

**TOBACCO REVENUE, USE, SPENDING AND TRACKING
COMMISSION (TRUST)
ANNUAL REPORT**

JULY 1, 2005 THROUGH JUNE 30, 2006

**ARIZONA DEPARTMENT OF HEALTH SERVICES
Susan Gerard, Director**

**Published By
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Division of Public Health Services
Tobacco Education and Prevention Program
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**This Report is Provided as Required by
Proposition 303 from November 2002 General Election**

Arizona Department of Health Services

TOBACCO, REVENUE, USE, SPENDING AND TRACKING COMMISSION ANNUAL REPORT 2006

Background

The Tobacco Revenue, Use, Spending and Tracking (TRUST) Commission was created through the passage of Proposition 303 on November 5, 2002. Proposition 303, in addition to the levy of an additional tobacco tax, reaffirmed existing statutory language (A.R.S. section 36-772) authorizing the Arizona Department of Health Services (ADHS) administration of a portion of tobacco tax funds for tobacco education and prevention. Proposition 303 also created a new Chronic Disease Fund and allocated 2% of the new tobacco tax dollars to this fund. The TRUST Commission was formed as an advisory oversight board for both, the Tobacco Education and Prevention Program (TEPP) and Chronic Disease Fund, providing advice to the ADHS Director. In the letter of establishment, the TRUST Commission is requested to submit an annual report of its activities to the President of the Senate and the Speaker of the House of Representatives in July of each year.

On August 13, 2003, the Arizona State Legislature, through the office of the Speaker of the House and the Senate President, officially established the TRUST Commission and appointed the original eight members. The representation on the Commission is in concert with the categories articulated in Proposition 303.

Membership

In 2005 with the approval of former ADHS Director Catherine Eden, the TRUST Commission increased from eight to fifteen members, and includes a diverse and culturally appropriate representation of the state of Arizona. The current Commission has fourteen members (Attachment A).

Fiscal Year 2006 Meetings

The Commission convened eight times during Fiscal Year 2006: July 13, 2005; August 10, 2005; September 14, 2005; November 9, 2005; December 14, 2005; January 11, 2006; March 8, 2006; and May 10, 2006 (Attachment B).

Activities

The Commission agreed to change its meeting schedule to six times versus twelve times per year. The meetings would be longer in duration as a result of the change. Two of the meetings, in March 2007 and September 2006 will require all members to physically attend for a face-to-face meeting. The remaining four meetings will allow the members to participate by means of teleconferencing.

The nominating lead provided the Commission with an overview of members whose terms will be expiring this year. Five members' terms will expire, and the Commission agreed that those members whose terms are due to expire would stay on the Commission until a replacement is appointed and/or until the nominating committee's work is complete. It was also agreed that all new candidates be presented to the Director of the Arizona Department of Health Services prior to the Commission voting or taking action.

Meeting Highlights

- Cultural Competency Training/Cultural Standards
 - Overview of the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health Care presented
- Arizona Comprehensive Lung Disease and Asthma Plans released
 - Lung Disease goals
 1. Reducing the proportion of adults in Arizona whose activity is limited due to chronic lung disease
 2. Reducing deaths from COPD among Arizona adults
 - Asthma Plan goals
 1. Reducing asthma deaths in Arizona
 2. Reducing asthma-related hospitalizations and emergency department visits in Arizona
- School Bus Advertising: Arizona Revised Statute 36-772
 - Legislatively mandated to set aside \$550,000 for anti-smoking advertising on school buses
 - 41 School Districts participated
 - All 15 counties represented
 - 464 signs installed
- ADHS TEPP Strategic Plan
 - Vision, Mission, Goals, Objectives and Strategies agreed upon and completed
 - 18-month Operational Plan in development
- Social Marketing Overview
 - Planning Process
 - What Social Marketing Is and Is Not
 - Why Use Social Marketing
 - Seven Phases of Social Marketing
 - Plan Development
- Secondhand Smoke Campaign Launch
 - Campaign dates March through July 31, 2006
 - Budget \$1 million
 - Retag three CDC commercials and California "Bubbles" for Arizona use
 - Launched campaign at viewing of "Thank You for Smoking" movie on March 24, 2006
- 2003 Youth Tobacco Survey
 - Data collected according to CDC guidelines
 - Provided prevalence rates for Arizona's school-based youth
- Chronic Disease Fund Year-to-Date Program Overview

- New three year budget plan approved
- Will continue with Screening/Early Detection and Promoting Healthy Lifestyle grants
- Request for Proposal (RFP) and Request for Grant Applications (RFGA) released in February, for awards July 2007
- RFP budget \$2.5 million, RFGA budget up to \$600,000
- Open Meeting Law and Conflict of Interest Training
 - Kevin Ray and Charles Easaw, Office of the Attorney General

Attachments:

- ▶ July 13, 2005 Meeting Minutes
- ▶ August 10, 2005 Meeting Minutes
- ▶ September 14, 2005 Meeting Minutes
- ▶ November 09, 2005 Meeting Minutes
- ▶ December 14, 2005 Meeting Minutes
- ▶ January 11, 2006 Meeting Minutes
- ▶ March 06, 2006 Meeting Minutes
- ▶ May 06, 2006 Meeting Minutes

Tobacco Revenue, Use Spending and Tracking Commission
July 13, 2005
Arizona Department of Health Services
1740 West Adams Avenue, 4th Floor – Conference Room 411
Phoenix, Arizona 85007

MINUTES

Members Present: Matthew Madonna – Chairman
Linda Bailey
Wil Counts
Shelly Hall
Keith Kaback
Babak Nayeri
Bertha Sepulveda
Librado M. Ramirez

ADHS Staff: Danny Valenzuela – Deputy Director
Patricia Tarango – Office Chief
Sue Briody – Marketing Specialist
Meryl Salit – Statewide Programs Administrator
Jesse Nodora – Evaluation Administrator
M. Ann Gardner – Administrative Assistant

Presenters: Bob Leischow – Preventive Health Services
Patricia Tarango – Office of Tobacco & Education Prevention Program
Janet Bourbouse – Office of Chronic Disease Prevention and Nutrition

Public Attendees: Michelle Pabis – American Cancer Society
Donna Beedle – Maricopa County Public Health
Susan Williams – Mohave County Public Health

The meeting was called to order at 9:10am by Matt Madonna, - TRUST Commission Chairman

Welcome and introduction of all TRUST members.

Mr. Madonna – Adjustment to the agenda, Mr. Madonna provided an explanation of the guidelines on commentary by the public.

Mr. Madonna - Motion to approve the minutes of May 25, 2005.

Motioned to approve minutes

Minutes approved, 9 Yes, Votes

Mr. Madonna – Provided additional information in reference to **TRUST** Commission meeting being held the second Wednesday of every month also stating the meeting times for the August 10 and September 14 will be changing back to 10am to 2pm.

Mr. Madonna - Chronic Disease Fund is funded by 2% of the 60 cents tax increase from Proposition 303, end of June 2005 revenue close to \$2 million. TRUST Commission recommended to the Arizona Department of Health Services that the nine existing contracts be renewed to the end of June 2006, new Requests for Proposals would be in January 2006.

Ms. Tarango - Presented information in regards to the Office Chief's Report, providing updated information concerning the recently filled vacancies within the Office Tobacco Education and Prevention Program pertaining to Administrative Assistants. The Office of Tobacco Education and Prevention has hired Teresa Koehler and M. Ann Gardner as Administrative Assistants effective July 18, 2005. Ms Tarango also provided additional information advising of staffing vacancies concerning Senior Marketing Manager and Marketing Specialist Interviews have been completed for the Senior Marketing Manager and the interview process for the Marketing Specialist vacancy will begin the of July 18, 2005. Report Budget for fiscal year 2005-2006 pertaining to (Community Based Projects, Local Projects Contracts, Tribal Projects, Statewide Contracts, Media Contracts, Evaluation and Administration). **TOTAL** State Budget \$17,569,499.00. E.B. Lane Marketing contract will be funded for ninety days.

CDC Funding Update – Core Funding, provide for outreach to populations with tobacco related health disparities, Coalition for Tobacco Free Arizona (CTFA) fund community coalition activities, Supplemental Funding, Evaluation assessment of ASHLINE, Maricopa County Pilot Program targeting 18-24 year olds, Outreach to worksites and health care providers (Collateral promotion materials), Federal/**CDC Funding Total \$426,348.**

Discussion on CDC Quit line funding for targeting 18-24 year olds who have the highest rate for smoking funding also designated for blue-collar workers. Social Marketing Campaigns should promote areas toward inspiring people to change behavior patterns concerning indulging in tobacco related products. Keeping the message alive and on the front burner in reference to smoking prevention and education.

Lunch 11:30am

Meeting continuation 12:00pm

Ms. Bourbouse – Provided a detailed presentation addressing the Arizona Chronic Disease Plan concerning “Promoting Healthy Communities” through the Arizona Department of Health Services. Discussed information pertaining to the categorical plans, cardiovascular disease plan, cancer (Policy change, system changes, development of consistent plans), lung disease (provider involvement) plan, nutrition and physical activity plan, how services are delivered. Introduced information in regards to the burden of chronic disease in Arizona and how the integrated plan can be used as a springboard to bring communities and organizations together to work on the objective of the integrated and categorical plans.

Discussion addressed the Comprehensive Cancer Control Plan and to serve as a road map to guide action in cancer control, avoid duplication on services, prioritize funding and public policy related to cancer, benefits of the State Cancer Plan. August 2005.

Mr. Ramirez – Medical staff is limited in the rural communities to provide adequate services, health wellness education and preventive directives targeted at the health risks involved with tobacco related products Need to include discussion and definition for cultural competency to make sure are being used by the public.

Mr. Counts – Defining cultural competency is a complex phenomenon.

Discussion on Cultural Competency stating it must be mandated put in print and monitored. Defined in grants and standards fourteen categories defining cultural competency. Recommendations for requirements documenting information on cultural competency into Request for Proposal (RFP). TRUST Commission members agree to have cultural competency presentation in the September 2005 meeting.

Ms. Pabis – Pertinent issue is prevention and early detection.

Ms. Salit – Discussed the current American Lung Association COPD project funded with chronic disease tobacco tax funds, which does collaborate with TEPP contractors, Arizona Health Links (our worksite education and policy program, Arizona Smokers' Helpline (to which employees being screened for lung disease who are smokers are referred), and HealthCare Partnership (who promotes the American Lung Association program and with whom the project does joint trainings to healthcare providers and influencers).

Dr. Nayeri – Recommendations from such plans like Arizona Comprehensive Chronic Disease Program don't usually come with a budget for funding. Education, awareness, prevention and risk factors concerning smoking and indulging in other tobacco related products, are very helpful.

Mr. Leischow - In 2002 Arizona voters passed Proposition 303, which increased taxes on tobacco products. As a result, a portion of the revenue (2%) is directed to the prevention and early detection of the four leading disease-related causes of death. Based on vital statistics, the four diseases being targeted are heart disease, cancer, pulmonary disease (COPD), and stroke. In early 2004 a Promoting Healthy Lifestyle request for proposal was issued, as was an Early Detection and Screening request for proposal. As a result, external reviewers scored and recommended that five contracts be awarded for Screening and Early Detection and four be awarded for Promoting Healthy Lifestyles.

Those awarded an Early Detection and Screening contract are expected to promote best screening practices through theory based and data driven applications among defined disparate populations in Arizona.

Those awarded a Promoting Healthy Lifestyle contract are expected to address primary risk factors through theory based health education/health promotion strategies among defined disparate populations in Arizona.

Preliminary Results (FY 05) from a planning perspective, all funded contracts were required to develop a Logic Model or models through which proposed outcomes (short-term, intermediate, long term) are linked to specific outputs, which in turn are linked to specific activities. In addition, each project was required to develop an overall Evaluation Plan through which specific Process and Outcome measures can be tracked.

All contracts are required to submit a cumulative FY 05 annual report in late August/early September at which time a more formative evaluation report can be offered.

Since the last TRUST meeting at which time a motion was approved to proceed with contract extensions and subsequent contract renewals for the 9 existing contracts, renewal proposals have been submitted, reviewed, and further revised based on altered time frames and budgets. Of the 9, 7 are being renewed for 11 months and 2 for 10 months with expectation of being renewed effective August 1, 2005 – June 30, 2006. The remaining 2 proposals are presently being reviewed.

Aside from the American Cancer Society (ACS) and American Lung Association (ALA) projects, currently funded projects are expected to continue with their current community-based efforts throughout FY 06. Because of the focus that ACS took this year (needs/resource assessments around colorectal screening practices) and because of their outcomes, it was decided that this project would shift focus to health care provider education in regard to colorectal cancer. In regard to the ALA project, it was discovered through informal assessment in FY 05 that there needs to be enhanced awareness among providers and consumers around Chronic Obstructive Pulmonary Disease (COPD). In addition to continuing with community-based COPD screenings, FY 06 will entail formal assessment of providers, health care organizations, and consumers in regard to COPD screening and early detection practices.

Mr. Madonna – All August projects renewed and meeting contracts signed. Renewal nine projects totaling 1.4 million.

Mr. Madonna - Video conferencing for August TRUST Commission meeting (Flagstaff, Phoenix, Tucson- U of A Conference Center) request this be explored.

Dr. Nayeri – Suggesting that the Arizona Department of Public Health provide parking accommodations for all TRUST members.

Mr. Madonna – Discussion concerning the upcoming agenda items for the next meeting August 10, 2005.

Public Commentary

Ms. Williams – Addressed the importance of nutrition and physical activity concerning remaining healthy and smoke-free. High levels of stress are often common factor why many individuals return to smoking.

Next TRUST meeting agenda items, in addition to standing agenda items:

August 10, 2005

Chronic Disease Plan Priorities Janet Bourbouse

Video Conferencing Update Patricia Tarango
Parking Challenges
Security Sign-In
Wellness Council-Physical Activity Break

September 14, 2005

Report on Cultural Competency, downloading/circulating information to all the TRUST members. Matt Madonna

Chronic Disease Plan Update Janet Bourbouse

Cultural Competency Miriam Vega
Robbin Brooks

Mr. Madonna – Moved to adjourn the meeting.

Meeting adjourned at 1:35pm.
Meeting minutes seconded

Patricia Tarango
Office Chief
Office of Tobacco Education and Prevention Program
Arizona Department of Health Services

Tobacco Revenue, Use Spending and Tracking Commission
August 10, 2005
Arizona Department of Health Services
1740 West Adams Avenue, 4th Floor – Conference Room 411
Phoenix, Arizona 85007

MINUTES

Members Present: Matthew Madonna – Chairman
Linda Bailey
Shelly Hall
Keith Kaback
Babak Nayeri
Librado M. Ramirez
Dana Russell
Hugh Miller
Kelly Hsu
Benton Davis

ADHS Staff: Rose Conner – Assistant Director
Danny Valenzuela – Deputy Director
Patricia Tarango – Office Chief
Meryl Salit – Statewide Programs Administrator
Teresa Koehler – Administrative Assistant

Presenters: Patricia Tarango – Office of Tobacco Education and Prevention Program
Bob Leischow – Preventive Health Services
Janet Bourbouse – Office of Chronic Disease Prevention and Nutrition

Public Attendees: Shannon Harper – American Heart Association
Donna Beedle – Maricopa County Public Health
Lynne Smith – American Cancer Society

Call to Order

Mr. Madonna, TRUST Commission Chairman, called the meeting to order at 10:10 am ... welcome and introduction of all TRUST members. Reviewed agenda: the staff's recommendation of the priorities and provided an explanation of the guidelines on commentary by the public. Explained to public attendees the procedure related to the "Speaker's Slip". The public commentary section is limited to five minutes and that time is divided up between the number of individuals wishing to speak.

Approval of Minutes

Mr. Madonna - Motion to approve the minutes of July 13, 2005. Motion carried.

Chairman's Report

Mr. Madonna – Reminded everyone that the second Wednesday of every month would be the TRUST regularly scheduled meeting date; the next meeting is September 14, 10:00 am to 2:00 pm. Chairman stated rules of non-member participation. Members of the audience, especially Department of Health Services (DHS) staff and members of the contractors who are in the audience may be called on periodically to provide information and/or expertise on a specific issue, otherwise members of the audience who wish to make any points must register for time during the public commentary section of the agenda.

