** North Dakota Cancer Coalition-(NDCC)**

**Steering Committee Meeting**

**Monday, April 1st**

**12pm Central Time**

***Call-In 701-328-7950***

***Participant Code: 618620***

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| **Name** | **Present** | **Name** | **Present** |
| **Shannon Bacon- Secretary -** American Cancer Society (ACS) | X | **Stefanie Meyer- Past Chair-** NDSU MPH | X |
| **Jacob Davis-** Prevent Child Abuse North Dakota | X | **Susan Mormann**- NDDoH- Director Community and Health Systems | X |
| **Tara Schilke**- **Vice Chair -** Bismarck Cancer Center | X | **Beth Nelson-** Altru Cancer Center | X |
| **Jodie Fetsch**- Custer Health (Local Public Health | X | **Jesse Tran-** NDDoH Comprehensive Cancer Control – Program Director | X |
| **Janna Pastir**- NDDoH- Health Promotion | X | **Geneal Roth**- **Treasurer**- Quality Health Associates of ND | X |
| **Julie Garden-Robinson**- NDSU Extension Statewide | X | **Mary Sahl**- Sanford Health-Treatment | X |
| **Cindy Gohner**- BCBSND | X | **Zheng, Yun (Lucy)**- ND Statewide Cancer Registry | X |
| **Brad Hawk-** Commission on Indian Affairs | X | **Cristina Oancea –** ND Statewide Cancer Registry | X |
| **Shane Jordan-** Trinity Health Cancer Center |  | **Tinka Duran –** Great Plains Tribal Chairmen’s Health Board  | X |
| **Jolene Keplin-** Turtle Mountain Tribal Health Education | X |  |  |
| **Mallory Koshiol- Chair –** Sanford Health | X |  |  |

**Meeting Agenda**

1. Roll Call – Mallory

2. Review & Approval of Minutes <https://www.ndcancercoalition.org/image/cache/1-7-19_Steering_Committee_Meeting_MINUTES.docx>

* Approved as written

3. Membership Survey Update – Jesse Tran

* Jesse sent out email to steering committee in March asking for feedback and did not receive any. He will be sending that out sometime this week and then giving membership about 2 weeks to complete that. Results will be shared with Steering Committee for discussion and then with membership at large when available.
* **Additional survey updates:**
	+ Normally send out cancer plan strategies survey. Jesse would like to update the survey and make it a bit more relevant to the current cancer plan. In the coming weeks, he will be working on that and will ask for some input from steering committee members as that moves forward.
	+ Cancer Patient Survey update: All of the data has been input, so Jesse will start on analysis of that. By end of May, he is hoping to have statewide results and individual facility results. He will plan to present it at the August all-member call as well.

4. Annual Meeting Discussion – Mallory Koshiol

* Nominations process:
	+ Secretary and Vice Chair are open.
	+ Nomination process: We do a call for nominations at the May 6 call and ask for them electronically.
	+ Nomination committee: Usually have 3 members. They would ask if people who are in those positions are interesting in continuing. Process is in the bylaws. Mary Sahl, Stef Meyer, Tara Schilke, Tinka Duran are willing to be on the committee. Mallory will set up a meeting with them.
* Agenda walk through
	+ Meeting is Thursday, June 13. 12:30 – 4pm, immediately following Dakota Conference. Planning to offer 3 Nursing CEU’s. Mallory gave an overview of each item on the agenda and opened up for feedback. Melanoma is a priority objective for the coalition this year, so the focus of the panel and action planning will be on melanoma. Tinka will check into a potential panelist. Shannon will also check with Shane Jordan to see if he knows of a clinician at Trinity who might be free.
* Activity discussion: Coalition selected Melanoma and CRC as two priority objectives. For CRC, will encourage folks to connect in with ND CRC Roundtable so that we remain coordinated. For Melanoma, we’d like to spend about 1 hour action planning to look at how we as a coalition can move the marble on that issue. Jesse did write in some dollars for the coalition to be able to use for melanoma related projects. As a group, would like to think about how we can leverage resources. Extension has tools/materials available through their subcontract projects and has agents in about 30 counties. Extension is targeting farmers, ranchers, people in community-based clubs. The Steering Committee liked the idea of breaking up by geographic region for small group action planning, but we might need to wait until the meeting to determine how to break that up depending on attendance numbers from various areas of the state. The group discussed potential engagement of the tanning bed industry and discussed this might be an opportunity to explore during small group discussion or in future. There might be lessons to learn from the tobacco prevention community in terms of how they have approached e-cig industry and policy.
* Promotion: Please register and share broadly with your contacts. Tinka’s staff will be out of town for a navigation training. Mallory will add registration link into Outlook invite.

5. May 6th NDCC all-member call: Ideas for a guest presenter

* DoH lined up speaker from George Washington University

6. New administrative support hire

* Mallory has lined up an individual who is able to do this work and will help support logistical coordination of coalition. They will be introduced at the next meeting. It is a one-year commitment from that individual.

7. Other updates – All

* Welcome to Tinka Duran with Great Plains Tribal Chairmen’s Health Board, new member of the NDCC Steering Committee.
* Mallory and Jesse will be attending the Montana cancer coalition meeting and steering committee meeting in May to observe / learn about their process.
* Mallory has joined a coalition leaders national monthly meeting, where coalition leaders from various states can talk about what is working well and also challenges. Others are welcome to join – reach out to Mallory if interested.
* MPH intern from UND will be with the Coalition from mid-May – mid-July. She will be putting together some infographics for us on some of the preventable and/or screenable cancers. Cristina is happy to be of support to the intern when looking through the data. Mary recommended that the infographics include the rising cost of treatment if there is data available to report on regarding that.

8. Adjourn