State of California | Department of Consumer Affairs

Memorandum

To: **Board Members** **Date: July 6, 2004**

From: **Communication and Public Education Committee**

Subject: **Committee Activities – July Board Meeting Update**

The Communication and Public Education Committee met June 7, 2004, in a public meeting held in the board's conference room. Minutes of this meeting are provided in this tab section as Attachment A.

Also provided at the end of this tab section is the quarterly update report to the board on the committee's strategic objectives.

Action Items:

Recommendation 1: Join the California Health Communication Partnerships as a founding member.

Background:

The UCSF's Center for Consumer Self Care is forming an organization comprised of agencies that develop consumer health education programs and materials. Called the California Health Communication Partnership, this group would develop and promote consumer health education programs and activities developed by the member organizations in an integrated fashion. The board has been invited to join as a founding member.

R. William Soller, Ph.D., director of the Center for Consumer Self Care, will attend this board meeting to present the project proposal. A written description is provided as Attachment 1.

The California Health Communication Partnership would identify health communication programs and recommend the timing for activities by individual partners on the programs. The partnering organizations would decide if and how they will use their resources to promote the health communication themes suggested.

There would be minimal cost to the board of joining, and one benefit would be the production and/or promotion of health education materials for the public.

Recommendation 2: The Board Endorse the California Tobacco Control Alliance's "Smoking Cessation Benefits Everyone" Campaign.

Background:

At the April Board Meeting, the board voted to work with the UCSF School of Pharmacy to produce a future *Health Notes* on smoking cessation. Before making this recommendation to the board, the committee reviewed materials produced the California Tobacco Control Alliance for primary care practitioners, which they call a "Health Care Provider's Tool Kit for Delivering Smoking Cessation Services."

The board has been recently asked to join the California Tobacco Control Alliance's campaign to encourage managed care providers to cover uniform smoking cessation benefits in standard health care packages. This is part of the alliance's mission to reduce the number of smokers.

Materials describing this proposal are provided in Attachment 2.

Information Items

Item 3. Update on Project with UCSF's Center for Consumer Self Care on the Development of a Consumer Fact Sheet Series

Background:

At the April Board Meeting, the board approved a proposal by the committee to integrate pharmacy students into public outreach activities. At the June committee meeting, R. William Soller, Ph.D., of the UCSF Center for Consumer Self Care participated in a discussion on implementing this proposal.

The project will have students develop one-page fact sheets on diverse health care topics. The board will work with Dr. Soller to develop these fact sheets, using pharmacy students from UCSF and UCSD. A prototype format for a series of fact sheets will be developed. Each interested student will be acknowledged with a credit at the bottom of the fact sheet he or she develops. Review by professional staff at UCSF for content accuracy will occur as part of the process.

The goal is to develop three fact sheets per quarter. After one year and 12 fact sheets, the Communication and Public Education Committee and the Center for Consumer Self Care will reevaluate the project.

The committee will explore translating the fact sheets into different languages.

Item 4. Update on *The Script*

Background:

The March 2004 issue of *The Script* was mailed to California pharmacies at the end of March. A copy is on the board's Web site. This issue focuses on the many substantial changes to pharmacy law that took effect in 2004 (e.g., changes in the prescribing and dispensing of controlled substances, new pharmacy technician requirements, new pharmacist licensure examinations).

The CPhA's Pharmacy Foundation of California mailed the issue to California pharmacists in early June.

The hiring freeze ended June 30, 2004. The board intends to hire former newsletter editor Hope Tamraz as a retired annuitant to produce the next issue of *The Script,* which should be published in September.

Item 5. Update on *Health Notes*

Background:

Health Notes is a monograph, produced by the board, that contains up-to-date drug therapy guidelines for a specific subject area. Because *Health Notes* is produced by the board, it conveys what the board believes is current drug treatment in a particular area. Pharmacists can earn continuing education credit by completing a test published at the back of the monograph. Thus the board provides information and actually is sponsoring CE in an area of importance to the board. Seven issues have been produced since 1996.

<u>Pain Management Issue:</u>
The board is currently developing a new issue on pain management, which should be published in mid 2004, probably September. The new issue will contain new pain management therapies and the new prescribing and dispensing requirements for controlled substances. It is planned as an interdisciplinary issue for pharmacists as well as physicians, dentists, and nurse practitioners. Prominent pain management authors have written the articles, and board staff and Board Member Schell are editing and coordinating the issue. The CSHP is seeking funding for production and mailing costs. Depending on how many grants the CSHP obtains for this issue, the board hopes to spend $0 on this issue.

Smoking Cessation

At the April 2004 Board Meeting, the board agreed to work with the UCSF to develop a *Health Notes* on smoking cessation. The UCSF is seeking funding for this issue from manufacturers of smoking cessation products.

The board will be responsible for the layout and design of the issue. If funding permits, the board will print and mail the issue. If the board lacks funding for this ($85,000), the issue will be placed on the board's Web site.

UCSF Monograph on Atrial Fibrilation

At the April 2004 Board Meeting, the board voted to become a cosponsor with the UCSF School of Pharmacy to produce a monograph on Atrial Fibrilation. The audience would be pharmacists and physicians. Funding for this issue would come from a drug manufacturer. Continuing education credit for those who complete the reading would be one outcome of this project.

The UCSF intends that in place of publishing this issue as a printed monograph (such as *Health Notes*), to instead place the issue on the Web site for downloading, possibly as a CE program. There would be no direct costs to the board.

Item 6: Establishment of Internet Subscriber Lists for Board Materials and Information

Background:

Staff is waiting for the Department of Consumer Affairs to install software to permit the board to set up a subscriber list on the board's Web site. This feature would send e-mails to interested parties announcing that the board's Web site has been updated. The interested parties would subscribe themselves to the board's Web site, and be responsible for keeping their e-mail addresses current.

This service has the potential to substantially reduce the board's mailing expenses as well as printing costs. Materials that the board currently publishes and mails could be sent without cost via e-mail. Such a notification system would allow the board to update licensees far more quickly about new information and laws.

After being contacted by the board, the Department of Consumer Affairs has recognized the value of such software, and is interested in pursuing this for the rest of the department. The board will be the first agency to use the software, and this should be implemented in the end of July.

Item 7: Public Outreach Activities

Background:

The board had implemented and provided a sizeable and significant public outreach and licensee education program this year. This is a dynamic area of board activities and relies heavily on the involvement of board members and senior board staff.

The board attended two public education fairs since the April Board Meeting.