Office Chief's Report

Ms. Tarango – Requested input on specific items to include in the Office Chief's Report. At a minimum the report can include a financial section, staffing updates, and program highlights. Discussion regarding financials included revenues, expenses, adding a projection section, maintain traditional financial statement format ... projected verses actuals and a variance explanation.

Dr. Miller - Suggested a quarterly financial report verses a monthly. In that advisory capacity, I would think that what we would want to be looking at is ... are the goals of tobacco control as it is related to TEPP being met by the quarterly allocation of resources.

Ms. Tarango – Agreed discussion on a quarterly basis makes more sense; having the larger quarterly report discussions will allow you to recommend changes if you see a significant change from quarter to quarter. We will take a shot at something for next month.

Mr. Madonna – Requested that if trends are included on a monthly basis or a quarterly basis that TEPP Office Chief point them (the trends) out.

Mr. Davis – Agreed ... quarterly makes perfect sense.

Mr. Russell – Suggested that the next step is to see how the projects are doing out in the field? Are we meeting needs? Are there more needs than what we projected before? Maybe there is a program that is catching fire and going really well and to evaluate the programs that are not doing very well. How do we tie it in and where is the safety value for that? I think those discussions will come as we look at the fluctuations.

Mr. Madonna – Asked Ms. Tarango if she received enough feedback regarding the financials?

Ms. Tarango – Replied yes, and continued with her update that included organizational changes, program highlights, and a discussion period. During program highlights, E.B. Lane and marketing was discussed, as well as the Youth Tobacco Survey. Ms. Tarango asked the members if they would care to review the report.

Mr. Ramirez – Stated that because tobacco is our target, how can we not review this survey? It should be a mandate. We need to be knowledgeable on everything that you are doing here.

Mr. Madonna – Stated that the consensus seems to be yes; we want to review the Youth Tobacco Survey Report.

Ms. Tarango – Informed the members of the TEPP Quarterly Contractor’s meeting.

Mr. Madonna – Requested that a reminder be sent to him regarding the Quarterly Contractors’ meeting.

Ms. Tarango – Continued with questions regarding video conferencing. Video conferencing is available; four week notice with a two-hour limit. There is no limit with telephone conferencing.

Mr. Russell – Extended an invitation to the group to visit Flagstaff.

Mr. Ramirez – Extended an invitation to the group to do the same and stated that to represent the state you have to travel the state.

Ms. Hall – Suggested that if the members do decide to do that the meetings should be linked to a site visit or having a contractor from the area talk to us about their special issues.

Mr. Madonna – Requested that an item to discuss travel and site visits be added to the agenda for September to answer the question: Does the commission feel an obligation to travel around the state and what kind of audience, increase/decrease?

Dr. Miller – Asked if the video conferencing can be split into 2-two hour sessions with two hours before lunch and two hours after lunch.

Mr. Ramirez – Answered by saying that if the video conferencing doesn’t work, that they can set up for the telephone conferencing for next month.

Mr. Madonna – Suggested that the group try a telephone conference for September.

Mr. Ramirez – Replied saying that the travel issues still needs to be discussed.

Mr. Madonna – Confirmed ... yes, add an agenda item for next meeting to discuss and resolve the video and telephone conferencing, and with the travel or not-travel including site visits issues.

Ms. Tarango – Continued with explaining the next item ... parking. New security contract is preventing us from allow members permission to park in the upper levels of the covered parking. And they do not want us to pre-register or interfere with any of the security procedures.

Mr. Madonna – Stated that the parking issue is not resolved yet and asked Ms. Tarango to speak with Danny Valenzuela?

Lunch 11:37am

Meeting continuation at 12:10pm

Ms. DeMarie – **Physical Activity Break** – 10 minute

Mr. Madonna – Announced Mr. Leischow from Chronic Disease Control to provide the Chronic Disease contract update.

Chronic Disease Contracts Update

Mr. Leischow – Informed the members about the transition from year one to year two regarding the contracts: 1. Waiting for the new ones to come back 2. The year two contracts are set to expire June 30, 2006 and asked if the members would like to have the contractors come in to do their own presentation to give them a better understanding the process.

Mr. Madonna – Motioned ... would the group like to have the contractors come in? Motioned carried.

Mr. Leischow – Asked when the contractors' presentations could begin.

Mr. Madonna – Replied that September is full.

Mr. Leischow – Answered October is fine and announced that there are nine contracts. Mr. Leischow recommended at least two maybe three per meeting until all have presented.

Mr. Madonna – Agreed that least two should present per meeting.

Dr. Miller – Asked if the members can define what information they want to have presented? What are the deliverables? Where are they? What is their evaluation of the project? What are there weaknesses? What are their strengths? We don't want a sales pitch.

Mr. Leischow – Explained that the contracts are designed by scope of work, their parameters are defined by particular goals, objectives and everyone who received funding had to adhere to a particular evaluation plan so all of them have process and outcome measures to report on and so the details are there.

Mr. Madonna – Announced that starting in October, three contractors a month would present and each would have twenty minutes.

Mr. Leischow – Commented that the presentations will be kept together by category.

Mr. Leischow – Introduced Janet Bourbouse.

Chronic Disease Plan Priorities and Update

Ms. Bourbouse – Explained the categorical plans and priorities and provided handouts, a document regarding cultural competence, specifically, the fourteen standards of cultural competence specific to healthcare.

Mr. Madonna – Requested that a presentation on cultural competence be prepared for the September meeting.

Ms. Bourbouse – Announced the kickoff meeting ... October 19. Ms. Bourbouse responded to an item from the August meeting regarding stress and how stress fits into Chronic Disease as a risk factor and recommended that stress not be added that at this time.

Mr. Leischow – Stated that stress has not been picked up as a major risk factor.

Mr. Madonna – Asked whether or not it should? Is it advisable? Is there anyone within the health department that we could call? Is it a behavioral health issue? I don't know? Who owns stress? As a topic?

Ms. Bourbouse – Replied that she was not aware of anybody.

Ms. Bailey – Commented that mental health might know; however, questioned whether there is an evidence basis about effective interventions.

Mr. Ramirez – Replied ... that no one has tied into it yet.

Mr. Madonna – Motioned ... that the group was satisfied and it is time to move on. Motioned carried.

Ms. Bourbouse – Continued the update with the priorities for the plan, provided an explanation of how they came up with the priority list and reviewed early detection and screening.

Mr. Ramirez – Asked ... does this (Breast cancer) include reservations? Population?

Ms. Bourbouse – Replied that she would check on it and would report back during the next meeting. The review continued ... Chronic Obstructive Pulmonary Disease including unmet needs; Primary Prevention; Cardiovascular Disease Plan including current initiatives and activities; Policy Development (would like to have a policy paper from a third party) and Special Projects (seed money for some populations that are suffering from various disparities).

Mr. Ramirez – Asked ... is there an avenue for community education in the health area that is not delivered by state health officials? STEPS ... not all of our clients are being reached. How can we educate?

Mr. Madonna – Replied ... Mr. Ramirez, if this becomes a RFP, you could write a proposal to target those populations. What we have in front of us is what we requested in our last meeting.

Ms. Bailey – Asked ... could we list the populations that we are interested in by ethnic group in the disparities section?

Ms. Bourbouse – Replied ... break it down, yes.

Mr. Madonna – Suggested that members provide feedback regarding the six areas; basically, the six RFP(s).

Mr. Leischow – Reminded the members that there might be just one RFP issued.

Mr. Madonna – Asked ... if anybody would be missed in terms of how it is distributed?

Mr. Leischow – Replied ... I hear what you are saying and I don't know. I will talk to procurement.

Mr. Madonna – Expressed his desire that the largest numbers of people have access, be exposed too.

Mr. Leischow – Stated ... a person can always be added to the vendor's list.

Dr. Miller – Asked ... is it permissible for other organizations that are receiving state funding to compete for these? Is it possible to setup part of the RFP process so that it is not just funding for a program but it is basically, matched funding to expand the pot. Many of these objectives are suppose to be met by health care service agencies that are actually delivering the in-care products. They would say that they do not have the funding to do all this. It might be helpful to try to develop some partnerships. Maybe with additional funding (funding to deliver the exact pieces that these priorities are stipulating) and oversight, they may be able to do better?

Mr. Leischow – Explained that the “other” category offers mini-grants, which provides additional opportunity.

Mr. Madonna – Asked about “matching funds” and about giving extra credit, points?

Mr. Ramirez – Stated that you have to be very careful here. Miscommunication can lead to you not being able to get the money. You have to ask if it is allowed. If not, you can lose it.

Mr. Valenzuela – Agreed ... that Mr. Ramirez is correct. You need to be careful.

Mr. Madonna – Stated that Bob, Janet, Patricia, and himself should put this down for a future discussion regarding out-of-state funders, working with other funders in the state, i.e. CDC funder and tie this to the sustainability piece as well whoever is funded, you could provide some technical assistance to create that linkage with the foundation.

Dr. Nayeri – Asked ... why can't you develop a resource list?

Mr. Madonna – Agreed ... that is a good point.

Mr. Davis – Asked ... are any of these tied to policy to give people incentive? Can we have a third track ... to increase the usage rate of these types of screenings? People don't show up. We need policies around financial or other incentives to get people in.

Mr. Madonna – Stated that that is a part of the challenge to someone who is coming to the table for this money; they have to show the screeners that they are going to be able to get people here. Is that policy? Is that incentive planning? They have to prove that they can get people in.

Mr. Ramirez – Commented that you have to go to where they are going. They are going to small health clinics; they are going to community action agencies; they are going to other areas that are dealing with the people, a lot of the tribal areas. We have to go into the community fields.

Dr. Miller – Stated that I think we are talking about different populations.

Mr. Davis: Asked are employees paying attention to rising health care cost reflected on their paychecks?

Mr. Davis – Replied ... they are starting with the Health Risk Assessment.

Mr. Davis – Stated that the value is really being driven by the employer's. They are saying that we can't continue to pay the increase in cost of health care and we can not do it with a carrot any longer. We cannot afford it any longer. The value that is translated back into them and translates into what I provide is earlier intervention. If cultural, there is resistance to that because of how the message is communicated, that is exactly what I am trying to get at with my comment about lets study the phenomenon on why it is not occurring: lack of incentive, communication challenge. Let's figure out a way to increase the resources that we have today.

Ms. Hall – Stated and asked Ms. Bourbouse ... on number 2, Primary Prevention under Cardiovascular Disease Plan, can we just say prevention instead of secondary prevention?

Ms. Bourbouse – Replied ... we can just say, "prevention."

Mr. Madonna – Asked the TRUST members if they were satisfied with the recommended priorities that will drive the funding for the next one to three years in the Chronic Disease program?

Mr. Madonna – Requested a motion from the members to approve the priorities as presented. Motioned carried.

Mr. Madonna – Confirmed ... these are the priorities. Next month, we will come back to the next phase ... funding priorities.

Public Commentary

Ms. Harper – Stated that the 303 lay out the top four priorities: cardiovascular disease, cancer, stroke, and lung. We appreciate the focus on stroke; we feel there should be a focus also on cardiovascular disease that has just been changed to Healthy Lifestyles. I don't think we should totally pull away from CVC disease. I am concerned about the 20% number. The number that we are working off of is 25% by 2010.

Mr. Madonna – Replied ... if it is a typo, we will correct it.

Meeting Evaluation and Agenda Planning

Members – reviewed meeting format.

Mr. Madonna – questioned absent member's attendance. Does anyone know Violet? I will call her. Rosa has had some clinic difficulties and Bertha is on vacation.

Mr. Madonna – I will accept the **motion to adjourn** at 2:04 pm. Motion carried.

▶ **August 10 meeting items that need a response at the September meeting:**

1. Patricia Tarango, Teresa Koehler ... Confirm September meeting location with Benton Davis.
2. Patricia Tarango, Teresa Koehler ... Sent up telephone conference for September meeting and send out visuals to members.
3. Patricia Tarango ... Talk to Danny Valenzuela about additional parking for members.
4. Patricia Tarango, Teresa Koehler ... Can we split the video conferencing so that we have one 2-hour session before lunch and one 2-hour session after lunch.
5. Patricia Tarango, Teresa Koehler ... Provide quarterly financial statements that identify trends, variances as well as revenues (both actual and projected) and expenses (both actual and projected). As necessary provide an explanation, evaluation when significant differences occur.
6. Janet Bourbouse ... Does this (Breast Cancer) include reservations?
7. Janet Bourbouse ... Break down the list of the populations by ethnic group in the disparities section.
8. Bob Leischow ... will anybody get missed in terms of how it is distributed; I will check with Procurement.
9. Janet Bourbouse ... Primary Prevention under Cardiovascular Disease Plan change “secondary prevention” to “prevention”.
10. Janet Bourbouse ... check on the 20% figure. Ms. Harper believes it should be 25%.
11. Matt Madonna ... call Violet.

▶ **September 14, 2005 ... new agenda items:**

1. Patricia Tarango, Teresa Koehler ... add new standing agenda item for meeting evaluation and agenda planning.
2. TRUST members ... resolve travel or not-travel including site visit issue.
3. TRUST members ... resolve video and telephone conferencing issue.
4. Robbin Brooks, JR Jeoffroy ... cultural competence, cultural standards
5. Chronic Disease Plan ... next phase is funding.

▶ **October 12, 2005 ... new agenda items:**

1. Chronic Disease ... add the three contractors who will be presenting (20 minutes time limit).

The TRUST Commission is a public meeting. In compliance with the State’s open meetings laws, the recorded minutes for the August 10 TRUST Commission meeting are available to the public three working days after the meeting. Please contact the TRUST Coordinator at the Office of Tobacco Education and Prevention Program, 602-364-0824, to make arrangements to hear the recorder minutes.

Patricia Tarango
Office Chief
Office of Tobacco Education and Prevention Program
Arizona Department of Health Services

Tobacco Revenue, Use Spending and Tracking Commission

September 14, 2005

United Healthcare of Arizona
3141 North 3rd Avenue
Phoenix, Arizona 85013

MINUTES

- Members Present: Matthew Madonna – Chairman
Linda Bailey
Dr. Keith Kaback (tele-conference)
Dr. Kelly Hsu
Benton Davis
Dr. Wil Counts
Bertha Sepulveda
- Members Absent: Bill Pfeifer
Dr. Shelly Hall
Dr. Babak Nayeri
Librado M. Ramirez
Dana Russell
Dr. Hugh Miller
Rose Garcia
Violet Mitchell-Enos
- ADHS Staff: Niki O’Keeffe – Assistant Director
Paul Newberry – Resource Program Manager
Patricia Tarango – Office Chief, Tobacco Education and Prevention
April Lawless – Health Marketing Manager
Robbin Brooks – Ethnic/Rural Outreach Coordinator
Dr. Jean-Robert Jeoffroy – Disparities Coordinator
Teresa Koehler – Administrative Assistant III
- Presenters: Patricia Tarango – Office Chief, Tobacco Education and Prevention Program (TEPP)
Robbin Brooks – Ethnic/Rural Outreach Coordinator (TEPP)
Dr. Jean-Robert Jeoffroy – Disparities Coordinator (TEPP)
Bob Leischow – Health Education Account, Chronic Disease
- Public Attendees: Eileen Eisen Cohen – Maricopa County Tobacco Use Prevention Program
Laura Sand – American Cancer Society

Call to Order

Mr. Madonna, TRUST Commission Chairman, called the meeting to order at 10:05 am ... welcome the TRUST members and visitors. He announced that the meeting can begin; however, the board cannot take any vote(s) until at least two more members are present.

Mr. Madonna: Introduced Patricia Tarango, Office Chief of Tobacco Education and Prevention Program.

Ms. Tarango: Introduced Niki O’Keeffe, the new Assistant Director of the Division of Public Health Services, and April Marker Lawless, new Social Marketing Manager for the Office of Tobacco Education and Prevention Program.

Mr. Madonna: Explained the guidelines, procedure regarding public commentary related to the “Speaker’s Slip”. The public commentary section is limited to five minutes at the end of the meeting and that time is divided up between the number of individuals wishing to speak. The slips are given to Teresa Koehler. Teresa will be the coordinator and timekeeper for the public comment.

Approval of Minutes

Mr. Madonna: We are going to postpone the approving of the minutes, August 10, 2005, until we get at least two more members here so that we can take a vote on that.

Chairman’s Report

Mr. Madonna: Address members and visitors.

