Mr. Bain Farris, Chairman called the regular meeting of the Tobacco Use Prevention and Cessation Executive Board to order at 1:40 p.m., EST, in Rice Auditorium of the Indiana State Department of Health (ISDH) Building.

The following Executive Board members were present for all or part of the meeting:

Mary Deprez, for Dr. Greg Wilson, Vice Chairman (Ex-Officio)
Karla Sneegas, MPH, Executive Director
Alan Snell, MD
Michael Blood, MD
Peggy Voelz
Frank Kenny
Stephen Jay, MD
Richard Huber, MD
Robert Keen, PhD
James Jones
Pamela Peterson-Hines
Robbie Barkley
Phyllis Lewis for Suellen Reed, EdD (Ex-Officio)
John Viernes for Katie Humphreys (Ex-Officio)

The following Advisory Board members were present for all or part of the meeting:

Arden Christen, DDS
Kay Wheeler
Diana Swanson, NP
Cecilia Bordador
Olga Villa Parra

The following Executive and Advisory Board members were not in attendance:
Patricia Hart
J. Michael Meyer
Steve Simpson, M.D.
Mohammad Torabi, Ph.D.
Alice Weathers
Steve Carter
Heather McCarthy (Advisory Board)
Bennett Desadier, MD (Advisory Board)
Steve Montgomery (Advisory Board)
Nadine McDowell (Advisory Board)
Robert Arnold (Advisory Board)
Diane Clements (Advisory Board)
Kate Taylor (Advisory Board)
Steven Guthrie (Advisory Board)
Kiki Luu (Advisory Board)

Agency staff in attendance:
J.D. Lux, Deputy Director & General Counsel
Phil Lehmkuhler, Director of Contract Administration
Becky Haywood, Administrative Assistant

Others in attendance:
Penny Davis, Indiana State Excise Police
Steve Anderson, Indiana State Excise Police
Louise Polansky, Department of Mental Health
Darla Shields, MZD Advertising
Harry Davis, MZD Advertising
Sharon Shotts, MZD Advertising
Dr. Rick Markoff, STAR Alliance
Mitz Hurst, Martin University
Phyllis A. Carr, Martin University
Angela Holloway, Indiana University
Terry Zollinger, Indiana University
Robert Saywell, Indiana University
Becky Tuttle, Marion Co. Health Dept.
Sandy Cummings, Marion Co. Health Dept
Grant Monohan, Indiana Retail Council
Shirley Lindsey, Bloomington Hospital
Joe Hunt, ISDH
Mary Ann Hurrle, ISDH
Mr. Farris called the meeting to order and called for approval of the minutes of the April meeting. A motion to approve the minutes was made by Dr. Steven Jay, and seconded by Dr. Michael Blood. Minutes were approved.

Karla Sneegas introduced Dr. Tom Houston of the American Medical Association. Dr. Houston has been in preventative medicine and tobacco control since 1990. Currently he is the director of the SmokeLess States Project at the American Medical Association. Last year he co-chaired the largest tobacco meeting in history, the 11th World Tobacco Conference on Health, with approximately 5,000 in attendance.

Dr. Houston said he appreciated the invitation to come and speak to the Board. He restated that the World Tobacco Conference was the largest tobacco control meeting ever, with 170 countries represented. Scholarships were disseminated to 44 different countries. He told the Board they had great resources in Ms. Sneegas (who put together skill building workshops for the conference), Dr. Christen and Dr. Jay who all played roles in the conference.

Dr. Houston provided an overview of the most effective evidence based research available for tobacco prevention and control. Community involvement and where the Indiana board has decided to put the bulk of the dollars is a good choice. Look at your environment, do assessments and figure out innovative ways to do prevention and cessation. Two of the most effective interventions are those that:

1. Raise the price of tobacco
2. Reduce exposure to environmental tobacco smoke. Both of these interventions increase cessation rates and reduce youth initiation.

Changing social norms is important. Community education by itself and general prevention seems to be less effective. Programs can work if they’re based on sound science. The direction the Tobacco Use Prevention and Cessation Executive Board is taking is really on the right track.

