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ND TOBACCO PREVENTION AND CONTROL EXECUTIVE COMMITTEE MEETING MINUTES -- FINAL

10:00 a.m. to 12:00 p.m., Thursday, August 15, 2013

ND Center for Tobacco Prevention and Control Policy – Offices, 4023 State Street, Bismarck, ND

PARTICIPANTS: Executive Committee members: Ms. Theresa Will – chair, Dr. Beth Hughes, Dr. Kermit Lidstrom. **Executive Director:** Ms. Jeanne Prom; **Accountant:** Tasha Gerding; **Community Programs Manager:** Kelli Ulberg; **Statewide Programs Manager:** Ms. Barbara Andrist; **Assistant Attorney General:** Dave Schaibley.

<u>AGENDA ITEMS</u>	<u>DISCUSSION</u>	<u>OUTCOME/ACTION</u>
Call to order, determination of quorum		Chair Ms. Theresa Will called the meeting to order at 10:05 a.m. with all members and a quorum present.
Adoption of agenda		Dr. Beth Hughes moved to approve the agenda as distributed. Dr. Kermit Lidstrom seconded. Motion carried.
Approval of minutes from July 2, 2013 meeting		Dr. Hughes moved to approve the July 2, 2013 minutes as distributed. Dr. Lidstrom seconded. Motion carried.
Unfinished business		
Grants & contracts – requirements document	Ms. Kelli Ulberg explained her conversation and email with Mr. Don Shields, administrator of Grand Forks Public Health Department. Mr. Shields expressed his “extreme frustration” in having to sign a biennial requirements document as part of his agency’s contracts with the Center, in addition to having to sign a requirements document for his agency’s contracts with	Ms. Jeanne Prom had requested Assistant Attorney General Dave Schaibley explain to staff and the Executive Committee the need for the Center requirements document. Mr. Schaibley reviewed and compared the requirements documents Mr. Shields had from the Center and the Department of Health. Some of the language in the two documents is identical or comparable, but portions of the

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	<p>the Department of Health. Mr. Shields said he appreciates the Center contracts, but said signing the Center requirements document was duplication, took time away from completing the work of the contract, and thought this was a result of his feeling that the Center and the Department of Health are not getting along. Ms. Ulberg said she told Mr. Shields that it was disappointing to hear that there is distress over signing a document for our agency, given that the Center provides his agency with significant grant funding, and that the Center, as a separate agency from the Department of Health, has its own requirements document specific to this agency, and this is not because the Center and Department of Health do not get along. Mr. Shields said he would sign the Center requirements document but requested that Ms. Ulberg express his frustration to the Center Executive Director and Executive Committee.</p>	<p>requirements for each agency are very different, partly because the department gets federal pass-through funds that come with additional requirements. Mr. Schaibley explained how the requirements document language inserted into every individual contract and thus contracts used to be many pages long. Now, requirements are referenced in the one-page contract and actually streamline and avoid duplication in the contracting process. Mr. Schaibley said it is very important that the Center have its own agency-specific requirements document as it is an essential part of our contracts and also is an efficient way to do business.</p> <p>Dr. Lidstrom moved to direct Ms. Prom work with Mr. Schaibley on drafting a letter to Mr. Shields explaining the necessity of the Center-specific requirements document and how this is not duplication but an efficient way of doing business. Dr. Hughes seconded. Discussion: Ms. Prom and Mr. Schaibley will call Mr. Shields before sending the letter. Motion carried.</p>
<p>Grants & contracts – cost share</p>	<p>Ms. Ulberg shared the Center response regarding First District Health Unit’s audit-approved formula sharing general health unit operational costs across funding</p>	<p>Ms. Ulberg mailed the following response to First District Health Unit on July 12, 2013:</p>

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	<p>sources like Center grants. The response was requested by the grant review committee, who expressed concern about the decision to provide grant funding with the present cost share formula, as it seemed to result in paying for staff who do not oversee, assist with, or implement the local policy grant work plan. The comparisons of costs noted in the response included comparisons to other health units including health units of comparable size. The Executive Committee is funding First District Health Unit budget with this cost share formula, but has continuing concerns about the approach taken by this one health unit. Staff do not anticipate taking any further action on this issue this grant year.</p>	<p>“Because your audit approved formula is so different than all other local public health unit funding formulas, it is difficult for the Advisory Committee grant sub-committee to justify the exceptionally high expenses charged to this grant. For example, only half of the health units charge the grant for rent. Your rent is 71% higher than the average. Regarding utilities, only one-third of the health units charge the grant for utilities. Your utilities charged to this grant are 97% higher than the average. For another example, less than one-third of the health units charge the grant for facility expenses and audit expenses. Your facility expenses are 391% higher and your audit expenses are 255% higher. Here are a few more examples of more commonly charged items; your phone expenses are 320% higher than the average and memberships are 490% higher than the average.</p> <p>“Please consider these factors when applying for future grants.”</p> <p>The Center did not request nor did it receive any additional communication from the health unit on this concern.</p>
New business		

