 2014/15 workplan, priorities and funding.

PURPOSE: To provide an update on QuitNow

BACKGROUND:

The BC Lung Association receives funds from the Ministry of Health (the Ministry) to provide cessation services to British Columbians. The BC Lung Association has developed QuitNow, a provincial program, with the intent of supporting British Columbians in their quit. In 2014/14 the Ministry allocated **s.17** to BC Lung Association for the promotion and delivery of tobacco cessation services to British Columbians through QuitNow Services.

DISCUSSION:

In addition to a formal grant agreement between the Ministry of Health and BC Lung Association, QuitNow provides a work plan for the upcoming year that highlights the programs goal, priorities and funding allocations.

The QuitNow goal set for 2014/15 is: To provide a variety of evidence-based supports and services to approximately 30,900 (6% of 515,000) smokers and recent quitters in BC during 2014-2015.

The 2014/15 work plan for QuitNow work plan focus' on 3 sections, each with subsections and budget allocation¹:

- User Services (Web Service, Phone Service Text Service, and Resource Development & Distribution) Budget: **s.17**
- Increasing Reach (Workplace Cessation Workshops, QuitNow Awareness and Tobacco Cessation Presentations, Health Promoter Program, QuitNow Live Training, Leveraging Partnerships, Social Media and Communications. Earned Media Opportunities) Budget: **s.17**
- Quality Assurance (Evaluation, Monitoring and Privacy). Budget: **s.17**

Program ADM/Division:	Arlene Paton, ADM, Population and Public Health
Telephone:	250.952.1731
Program Contact (for content):	Stacy White
Drafter:	Stacy White
Date:	November 14, 2014

¹ The work plan includes a BC Lung Admin Fee of \$210,000 which brings the total budget to \$2,100,000.



1032120

Mr. Scott McDonald
President and Chief Executive Officer
BC Lung Association
2675 Oak St
Vancouver BC V6H 2K2

Dear Mr. McDonald:

I am pleased to enclose a cheque in the amount of \$250,000 to the BC Lung Association for radon testing, awareness and support. Also enclosed is a signed copy of the Transfer Agreement.

On behalf of the Ministry of Health, I wish you continued success with this program.

Yours truly,

Manjit Sidhu, CA
Assistant Deputy Minister
Finance and Corporate Services

Enclosures

s.17

 20150325
 DATE Y Y Y M M D D

PAY TWO HUNDRED FIFTY THOUSAND DOLLARS 00CENTS

\$*****250,000.00

 TO BRITISH COLUMBIA LUNG ASSOCIATION
 2675 OAK ST
 VANCOUVER BC V6H 2K2

s.17

s.17

 BRITISH COLUMBIA
 GENERAL ACCOUNT

REMITTANCE STATEMENT - Detach before presenting cheque for cashing

 Province of British Columbia
 (HE)

CHEQUE NUMBER

s.17

CHEQUE DATE

Y	M	D
2015	Mar	25

s.17

INVOICE NUMBER

INVOICE DATE

INVOICE AMOUNT

DESCRIPTION

Mar 16 2015

250,000.00

 Grant Re
 FUNDING TO EXPAND THE RADON AWARE
 PROGRAM

s.17

s.17

This Grant Agreement dated for reference the 27th day of March, 2015

BETWEEN

HER MAJESTY THE QUEEN IN RIGHT OF THE PROVINCE OF BRITISH COLUMBIA,
represented by the Minister of Health (the "Province")

AND

BC Lung Association (the "Recipient")

For radon testing, awareness and support (the "Project")

WHEREAS:

- A. The Province has approved funding for the Project defined in this Agreement and such funding is to be paid by the Province to the Recipient pursuant to the Stipulations of this Agreement.
- B. The Recipient has met the eligibility criteria by providing to government a project request attached as Appendix A to this agreement.

DEFINITIONS

1. In this Agreement and its Schedules the following definitions apply:

"Agreement" means this Grant Agreement and any schedules attached hereto;

"Commencement Date" means the date identified in Schedule A

"Contract" means a contract between the Recipient and a Third Party whereby the latter agrees to contribute a product or service to the Project in return for financial consideration which may be claimed as an Eligible Cost;

"Eligible Costs" means all the direct costs properly and reasonably incurred by a Recipient or a Third Party on behalf of the Recipient with respect to the Project and is for public use or benefit and are incurred between the Project Commencement Date and the Completion Date.

