

**Minutes of the  
Tobacco Education and Research Oversight Committee (TEROC)  
Thursday, June 9, 2016**

Location:  
Residence Inn  
1121 15th Street  
Sacramento, CA 95814

**MEMBERS PRESENT:**

Dr. Michael Ong (Chair), Dr. Claradina Soto, Dr. Mark Starr, Dr. Pamela Ling,  
Dr. Robert Oldham, Dr. Wendy Max, Mr. Richard Barnes, Ms. Debra Kelley,  
Ms. Pat S. Etem and Ms. Vicki Bauman.

**MEMBERS ABSENT:** Dr. Alan Henderson (Vice-Chair), Dr. Lourdes Baézconde-  
Garbanati and Ms. Mary Baum.

**OTHERS IN ATTENDANCE:**

April Roeseler, California Department of Public Health (CDPH)/California Tobacco  
Control Program (CTCP)  
Andrea Zvonicek, CTCP  
Barbara Taylor, Department of Finance (DOF)  
Callie Hanft, American Heart Association (AHA)  
Carol Maytum, Breathe CA Emigrant Trails  
Courtney Tavares, Public  
Diana Douglas, American Lung Association (ALA)  
Diane Nguyen, California Department of Education, Coordinated School Health and  
Safety Office (CDE)  
Dr. Bart Aoki, Tobacco-Related Disease Research Program, University of California,  
Office of the President (TRDRP)  
Dr. Catrina Chambers, CTCP  
Dr. Norval Hickman, TRDRP  
Dr. Tracy Richmond-McKnight, TRDRP  
Dr. Xueying Zhang, CTCP  
Francisco Michel, CTCP  
Humberto Jurado, CTCP  
Jenny Wong, CTCP  
Jerry Katsumata, CTCP  
John Lagomarsino, CDE  
Katie Moose, California Youth Advocacy Network (CYAN)  
Kim Homer Vagadori, CYAN  
Koffi Kouassi, DOF  
Ladawn White, CYAN  
Linda Dornseif, CTCP  
Lindsey Freitas, ALA  
Margarita Garcia, CDE  
Nadine Roh, CTCP  
Richard Kwong, CTCP

Sarah Planche, CDE  
Sandra Soria, CTCP  
Tim Gibbs, American Cancer Society/Cancer Action Network (ACS/CAN)  
Tom Herman, CDE

**1. WELCOME, INTRODUCTION**

The TEROC Chair, Dr. Ong, called the meeting to order at 9:38 a.m. TEROC members and guests introduced themselves.

**2. APPROVAL OF MINUTES, CORRESPONDENCE, AND ANNOUNCEMENTS**

Ms. Kelley moved to accept the minutes without revisions, seconded by Ms. Etem. Motion passed unanimously.

The chair reviewed TEROC-related correspondence:

**Outgoing Correspondence:**

- May 6, 2016 TEROC letter to CalPERS Board of Administration urging CalPERS to adopt and implement a standard tobacco cessation benefit that is equally applied across all health plans contracting with CalPERS and that the benefit should comply with the 2015 United States Preventive Services Task Force Guidelines.
  
- May 9, 2016, TEROC letter to the Vice President recommending the “War on Cancer” not focus exclusively on biomedical research but also on the risk factors (including tobacco use) that are the major causes of cancer deaths.

**Incoming Correspondence:**

- March 14, 2016 letter from Donald Bentley, Stanford alumnus, to Dr. Michael Ong, Chair of TEROC and Dr. Sean David, Stanford University School of Medicine, inquiring whether Stanford University Provost John Etchemendy responded to TEROC's September 10, 2015 letter regarding the University's failure to become a tobacco-free campus.
  
- March 14, 2016 letter from Dr. Sean David, Stanford University School of Medicine, to Dr. Michael Ong, Chair of TEROC responding to the inquiry about whether Stanford University Provost John Etchemendy responded to TEROC's September 10, 2015 letter regarding the University's failure to become a tobacco-free campus.
  
- March 22, 2016 letter from Donald Bentley, Stanford alumnus, thanking Dr. David for responding to his inquiry regarding news reports about raising the minimum legal sales age for tobacco products.
  
- March 24, 2016 letter from Donald Bentley, Stanford alumnus, to Dr. Michael Ong, Chair of TEROC expressing his disappointment that Stanford has not responded to TEROC's letter to Stanford University Provost John

Etchemendy regarding the University's failure to become a tobacco-free campus.

**General Discussion:**

Dr. Ong reported that to date TEROC has not received a response from Provost Etchemendy. He indicated that in the past, when TEROC has written to universities and colleges, regarding smoke-free campus policies, the recipient of the letter(s) have responded in a timely manner. Dr. Ong added that TEROC could send a follow-up letter to Stanford University if the Committee wished to do so.

Ms. Etem inquired whether TRDRP or CTCP has requested information from funded projects at colleges and universities regarding their campus tobacco use policies and/or their movement towards implementing smoke-free policies.

Dr. Ong responded he did not believe either TRDRP or CTCP has requested this information from their grant applicants. However, if members feel that this is an important issue, TEROC could discuss it further. Dr. Ong added that tobacco-free campuses are a relatively recent development in California and that it may be early to require campuses to have tobacco-free policies in order to apply for funding.

Dr. Richmond-McKnight confirmed that TRDRP does not request information from grant applicants regarding their campus tobacco-free policies. She added that the principal investigators on the grant applications might not know their individual campus smoking or tobacco use policies.

Dr. Ling stated that it would be worth discussing this issue further. She indicated that including questions about campus tobacco use policies in funding applications would, at a minimum, prompt investigators to become familiar with this issue on their campuses and start a conversation.

Dr. Wendy Max added that questions about tobacco-free policies could also be added to the contracting process, which would require the university administrators to address it rather than the principal investigators.

Dr. Richmond-McKnight stated that the issue could be further discussed and that questions could be added to future grant application processes.

**3. ENVIRONMENTAL UPDATE**

TEROC discussed tobacco control issues in the media, including the following news articles and reports:

- **Governor Brown Signs Five Tobacco Bills**  
[http://www.mercurynews.com/california/ci\\_29850006/california-smoking-laws-e-cigarette-regulation-higher-age.html](http://www.mercurynews.com/california/ci_29850006/california-smoking-laws-e-cigarette-regulation-higher-age.html)
- **The Majority of Californians Support Marijuana Legalization and an Increase in the Tobacco Tax**  
[http://www.ppic.org/content/pubs/survey/S\\_516MBS.pdf](http://www.ppic.org/content/pubs/survey/S_516MBS.pdf)
- **Save Lives California Submits Signatures to Place Tobacco Tax on November Ballot**  
<http://www.kcra.com/news/measure-to-raise-california-tobacco-tax-nears-november-ballot/39570476>
- **Orange County Man Files Lawsuit after Losing Eye to an E-Cigarette Explosion**  
<http://www.ocregister.com/articles/cigarette-716541-eye-cavins.html>
- **The United States Department of Transportation (DoT) Bans E-cigarettes in Checked Bags**  
<http://time.com/money/4340511/e-cigarette-ban-checked-bags/>
- **Senator Barbara Boxer Pushes for Expediting a Study on E-cigarette Advertising**  
<http://thehill.com/regulation/letters-comments/279819-boxer-to-ftc-expedite-study-on-e-cigarette-advertising>
- **Food and Drug Administration (FDA) Adopts New Regulations to Address E-Cigarettes and Other Tobacco Products**  
<http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm499234.htm>
- **New Food and Drug Administration (FDA) Rules Do Not Regulate the Sale of Flavored Products**  
<http://www.latimes.com/science/sciencenow/la-sci-sn-electronic-cigarette-loop-hole-flavors-snap-story.html>
- **First Lawsuit against the Food and Drug Administration (FDA) Deeming Rule Filed**  
<http://thehill.com/regulation/overnights/279422-overnight-regulation>
- **UCSF Study Shows that Health Care Costs Decrease within a Year of Quitting**  
<http://ww2.kqed.org/stateofhealth/2016/05/11/ucsf-study-smokers-quit-and-health-care-costs-drop-in-next-year/>  
<http://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1002020>

- **CalPERS to Study Possible Reinvestment in Tobacco**  
<http://www.reuters.com/article/us-calpers-tobacco-idUSKCN0XF2TY>  
<https://www.calpers.ca.gov/page/newsroom/calpers-news/2016/review-tobacco-divestments>
- **Big Tobacco and Recreational Marijuana**  
<http://www.bloomberg.com/gadfly/articles/2016-04-20/marijuana-could-be-big-tobacco-s-next-pot-of-gold>
- **New Study Says Teens Have Easy Access to E-Cigarette Ads Online**  
<http://fortune.com/2016/03/07/teens-e-cigarettes-ads-online/>  
<http://archpedi.jamanetwork.com/article.aspx?articleid=2498558>
- **California Board of Equalization (BOE) Tobacco Tax Enforcement Efforts Are Effective and Properly Funded**  
<http://www.auditor.ca.gov/reports/summary/2015-119>
- **Tobacco Firms Lose British High Court Battle Over Plain Packaging**  
<http://www.theguardian.com/society/2016/may/19/tobacco-firms-lose-high-court-battle-plain-packaging-uk>

**General Discussion:**

Dr. Ong opened the floor for discussion about any environmental updates and asked Mr. Kwong, CTCP Strategic Planning and Policy Chief, to provide a summary of the new tobacco control legislation and the tobacco tax initiative.

Mr. Kwong stated that the passing the tobacco control bills was years in the making. He added that TEROC made recommendations and decision-makers listened. The new laws included raising the age of sale of tobacco products to 21, defining electronic smoking devices (ESD) as tobacco products, closing loopholes in the smoke-free workplace law, increasing licensing fees for tobacco businesses, and making public K-12 schools tobacco-free. Mr. Kwong stated the smoke-free workplace bill represented the first win on this issue, at the state level, in 20 years. Governor Brown signed the bills into law on May 4, 2016, with most laws going into effect on June 9<sup>th</sup>. Since then, CTCP has been working on the implementation of these bills.

