Minutes

Attendees: Rep. George Till, Helen Wagner, Alex Crimmin, Amy Tucker, Amy Brewer, Bob Uerz, Tracy Dolan, Megan Sault, Rebecca Thompson, Greg MacDonald, Gary Kessler, Rhonda Williams

Meeting called to order at 3:06

Minutes: Helen recommended edits to July 20th minutes to address typos, clarify the Strategic Contribution Funds statement, and to clarify her comments about separate motions.

George move to prove as amended. Bob seconds. All in favor. Megan abstains.

Public Comment: none shared

Announcements: Helen – as indicated in June minutes – AG worked with DLC to pull out email addresses from the paper licenses to input email addresses and to create a database. DLC has hired someone to do that.

Gary – DLC has hired a new compliance office that started a month ago.

Rhonda – I applaud VT for licensing vape shops, but we can’t tell how many. Is it possible to count vape only shops? Amy T/Gary - They’re not flagged differently. Vape only shops don’t carry a different tobacco license.

Rhonda – 4 years ago we gained approval to do “Down N Dirty” campaign targeting youth that identify as country. Their prevalence was among highest among all youth groups. After 3 years of intervention, we did a year-long eval with JSI and results show that we contributed in a reduction in prevalence among youth who identify as country. Results will be used to adjust next fiscal year planning. There was a reduction in cigarettes AND chew, which were both targeted in the media messaging. There wasn’t a decrease in e-cigarettes, but not surprised at that. Great job VTCP! Down n Dirty is being used by 5 states.

Rhonda – Medicaid insured article is almost ready for review at commissioner’s office. We’re seeing encouraging results with Medicaid insured folks as well.

Rhonda – tobacco prevalence is higher among rural populations. There’s a rural information hub at U of Chicago and U of South Dakota. If you ever need rural information, this is the place to go. They recently developed a tobacco tool kit. We have 3 interventions in that toolkit: CounterBalance, Down N Dirty, and Medicaid. It was nice to be recognized.

Bob – AOE site visits have begun with schools and they’re going along very well along with collaboration with VDH for statewide campaign. Held first webinar this week.
**Budget Recommendations:** We are required to submit a budget memo to the legislature annually in October. We have received an extension in submitting that until October 15th. We need to decide today what information should be in this document. Up until last year, this memo recommended a specific dollar amount for the tobacco control program. Last year, we wanted to take the fall to examine what an effective, robust statewide program would look like and what it would cost. We pushed folks to the Annual Report which was released in January with the In reviewing draft document:

George - e cigs are a new challenge and should be more prominent  
Helen – if intent is to push to annual report, then maybe that should be more up in beginning  
Gary/George – put the budget recommendation in so they don’t have to guess.  
Gary – use language legislature and administration is using – “most vulnerable.” Highlight that we’re trying to protect most vulnerable – low income, youth, teens.  
Rhonda –2017 BRFSS prevalence number is 18% - we’ve remained at that level for the past handful of years. There’s a tobacco brief on VDH website comparing VT to nation – those who don’t have a HS diploma, those who make less than $25,000 and several other metrics is that VT most vulnerable smoke at a higher rate than same category in nation. We have even a higher responsibility to address it.  
Bob – there are areas of the state that are significantly higher than the average which is a focus of AOE. AOE has redistributed its funding to address some of those needs. VDH did too.  
Rebecca – add in how alarming e cigs use and uptake is.  
Amy T – ecigs are alarming and a preview of the future.  
Gary, George, Rebecca – go with number from last year.  
Alex – reaffirm funds need to come from MSA  
Tracy – add bullets as to what we’re doing that’s effective – less background. Governor is really looking for specific interventions and how much it costs. We’ve had success with “this” population, but these priority populations need more work…challenges we still face. Here’s how much it costs.  

General consensus: Craft it the way Tracy recommended. Allow the Chair to craft a document

Helen moves that the board vote in favor of the Chair crafting the budget memo document along the lines of discussion to include the specific monetary recommendation that was contained in the Annual Report 2017 as to the budget request as well as elements such as focus on vulnerable populations, a discussion of what we’ve been able to achieve through its investment and what it could do in those areas were it fully funded as well as including vaping products and their increased growth and the need for more funding in that area going forward. Rebecca seconds. All in favor.

**Evaluation Report Distribution Plan:**

Dr. Jones submitted a report to us this summer and Amy B has not had much time to review it and assess it. As time ran short, Amy B did suggest to Dr. Jones that he just provide us with
information and we can turn it into a fact sheet. This was an incredibly short period of time in which to provide VTERB with anything meaningful. Amy B forwarded it to Alexi for her review.

Helen – Economic arguments are well stated.

Greg – asked for ROI, and we didn’t really get it. The numbers listed might be easily construed as unbelievable. It’s all a little unclear.

Rhonda – distill it in 1 paragraph? Ask Chris to see if he can do it and maybe how many years it could be achieved.

Tracy – did he use VT data for the perinatal data?

George – Joint Fiscal was provided by George preterm baby information – prenatal care isn’t more expensive necessarily – maybe a few more tests? Not sure where this data came from.

Amy – ask Scott whether he might be an an ally in creating a fact sheet once the facts get clarified.

Rhonda – analysts at VDH had some concerns. VDH will ask for a boiled down version and will ask Dr. Jones to be able to articulate what calculations were utilized.

Annual Report Update Plan: Amy B will take the lead on updating this document. The Agencies (AOE, AG, VDH, DLC) will review and provide Amy with updated information as appropriate.

Alternative Board Function Investigations:

Alex - Scott and Alex talked in June about reconvening in September….Brian Flynn is no longer chair of VTPHA, Sally Kerschner is. We could certainly move forward with reaching out to her.

Coalition for Tobacco Free VT – meeting on Monday...looks gloomy. There is limited lobbying funds in year to come.

Other:

Amy B – Did VDH add the $25,000 budgeted by the legislature to the VTCP?

Rhonda – I asked the VDH business manager and he wasn’t sure where it was, but it’s not in the tobacco control budget. Rhonda can go back and make a request. Amy B will ask Rebecca Ryan to forward the legislative language to Rhonda to help her investigate it.

Butt Litter – Amy’s coalition (the Franklin Grand Isle Tobacco Prevention Coalition) picked up butts in 6 communities at 8 different events. With 75 volunteers, we picked up 24,626 butts weighing in at 19 pounds. They have been recycled with Tetracycle and all municipal boards received letters informing them of the results. The biggest clean up in the St. Albans Town Industrial Park where there are many manufacturing employers.

Conference tomorrow at Hilton in Burlington. Be there in person or stream live. It’s the VT Center on Behavior & Health: Tobacco Regulatory Science.

VDH is working with Dr. Higgins to apply his research and incentives on pregnant women – piloting in Rutland regional medical center – incentives up to $1100 for 30 women over 18 months. 5 different partners – all excited to move forward. If it does work in a community
setting, the next attempt will be in Brattleboro. White women are more likely to smoke during pregnancy and maybe one of the reasons VT is so high is we’re so disproportionally white? We do compare to Appalachia.

Koop conference was last week. Takeaways could be shared next time we meet.

Maternal Child Health is paying for a nationally recognized speaker to provide training for providers to help them feel confident and comfortable addressing tobacco as part of this Rutland project. It will be 3 hour training with a Florida trainer. If we can see this is successful, we might keep it in mind for the FY19 budget.

Meeting adjourned: 4:58pm