10732.0900

Fifty-seventh Legislative Assembly of North Dakota

# SECOND ENGROSSMENT with House Amendments

### REENGROSSED SENATE BILL NO. 2380

Introduced by

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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 and to provide for a legislative council study.

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

#### SECTION 1. Community health grant program.

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

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(1)

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1 Forty percent of all funds appropriated for the program must be granted to a b. 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 Twenty percent of all funds appropriated for the program must be granted to C. 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 subsection 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 include in their plans: 21 Community programs that: 22 (1) Engage youth in the development and implementation of interventions; 23 (2) Develop partnerships with local organizations; 24 (3)Conduct educational programs at local levels; and 25 (4) Promote government and voluntary health policies, such as clean 26 indoor air, youth access, and treatment coverage. 27 b. Promotion of school programs by partnering with public health organizations, 28 school boards, education associations, and other organizations in each 29 county to provide school programs that promote:

Tobacco-free policies;

Evidence-based curricula;

1			B) Teacher training;	
2			4) Parental involvement; and	
3			5) Cessation services for students an	d staff.
4	SEC	CTIO	2. Community health grant program	advisory committee - Duties of
5	state health officer.			
6	1.	The	state health officer shall establish a comn	nunity health grant program advisory
7		com	nittee and shall appoint, after consulting	with the governor, appropriate
8		members to advise the state department of health in the development of a		
9		community health grant program. The state health officer, who shall be the		
10		cha	man of the committee, shall appoint to th	e committee the state tobacco
11		control administrator; one high school student; one student of a postsecondary		
12		institution in the state; one representative of a nongovernmental tobacco control		
13		organization; and one law enforcement officer. In addition to the members		
14		appointed by the state health officer, the committee must include:		
15		a.	One individual appointed by the North Da	akota Indian affairs commission;
16		b.	One individual appointed by the North Da	akota public health association;
17		C.	The superintendent of public instruction of	or the superintendent's designee;
18		d.	An academic researcher with expertise in	n tobacco control and health
19			promotion intervention, appointed by the	dean of the university of North
20			Dakota school of medicine and health sc	iences; and
21		e.	One physician appointed by the North Da	akota medical association.
22	2.	Mer	bers of the committee who are not state	employees or officers are entitled to
23		be compensated at a rate of sixty-two dollars and fifty cents per day and are		
24		entitled to mileage and expenses as provided by law for state officers and		
25		employees. A state employee who is a member of the committee must receive		
26		that employee's regular salary and is entitled to mileage and expenses, to be paid		
27		by the employing agency.		
28	3.	The	state department of health, with the comr	nittee's involvement, shall provide
29	assistance to:			
30		a.	Evaluate programs;	
31		b.	Promote media advocacy by working wit	h statewide media associations:

- 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; and
  - f. Involve state agencies, law enforcement, and local government in the administration and management of the program.
- 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. 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 community health grant program advisory committee, for the biennium beginning July 1, 2001, and ending June 30, 2003.

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

SECTION 5. ALCOHOL, TOBACCO, AND DRUG ABUSE PROGRAMS - LEGISLATIVE COUNCIL STUDY. During the 2001-02 interim, the legislative council shall consider studying the programs that deal with the prevention and treatment of alcohol, tobacco, and drug abuse and other kinds of risk-associated behavior which are operated by various state agencies, including the department of corrections and rehabilitation, the attorney general, the state department of health, the department of human services, the department of public

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- 1 instruction, the department of transportation, the national guard, and the supreme court, and
- 2 whether better coordination among the programs within those agencies may lead to a more
- 3 effective and cost-efficient way of operating the programs and providing services. The
- 4 legislative council shall report its findings and recommendations, together with any legislation
- 5 required to implement the recommendations, to the fifty-eighth legislative assembly.