- ▶ Announced: a request by Dr. Hsu to update the members’ contact information list, and requested that all members update the list that was routed during the meeting.
- ▶ Reminded: members that the next TRUST Commission’s meeting is October 12, from 10:00 am to 2:00 pm.
- ▶ Reported the results of an item assigned to him in the August meeting; he did call TRUST member Violet Mitchell-Enos; however, was unable to connect with her. He is not sure of what her situation and/or status at this point is in terms of participating in the Commission.
- ▶ Reviewed the current meeting agenda.
 - Changed agenda item order - Cultural Competence presentation (Item 5) will occur before the Office Chief’s Report (Item 4).

General Order: Cultural Competence, Cultural Standards

Mr. Madonna: Introduced Ms. Brooks and Dr. Jean-Robert Jeoffroy (Exhibit 1).

Ms. Brooks and Dr. Jean-Robert Jeoffroy: Presented the National Standards for Culturally and Linguistically Appropriate Services referred to as CLAS in Health Care Overview.

- ▶ 1997 development of the National Standards to provide alternatives to the current patchwork of independently developed definitions, practices, and requirements regarding CLAS. The U.S. Department of Health and Human Services' Office of Minority Health (OMH) issues the national standards.
- ▶ Themes
 - Cultural Competent Care – Standards 1, 2, 3
 - Language Access Services – Standards 4, 5, 6, 7
 - Organizational Supports for Cultural Competence – Standards 8, 9, 10, 11, 12, 13, 14
- ▶ Types
 - Standards 4, 5, 6, 7 are mandates required for all recipients of Federal funds.
 - Standards 1, 2, 3, 8, 9, 10, 11, 12, 13 are guidelines recommended by the OMH.
 - Standard 14 is a recommendation suggested by the OMH.
- ▶ Standards
 - Standard 1 (guideline): Ensure approaches to clients are effective, understandable, and respectful in demonstrating care consistent with their cultural beliefs and preferred language.
 - Standard 2 (guideline): Implement strategies to recruit, retain, and promote at all levels a diverse staff and leadership that is representative of clients.
 - Standard 3 (guideline): Ensure staff is provided an opportunity to receive ongoing education and training in culturally and linguistically appropriate service delivery.
 - Standard 4-7 (mandates): Offer and provide language assistance services. Ensure written materials are provided. Assure competence in translation. Provide signage in specific languages.
 - Standard 8 (guideline): Ensure strategic plan provides for culturally and linguistically appropriate services.
 - Standard 9-11 (guidelines): Based upon data collection and demographics, integrate cultural and linguistic competence-related measures into programs, assessments, and outcomes.

- Standard 12 (guideline): Ensure participatory and collaborative partnerships with communities using both informal and formal mechanisms.
- Standard 13 (guideline): Ensure conflict and grievance processes are culturally and linguistically sensitive and capable of resolving issues.
- Standard 14 (recommendation): Regularly make available to the public information about ADHS TEPP’s process and successful innovations in implementing CLAS Standards.

Ms. Brooks: Concluded with Health Education Account and Chronic Disease Fund recommending that Arizona Department of Health Services develop an intensive training around standards.

Mr. Madonna: Led the discussion regarding fourteen national standards and summarized the discussion as follows: encourage all contractors to focus on a disparity population and in doing that, then in that component of the proposal and for those activities these guidelines, mandates should, would be addressed.

Mr. Madonna: Asked, “Does everyone agree?” and stated, “We cannot take a vote. However, I believe that based on the comments that everyone is satisfied and that we can move on.”

TRUST Members: Yes.

Mr. Madonna: Handout (Exhibit 2) was provided to members and the following topics were discussed:

1. Meeting Frequency and Length
2. Meeting Location
3. Meeting Technology

Mr. Madonna: Let the record show that Niki O’Keeffe left the room. (Time: 11:15 am)

Mr. Madonna: The discussion resulted in the following decisions agreed to by all the attending members, a majority consensus held.

1. Frequency: meet every other month, starting November 9, 2005
 - a. better participation
 - b. cost
 - c. more efficient use of time
2. Time: 10:00 a.m. to 4:00 p.m.
3. Duration: 6 hours
4. Location: Phoenix based

- a. most efficient
 - b. cost
 - c. contractors can come and present
5. Technology: only in unique situations will tele-conference and /or video-conference be used.
- a. quality is not as good as is needed for member participation
 - b. has to be accessible to the public
 - c. Paul Newberry, Resource Manager, (Exhibit 3)
 -  network has capacity problems
 -  not easily connected
 -  bridging issues
 -  two hour maximum
 -  thirty day notice
 -  expensive

Mr. Madonna: Introduced April Lawless.

Ms. Lawless – Physical Activity Break – 10 minute

Lunch 12:00 a.m.

Meeting continued - 12:30 p.m.

Office Chief's Report

Mr. Madonna: Announced Office Chief, Patricia Tarango.

Ms. Tarango: Update included the following (Exhibit 3):

1. Financial Update: 2004, 2005, 2006
 - a. Show draft financial charts for revenues (actual, projections)
 - b. Show draft financial charts for expenditures (actual, projections)
 - c. Will provide explanations as needed
 - d. Report quarterly
 - e. E.B. Lane contract update

Mr. Madonna: It appears that the information is good; however, more detail is needed. The expenditures need to be broken down by agency or ethnic groups – not individual invoices.

Ms. Tarango: Continued update:

2. Organizational Changes
 - a. Organizational charts
 -  Arizona Department of Health Services
 -  Division of Public Health Services

- b. TEPP personnel changes
 - ✚ Jesse Nodora
 - ✚ April Lawless ... marketing

Unfinished Business: Chronic Disease Contracts Update

Mr. Madonna: Announced Mr. Leischow

Mr. Leischow: Update included the following (Exhibit 4):

1. Health Education Account, fiscal year 2006, contracts that have been reviewed.
2. Screening/Early Detection
3. Promoting Healthy Lifestyles
4. Chronic Disease Fund – three year budget plan
 - a. Year 2007, 2008, 2009
 - b. Screening/Early Detection
 - c. Promoting Healthy Lifestyles
 - d. Other
 - e. RFP to be issued in December of this year (hopefully), award in January 2006

Ms. Tarango: Reminded the members of the items that they had recommended to Ms. Bourbouse (Chronic Disease) regarding the Chronic Disease Plan priorities during last month's meeting. She added that Ms. Bourbouse had incorporated those recommendations and had responded to Mr. Ramirez question (Exhibit 5).

Public Commentary

Mr. Madonna: Teresa, do we have any public comments or questions?

Ms. Koehler: No, we do not.

Meeting Evaluation and Agenda Planning

Members – reviewed meeting format.

Mr. Madonna – Members volunteered to contact those members who were not present.

1. Mr. Madonna to call Mr. Pfeifer
2. Mr. Madonna, Ms. Tarango to call Ms. Garcia
3. Dr. Kaback to call Dr. Miller
4. Ms. Bailey to call Ms. Hall
5. Dr. Hsu to call Dr. Nayeri
6. Mr. Davis to call Mr. Ramirez
7. Dr. Counts to call Ms. Mitchell-Enos
8. Ms. Sepulveda to call Mr. Russell

Mr. Madonna – Announced that November’s meeting will be hosted by United Healthcare of Arizona and reviewed agenda items for November.

Mr. Madonna – I will accept the **motion to adjourn** at 1:30 pm. Motion carried.

► **September meeting items that need a response at the November meeting:**

1. Ms. Bailey ... contact Valerie Welsh and ask her who the standards apply to.
2. Dr. Kaback ... call Dr. Miller to discuss with him the decisions made regarding frequency, time, duration, location, technology. Then call Mr. Madonna or Patricia Tarango regarding the results of the conversation.
3. Teresa Koehler ... send Dr. Kaback a copy of the handout that was provided by Paul Newberry.
4. Teresa Koehler ... do not use “Red” on financial charts, change color.
5. Teresa Koehler ... remove “adjustment” account.
6. Patricia Tarango ... look at 2004 revenue versus expenditures, provide the amount of revenue dollars that were rolled over to 2005. Was there a impact?
7. Patricia Tarango ... explain now that E.B. Lane is gone, why we are not seeing a greater difference in the \$\$, numbers? Should expenditures be less?
8. Patricia Tarango ... meet with Mr. Davis regarding what would be appropriate amount of detail.
9. Linda Bailey ... will forward descriptions of the National Cessation Promotion projects that are going on (i.e., creating consumer demand).
10. Teresa Koehler ... update the TRUST members’ information list.
11. Janet Bourbouse ... Dr. Hsu wants to see where the Asians are in the Arizona Screening Data.

► **November 9, 2005 ... new agenda items:**

1. Approve the minutes of both meetings (August and September)
2. Youth Tobacco Survey: previous (all surveys) in Arizona, comparison to national information to see where we are as compared to other states.
3. Summary of activities completed by E.B. Lane and an overview (or list) of advertisements that are currently being heard on the radio or seen on television.
4. Presentation to include the draft of the TEPP Strategic Plan.
5. TEPP Marketing Plan presentation.
6. Chronic Disease Plan – RFP update and quarterly budget update.
7. Chronic Disease contractors (3) – Mountain Park, Wingspan, and City of Avondale.

The TRUST Commission is a public meeting. In compliance with the State's open meetings laws, the recorded minutes for the September 14 TRUST Commission meeting are available to the public three working days after the meeting. Please contact the TRUST Coordinator at the Office of Tobacco Education and Prevention Program, 602-364-0824, to make arrangements to hear the recorder minutes.

Patricia Tarango
Office Chief
Office of Tobacco Education and Prevention Program
Arizona Department of Health Services

Tobacco Revenue, Use Spending and Tracking Commission
Office of Tobacco Education and Prevention Program (TEPP)

November 9, 2005

United Healthcare of Arizona
3141 North 3rd Avenue
Phoenix, Arizona 85013

MINUTES

Members Present: Matthew Madonna – Chairman
Linda Bailey
Dr. Wil Counts
Dr. Keith Kaback
Dr. Shelly Hall
Dr. Kelly Hsu
Dr. Hugh Miller
Violet Mitchell-Enos
Dr. Babak Nayeri
Bill Pfeifer
Librado M. Ramirez

Members Absent: Benton Davis (sent notice)
Rose Garcia
Dana Russell (sent notice)
Bertha Sepulveda (sent notice)

ADHS Staff: Jeanette Shea-Ramirez – Deputy Assistant Director, ADHS
Patricia Tarango – Office Chief, TEPP
Sue Briody – Sports Marketing Events Coordinator, TEPP
April Lawless – Senior Health Marketing Manager, TEPP
Bob Leischow – Health Education Account, Chronic Disease
Janet Bourbouse – Chronic Disease
Teresa Koehler – Administrative Assistant III, TEPP

Presenters: Patricia Tarango – Office Chief, TEPP
Sue Briody – Sports Marketing Events Coordinator, TEPP
April Lawless – Senior Health Marketing Manager, TEPP
Claire Brown – Evaluator with TEPP/University of Arizona
Janet Bourbouse – Chronic Disease
Bob Leischow – Health Education Account, Chronic Disease
Doug Hirano - Mountain Park Health Center
Judy Kinney - Wingspan
Maria Portela – Translational Genomics Research Institute

Public Attendees: Marla Jirak - TEPP/University of Arizona
Shannon Harper – American Heart Association
Laura Sand – American Cancer Society

Call to Order

Mr. Madonna, TRUST Commission Chairperson, called the meeting to order at 10:07 am ... welcome the TRUST members and visitors.

Mr. Madonna: Introduced Patricia Tarango, Office Chief of Tobacco Education and Prevention Program.

Ms. Tarango: Introduced Jeanette Shea-Ramirez, the new Deputy Assistant Director of the Division of Public Health Services, Public Health Prevention Services.

Mr. Madonna: Reviewed agenda items and explained the guidelines, procedure regarding public commentary related to the “Speaker’s Slip”. The public commentary section is limited to five minutes at the end of the meeting and that time is divided up between the number of individuals wishing to speak. The slips are given to Teresa Koehler. Teresa will be the coordinator and timekeeper for the public comment.

Approval of Minutes

Mr. Madonna: Announced that both the August and September meeting minutes must be approved. Mr. Madonna raised a motion to accept the minutes of the August meeting. Linda Bailey motioned and Dr. Nayeri seconded. Mr. Madonna asked if there was any discussion or changes to the minutes and said, “All those in favor of accepting say I.” All I’s. Minutes for the August meeting approved. Mr. Madonna then raised a motion to accept the minutes of the September meeting. Dr. Nayeri motioned; Dr. Hsu seconded. Mr. Madonna asked if there was any discussion or changes to the minutes and said, “All those in favor of accepting say I.” All I’s. Minutes for the September meeting are approved.

Chairman’s Report

Mr. Madonna: Addressed members and visitors.

- ▶ Announced revised roster of member contact information
- ▶ Reviewed new meeting schedule

Mr. Madonna: Announced TEPP Office Chief, Patricia Tarango

Office Chief's Report

Ms. Tarango: Reviewed Office Chiefs' agenda items and then, introduced Meryl Salit.

Ms. Salit: Presented the Arizona Comprehensive Lung Disease and Asthma Control Plans

- ▶ Asthma Control Plan - Overriding Goals
 - Reduce asthma deaths in Arizona
 - Reduce asthma-related hospitalizations and emergency department visits in Arizona.
 - Reduce the number of asthma-related missed school and work days.
- ▶ Asthma Plan Objectives by Topic
 - Epidemiology and Research
 - Treatment and Management
 - Patient Education
 - Secondary Prevention
 - School/Childcare Issues
 - Disparity
 - Collaborative Efforts
 - Advocacy
 - Public Awareness
- ▶ Lung Disease Control Plan - Overriding Goals
 - Reduce the proportion of adults in Arizona whose activity is limited due to chronic lung disease.
 - Reduce deaths from COPD among Arizona adults.
- ▶ Lung Plan Objectives by Topic
 - Epidemiology and Research
 - Treatment and Management
 - Patient Education
 - Secondary Prevention
 - School/Childcare Issues
 - Disparity
 - Collaborative Efforts
 - Advocacy
 - Public Awareness
- ▶ Lung and Asthma Plan Kick Off Survey Results

Ms. Tarango: Announced the completion of the "draft" TRUST Annual Report for 2005.

- ▶ Reminded members that the annual report is required by Proposition 303.
- ▶ Requested members to review and comment by December 2.

- ▶ Requested that members to email Teresa Koehler whether or not they have comments, changes to the report so that they will be recorded as having completed the review process.
- ▶ Comments will be incorporated.

Ms. Tarango: Asked members how the members would like to complete the final approval process.

Mr. Madonna: Recommended that the final report (after all the comments have been incorporated) be emailed to each member and reminded members that there would be no opportunity for additional feedback at that point.

Dr. Miller: Requested if the members could submit their comments today by the end of the meeting.

Mr. Madonna: Yes, agreed, so by the end of the day everyone will need to read, comment, and turn the report back in.

Ms. Tarango: Asked what about the other members who are not present.

Mr. Madonna: Replied, send them out electronically with the same dead line.

Ms. Tarango: Announced the ADHS/TEPP organizational changes.

- ▶ Revised organizational chart
- ▶ Updated ADHS contact information for administration

Ms. Tarango: Reported on the financial update.

- ▶ Financial Update for 2006
 - Financial chart for revenues
 - Financial chart for expenditures
 - Accounting holds money not used during the year it was received in an account for that year and does not roll the money over to the next year.
 - There is money being held in previous year(s) accounts.

Mr. Pfeifer: Stated that he would like to make a motion that the TRUST Commission requests from the Department of Revenue a complete accounting of the funds from 2002 when Prop 303 was passed.

Mr. Madonna: Added that you are (Mr. Pfeifer and Ms. Tarango) making an assumption. Yes, it is true that they are not protected. However, that does not mean that we have to give them up. We need to go back as far as they are holding funds and try and capture all the money.

Ms. Tarango: Replied, I am not saying that “they” are taking the money. I am saying that money can be swept. Those dollars are all in the Department of Health Services financial

structure. This has been brought to my attention and so now, I am asking the question of why, what years, how do I move those dollars into this year and then, what is the plan and time frame to utilize those dollars to support current activities.

Mr. Madonna: Requested from Mr. Pfeifer that before we pass a motion, let us let Patricia Tarango work the process through.

Mr. Pfeifer: Stated that that is fine. However, I would like the record to show that I have requested this information at this meeting.