The board continued to present its revised Powerpoint presentation on the board that highlights key board policies and pharmacy law. This is a continuing education course, provided by a board member and a supervising inspector. Questions and answers typically result in a presentation of more than two hours; these presentations are well-received by those in attendance.

Additionally the board has had increasing interest in its Powerpoint presentations on SB 151 and the new requirements for prescribing and dispensing controlled substances in California.

Public outreach activities performed since the April 21, 2004 Board Meeting:

- The board staffed a booth at Healthy Aging 2004 in Sacramento on May 22, 300 people attended.
- The board staffed a booth at the Senior Health Fair in Yreka on May 12. Over 150 consumers were in attendance.

Outreach activities to licensees and other professional groups:

- Board staff presented information on prescribing and dispensing controlled substances under the new California requirements on April 13 to a teleconference of pain management specialists, on April 20 to the Academy of Long Term Care, and on April 22 to 25 attendees at a DHS Public health Grand Rounds.
- Board Members and staff presented the board's CE program at a May 13 meeting of the San Diego Pharmacists Association Meeting.
- Board President Jones and staff presented information on the new examination process for pharmacists and the board's Power Point presentation to 200 UOP students on May 13.
- Board President Jones and staff presented information on the new examination process for pharmacists and the board's Power Point presentation to 50 Loma Linda students on May 11

- Board Members Jones and Goldenberg and staff presented information on the new examination process for pharmacists and the board's Power Point presentation May 20th at USC's School of Pharmacy to 100 people.
- Board staff presented information on the new examination process for pharmacists and the board's Power Point presentation April 29 to Western School of Pharmacy and 115 students.
- Board Staff presented information about prescribing and dispensing controlled substances under the new California requirements to 25 pharmacists in Sacramento on April 28.
- Board staff presented information about prescribing and dispensing controlled substances under the new California requirements in a telephone conference to 1,296 individuals on May 19.
- Board staff presented information on prescribing and dispensing controlled substances under the new California requirements via a telephone conference announced on the board's Web site on May 21.
- Board staff presented information on prescribing and dispensing controlled substances under the new California requirements to the San Luis Obispo County Narcotic Task Force on May 28.
- Board member Tilley presented information about prescribing and dispensing controlled substances under the new California requirements to HMO pharmacy mangers and physicians in Los Angeles on May 28.
- Board staff presented a segment on pharmacy issues to staff of the Department of Health Services on June 1.
- Board staff presented information on prescribing and dispensing controlled substances under the new California requirements to150 physicians and others at Memorial Care Hospital in Anaheim on June 8.
- Board Member Jones attended a discussion session hosted by the Pharmacy Foundation of California on importation.
- Board Member Jones and staff did a presentation to the Korean Pharmacists' Association on June 19
- Board Member Fong presented the board's Power Point presentation to 50 pharmacists at a UST Pharmacy Alumni Association meeting June 24.
- Board staff did a presentation to DHS' Audit and Investigation Staff on June 30.
- Board staff did the board's Powerpoint presentation on SB 151 to 25 pharmacists at a Sacramento pharmacists association meeting.

Future Presentations

- Board President Goldenberg will present information about the board at the California Chapter meeting of the American Society of Consultant Pharmacists in San Diego, September 13.
- Supervising Inspector Robert Ratcliff has been asked to give the keynote address at CSHP's 2004 Seminar in Long Beach, November 2004

- Board President Goldenberg will present information on drug importation to the CSHP's 2004 Seminar.
- Board staff will present an "Update and What's New in Pharmacy Compounding" at the CSHP's 2004 Seminar in Long Beach in November 2004.
- Board Member Jones will present a section at the CPHA's Outlook 2005 Meeting in San Diego in February.

Attachment 1

Project Proposal from UCSF's Center for Consumer Self Care

California Health Communication Partnerships

California Health Communication Partnerships

Working Together to Enhance Consumer Health Communication

Concept Paper for a Program Initiative of the

UCSF Center for Consumer Self Care
3333 California Street
San Francisco, CA 94143-0613
Executive Director: R. William Soller, Ph.D.
(415) 502-7633; soller@itsa.ucsf.edu

Mission

The mission of California Health Communications Partnerships will be to align temporally the promotion of similar consumer education programs of health professional organizations and government agencies in California to amplify impact and awareness.

Vision

While maintaining the individuality of California Health Communications Partners (CHCP) in developing and promoting their own consumer health education programs and activities, the synergy of effort by the Founding Partners to field annually several shared health communication programs, which are appropriately tailored to each organizations needs, capabilities and mission, will improve the health status of Californians.

Who and What We Are

The California Health Communications Partners will be composed of state-wide and national organizations and government agencies with interest and/or public programs in health communications. Through a Steering Committee, they identify possible health communication programs and recommend the timing for activities by individual partners on these programs. The partnering organizations decide if and how they will utilize their resources to promote the health communication themes suggested by the Steering Committee.

Founding members of the Partnership include (listed alphabetically):

- California Board of Pharmacy (pending Board approval)
- California Medical Association (pending Board approval)
- California Pharmacists Association (pending Board approval)
- California Society of Health-System Pharmacists (pending Board approval)
- Food and Drug Administration
- Medical Board of California (pending Board approval)
- UCSF School of Pharmacy
- UCSF Center for Consumer Self Care (coordinating group)

Other groups, invited to join as Founding Partners, include:

- California Department of Consumer Affairs (meeting: 5/26/04)
- National Consumers League (invited, meeting being planned)
- State of California Board of Registered Nursing
- California Retailers Association

Individuality of Organizations

It is important to the success of the CHCP that each organization maintain its individuality in how it creates, refines and/or disseminates materials relating to the theme suggested by the Steering Committee. While partnering organizations would agree to basic common messages in the public education materials, how those messages are tailored to permit the "signature" of the participating organization is important to maintain, for these reasons:

- Every organization with a health communication outreach to the public and to health professionals understands the nature of their target audience.
- It is important in reinforcing a health message to consumers that the same thematic, even the same warning, should be repeated in different ways and through different media.
- The participating organizations in the CHCP have different strengths in how they communicate with their public and/or their members.

How the CHCP Works Together

Partners of the California Health Communication Partnerships volunteer their resources in helping to plan to scope of activities of the Partnership and to disseminating materials to their members and/or target audiences.

Materials used by the Partnership may include: those created by individual Partners or shared with attribution among Partners; and those created by outside organizations. The Partnership Steering Committee reviews materials for objectivity, if those materials are to be used by Partners with mention of an affiliation to the Partnership.

Potentially, educational grants could be received to help fund certain of the efforts of the Partners. Collaboration on applications for funding could help lend credibility weight in the granting process.