Dr. Steven Jay, chairman of the Evaluation Committee Presented an evaluation committee report. The evaluation committee moved that the Board approve a short term contract, not to exceed $25,000, with the Bowen Research Center to assist in establishing Board goals and objectives; identifying sources of baseline data for monitoring and evaluating objectives; identifying relevant reports and literature for evaluation planning; and providing instructions on evaluation/assessments activities to community programs applying for funding. A motion to approve was made by Dr. Jay, and seconded by Dr. Michael Blood. Motion passed. Mr. Farris noted that the purpose for this contract is assistance to the staff. Dr. Terry Zollinger presented a resource book from the Bowen Center. A motion to approve the five-year program objectives as presented at the May 17th meeting was made Dr. Jay, seconded by Dr. Blood. Motion passed.

Peggy Voelz, chairperson for the Long Range Planning Committee reviewed the Indiana Best Practice Model for Community Based Programs. She stated that the definition for communities could be local, minority, state, regional and pilot partnerships. School based work groups could come together to implement comprehensive school efforts. In order to have effective community programs the board needs to get many people in the community involved. Community action presentations, media advocacy, community strategies, interactive strategies and education awareness are some of the strategies to use in community-based programs.

The long range planning committee recommends that the Board approve the concept and philosophy establishing an infrastructure of local comprehensive tobacco prevention and cessation programs that reach all counties in Indiana. The motion to approve this recommendation was made by Ms. Voelz, and seconded by Jim Jones. Motion passed.
Bobby Keen, chairman of the Review Committee asked that the board review the bullet point items. Mr. Keen wants to make sure the board is ok with the concept. The board has to have long-range objectives and short-term objectives. The other piece that has to be in place is the budget. The board needs to take those pieces and establish the criteria ahead of time. Material outlines efforts, we will be bringing in different experts from time to time for different evaluations. There may be outside consultants. A motion to approve was made by Mr. Keen and seconded Dr. Snell. Motion approved.

Ms. Sneegas provided an explanation of the proposed annual budget. She stated that CDC’s best practices have been modeled into Indiana. There are five areas to discuss. Information to prepare this budget was based on effective practices from a number of state programs that have shown success. The proposed budget was based on $32.5 Million annually. This was based on new appropriations made by the General Assembly for the next biennium combined with the original $35 Million appropriation. The commitment was to keep as much as possible in the community based programs. The Long Range Planning committee has worked at defining community based, local, state, school and cessation resources

The budget points include:
STATEWIDE MEDIA CAMPAIGN - $7,000,000 / 20%
ENFORCEMENT OF YOUTH ACCESS - $2,100,000 / 6%
COMMUNITY BASED PROGRAMS - $20,650,000 / 59%
  1. Local Community Based Partnerships - $7,500,000
  2. Minority Based Partnerships - $2,500,000
  3. State, Regional and Pilot Partnerships - $7,500,000
      • Training
      • Technical Assistance
      • Statewide Quit Line
      • Clearinghouse for Materials
      • School Linked Efforts
      • Pilot Programs and Projects
  4. Contingency Fund - $3,150,000
EVALUATION - $3,500,000 / 10%
ADMINISTRATION / MANAGEMENT - $1,750,000 / 5%

Board member questions in reference to the budget included:
Mr. Kenny – Does the administrative cost involve staff? (Yes, it is based on the amounts recommended by the CDC.)

Mr. Farris stated that counties might go together and apply for funding.

Ms. Sneegas stated that the staff would be doing training for communities to prepare them for applying.

Dr. Jay – is $32,500 for 1 year? (Yes, this is an annual proposed budget figure.)

Dr. Blood Does the 7.5 Million for local programs reach all 92 counties? (Yes).

Mr. Keen – Why is $3.2 set aside for evaluation?

Mr. Farris explained that the projected budget for evaluation came from CDC guidelines. The cost of evaluation could decrease with time.

Dr. Snell said that evaluation is a key component.

Dr. Houston pointed out that you have a lot of components that you’ll need to evaluate in the beginning. You may need to bring in outside consultants.

Ms. Parra – would hope that as the board learns they realize it costs a lot to learn. We need data.

