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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETIETH SESSION

H. F. No. 1347

02/16/2017 Authored by Kresha, Flanagan, Pinto and Murphy, E., The bill was read for the first time and referred to the Committee on Health and Human Services Reform

1.1 A bill for an act
1.2 relating to health; establishing the community solutions fund for healthy child
1.3 development grant program; appropriating money; proposing coding for new law
1.4 in Minnesota Statutes, chapter 145.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. [145.9285] COMMUNITY SOLUTIONS FUND FOR HEALTHY CHILD
1.7 DEVELOPMENT GRANT PROGRAM.

1.8 Subdivision 1. Establishment; purpose. The community solutions fund for the healthy
1.9 child development grant program is established to:

1.10 (1) improve measures of well-being for children of color and American Indian children
1.11 from prenatal to third grade and their families by funding community-based solutions for
1.12 challenges that are identified by the affected community;

1.13 (2) promote racial equity; and

1.14 (3) reduce racial disparities.

1.15 Subd. 2. Commissioner's duties. The commissioner of health shall:

1.16 (1) appoint members of the Community Solutions Advisory Council, in consultation
1.17 with the Department of Health's Center for Health Equity, according to the requirements of
1.18 subdivision 3;

1.19 (2) develop a request for proposals in consultation with the Community Solutions
1.20 Advisory Council and the Center for Health Equity;

2.1 (3) provide outreach, technical assistance, and program development support to increase
 2.2 capacity to new and existing service providers to better meet needs statewide, particularly
 2.3 in greater Minnesota and areas where services to reduce health disparities have not been
 2.4 established;

2.5 (4) review responses to requests for proposals, in consultation with the Community
 2.6 Solutions Advisory Council, and award grants under this section;

2.7 (5) establish a transparent and objective accountability process, in consultation with the
 2.8 Community Solutions Advisory Council, focused on outcomes that grantees agree to achieve;

2.9 (6) provide grantees with access to disaggregated data to allow grantees to establish and
 2.10 implement effective community-led solutions;

2.11 (7) maintain data on outcomes reported by grantees; and

2.12 (8) contract with an independent third-party entity to evaluate the success of the grant
 2.13 program and to build the evidence base for effective community solutions in reducing health
 2.14 disparities of children of color and American Indian children prenatally to third grade.

2.15 **Subd. 3. Community Solutions Advisory Council; establishment; duties;**
 2.16 **compensation.** (a) No later than September 1, 2017, the commissioner shall appoint up to
 2.17 12 members to the Community Solutions Advisory Council as follows:

2.18 (1) up to two members representing the African Heritage community;

2.19 (2) up to two members representing the Latino community;

2.20 (3) up to two members representing the Asian-Pacific Islander community;

2.21 (4) up to two members representing the American Indian community;

2.22 (5) two parents of children of color or American Indian children under nine years of
 2.23 age;

2.24 (6) one representative with research or academic expertise in racial equity and healthy
 2.25 child development; and

2.26 (7) one representative of an organization that advocates on behalf of communities of
 2.27 color or American Indians.

2.28 (b) In addition to the requirements of paragraph (a), two of the 12 members of the
 2.29 advisory council must come from outside the seven-county metropolitan area.

2.30 (c) The Community Solutions Advisory Council shall:

3.1 (1) advise the commissioner on the development of the request for proposals for the
3.2 community solutions fund for healthy child development grants. In advising the
3.3 commissioner, the council shall consider how to build on the capacity of communities to
3.4 promote child and family well-being and address social determinants of healthy child
3.5 development;

3.6 (2) review responses to requests for proposals and advise the commissioner on the
3.7 selection of grantees and grant awards; and

3.8 (3) advise the commissioner on the establishment of a transparent and objective
3.9 accountability process focused on outcomes the grantees agree to achieve.

3.10 (d) Each advisory council member shall be compensated up to \$2,000 per fiscal year
3.11 for time and expenses related to the member's duties under paragraph (c). This paragraph
3.12 expires June 30, 2019.