Criteria for Partnering

1. Partners are health professional organizations and government agencies and other non-profit organizations with interest in participating in joint health communication strategies.

2. Partners have determined that there are mutual advantages to sharing development of health communication activities, while maintaining individuality in their delivery.

3. Development of themes and materials used in the Partnerships joint programs may derive from government, private and other sources, provided these programs have independent peer review for content, accuracy, nature of presentation,

objectivity, linkage to significant public health problem needing joint efforts, and conflict of interest.

4. The method of contributing to the Partnership by an organization can be through participation on the Steering Committee, participation in peer review, creation of materials to be shared, and dissemination of materials through the organization's own outreach and public promotional efforts and techniques.

5. Potential avenues for temporally-synchronous dissemination of materials by the Partnership include, but are not limited to:
   - web site linkage
   - public announcements in "What's New" on web sites
   - incorporating shared messages in a partner's web site
   - creation of a portion of the Partner's web site to house partnership messages
   - direct mailing or e-mailing to members or target audience of the partnering organization
   - inclusion of the health communication message/materials in a Partner's newsletter
   - preparing standard article on the health message/materials for use by member affiliates
   - contacting local media to multiply reach
   - among other possible avenues of communication.

6. Finally, participation in the California Health Communication Partnerships will be voluntary, and there is no legal or other obligation or requirements imposed by organizations who otherwise agree to the criteria for the Partnership

Impact Metrics The impact of the Partnership will be estimated initially by reports from the Partners on their scope and extent of their participation on each joint program. This will include, if available from the Partners, the number of individuals who access their sites, the number of individuals on mailing or email lists, media uptake of the messages, etc. Partners will be asked to do a baseline survey of the reach of their health communications program.

Coordinating Group The UCSF School of Pharmacy Center for Consumer Self Care will serve as the coordinating arm of the CHCP. The Center's Executive Director will be on the Steering Committee and will be responsible for organizing meetings and tracking CHCP activities. Meetings of the Steering Committee will be held at the offices of the committee members on a rotating basis. Grant writing and submission with Steering Committee review will be done by the Center's director, who has experience in this area.

Attachment 2

California Tobacco Control Alliance

Proposal to Endorse "Smoking Cessation Benefits Everyone" Campaign

California Tobacco
Control Alliance

RECEIVED BY CALIF.
BOARD OF PHARMACY

2004 MAR 29 PM 2:06

March 26, 2004

Virginia Herold
California State Board of Pharmacy
400 R Street, Suite 4070
Sacramento, CA 95814

Dear Virginia:

Thank you for the opportunity to distribute and discuss our "Health Care Provider's Tool Kit for Delivering Smoking Cessation Services" with the Communication and Public Education Committee. Per your request, enclosed are additional copies for your upcoming Board Meeting.

While the Tool Kit was not developed for the pharmacy setting, we believe there are useful tools and information in the Tool Kit that pharmacists would benefit from receiving. If your Board decides it would like to distribute the Tool Kit to pharmacies we would be pleased to work with you.

I want to take this opportunity to tell you about another project of the Alliance. While the Tool Kit is increasing provider's capacity to deliver smoking cessation services, the Alliance also recognized the need to increase consumer demand that cessation services be available and delivered. To that end, the Alliance launched ***Smoking Cessation Benefits Everyone***, a public action campaign to advocate that managed care plans adopt the model as part of standard benefit coverage. The campaign targets consumers, health care purchasers and organizations committed to improving health care in California.

Your organization is a key partner in reaching our goal. We will rely on our supporters to help spread the word and increase demand for services that reduce the costly economic and health care impact of smoking in our state. Securing the support of organizations such as the California State Board of Pharmacy will demonstrate the commitment of public health, health care and tobacco control leaders in improving coverage of effective cessation services and treatments. Organizations that endorse the campaign will be listed in publications and asked to participate in ongoing campaign activities. Suggested ways your organization can actively participate in the campaign include:

1. Publish an Article in Your Newsletter
2. Link to the SCBE Website
3. Email Volunteers/Members, Staff, Partners and Stakeholders About Your Involvement

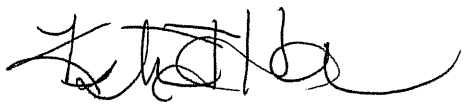
Enclosed are a list of endorsing organizations, an Endorsement Form and a bookmark promoting the campaign. Please visit www.cessationbenefitseveryone.org to see our website where visitors

980 Ninth Street, Suite 370 • Sacramento, CA 95814 • Tel (916) 554-0390 • Fax (916) 554-0399
www.tobaccofreealliance.org

can sign a letter addressed to health care leaders that encourages health plans to include the services in basic health benefits

Thank you again for the opportunity this morning. Please contact me if you would like us to attend the April 21 Board Meeting and with any questions regarding the ***Smoking Cessation Benefits Everyone*** campaign at 916.554.0390.

Sincerely,



Kirsten Hansen
Associate Director

ENDORSING ORGANIZATIONS

American Cancer Society, California Division, Inc.

American Heart Association

American Lung Association of California

Asian and Pacific Islander American Health Forum

California Academy of Physician Assistants

California Department of Education, Safe and Healthy Kids Program Office

California Medical Association

California Smokers' Helpline

California Thoracic Society

C-BEACH

Center for Health & Public Policy, School of Public Health, University of California Berkeley

Integrating Medicine and Public Health (IMAP) Program

Medical Oncology Association of Southern California

Association of Northern California Oncologists (ANCO)

San Luis Obispo Tobacco Control Coalition

Thunder Road

Tobacco Litigation and Enforcement Section, Office of the Attorney General of California

USC/IPR Hispanic/Latino Tobacco Education Network

Smoking Cessation Benefits Everyone is a project of the California Tobacco Control Alliance.

980 Ninth Street, Suite 370 • Sacramento, CA 95814 • Tel (916) 554-0390 • Fax (916) 554-0399
www.cessationbenefitseveryone.org

STATEMENT OF SUPPORT AND ENDORSEMENT

The Problem

For more than a decade, prevention and education programs have changed the social norm around smoking in California. As a result, smoking is less acceptable, less accessible and less desirable. The percentage of smokers in California making a quit attempt increased from 25% in 1990 to 61.5% in 1999. Unfortunately, those attempts have not led to an increased rate of successful quitting. Given the relatively flat smoking prevalence, it is clear that a new strategy is needed to help the state's four million smokers quit.

The Solution

Engaging the health care community is the next important step. Although more than 70% of smokers visit a physician at least once a year, only 31% of California smokers report that they received advice to quit and a referral to help them do so from their health care provider. *Without support or health care services, long-term success rates for smokers attempting to quit are only about 5%.* More reliable access to tobacco dependence treatments - medications and behavioral treatment programs – is critical for smokers to be successful in quitting.