Ms. Sneegas discussed the Proposed community-based program funding formula. The proposed model was based on the Oregon funding model Staff had held conference calls with Dearell Neimeyer, who has started several programs, including the original California program. Mr. Jones stated that counties may collaborate, but how are they going to come together? Mr. Jones said we need to assure infrastructure. Dr. Jay said it would seem logical to have a working relationship with entities that are likely to be present at the county level. Dr. Jay asked what our criteria was for determining who would manage the program at a local level? Ms. Sneegas said the board is looking for one fiscal person (entity) who would oversee both financial and program administration. The board would encourage many grants and subcontracts within the community. The Tobacco Prevention and Cessation Agency needs to talk to the Indiana Department of Administration about required process. Staff is reviewing the Oregon model and developing a draft application for Indiana. Mr. Farris said the board is tailoring other areas to meet Indiana. Mr. Keen discussed the contingency fund. Mr. Farris said the contingency fund helps to support communities for needs that we might not have anticipated. Dr. Jay said the board knows what it takes to pull their act together and evaluate. We would be substituting the knowns for the unknowns. The board can change things as needed. Mr. Farris said he would take the full blame or credit for the contingency fund. Mr. Jones said he would assume that everybody is lined up waiting for
money. What about the 2 year? Dr. Snell said some money is going to be used for planning and some communities will be able to jump right in. He said what the board wants to avoid is where you have lots of organizations competing for dollars. Dr. Blood agreed with Mr. Keen’s request but realizes we have no idea what evaluation costs will be.

A motion to approve a two-year budget based on annual funding of $32.5 million a year for the upcoming budget biennium; July 1, 2001 – June 30, 2002 and July 1, 2002 – June 30, 2003 was made by Dr. Blood and seconded by Ms. Peterson-Hines. Motion approved.

Mr. Farris discussed the proposed meeting dates for the Executive Board for the remainder of 2001. The meeting dates will be July 19th, September 20th and November 15th. All meetings will be held at the ISTA Building, 150 W. Market St., 2nd Floor Conference Room, Indianapolis, Indiana.

A motion to appropriate $10,000 to the Indiana State Department of Health for the Board to serve as a corporate sponsor of the 2001 Black and Minority Health Fair scheduled for July 19th – 22nd, during the Indiana Black Expo’s Summer Celebration was made by Mr. Keen and seconded by Mr. Jones. Motion approved.

J. D. Lux discussed the Indiana State Fair and a joint effort to sponsor an exhibit with the Indiana State Department of Health. The board wants to participate but we are not yet ready to have our own booth.

A motion to appropriate $5,000 to the Indiana State Department of Health for the Board to co-sponsor their booth at the Indiana State Fair in August 2001 was made by Dr. Blood and seconded by Mr. Keen. Motion approved.

A motion to authorize the Executive Director, upon gaining approval of the Chairman of the Board and subject to rules of the Department of Administration and the State Budget Agency, to expend funds of up to $10,000, consistent with the Board’s annual budget allocations and Long Range Plan was made by Mr. Jones and seconded by Mr. Keen. Motion approved.

Ms. Sneegas updated the Board on posted staff positions and the Media BAA. A copy could be obtained on the Department of Administration website or from staff. The proposal due date for the media BAA was
delayed to June 4th because of the large number of questions that were received by Department of Administration. Ms. Sneegas asked the board and the advisory board to check the roster to make sure all information was current.

Mr. Lux gave a report on the Tobacco Prevention and Cessation Agency’s lease. The agency will be moving next week to Suite 406, ISTA Center, 150 W. Market St. He said the agency was able to do a special procurement to purchase used furniture from Deferred Compensation, who was formerly in the office, at a third of the original cost with the furniture being only 2 years old. He also gave another thanks to Dr. Wilson and Mary Deprez at the Indiana State Department of Health, for all they had done to house the agency and the board since the board began meeting.

Dr. Jay stated that he was sorry the tax increase did not pass. Ms. Sneegas thanked all who helped on media and education on tobacco taxes. Dr. Snell encouraged the Board to continue educating on the importance of higher tobacco taxes.

Dr. Blood shared the “Smoke Patrol” t-shirts from the boys and girls club of Crawfordsville along with a copy of the $2.00 ticket it cost those who don’t abide by the no smoking rule on the grounds.

Mr. Farris gave a word of thanks to Tami Barrett and Dr. Wilson and their staff at the Indiana State Department of Health for all of their assistance since July 2000.

Meeting adjourned.