"Eligibility Criteria" means the terms imposed by the Province and which must be met in order to qualify for funding.

"Fiscal Year" means the period beginning April 1 of a year and ending March 31 of the following year;



"Project" means the Project described in Schedule A;

"Stipulations" mean the terms and conditions set out in this Agreement that must be met in order for the Recipient to retain the funds it receives for the Project; and

"Third Party" means any person or entity or its officers, employees or agents, other than a party to this Agreement that is involved in the Project.

SCHEDULES

2. The Schedules to this Agreement are:

Schedule A Project Description and Dates

Schedule B Payment and Reporting Requirements

TERM OF AGREEMENT

3. Notwithstanding the actual date of execution of this agreement, the term of this agreement begins on the Commencement Date, and expires on March 31, 2017.

STIPULATIONS

4. The Recipient agrees to:

(a) carry out the Project in a diligent and professional manner;

(b) raise outside funds to also support the Project;

(c) commence carrying out the Project upon the signing of this Agreement;

(d) complete the Project no later than the Completion Date; and,

(e) provide evidence satisfactory to the Province that the Recipient has commenced work on the Project in accordance of section 4(b) and 4(c) of this Agreement. Such evidence may consist of financial statements of fundraising activity, if applicable or other evidence deemed appropriate by the Province.

5. If, in the opinion of the Province, the Recipient has failed to provide evidence satisfactory to the Province in accordance with section 4(b) and 4(c) of this Agreement, the Province may terminate this Agreement, effective immediately and require the refund of all funds advanced to the Recipient.

6. The Recipient will comply with all applicable laws.

7. The Recipient agrees to:



- (a) establish and maintain books of account, administrative records, invoices, receipts and vouchers for all expenses incurred in a form and content satisfactory to the Province;
- (b) permit the Province to inspect at all reasonable times, any books of account or records (both printed and electronic, including, but not limited to, hard disk), whether complete or not, that are produced, received or otherwise acquired by the Recipient as a result of this Agreement;
- (c) maintain all such accounts and records for a period of five years after the Completion Date;
- (d) ensure that all Contracts entered into by the Recipient with any Third Parties contain the provision in section 6 above; and
- (e) If requested by the Province, the Recipient will deliver within 90 days to the Province a copy of its audited Financial Statements for any period up to five years beyond completion and commissioning of the Project.

8. The Recipient will ensure that the financial contribution of the Province is to be used solely for the purpose of defraying the Eligible Costs incurred by the Recipient in carrying out and completing the Project as described in Schedule A.

9. The Recipient acknowledges that Eligible Costs that have received funding from any other federal or provincial sources may not be reimbursed under this Agreement, and that the Recipient agrees to promptly notify the Province in writing of any such funding received.

10. The Recipient acknowledges that it is not the agent of the Province and will do no act which might be construed as authorizing any contract or permitting any other liability or obligation to be incurred on behalf of the Province.

11. The Recipient will not make any material change in or to the Project as described in Appendix A without prior written consent of the Province; The Recipient will not make any material change in or to the intended use of the resulting Project as described in Appendix A, without prior written consent of the Province.

12. In the event the Funding exceeds the Recipient's requirements in respect of this Agreement the Recipient will notify the Province. The Province may require the excess funding to be returned or may permit the use of the excess funding as directed by the Province. Funds identified by the Province to be returned to the Province shall constitute a debt due to the Province.



OBLIGATIONS OF THE PROVINCE

13. Provided the Recipient is in compliance with its obligations under this Agreement, the Province will pay the Recipient the amount and in the manner set out in Schedule B of this Agreement.

14. The Province will not have any obligation to provide a financial contribution under section 13 unless the Recipient has complied with the provisions set out in Schedule B.

COMMUNICATIONS

15. The Recipient agrees that all public information material pertaining to the Project will clearly indicate that the Project is funded through the Province. The recipient acknowledges that the Province would like at least 15 working days notice of any scheduled communications material or public events relating to the Project.

16. All announcements will be co-ordinated with the British Columbia Government Communications and Public Engagement.

DEFAULT

17. Any of the following events will constitute an Event of Default whether any such event be voluntary, involuntary or result from the operation of law of any judgment or order of any court or administrative or government body:

- (a) the Recipient fails to comply with any provision of this Agreement;
- (b) any representation or warranty made by the Recipient in connection with this Agreement is untrue or incorrect;
- (c) any information, statement, certificate, report or other document furnished or submitted by or on behalf of the Recipient pursuant to or as a result of this Agreement is untrue or incorrect; or,
- (d) the Recipient fails to provide positive confirmation that the Project has been completed by the Completion Date.