The California Tobacco Control Alliance (Alliance) is leading an initiative to increase access to tobacco dependence treatments in California's managed care organizations. With 21.4 million Californians enrolled in managed care organizations, the managed care system provides the chance for broad reach for cessation services. By developing a model insurance benefit based on the United States Public Health Service *Treating Tobacco Use and Dependence* clinical guidelines, the Alliance is encouraging managed care organizations to collectively raise the bar for smoking cessation coverage in the state.

When California's managed care organizations collaborate to cover uniform cessation benefits in standard health insurance packages, everyone wins:

- Health insurers benefit by leveling the playing field and eliminating disincentives for one plan to invest in preventive care programs that its competitors avoid;
- Health professionals benefit by being able to reliably deliver and recommend effective, evidence-based treatments to all patients, across all health insurance carriers;
- Smokers benefit by having access to treatments that significantly improve their success quit attempts; and
- All health care consumers in California benefit by saving money and saving lives when more smokers quit.

Therefore, we endorse the Alliance in its public action campaign – ***Smoking Cessation Benefits Everyone*** - to increase access to smoking cessation services, increase the capacity of the health system to deliver smoking cessation services, and reduce smoking prevalence in California. Count on our organization to: (please check all that apply)

- ☐ Authorize the use of our name and logo in campaign materials.
- ☐ Share information about the Alliance's public action campaign in communications to our members including newsletters, email alerts, electronic updates, meeting materials, etc.
- ☐ Share our membership mailing lists with the Alliance.
- ☐ Work with the Alliance to mobilize our members to take action as part of the campaign.

Signature _____ Date _____

Printed Name and Title _____

Organization (as it should be listed in printed materials) _____

Smoking Cessation Benefits Everyone is a project of the California Tobacco Control Alliance.

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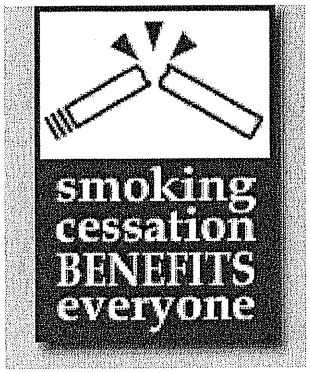
www.cessationbenefitseveryone.org

smoking cessation BENEFITS ev



90% of smokers started as teenagers.

ESPAÑOL

learn more

Remember, 90% of smokers started smoking as teenagers. Further, 75% of smokers say they would like to quit. In fact, 61.5% of California smokers made a quit attempt in 1999. This is a 25% increase in smokers making a quit attempt since 1990. Unfortunately what has not increased is the success rate. California has passed clean indoor air policies and raised tobacco taxes to encourage smokers to quit. Our next step is to increase smokers' access to effective cessation services and treatments.

Everyone wins when smokers have access to treatments and services to help them quit. Every Californian pays the cost of smoking through increased insurance rates, health care services and lost productivity. In fact, the cost of smoking is $475 per Californian per year.

Annually, 75% of the four million smokers in California want to quit, but less than 25% are successful every year. Why isn't the rate of successful quitting higher? Addiction to nicotine has been compared to addiction to heroin for some smokers. Quitting is hard. No one would suggest to a heroin addict that they quit without help. Yet, smokers are often expected to quit on their own. Without help or quitting "cold turkey," success rates are about 5 percent.

Fortunately there are proven smoking cessation services and treatments that can double or even triple a smoker's quit rate. Comprehensive smoking cessation programs include coverage for behavior therapy, such as individual or group counseling, and medications, such as the patch, the gum or prescription medications. Currently, most health plans in California do not include comprehensive quit smoking treatment in their standard benefit packages. In an effort to level the playing field and provide access to services for all smokers, the California Tobacco Control Alliance has developed a **model smoking cessation benefit (PDF-48K)** that provides coverage for behavioral therapy as well as medications. The goal of the Smoking Cessation Benefits Everyone campaign is to encourage health care leaders to include cessation services as a covered benefit in basic health insurance.

Covering smoking cessation services by health plans is politically and fiscally sound and is fair public policy. Continued smoking costs us all money and lives on a daily basis. Making effective services and treatments available to California smokers benefits everyone by reducing health care costs and providing for a healthier California.

For more information on the California Tobacco Control Alliance visit **www.tobaccofreealliance.org**.

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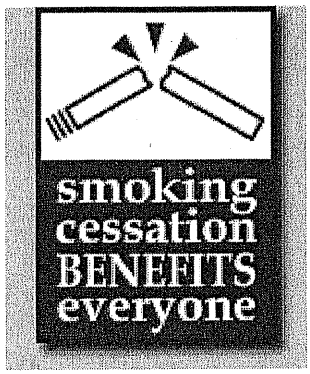
smoking cessation BENEFITS ev



Attention Employers and Health Plan Representatives
For more information on the campaign, please contact the California Tobacco Control Alliance at 916.554.0390 or **email us**. We look forward to working with you!

The cost of smoking in California is $475 per Californian.

ESPAÑOL

the problem

Health care costs in California are skyrocketing. Costly treatment for long-term chronic diseases, expensive medication costs, high rates of uninsured individuals and many other factors are driving health care costs up. In addition, preventive services, which have the potential to save money, are not a leading priority in today's health care system.

a solution

Coverage of an effective, cost-saving, preventive treatment — **Universal access to stop smoking services.** Quitting smoking prevents many costly diseases and has been deemed the GOLD STANDARD of preventive interventions. Using proven treatment, including medications and counseling services, can double and even triple a smoker's quit rate. Including comprehensive smoking cessation benefits as a standard part of all health insurance packages benefits everyone. **Learn more...**

what you can do

Encourage health plan executives to prioritize coverage of stop smoking medications and services. Sign the letter below to have your voice heard! We will forward all letters to health plan executives to demonstrate the grassroots support for this policy change.

