

Unofficial Draft Copy

As of: August 12, 2004 (2:58pm)

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**** Bill No. ****

Introduced By *****

By Request of the *****

A Bill for an Act entitled: "An Act providing for a chief coordinator of drug prevention and treatment and statewide coordination of drug prevention and treatment programs; attaching the chief prevention and treatment officer to the governor's office; replacing the Interagency Coordinating Council for Prevention with the chief coordinator of drug prevention and treatment; repealing section 2-15-225, MCA; and providing a termination date and an effective date."

WHEREAS, the Alcohol, Tobacco, and Other Drug Control Policy Task Force which had as its most important recommendation to establish a "drug czar" position to provide leadership for state prevention, treatment, and correctional programs; and

WHEREAS, the Children, Families, Health, and Human Services Legislative Interim Committee continued the efforts in the Senate Joint Resolution No. 11 study and recommends the creation of a Chief Coordinator for Drug Prevention and Treatment to lead prevention efforts in the state and to coordinate prevention and treatment programs between state agencies in order to assist local communities in battling the devastating effects of substance abuse, especially illegal drug use; and

WHEREAS, the state has many efforts that this leader can build from and use as resources including the Prevention Resource

Center, the Addictive and Mental Disorders Division, and Tobacco Use Prevention Program in the Department of Public Health and Human Services, prevention efforts of the Montana Board of Crime Control and Office of Public Instruction, and data-gathering such as the Behavior Risk Factor Survey System and the Youth Risk Behavior Survey.

Be it enacted by the Legislature of the State of Montana:

NEW SECTION. Section 1. Chief coordinator of drug prevention and treatment. (1) There is a chief coordinator of drug prevention and treatment appointed by the governor. The chief coordinator of drug prevention and treatment is attached, for administrative purposes only as prescribed in 2-15-121, to the office of the governor which may provide staff and budgetary, administrative, and clerical services as requested.

(2) The chief coordinator of drug prevention and treatment shall coordinate efforts for alcohol, tobacco, and other drug prevention and treatment programs statewide.

(3) Upon request, state agencies shall cooperate with the chief coordinator of drug prevention and treatment and shall provide budgetary, program, and grant information on a regular basis. The chief coordinator of drug prevention and treatment shall work with the office of budget and program planning to prepare a directory of all prevention and treatment programs, funds, and grants in the state. The chief coordinator of drug prevention and treatment and the budget director shall prepare a

budget proposal for the chief coordinator of drug prevention and treatment and for the coordination of drug prevention and treatment statewide in order to decrease duplication and provide the necessary technical assistance, evaluation, public relations, or other services necessary to administer programs appropriately.

NEW SECTION. **Section 2. Duties.** (1) The duties of the chief coordinator of drug prevention and treatment are:

(a) to provide a unified statewide strategic plan to coordinate and develop an overall strategy to assess whether agency prevention and treatment programs and budgets are efficiently addressing the continuum of education, prevention, intervention, and treatment for alcohol, tobacco, and other drugs to improve the life and health outcomes for youth and adults in Montana;

(b) to coordinate and provide advice to agencies regarding ways to achieve efficiencies in spending and to improve interagency cooperation to enhance state and local education, prevention, intervention, and treatment programs across the state, including the prevention of alcohol, tobacco, and other drug use and abuse and to integrate the strategic plan into the executive budget and planning processes;

(c) to provide research and analysis regarding successful programs and evidence-based best practices in prevention and treatment programs;

(d) to research and develop prevention, treatment, and control standards, procedures, and protocols for consideration by

state agencies and the legislature, including treatment standards, best practices, and interagency programs to coordinate treatment efforts between the departments of public health and human services and corrections;

(e) to advise the governor and the legislature regarding proposals for statewide collaborative efforts including partnerships, elimination or duplication of efforts, or to hold programs accountable to measure impact and success;

(f) to provide to the public and state and local agencies and community programs a central repository for resource and referral information, grant opportunities, data on drug use and abuse, prevention and treatment standards and best practices, planning tools, and training opportunities;

(g) to establish resources for accountability through program and grant evaluation of performance outcomes for prevention and treatment programs;

(h) to provide information regarding training and cross-training programs and opportunities statewide;

(i) to provide liaison between local, tribal, state, and federal efforts and integrate the efforts in the statewide strategic plan.

(2) The chief coordinator of drug prevention and treatment shall attempt to bridge efforts between elected officials, department directors, tribal governments, and the federal government, including but not limited to the attorney general as provided for in 2-15-501, the state court administrator as provided for in 3-1-701, the directors of the departments of

public health and human services, as provided for in 2-15-2201, and corrections, as provided for in 2-14-2301, the state drug program coordinator and the single state agency for substance abuse as provided for in Title 53, chapter 24, part 2, the board of crime control as provided for in 2-15-2006, the tobacco use prevention program administered by the department of public health and human services, and the office of the superintendent of public instruction as provided for in 2-15-701.

(3) The chief coordinator shall assist the governor in developing comprehensive plans to address critical drug-related issues. The chief may create interagency coordinating mechanisms and memoranda of understanding where needed.

NEW SECTION. **Section 3. Report to governor and legislature.** The chief coordinator of drug prevention and treatment shall prioritize the duties provided in [sections 2 and 3] and prepare an analysis and proposed long-term work plan for the office of the chief coordinator of drug prevention and treatment and report to the governor and the children, families, health, and human services legislative interim committee, as provided in 5-11-210, regarding its plan, progress, findings, and recommendations for any proposed changes by September 1, 2006.

Section 4. Section 2-15-2006, MCA, is amended to read:

"2-15-2006. Board of crime control -- composition -- allocation. (1) There is a board of crime control.

(2) The board is allocated to the department for

administrative purposes only as prescribed in 2-15-121. However, the board may hire its own personnel, and 2-15-121(2)(d) does not apply.

(3) The board is composed of 18 members appointed by the governor in accordance with 2-15-124 and any special requirements of Title I of the Omnibus Crime Control and Safe Streets Act, as amended. The board shall be representative of:

(a) state and local law enforcement and criminal justice agencies, including agencies directly related to the prevention and control of juvenile delinquency;

(b) units of general local government, and public agencies maintaining programs to reduce and control crime; ~~and shall include representatives of~~

(c) citizens and professional and community organizations, including organizations directly related to crime and delinquency prevention; and

(d) the chief coordinator of drug prevention and treatment as provided for in [section 2]."

{Internal References to 2-15-2006:

2-15-225 r 7-31-201 x 41-5-1901 x 44-2-701x 52-2-202 x}

NEW SECTION. **Section 5. {standard} Repealer.** Section 2-15-225, MCA, is repealed.

{Internal References to 2-15-225: None.x}

NEW SECTION. **Section 6. {standard} Codification instruction.** [Sections 1 and 2] are intended to be codified as an

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integral part of Title 2, chapter 15, part 2, and the provisions of Title 2, chapter 15, part 2, apply to [sections 1 and 2].

NEW SECTION. **Section 7. {standard} Effective date.** [This act] is effective July 1, 2005.

NEW SECTION. **Section 8. {standard} Termination.** [Section 3] terminates July 1, 2006.

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