Mr. Kwong provided a summary of the five new laws. He began the summary with the minimum age of sale law. Mr. Kwong reported that the Tobacco 21 law increased the age of sale for tobacco products, including ESDs, to 21. The law includes an exemption for active duty military personnel, for whom the age of sale for tobacco will remain 18. Under the new law, it would no longer be a crime for youth to purchase or possess tobacco. The burden of compliance is entirely on the seller and no longer on the smoker. Mr. Kwong stated that the previous age-of-sale had been in place since the 1800s. The law will change CDPH's Stop Tobacco Access to Kids Enforcement (STAKE) Act compliance activities. CTCP administers the Youth Tobacco Purchase Survey (YTPS) to assess the rate of

illegal sales of tobacco. The YTPS will now also use 18-19 year olds to try to purchase tobacco as a fair measure of compliance. In addition, the CDPH Food and Drug Branch will be working with 18-19 year olds for their decoy compliance activities. The Tobacco 21 law preempts local jurisdictions from adopting ordinances that establish legal age of sale laws that are inconsistent with state law. However, the new law gives local jurisdictions the authority to establish more restrictive purchase and possession laws. Mr. Kwong added that it is unclear how local jurisdictions would enforce the law if they chose to adopt an older age-of-sale and possession restriction. Mr. Kwong also pointed out that the Tobacco 21 law does not apply to tribal lands. Native American tribes that have compacts with the state of California that specify 18 as the legal age of sale of tobacco will continue to use that age.

Ms. Etem inquired whether tobacco retailers on tribal lands can sell tobacco to anyone or only members of their own tribe.

Mr. Kwong responded that members of one tribe can sell tobacco products to another member of the same tribe who is 18 years of age and older. However, a member of one tribe cannot sell tobacco to a member of the general public or another tribe that is younger than 21 years of age.

Ms. Etem further inquired whether it would be legal for a member of a tribe who is under 21 to buy tobacco on his or her reservation and then sell to others younger than 21 off of tribal land.

Mr. Kwong responded that it would be illegal, but it would very difficult to enforce.

Mr. Lagomarsino inquired whether the law requires clerks that sell tobacco be at least 21 years old.

Mr. Kwong responded that the state law does not specify a minimum age for clerks to sell tobacco, but that at least 80 local jurisdictions have adopted a minimum age to sell tobacco in their tobacco retailer license ordinances (TRL). Some of these ordinances state that the clerk has to be the state legal age, or specify an age, such as 18. He added that CTCP is creating educational materials that include information on minimum age for clerks who sell tobacco products.

Ms. Kelley reported that the San Diego Local Lead Agency (LLA) received a call from Phillip Morris/Altria about the minimum age to sell tobacco. She indicated that in San Diego County, there are four cities that have ordinances that require clerks to be the legal age of sale in order to sell tobacco products. Ms. Kelley stated that she expected other LLAs throughout the state would also receive similar calls. She added that tobacco control advocates in San Diego are preparing for tobacco companies to approach local city councils to push to amend the TRL ordinances that require clerks to be the legal age of sale.

Ms. Etem inquired whether tribal law applies to tribal casinos located in urban areas.

Mr. Kwong responded that it did; therefore, the new state minimum age of sale law does not apply to tribal casinos, even if located within a city.

Dr. Soto concurred that the law does not apply to tribal casinos. She added that, with funding from the Tobacco Centers for Regulatory Science, her team has been visiting stores on tribal lands to assess compliance with the recently implemented U.S. Food and Drug Administration (FDA) regulations. She reported that about 90% of these stores were in compliance, which included posting signage stating that sales to those younger than 18 years of age are prohibited. Dr. Soto added that her team has requested Institutional Review Board approval to add a question to their survey on whether tribes intend to increase the legal age of sale to 21.

Mr. Lagomarsino asked whether there is anything in the law that would prohibit use of youth decoys younger than 18 years old. Mr. Kwong responded the STAKE Act previously stipulated that youth must be 15 to 16 years of age; the new law only requires that they be younger than 21 years old. Mr. Kwong added that continuing to use 15-16 year-olds as decoys would not give an accurate assessment of illegal sales to young adults 18 to 20 years of age.

Ms. Homer Vagadori stated the new age of sale law does not apply to military personnel. She indicated that CYAN has been doing a great deal of research to determine which branches of the military plan to implement the new law on their installations. Ms. Homer Vagadori reported that there is a lot of inconsistency among the branches on how they plan to approach this. She reported representatives for exchanges at Army and Airforce installations have indicated they do not plan to enforce the Tobacco 21 law for dependents on their installation and will continue to sell to those older than 18 years of age until they get a directive from the Department of Defense. However, representatives from the Navy and Marine Corps have indicated that they do plan to implement the new law on their bases because they recognize they are on California property. She added the Coast Guard has given directive to their bases with stores in California to implement the law.

Ms. Homer Vagadori also indicated that CYAN has been communicating with the two jurisdictions that have local age of sale laws, San Francisco and Santa Clara County. She reported their laws do not exempt active duty military personnel from the minimum age of sale law. She added that both jurisdictions are awaiting guidance from their city attorney or county counsel on whether to enforce the local age of sale laws. She reported the Santa Clara County Tobacco Control Program has indicated they want their ordinance to be stronger than the state law. Ms. Homer Vagadori inquired whether the state law includes language that preempts local jurisdictions from not exempting active duty military personnel from minimum age of sale laws.

Mr. Kwong responded that CTCP's interpretation of the new law is that the Tobacco 21 law is the law of the land, which includes the exemption for active duty military personnel.

Mr. Kwong next reported on the expansion of the tobacco product definition. The definition of "tobacco product" was expanded to include ESDs, regardless of whether or not they contain nicotine. He added the definition applies to the state smoke-free laws including workplaces, foster homes, tot lots, etc. He also indicated the definition applies to underage access laws: STAKE Act and Penal Code Section 308. Mr. Kwong added that the new tobacco product definition does not include non-tobacco herbal cigarettes.

Ms. Kelley pointed out that shisha used in hookahs is usually tobacco and inquired about whether the new laws allow for use of hookah with non-tobacco, non-nicotine herbs.

Mr. Kwong responded that the law is unclear on who bears the burden of proof on whether the products used in hookah are truly non-tobacco and/or non-nicotine.

Ms. Etem asked whether there was a process that certifies that a hookah product is herbal, similar to the certification of organic produce.

Mr. Kwong responded that currently there is no such process.

Dr. Ong added that now that the FDA has passed the deeming rules, such a process might be established in the future.

Mr. Kwong added CTCP is very pleased with the new definition of "smoking" which is broadly defined and includes any lighted or heated tobacco or plant products, whether natural or synthetic, and any ESD. He indicated the wording in the definition covers the smoking of marijuana, including synthetic marijuana.

Mr. Kwong reported that the new law mandates child-resistant packaging for all ESD cartridges and solutions. This law will go into effect on October 1, 2016. Mr. Kwong added that effective on January 1, 2017, ESD retailers will be required to apply for a state TRL.

Mr. Kwong reported on the new clean indoor air law. He indicated that many of the loopholes that had existed in the smoke-free workplace law have now been closed and ESDs have been added to the prohibition. He indicated the smoke-free workplace loopholes that were closed include: small businesses (5 or fewer employees), breakrooms, warehouses, hotel lobbies and banquet rooms, 80% of hotel guest rooms, owner-operated businesses, and covered parking lots. He stated the long-term nursing homes are still exempted from the smoke-free workplace law.

Mr. Kwong reported that tobacco retail licensing fees have increased for retailers and that ESD retailers are now required to obtain a tobacco retail license. He reported the tobacco retailer fee increased from \$100 one-time to \$265, which must be paid annually. Mr. Kwong added that the annual fee for wholesalers and distributors also increased from \$1,000 to a \$1,200. He explained the fee increases should fix the problem of Proposition 99 funds being diverted to pay for the state tobacco TRL program costs.

Mr. Kwong informed the Committee that the new tobacco-free schools law ensures that all K-12 public schools are tobacco-free, including public charter schools. He indicated that the tobacco-free mandate includes ESDs, but only those that contain nicotine; however, Proposition 99 funded schools would be required to include non-nicotine ESDs in their tobacco-free policies. He added that the new law requires that appropriate signage be posted at all entrances. He also added that CDE will work on implementation of the new law.

Next, Mr. Kwong gave a brief update on the Tobacco Tax Initiative, which will be on the November 2016 ballot. He indicated that raising the tobacco tax is TEROC's number one objective, because it would be instrumental in accomplishing its other objectives. He reported that if the initiative passes, it would raise the cigarette tax by two dollars per cigarette pack, which would bring the average price of cigarettes to \$7.48 per pack. He also reported the new tax would become effective on April 1, 2017. He indicated the initiative provides for a backfill for Proposition 99 which would keep Proposition 99 fully funded. He added that within a year, BOE would report on the impact of the new tax on tobacco tax funded programs, including Proposition 99, because of the expected decrease in tobacco consumption due to higher tobacco prices. He indicated that the revenues would be distributed in the following manner: Department of Health Care Services: 82%, CDPH: 11%, CDE: 2%, TRDRP: 5%.

Mr. Kwong reported the Initiative would include ESDs as "tobacco products" under Proposition 99 and tax them accordingly. He indicated the BOE would develop regulations to determine how to tax ESDs. He added the regulations would address the taxation of nicotine-containing devices, nicotine liquid or substances, and components/part/accessories used during the operation of the device. He added that it is unknown at this time when the new regulations will be completed, as well as the amount of revenue that will be generated by the new taxes on ESDs.

