

**SECOND ENGROSSMENT
with Conference Committee Amendments****REENGROSSED SENATE BILL NO. 2380**

Introduced by

Senators Holmberg, Heitkamp, Schobinger

Representatives Delmore, Devlin, Price

- 1 A BILL for an Act to provide for a community health grant program; to provide an appropriation;
2 to provide a continuing appropriation; and to provide for a legislative council study.

3 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

4 **SECTION 1. Community health grant program.**

- 5 1. The state department of health shall establish a community health grant program.
6 The primary purpose of the program is to prevent or reduce tobacco usage in the
7 state by strengthening community-based public health programs and by providing
8 assistance to public health units and communities throughout the state. The
9 program must build on and may not duplicate existing programs. Grants awarded
10 under the program must be awarded on a noncompetitive basis using the per
11 capita formula provided for in this subsection. The program must, to the extent
12 funding is available, follow guidelines concerning tobacco prevention programs
13 recommended by the centers for disease control and prevention. Entities awarded
14 grants under the program may contract with or award grants to private providers
15 that conduct tobacco cessation programs. Not more than five percent of the
16 community health grant program funds may be expended for surveillance and
17 evaluation activities. Funds appropriated for the program must be allocated as
18 follows:
- 19 a. Forty percent of all funds appropriated for the program must be granted to a
20 public health unit or to cooperating public health units that have an agreement
21 with school boards concerning preventive health programs to be funded. The
22 program must be developed with student participation and must include a
23 plan to reduce student tobacco use.

1 b. Forty percent of all funds appropriated for the program must be granted to a
2 public health unit or to cooperating public health units that have established a
3 unitwide plan, developed in cooperation with local elected officials in the unit's
4 jurisdiction, concerning the preventive health programs to be funded. The
5 plan must address programs to reduce tobacco use by the residents living in
6 the counties serviced by the units; however, the plan may include other
7 chronic disease programs. In addition to any grants received under this
8 subdivision, each county with a population of less than ten thousand must
9 receive five thousand dollars per biennium to be used to implement the
10 county's programs.

11 c. Twenty percent of all funds appropriated for the program must be granted to
12 public health units to supplement existing state aid from other sources. Each
13 unit must receive one percent of the amount allocated under this subdivision
14 for each county within the unit and the remaining amount must be distributed
15 to each unit on a per capita basis.

16 2. The state department of health, in establishing the community health grant
17 program, shall build upon the state's existing tobacco control grant program
18 activities and shall follow the centers for disease control and prevention's best
19 practices for comprehensive tobacco control programs. The department shall
20 encourage applicants to monitor program accountability with respect to
21 tobacco-related behaviors, attitudes, and health outcomes and to include in their
22 plans:

23 a. Community programs that:

- 24 (1) Engage youth in the development and implementation of interventions;
25 (2) Develop partnerships with local organizations;
26 (3) Conduct educational programs at local levels;
27 (4) Promote government and voluntary health policies, such as clean
28 indoor air, youth access, and treatment coverage;
29 (5) Restrict minors' access to tobacco; and
30 (6) Deter smoking in public places.

b. Promotion of school programs by partnering with public health organizations, school boards, education associations, and other organizations in each county to provide school programs that promote:

- (1) Tobacco-free policies;
- (2) Evidence-based curricula;
- (3) Teacher training;
- (4) Parental involvement; and
- (5) Cessation services for students and staff.

SECTION 2. Community health grant program advisory committee - Duties of state health officer.

1. The state health officer shall establish a community health grant program advisory committee and shall appoint, after consulting with the governor, appropriate members to advise the state department of health in the development of a community health grant program. The state health officer, who shall be the chairman of the committee, shall appoint to the committee the state tobacco control administrator; one high school student; one student of a postsecondary institution in the state; one representative of a nongovernmental tobacco control organization; and one law enforcement officer. In addition to the members appointed by the state health officer, the committee must include:

- a. One individual appointed by the North Dakota Indian affairs commission;
- b. One individual appointed by the North Dakota public health association;
- c. The superintendent of public instruction or the superintendent's designee;
- d. An academic researcher with expertise in tobacco control and health promotion intervention, appointed by the dean of the university of North Dakota school of medicine and health sciences; and
- e. One physician appointed by the North Dakota medical association.

2. Members of the committee who are not state employees or officers are entitled to be compensated at a rate of sixty-two dollars and fifty cents per day and are entitled to mileage and expenses as provided by law for state officers and employees. A state employee who is a member of the committee must receive

that employee's regular salary and is entitled to mileage and expenses, to be paid by the employing agency.

3. The state department of health, with the committee's involvement, shall provide assistance to:

- a. Evaluate programs;
- b. Promote media advocacy by working with statewide media associations;
- c. Implement smoke-free policies by involving antitobacco groups in promoting the need for smoke-free public buildings;
- d. Work to reduce minors' access to tobacco in all communities;
- e. Facilitate the coordination of program components with the local level;
- f. Involve state agencies, law enforcement, and local government in the administration and management of the program; and
- g. Assist the state in screening and implementing the grants.

4. The state health officer shall monitor the implementation of the community health grant program. The state health officer shall provide reports to the legislative council regarding the implementation of the program not later than December 31, 2001, and November 1, 2002. Upon request, the state health officer shall provide assistance to any interim legislative committee that may study the implementation of the community health grant program and shall recommend any legislation that the community health grant program advisory committee considers appropriate to improve the community health grant program.

SECTION 3. Gifts, grants, and donations - Continuing appropriation. The state department of health and public health units may accept any gifts, grants, or donations, whether conditional or unconditional. The department of health or public health units may contract public or private entities and may expend any available moneys to obtain matching funds for the purposes of this Act. All moneys received by the state department of health as gifts, grants, or donations under this section are appropriated on a continuing basis to the state department of health.

SECTION 4. APPROPRIATION. There is appropriated out of any moneys in the community health trust fund, not otherwise appropriated, the sum of \$100,000, or so much of the sum as may be necessary, to the state department of health for the purpose of funding the

1 community health grant program advisory committee, for the biennium beginning July 1, 2001,
2 and ending June 30, 2003.

3 **SECTION 5. APPROPRIATION.** There is appropriated out of any moneys in the
4 community health trust fund, not otherwise appropriated, the sum of \$250,000, or so much of
5 the sum as may be necessary, to the state department of health for the purpose of funding
6 grants to cities and counties on a dollar-for-dollar matching fund basis for city and county
7 employee tobacco education and cessation programs, for the biennium beginning July 1, 2001,
8 and ending June 30, 2003.

9 **SECTION 6. ALCOHOL, TOBACCO, AND DRUG ABUSE PROGRAMS -**
10 **LEGISLATIVE COUNCIL STUDY.** During the 2001-02 interim, the legislative council shall
11 consider studying the programs that deal with the prevention and treatment of alcohol, tobacco,
12 and drug abuse and other kinds of risk-associated behavior which are operated by various
13 state agencies, including the department of corrections and rehabilitation, the attorney general,
14 the state department of health, the department of human services, the department of public
15 instruction, the department of transportation, the national guard, and the supreme court, and
16 whether better coordination among the programs within those agencies may lead to a more
17 effective and cost-efficient way of operating the programs and providing services. The
18 legislative council shall report its findings and recommendations, together with any legislation
19 required to implement the recommendations, to the fifty-eighth legislative assembly.