

# Instructions for Completing the FFY 2014 Annual Synar Report

## Introduction

This brief set of instructions for completing the FFY 2014 Annual Synar Report (ASR) was developed by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Prevention (CSAP), in an effort to provide assistance to states and U.S. territories (hereafter referred to as "states") in completing the FFY 2014 Synar reporting requirements.

We recognize the effort that states invest in completing their ASRs and hope the enclosed guidance information will facilitate this process. We encourage all states to contact their SAMHSA/CSAP Project Officer if other questions arise as they complete their Substance Abuse Prevention and Treatment Block Grant (SABG) applications.

## Completing the Annual Synar Report

SAMHSA/CSAP recommends that states use the ASR checklist provided to the states to ensure that all elements of the ASR have been completed prior to submitting the report to SAMHSA/CSAP.

When completing the report, please carefully follow all *italicized* directions in the ASR. Please note that the specific questions and subquestions each state must answer are dependent on the state-specific methodology used to conduct the Synar survey. The report contains skip patterns designed to adapt the report to meet your particular state's reporting requirements. Please carefully follow all skip patterns embedded in the questions and answer all appropriate questions consistent with your state's circumstances.

The electronic Word document version of the FFY 2014 Annual Synar Report utilizes Check Box Form Field Options. To properly use this feature, simply click on the box you wish to check.

## ASR Signature on Funding Agreements/Certifications

The FFY 2014 Funding Agreements/Certifications form must be signed by the Chief Executive Officer (i.e., state representative authorized by the Governor to sign the SABG application) or an authorized designee. The signed Funding Agreements/Certifications form must be submitted with the state's FFY 2014 Annual Synar Report. If a designee signs the form, documentation authorizing a designee must be attached to the hard copy of the application and also uploaded to WebBGAS under the heading "Governor's Designation Letter." ASRs are not considered complete if they are not signed and dated by the chief executive officer or a designee. Electronic copies of ASRs submitted on WebBGAS should still have the Funding Agreements/Certifications section completed with the Name, Title, and Date Signed boxes completed.

## ASR Section I (Compliance Progress)

The Compliance Progress year is the year immediately prior to the current FFY SAPT Block Grant application. For example, if the report is for FFY 2014, the state should report on activities taking place during FFY 2013.

### ASR Question 1

*State Tobacco Legislation:* In addition to monitoring each state's progress, SAMHSA/CSAP is tracking youth access to tobacco and other tobacco-related legislation throughout the United States and U.S. territories. Additional legislation regarding tobacco control may support state efforts to reduce youth access to tobacco products. SAMHSA/CSAP will be able to use the information gathered about state laws to provide technical assistance to States.

- Please respond "yes" or "no" to Questions 1a–c. If the response is "yes," follow the direction in italics asking for more information.
- If any changes in the specified state law(s) have occurred in FFY 2013, please attach a photocopy of the state law(s) and also upload a copy to WebBGAS under the heading "Youth Access Law (if changed since last FFY)."

## **ASR Question 2**

*Publicizing the Annual Synar Report:* As stipulated in the implementing regulation, states are required to make the ASR public **prior** to submitting it to SAMHSA/CSAP, which provides an opportunity for public comment about the implementation of states' youth tobacco access laws.

- Please check all applicable boxes describing how the ASR was made public prior to submitting it to SAMHSA/CSAP. If the ASR was made public via a state agency Web site, please provide the exact Web address where the ASR can be found and the date that the ASR was posted to this Web address.

## **ASR Question 3**

*Identify Lead Agencies:* Because state programs are periodically reorganized, SAMHSA/CSAP requires that the state specify the state agencies involved in **implementing** Synar requirements.

- Please identify the agencies specified in Questions 3a–c and mark whether the agency has changed since the previous reporting year.

## **ASR Question 4**

*Tobacco Prevention and Control Agency:* Often it is difficult for SAMHSA/CSAP to ascertain which state agency is **responsible for tobacco control** in the state (i.e., the agency that receives the Centers for Disease Control and Prevention's National Tobacco Control Program funding).

- Please identify the agency responsible for tobacco prevention/control activities and mark whether this agency has changed since the previous reporting year.

*Coordination and Collaboration With Lead Synar Agency:* SAMHSA/CSAP is often asked about the nature of coordination that occurs between the Synar program and the state tobacco control agency. Responses to this question will help SAMHSA/CSAP better understand the nature of collaboration that is occurring within states.

- Please check all applicable boxes in Question 4a that best identify coordination and collaboration efforts between the agencies specified in Question 3a and the agency specified in Question 4a.

*Agency Contracted to Enforce Federal Youth Access Laws:* Please identify the agency that is under contract with the Food and Drug Administration's Center for Tobacco Products (FDA/CTP) to enforce federal youth access and advertising laws and mark whether this agency has changed since the previous reporting year.

*Coordination and Collaboration With Lead Synar Agency:* SAMHSA/CSAP is often asked about the nature of coordination that occurs between the Synar program and the agency under contract with the FDA/CTP. Responses to this question will help SAMHSA/CSAP better understand the nature of collaboration that is occurring within states.