Mr. Kwong reported that the Initiative stipulates that at least 15% of new CDPH and CDE monies are to be used to accelerate and monitor reduction of tobacco-related disparities.

Ms. Etem indicated that it would be important for TEROC to express appreciation for the work that local agencies throughout the state have done to make the passage of the new laws a reality. She suggested that a letter be sent to the tobacco control field.

Dr. Ong agreed and suggested that a letter also be sent to the legislators who carried the bills. He added that a special thanks is due to ALA, ACS/CAN and AHA for their work to get the bills passed, and that letters be sent to these agencies as well. Mr. Barnes added that a letter should also be sent out to the Governor to thank him for signing the bills into law.

Mr. Gibbs informed the Committee that the ACS/CAN would host an event on June 22, 2016 to celebrate the passage of the five special session tobacco control bills. He indicated the ACS/CAN will honor Senator Mark Leno and Senator Ed Hernandez for their leadership on the bills as well as give special recognition awards to Assemblyman Mark Stone and Assemblywoman Catharine Baker at the event. Mr. Gibbs invited TEROC members and others in the tobacco control field to attend.

Ms. Kelley stated that it would also be advisable for the voluntary health agencies to reach out to their local volunteers to recognize their local elected officials for support of the bills.

Ms. Etem moved that the CDPH, CDE, TRDRP and the voluntary health agencies provide TEROC a list of names of individuals that should be recognized for their efforts to pass the new tobacco control laws. Letters should be sent to the Governor, the bill authors, the voluntary health agencies, and key agency leaders. An open letter to the tobacco control community should also be written. Dr. Ling seconded the motion. Dr. Ong indicated that the goal is to be as inclusive as possible in acknowledging all the contributions that made passage of the new tobacco control laws. Motion carried unanimously.

**Action Items:**

- Write an open thank you letter to the tobacco control community
- Write a thank you letter to the Governor
- Write thank you letters to the bill authors, including to Assemblyman Richard Bloom whose bill was vetoed by the Governor
- Write a thank you letter to the voluntary health agencies
- Write a thank you letter to key agency leaders

**4. DEPARTMENT OF FINANCE REPORT**

Ms. Barbara Taylor and Mr. Koffi Kouassi of the California Department of Finance (DOF) provided a Proposition 99 Budget update on the 2016-17 May Revision to the Governor's Budget.

Ms. Taylor discussed the revenues and expenditures on the Proposition 99 budget. She indicated that the themes in the May Revise were the same as in the January Budget, including another increase.

Revenues for Fiscal Year (FY) 2014-15 did not change but there was an increase in expenditures of \$1.1 million. This was a technical correction to fix an earlier error made during the Governor's budget development process. This correction led to an adjustment in the rolling balance for the Proposition 99 account from

\$84.6 million at the FY 2016-17 Governor's Budget to \$83.5 million at the FY 2016-17 May Revision.

FY 2015-16 projected revenues increased by \$7.2 million (from \$262.3 million in FY 2016-17 Governor's Budget to \$269.5 million in the FY 2016-17 May Revision). For the second FY there was an increase in revenues. The increase in revenues for FY 2015-16 will roll forward to FY 2016-17. The Proposition 10 backfill remained the same at \$12.5 million and there were no changes in the expenditures for FY 2015-16.

The May Revision for FY 2016-17 projected an estimated \$7.6 million increase in revenues as compared to the FY 2016-17 Governor's Budget (from \$255.0 million to \$262.6 million). The Proposition 10 backfill remained the same at \$12.5 million. With the funds rolled over from projected FY 2015-16 ending fund balances, there will be an overall increase in expenditures of \$13.0 million from the FY 2016-17 Governor's Budget to the FY 2016-17 May Revision estimates. Applying the Proposition 99 percentage formula the increases were distributed as follows:

- Health Education Account: \$2.8 Million;
- Hospital Services Account: \$4.9 Million;
- Physicians' Services Account: \$1.4 Million;
- Research Account: \$0.7 Million; and
- Unallocated Account: \$3.2 Million.

\$0.7 Million was transferred from the Public Resources Account to the Habitat Conservation Fund instead of allocating it to State programs.

For CDPH, there was \$2.4 million in the FY 2016-17 Governor's Budget for tobacco use prevention, including:

- \$2.1 million increase for the Health Education Account;
- \$198,000 increase for the Research Account; and
- \$119,000 increase for the Unallocated Account.

Of the additional funding received in FY 2016-17 in the Health Education Account for the CDPH, \$1.4 Million will be used to develop and conduct an education and outreach campaign. The campaign will support Chapter 7, Statutes of 2016 (Senate Bill [SB] X2 5), which added ESDs to the definition of tobacco products, and Chapter 8, Statutes of 2016 (SB X2 7), which increased the minimum age of sale of tobacco products to the age of 21. There is an additional \$1.1 million before the Conference Committee to fund 10 positions in the CDPH to help with enforcement activities of the new laws.

**General Discussion:**

Dr. Max inquired about the funds being transferred from the Public Resources Account to the Habitat Conservation Fund.

Dr. Ong responded the Public Resources Account has been part of the Proposition 99 allocation since passage of the initiative and 5% of Proposition 99 tax revenues are allocated to this account.

Ms. Taylor added with a normal budget process, the funds in the Public Resources Account would be allocated between several State programs including the Department of Fish and Wildlife, the Secretary for Environmental Protection, the Department of Parks and Recreation, and the Water Resources Control Board for which a portion is transferred to the Habitat Conservation Fund. A decision was made to transfer the \$700,000 to the Habitat Conservation Fund rather than increase the expenditures of the State programs.

Dr. Starr inquired whether the additional \$1.4 million in the Health Education Account were also being considered in the Conference Committee.

Ms. Taylor responded the funds in the FY 2016-17 Health Education Account were not being considered in the Conference Committee, but there is \$1.1 million before the Conference Committee. The \$1.1 million was approved by the Senate, but were not included by the Assembly which required it be reconciled in the Conference Committee. Ultimately, the Governor would need to agree to the increased funding.

Ms. Kelley inquired whether the increased revenues were due to increased tax revenues or whether they were monies being carried over from previous years.

Ms. Taylor responded \$7.2 million for FY 2015-16 and \$7.6 million for 2016-17 were actual increases in revenues.

Dr. Ong pointed out this increase in revenues would indicate an increase in consumption of tobacco products.

Ms. Roeseler added cigarette consumption is going down, but consumption of other tobacco products, such as little cigars, may be increasing.

Dr. Ong stated information on projected revenues and their sources should be available from BOE.

Ms. Taylor responded BOE provides the sales tax figures, but DOF is responsible for doing the tax forecast. DOF was expecting a decline in tobacco tax revenues and one possible explanation for the increase in tobacco tax revenues is smokers might have more discretionary money due to the lower price of gasoline and the improving economy.

Dr. Ling inquired whether the new tobacco retailer and wholesaler licensing fees were reflected in the FY 2016-17 budget numbers.

Ms. Taylor responded nothing was reflected in the FY 2016-17 budget numbers regarding the new tobacco control laws and she did not know how long it would take BOE to establish a tax program.

Dr. Ling asked whether the new licensing fees will have an impact on the BOE Fee line item in the Proposition 99 budget.

Ms. Taylor responded she did not know whether there would be an impact on this line item, but it may be reflected in the revenues for Proposition 99 because of the raising of the age of sale from 18 to 21 years old may lead to reduced BOE fees.

Dr. Starr pointed out the primary purpose of the new licensing fees was to make the BOE licensing program self-funding.

Dr. Ling inquired whether the BOE fee would be expected to go down as the new licensing fees are implemented.

Dr. Ong confirmed this was his understanding, but pointed out there would always be some money taken from Proposition 99 by BOE for the administration of Proposition 99. The additional funds taken from the Proposition 99 budget in recent years was to help support the licensing program; however, the new licensing law is meant to address this issue. It is yet to be determined when the impact of the new law will be reflected in the BOE fee, depending on when the new revenues start to come in after the law's implementation date of January 1, 2017. It would be helpful to request the BOE attend a future TEROC meeting to describe their expectations about the licensing program.

Ms. Kelley pointed out vendors of ESD products will be required to obtain state TRLs. She asked whether the BOE would be able to collect taxes on ESD products if the Tobacco Tax Initiative does not pass, or if new legislation would need to be passed.

Dr. Ong responded he believed new legislation would need to be passed to allow for the tobacco tax on ESD products to be collected by BOE.

Ms. Taylor concurred with this interpretation.

Dr. Ong indicated there had been a significant increase in the costs of the California Health Interview Survey (CHIS). Although this is an issue for internal discussion within CDPH, he wanted to point out TEROC wants to ensure CHIS continues to help Proposition 99 funded programs. Recently, CHIS has worked more closely with CDPH to include additional tobacco-related questions in the survey, including questions on ESDs in the last survey cycle. Dr. Ong encouraged the CDPH to ensure that CHIS continue to work on tobacco control surveillance issues, especially if additional funds become available.

Ms. Roeseler stated Dr. Zhang sits on the CHIS Advisory Board and for this reason CDPH feels like tobacco-related concerns are being addressed.

Dr. Zhang stated a smoking module was added to the CHIS in 2014 and continues to be part of the survey.

Ms. Etem inquired whether TRDRP's funding questions from the February 2016 TERO meeting regarding their carryover issue for projects that are funded multiple years had been addressed.

Dr. Aoki responded there had been several issues raised at the last meeting and that TRDRP had met with Ms. Taylor and Mr. Kouassi to further discuss multi-year funded projects. Most of the questions regarding fund rollover between years and increases in the budget through the May Revise had been discussed, but the issue regarding the change of allocations to UCOP and carry-over over multiple years was still outstanding.

Dr. Ong thanked Ms. Taylor and Mr. Kouassi for their report.