Dear California Health Care Leaders,

I urge you to implement the California Tobacco Control Alliance's model smoking cessation benefit into standard health benefits. With your leadership we can reduce health care costs derived from smoking in our state. Implementing the model benefit will:

1. Increase access to services that can double smokers quit rates
2. Decrease the annual $8.6 billion price tag for smoking-related health care costs in California
3. Provide cost-effective treatment — Treating tobacco dependence has been deemed the "gold standard" of preventive interventions — and can be provided for as little as $.25 per member/per month
4. Prevent costly chronic diseases and illnesses including heart disease, cancer, emphysema, osteoporosis, respiratory illness, pneumonia, low birth weight babies and perinatal deaths

We all have a part to play in helping smokers quit. As a health care consumer, I want smokers to be given assistance when they quit, so we can bring the financial and health costs down. As a Californian, I am proud that California has led the way in clean indoor air ordinances, programs to prevent kids from starting to

Attachment A

Minutes of the Meeting of June 7, 2004

California State Board of Pharmacy
400 R Street, Suite 4070, Sacramento, CA 95814
Phone (916) 445-5014
Fax (916) 327-6308
www.pharmacy.ca.gov

STATE AND CONSUMERS AFFAIRS AGENCY
DEPARTMENT OF CONSUMER AFFAIRS
ARNOLD SCHWARZENEGGER, GOVERNOR

Communication and Public Education Committee

Minutes of the Public Meeting of June 7, 2004
Board of Pharmacy
400 R Street, Suite 4080
Sacramento, CA
9:30 – 12 noon

Present: Bill Powers, Board Member and Chairperson
Richard Benson, Board Member
Ken Schell, Board Member
Patricia Harris, Executive Officer
Virginia Herold, Assistant Executive Officer

Absent: James Acevedo, Board Member

Call to Order

Chairperson Powers called the meeting to order at 9:35 a.m.

Development of Consumer Fact Sheet Series with UCSF's Center for Consumer Self Care

At the April 2004 Board Meeting, the board approved a proposal by the committee to integrate pharmacy students into public outreach activities.

At this meeting, R. William Soller, Ph.D., of the UCSF Center for Consumer Self Care participated in a discussion with the committee on implementing this proposal.

The project will have students develop one-page fact sheets on diverse health care topics. The board will work with Dr. Soller to develop these fact sheets, using pharmacy students from UCSF and UCSD. A prototype format for a series of fact sheets will be developed. Each interested student will be acknowledged with a credit at the bottom of the fact sheet he or she develops. Review by professional staff at UCSF for content accuracy will occur as part of the process.

The goal is to develop three fact sheets per quarter. After one year and 12 fact sheets, the Communication and Public Education Committee and the Center for Consumer Self Care will reevaluate the project.

The committee will explore translating the fact sheets into different languages.

Request from UCSF Center for Self Care to Join California Health Communication Partnerships

Dr. Soller, of the Center for Self Care, invited the board to join as a sponsor and participant in the California Health Partnerships. The purpose of this group is to improve the health of Californians by developing and promoting consumer health education programs and activities developed by the members in an integrated fashion. Dr. Soller distributed a concept paper to the committee, that will be shared with the board.

The partnership will meet periodically to share information about consumer education and outreach materials and to each year develop several shared health communication programs.

As a founding member, the board would be one 12 agencies, including the Department of Consumer Affairs, the CA Medical Association, the FDA, the CPhA and CSHP. The agencies have interest and or public programs in health communications.

The partnership will have a steering committee of founding members, who will select general topics. But each participating agency will be free to develop materials of its own choosing. The partnering organizations agree to common themes, but how the messages are tailored by each organization will be left to the participating organizations.

The first meeting is planned for July or August.

The committee was interested in the suggestion organization, and asked Dr. Soller to come to the board meeting to present the proposal there. Dr. Soller agreed.

Motion: Joint the California Health Communication Partnerships as a founding member

Request from the California Tobacco Control Alliance to Endorse their Smoking Cessation Campaign

At the last Communication and Public Education Meeting, the California Tobacco Control Alliance attended and provided its "Health Care Provider's Tool Kit for Delivering Smoking Cessation Services." The committee reviewed this kit, and thought that it would be beneficial for physicians or nurse practitioners who provide primary care services to patients. However, the kit would not be so useful for most pharmacists. Following the committee's recommendation, at the

April Board Meeting, the board voted to work with UCSF to develop a *Health Notes* for pharmacists.

The California Tobacco Control Alliance recently invited the board to endorse a campaign to encourage managed care providers to cover uniform smoking cessation benefits in standard health care packages. This is part of the alliance's mission to reduce the number of smokers.

The committee discussed this concept and agreed it would be beneficial to aid in the dissemination of smoking cessation materials.

Motion: Become an endorser of the California Tobacco Control Alliance's "Smoking Cessation Benefits Everyone Campaign"

Public Education for Patients Who Need to Request Prescription Labeling in a Language Other than English

The board produces consumer education materials to aid the public in learning how to take their medications optimally, to gain the maximum benefit from their prescription drug regimens, and to enhance their quality of life.

At the committee's January 2004 meeting, the committee discussed how certain patients could benefit by requesting specialized prescription labels on their medication containers so that those who cannot read English or those who are visually impaired can receive their medications in containers they can read. Whereas this was not a suggestion for a mandate for labeling in a patient's native language or to accommodate a patient's visual needs, in those cases where the pharmacy can readily provide such a label, the proposal is to educate patients that they should ask for such labels on their prescription medications.

The committee discussed this subject at length, and suggested that the California Health Communication Partnerships may be interested in this topic. There are a number of issues related to this topic including patient literacy, its impact on patient medication compliance, and packaging of pharmaceuticals to aid in patient medication compliance.

The committee suggested that a new consumer fact sheet could be developed in this area, urging patients to ask for specialized labels when they need them

The committee reviewed recently published information on patient literacy from the federal Agency for Healthcare Research and Quality (part of the US Department of Health and Human Services), which exists to "reduce medial errors and improve the quality of healthcare in America."

Development of Internet Subscriber Lists

Since the January committee meeting, staff has been researching a way to set up a subscriber list on the board's Web site. This feature would send e-mails to interested parties announcing that the board's Web site has been updated, and the nature of the update. The interested parties would subscribe themselves to the board's Web site, and be responsible for keeping their e-mail addresses current.

If implemented, this service has the potential to substantially reduce the board's mailing expenses as well as printing costs. Materials that we currently publish and mail could be sent without cost via e-mail. It also would allow the board to update licensees far more quickly about new information and laws.

The department's Office of Information Services is interested in implementing this program at the board at the board's urging, as well as offer it to other agencies in the department. The board will be the first agency to use the software, and this should be implemented in the end of July.

Status of *The Script*

The last issue of *The Script* was printed and mailed on March 29th to California pharmacies. The CPhA's Pharmacy Foundation of California mailed the issue to California pharmacists in early June. The board's publication and development costs for this issue are about $17,500.

The board has initiated a contact to develop two issues a year for the next two years. The contract was awarded to Hope Tamraz.

The next issue is planned for late summer.