- Please check all applicable boxes in Question 4f that best identify coordination and collaboration efforts between the agencies specified in Question 3a and the agency specified in Question 4d.
- Please indicate if the state uses data from the FDA enforcement inspections for Synar reporting (i.e. a portion of the FDA inspections are completed at the sample of outlets randomly selected for the Synar survey and the results of those inspections are reported in the state's ASR).

## **ASR Question 5**

*Enforcement of State Youth Tobacco Access Laws:* Synar legislation requires states to enforce their youth access to tobacco laws. For Questions 5a–f, please clarify how the state conducts enforcement.

- Please check the applicable box in Question 5a that best describes the agencies that enforce the state's youth tobacco laws.
- Complete the table (Question 5b) specifying the number of penalties (citations, fines, permits/licenses suspended, permits/licenses revoked) imposed for violations of youth access to tobacco laws. If the data are available, report in the appropriate box whether these penalties were assessed against owners or

clerks. If state law does not allow for an item (i.e., state law does not allow for citations to be issued to owners or state law does not provide for tobacco retailer license/permit suspension, etc.), mark “NA” (not applicable). If the response to an item is unknown, mark “UNK.” The entire chart must be completed. **Please note that to comply with the Synar Amendment and its implementing regulation, the state must report citations issued for violations of youth tobacco access laws.**

- Check the applicable box in Question 5c that best describes the level of enforcement of youth access to tobacco laws carried out in your state.
- Indicate in Question 5d whether or not every tobacco outlet in the state received at least one enforcement compliance check in the past year. Please only respond “yes” to this question if every eligible tobacco outlet was visited and if the visit included an enforcement component.
- Check all applicable boxes (Question 5e) that best identify the additional activities conducted in your state to support enforcement and compliance with State tobacco access laws. Describe in two to three paragraphs each of the checked activities in the space provided.
- Check the appropriate box in Question 5f indicating whether citations or warnings are issued to retailers or clerks who sell tobacco to youth during inspections that are part of the Synar survey. If the answer is “yes,” please describe the state’s procedure for minimizing the risk of bias to the Synar survey results from retailers alerting each other to the presence of the survey team.

### **ASR Question 6**

*Sampling Methodology:* The state is required to have an approved up-to-date description of the Synar sampling methodology (Appendix B) on file with CSAP.

- Please indicate by checking the appropriate box whether the sampling methodology changed since the previous reporting year.
- Submit a copy of your CSAP-approved Synar Survey Sampling Methodology (*Appendix B*). If the sampling methodology changed from the previous reporting year, these changes must be reflected in the methodology submitted and must have been preapproved by CSAP prior to implementation.

### **ASR Question 7**

*Results of the Synar Survey:* States have the option to use the Synar Survey Estimation System (SSES) or another method to analyze survey results.

- Please indicate by checking the appropriate box whether the state used SSES to analyze the Synar survey data (Question 7a).
  - o If the state **used SSES** to analyze the Synar survey data:
    - Attach *SSES Summary Tables 1, 2, 3, and 4* to the hard copy of the report and upload *SSES Tables 1–5* in Excel to WebBGAS under the heading “Synar Survey Results.”
    - Go to Question 8.
  - o If the state **did not use SSES** to analyze the Synar survey:
    - Answer Questions 7b–h.
    - For Question 7b, provide appropriate statistics in the blank spaces.
    - For Question 7c, attach *Form 1 (required)*, which should be filled out by following instructions provided in the ASR.
    - For Question 7d, if Form 2 (for stratified sampling designs only) was used, check the first box and attach *Form 2 (Optional)*, which should be filled out by following instructions provided in the ASR. If a method other than Form 2 was used, or if Form 2 cannot be used due to the complexity of the sampling design (e.g., single-stage or two-stage cluster sampling

designs), please provide all formulas and calculations **OR** attach and clearly explain the program code and output with descriptions of all variable names used in the program.

- For Question 7e, check the appropriate box. Provide an explanation if “yes” box is checked.
- For Question 7f, if a cluster design was used for the Synar survey, attach *Form 3*, which should be filled out by following instructions provided in the ASR.
- For the table in Question 7g, report the outlet sample sizes for the Synar survey.
- For Question 7h, following instructions provided in the ASR, fill out and attach *Form 4 (required)* to provide detailed tallies of ineligible sample outlets by reasons for ineligibility and detailed tallies of eligible sample outlets with noncomplete inspections by reasons for noncompletion.
- Please note that the state should also upload Forms 1, 4, and 5, and Forms 2 and 3 (if applicable) in Excel to WebBGAS under the heading “Synar Survey Results.”

### **ASR Question 8**

#### *List Frame*

- Please indicate, by checking the appropriate box whether the state’s Synar survey used a list frame (i.e., selected the sample from a list of outlets).
  - If the state used a list frame:
    - Complete Questions 8a–d.
    - If a new coverage study (i.e., study to evaluate the completeness of the list frame) was conducted in this reporting period, complete and submit *Appendix D*.
  - If the state did not use a list frame:
    - Go to Question 9.