#### **5. Smoking on College Campuses**

Ms. Kim Homer Vagadori, reported on behalf of the California Youth Advocacy Network (CYAN)

Ms. Homer Vagadori described the work that CYAN does with Proposition 99 funded programs and other programs that work with youth, colleges and military installations. She reported the college program works primarily with CTCP funded programs to get young people to engage in tobacco control policy activities. She reported the military program works with non-Proposition 99 funded programs. She indicated CYAN works to change tobacco use culture by providing knowledge, skills, and tools to create local change. She added that CYAN provides technical assistance, trainings, statewide advocacy and policy campaigns, educational materials and publications, and opportunities for networking.

Ms. Homer Vagadori reported that CYAN works with student partners, including Campuses Organized and United for Good Health (COUGH). She indicated that CYAN started working with COUGH in 2002, when it was organized to address issues at the California State University (CSU) System when the Board of Trustees held all the policy-making authority. She added that a group of students organized to try to shift the authority from the Board of Trustees to the individual campus presidents. Ms. Homer Vagadori stated that it was CYAN's fastest ever campaign with a nine minute presentation leading to a change in the policy. She added that since then CYAN's college work has focused primarily on public institutions.

Ms. Homer Vagadori provided an update on national trends. She reported that in the early 2000s, California was one of a few states that addressed tobacco use on college campuses. She indicated the initial work focused on entry way policies

prohibiting smoking within 20 feet of an entrance. She added that in recent years, smoke-free campuses have become a more popular issue and this started with the release of the Surgeon General's Report on Youth and Young Adult Tobacco Use. She indicated the report sparked the Tobacco-Free College Campus Initiative (TFCCI) by the U.S. Department of Health and Human Services. Ms. Homer Vagadori indicated that originally, TFCCI had regional fellows that were charged with providing training and technical assistance to colleges in their regions to help them go smoke or tobacco-free. Ms. Homer Vagadori also indicated that, unfortunately, TFCCI has become less active in the last few years.

Ms. Homer Vagadori reported that ACS/CAN recently launched the Smoke-Free Generation Campus Initiative with funding from the CVS Health Foundation. ACS is providing \$20,000 grants to colleges to establish smoke and tobacco-free campuses. In addition, the Truth Initiative is in its third round of funding that provides \$5,000-\$10,000 grants specifically for community colleges to go smoke and tobacco-free. She added that thanks to these programs there have been a significant increase in the number of colleges that have adopted these policies. Based on data from the Americans for Nonsmokers' Rights (ANR), the number of smoke and tobacco-free policies increased from 136 in 2007 to 1,137 in 2016. Ms. Homer Vagadori pointed out that some University of California (UC) policies are not included in these numbers because they include some exemptions, such as for theater productions, which ANR does not support. She indicated that CYAN believes that the UC policies should be recognized as strong tobacco-free policies.

Next, Ms. Homer Vagadori reported on recent California policy trends, including the release of a statewide report card on all public colleges and universities. She added the CYAN staff reviewed and scored all 146 public college and university tobacco use policies and graded them based on the current written policy; the report card did not measure compliance, enforcement, tobacco sales, or research funding. She indicated that bonus points were assigned if the policies included ESDs. She added the method utilized included obtaining a copy of the current written policy from the institutions. She indicated that for community colleges, CYAN also looked at district policies, because in some cases these policies preempt policies at the individual campuses. She added the CYAN has been tracking college and university policies for the last 15 years and thus has the ability to measure trends.

Ms. Homer Vagadori reported that CYAN found that 37 percent of public institutions (54 campuses) are 100% smoke and tobacco-free. She indicated there has been a significant increase in the number of institutions that include ESDs in their smoke and tobacco-free policies. She added that although many campuses have not adopted 100% smoke and tobacco-free policies, 101 campuses have added ESDs to their current tobacco use policies.

She reported all of the UC campuses and medical centers are 100% smoke and tobacco-free and include ESDs in the policy. She added the CSU system only has five campuses that are 100% smoke and tobacco-free. She indicated that

one of those campuses adopted the policy two months ago and will begin implementation in August 2016. She indicated the CSU Chancellor's Office had been due to issue a statewide policy as of January 2016, but has yet to release it. She added that community colleges are behind the UC and CSU in implementing smoke and tobacco-free policies. She added that 27 have smoke and tobacco-free policies and 26 include ESDs in their policies and 11 campuses have smoke-free policies only. She also added that although the report only assessed public institutions, the CYAN is aware of seven private institutions that are smoke or tobacco-free.

Ms. Homer Vagadori added that when comparing policy trends across the college and university systems, the UC system stands out in their smoke and tobacco-free policies compared to the other two systems; community colleges are doing better than the CSU system. However, this may be attributed to the fact that many CSU campuses are waiting for the Chancellor to release a system-wide policy.

Ms. Homer Vagadori reported on Assembly Bill (AB) 1594, which would prohibit smoking and the use of tobacco products on all public colleges and universities in California, includes ESDs. AB 1594 was heard in the Education Committee on June 8<sup>th</sup> and that there has been no opposition recorded for the bill. Concerns have been raised about how AB 1594's smoking restrictions would apply to medical marijuana. Because use of marijuana is prohibited by federal law, and public universities receive federal funding, smoking marijuana on campuses would be illegal regardless of AB 1594's provisions. She added that if federal law were changed to legalize marijuana, the bill only prohibits the smoking of marijuana and does not include any restriction on other methods of administration. If AB 1594 passes, the policy would be implemented by January 1, 2018, but CYAN is encouraging institutions that have policies currently under development to include an earlier implementation date. Ms. Homer Vagadori indicated that there are nine campuses working on implementing new policies in August or September 2016.

Ms. Homer Vagadori stated that one of the problems with the AB 1594 is that the enforcement provisions were weakened. Existing California law authorizes fining individuals who violate the law. She indicated the bill would remove the authority to cite violators for a minimum of one year after the implementation of the new policy. She also reported that college and universities would be required to conduct intensive education with those who violate the smoke and tobacco-free policy. She added fines may be imposed after an educational campaign is conducted.

In terms of policy best practices, CYAN only advocates for the adoption of 100% smoke and tobacco-free policies that include ESDs and other new products. This language is consistent with the ChangeLab Solutions model policy which does not include any exemptions. CYAN encourages schools to work with a diverse group of students, faculty, and staff.

CYAN recommends an implementation period of 6-12 months and that a new task force be formed to assist with implementing the policy. Ms. Homer Vagadori stated it is a best practice to utilize positive messages to promote new policies and that this was a lesson learned from the UC system, which focused on the benefits of the new policy on the campus community.

CYAN encourages extensive policy education prior to policy enforcement and incorporating citations into the enforcement plan, because other methods, such as policy ambassador programs, only work in environments where individuals are inclined to comply. Ms. Homer Vagadori stated that on some campuses, not having the fine option leads to low compliance with the policy.

Current state law (Government Code Section 7597.1) gives public colleges and universities the authority to enforce their tobacco use policies by citation and fine. Colleges have discretion on whether to issue citations. The amount of the fine is to be determined by the local governing body but cannot exceed \$100. Ms. Homer Vagadori indicated that the law stipulates that all of the collected funds must be allocated to supporting the policy, including enforcement, education and promotion, and tobacco cessation treatment options, but the colleges have discretion on how to distribute the funds.

Ms. Homer Vagadori added that there are a couple of campuses using the citation and fine approach. The college or university sets the protocol for issuing citations, including who receives funds, warnings, and fine amount. She added one college has implemented a protocol that includes the following graduated approach penalty approach:

- First Offense: issue warning
- Second Offense: issue \$25 ticket
- Third Offense: issue \$50 ticket
- Fourth Offense: issue \$100
- Fifth+ Offense: refer student to Office of Student Conduct or Human Resources

Ms. Homer Vagadori noted that Government Code Section 7597.1 was enacted because the experience of community colleges showed that campus law enforcement officers were not willing to issue citations for violations of tobacco use policies. She added the CYAN hoped that implementation of the new law would address the reluctance of campuses to enforce smoking/tobacco free policies. Ms. Homer Vagadori reported there is one community college district that has adopted the citation approach and their experience has been that tobacco use on campus has decreased dramatically and that new citations are rare.

However, Ms. Homer Vagadori indicated that resistance to issuing citations continues to be a problem. She added the CYAN has determined that one major barrier is that Government Code Section 7597.1 authorizes issuing administrative fines. Ms. Homer Vagadori stated that police departments feel that it is not their

job to enforce policies; their job is to enforce laws. She added that in order for this code to be added to the county bail schedule they would need approval from the City Attorney or County Counsel.

Ms. Homer Vagadori reported the CSU Board of Trustees has the authority to enforce policies and laws on building and grounds of the CSU campus and that they have been using the criminal code to enforce smoke/tobacco free policies. Ms. Homer Vagadori indicated that it is a misdemeanor crime to violate any policy. She added that since Government Code Section 7597.1 is already on their bail schedule, no approval is needed from the City Attorney or County Counsel. She also added that one CSU campus is already using this approach and two more are planning to do so. She indicated this approach is not possible for the Community College System.

Ms. Homer Vagadori reported on the CYAN's current activities, indicating that they are continuing to support colleges working on policy advocacy activities, focusing on implementation and enforcement of these policies. CYAN is also working on the development of an implementation best practices guide. At the request of UC, CYAN is developing an online training program that individuals who repeatedly violate the campus smoke/tobacco free policy will be required to take. As part of the CTCP grant, CYAN is working on an evaluation of 100% smoke and tobacco-free policies to determine the characteristics of policies that lead to higher compliance levels. CYAN is starting to shift focus to private/trade/technical colleges and universities. She reported that the California Legislative Analyst's Office estimated that in 2014 there were 177 non-profit, independent institutions in the state and more than 1,000 for-profit schools. She added these institutions do not have to comply with the 20-foot entryway smoking ban. She indicated many of these institutions do not have smoke-free policies; they only comply with the smoke-free workplace law.