TERMINATION

18. Upon the occurrence of any Event of Default and at any time thereafter the Province may, notwithstanding any other provision of the Agreement, at its sole option, elect to do any one or more of the following:

- (a) terminate this Agreement and the Recipient shall repay such amounts as determined by the Province, such amounts shall constitute a debt due to the Province;
- (b) pursue any other remedy available at law or in equity.

19. If the Province terminates this Agreement under paragraph 18 (a), then such termination may take place on ten (10) days' written notice.

APPROPRIATION

20. Notwithstanding any other provision of this Agreement, the payment of money by the Province to the Recipient under this Agreement is subject to:

- (a) there being sufficient monies available in an appropriation, as defined in the *Financial Administration Act* to enable the Province, in any fiscal year or part thereof when any payment by the Province to the Recipient falls due under this Agreement, to make that payment; and
- (b) Treasury Board, as defined in the *Financial Administration Act*, not having controlled or limited expenditure under any appropriation referred to in subsection (a) of this section.

AUDIT

21. In addition to any other rights of inspection the Province may have under statute or otherwise, the Province may at any reasonable time and on reasonable notice to the Recipient, enter on the Recipient's premises to inspect and, at the Province's discretion, copy any of the Material and the Recipient must permit, and provide reasonable assistance to, the exercise by the Province of the Province's rights under this section.

NO FURTHER OBLIGATIONS

22. The Recipient acknowledges that nothing in this Agreement will bind the Province to provide additional provincial funding for the development and on-going operational costs of the project or any financing for any addition or improvement to the Project, or any cost overruns of the Project and that no partnership, joint venture or agency will be created or will be deemed to be created by this Agreement or any action of the parties under this Agreement.

SURVIVAL OF TERMS

23. Sections 7(b) and (c), 15, 18(a) and (b) or any other terms which by their nature or intent should continue after the term of this Agreement continue in force indefinitely, even after this agreement ends.

NOTICE

24. (a) Any written communication from the Recipient to the Province must be mailed, personally delivered, faxed, or electronically transmitted to the following address:



Mr. Gordon Cross
Executive Director
Regional Grants and Decision Support
Ministry of Health
6-1, 1515 Blanshard Street
Victoria BC V8W 3C8

Email: Gordon.Cross@gov.bc.ca
Fax: 250-952-1420

(b) Any written communication from the Province to the Recipient must be mailed, personally delivered, faxed or electronically transmitted to the following address:

BC Lung Association
2675 Oak Street
Vancouver BC V6H 2K2

Telephone: (604) 731-5864
Fax: (604) 731-5810

Attention: Scott McDonald, President and Chief Executive Officer
Email: mcdonald@bc.lung.ca

- (c) Any written communication from either party will be deemed to have been received by the other party on the tenth business day after mailing in British Columbia; on the date of personal delivery if personally delivered; or on the date of transmission if faxed.
- (d) Either party may, from time to time, notify the other by notice in writing of a change of address and following the receipt of such notice, the new address will, for the purposes of paragraph 23 (a) or (b) of this Agreement, be deemed to be the address or facsimile of the party giving such notice.

MISCELLANEOUS

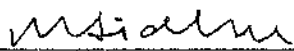
25. This Agreement will be governed by and construed in accordance with the laws of the Province of British Columbia.
26. The Schedules to this Agreement are an integral part of this Agreement as if set out at length in the body of this Agreement.
27. If any provision of this Agreement or the application to any person or circumstance is invalid or unenforceable to any extent, the remainder of this Agreement and the application of such provision to any other person or circumstance will not be affected or impaired thereby and will be enforceable to the extent permitted by law.



28. Nothing in this Agreement operates as a consent, permit, approval or authorization by the Province or any ministry or branch thereof to or for anything related to the Project that by statute, the Recipient is required to obtain unless it is expressly stated herein to be such a consent, permit, approval or authorization.
29. The Recipient will not, without the prior, written consent of the Province, assign, either directly or indirectly, this Agreement or any right of the Recipient under this Agreement
30. All disputes arising out of or in connection with this Agreement will be referred to and finally resolved by arbitration pursuant to the Commercial Arbitration Act.