Status of *Health Notes*

Health Notes is a monograph, produced by the board, that contains up-to-date drug therapy guidelines for a specific subject area. Because *Health Notes* is produced by the board, it conveys what the board believes is current drug treatment in a particular area. Pharmacists can earn continuing education credit by completing a test published at the back of the monograph. Thus the board provides education and actually is sponsoring CE in an area of importance to the board.

1. Pain Management

Staff is now working to publish a wholly new Pain Management issue in mid-2004. This new issue will contain new pain management therapies and the new prescribing and dispensing requirements for controlled drugs

enacted by SB 151 (Burton, Chapter 406), which will take effect in 2004 through 2005 in sequential stages.

Staff is coordinating the development of this issue. Authors have written articles which are undergoing review and edits. Dr. Schell is editing the articles. The same graphic designer who has designed all other *Health Notes* is available to lay out the issue.

The board is seeking outside funding sources for producing this issue. Because of the interest in pain management and in the new changes to prescribing of controlled substances, there is much interest and support for this issue.

2. Smoking Cessation

At the April 2004 Board Meeting, the board agreed to cosponsor a *Health Notes* on smoking cessation with the UCSF School of Pharmacy. The UCSF will explore outside funding for development of this issue.

No work on this issue has been initiated on the board's part; the UCSF is searching for funding.

UCSF Proposal to Develop Materials on Atrial Fibrilation

At the April 2004 Board Meeting, the board voted to become a cosponsor with the UCSF School of Pharmacy to produce a monograph on Atrial Fibrilation. The audience would be pharmacists and physicians. Funding for this issue would come from a drug manufacturer. Continuing education credit for those who complete the reading would be one outcome of this project.

The UCSF intends that in place of publishing this issue as a printed monograph (such as *Health Notes*), to instead place the issue on the Web site for downloading, possibly as a CE program. There would be no direct costs to the board.

Emergency Contraception Fact Sheet

The committee agreed to send a recommendation to the Pharmacy Access Partnership that it consider adding information about the mechanism of action of emergency contraception to the fact sheet.

Update on the Board's Public Outreach Activities

The committee reviewed the board's public outreach and licensee education programs. This is a dynamic area of board activities and relies heavily on the involvement of board members and senior board staff.

The board attended two public education fairs since the April Board Meeting.

The board continued to present its revised Powerpoint presentation on the board that highlights key board policies and pharmacy law. This is a continuing education course, provided by a board member and a supervising inspector. Questions and answers typically result in a presentation of more than two hours; these presentations are well-received by those in attendance.

Additionally the board has had increasing interest in its Powerpoint presentations on SB 151 and the new requirements for prescribing and dispensing controlled substances in California.

Public outreach activities performed since the April 21, 2004 Board Meeting:

- The board staffed a booth at Healthy Aging 2004 in Sacramento on May 22, 300 people attended.
- The board staffed a booth at the Senior Health Fair in Yreka on May 12. Over 150 consumers were in attendance.

Outreach activities to licensees and other professional groups:

- Board staff presented information on prescribing and dispensing controlled substances under the new California requirements on April 13 to a teleconference of pain management specialists, on April 20 to the Academy of Long Term Care, and on April 22 to 25 attendees at a DHS Public health Grand Rounds.
- Board Members and staff presented the board's CE program at a May 13 meeting of the San Diego Pharmacists Association Meeting.
- Board President Jones and staff presented information on the new examination process for pharmacists and the board's Power Point presentation to 200 UOP students on May 13.
- Board President Jones and staff presented information on the new examination process for pharmacists and the board's Power Point presentation to 50 Loma Linda students on May 11
- Board Members Jones and Goldenberg and staff presented information on the new examination process for pharmacists and the board's Power Point presentation May 20th at USC's School of Pharmacy to 100 people.
- Board staff presented information on the new examination process for pharmacists and the board's Power Point presentation April 29 to Western School of Pharmacy and 115 students.
- Board Staff presented information about prescribing and dispensing controlled substances under the new California requirements to 25 pharmacists in Sacramento on April 28.
- Board staff presented information about prescribing and dispensing controlled substances under the new California requirements in a telephone conference to 1,296 individuals on May 19.

- Board staff presented information on prescribing and dispensing controlled substances under the new California requirements via a telephone conference announced on the board's Web site on May 21.
- Board staff presented information on prescribing and dispensing controlled substances under the new California requirements to the San Luis Obispo County Narcotic Task Force on May 28.
- Board member Tilley presented information about prescribing and dispensing controlled substances under the new California requirements to HMO pharmacy mangers and physicians in Los Angeles on May 28.
- Board staff will present a segment on pharmacy issues to staff of the Department of Health Services on June 1.

Future presentations:

- Board staff will present information on prescribing and dispensing controlled substances under the new California requirements to150 physicians and others at Memorial Care Hospital in Anaheim on June 8.
- Board staff will host a board-sponsored booth at a Los Angeles senior fair June 11 and 12.
- Board President Jones will do a presentation to the Korean Pharmacists' Association on June 19
- Board Member Fong will present the board's Power Point presentation to 50 pharmacists at a UST Pharmacy Alumni Association meeting June 24 or 25.
- Board Member Goldenberg will present information about the board at the California Chapter meeting of the American Society of Consultant Pharmacists in San Diego, September 13.
- Supervising Inspector Robert Ratcliff has been asked to give the keynote address at CSHP's 2004 Seminar in Long Beach, November 2004
- Board staff will present an "Update and What's New in Pharmacy Compounding" at the CSHP's 2004 Seminar in Long Beach in November 2004.
- Board Member Jones will present a section at the CPHA's Outlook 2005 Meeting in San Diego in February.

New Consumer Information

The committee reviewed information aimed at health care providers and the public as much as the public. This information included a consumer survey regarding the FDA's role in ensuring the safety of medications, ways to prevent medical errors for adults and for children, general patient information about medications, and the formation of SOS Rx, an national medication safety group formed under the auspices of the National Consumers League.

Adjournment

There being no additional business, Chairperson Powers adjourned the meeting at 11:45 a.m.