Ms. Tarango: Commented that she (Patricia Tarango) would provide the commission a summary of years and dollars not spent to the members in the next TRUST meeting – January. Ms. Tarango continued with her financial update – expenditures and obligations.

Ms. Mitchell-Enos: Asked if Mr. Pfeifer’s earlier motion could be amended to reflect the correct organization ... not DOR but DHS.

Mr. Pfeifer: Agreed. I move that the TRUST Commission request from the director an accounting of previous years income and expensive for the Tobacco and Education Prevention Program from the Arizona Department of Health Services.

Dr. Nayeri: Stated that he seconded.

Mr. Madonna: Asked if there was any discussion on the motion. All those in favor say I. All say I.

Ms. Tarango: Reported on the E.B. Lane update.

- ▶ E. B. Lane update
 - Contract end date – September 30, 2005
 - 90 day focus was on school bus wraps
 - Statue 36-772 grants \$550,000 annually for antismoking advertising on school buses ... beginning in 1999-2000.
 - Transition items

Ms. Tarango: Introduced Sue Briody.

Ms. Briody: Presented the current advertising overview.

- ▶ School Bus Advertising based on
 - Title One Schools
 - Medium/High risk Schools
 - Participate in TEPP brief or intensive school based curriculum
- ▶ 41 school districts participating
- ▶ All 15 counties represented
- ▶ 464 signs installed

- ▶ Sports Marketing Contracts
- ▶ Current Television and Radio Commercials

Ms. Lawless – Physical Activity Break
Lunch 12:10 a.m.

Meeting continued - 12:25 p.m.

Ms. Tarango: Announced the completion of the TEPP Strategic Plan – draft.

- ▶ CDC proposed outcome indicator selection
- ▶ CDC criteria and rating
- ▶ Strategic Plan - Six Goals
 - Promote and protect the health of Arizona’s children and adults
 - Decrease initiation of tobacco use among Arizona’s adults and youths
 - Promote quitting of tobacco use
 - Reduce all Arizonan’s exposure to secondhand smoke
 - Identify and eliminate tobacco related disparities
 - To promote staff development
- ▶ Asked TRUST members to review and comment on the plan.
- ▶ Asked TRUST members to put comments in writing.
- ▶ Asked TRUST members to return by December 2, 2005.
- ▶ Comments will be incorporated.
- ▶ Once revision is completed, then the TEPP staff will begin developing the 18 month Operational Plan. The Operational Plan will have a target date of January 15, 2006. Operational Plan will include a one page (brief) executive summary and financial plan that is tied back to the Strategic Plan.
- ▶ Share Operational Plan with TRUST members in March TRUST meeting.

Mr. Madonna: Asked for comments and thoughts from TRUST members.

Dr. Miller: Restated that the review and comment process to be completed by December 2 and suggest that a December meeting be held to complete the discussion and finalize the TRUST members’ approval of the Plan. Dr. Miller also stated that after the comments are received by TEPP on December 2 that TEPP could revise the Plan prior to the recommended December meeting.

Mr. Madonna: Requested that Dr. Miller make a motion restating his request for a December meeting.

Dr. Miller: Moved in the interest of completing the Strategic Plan that we have a meeting (doesn’t have to be physical – can be teleconference) on December the 14th for the specific agenda purpose of discussing the Strategic Plan – no other agenda items.

Mr. Madonna: Asked for confirmation regarding the duration of the meeting and recommended two (2) hours. Mr. Madonna asked for a second to that motion.

Ms. Hall: Second.

Mr. Madonna: Discussion

Mr. Ramirez: Suggested that two hours may not be long enough.

Mr. Madonna: Stated that the original meeting time was from 10:00 to 2:00 and asked if the members were comfortable with that time.

Ms. Hall: Suggested that someone be present during the December Meeting to guide the members through the discussion process of the Plan.

Ms. Tarango: Stated the TEPP had worked with a facilitator and would check to see if that person would be available to the group.

Dr. Nayeri: Requested that an electronic file of the document be provided for their review.

Ms. Tarango: Agreed to send the document out to the members in a Word document format.

Mr. Madonna: Stated that the review would still be due on December 2.

Members: Agreed

Mr. Madonna: Asked all those in favor of a December 14 meeting say I. All say I.

Dr. Nayeri: Motioned to keep the January meeting.

Mr. Madonna: Asked for a second.

Dr. Hsu: Second.

Mr. Madonna: Asked all those in favor say I. All say I.

Mr. Madonna: Introduced April Lawless.

Ms. Lawless: Presented on the Social Marketing update.

- ▶ Developing an overall Social Marketing strategic plan
- ▶ Plan will tie together Prevention, Cessation and Secondhand Smoke as well as disparate populations.
- ▶ Social Marketing Approach
- ▶ Great American Smokeout (GASO), Strategies and /evaluation

Break 1:35 p.m. – 1:40 p.m.

Ms. Tarango: Introduced Claire Brown and invited her back for further discussion in January.

Ms. Brown: Presented on the Youth Tobacco Survey.

- ▶ Evaluation Unit analyzed data, did not collect
- ▶ Purpose of the survey
- ▶ Limitations of the survey
- ▶ Summary of the findings from the survey

Unfinished Business: Chronic Disease Contracts Update

Mr. Madonna: Introduced Janet Bourbouse.

Ms. Bourbouse: Presented on the Chronic Disease Plan kick off meeting.

- ▶ Chronic Disease Plan kick off – 100 attended October meeting
- ▶ Conference evaluation form
- ▶ Plan evaluation form
- ▶ Community Preventive Services Book
- ▶ Recognition gift

Mr. Madonna: Introduced Bob Leischow.

Mr. Leischow: Presented the Chronic Disease contract update.

- ▶ Request for Proposal
 - Screening and Early Detection services
 - Eligible applicants: county health departments, community health centers, universities, federally recognized tribes, CBO's, NGO's, not-for-profit health care worksites
 - Up to \$2.5 Million allocated
 - Competitive review process
 - Expected RFP release: January 2006, awards July 06, 36 month contracts
 - Fiscal source: ADHS Health Education Account – Chronic Disease Fund
- ▶ Priorities
 - Diseases
 - Breast cancer
 - Colorectal cancer
 - Chronic obstructive pulmonary disease (COPD)
 - CVD with specific focus on Stroke Awareness
 - Comprehensive and integrated approach
 - Individual choices
 - Systems
 - Health Care
 - Health care disparities
 - Standards of practice
 - Evidence-based and data-driven strategies

- ▶ Contact Information:
 - ADHS Office of Procurement at 602-542-1040
 - Bob Leischow, MPH, at 602-364-0845

Mr. Leischow: Introduced Doug Hirano.

Mr. Hirano: Presented on the Mountain Park Health Center and Black Nurses Association of Greater Phoenix.

- ▶ Mountain Park Health Center
 - Created in response to ADHS Chronic Disease Prevention RFP
 - Responsive to health disparities related to cardiovascular disease
 - Program Approach
 - Program Model
- ▶ Black Nurses Association of Greater Phoenix
 - 25 year old non-profit organization
 - Mission to address health needs of African American community
 - Through St. Luke's grant, has been providing CVD education through African American churches
- ▶ Program Activities
- ▶ Target Locations, Implementation
- ▶ Establishing Program Presence and Marketing
- ▶ Meeting Program Objectives
- ▶ Who has been screened?
- ▶ Screening Results
- ▶ Screening Referrals
- ▶ What's the impact?
- ▶ Lessons Learned

Mr. Leischow: Introduced Judy Kinney.

Judy Kinney: Presented on WINGSPAN.

- ▶ Overarching Goal: address the significant health disparities between the lesbian, gay, bisexual and transgender (LGBT) communities and the general population.
- ▶ Program Goals
 - Increase LGBT people's awareness
 - Increase health care providers' knowledge about LGBT
- ▶ 1st Year Accomplishments
 - Reached over 1,900 people through 28 events
 - More than 1,100 people reached at events targeting LGBT communities
 - More than 500 health providers received information on working with LGBT clients
 - Initiated the development of a LGBT specific health care provider training with the TEPP funded Healthcare Partnership

- ▶ Outcomes
 - High quit rate during smoking cessation class (6 of 8 people quit smoking)
 - Health professionals significantly increased
- ▶ Year Two
 - Increase LGBT people's awareness
 - Health fair – 75 people
 - Community Forums
 - Presentations to community groups
 - Information tables

Mr. Leischow: Introduced Maria Portela.

Ms. Portela: Presented on the Early Detection and Screening Project by the Healthy Avondale Partnership.

- ▶ Overall Goals
 - Improve the health of the Avondale community
 - Decrease chronic disease and CVD prevalence in Avondale
 - Identify and reduce health disparities among Avondale Hispanics
- ▶ Strategies
 - Assess health choices made by residents
 - Provide tools to help these residents make healthy choices
 - Measure community involvement by evidence- based activities
 - Evaluate results by surveying the change in behavior
- ▶ Partnership
 - TGen, Translational Genomics Research Institute
 - Goals
 - Operational Outcomes
 - Demographics
 - CVD Risk Factors
 - City of Avondale
 - Grassroots Efforts
 - Outreach Community Events
 - Healthy Choices, Healthy Eating
 - Avondale BRFSS
 - Sun Health
 - FitStart / FitSource
 - Goals
 - Results
 - American Heart Association
 - Outcomes
- ▶ Partnership Operational Outcomes

Public Commentary

Mr. Madonna: Asked Teresa, do we have any public comments or questions?

Ms. Koehler: Replied, “No, sir.”

Meeting Evaluation and Agenda Planning

Members – reviewed meeting format.

Mr. Madonna – Announced December’s meeting to discuss the TEPP Strategic Plan and the December 14 meeting that will be hosted by United Healthcare of Arizona and reviewed agenda items for December and January.

Mr. Madonna – I will accept the **motion to adjourn** at 3:37 pm. Motion carried.

November 9 TRUST Meeting Items

▶ **November meeting items that need a response at the January meeting:**

1. Teresa Koehler ... revised the TRUST Commission Meeting schedule.
2. Teresa Koehler ... email ADHS website to Librado M. Ramirez.
3. Teresa Koehler ... send ADHS/TEPP Direct links for the Lung, Asthma, and the Chronic Disease Plans along with the updated meeting schedule.
4. TRUST Members ... review, comment, and return draft TRUST annual report by December 2. If you have no comments, please email that you do not to Teresa Koehler.
5. Teresa Koehler ... email annual report to members who were not able to attend with explanation and due date.
6. Patricia Tarango ... talk to ADHS accounting about rolling money to the next year; provide members with a report that show which years still have money on account and how much money is in the account.
7. Teresa Koehler ... make presentation hand-outs large, two per page.
8. Teresa Koehler ... add the word "Adult" to TEPP Draft Strategic Plan slide.
9. TRUST members ... review and comment on draft Strategic Plan in writing.
10. TEPP ... revised Strategic Plan to incorporate TRUST members' comments.
11. TEPP staff ... develop 18 month Operational Plan by January 15, 2006.
12. Patricia Tarango ... draft Executive Summary to be included in Operational Plan.
13. Patricia Tarango ... draft Financial Plan that is tied back to Strategic Plan.
14. Patricia Tarango ... schedule facilitator to work with members in completing the review process.
15. Teresa Koehler ... send the Strategic Plan to members in a Word document format.
16. Bob Leischow ... invite three contractors for presentations.

▶ **November 9, 2005 ... new agenda items for December meeting:**

1. TEPP Strategic Plan review with facilitator.

▶ **November 9, 2005 ... new agenda items for January meeting:**

1. Patricia Tarango to discuss the Operational Plan update.
2. April Lawless to discuss the Social Marketing overview and the Social Marketing Strategic Plan.
3. Claire Brown to discuss the Youth Tobacco Survey.
4. Bob Leischow to invite 3 contractors to present.

The TRUST Commission is a public meeting. In compliance with the State's open meetings laws, the recorded minutes for the November TRUST Commission meeting are available to the public three working days after the meeting. Please contact the TRUST Coordinator at the Office of Tobacco Education and Prevention Program, 602-364-0824, to make arrangements to hear the recorder minutes.

Patricia Tarango
Office Chief
Office of Tobacco Education and Prevention Program
Arizona Department of Health Services

Tobacco Revenue, Use Spending and Tracking Commission
Office of Tobacco Education and Prevention Program (TEPP)

December 14, 2005

United Healthcare of Arizona
3141 North 3rd Avenue
Phoenix, Arizona 85013

MINUTES

Members Present: Matthew Madonna – Chairman
Linda Bailey
Rose Garcia
Dr. Shelly Hall
Dr. Kelly Hsu
Dr. Keith Kaback (telephone)
Dr. Hugh Miller (attempted to telephone)
Dr. Babak Nayeri
Bill Pfeifer
Dana Russell (telephone)
Bertha Sepulveda

Members Absent: Dr. Wil Counts
Benton Davis
Violet Mitchell-Enos
Librado M. Ramirez

ADHS Staff: Patricia Tarango – Office Chief, TEPP
Dilia Loe – Senior Local Projects Manager, TEPP
April Lawless – Senior Health Marketing Manager, TEPP
Meryl Salit – Statewide Program Coordinator, TEPP
Teresa Koehler – Administrative Assistant III, TEPP

Facilitator: Cheryl Austin – Empowering Leaders, LLC

Public Attendees: Marla Jirak - TEPP/University of Arizona
Michele Walsh - TEPP/University of Arizona
Joanne Basta - TEPP/University of Arizona
Donna Beedle - Maricopa County

Call to Order

Mr. Madonna, TRUST Commission Chairperson, called the meeting to order at 10:07 am ... welcome the TRUST members and visitors.

Mr. Madonna: Acknowledged Patricia Tarango, Office Chief of Tobacco Education and Prevention Program and facilitator, Cheryl Austin.

Mr. Madonna: Reviewed agenda items and explained the guidelines, procedure regarding public commentary related to the “Speaker’s Slip”. The public commentary section is limited to five minutes at the end of the meeting and that time is divided up between the number of individuals wishing to speak. The slips are given to Teresa Koehler. Teresa will be the coordinator and timekeeper for the public comment.

Approval of Minutes

Mr. Madonna: Requested a motion to accept the approval of the November meeting minutes. Dr. Nayeri motioned and Linda Bailey seconded. Mr. Madonna asked if there was any discussion or changes to the minutes as distributed. “All those in favor of accepting say I.” All I’s. Minutes for the November meeting are approved.

Chairman’s Report

Mr. Madonna: Addressed members and visitors.

- ▶ Reminded members that the purpose of the meeting was to discuss the Tobacco Education and Prevention Program (TEPP) Strategic Plan.
- ▶ Shared the idea that the strategic plan is basically TEPP’s operating plan for the staff to do their work.
- ▶ Reminded members that Ms. Tarango has given the TRUST the opportunity to participate in the review process and that the commission as a body is an advisory board to provide feedback and to provide input to the plan.
- ▶ Mentioned that Ms. Tarango will take their reactions, input, feedback and will decide what information is helpful to her to put into the next iteration of the plan which she is committed to bring back to the TRUST in January.

Mr. Pfeifer: Asked “How do you see the TEPP strategic plan either similar or different to the comprehensive Chronic Disease plans or the individual sub-plans? A brief discussion between Mr. Madonna, Mr. Pfeifer, and Linda Bailey took place regarding the strategic plan, an operations plan, and/or a comprehensive tobacco control plan.

Mr. Madonna: Introduced Rosa Garcia with Mariposa Community Health Center.

Office Chief's Report

Ms. Tarango: Introduced Cheryl Austin, facilitator for the strategic plan review process.

Ms. Austin: Led the group in a discussion regarding what is success for you from today's meeting.

- ▶ Making an effective change in terms of health care that communicates to our community
- ▶ To clearly define a measurable working document, operating plan
- ▶ For the commission to feel a level of comfort and ownership in what we have helped to create
- ▶ To better understand TEPP's own perspective about how they contribute to tobacco control in the state.
- ▶ Develop an operational plan for TEPP by the end of the day.

Ms. Austin: Proposes to the members that they start with the vision, the mission, and the six goals.

Vision (new)

The Arizona Department of Health Services, Office of Tobacco Education and Prevention Program is recognized for de-normalizing tobacco in innovative ways.

Mr. Pfeifer: Questioned whether the plan was a strategic plan or an operational plan.

Mr. Madonna: Stated he would like to move forward working with this document as the strategic plan.

Dr. Nayeri: Agreed in support of Mr. Madonna.