Ms. Homer Vagadori informed the Committee that CYAN is launching a new website that will serve as a one-stop-shop of resources for those working on campus smoke and tobacco-free policies.

Dr. Ong thanked Ms. Homer Vagadori for her report.

**General Discussion:**

Ms. Bauman commented that programs like Protecting Health and Slamming Tobacco (PHAST) are training a new generation of tobacco control advocates at the junior high and high school level. She indicated that when members of this group get to college, many remain active and passionate about the issue. Some of these students have become involved in CYAN's college student advisory board.

Ms. Kelley thanked Ms. Homer Vagadori for the advice and technical assistance she has provided to the tobacco control field. She indicated that in San Diego County, the community colleges led the way on smoke/tobacco free campuses. Ms. Kelley stated that San Diego State University (SDSU) was the first CSU

campus to go smoke-free and UC San Diego provided a lot of leadership in the UC movement. She added that two private colleges in San Diego have smoke-free policies. CSU San Marcos has the only “D” in the county. Ms. Kelley stated the report card put out by CYAN could be used as leverage to promote smoke-free campus policies.

Ms. Homer Vagadori recently participated in a discussion with SDSU administrators on the lax implementation of their campus policy.

Ms. Kelley expressed her appreciation for Ms. Homer Vagadori’s technical assistance on this issue. The primary implementation challenge at SDSU revolves around international students.

Dr. Richmond-McKnight inquired whether AB 1594 provided funding to colleges.

Ms. Homer Vagadori responded that the bill would provide \$1,300 to community college districts for signage. Some of the districts include as many as 11 campuses. Ms. Homer Vagadori reported that Moorpark College recently adopted a tobacco-free campus policy. She stated that the \$5,000 signage budget only covered the purchase of signs. The budget did not include the costs for the removal of old signage and installation of new signs, which is much more expensive than the new signs themselves.

Dr. Max asked whether the evaluation activities include looking at other positive outcomes of the college smoke/tobacco free policies.

Ms. Homer Vagadori stated about that she has held discussions with Dr. Elisa Tong at UC Davis about conducting research on the campus policies. She added that if AB 1594 goes into effect; it would be the prime time to start collecting data.

Dr. Max asked for an update on efforts to have Stanford University adopt a smoke/tobacco –free policy.

Ms. Homer Vagadori responded that there have been four rounds of advocacy, with the most recent being the most aggressive. She added that it appeared that the Stanford University Provost has been the barrier to adopting a policy, but that will be retiring at end of academic year, which might present an opportunity for the policy to be adopted.

Dr. Ling inquired whether rivalries between universities could serve as leverage to promote smoke-free policies.

Ms. Homer Vagadori responded that CYAN explored utilizing rivalries in this manner for CSU and UC, but that the CSU did not want to compare itself to UC. This approach works better between private colleges and universities. She added that it does not work between private and public institutions. Ms. Homer Vagadori indicated that attempts to utilize the UC Berkeley-Stanford University rivalry did not work because Stanford does not see themselves as in same league as UC.

Dr. Ling asked whether the increase of the age of sale for tobacco products could be used to promote implementation of smoke and tobacco-free policies.

Ms. Homer Vagadori responded that CYAN is gearing up to help campus health center partners prepare by providing cessation messages in the Fall and developing facebook messages to encourage quit attempts among 18-20 year olds.

## **6. VOLUNTARY HEALTH AGENCY UPDATE**

Ms. Lindsey Freitas of the American Lung Association, Ms. Callie Hanft of the American Heart Association, and Mr. Tim Gibbs of the American Cancer Society-Cancer Action Network (ACS/CAN) reported on behalf of the voluntary health agencies.

Mr. Gibbs began his report with an update on the Tobacco Tax Initiative. He reported that on May 16, 2016 the voluntary health agencies submitted approximately one million (991,000) signatures to the Secretary of State. He indicated the next step after submission was the signature verification process. He reported that as of June 9, 2016, 9-10 counties, which do not include the larger counties, had made it through the signature verification process. The verified signatures from those counties account for approximately 81,000 signatures out of the 585,000 signatures needed to qualify. The voluntary health agencies believe they are on track to qualify for the November ballot measure.

Ms. Freitas reported on the bills that are moving through the legislative process. Assembly Bill (AB) 1954 (McCarty), which would prohibit the use of tobacco on all public university and college campuses, is taking steps in the right direction by using the UC smoke and tobacco-free policy and applying it to all campuses. AB 1594 is moving smoothly through the process and has moved on from the Senate Education Committee with a vote of 7-2 to the Senate Appropriations Committee. She indicated that the Republicans in the Senate Education Committee decided to vote "no" on the bill rather than not vote.

AB 1901 (Quirk) was brought to the author by the BOE due to concerns about enforcing some of the laws associated with the unaffixed tobacco tax stamps. AB 1901 would give BOE authority to address unaffixed tobacco tax stamps. AB 1901 has made it through the Assembly and it now waiting a committee assignment in the Senate.

AB 2770 (Nazarian) would address the BOE Cigarette and Tobacco Products Compliance Fund. The author become aware that the fund has some revenues, there is a need to know why, and how to get those funds distributed. AB 2770 would require the BOE to report on how much money is in the compliance fund. AB 2770 has moved through the Assembly and is now waiting a committee assignment in the Senate.

Senate Bill (SB) 977 (Pan), would prohibit tobacco use and smoking at youth sports events. SB 977 has made it through the Senate and is now waiting a committee assignment in the Assembly.

SB 1333 (Block), which would prohibit smoking on public beaches and at state parks, has moved smoothly through the Senate and is now waiting a committee assignment in the Assembly.

SB 1400 and SB 1470 (Wieckowski) are joined bills, and would prohibit the sale of tobacco products anywhere that is not a qualified tobacco store. SB 1400 has moved smoothly through the Senate and is now waiting a committee assignment in the Assembly.

Ms. Hanft reported on AB 1696 (Holden), which is sponsored by ALA, AHA, and ACS/CAN. This bill is similar to a bill passed by the Legislature, but vetoed by the governor due to lack of a funding source. AB 1696 would require use of the Healthcare Effectiveness Data and Information Set to accurately assess smoking prevalence and to ensure the best cessation aids are offered to help people quit. The bill would allow the CDPH and the DHCS to enter into an agreement to allow the California Smokers' Helpline to furnish nicotine replacement therapy. The intent of the bill is to allow individuals to contact the Helpline and acquire Nicotine Replacement Therapy (NRT) without any barriers. She also indicated the voluntary health agencies would appreciate a letter of support for AB 1696.

### **General Discussion**

Ms. Freitas thanked everyone for using their personal time to collect signatures because there was a moment when it appeared that the required number of signatures collected would not be met.

Dr. Ong asked in terms of next steps, are there things TEROC should make sure the field is doing or taking into consideration to ensure the Tobacco Tax Initiative receives the support it needs and is able to pass in the November ballot?

Mr. Gibbs responded the voluntary health agencies are building their field organization and they will have a very robust volunteer campaign in the fall, which will include speaking to various opinion leaders and calling voters. He also indicated he hopes that by the next TEROC meeting the voluntary health agencies will have a detailed plan of action to garner support for the Initiative.

Dr. Max inquired whether there has been resistance against SB 1400.

Ms. Freitas responded there has been some resistance and they have seen the opposition talking to legislators to try to stop this bill.

Mr. Gibbs further indicated that SB 1400 only made it out of the Senate by one vote.

Dr. Ong inquired whether it would be helpful if TEROC weighed in on any of these bills.

Mr. Gibbs and Ms. Freitas responded it would be helpful if TEROC expressed support for AB 1594, SB 977, and SB 1333.

Ms. Etem moved that TEROC write letters in support of AB 1594, SB 977, and SB 1333, seconded by Mr. Burns. Motion passed with one abstention from Mark Starr and ten “yes” votes.

Ms. Etem moved that TEROC write letters in support of AB 1696, seconded by Mr. Burns. Motion passed with one abstention from Mark Starr and ten “yes” votes.

**Action Items:**

- Write letters of support for AB 1594, AB 1696, SB 977, and SB 1333.

**7. CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, CALIFORNIA TOBACCO CONTROL PROGRAM REPORT**

Ms. April Roeseler of the California Tobacco Control Program (CTCP) presented on behalf of CTCP.

Ms. Roeseler reported that the Partners website was updated. She added CTCP has focused on coalition building in the updating of the site. The website was reorganized, upgraded to modern web standards, made more secure and includes several new features. The site continues to provide up-to-the-date information on legislation, advertising, trainings, community initiatives and resources designed to facilitate tobacco control programs throughout California.

Ms. Roeseler reported that over the last few months CTCP has focused on coalition building. The LOOP hosted a webinar entitled *Coalition-Building to Achieve Advocacy Goals*. CTCP’s Jena Grosser launched an ongoing coalition skill-building course entitled *Community Coalitions 101: Building Community Support for Success* for local lead agencies and/or staff managing local tobacco control coalitions. Thirty individuals, representing 22 local health departments are enrolled in the year-long webinar course. The American Lung Association in California’s The Center for Tobacco Policy & Organizing hosted a webinar entitled *Staying the Course: Strategizing and Charting Out Your Campaign*.

Ms. Roeseler reported the California Smokers Helpline (CSH) researched and tested ways to ask about gender identity during the caller intake process. The CSH pilot tested the question “Do you identify yourself as male, female, or in another way? If in another way, how do you identify yourself?” The pilot testing found this question to be effective in collecting responses that included male, female, transgender and other designations.