Strategic Plan Status Report
Fourth Quarter 2003-04
Communication and Public Education Committee

Goal: 4:	**Provide relevant information to consumers and licensees.**
Outcome:	**Improved consumer awareness and licensee knowledge.**

Objective 4.1:	**Develop 10 communication venues to the public by June 30, 2005.**
Measure:	**Number of communication venues developed to the public**
Tasks:	1. Convert *Health Notes* articles into consumer columns or fact sheets for wide dissemination to the public. 2. Develop and update public education materials. *August 2003: Board finalizes purchasing drugs from Canada brochure and revises discount drugs available to Medicare beneficiaries.* *October 2003: Emergency Contraception fact sheet has suggested revisions to reflect new treatment guidelines.* *Four brochures targeted for translation into Spanish (Emergency Contraception, Purchasing Drugs for Less, Purchasing drugs from foreign countries and discount drug prices available to Medicare Beneficiaries)* *Board approves revised fact sheet at October Board Meeting* *February 2004: Nine translations of the Emergency Contraception fact sheet are place on board Web site.* *April 2004: Information about preventing fraud for those who are planning the purchase of Medicare Drug Discount Cards developed and put online.* *Board to consider project with UC schools of pharmacy to use interns to develop informational fact sheets for the public.* 3. Maintain a vigorous, informative Web site. *July 2003: Materials for public meetings, including board meetings and most committee meetings placed on Web site for downloading by the public.* *August 2003: New staff person assigned to revamp Web site, who completes Web site development training* *September 2003: Board completes pilot testing for integration of enforcement information into license verification portion of Web site. The board will add this look-up feature before January 1, 2004.* *October 2003: SB 361 enacted which will authorize verification of licensure when info is downloaded from the board's Web site.* *November 2003: Board adds information regarding new exam procedures and requirements to applicants for a pharmacist license* *December 2003: Enforcement status data undergoes pilot testing before full implementation and activation into license verification section of Web site.* *Address of records of board licensees added to Web site*

	January 2004: Board updates Pharmacy Law and Index to reflect new laws. New pharmacy technician form placed online *February 2004: Security printer applications and instructions placed online. Emergency contraception fact sheets in 10 languages now available online* *March 2004: Material explaining new prescribing and dispensing requirements for controlled substances placed online. California pharmacist examination Candidates' Handbook placed online. Sample test questions also developed and placed online. The Script March 2004 added to Web site. Legislative analyses on bills affecting the practice of pharmacy or the board's jurisdiction placed online.* *April 2004: Information about preventing fraud for those who are planning the purchase of Medicare Drug Discount Cards developed and put online.* *June 2004: Web site includes information on implementation of new prescribing and dispensing requirements for controlled drugs in California, including a Powerpoint presentation.* 4. Sponsor "Hot Topics" seminars to the public. *July 2003: This series, sponsored by UCSF, the Department of Consumer Affairs and the board, concluded in May 2003. All parties are interested in resuming this project if staff are available to coordinate.* . *The first of consumer fact sheets developed from this series is drafted for board review by the Department of Consumer Affairs.* 5. Evaluate the need for public education for patients who need to request prescription labeling in a language other than English. *June 2004: committee discusses this topic as a possible fact sheet for the public. Patient literacy and its impact on medication compliance discussed by committee.*

Objective 4.2:	**Develop 10 communication venues to licensees by June 30, 2005.**
Measure:	**Number of communication venues developed to licensees**
Tasks:	1. Publish *The Script* two times annually. *October 2003: The Script is published and mailed to all pharmacies. CPhA's Education Foundation will print and mail the newsletter to all California pharmacists* *November 2003: CPhA's Education Foundation mails October The Script to all pharmacists.* *January 2004: Articles for the next issue of The Script are completed and sent for legal review.* *March 2004: The Script is published and mailed to all California pharmacies.* *April 2004: The March issue is provided to CPhA's Pharmacy Foundation of California for printing and mailing copies to California pharmacists.* *Board begins contract solicitation for future issues.* *April 2004: Board agrees to work with UCSF to development and*

	promote monograph on Atrial Fibrilation. *June 2004: Contract for newsletter editor awarded for next two years* 2. Publish one *Health Notes* annually. *September 2003: Discussions begin to coordinate a major revision to "Pain Management" Health Notes, updating treatment information as well as new requirements for prescribing and dispensing controlled drugs in California enacted by SB 151,which will take effect in a series of stages throughout 2004.* *November 2003: Authors for "Pain Management" selected and commit to writing articles, which are due in late January.* *February – April 2004: board receives and edits articles from authors* *April 2004: Board agrees to work with UCSF to produce a future issue on smoking cessation. Outside funding will be sought for development of this issue.* *June: Board Member Schell edits articles for new "Pain Management" Health Notes.* 3. Develop board-sponsored continuing education programs in pharmacy law and coordinate presentation at local and annual professional association meetings throughout California. *July 2003: Board presents Powerpoint continuing education program to 35 MediCal staff in Los Angeles and 60 pharmacists at local association meeting in Santa Barbara.* *September 2003: presentation to 40 pharmacists at the Long-Term Care Academy .* *Board Member Jones attends the Indian Pharmacist Association Meeting to present board Powerpoint presentation.* *October 2003: Presentation and information booth provided at CSHP's Seminar 2003* *December 2003: Board provides continuing education to 80 pharmacists at Coachella Valley local association* *January 2004: Board provides compounding pharmacy information to 25 health directors of large hospital chain in U.S.* *February 2004: Board presentation to 125 pharmacists and students at USC's School of Pharmacy, and later in the month new pharmacy law changes presented to 125 students at UCSF's School of Pharmacy.* *Board CE presentation provided to Circle of Advisors Meeting of the Pharmacy Access Partnership* *March 2004: Board CE presentation provided to 125 students at UCSF* *Presentation on quality assurance programs provided to the San Diego Association for Healthcare Risk Management.* *April 2004: Presentation of CE program and the new examination process for pharmacists to 115 students at Western School of Pharmacy.* *May 2004: Presentation of the board's CE program to the San Diego Pharmacists Association.*

	Presentation of CE program and the new examination process for pharmacists to 200 UOP students, and 50 Loma Linda students, to 100 people at USC. *June 2004: Presentation to the Department of Health Services on pharmacy issues.* *CE presentations made to the Korean Pharmacists Association (50 individuals) and the University of Santo Tomas' Alumni Association (50 individuals).* *Presentation to DHS's audit and investigation staff on pharmacy issues.* 4. Maintain important and timely licensee information on Web site. *July 2003: All information packets for public meetings of the board placed on Web site in addition to agendas* *October 2003: The October 2003 The Script added to Web site* *November 2003: The board places information about new pharmacist licensure examinations on Web site* *January 2004: Web page modified to make it easier to find pharmacist licensure examination information* *Licensure verifications can be performed by printing license verification information from the Web site, eliminating need to obtain this directly from board* *Board updates Pharmacy Law and Index to reflect new laws.* *New pharmacy technician form placed online* *February 2004: Security printer applications and instructions placed online. Emergency contraception fact sheets in 10 languages now available online* *March 2004: Material explaining new prescribing and dispensing requirements for controlled substances placed online.* *California pharmacist examination Candidates' Handbook placed online. Sample test questions also developed and placed online. The Script March 2004 added to Web site.* *Legislative analyses on bills affecting the practice of pharmacy or the board's jurisdiction placed online.* 6. Create a consumer fact sheet series in conjunction with California schools of pharmacy on topics of interest. *April 2004: Board agrees to work with UCSF's Center for Consumer Self Care to develop the fact sheets.* *June 2004: Committee meets with director of UCSF's Center for Consumer Self Care to begin work on the fact sheets. The goal is to produce three fact sheets per quarter, and reevaluate the project in one year* 7. Create public education activities to educate prescribers, dispensers, patients and law enforcement about changes in law regarding dispensing of controlled substances. *January 2004: Board develops Powerpoint presentation on new prescribing and dispensing requirements for controlled drugs, and revises its Powerpoint CE program on the board and pharmacy law.* *Board presents information on new prescribing and dispensing requirements for controlled drugs to 15 investigators at a FBI Drug Diversion Meeting.*