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<p>2013-2014 Special Initiative grants and contracts -- approval</p>	<p>Ms. Barbara Andrist reported on the process used to review Special Initiative Grant proposals. Three reviewers scored applications independently, then the group met, discussed reviews, reach consensus, and recommended grant and budget adjustments. Ms. Andrist worked with the applicants to adjust the proposal to meet recommendations. Ms. Andrist provided an overview of each proposal's goals, objectives, and major activities and expenses. As a result, Ms. Andrist recommended the following organizations be funded at the stated levels: Tobacco Free North Dakota -- \$88,440; American Lung Association in North Dakota -- \$99,598; American Nonsmokers' Rights Foundation -- \$100,000; and Public Health Law Center -- \$70,000. All grants are for FY2014, except Public Health Law Center, which is a contract for the 2013-2015 biennium.</p>	<p>Dr. Hughes moved to approve a grant with Tobacco Free North Dakota at \$88,440 for FY2014. Dr. Lidstrom seconded. Discussion: The work plan will build advocacy capacity for the State Plan, including increasing education on harms reduction fallacies and the benefits of a tobacco tax increase. The work plan activities also focus on increasing the numbers of active members and further developing their knowledge and skills related to the major issues. Roll call vote: Dr. Lidstrom – aye; Dr. Hughes – aye; Ms. Will – aye. Motion carried.</p> <p>Dr. Lidstrom moved to approve a grant with American Lung Association in North Dakota at \$99,598 for FY2014. Dr. Hughes seconded. Discussion: Work plan supports implementation of the State Plan objectives related to disparate groups (mental health, addiction treatment), tobacco-free campus policies, smoke-free multi-unit housing, maintaining the strong smoke-free state law, seeking and nurturing new interested individuals as advocates, and some work with those affected by tobacco-related chronic diseases. Roll call vote: Dr. Hughes – aye; Dr. Lidstrom – aye; Ms. Will – aye. Motion carried.</p>

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		<p>Dr. Lidstrom moved to approve a grant with American Nonsmokers' Rights Foundation at \$100,000 for FY2014. Dr. Hughes seconded. Discussion: Reviewers required the applicant to expand work to include tobacco-free policies, rather than just smoke-free policies; and to report the recipient and purpose of each technical assistance communication. The grant focuses on K-12 and college tobacco-free campuses, other outdoor policies, smoke-free multi-unit housing, and work with local public health units and reservation organizations on mutual tobacco prevention goals. The applicant will first assess needs of reservation populations by talking with the Department of Health about tobacco prevention progress in these areas. Roll call vote: Dr. Lidstrom – aye; Dr. Hughes – aye; Ms. Will – aye. Motion carried.</p> <p>Dr. Lidstrom moved to approve the continuing contract with Public Health Law Center at \$70,000 for the 2013-2015 biennium. Roll call vote: Dr. Lidstrom – aye; Dr. Hughes – aye; Ms. Will – aye. Motion carried.</p>
June 2013 fiscal reports, FY2013 Comprehensive	Ms. Prom explained the June 2013 fiscal reports, which include all expenses for the 2011-2013 biennium. The agency spent 91	Dr. Lidstrom moved to approve the June 2013 fiscal reports. Dr. Hughes seconded. Roll call

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Annual Financial Report (CAFR)	percent of it appropriation in 2011-2013. According to the Office of Management and Budget, the average expenditure of appropriations by agency is 80 percent. Ms. Prom explained that some large service contracts extend into the next biennium, thus encumbering funds that likely would not all be spent before the end of this biennium.	vote: Dr. Lidstrom – aye; Dr. Hughes – aye; Ms. Will – aye. Motion carried. Ms. Prom reported that the agency is completing FY2013 Comprehensive Annual Financial Report (CAFR).
HR update	Ms. Prom expects the Center to be fully staffed with all permanent employees by the end of this calendar year.	The Center is currently advertising for a temporary office assistant, as the previous assistant returned to college.
Health communications update	Ms. Prom provided an update. Ms. Prom will send a clip of the ad to the committee.	The newest ad exposing tobacco industry manipulation is being tested. Pending test results, the new ad may begin running in September.
Biennial independent evaluation report	Dr. Lidstrom stated that this past year has been a successful year and noted that we need to continue to mobilize around the harms of e-cigarettes this next year.	Executive Committee members should review the draft and provide comments to Ms. Prom within the next week.
Other business		
Advisory Committee appointments	Ms. Prom provided an updated. Dr. Hughes expressed her appreciation to the Executive Committee and Center staff for being great people to work with. Business with the Executive Committee will continue as usual until the Advisory Committee seats its new members and elects a	Ms. Prom reported that the Governor reappointed Dr. Hughes, and appointed Ms. Clara Sue Price, to the Advisory Committee. Appointments are final once all appointment paperwork is signed and on file at the Governor's office. The Governor has not yet appointed a physician to the committee.

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	member to succeed Ms. Will on the Executive Committee.	
Next Executive, Advisory Committee meetings	Next Executive Committee meeting is scheduled for Thursday, September 19, 2013. The next Advisory Committee meeting is scheduled for Friday, October 11, 2013.	The Executive Committee will meet in September, but not on the original date, due to schedule conflicts. The next Advisory Committee meeting date may be adjusted due to new member appointments. No new meeting dates were set.
Remuneration		Committee members should print the remuneration form from the website, complete and submit to the Center.
Adjourn		Dr. Hughes moved the meeting be adjourned. Dr. Lidstrom seconded. Ms. Will adjourned the meeting at 11:30 a.m.