

## **Potential National Agenda Items Considered, Items Selected and Charge to Task Groups**

### **Potential National Agenda Items Considered:**

1. Improve Joint Commission tobacco measures for hospitals
2. Increase insurance coverage and reimbursement for FDA-approved medication and counseling
3. Create a Uniform Data System (standard ways to measure in electronic records systems)
4. Create and implement marketing strategies that target clinicians; promote tobacco use interventions as a “Standards of Care”
5. Identify clinician education strategies, goals and standards (physicians, other), including incorporating tobacco dependence treatment into medical education
6. Recognizing that traditional intervention techniques (brief interventions, etc.) may not be effective in all populations; identify intervention techniques that can be applied with success in disparate populations and diverse communities (what works for different tobacco users – brief intervention + prescription, telephone, face-to-face, web-based, etc.)
7. Definition of treatment and treatment models (possible options for translating the PHS guidelines into different settings – who does what to whom when – unique models that can be compared and evaluated)
8. Sustainability (part of this discussion was about retrieving master settlement money and allocating federal/state tobacco tax income)
9. Influencing Healthy People 2020

### **Items Selected:**

There are 4 national agenda items that emerged as highest priority:

- 1) The highest one is # 2 (increase ins. Coverage and reimbursement) with 22 votes.
- 2) The second is # 9 (healthy people 2020) with 15 votes.
- 3) The third is the combined #4/5 (marketing strategies/ clinician education), which will break into two per below.
- 4) #1 one had 14 votes (JCAHO measures).

### **Task Force Members:**

Linda Bailey (NACQ) volunteered as co-lead for # 9 (Healthy People 2020) with Annie Biegel (NY). The other members are Joyce Swetlick from Ohio and Mary Ellen Casey from Rhode Island.

David Willoughby and Ann Wendling volunteered to take on # 2. (MN) They will be assisted by Mike Renner – Ohio; Michelle Patarino and Deb Montgomery – CO; Todd Hill – VT; Deb Hrouda – Ohio; Elena List – MA; Linda Bailey – NAQC.

Teresa Brown with the help of Karen Madore and Ellen Prior from New Hampshire volunteered to be the lead for #4—Clinician education component. Donna Warner, John Bry and Anna Landau from MA volunteered to take the lead on #4- Marketing to clinicians. Because #4 includes two different components/strategies, these groups will

function separately as #4 and #5 task groups. An email will be sent out to apprise those who volunteered and to recruit members for each task group. Others signing up for Clinician Ed/Marketing were Esther Bake from Iowa, Ted Marcy from VT.

The audiotape did not capture who is the lead for # 1 JCAHO. We believe there were no takers for this one. If you think otherwise, please let us know.

**Charge:**

The next step would be to clarify these issues in more detail. The clarification questions you need to address are:

- 1) further define each issue and its current status, what problem are we trying to solve;
- 2) What can we do that would be specific, realistic and achievable? Is it feasible?
- 3) How do we measure progress towards this objective?
- 4) what allies or other constituencies do we have to help us make things happen or should we involve? This includes talking to some of the potential allies or some of the other groups in the country working on this to get their assessment of feasibility of what they are doing and whether they are willing to kick something in. Talk to them and actually get some feedback.
- 5) who or what might drive this change and can we muster those forces?
- 6) what it would take in terms of resources to implement?
- 7) Timeline for tasks. The timeline for Healthy People 2020 input is coming up in May or June.
- 8) Recommendations. It would be helpful if the subgroups came back and said here's where we fall on this. We think this is something worth going after. It's something that's feasible.