	February 2004: Presentation of new controlled substances requirements provided to San Francisco Health Plan P & T Committee. *March 2004: Presentation of new controlled substances requirements to 60 members of California Coalition for Compassionate Care "train the trainers" meeting, to 60 members of the Northern California Pain Coalition meeting, the Medical Board of California's complaint handlers, and to groups of physicians in two events.* *April 2004: Presentation on prescribing and dispensing controlled substances under the new California requirements to a teleconference of pain management specialists, to the Academy of Long Term Care, to a meeting of 25 pharmacists in Sacramento, and to attendees at a DHS Public health grand rounds.* *May 2004: Presentation on new requirements for prescribing and dispensing controlled substances provided to 1,294 prescribers and pharmacists via teleconference. Also, the board advertised another teleconference presentation on its Web site and presented this information to a large number of pharmacists. Another presentation was made to the San Luis Obispo County Narcotic Task Force.* *June 2004: Presentation on the new requirements made to 150 physicians at Memorial Care Hospital in Anaheim. Presentation to 25 pharmacists at Sacramento hospital pharmacist association meeting.*
Objective 4.3: **Measure:**	**Participate in 20 forums, conferences and public education events by June 30, 2005.** **Number of forums participated**
Tasks:	1. Participate in forums, conferences and educational fairs. *August 2003: Board staffs an information booth at Sacramento's Consumer Health Fair, co-hosted by Kaiser, AARP, Area 4 Agency on Aging and Congressman Matsui:* *September 2003: Board President Jones attends NABP's District VII and VIII annual meeting* *October 2003: Board staffs an information booth at CSHP Seminar 2003* *Board staffs an information booth at Los Angeles County Health Fair and Senior Festival, over 2,000 people attend. Board staffs an information booth at Sacramento's Healthy Aging Summit* *January 2004: Board staffs an information booth at CPhA's Outlook 2004. Board presentations include information on new pharmacy law, board operations and new examination requirements.* *April 2004: Board members attend National Association of Boards of Pharmacy Meeting in Chicago.*

	May 2004: Board staffs booth at Healthy Aging 2004 in Sacramento, 300 people attend. *Board staffs booth at the Senior Health Fair in Yreka, over 150 consumers attend.* *June 2004: Former board president attends discussion session hosted by the Pharmacy Foundation of California on the importation of drugs into the US.*
Objective 4.4: **Measure:**	**Respond to 100 percent of information requests from governmental agencies regarding board programs and activities.** **Percentage response to information requests from governmental agencies**
Tasks:	1. By June 1, 2004, submit report to Legislature on statutory requirements for remedial education after four failed attempts on the California pharmacist exam. *April 2004: Draft report provided to board members at April Board Meeting* 2. Provide information to legislators regarding board implementation of statutory requirements. *April – June 2004: Board provides substantial technical assistance to authors with pending legislation regarding implementation of importation of Canadian drugs, automated dispensing machines in skilled nursing facilities, and wholesaling requirements for drugs within and into California.* 3. Provide agency statistical data information to the department. *Sept. 2003: Board submits data to department as required.* *Nov. 2003: Board provides information to department on impact of budget reductions in terms of funding and staff in response to request from Senate Business and Professions Committee* 4. Board provides information to department on the Bilingual Services Program Survey due September 15, 2003. *September 2003: data provided* *January 2004: All staff collect data for survey of public contacts by the language of the individual* 5. Department of Consumer Affairs, Internal Audit of the Board released March 2003 as part of Sunset Review *October 2003: Board compiles 180-day post audit report to the department* *March 2004: Board compiles 360-day post audit report to the department.* *April 2004: Department evaluates and submits final post-audit review of board activities; the board is in compliance.* 6. Software Inventory Report of all software in use by Board of Pharmacy *December 2003: Board compiles this massive and detailed report* 7. Regulation Summary Report of all regulations enacted from 1999-2003, pursuant to Executive Order S-2-03 *January 2004: Report compiled and submitted timely* *8.* Review of board operations, procedures, procedure manuals, applications, publications, etc., for underground regulations pursuant

	to Executive Order S-2-03 *January 2004: Report compiled and submitted timely* 9. Board meets with delegation from China Zhejiang Provinical Drug Administration at request of this agency in December 2003 10. Board compiles self-evaluation and transition plan report on services and procedures for equal access for employees, applicants to assure no policies discriminate against persons with disabilities and the public 11. Report backlogs and impacts of staffing and budget reductions on work load *Sept. 2003: Report compiled and submitted* *Nov. 2003: Report compiled and submitted* *February 2004: Report compiled and submitted* *March 2004: Report compiled and submitted* *April: Report compiled and submitted.* *May: Report compiled and submitted.* *June: Report compiled and submitted.*
Objective 4.5 **Measure:**	**Respond to 100 percent of public information requests regarding board programs and activities.** **Percentage response to information requests from the public**
Tasks:	1. Respond to public information requests. *July – Oct. 2003: the board received 340 public inquiries and four subpoenas. Nearly 80 percent of the public inquiries were responded to within 10 days, and all four of the subpoenas were responded within required timeframes.* *Oct. – Dec. 2003: the board received to 253 public inquiries and three subpoenas. Nearly 65 percent of the public inquiries were responded to within 10 days, and all three of the subpoenas were responded to within required timeframes.* *Jan – March 2004: the board received 87 public inquiries, four subpoenas and 245 written license verifications. Nearly 72 percent of the public inquiries were responded to within 10 days, all subpoenas were responded to within five days, and 77 percent of the license verifications were performed within 10 days.*