IN WITNESS WHEREOF each of the parties has executed this Agreement on the dates set out below.

SIGNED by the Minister of Health)
or his or her duly authorized representative)
on behalf of HER MAJESTY THE QUEEN IN)
RIGHT OF THE PROVINCE OF)
BRITISH COLUMBIA:)


Ministry's Authorized Signatory

Date: March 25/15

Manjit Sidhu, CA
Assistant Deputy Minister
Finance and Corporate Services

BC Lung Association

Per:



Scott McDonald
President and Chief Executive Officer

Date: MARCH 24, 2015

Schedule A: PROJECT DESCRIPTION AND DATES

- A.1 Project Title: Radon Aware Program
- A.2 The Commencement Date is on the signing of this agreement
- A.3 The Completion Date is no later than March 31, 2017
- A.4 The Project will consist of the following:

To expand the Radon Aware program including the development of a broader radon-testing program in communities in BC and training of additional radon mitigation specialists.



Schedule B: PAYMENT AND REPORTING REQUIREMENTS

B.1 Financial Contribution by the Province:

The Recipient, having met the Eligibility Criteria and agreeing to the Stipulations in this Agreement, the Province will make a financial contribution toward the Eligible Project Costs of the Recipient equal to \$250,000 being the maximum amount of funding approved by the Province.

B.2 Timing of Payment to the Recipient:

The Province will make one payment for its portion of the Eligible Costs that will become due and payable upon the signing of this Grant Agreement.

B.3 Final Report:

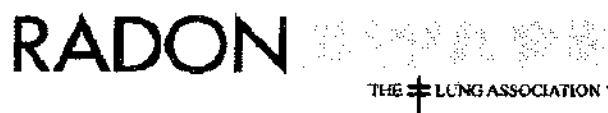
The Recipient agrees to provide to the Province a Final Project Status Report, in a form established by the Province.

NOTE: Reports submitted by the Recipient under the terms of this section are for the Province's information and Program accountability only, and their review by the Province in no way endorses, approves or verifies the findings, technical data, results, quality statements, representations or recommendations therein, and the Recipient warrants that all information contained in any report is true and correct.

B.4 Other Information:

The Recipient will provide the Province, upon request, interim reports and all such other information concerning the progress of the Project to completion and payment of Eligible Costs, as may be required by the Province.





what is
radon?
Overview

radon
resources

radon news

radon projects

For BC Residents

For Building
Professionals

For Policy Makers

For Researchers

Maps

Videos

Order a Radon Test
Kit

Order a Radon
Mitigation Book

Certified Mitigation
Provider Contacts

For BC Residents

We all want the cleanest, safest, most secure home environment to live in and raise our families. One way to do this is to monitor our homes for the quality of the air we breathe. Radon gas exposure is an indoor air issue growing in importance. Explore here what trusted environment, health and government organizations have to say about radon, the second known leading cause of lung cancer after smoking.

Here find basic information and common questions on the subject of radon.

Download the BC Lung Association's radon brochure.

Download our Frequently Asked Questions document.

APPENDIX A

Public Health Information

Residential

Schools

[About this Site](#) | [Contact Us](#) | [Disclaimer](#) | [Privacy](#) | [Sitemap](#) [Facebook](#) [Twitter](#)

Powered by [Smallbox](#) | Designed by [Gravity Inc.](#)



Please Provide Manual "D" Cheque to Rouhieh Nouredin
250-952-2966

COPY

Accounts Payable
Ministry of Health

Please generate a D Cheque payment of **\$250,000** to the following agency:

British Columbia Lung Association
2675 Oak Street
Vancouver, BC
V6H 2K2

Supplier Number: **s.17**

Location Number: **s.17**

Invoice Number:

Invoice Date: March 16, 2015

Payment stub information: Funding to expand the Radon Aware Program.

Client: **s.17**

Resp:

Service Line:

STOB:

Project:

MSidhu

March 20, 2015

Expense Authority: Manjit Sidhu, ADM
Finance and Corporate Services

Date

62 Qualified Receiver: Gordon Cross, Executive Director
Regional Grants and Decision Support

*original walked to
Ted Boomer
copy to file*

Program Contact Name: Rouhieh Nouredin 250-952-2966

*trans by copy to
Rouhieh
Mar 20/15
mp*