Ms. Austin: Suggested that a list (the Parking Lot list) be created to capture items to be discussed at another time so that the focus of today's meeting would be on the document, the strategic plan.

Parking Lot (get future input from the commission)

1. Suggestions on the process of strategic planning including the involvement of stakeholders.
2. What is the commission's vision, picture of what the final product of a strategic plan.
3. Get recommendations at the end of this meeting on the next steps.

Ms. Austin: Asked for inputs from the commission regarding the vision and the mission for TEPP.

Mr. Madonna: Asked to add a phrase that says ... to have a tobacco-free Arizona.

Dr. Kaback: Agreed

Mr. Pfeifer: Agreed

Ms. Garcia: Agreed

Mr. Russell: Agreed

Ms. Austin: First, asked if there were any other comments regarding the vision and then, asked for comments regarding the mission.

Mission (*existing*)

The Office of Tobacco Education and Prevention Program's mission is to protect and improve the health and quality of life of all Arizonans by de-normalizing tobacco use, reducing tobacco use through prevention and treatment, reducing exposure to environmental tobacco smoke and eliminating tobacco related health disparities.

- ▶ **Mission statement is too wordy, make shorter, clear, concise.**
- ▶ **Add “to provide leadership” to accomplish the vision and key activities.**
- ▶ **Add something about being “culturally sensitive”.**
- ▶ **Add value around culture, inclusiveness, including the stakeholders.**
- ▶ **Add “to reduce tobacco-related death and disease”.**

Ms. Austin: Summarized the key points of the mission.

All members: Agreed

Ms. Austin: Asked members to move to the six goals and asked for comments.

Goals

The Office of Tobacco Education and Prevention Program has six (6) strategic goals. These goals are in concert and model the goals recommended by the Center for Disease Control and Prevention (CDC) for a comprehensive tobacco control program. These goals also support the Arizona Department of Health Services Strategic Plan 2005 – 2009. The goals for the Tobacco Education and Prevention Program are:

1. To promote and protect the health of Arizona’s children and adults
2. Decrease initiation of tobacco use among all Arizonan’s and youth
3. Promote quitting of tobacco use
4. Reduce all Arizonan’s exposure to secondhand smoke
5. Identify and eliminate tobacco related disparities
6. To promote staff development

Ms. Garcia: Suggest that goal number one be removed. It is already mentioned in the mission.

Dr. Kaback: Agreed, goal one is too broad.

Ms. Bailey: Suggest that “over all prevalence” be the number one goal.

Mr. Madonna: Recommends that in the goal statement preceding the list of goals that a statement be added to include prevalence numbers. For example, the goal is to reduce smoking prevalence by 12% in adults and by 10% in youths by 2010. Members discussed the six goals.

Ms. Austin: Reviewed the changes made to goals.

- ▶ Goal 1 is a goal about prevalence; break it in to two groups – adults and youths with prevalence numbers.
- ▶ Goal 2 and 3 are objectives under goal 1.
- ▶ Goal 4 is a goal and should be re-stated to be more measurable. Members agreed that specifically including the unborn child, pregnant women is not necessary.
- ▶ Goal 5 is a goal. Reword goal to recognize parity, as well as disparity and add focus to tobacco control parity; move away from tobacco – health disparities, i.e. reference California tobacco control document. Will need data sets to be built and eventually, this goal should be integrated in to the others.
- ▶ Goal 6 is a goal; goal 6 should read “to strengthen the fundamental structure of the Arizona Tobacco Education and Prevention Program to include staff development, communication activities, media activities, the engagement of stakeholders, and relationship development both internal and external to government, creation of

- statewide data systems, etc. Notation and agreement was made to clarify that the measure for this goal would be more qualitative than quantitative.
- ▶ Add measurable to goals and objectives.

Break: 12:05 – 12:10 p.m.

Ms. Austin: Reviewed and suggested that the members continue with discussing the measures of the goals, and then circle back to the other areas for additional input, as time allows.

Mr. Pfiefer: Asked, “Are we missing any goals?” Discussion occurred regarding California tobacco control document, plan specifically concerning initiating efforts to regulate the tobacco industry and to increase the price of tobacco products.

Mr. Madonna: Suggested adding regulating the tobacco industry and increasing the price of tobacco products to the parking lot list to discuss later because the scope of those two items are greater than the plan that is currently being discussed.

Ms. Austin: Added two additional items to the parking lot list.

Parking Lot (get future input from the commission)

1. Suggestions on the process of strategic planning including the involvement of stakeholders.
2. What is the commission’s vision, picture of what the final product of a strategic plan.
3. Get recommendations at the end of this meeting on the next steps.
4. Ms. Tarango to bring to ADHS TRUST commission input on
 - a. Increase tobacco product pricing
 - b. Initiate efforts to regulate the tobacco industry and the influence
 - c. Possible goal six (6)

Ms. Austin: Asked if the TRUST members were in agreement on the goals.

Members: Agreed

Ms. Austin: Asked the members to provide input on the measures for current goal number 1.

- ▶ No comment on current measures for goal number 1.

Ms. Austin: Asked the members to provide input on the measures for current goal number 2.

- ▶ Look more at the youth survey studies and pulling out a couple of the measures that are really meaningful, as well as for adults.
- ▶ For the cessation numbers, there are a couple of numbers that are not there that are rising to the level of national rates.
 - Quit line (what proportion of smokers within the state have actually received counseling or help from the quit line – goal 16% reach).

- Quit rate (six - seven month follow up with people who did receive help from the quit line – goal 20%).
- ▶ Re-examine the data to pull out information regarding the Asian population.
- ▶ Concern that there is too much focus on title 1 school(s).
- ▶ Design a tool that measures the sales of tobacco to youths – sting sample studies.
- ▶ Combine those measurements that overlap.

Ms. Austin: Asked the members to provide input on the measures for current goal number 3.

- ▶ Refine measures to have fewer measures with more specificity.
- ▶ More emphasis on cessation programs and other therapies; too much on the quit-line.

Ms. Austin: Asked the members to provide input on the measures for current goal number 4.

- ▶ The work site policy should be broadened to include areas other than worksites.
- ▶ Measure the portion of worksite with voluntary tobacco free policies.
- ▶ Measure worksites that are truly smoke-free.
- ▶ Reduce secondhand smoke exposure to casino workers in the work place.

Ms. Austin: Asked the members to provide input on the measures for current goal number 5.

- ▶ Define what we mean by parity and what we mean by disparity.

Ms. Austin: Asked the members to provide input on the measures for current goal number 6.

- ▶ No comment on current measures for goal number 6. Goal 6 to be re-written.

Ms. Austin: Asked the members to provide input on the objectives or the strategies for the current goal number 1.

- ▶ Goal 1 to be re-written and will become a prevalence goal.

Ms. Austin: Asked the members to provide input on the objectives or the strategies for the current goal number 2.

- ▶ Consolidate objectives 2.3 and 2.5.

Ms. Austin: Asked the members to provide input on the objectives or the strategies for the current goal number 3.

- ▶ More emphasis on cessations: expand 3.1 and 3.4.
- ▶ Consolidate what is around the quitline.
- ▶ Create another objective around a better model for young adults.
- ▶ Include other methods for quitting and not only the quitline.

Ms. Austin: Asked the members to provide input on the objectives or the strategies for the current goal number 4.

- ▶ No comment on current objectives or strategies for goal number 4.

Ms. Austin: Asked the members to provide input on the objectives or the strategies for the current goal number 5.

- ▶ Already covered in previous discussion.

Ms. Austin: Asked the members to provide input on the objectives or the strategies for the current goal number 6.

- ▶ Set aside.

Mr. Madonna: Provided closing comments that included a discussion on the need to drafting a State Tobacco Control plan. Ms. Tarango is committed to bring this next step to the January meeting.

Public Commentary

Mr. Madonna: Asked Ms. Koehler if there are any public comments or questions?

Ms. Koehler: Replied, “No, sir.”

Mr. Madonna – I will accept the **motion to adjourn** at 3:37 pm. Seconded. Motion carried.

The TRUST Commission is a public meeting. In compliance with the State’s open meetings laws, the recorded minutes for the December TRUST Commission meeting are available to the public three working days after the meeting. Please contact the TRUST Coordinator at the Office of Tobacco Education and Prevention Program, 602-364-0824, to make arrangements to hear the recorder minutes.

Patricia Tarango
Office Chief
Office of Tobacco Education and Prevention Program
Arizona Department of Health Services

TEPP Strategic Plan
Fiscal Year 2005-2009

Vision (*new*)

The Arizona Department of Health Services, Office of Tobacco Education and Prevention Program is recognized for de-normalizing tobacco in innovative ways.

Mission (*existing*)

The Office of Tobacco Education and Prevention Program's mission is to protect and improve the health and quality of life of all Arizonans by de-normalizing tobacco use, reducing tobacco use through prevention and treatment, reducing exposure to environmental tobacco smoke and eliminating tobacco related health disparities.

Goals

The Office of Tobacco Education and Prevention Program has six (6) strategic goals. These goals are in concert and model the goals recommended by the Center for Disease Control and Prevention (CDC) for a comprehensive tobacco control program. These goals also support the Arizona Department of Health Services Strategic Plan 2005 – 2009. The goals for the Tobacco Education and Prevention Program are:

1. To promote and protect the health of Arizona's children and adults
2. Decrease initiation of tobacco use among all Arizona's and youth
3. Promote quitting of tobacco use
4. Reduce all Arizonan's exposure to secondhand smoke
5. Identify and eliminate tobacco related disparities
6. To promote staff development

Goal 1: To promote and protect the health of Arizona's children and adults.

Objective 1.1:

Improve Arizonans' health outcomes by preventing disease, reducing disability, and increasing access to care.

Strategy: Reduce the incidence and impact of chronic disease and disability.

Measures:

- By December 2005, the Office of Tobacco Education and Prevention Program will have developed a three - year strategic plan with at least one goal to address chronic disease, disability and disparities.

Objective 1.2:

Tobacco Education and Prevention Program will adopt a social marketing model to promote a comprehensive tobacco awareness/health promotion campaign

Strategy: Improve outcomes of health marketing efforts.

Measures:

- By January 2005, establish Department guidelines on social marketing materials and efforts.
- By January 2005, establish a coordinated Department health marketing campaign plan.
- By June 30, 2006 integrate the Tobacco Education and Prevention Program messages into the Department's health marketing campaign plan.
- By June 30, 2006 a comprehensive Social Marketing Plan will be developed and implemented supporting the Tobacco Education and Prevention Program activities.

Objective 1.3:

Education and collaboration with key partners and stakeholders.

Strategy: Educate stakeholders on the impact of tobacco use and the impact on the health status of Arizonans

Measures:

- By June 2005 develop a comprehensive Lung Plan and Asthma Plan
- By December 2005 Lung Plan and Asthma Plan are published and released
- By December 2005, elements of the comprehensive Lung Plan and Asthma Plan are included in the request for proposal that addresses Chronic Disease and Prevention
- By June 2006, at least one objective from the comprehensive Lung Plan and Asthma Plan will be integrated into the annual operational plan for the Tobacco Education and Prevention Program

Objective 1.4:

Accurate information on program is readily available and included in monthly Governor's report; identify opportunities for Director to present on tobacco related topics and the state Tobacco Education and Prevention Program; Program overview and orientation to ADHS Senior Management and TRUST Commission

Strategy: Director is informed on the activities and strategic focus of the Tobacco Education and Prevention Program

Measures:

- Orientation to Director and Executive Team is provided annually
- Presentations provided to Director on social marketing plan and strategies

Objective 1.5:

Annually

- Within Division of PHS, establish program links between ADHS/TEPP and other prevention service offices (Office of Women and Children's Health, Office of Children With Special Healthcare Needs, Office of Chronic Disease Prevention and Nutrition, Office of Oral Health and Office of Health Systems Development)
- Within Division of BHS, establish program links with ADHS/TEPP/PHS
- Partner and collaborate with AHCCCS, DOE, DES and Indian Health Services

Strategy: Strong collaborative partnership with Public Health entities and Behavioral Health entities

Measures:

- Number of joint opportunities/ventures with other Public Health Prevention Programs
- Number of SYNAR meetings, contribution to planning meetings with Behavioral Health Services to address tobacco use among behavioral health service clients
- Identify and coordinate at least one tobacco use related project with AHCCCS, the Arizona Department of Education to address access to tobacco use services.
- Formalize collaborative partnerships with American Cancer Society (ACS), American Lung Association (ALA), American Heart Association (AHA) via memorandum of understanding

Goal # 2: Prevention - Initiation of Tobacco Use Among Youth

Objective 2.1:

Increased knowledge of, improved anti-tobacco attitudes toward, and increased support for policies to reduce youth initiation

Strategy: Develop and implement a social marketing plan for youth statewide; Develop a social marketing (counter marketing) campaign to disseminate anti-tobacco messages and pro-health messages for youth participating in school-based interventions at a targeted title 1 school

Measures:

- Level of confirmed awareness of anti-tobacco media messages
- Level of receptivity to anti-tobacco media messages
- Proportion of the target population (title 1 schools) that can accurately recall a media message

Objective 2.2:

Increased anti-tobacco programs in schools

Strategy: Implement use of CDC “Guidelines for School Health Programs to Prevent Tobacco Use and Addiction” youth intervention curriculum in Title 1 schools in Arizona

Measures:

- Proportion of Title 1 schools or school districts that provide instruction on tobacco-use prevention that meets CDC guidelines
- Proportion of Title 1 schools or school districts that provide tobacco-use prevention education in grades 4-8
- Proportion of Title 1 schools or school districts that provide tobacco-use prevention education in grades 9 – 12
- Proportion of Title 1 schools and school districts that provide program specific training for teachers
- Proportions of Title 1 schools or school districts that assess their tobacco use prevention program at regular intervals
- Proportion of students who participate in tobacco use prevention activities
- Level of reported exposure to school-based tobacco use prevention curricula that meet CDC guidelines

Objective 2.3:

Increased restriction and enforcement of restrictions on tobacco sales to minors

Strategy: Implement an interagency agreement with the Arizona Office of the Attorney General to conduct enforcement inspections among tobacco retailers throughout Arizona

Measures:

- Number of compliance checks conducted by enforcement agencies
- Number of warnings, citations, and fines issued for infractions of public policies against youth access to tobacco products
- Number of public relation opportunities to promote and enhance community awareness about the value and benefit to community of existing laws

Objective 2.4:

Reduce susceptibility to experimentation with tobacco products by youth

Strategy: Develop and implement a social marketing campaign to reinforce benefits of not using tobacco product specific to use

Measures:

- Proportion of youth who are susceptible never-smokers
- Proportion of student who report receiving tobacco prevention education in class

Objective 2.5:

Decreased access to tobacco products

Strategy: Tobacco re-tail awareness and education presentations/campaign

Measures:

- Number of education and awareness presentations delivered to tobacco re-tail
- Proportions of youth reporting that they have received tobacco products from a social source

Goal # 3: Cessation – Promote quitting of Tobacco use among young adults (18 –24 year olds) and adults

Objective 3.1:

Increase use of cessation services

Strategy: Develop and implement a social marketing campaign to promote benefits of cessation and promote use of the Arizona Smoker’s Help Line and use of local group cessation programs for young adults and adults

Measures:

- Number of callers to telephone quit-line (ASHline), by age group
- Number of calls to telephone quit-line from users who heard about the quit-line through a media campaign by age group
- Number of calls to telephone quit-line from users who heard about the quit-line through a source other than a media campaign by age group
- Proportion of healthcare systems that promote ASHline quit lines or referral to ASHline
- Proportion of worksites that implement a cessation program or referral to ASHline
- Proportion of smokers who have used a local project or worksite group cessation program

Objective 3.2:

Increased awareness, knowledge, and intention to quit tobacco use, and support for policies that support cessation

Strategy: Provide tobacco users with tools needed to quit successfully

Measures:

- Proportion of the target population that can accurately recall a media message about the dangers of smoking and the benefits of cessation

- Proportion of smokers who intend to quit
- Proportion of smokers who report that they intend to quit smoking using proven cessation methods (NRT, 1:1 counseling, ASHLine, cessation classes or combination)
- Proportion of smokers who are aware of the cessation services available to them
- Proportion of employers who are aware of the benefits or providing worksite tobacco free worksite policy, cessation services and nicotine replacement therapy

Objective 3.3:

Increase the number of health care providers and health care systems following the Public Health Service guidelines

Strategy: Assess the knowledge of AHCCCS and Federally Qualified Health Center health care providers of the Public Health Service (PHS) guidelines and who have fully implemented PHS recommendations

Measures:

- Proportion of adults who have been asked by a health care professional about their smoking status in the last 12 months
- Proportion of smokers who have been advised to quit smoking by a health care professional in the last 12 months
- Proportion of smokers who have had a health care professional actively assist in an attempt to quit smoking (proactive referrals)
- Proportion of health care providers and health care systems that have fully implemented the Public Health Service guidelines “The Clinical Practice Guideline: Treating Tobacco Use and Dependence”
- Proportion of health care systems that have provider reminder system in place

Objective 3.4:

Increased number of quit attempts and quit attempts using proven cessation method

Strategy: Develop and implement social marketing campaign specific for target populations (18 – 24 y/o, racial/ethnic populations and low socio economic status (Latino, Native American, African American, and Asian American) on awareness and benefits of quitting and services available

Measure:

- Proportion of adult smokers who have stopped smoking for a least 1 day in the last 12 months
- Proportion of adult smokers who have made a quit attempt using proven cessation methods in the last 12 months

Objective 3.5:

Increased cessation among young adults (18 –24 year olds) and adults

Strategy: Develop and implement social marketing campaign for target populations to promote cessation classes, ASHLine and other appropriate reminders

Measures:

- Proportion of smokers who have sustained abstinence from tobacco use for 6 months or longer
- Proportions of smokers who made a quit attempt in last 12 months are still quit

Objective 3.6:

Reduced tobacco use prevalence and consumption

Strategy: Health Care Partnership

Measures:

- Smoking prevalence
- Prevalence of tobacco use during pregnancy

Goal # 4: Second Hand Smoke – Reduce all Arizonan’s exposure to secondhand smoke.