### **ASR Question 9**

*Inspection Protocol:* The state is required to have an approved up-to-date description of the Synar inspection protocol (Appendix C) on file with CSAP.

- Please indicate by checking the appropriate box whether the inspection protocol changed since the previous reporting year.
- Submit a copy of your Synar survey inspection protocol (*Appendix C*), which has been approved by CSAP. If the inspection protocol changed from the previous reporting year, these changes must be reflected in the methodology submitted and must have been preapproved by CSAP prior to implementation.
- Provide the inspection period for the Synar survey (Question 9a).
- Provide the number of youth inspectors used in the current inspection year (Question 9b). If the state used SSES and the number of youth inspectors reported in response to Question 9b does not match the number reported in SSES Table 4, please provide an explanation as to why the numbers differ.
- Complete *Form 5* by following the instructions provided in the ASR to report the number of inspections (attempted buys) and also the number of violations (successful buys) that occurred by age and gender of the youth inspectors. **SSES automatically produces the information in Form 5. If SSES was used to analyze the Synar survey data, Form 5 is not required.**

### **ASR Section II (Intended Use)**

The Intended Use year is the year (FFY 2014) for which SABG funds are being requested.

### **ASR Question 1**

### *Anticipated Changes*

- Please indicate by checking the appropriate boxes whether the state anticipates any changes in the Synar sampling methodology and inspection protocol.
- If changes are made in either the Synar sampling methodology or the Synar inspection protocol, the state is required to obtain approval from CSAP prior to implementation of the changes and to file an updated Synar Survey Sampling Methodology (Appendix B) or an updated Synar Survey Inspection Protocol (Appendix C).

### **ASR Question 2**

#### *State Plan*

- In two to three paragraphs, please describe the state’s planned activities to maintain the retailer violation rate at or below the target rate for the upcoming year. Describe plans for law enforcement efforts and supporting activities to enforce youth tobacco access laws, and any anticipated changes in youth tobacco access legislation or regulation in the state.

### **ASR Question 3**

#### *Challenges*

- Please check all applicable boxes that describe challenges the state faces in complying with the Synar requirements.
- Include in the space provided a brief description of all selected challenges and propose a plan for each, or indicate the state’s need for technical assistance related to each relevant challenge.

### **Appendixes B and C**

Appendix B (Synar Survey Sampling Methodology) and Appendix C (Synar Survey Inspection Protocol) are to reflect the state’s CSAP-approved sampling design and inspection protocol. These appendixes, therefore, should generally describe the design and protocol and, with the exception of Appendix B, Question 10, are not to be modified with year-specific information. Please note that any changes to either appendix must receive CSAP’s advance written approval. If the state’s sampling methodology and inspection protocol have not changed since last FFY, the state should submit the same response to the questions in these appendixes as it did last year. The only exception to this is Question 10 of Appendix B. To respond to this question, the state should provide detailed information about how the effective, target, and original sample sizes were calculated for the current FFY Synar survey.

### ***Appendix B: Synar Survey Sampling Methodology***

Please note that in order to cut and paste formulas into Appendix B, Question 9, you will need to unlock the Word document.

The instructions on how to unlock and relock the Word document using most versions of Word (with the exception of the 2007 version of Word) are listed below:

1. When you are in the Word document, right-click in a blank spot of the menu section (at the top).
2. Check “Forms” to open the forms menu. The menu may be floating when you open it or anchored at the top with your other menus.
3. At the end of the menu bar, you will see a padlock. Click on the padlock to unlock the document.
4. You will be able to paste formulas into the text box when the document is unlocked.
5. To relock the document, click on the same icon (it functions as a toggle switch).

The instructions on how to lock and unlock the Word document using the 2007 version of Word are listed below:

1. If you don’t have a Developer tab on your ribbon, click on the Word Office button at the top left of your Word window, and select “Word Options” at the very bottom right of the menu.
2. Under “Popular,” select the option for “Show Developer Tab in the Ribbon” and click “OK.”
3. To lock the document for the purpose of filling in form fields, click on the Developer tab on the ribbon and click on “Protect Document.”

4. From the menu that appears, click on “Restrict Formatting and Editing.”
5. Select under item 2 “Editing Restrictions”: “Allow only this type of editing in the document.”
6. In the drop-down menu directly below, select “Filling in Forms.”
7. Click the button “Yes, Start Enforcing Protection.”
8. Add a password, which is optional, and click “OK,” or click “OK” without a password to lock the form without one. Now the document is ready to be filled in a locked form.
9. To unprotect the document for editing purposes (and to cut and paste formulas), click on the Developer tab on the ribbon and click on “Protect Document” as above.
10. Click “Stop Protection,” and the document is editable again.

### ***Appendix C: Synar Survey Inspection Protocol***

In addition to completing Appendix C, please upload to WebBGAS a copy of the Synar inspection form under the heading “Synar Inspection Form” and a copy of the protocol used to train inspection teams on conducting and reporting the results of the Synar inspections under the heading “Synar Inspection Protocol.”

### **Appendix D: Coverage Study (if applicable)**

If a new coverage study was completed during the current calendar year, Appendix D should be completed in its entirety.