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Legislation Text

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TO:	Board of Supervisors
FROM:	Jennifer Yasumoto, Health & Human Services
REPORT BY:	Gaby Angeles, Staff Services Analyst II
SUBJECT: Health (Tobacco	Renewal of Revenue Agreement with the California Department of Public Control Program)

RECOMMENDATION

Director of Health and Human Services requests approval of and authorization for the Chair to sign the renewal of Revenue Agreement No. 200127B with the California Department of Public Health in the amount of \$150,000 for the term January 1, 2022 through June 30, 2022 for the Tobacco Control Program.

EXECUTIVE SUMMARY

Approval of this Revenue Agreement will enable the County to receive revenue from the California Department of Public Health (CDPH) for the implementation of the County's Tobacco Control Program, which consists of activities to prevent and reduce tobacco use, exposure to secondhand smoke, and health disparities associated with tobacco use.

FISCAL & STRATEGIC PLAN IMPACT

Is there a Fiscal Impact?	Yes
Is it currently budgeted?	Yes
Where is it budgeted?	Health & Human Services Public Health
Is it Mandatory or Discretionary?	Mandatory
Is the general fund affected?	No
Future fiscal impact:	This Agreement terminates June 30, 2022. Appropriations have
	been included in the approved Fiscal Year 2021-2022 budget.
Consequences if not approved:	If the requested action is not approved, the County will not receive
	the State funding to provide the mandated tobacco control services,
	in which case the County will have to fund the services with
	HHSA General Fund.

County Strategic Plan pillar addressed: Healthy, Safe, and Welcoming Place to Live, Work, and Visit

ENVIRONMENTAL IMPACT

ENVIRONMENTAL DETERMINATION: The proposed action is not a project as defined by 14 California Code of Regulations 15378 (State CEQA Guidelines) and therefore CEQA is not applicable.

BACKGROUND AND DISCUSSION

In November 1988, California voters approved the California Tobacco Health Protection Act of 1988, also known as Prop 99. This Act increased the state cigarette tax by 25 cents per pack and added an equivalent amount on other tobacco products. The new revenues were earmarked for programs to reduce smoking, provide health care services to indigents, support tobacco-related research, and fund resource programs for the environment. Approximately 20% of the revenue is used to fund community and school-based health care services to programs to prevent and reduce tobacco use. The remaining 80% of the revenue provides health care services to indigents, support for tobacco-related research, and resource programs for the environment.

In November of 2016, California voters approved Proposition 56 (Prop 56), the California Healthcare, Research, and Prevention Tobacco Act of 2016. Prop 56 added an additional \$2.00 tax to each pack of cigarettes and an equivalent tax to other tobacco products, including electronic smoking devices (ESD). A portion of this tax revenue (13%) is directed toward reducing smoking and tobacco use among all Californians via tobacco prevention and control programs.

CDPH is responsible for supporting a statewide tobacco control program and provides funding for 61 Local Lead Agencies (LLA), including Napa County.

To receive these funds, Napa County must certify each year that it will comply with the State's multi-year Comprehensive Tobacco Control Plan Guidelines. One of the requirements of the Guidelines is the establishment of a tobacco control coalition to obtain public input and support for local tobacco control efforts.

The State Department of Public Health requires that each local health jurisdiction implement evaluation activities through an independent evaluator. Under a separate contract with the County, "Strategies by Design" evaluates the Napa County's Tobacco Control Program to measure the impact of the program's efforts.

Today's action allows Napa County Public Health to accept the revenue allocation for January 2022 through July 2022 in the amount of \$150,000. These funds will allow the program to implement scope of work activities for the plan that began January 1, 2022 and ends June 30, 2025.