Objective 4.1:

Increase knowledge of, improved attitudes toward, and increased support for the creation of active enforcement of tobacco free policies

Strategy: Develop and implement social marketing campaign specific to second hand smoke

Measures:

- Level of confirmed awareness of social marketing messaging on the dangers of secondhand smoke
- Proportion of the population that thinks secondhand smoke is harmful to children and pregnant women
- Attitudes of smokers and nonsmokers about the acceptability of exposing others to secondhand smoke
- Proportion of the population that thinks secondhand smoke is harmful

Objective 4.2:

Implementation of tobacco free worksite policies

Strategy: AzHealthLinks will promote awareness and knowledge of benefits of implementing a tobacco free worksite among employers and employees

Measures:

- Proportion of worksites with voluntary tobacco free policies

- Level of support for creating tobacco free policies in workplaces

Goal # 5: Health Disparities –Identify disparities in tobacco initiation, use and exposure to secondhand smoke.

Objective 5.1:

Incorporate use of National Standards for Culturally and Linguistically Appropriate Services (CLAS) in health care to the Arizona Tobacco Education and Prevention Program requirements

Strategy: Develop training for TEPP staff and TEPP contractors on understanding and utilization of National CLAS Standards.

Measures:

- Number of trainings provided on CLAS
- Number of CLAS standards integrated into contractors work-plans

Objective 5.2:

Develop tobacco message based on tobacco related disease disparities among Arizona population

Strategy: Conduct a series of focus groups (8) and informal interviews with clients, to determine the appropriateness of the information.

Measures:

- Identify the population at risk by analyzing the adult tobacco survey, youth tobacco survey, behavioral risk factor survey, youth risk behavior survey and disease specific information.
- Measure gaps between populations and messages
- Identify under-served populations
- Develop of new programs (messages) for under-served populations.

Objective 5.3:

Identify tobacco related morbidity and mortality rates through secondary data analysis

Strategy: Analyze hospitalizations, emergency room, cancer registry and death information

Measures:

- Secondary data analysis is completed on an annual basis
- Findings are published in biannual report and integrated into future year program work plans

Goal 6: Promote staff development.

Objective 6.1: Increase TEPP staff knowledge, skills and experience in tobacco control or public health.

Strategy: Provide specific training on interpretation of data, implementation of data/reports and data collection specific to tobacco control, tobacco related disease and public health methodologies.

Measures:

- Number of trainings provides
- By June 2006, develop at least one program improvement activity utilizing new training/data concepts

Objective 6.2: Establish Epidemiology, Data and Surveillance Unit within the Tobacco Education and Prevention Program

Measures:

By January 2006, expanded expertise in tobacco control or public health fields (Health Educator, Epidemiologist, Statistician)

Objective 6.3:

Educate ADHS of TEPP comprehensive services during FY '06:

- Presentations to ADHS programs
- Collaboration with ADHS programs (resource sharing)
- Open house hosted by TEPP

Measurements:

- Frequency/Number of presentations to key personnel
- Increase in resources collaborations

Objective 6.4:

Improve planning process during FY '06:

- Cultivate internal communications
- Educate/develop staff planning skills

Measurements:

Completion / implementation of projects in a timely manner. Number of classes and trainings.

Tobacco Revenue, Use Spending and Tracking Commission
Office of Tobacco Education and Prevention Program (TEPP)

January 11, 2006

United Healthcare of Arizona
3141 North 3rd Avenue
Phoenix, Arizona 85013

MINUTES

Members Present: Matthew Madonna – Chairman
Linda Bailey
Dr. Wil Counts
Benton Davis
Rosa Garcia
Dr. Shelly Hall
Dr. Kelly Hsu
Dr. Keith Kaback (by phone)
Violet Mitchell-Enos
Dr. Babak Nayeri
Bill Pfeifer
Librado M. Ramirez
Dana Russell
Bertha Sepulveda

Members Absent: Dr. Hugh Miller

ADHS Staff: Jeanette Shea-Ramirez – Deputy Assistant Director, ADHS
Georgina Lowe – Division Finance Officer
Patricia Tarango – Office Chief, TEPP
Dilia Loe – Senior Program Manager, TEPP
Emma Viera-Negron – Senior Epidemiology Manager
April Lawless – Senior Health Marketing Manager, TEPP
Bob Leischow – Health Education Account, Chronic Disease
Teresa Koehler – Administrative Assistant III, TEPP

Presenters: Patricia Tarango – Office Chief, TEPP
April Lawless – Senior Health Marketing Manager, TEPP
Claire Brown – Evaluator with TEPP/University of Arizona
Bob Leischow – Health Education Account, Chronic Disease
John Craft – Cancer Society
Nancy Cohns – Lung Association
Cheryl Litzin – Native American Health Center

Public Attendees: Marla Jirak - TEPP/University of Arizona
Michele Walsh - TEPP/University of Arizona
Michelle Pabis – American Cancer Society
Karen Martin – Pima County Health Department
Susan Williams – Mohave County
Donna Beedle – Maricopa County
Don Morris

Call to Order

Mr. Madonna, TRUST Commission Chairperson, called the meeting to order at 10:00 am ... welcome the TRUST members and visitors.

Mr. Madonna: Reviewed agenda items and explained the guidelines, procedure regarding public commentary related to the “Speaker’s Slip”. The public commentary section is limited to five minutes at the end of the meeting and that time is divided up between the number of individuals wishing to speak. The slips are given to Teresa Koehler. Teresa will be the coordinator and timekeeper for the public comment.

Approval of Minutes

Mr. Madonna: Announced that December meeting minutes must be approved. Mr. Madonna raised a motion to approve the minutes of the December meeting as distributed.

Mr. Pfeiffer: So moved.

Mr. Madonna: Second.

Ms. Garcia: Requested that a correction be made on page 5 of 17.

Mr. Madonna: Announced discussion – correction.

Ms. Garcia: Stated that she did not suggest that goal number one be removed and that Ms. Mitchell-Enos had made that suggestion.

Mr. Madonna: Asked if there were any other question, comments, or changes to the minutes as distributed. If not, all those in favor of accepting the minutes say, “Aye”. All say, “Aye”. Minutes for the December meeting approved.

Chairman’s Report

Mr. Madonna: Addressed members and visitors to remind them that we are now on the bi-monthly meeting schedule and that we will be meeting for 10:00 a.m. to 4 p.m. every other month.

- ▶ Reviewed new meeting schedule.
- ▶ Announced March 8 meeting to be held at United HealthCare.
- ▶ Suggested the need for a long range strategic plan.
- ▶ Announced a political alert: a new initiative on the street to raise the tobacco tax another eighty cents and most, if not all the money will go to education; stating that this initiative does not include back fill language. Back fill language, when discussing tobacco tax issues, should include the consideration of “price elasticity”. Price elasticity makes known that for every 10% increase that there is a 6% decrease. Without the consideration of price elasticity, there will be a significant impact on the existing tobacco tax revenue. What does this mean? This means that TEPP could experience a 20% – 40% decline in revenue starting next year. This initiative has been filed and the language can not be changed now. Discussion occurred regarding the details of the initiative between the members. The discussion did not include recommendations or suggests to actions to be taken by the members.

Mr. Madonna: Announced TEPP Office Chief, Patricia Tarango

Office Chief’s Report

Ms. Tarango: Announced the ADHS/TEPP organizational changes.

- ▶ New Staff
 - a. Emma Viera-Negron, Senior Epidemiologist Manger
 - b. Bob Leischow, Program Administrator
- ▶ Staff Vacancies:
 - a. Public Relations Manager
 - b. Multicultural Health Marketing Manager
 - c. Epidemiologist
 - d. Health Educator
 - e. Administrative Services Officer
- ▶ Revised organizational chart

Ms. Tarango: Reported on the completion, approval, and distribution of the 2005 TRUST Annual Report.

Ms. Tarango: Reported on the strategic plan, the TEPP program plan, that is for the Office of Tobacco Education and Prevention Program to be able to move forward with activities that we are going to be reporting on and that support the Department’s overall measures that we will be reporting back to the Governor’s Office and to other individuals within the Department of Health Services.

- ▶ Provided copies of revised plan, the TEPP program plan, not the statewide plan.
- ▶ SMART Objectives.
- ▶ 18 Month Operational Plan ... March 2006.
- ▶ Draft – Executive Summary ... March 2006.
- ▶ Draft – 2007 Financial Plan ... May 2006.

Ms. Tarango: Reported on the financial update.

- ▶ Financial Update for 2006
 - Financial chart for revenues, total revenues are below the second quarter projection.
 - Financial chart for expenditures, December expenditures are recorded until January.
 - Spoke to contractors regarding funding and re-directing funds as necessary.
 - Discussed \$\$ in previous years and provided handout. Current ADHS policy is to leave \$\$ in the year that they were accrued. ADHS expectation is to spend all \$\$'s in the year that they were accrued.

Mr. Pfeifer: Moved that the TRUST Commission recommend to the Tobacco Education and Prevention Program that we allocate a significant amount of the surplus to a Secondhand Smoke Media campaign to be implemented in this fiscal year.

Dr. Nayeri: Second

Mr. Madonna: Asked ... any discussion? Members discussed and Ms. Tarango was requested to come back with a Secondhand Smoke campaign plan.

Mr. Madonna: Asked, “All those in favor, say “Aye”. All say, “Aye”. Activity break announced.

Ms. Lawless – Physical Activity Break

Lunch (11:45 – 12:15)

Mr. Madonna: Introduced April Lawless.

Ms. Lawless: Presented the Social Marketing Overview

- ▶ Social Marketing Planning Process
 - Social marketing is the use of marketing principles to influence human behavior and improve health or benefit society as a whole.
- ▶ What Social Marketing Is and Is Not
- ▶ Why Social Marketing
- ▶ Seven Phases of Social Marketing
 - Analyze the Environment
 - Conduct the Formative/Market Research

- Set Goals and Objectives
- Plan the Intervention
- Determine Strategies
- Develop Evaluation and Monitoring Strategy
- Establish Budgets
- Complete an Implementation Plan (operational plan)
- ▶ Presentation Resources
- ▶ Social Marketing Plan Development

Mr. Madonna: Introduced Claire Brown.

Ms. Brown: Presented on the 2003 Arizona Youth Tobacco Survey.

- ▶ Data
 - Data sponsored by CDC
 - Purpose of the survey is to provide prevalence rates of tobacco use among Arizona's school-based youths and to compare changes in the prevalence rates over time.
 - Survey limitations – not all youths are surveyed.
 - Comprehensive model of what influences youth to become smokers – or not?
 - Student Sample
 - Prevalence Rates
 - Current Use (30-day)
 - Ever Use
 - By Grade
 - By Gender
 - By Ethnic Group
 - Progression from not smoking to established smoking
 - Committed Never Smokers, Ever Smokers, Occasional Smokers, Initiated Smokers, Near-established Smokers, and Established Smokers by grade.
- ▶ Attitudes
 - Perceived social desirability of smoking
 - Have more friends
 - Looking cool or fitting in
 - Perceived benefits of smoking
 - Keeping weight down
 - Reducing stress
- ▶ Knowledge About Tobacco
 - Perceived dangers of tobacco – addiction
 - Perceived dangers of smoking
 - Perceived dangers of secondhand smoke
- ▶ Influence
 - Living with someone who smokes
 - Having friends who smoke
 - Media

- Tobacco company marketing artifacts
- Social interventions

Unfinished Business: Chronic Disease Contracts Update

Mr. Madonna: Introduced Bob Leischow.

Mr. Leischow: Presented the Chronic Disease contract update.

- ▶ Request for Proposal (RFP)
- ▶ Request for Grant Applications (RFGA)
- ▶ Mini Grants

Mr. Leischow: Introduced Nancy Cohns.

Ms. Cohns: Presented on the American Lung Association of Arizona.

- ▶ Breathe Free Project
 - Early Detection and Screening of COPD
- ▶ What is COPD?
 - Chronic Obstructive Pulmonary Disease
 - Group of lung disease that includes emphysema and chronic bronchitis
- ▶ Risk Factors
 - Smoking
 - Air pollution
 - Secondhand smoke
 - History of childhood respiratory infections
 - Occupational exposure to industrial pollutants
- ▶ Project Goals
 - Increase the incidence of screening and early detection
 - Increase the number of individuals in the targeted area who understand the importance of screening and early detection
- ▶ Target Population/Area
- ▶ Program Objectives/Evaluation Tools
- ▶ Data Analysis of Evaluation Tools
 - Lung Health Screening Consent Form – Demographics
 - Community Survey
 - Providers
- ▶ Breathe Free: Year Two
 - Goals
 - Objectives
 - Operational Program Goals
- ▶ Preliminary Data Analysis – Provider Needs/Resource Assessments
 - Demographics
 - Interpretation of Analysis

- ▶ Preliminary Data Analysis – Patient/Caregiver Needs/Resource Assessment
 - Respondents (Caregivers/Patients)
 - Interpretation of Analysis

Mr. Madonna: Introduced John Craft.

Mr. Craft: Presented on the American Cancer Society.

- ▶ Colorectal Cancer (CRC) Screening Guidelines
- ▶ Program Description
 - Goal 1: Conduct statewide survey of gastroenterologists to assess capacity/barriers
 - Goal 2: Conduct survey of primary care physicians to define their attitudes to SRS screening
 - Goal 3: Conduct a survey of managed care organizations regarding attitudes and coverage
 - Goal 4: Conduct a CRC Capacity Building conference and introduce stakeholders to best practices and new strategies to increase screening rates
- ▶ Next Steps
 - Year Two: Proposal to increase CRC screening rates in targeted Arizona counties
 - Percentage of CRCs diagnosed in late stage by target county 1995-2000
- ▶ CRC Project – Scope of Work
 - Goal and Objectives

Mr. Madonna: Introduced Cheryl Litzin.

Ms. Litzin: Presented on the Native American Health Center.

- ▶ Project Staff Overview
- ▶ Projects Goals – Year 1
 - Evaluation
 - Target populations
 - Worksite
 - Community Based
 - School Based
- ▶ Worksite
 - Worksite Partnerships
 - Worksite Wellness
 - Worksite Achievements
 - Worksite – Year 2
 - Inter-Tribal Council of Arizona
 - Bureau of Indian Affairs
 - Phoenix Indian Center
 - Native American Connections
- ▶ School-based

- School Partnerships – Year 1
- Nutrition and physical activity
- School-based Data
- School-based Achievements
- Health and Behavior Changes: Survey comments
- School Partners – Year 2
 - Royal Palm, Washington School District
 - Palo Verde Elementary School
 - Richard W. Miller
 - Mountain View Elementary
 - Orangewood Elementary
 - Creighton School, Creighton District
 - Solano School, Osborn School District
- ▶ Community Population
 - Community Partners – Year 1
 - Community Events
 - Great American Smoke Out
 - Men’s Wellness Fair
 - Gila River Employee Health Fair
 - PIMC Women’s Expo
 - Native Health Fair
 - AK Chin Health Fair
 - Community Based – Year 1
 - Achievements
 - Nutrition and Physical Activity
 - Community Data
 - Community Partners – Year 2
 - ◆ Florence Crittenton
 - ◆ Tumbleweed
 - ◆ Thomas J. Pappas
 - ◆ NDNs4wellness

Public Commentary

Mr. Madonna: Asked Teresa, do we have any public comments or questions?