CTCP hosted several trainings focused on special populations, flavored tobacco products and menthol. Dr. Soto and Ms. Lou Moerner hosted a webinar entitled

*Demystifying Tribal Sovereignty for Tobacco Control Advocates*. CTCP held a *Flavored Tobacco and Menthol Training* on March 3, 2016 in Sacramento for local projects working on flavored tobacco and/or tobacco retail licensing objectives. The training included speakers from New York City, Chicago, Massachusetts, and the City of Sonoma all of which passed flavored tobacco product bans. The speakers discussed their experiences with regulation and enforcement as well as the challenges and successes they experienced. CTCP is working closely with the Alcohol and Drug Prevention Program (ADPP) through the Healthy Stores for a Healthy Community campaign. On March 21, 2015, CTCP and ADPP hosted a webinar on *Strategies to Reduce Youth Access to Flavored Tobacco and Alcohol in Your Community*. The webinar addressed some of the similarities between flavored tobacco and sweetened, flavored alcoholic drinks called alcopops.

The California Youth Advocacy Network (CYAN) held a webinar on *Tobacco and the U.S. Military: Use Rates, Causes, and Industry Influence*. The webinar reviewed current tobacco use rates among service members and veterans compared to their civilian counterparts, examined how the tobacco industry promoted tobacco to the military community as well as prevented military leaders from adopting policies and procedures to decrease tobacco use. She also indicated the webinar highlighted new ads showing how e-cigarette companies are aggressively targeting service members and veterans.

CTCP commissioned the Attorney General's office to write the paper *Focus on Flavors*, which discusses the legal options for state and local governments to restrict or prohibit the sale or distribution of flavored tobacco products in California. The paper focused on preemption and courts and how the judicial system may view tobacco flavor-related policies.

CTCP staff continues to work closely with the CDPH Office of Health Equity (OHE) and they jointly hosted two "Think Tanks" in May 2016. The "Think Tanks" are designed to help achieve the *Portrait of Promise: California Statewide Plan to Achieve Health and Mental Health Equity* Goal CB1&2.1: "Build mechanisms for the OHE to establish ongoing public engagement and accountability on the strategic priorities, ensuring community participation in all goals at all levels of the Plan."

CTCP continues to work on the Tobacco-Related Health Equity Report Card (Report Card). On May 19, 2016, CTCP hosted the *Tobacco-Related Health Equity Report Card Informational Webinar*. The purpose of the webinar was to seek input from CTCP partners regarding the inclusion of indicators to be used to develop the Report Card. She explained that the Report Card is a project that came out of the Health Equity Summit and Round Table discussions. CTCP is trying to identify key metrics to assess and track over time the progress or challenges CDPH is making in closing gaps in smoking prevalence and promoting health equity. The goal is to finish the project by Spring 2017.

CTCP also commissioned the California Medical Association (CMA) to write a white paper on flavored tobacco products and youth. She indicated the paper summarizes the public health effects of flavored tobacco products and menthol. She indicated that while CMA has not been a close partner in the past, their work on flavored tobacco products adds credibility to the topic and provides insight into the increasing consumption of flavored and menthol tobacco products, specifically with regards to priority populations, and the resulting health effects.

Ms. Roeseler reported CTCP trans-adapted the Wake Up media campaign into Spanish. She indicated the campaign tested remarkably well in Spanish language focus groups with a highly positive response. She reported the campaign will be an excellent educational tool for the Hispanic population. The Wake Up campaign has received several awards including the “Campaign of the Year” and the “Still Blowing Smoke” website won the Pixel Award for best interactive work under the non-profit category.

Ms. Roeseler reported that on May 4, 2016, Governor Brown signed a package of tobacco control bills into law. She reported CTCP is working on the implementation of the smoke-free workplace law; however, in terms of priorities, CTCP has placed retailer education on a fast track. CTCP is developing educational materials for retailers to include a fact sheet, a frequently asked questions document, and starting the process to revise existing materials to reflect the new law. On June 9, 2016, CTCP posted a factsheet pertaining to the changes in the smoke-free workplace law. CTCP has other materials under development such as an infographic, documents identifying where a person can and cannot smoke, and updating previous ads that CTCP partners can place in publications.

Ms. Roeseler reported CTCP continues to work on smoke-free multiunit housing. On February 23, 2016, The LOOP hosted a webinar entitled *Becoming a Smoke-Free Housing Expert: Advancing Your Smoke-Free Messages with Housing Insiders*. The webinar provided education about the types of housing and the legal considerations when proposing smoke-free policies, motivating housing projects and management to go smoke-free, and how to work with housing industry insiders to advance campaign messages. Additionally, ChangeLab Solutions developed an easy-to-use checklist to accompany the Smoke-Free Housing Model Ordinance.

Ms. Roeseler reported the CDPH was reviewing the information it collects on death certificates which provided the opportunity to add a question about tobacco-related death to the California death certificate. Mr. Tam Vuong, a relatively new member to the Evaluation Unit, collected information from other states (e.g., Hawaii and Oregon) and developed and presented a proposal to CDPH on May 18, 2016.

Ms. Roeseler reported CTCP has been working on the Tobacco 21 laws for the past 30 days. CTCP has been working with the BOE, the Food and Drug Branch (FDB), and the Office of Legal Services to coordinate and come to an agreement

on verbiage for the Stop Tobacco Access to Kids Enforcement (STAKE) Act signage, interpretation of the requirements of the implementation dates, and the meaning of definitions in the laws related to tobacco products and smoking. She acknowledged Nicholas Wellington from the Attorney General's Office, Ray Leung from ChangeLab Solutions for assisting CTCP in developing education materials for the tobacco retailer community about the Tobacco 21 law.

She also acknowledged Gretta Foss-Holland of the CTCP Knowledge Management Unit, and all CTCP staff for their work on new Tobacco 21 educational materials, and Hawaii and San Francisco for sharing all of their materials. She reported CTCP has several English language materials on the website for the tobacco retailer community including the new yellow STAKE Act sign. She indicated materials are being translated into other languages (i.e., Spanish, Chinese, Korean, Vietnamese, Punjabi and Arabic) and will be posted on the CTCP website in the next 7-10 business days.

Ms. Roeseler indicated that some retailers had concerns about printing their own STAKE Act signs; therefore, CDPH is mailing packets, which include STAKE Act signage and door clings to approximately 35,000 tobacco retailers. Tobacco retailers should receive the packets by June 30, 2016. She also acknowledged Dr. Karen Smith, CDPH Director, and the Department for helping CTCP to implement Tobacco 21 on a fast track. The Director's Office was instrumental in approving materials in a timely manner for rapid dissemination.

Ms. Roeseler reported that Dr. Smith, Dr. Starr and herself gave a telephone news briefing on June 9, 2016 on the new laws. Approximately 50 reporters participated. She indicated there are some complexities and nuances in the new laws and that it will require a concerted educational process to get everyone up to speed on the new requirements.

Ms. Roeseler reported CTCP will be doing a Tobacco 21 ad campaign that is focused on the point-of-sale that will run through the summer. The campaign is borrowed from Hawaii, which focuses on the sale of tobacco products to individuals younger than 21 years of age and includes promotion of the Helpline. CTCP will also place ads in trade magazines (e.g., Convenience Store News) and will send mailings to all of the major tobacco companies to inform them about the new laws related to signage, distribution, and wholesale.

Ms. Roeseler reported CTCP plans to do a robust evaluation of the Tobacco 21 law. CTCP will continue to use teens for the Youth Tobacco Purchase Survey for a few years. She also indicated CTCP would conduct a Tobacco Purchase Survey using young adult decoys that also includes e-cigarette sales. CTCP will additionally reevaluate how data are analyzed and interpreted (e.g., traditionally CTCP has looked at 18-24 year olds, now it will look at 18-20 year olds). She explained that California will need to provide answers about decreasing youth uptake of tobacco products, youth prevalence of smoking, denormalizing tobacco use, and the morbidity and mortality outcomes will take time to assess.

**General Discussion:**

Ms. Soto inquired whether measures have been added to include American Indian/Alaskan Native communities.

Ms. Roeseler responded that American Indian/Alaskan Native American groups are included in the Tobacco-Related Health Equity Report Card. The indicators were written to include the priority populations in the TEROC Master Plan, which includes more than 15-20 priority populations. CTCP will provide information for the populations for which data are available. It is CTCP's intention to gather data on all of the priority populations; however, some datasets are not as robust as other databases. Ms. Roeseler indicated CTCP would check to make sure it is not omitting any populations.

Dr. Ling inquired whether the question on tobacco use as a cause of death was already on the death certificate.

Ms. Roeseler responded the national standard death certificate includes a question on tobacco use as a cause of death but the California death certificate does not. However, the California birth certificate does include a question regarding the mother's smoking status.

Dr. Max inquired whether the question on the death certificate was about the individuals smoking status.

Ms. Roeseler responded the question asks whether the death is tobacco-related.

Ms. Kelley wanted CTCP to know that the field really appreciated all of the materials produced regarding the new laws. She inquired whether the Frequently Asked Questions (FAQ) document would be made available to Local Lead Agencies (LLAs).

Ms. Roeseler responded a FAQ document for retailers is on the CTCP website and CTCP is working on a second document for local health departments. She suggested that if there are questions the field feels are not being answered they should be sent to CTCP to make sure all questions are being answered.

Ms. Kelley added that a question was received from Phillip Morris/Altria regarding which local jurisdictions had a minimum age requirement for clerks who sell tobacco products.

Ms. Roeseler responded CTCP is updating the list of municipalities that have a minimum age requirement for clerks. She indicated the updated list should be posted by June 10, 2016.

Dr. Oldham inquired about the long-term impact of implementation of the Tobacco 21 law in terms of local law enforcement.

Ms. Roeseler responded that the focus of implementation is currently on basic merchant education. There is reason to believe that retailers are interested in complying with the new law, but the CDPH is unsure about how ESD retailers are reacting.