3.13 Subd. 4. **Eligible grantees.** Organizations eligible to receive grant funding under this
3.14 section include:

3.15 (1) organizations that work with communities of color and American Indian communities;
3.16 and

3.17 (2) organizations with activities supporting healthy child development.

3.18 Subd. 5. **Strategic consideration and priority of proposals; eligible populations;**
3.19 **grant awards.** (a) The commissioner and advisory council shall provide strategic
3.20 consideration and priority of proposals from:

3.21 (1) organizations led by people of color and serving communities of color;

3.22 (2) organizations led by American Indians and serving American Indians;

3.23 (3) organizations with proposals focused on healthy development from prenatal to age
3.24 three;

3.25 (4) organizations with proposals constructed with a focus on multigenerational solutions;

3.26 (5) organizations located in or with proposals to serve communities located in counties
3.27 that are moderate to high risk according to the Wilder Research Risk and Reach Report;
3.28 and

3.29 (6) community-based organizations, especially organizations that have not traditionally
3.30 had access to state grant funding.

4.1 The advisory council may recommend additional strategic considerations and priorities to
4.2 the commissioner.

4.3 (b) Grants must be awarded for proposals that focus on increasing racial equity and
4.4 healthy child development and reducing health disparities experienced by children of color
4.5 and American Indian children from prenatal to third grade and their families.

4.6 (c) The first round of grants must be awarded no later than January 15, 2018. Grants
4.7 must be awarded annually thereafter. Grants are awarded for a period of three years.

4.8 Subd. 6. **Geographic distribution of grants.** The commissioner and the advisory council
4.9 shall ensure that grant funds are awarded proportionally to the seven-county metropolitan
4.10 area and greater Minnesota based on the proportion of the state population of people of
4.11 color and American Indians residing in each area.

4.12 Subd. 7. **Report.** Grantees must report grant program outcomes to the commissioner on
4.13 the forms and according to the timelines established by the commissioner and the advisory
4.14 council.

4.15 Sec. 2. **APPROPRIATION; COMMUNITY SOLUTIONS FUND FOR HEALTHY**
4.16 **CHILD DEVELOPMENT GRANT PROGRAM.**

4.17 (a) \$2,524,000 in fiscal year 2018 and \$5,024,000 in fiscal year 2019 are appropriated
4.18 from the general fund to the commissioner of health for the community solutions fund for
4.19 the healthy child development grant program under Minnesota Statutes, section 145.9285,
4.20 as follows:

4.21 (1) of the 2018 fiscal year amount, up to \$2,000,000 is for planning grants of \$100,000
4.22 for up to 20 organizations; up to \$200,000 is for administrative costs; up to \$200,000 is for
4.23 an independent third-party evaluator under Minnesota Statutes, section 145.9285, subdivision
4.24 2, clause (8); up to \$100,000 is for grantee training and capacity building; and up to \$24,000
4.25 is to reimburse the Community Solutions Advisory Council members for time and expenses
4.26 related to members' duties under Minnesota Statutes, section 145.9285, subdivision 3,
4.27 paragraph (c); and

4.28 (2) of the 2019 fiscal year amount, up to \$3,000,000 is for no more than ten grants of
4.29 \$300,000; up to \$1,500,000 is for no more than ten grants of \$150,000; up to \$200,000 is
4.30 for administrative costs; up to \$200,000 is for an independent third-party evaluator under
4.31 Minnesota Statutes, section 145.9285, subdivision 2, clause (8); up to \$100,000 is for grantee
4.32 training and capacity building; and up to \$24,000 is to reimburse the Community Solutions

- 5.1 Advisory Council members' for time and expenses related to members duties under Minnesota
- 5.2 Statutes, section 145.9285, subdivision 3, paragraph (c).
- 5.3 (b) The base appropriation for fiscal year 2020 and each fiscal year thereafter is
- 5.4 \$5,000,000.