Ms. Koehler: Replied, “No, sir.”

Meeting Evaluation and Agenda Planning

Members – evaluate and review meeting format.

Mr. Madonna – Announced March meeting to be hosted by United Healthcare of Arizona.

Mr. Madonna – I will accept the **motion to adjourn** at 3:35 pm. Motion carried.

January 11, TRUST Meeting Items

▶ **January meeting items that need a response at the March meeting:**

1. Teresa Koehler ... to send Mr. Madonna an electronic copy of the TRUST 2005 Annual Report.
2. Patricia Tarango ... to develop a proposal for a process including a timeline that would be used to develop the Statewide Plan.
3. Patricia Tarango ... to provide 18 Month Operational Plan.
4. Patricia Tarango ... to draft Executive Summary to be included in Operational Plan.
5. Patricia Tarango ... to report on 2nd quarter expenditures to include the components of the 2006 projected total.
6. Patricia Tarango ... to develop a plan for a Secondhand Smoke campaign.

▶ **January 11, 2006 ... new agenda items for March meeting:**

1. Three presentations – Chronic Disease
2. Update on Strategic Plan
3. Office Chief - Executive Summary
4. Office Chief - next steps for moving forward on Statewide Plan ... including time line.

The TRUST Commission is a public meeting. In compliance with the State's open meetings laws, the recorded minutes for the January 2006 TRUST Commission meeting are available to the public three working days after the meeting. Please contact the TRUST Coordinator at the Office of Tobacco Education and Prevention Program, 602-364-0824, to make arrangements to hear the recorder minutes.

Patricia Tarango
Office Chief
Office of Tobacco Education and Prevention Program
Arizona Department of Health Services

Tobacco Revenue, Use Spending and Tracking Commission
Office of Tobacco Education and Prevention Program (TEPP)

March 8, 2006

Native American Community Health Center
3008 North 3rd Street
Phoenix, Arizona 85012

MINUTES

- Members Present: Matthew Madonna – Chairman
Linda Bailey
Benton Davis
Rosa Garcia
Dr. Kelly Hsu
Dr. Keith Kaback (by phone)
Dr. Hugh Miller (by phone)
Dr. Babak Nayeri
Bill Pfeifer
- Members Absent: Dr. Wil Counts
Dr. Shelly Hall
Violet Mitchell-Enos
Librado M. Ramirez
Dana Russell
Bertha Sepulveda
- ADHS Staff: Patricia Tarango – Office Chief, TEPP
Emma Viera-Negron – Senior Epidemiology Manager, TEPP
Bob Leischow – Health Education Account, Chronic Disease, TEPP
Teresa Koehler – Administrative Assistant III, TEPP
- Presenters: Patricia Tarango – Office Chief, TEPP
Traci Bunker – Coconino County
Anna David – Maricopa County
Darren Treasure – Arizona Interscholastic Association
- Public Attendees: Marla Jirak - TEPP/University of Arizona
Michelle Pabis – American Cancer Society
Shannon Harper – American Heart Association
Susan Williams – Mohave County
Donna Beedle – Maricopa County
Toby Urvater – Maricopa County
Marty Eckrem – Coconino County
Don Morris – Arizonans Concerned About Smoking

Call to Order

Mr. Madonna, TRUST Commission Chairperson, called the meeting to order at 10:25 am ... welcome the TRUST members and visitors.

Mr. Madonna: Reviewed agenda items.

- ▶ Announced that the Attorney's General Office will not present on the Open Meeting Law and the Conflicts/Disclosure of Interest Statement will be covered in the May 8th, TRUST Commission meeting.

Approval of Minutes

Mr. Madonna: Announced that January meeting minutes cannot be approved with a quorum. Mr. Madonna asked the members who are present, if there are any corrections or comments regarding January minutes.

Members: No comment.

Chairman's Report

Mr. Madonna: Addressed members.

- ▶ ASU Downtown Center for May meeting.
- ▶ Explained the guidelines, procedure regarding public commentary related to the "Speaker's Slip". The public commentary section is limited to five minutes at the end of the meeting and that time is divided up between the number of individuals wishing to speak. The slips are given to Teresa Koehler. Teresa is the coordinator and timekeeper for the public comment.

Tele-Conferencing connection made: Dr. Kaback and Dr. Miller join the meeting. Mr. Madonna announces that a quorum is present.

Approval of Minutes

Mr. Madonna: Asked for a motion to approve the minutes of the January meeting as distributed.

Dr. Miller: So moved.

Ms. Bailey: Second.

Mr. Madonna: Asked if there are any discussions, questions, or corrections.

Mr. Pfeifer: Requested that a correction (Cohrs) be made on page 1 of 9.

Mr. Madonna: Asked if there were any other question, comments, or changes to the minutes as distributed. If not, all those in favor of accepting the minutes say, “Aye”. All say, “Aye”. Minutes for the January meeting approved.

Chairman’s Report

Mr. Madonna: Reviewed previous information.

- ▶ Announced May 10 meeting
- ▶ Announced that the May 10 meeting will be held at the Native American Community Health Center.
- ▶ Announced July 12 meeting will be back, hosted by United Healthcare

Ms. Bailey: Stated that July 12 is the World Conference.

Mr. Madonna: Stated that the July 12 meeting may need to be re-scheduled.

- ▶ Attorney General Office’s presentation cancelled.
- ▶ Update on “Early Childhood Education and Healthcare Initiative.”
 - Initiative will fund childhood education and healthcare programs through an eighty cent tobacco tax increase.
 - Initiative does not include back fill language. This means that the “price elasticity” impact or the number of people who will probably stop smoking as a result of the increase in the tobacco tax will have an impact on programs that are already funded by tobacco taxes.
 - What does this mean? This means that the estimated total impact (as reported by John Rivers, President and CEO, at the Arizona Hospital and Healthcare Organization) on programs funded by the existing taxes, not just tobacco, will be 14.5 million dollars. Since the Tobacco Education Prevention program represents roughly 23% of the first tax, the estimated decline is 3.3 million dollars a year.
- ▶ Stated that a meeting between himself, Mr. Madonna, Mr. Pfeifer, and Patricia Tarango with the Director of the Arizona Department of Health Services took place. Mr. Madonna reported that the Director was clear in stating that because of the open meeting laws and the nature of the TRUST Commission that the commission (the members) is not able to take a public position on the initiative, pro or con. In addition, the Director expressed strong support for a very strong media campaign that would give the TEPP program a lot of visibility and lastly, the Director stated that ADHS would not recommend a tobacco tax increase to the legislature.

Members’ discussion occurred. However, the discussion did not include recommendations or suggests to actions to be taken by the members.

Mr. Madonna: Announced TEPP Office Chief, Patricia Tarango

Office Chief's Report

Ms. Tarango: Announced the TEPP organizational changes.

▶ Staff Vacancies:

- Senior Health Marketing Manager (Interim Marketing Director hired.)
- Public Relations Manager
- Multicultural Health Marketing Manager
- Epidemiologist
- Health Educator
- Administrative Services Officer
- Administrative Assistant III
- Senior Project Manager

▶ Strategic Plan Update

- Statewide Tobacco Plan
 - Goal of the Plan
 - Strategic planner, facilitator
 - Participants in the Process

Mr. Madonna: Stated that he would like to go on record with two thoughts for the Commission to consider as formal recommendations. The first one is to suggest that an outside expert facilitate, assist in the development the plan. The other is that we make a recommendation that you send the money that you need to spend and that perhaps a budget need to be developed.

Ms. Tarango: Continued with presentation.

- Utilize the methods and processes from the Partnership for Prevention, Chronic Disease Planning
- Proposed time line and budget

Ms. Bailey: Recommended adding 4-8 weeks to the timeline following the “Draft to TRUST” activity to go out for comment ... to let people comment on the plan.

Ms. Tarango: Agreed that the timeline could be extended.

Mr. Pfeifer: Recommended that Ms. Tarango review the Drucker Self Assessment model.

Ms. Tarango: Agreed.

Discussion occurred regarding facilitator/project manager.

Dr. Nayeri: Moved that the Commission support having two positions both a independent project manger that will oversee the entire project, and a facilitator (independent, mutual) who will assist, and create a line item budget to include the two positions and the entire project.

Ms. Garcia: Second

Mr. Madonna: Asked if there were any other question, comments, or changes. All those in favor say, “Aye”. All say, “Aye”. Activity break announced.

Myk Redhouse – Physical Activity Break

Lunch (11:50 a.m. – 12:37 p.m.)

Ms. Tarango: Continued with Office Chief’s Report.

- ▶ Operational Plan Update
 - Model for Operational program piece
 - Integrate the Chronic Disease fund
- ▶ Chronic Disease Update
 - Pre-offers conference for RFP: 2.5 million
 - Pre-offers conference for RFGA (Grant): up to \$600,000
 - Stroke Symposium: \$10,000
- ▶ Financials Update
 - Contract renewals have begun
 - Revenues
 - Expenditures including Secondhand Smoke Campaign
- ▶ Interim Secondhand Smoke Campaign
 - Campaign rationale
 - Campaign dates (March through July 31)
 - Budget \$1 million
 - Target audiences
 - Movie Trailer: Thank you for Smoking
 - Invitation to pre-screen movie
 - Commercials: re-tag
 - Jasmine, CDC
 - Playpen, our secondhand smoke is injuring whose health, CDC
 - Germ, CDC
 - Bubbles, California
 - Phasing out Inhale Life, Print ads
 - Radio stops
 - Schedule of roll-out/timeline
 - 2006 Marketing Timeline

Discussion occurred regarding target audiences.

Dr. Nayeri: Recommend that we invite the director of ITCA or the Phoenix Area Health Service to participate in the radio ad, print ad campaigns.

Ms. Garcia: Recommended that cultural diversity language be included in RFP.

Dr. Hsu: Recommended that additional print ads for Korean (newspapers) and radio ads for Vietnamese.

Mr. Madonna: Motion to accept the recommendations of Dr. Nayeri, Ms. Garcia, and Dr. Hsu.

Ms. Bailey: Move

Dr. Nayeri: Second

Mr. Madonna: All those in favor say “Aye”. All say, “Aye”.

Unfinished Business: Chronic Disease Contracts Update

Mr. Madonna: Introduced Bob Leischow.

Mr. Leischow: Named the list of RFP criteria previous requested by Ms. Bailey and outlined the presentations of the last three Chronic Disease contract.

Mr. Leischow: Introduced Traci Bunker with Coconino County.

Ms. Bunker: Presented on the Williams Community Health Project (WCHP).

- ▶ Coconino County Mission Statement
 - Prevent, Protect, Promote, and Assure
- ▶ WCHP’s Vision
 - Integrity, honoring individual including cultural and religious diversity.
- ▶ Partners: CCHD programs, Health care providers, social/community service providers.
- ▶ Target Population within Williams
- ▶ WCHP Overview
- ▶ Why Williams?
- ▶ Service Areas
 - WCHP’s Goals and Strategies
 - Accomplishments and Challenges
- ▶ WCHP’s Future Direction

Mr. Madonna: Introduced Anna David with Maricopa County.

Ms. David: Presented on the People Together for Health (PTFH).

- ▶ PTFH – Mission, Vision, Core Values
- ▶ What is PTFH?
- ▶ Participants
- ▶ Target Age Group
- ▶ Classes
- ▶ Program Evaluation
- ▶ Demographics
- ▶ Changing lives ...Changing Behaviors
- ▶ Maintaining Health Behaviors
- ▶ What are participants saying?
- ▶ Coma Bien Para Estar Bien (Eat well, Be well)
- ▶ What is CBEB?
- ▶ Target Populations
- ▶ Program Evaluation
- ▶ Demographics
- ▶ Program Impact

Mr. Madonna: Introduced Darren Treasure with Arizona Interscholastic Association (AIA).

Mr. Treasure: Presented on the AIA Academy.

- ▶ Mission
- ▶ Objectives
- ▶ Introduction
- ▶ Overweight/obesity in US Youth
- ▶ Physical Activity
- ▶ Year 1
- ▶ Self-determination Theory
- ▶ Participants
- ▶ Results
- ▶ Average PA by Sex
- ▶ Male and Female PA by Grade
- ▶ Comparison by Physical Activity
- ▶ Results
- ▶ Program
- ▶ Pre-post Evaluations
- ▶ Year 2

Public Commentary

Mr. Madonna: Asked Teresa, do we have any public comments or questions?

Ms. Koehler: Replied, “No, sir.”

Meeting Evaluation and Agenda Planning

Members – evaluate and review meeting format.

Mr. Pfeifer: Stated that term limits need to be looked at.

Mr. Madonna: Requested that Ms. Bailey chair the Nominating Committee.

Ms. Bailey: Agreed

Mr. Madonna – Announced March meeting to be hosted by Native American Community Health Center and the use of a catering company for lunch.

Mr. Madonna – I will accept the **motion to adjourn** at 3:35 pm. Motion carried.

March 8, TRUST Meeting Items

▶ **March meeting items that need a response at the May meeting:**

1. Patricia to extend timeline 4-8 weeks for review and comments.
2. Patricia to review the Drucker Self Assessment Model.
3. Patricia to include project manager and facilitator to develop and manage the plan.
4. Patricia to develop a line item budget for the plan.
5. Teresa use larger font on the revenues' and expenditures' charts.
6. Patricia provide current list of total \$\$ not used, previous years.
7. Patricia to add additional radio ads for Native American population; invite the director of ITCA or the Phoenix Area Health Service to participate in the radio ad, print ad campaigns.
8. Patricia to add additional print ads for Korean (newspapers) and radio ads for Vietnamese.
9. Teresa check on wireless mic.

▶ **March 8, 2006 ... new agenda items for May meeting:**

1. Discuss re-scheduling the July 12 meeting because of the World Conference.
2. Attorney General Office's presentation
3. Dr. Nayeri and Linda Bailey nominating committee activities.
4. Strategic Plan Update
5. Finance Update - \$\$ from previous years
6. RFP for Chronic Disease program – who are the candidates.

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Patricia Tarango
Office Chief
Office of Tobacco Education and Prevention Program
Arizona Department of Health Services

Tobacco Revenue, Use Spending and Tracking Commission
Office of Tobacco Education and Prevention Program (TEPP)

May 10, 2006

Native American Community Health Center
3008 North 3rd Street
Phoenix, Arizona 85012

MINUTES

- Members Present: Matthew Madonna – Chairman
Linda Bailey
Dr. Wil Counts
Rosa Garcia (by phone)
Dr. Shelly Hall
Dr. Keith Kaback (by phone)
Dr. Hugh Miller (by phone)
Dr. Babak Nayeri
Bill Pfeifer
- Members Absent: Benton Davis
Dr. Kelly Hsu
Librado M. Ramirez
Dana Russell
Bertha Sepulveda
- ADHS Staff: Patricia Tarango – Office Chief, TEPP
Emma Viera-Negron – Senior Epidemiology Manager, TEPP
Vatsal Chikani – Epidemiologist, TEPP
Byron Homer – Administrative Service Officer III, TEPP
Jean-Robert Jeoffroy – Community Outreach Coordinator, TEPP
Teresa Koehler – Administrative Assistant III, TEPP
- Presenters: Patricia Tarango – Office Chief, TEPP
Kevin Ray – Assistant Attorney General, Attorney General’s Office
Charles Easaw – Senior Legal Assistant, Attorney General’s Office
- Public Attendees: Michele Walsh - TEPP/University of Arizona
Donna Beedle – Maricopa County
Toby Urvater – Maricopa County
Susan McCraw Helms – Salt River Pima Maricopa Indian Community

Call to Order

Tele-conferencing connection made: Rosa Garcia, Dr. Kaback, and Dr. Miller join the meeting.

Mr. Madonna, TRUST Commission Chairperson, called the meeting to order at 10:10 am ... welcome the TRUST members and visitors. Mr. Madonna announces that a quorum is present.