In terms of enforcement, Ms. Roeseler responded CTCP will host some trainings and webinars on enforcement of the laws. CTCP has done this in the past. For example, Ms. Kelley helped CTCP host round table discussions in San Diego with law enforcement to address tobacco control. Ms. Roeseler pointed out that it will take time to implement these types of activities, and that it will be interesting to see if law enforcement agencies can combine tobacco and alcohol enforcement activities.

Ms. Roeseler also elaborated that in terms of using young adult decoys, CTCP will not have to get parental consent, and some of the other logistics such as purchasing fake identification cards will be unnecessary. Nonetheless, CTCP or FDB will have to reach out to law enforcement to conduct training about the new laws.

Ms. Kelley indicated that her Tobacco Control Coalition Executive Committee and LLA decided to host a 30-day check-in during July. She added they are sending invitations to the local law enforcement agencies to attend the check-in and provide additional information, clarification, and feedback about the implementation of the new tobacco laws.

Ms. Etem inquired about the use of the term “herbal” since it is not included in the new laws.

Ms. Roeseler responded that in the FAQs CTCP has answered some of the questions about herbal tobacco products and have addressed some of the nuanced questions CTCP has received. She also indicated CTCP has discussed developing a chart that would include term definitions, where the definitions can be found within the law, and what these definitions apply to because in one law a term may be defined one way and in another law it may be defined slightly different.

Ms. Etem inquired whether it is possible to assess smoking in Asian/Pacific Islander businesses in the Health Equity Report Card.

Ms. Roeseler responded the CTCP adult survey has questions about exposure to secondhand smoke in workplaces and other locations.

Ms. Etem inquired about the removal of the legal age of purchase language from the laws and how that affects the infrastructure at schools.

Ms. Roeseler responded the legal age of purchase language was taken out during the legislative process at the request of the National Association for the Advancement of Colored People because it was seen as a social justice issue.

Dr. Soto highlighted the new laws do nothing for the Tribal communities in terms of reducing the prevalence of smoking or access to tobacco products. She emphasized the importance of collecting data and using the data in media campaigns to educate Tribal communities about the new laws and that voluntary implementation could reduce smoking prevalence and reduce health disparities experienced by Tribal communities.

Ms. Roeseler responded CTCP has reached out to the Centers for Disease Control and Prevention and the Technical Assistance Legal Center in Minnesota to discuss ways to work with the Tribal communities because the new laws do not affect these communities. Ms. Roeseler also indicated that CTCP will explore developing a special report on the American Indian communities and tobacco use utilizing new smoking prevalence and youth use data, and CTCP may be able to gather data on morbidity, mortality, cancer diagnoses among this population.

#### **8. California Department of Education Report**

Mr. Tom Herman, Mr. John Lagomarsino, Ms. Sarah Planche, and Ms. Diane Nguyen presented on behalf of the California Department of Education/Coordinated School Health and Safety Office (CDE/CSHSO).

Mr. Herman reported CDE continues to serve on TRDRP Scientific Advisory Committee's quarterly meetings. He indicated that Ms. Planche recently attended the meeting on May 12-13 in Oakland to discuss TRDRP's current program context, including the research and policy environment, and initiatives to consider relating to new products.

Mr. Herman reported the Tobacco-Use Prevention Education (TUPE) evaluation contract has been executed. He reported the TUPE intern, Ms. Diane Nguyen, has graduated and is leaving the program. He indicated she would report on Database Reporting Improvements that she made during her time as an intern.

Mr. Herman reported CDE convened the fourth Advisory Work Group meeting on May 16, 2016 on the TUPE Competitive Grants program. At the meeting, CDE revisited their interest in broadening interventions to reach more priority populations and disadvantaged youth. During the next TUPE Tier 2 Request for Applications (RFA) release, applicants will be required to identify services being provided to priority populations and that students at nontraditional schools will be included as a priority population. He also indicated the TUPE coordinators will encourage nontraditional schools to apply for TUPE funding.

Mr. Herman reported on CDE's collaboration with the School Wellness Alliance Group and the San Mateo County Office of Education, Lesbian Gay Bisexual Transgender and Questioning (LGBTQ) Identity and Related Issues Workshop was held on May 2, 2016. A youth LGBTQ panel discussed tobacco and other drug use among LGBTQ populations.

Mr. Herman reported CDE has a letter that the Superintendent for Public Instruction, Mr. Tom Torlakson, will send out regarding tobacco use on school property. Mr. Herman reported that while the new laws removed the possession of tobacco products language, possession and use of tobacco products language remains in the Education Code and is prohibited under school policy. Students can still be suspended or expelled for using or possessing tobacco products on campus.

Mr. Herman reported the CDE TUPE program is interested in updating curricula and creating new options for funded projects by adding new curricula that have come highly recommended by youth prevention specialists and experts. This topic was discussed during the TUPE Advisory Work Group meeting in early July. He indicated CDE intends to form a committee comprised of researchers and prevention experts to assist them in a review of curricula that shows promise and could be considered for inclusion in the list of approved TUPE curriculums.

Mr. Herman reported the CDE funding results for the TUPE grades 6-12 Cohort L Tier 2 for fiscal year 2016-17, is pending CDE approval of the grant awards. He indicated the 21 grants represent 80 districts, 488 schools and provide services to 262,410 students.

Mr. Lagomarsino added this is one of three TUPE cohorts that are currently running and that CDE is reaching over 200,000 students with one cohort.

Ms. Planche added many of these grant are consortiums, which help many districts come together to reduce tobacco use among teens.

Mr. Herman reported the County Technical Assistance Leadership Funds application was posted to the TUPE funding website. These funds provide resources to county offices of education to plan, develop, and implement capacity building, technical assistance and training, evaluation, program improvement services, and coordination activities for TUPE activities through local educational agencies.

Mr. Herman reported the Teen Tackle Tobacco high school conference took place on February 11, 2016 and for middle school students on March 3, 2016. The focus of the conference was on the dangers of tobacco and vaping, and harmful effects of tobacco use and other drugs on the developing teenage brain. He indicated hundreds of students and TUPE peer educators attended.

Mr. Herman reported smoking cessation groups are offered throughout the state to students and staff through CDE funded projects. Ongoing referrals are also made to the California Smokers' Helpline. All Tier 2 grant recipients are required to provide these services or offer a referral plan to assist these two groups in quitting the use of tobacco.

Mr. Herman reported the Time for Wellness conference was held on May 12, 2016 in Redwood City and was sponsored in part by the local tobacco education coalition. Seven hundred and fifty fourth graders were educated.

Ms. Nguyen reported on the Tobacco-Free and grant databases. She indicated she that electronic cigarette (e-cigarette) data were added to the Tobacco-Free Local Education Administrations (LEAs) certification system; 112 LEAs out of 829 certified LEAs prohibit e-cigarette use in addition to all other tobacco products. Additionally, the database was updated to collect information about award amounts, districts and schools that are funded as consortiums, and reasons grant applications were not funded.

Mr. Lagomarsino indicated the database is useful to understand why a school was not funded in the past.

Ms. Nguyen reported she added an error check to identify school receiving double funding (e.g., through the school directly and through consortium membership). She also reported she added fields for free and reduced lunch and to capture changes in future RFAs.

Mr. Herman indicated the database will be helpful for CDE to monitor future funding and tracking past applications, both funded and unfunded.

Mr. Lagomarsino added that database also has a feature to count the number of schools within a county that are funded, have tobacco-free certification, are providing tobacco education, and how many have a tobacco-free policy.

**General Discussion:**

Ms. Kelley inquired about the number of LEAs in the state.

Mr. Lagomarsino and Mr. Herman responded there are approximately 1,800.

Dr. Ling inquired about the Healthy Kids Survey and whether there are questions currently on the survey that can be used to evaluate the effects of tobacco-free schools or the Tobacco 21 law.

Mr. Herman responded there are no questions on the current survey that can be used to monitor or evaluate the effects of the Tobacco 21 law or the tobacco-free school policy. He indicated that it would be a good idea and that questions could potentially be added to the survey. He also indicated CDE is currently engaging the after school programs to see if they can use parts of the Health Kids Survey to evaluate their own programs.

Ms. Etem inquired about use of data to work on youth development and school tobacco policies that include e-cigarettes.

Mr. Lagomarsino and Mr. Herman responded the majority of the schools that are not certified are charter schools. Mr. Lagomarsino indicated that is something

CDE can consider. He also indicated that the schools that have a smoke-free policy adopted it voluntarily; now it will be required for all public schools, including charter schools, to be smoke and tobacco-free to be certified.

Dr. Ong inquired about the resources CDE has to evaluate the impact of the new laws. He suggested conducting a cohort study if there are sufficient funds. Dr. Ong added that if the tobacco tax passes and there are additional research funds, it will be worthwhile to monitor the kids that have already been surveyed and follow them over time to track tobacco initiation.

Mr. Herman indicated that this would be a great idea; however, the way the survey is designed, CDE would only be able to assess the aggregate cohort and not the individual.

Dr. Ong inquired about additional plans for informing people about the new smoke-free campus policy.

Mr. Herman responded CDE will provide training and education to their county coordinators.

Mr. Lagomarsino added CDE will also upload information onto the CDE website, and work with the California School Board Association to disseminate information about the new law and help them modify their school policies.

Dr. Ong inquired about the cost of signage.

Mr. Herman responded CDE does not think the cost of signage will be an issue this time around. He indicated that anecdotally, LEAs will bear the cost of signage in various ways such as purchasing it under existing budget, or report it as a mandated cost and attempt to get a reimbursement from the California State Controller's office. He also indicated that the cost of signage is high when all the schools are calculated; however, individually the cost of signage is inconsequential.

Ms. Etem inquired about whether the effective date of the smoke-free policy would happen within a school calendar year.