Mr. Madonna: Reviewed agenda items to include changes. Explained the guidelines, procedure regarding public commentary related to the “Speaker’s Slip”. The public commentary section is limited to five minutes at the end of the meeting and that time is divided up between the number of individuals wishing to speak. The slips are given to Teresa Koehler. Teresa is the coordinator and timekeeper for the public comment.

Unfinished Business: Open Meeting Law and Conflict of Interest

Mr. Madonna: Introduced Kevin Ray, Assistant Attorney General, AGO.

Mr. Ray: Introduction to Open Meeting Law. Introduced Charles Easaw, Senior Legal Assistant, to present on the Open Meeting Law.

Mr. Easaw: Presented on Open Meeting Law

- ▶ Legislative Intent: always operate your meetings in favor of “Openness.” If you are unsure of whether you should or should not, the rule is to not unless you are in a public meeting.
- ▶ The Golden Rules of Open Meeting Law
- ▶ Public Bodies
- ▶ Meeting [A.R.S. §38-431 (4)]: a meeting is defined as a gathering in person or through technological devices of a quorum of members of a public body at which they discuss, propose, or take legal action, including any deliberations by a quorum with respect to such action.
- ▶ Notice of Public Meetings: post at least, twenty-four hours before, to include date, time, place of the meeting and must include an agenda or how to obtain a copy of the agenda.
- ▶ Agenda: must list the specific matters to be discussed, decided, or considered at the meeting. The public body may only discuss, deliberate, or take legal action on matters listed on the agenda and other matters reasonably related to a specific item on the agenda.
- ▶ Minutes: must be taken of all public meetings and public sessions, except that of subcommittees and advisory committees. Minutes shall include date, time, and place of the meeting; record members present or absent; general description of the matters considered, even if no formal action was taken.; and a description of all legal action taken.
- ▶ Call to the Public: may make an open call to the public. At the conclusion of the call to the public, the members may respond to criticism, ask staff to review a matter, or ask that the matter be put on a future agenda. The members shall not discuss or take

legal action regarding matters raised during an open call to the public unless the matters were properly noticed for discussion or legal action.

- ▶ Executive Sessions: is a closed door session of the public body. The public may not participate in executive sessions. Executive session is memorialized in minutes, is confidential, and with limited exceptions, may not be disclosed to anyone. May only be utilized for seven specific statutory purposes.
- ▶ Splintering the Quorum: no splintering the quorum is allowed. Splintering the quorum is a separate or serial discussion by a quorum of the public body in order to circumvent public discussion.
- ▶ Emails: use of e-mail among a quorum of a public body is subject to the same restrictions that apply to all other forms of communication among a quorum. Example: Proposing legal action by itself, by one of you and you send an email to all the others members, without a response, is enough to constitute a potential violation of the Open Meeting Law. “Taking legal action” is defined a collective decision by the body to do something. This can be a discussion, deliberation of or a proposal to a collective action of the body.
- ▶ Be Aware of Risks in E-mail Use
- ▶ Advisory Note: To ensure compliance with the Open Meeting Law you may include the following statement to the end of your email ... *Recipients of this message should not forward it to other members and board members should not reply to this message.*
- ▶ Consequences of Violations of the Open Meeting Law
- ▶ Conclusion
- ▶ Questions and Answers
- ▶ Executive Session Notice: The agenda would include a statement that reads, “As needed, the body may go into Executive Session, pursuant to A.R.S. Section 38-431.03 (A) (3), to consider the retention of existing Commission members and/or to consider nomination of new Commission members.” Another example would be to receive legal advice from attorney on Open Meeting Law issues.

Mr. Ray: Discussed “Conflict of Interest”

- ▶ Overview
- ▶ Legal Standards
- ▶ Statement of Interest form

Approval of Minutes

Mr. Madonna: Asked for a motion to approve the minutes of the March meeting as distributed.

Dr. Nayeri: Motion

Dr. Counts: Second

Mr. Madonna: Asked if there are any discussions, questions, or corrections.

Rosa Garcia: Page 2, we are having the meeting May 10 instead of May 8, 2006.

Mr. Madonna: Any other corrections?

Linda Bailey: Page 8; remove Dr. Nayeri from item 3.

Mr. Madonna: Asked if there were any other question, comments, or changes to the minutes as distributed. If not, all those in favor of accepting the minutes say, "Aye". All say, "Aye". Minutes for the May meeting approved.

Chairman's Report

Mr. Madonna: Requested that Mr. Pfeifer provide the Commission with an update on the Early Childhood Education and Smoke Free Arizona.

Mr. Pfeifer: Reported that there is nothing new with the exception that both are continuing on with the process.

Physical Activity Break – cancelled.

Lunch (11:45 a.m. – 12:20 p.m.)

Chairman's Report, continued.

Mr. Madonna: Announced that Bertha Sepulveda has resigned from the Commission.

Mr. Madonna: Suggested that Bertha's unexpired term be filled rather than abolished.

All Members: Agreed

Mr. Madonna: Reminded members that sending a substitute participate are not allowed by the by-laws, only elected members can participate.

Mr. Madonna: Clarified that the TEPP program will not provide funding to a National Conference unless the Conference is mandatory and asked for member discussion.

All Members: Agreed

Mr. Madonna: Announce that the nominating committee chair would speak on new nominations.

Ms. Bailey: Provided overview of members whose terms will be expiring this year.

- ▶ Five to expire – three year terms
- ▶ Use Executive Session (one hour at next meeting)
- ▶ Re-nominate
- ▶ New candidates

Mr. Madonna: Suggested that all new candidates be presented to the Director of Arizona Department of Health Services prior to the Commission voting or taking action.

Mr. Madonna: Motioned that the members whose terms are due to expire stay on the Commission until replacement is appointed and/or until the nominating committee's work is complete.

Dr. Counts: Second

Mr. Madonna: All those in favor of accepting say, "Aye". All say, "Aye". Approved.

Discussion regarding the nominating process occurred.

Mr. Madonna: Announced that members need to discuss telephone communication.

Ms. Garcia: Expressed that for those who live outside of the Phoenix area, the option is help.

Dr. Kaback: Stated that he agreed with Ms. Garcia.

Ms. Tarango: Stated that a 72 hour notice prior to the Commission meeting be given to TEPP staff by Commission members who are requesting that telephone conferencing services be provided.

Dr. Nayeri: Suggested that a limited number of face to face meetings and a certain number of telephone communications.

Ms. Bailey: Suggested that two of the six meeting be mandatory for all members to physically attend and that the other four meetings be optional.

Discussion of meeting format occurred.

Mr. Madonna: Announced that a consensus has been reached regarding the yearly face to face meetings. There will be two. The first will be in March and the other will be in September.

Mr. Madonna: Asked for next meeting location.

Ms. Tarango: Suggested ASU Downtown

Dr. Nayeri: Suggested United HealthCare or Native American Health Community Center

Discussion of meeting format occurred.

Mr. Madonna: Introduced Patricia Tarango, Office Chief

Office Chief's Report

Ms. Tarango: Announced TEPP organizational changes.

- ▶ TEPP Staff Update
 - a. Vacancies:
 - Senior Health Marketing Manager (Interim Marketing Director hired.)
 - Public Relations Manager
 - Multicultural Health Marketing Manager
 - Senior Program Manager
 - Statewide Program Coordinator
 - Health Educator
 - Administrative Assistant III
 - Filled
 - Administrative Services Officer III – Byron Homer
 - Epidemiologist – Vatsal Chikani
- ▶ CDC Activities
 - TEPP April 2006 Site Visit
 - ADHS May 2006 Site Visit
 - Regional Meeting
- ▶ Statewide Plan
 - Proposed Budget
 - Proposed Scope of Work ... discussion occurred

Mr. Madonna: Summarized the following ...

- A ten or twenty year plan with specific targets for prevention and cessation.
- Activities outlined in community, education, media, statewide, local that are all going to be supporting the accomplishments of the two major goals for cessation and prevention.
- Reduce the number of smokers to X number and identify some kind of indicator to track the change among non-users.
- To involve various other institutions, individuals, CBO, local health departments, cancer centers, tribes, doctors, hospitals, etc. to participate.
- Some will facilitate in bring them together and see what the target are, and then developing a five year plan out of which comes the annual plans, ten year plan of activities with specific, measurable, realistic, and obtainable goals that will support getting to those targets in the end.
- The people who are invited to participate are challenged not only to come to the table and to discuss and develop the plans but to actually buy into and take a piece of the responsibility for making those things happen.

Ms. Bailey: Mentioned that some of these issues can up during the review process of the TEPP Strategic (Office) Plan and express the idea that returning to the original draft would help. In addition, she expressed the belief that having meeting around the state would help facilitate developing the partnerships that will be needed to have a successful Statewide Plan.

Mr. Madonna: Agreed that traveling to outside community and having public meeting would assist in the development and implementation of the Statewide plan.

Ms. Bailey: Suggested posting the draft plan to website for review and comment. This would allow partners to assist in the development of the plan.

Ms. Garcia: Agreed

Ms. Tarango: continued

- ▶ Statewide Plan, continued
 - CDC Resources
- ▶ Operational Plan Update
 - Identifying activities and developing timelines for the goals and objectives with the strategies.
 - Develop training and technical assistance.

Members: Suggested adding additional topics to Tobacco 101

- ▶ Tobacco and Politics, 2010/2020, Federal/State Relationships, Networking with other States, and Tobacco and the Law.

Ms. Tarango: continued

- ▶ Chronic Disease Update
 - Request for Grant Application
 - Request for Proposal
 - Acute Stroke Care Plan for Arizona – Symposium May 25, 2006
- ▶ Financial Update
 - Revenues, Expenditures
 - Previous Dollars
 - 2007 Projected Budget
- ▶ Interim Secondhand Smoke Campaign Update
 - Launch Summary
 - New Ads
 - Bubbles, Jasmine, Playpen, Stop Smoking
 - Editorial Statement
 - Added Value Statement
- ▶ Biennial Report
 - Due Date ... November 15, 2006
 - Draft ... Table of Content
 - TRUST ... input discussion

Public Commentary

Mr. Madonna: Asked Teresa, do we have any public comments or questions?

Ms. Koehler: Replied, “Yes.”

Mr. Madonna: Introduced Michele Walsh.

Ms. Walsh: Spoke about the Western States (10) Tobacco Evaluation Consortium.

Mr. Madonna: Introduced Donna Beedle.

Ms. Beedle: Announce that Maricopa County Department of Public Health will submit a nomination to the Commission.

Mr. Madonna: Introduced Susan McCraw Helms.

Ms. McCraw Helms: Spoke about the Statewide Plan specifically regarding local project, the prevention program.

Meeting Evaluation and Agenda Planning

Mr. Madonna – I will accept the **motion to adjourn** at 3:35 pm. Motion carried.

TRUST Meeting Items

▶ **May 10 meeting items that need to be addressed by, for the July meeting:**

1. Teresa ... mail AGO's handout to those members who were absent.
2. Patricia ... call Kevin Ray to request that he draft some language that will be referenced on future agendas to cover the Executive Session notice as needed for nominating Commission members.
3. Patricia, Kevin ... setup a meeting with Linda Bailey and Matt Madonna to discuss Executive Sessions. (How to post to the agenda item that an Executive Session will occur via telephone, email for the purpose of nominating new members.)
4. Teresa ... to add "Executive Session" notice to agenda to cover personnel matters, specifically appointees and public officers.
5. Teresa ... to locate and provide the Statement of Interest form for TRUST members to complete and file with Department.
6. Teresa ... to add advisory note: To ensure compliance with the Open Meeting Law you may include the following statement to the end of your email ... *Recipients of this message should not forward it to other members and board members should not reply to this message.*
7. Teresa ... to email members regarding March and September (starting at 8:00) meeting dates/times include meeting location.
8. Patricia ... request extension for TRUST Annual Report currently due July 2006
9. Teresa ... to send out the draft TRUST Annual Report as a public document (post to web) for review and comment by members. Draft post by June 15. Comments back by June 30.
10. Patricia and Matt ... conference call with CDC regarding facilitator.
11. Patricia ... to talk to Linda regarding funding (CDC, NCI) for facilitator
12. Emma ... to add Tobacco and Politics, 2010/2020, Federal/State Relationships, Networking with other States, and Tobacco and the Law.
13. Emma ... to talk to Michele Walsh regarding data on tax dollars. Why is there an increase in buying? What is the increase in stamp purchases? Packs per smoker?
14. Emma ... update on Biennial Report, more detail in the Table of Content, present more focus on the overall program, not so much on evaluation; include result of GASO, Secondhand Smoke, and Through with Chew. Draft due in September
15. Teresa ... to contact DOR to present to TEPP
16. Dr. Nayeri ... to contact Dr. Miller to join Meeting Committee

▶ **May 10, 2006 ... new agenda items for July meeting:**

1. Chairperson's question to the members.
2. Add a new standing item to the agenda for the "Nominating Committee" to stay on the agenda until all expired terms are filled (allow one hour).
3. Statement of Interest form

4. Add Emma Viera to discuss Operational Plan and Biennial Report
5. Add an item for the Meeting Committee
6. Revise by-law to include attendance requirement, unexcused absents
7. TRUST Annual Report
8. Executive Session Update
9. Chronic Disease - funding

▶ **Meeting Committee: Mr. Madonna, Ms. Tarango, Dr. Nayeri, and Dr. Miller**

- Develop TRUST Commission meeting guidelines
- Logistics ... telephone conferencing and participation
- Six meetings: two meeting face to face (spring and fall) and four optional
- The two meeting to be specific ... one at the same time as CTFA, other in March
- Members give seventy-two hour notice to TEPP if requesting telephone conferencing
- Meeting location, moving the meetings to different locations
- Tighten up agenda, more action items, half day meeting (full morning or afternoon).

The TRUST Commission is a public meeting. In compliance with the State's open meetings laws, the recorded minutes for the May 2006 TRUST Commission meeting are available to the public three working days after the meeting. Please contact the TRUST Coordinator at the Office of Tobacco Education and Prevention Program, 602-364-0824, to make arrangements to hear the recorder minutes.

Patricia Tarango
Office Chief
Office of Tobacco Education and Prevention Program
Arizona Department of Health Services

Chairperson opening question to members ...

Question: Name one thing that you would like to see that would improve, enhance, or make the TRUST meeting and your participation in them more meaningful and concrete contributions. How can we make the meetings better?

- Mr. Pfeifer would like to see more action items for the Commission. He recognizes that although updates are necessary to keep members informed, he believes that the Commission should provide input; it is their purpose. He suggests that the agenda be re-structured to include actions for the Commission, as well as the updates to keep them informed.
- Dr. Hall would like the Commission to visit other locations in Arizona to see first hand the rural communities' programs.
- Dr. Kaback doesn't want to feel like he is just receiving information, updates. He would like more action involved, would like Commission to divide up some of the issues and assign those issues to sub-group(s) who would then be allowed to concentrate on specific detail and become more expert in and then, report back to the Commission to help guide the Commission in a decision.
- Dr. Miller would like better telephone communications support; he sits on other boards that do not have these problems. He believes that the Commission has struggled because of member turnover. He has no solution for that. He believes that the high turnover has created the need for more meetings without much forward momentum, much productivity. He doesn't feel like the Commission has accomplished that much in the last six months.
- Rosa Garcia frustrated because she can not make it to Phoenix as often as she would like. She believes that face to face is a more effective way to communicate with the other members. She would like to see the meetings at different locations, areas so that the Commission can get to know the programs better.
- Patricia Tarango ... to Mr. Pfeifer's point, she has items on the agenda today that she is hoping to get some input, discussion, and direction from the Commission on. She is looking forward to being able to utilize the skills and expertise that the Commission has.
- Mr. Madonna frustration is participation; it is not just turnover as Dr. Miller mentioned. Would like to see a firmer commitment from all the members to participate.
- Dr. Nayeri believes that we have made progress and believes that we continue to make progress. We participated in the kick off the Secondhand Smoke Campaign. However, improvement is good. I agree with the other members that more action items are needed.
- Linda Bailey believes that additional action items are a great idea and would like to know about the items twenty four to fourth eight hours before the meeting. She thinks the idea of feeling that we are here for meaningful work in some way is connected with participation, attendance, a willingness to go out of the way to participate, and to take time for the schedule. She believes that making the meetings more meaningful will help us with participation.