Mr. Herman and Mr. Lagomarsino responded a calendar school year would be reasonable. Mr. Herman also responded that it is a matter of changing existing signs to be consistent with current law, which include e-cigarettes.

**9. UNIVERSITY OF CALIFORNIA OFFICE OF THE PRESIDENT TOBACCO-RELATED DISEASE RESEARCH PROGRAM REPORT**

Dr. Bart Aoki, Dr. Norval Hickman, and Dr. Tracy Richmond-McKnight presented on behalf of the Tobacco-Related Disease Research Program (TRDRP).

Dr. Aoki reported the previous Cycle 25 grant applicants were notified whether they were successful and the contracts will begin July 1, 2016. He indicated that

due to uncertainty about the final May Revise, only a portion of the Cycle 25 applicants were awarded funding. He further indicated the Scientific Advisory Committee (SAC) approved notification of the first set of Cycle 25 applications for funding based on a flat budget from 2015/16. He also reported that if the increase reflected in the final budget is signed and approved by the Governor, then TRDRP will notify the second wave of projects regarding their funding award.

Dr. Aoki reported that in 2016, TRDRP received 111 applications, of which they were able to fund 27. If the increase in the final DOF budget remains after the Governor signs the budget, then TRDRP hopes to increase the number of grantees to approximately 30, which is similar to previous years. The number of projects focused on e-cigarettes has continued to increase over time while other funded categories have remained relatively the same.

Dr. Aoki reported TRDRP hosted a webinar May 26, 2016 entitled *The Triangulum: Tobacco, Marijuana and E-Cigarettes*. He indicated that some of the presentations included *Secondhand and Thirdhand Exposure to Smoke and Vapor*, *The Epidemiology of Poly-Substance Use among Youth and Adults*, *The End Game or a New Game: What Does This All Mean for Tobacco Control*, and *The Triangulum: Tobacco, Marijuana and E-Cigarettes: The Future is Now*. The webinar and the slides are available on TRDRPs website.

Dr. Aoki reported TRDRP was involved in the UC Smoke and Tobacco-free Task Force. President Janet Napolitano agreed to fund Pilot Student Fellowships as part of a broader UC Smoke/Tobacco-Free Initiative. He indicated that Dr. Phil Gardiner will oversee these projects. TRDRP received 23 proposals across the campuses. These applications are being reviewed and within the next few weeks, TRDRP will award four one-year Pilot Student Fellowships.

Dr. Aoki reported Dr. Phillip Gardiner's appointment with TRDRP as a rehired retiree of UC ends on June 30, 2016. Dr. Gardiner will devote his efforts to advancing the UC San Francisco Cancer initiative focused on menthol, and continue to support the UC Smoke/Tobacco-Free Student Fellowships out of the Office of the President. At the end of June 2016, Dr. Gardiner will transition off TRDRP funding. He indicated that it is important to note that while Dr. Gardiner will continue to support the UC Smoke/Tobacco-Free Student Fellowships, TRDRP has made clear delineations between his funding from TRDRP and UCSF to manage any perceived conflicts of interest in the TRDRP funding process.

Dr. Richmond-McKnight reported on TRDRP's Dissemination of Findings of Projects on the Economic and Health Impact of Funding Tobacco Programs. The purpose of this initiative is to inform the public dialogue regarding the impact of funding tobacco control programs, such as the Proposition 99 programs, and the impact that it has on healthcare costs and health outcomes in California. She indicated the initiative is a way to get people thinking about how to fund tobacco control programs. In 2010, TRDRP undertook the Rapid Policy Initiative, which

funded three projects to develop economic models of the impact of a \$1 tobacco tax increase based on Proposition 29. TRDRP funded those same investigators again because their work was published and showed cost and healthcare savings, so TRDRP wanted to update those models with the current prevalence data, consumption rates, and the proposed \$2 tobacco tax.

Dr. Richmond-McKnight reported the projects include the following studies:

- Drs. Jim Lightwood and Stan Glantz at UCSF to predict the effects of a proposed \$2 cigarette tax on prevalence of smoking, cigarette consumption, tobacco control funding (for all three Proposition 99 programs), and health care expenditures in California for the years 2017 – 2020;
- Dr. Wendy Max at UCSF to provide models of the 2016 – 2020 smoking prevalence and attributable healthcare costs if tobacco control funding remains at current level of 5¢ per cigarette pack versus increasing by \$2 per pack; and
- Dr. John Pierce at UCSD to model the 1990-2015 association between smoking behaviors and lung cancer rates in California and compare with the rest of the nation.

TRDRP is anticipating data updates in mid-August and plans are under way to release the project findings at a media event in Southern California in mid-September since that is the part of the state where Proposition 29 experienced the most challenges.

There are two additional projects TRDRP funded a few years ago that are coming to a close. These include Dr. Hai-Yen Sung's study on the economic impact of tobacco taxes on African Americans, which evaluated whether tobacco tax increases are regressive for the African American community; and Dr. Wendy Max's study on the cost of smoking for California's racial and ethnic communities, which estimated the direct and indirect cost of smoking in California among five racial/ethnic groups (Whites, Hispanics, African Americans, Asians, and Other [American Indian/Alaska Natives, Pacific Islanders, and Multi-racial groups]). Dr. Richmond-McKnight indicated TRDRP is anticipating releasing the data at a media event in early to mid-September in the Los Angeles area because, again, that is where Prop 29 experienced the most challenges. Dr. Richmond-McKnight reported TRDRP is asking for recommendations for the best way to release the data to ensure the findings reach the people who are affected by tobacco use. TRDRP is also interested in connecting the release to other health and health equity forums to ensure the findings are heard.

Dr. Hickman reported on reaching underserved smokers through a community practice-based research planning funding award. TRDRP funded an RFA in 2014 to evaluate smoking in clinical settings and TRDRP will re-release the RFA in early July 2016 to focus on mental health illnesses. Dr. Hickman indicated that while TRDRP could focus on any issue, it chose to emphasize the high prevalence of tobacco use among this priority population. Individuals with mental health illnesses have much higher prevalence of smoking, die on average 25 years prematurely, spend approximately 27% of their monthly income on tobacco

products, are rarely referred for tobacco treatment in inpatient and outpatient settings, and suffer from the common perception among mental health professionals that tobacco use can be a helpful coping tool and quitting could worsen psychiatric symptoms.

Dr. Hickman reported this funding mechanism will provide a planning award with a goal of building long-term relationships between researchers and health care practitioners. TRDRP hopes to collaborate to conduct research that will improve the delivery of tobacco cessation therapy in clinical settings services that reach the Medi-Cal populations throughout the state. Dr. Hickman indicated the planning award includes a 2-year planning phase to build the consortium, to build the partnerships, and to conduct a health service research project across multiple clinics. If all goes well in the 2-year grant, the grantee would reapply for a 3-year implementation phase grant to scale up the project. The goals of the project will include generalizability, developing systems change to overcome barriers, accountability, and diversity among partners.

Dr. Hickman reported three proposals were submitted and three grants were awarded: 1) Ending Tobacco Use in High Risk, Low-Income Smokers, which was submitted by Drs. Joseph Gudysh and Maya Vijayaraghavan of UCSF and Ana Valdes of San Francisco Health Right 360; 2) Building Tobacco Cessation Connections across Los Angeles County, which was submitted by Drs. Elisa Tong and Susan Stewart of UC Davis and Hal Yee of Los Angeles County Department of Health Services; and 3) Building Tobacco Cessation Connections Across Los Angeles County, which will develop a Consortium between UC Davis, the Los Angeles Department of Health Services, and the Helpline.

Dr. Aoki reported TRDRP will release Cycle 26 call for applications on July 7, 2016. TRDRP is working on updates, particularly the changing landscape in California and the need to make people aware of those changes through research and evaluation projects related to the new laws. TRDRP is opening a new mechanism for conference awards that will enable individuals to submit applications for conference grants that are topic area focused. He indicated that opening this funding mechanism will enable agencies to co-sponsor another statewide conference in California. Dr. Aoki reported TRDRP is planning several policy research dissemination events in Southern California in August and September. He also reported the Cycle 26 Letters of Intent are due to TRDRP in September and the applications are due December 8, 2016.

#### **General Discussion:**

Dr. Ling inquired about whether TRDRP would consider adding the question, "Does your organization have a smoke-free policy" in the grant application in an effort to get applicants thinking about adopting smoke-free policies.

Drs. Aoki, Hickman, and Richmond-McKnight responded that, while the current grant application does not inquire about the organizations' smoking policy, adding a question in the future would help track and assess the tobacco control behavior of organizations that receive TRDRP funds.

Dr. Ling also inquired about scheduling an earlier notification for applicants for the UC Smoke/Tobacco-Free Student Fellowships because the late May notification is inconvenient for postdoctoral fellows who are making plans as their fellowships are ending.

Dr. Aoki responded TRDRP may be able to adjust notifications about the traineeship awards.

Dr. Ong inquired about whether the mechanism for the process to review and score the awards would be different from in past years.

Dr. Aoki responded TRDRP has a process in place where the grants are reviewed by at least two reviewers.

Dr. Ong suggested it may be helpful to follow-up with Dr. Zhang and CDE to highlight potential resources that could be leveraged for doing the future evaluations.

Dr. Hickman responded it may be helpful to educate TRDRP reviewers about the new laws because none of the reviewers are based in California.

Dr. Aoki added that Dr. Zhang sits on the SAC and she is sharing information about the CTCP evaluation plan that can also be a resource to leverage.

Ms. Etem inquired about the impact of Dr. Gardiner's departure on TRDRP's involvement in discussion about the overlap of tobacco, marijuana, and e-cigarettes.

Dr. Richmond-McKnight responded that this is being determined and TRDRP is dividing his work among the remaining staff.

#### **10. Public comment**

There were no public comments.

The meeting was adjourned at 3:56 pm.