

AMENDMENT NO. 3

Calendar No. _____

Purpose: To establish a grant program supporting trauma center violence intervention and violence prevention programs.

IN THE SENATE OF THE UNITED STATES—118th Cong., 1st Sess.

S. 3393

To reauthorize the SUPPORT for Patients and Communities Act, and for other purposes.

Referred to the Committee on _____ and
ordered to be printed

Ordered to lie on the table and to be printed

AMENDMENT intended to be proposed by Mr. MARSHALL

Viz:

1 At the appropriate place in title I, insert the fol-
2 lowing:

3 **SEC. ____ . GRANT PROGRAM SUPPORTING TRAUMA CEN-**
4 **TER VIOLENCE INTERVENTION AND VIO-**
5 **LENCE PREVENTION PROGRAMS.**

6 Part P of title III of the Public Health Service Act
7 (42 U.S.C. 280g et seq.) is amended by adding at the end
8 the following new section:

1 **"SEC. 399V-8. GRANT PROGRAM SUPPORTING TRAUMA CEN-**
2 **TER VIOLENCE INTERVENTION AND VIO-**
3 **LENCE PREVENTION PROGRAMS.**

4 **"(a) AUTHORITY ESTABLISHED.—**

5 **"(1) IN GENERAL.—**The Secretary shall award
6 grants to eligible entities to establish or expand vio-
7 lence intervention or prevention programs for serv-
8 ices and research designed to reduce the incidence of
9 reinjury and reincarceration caused by intentional
10 violent trauma, excluding intimate partner violence.

11 **"(2) FIRST AWARD.—**Not later than 9 months
12 after the date of enactment of this section, the Sec-
13 retary shall make the first award under paragraph
14 (1).

15 **"(3) GRANT DURATION.—**Each grant awarded
16 under paragraph (1) shall be for a period of 3 years.

17 **"(4) GRANT AMOUNT.—**The total amount of
18 each grant awarded under paragraph (1) for the 3-
19 year grant period shall be not less than \$250,000
20 and not more than \$500,000.

21 **"(5) SUPPLEMENT NOT SUPPLANT.—**A grant
22 awarded under paragraph (1) to an eligible entity
23 with an existing program described in paragraph (1)
24 shall be used to supplement, and not supplant, any
25 other funds provided to such entity for such pro-
26 gram.

1 “(b) ELIGIBLE ENTITIES.—To be eligible to receive
2 a grant under subsection (a)(1), an entity shall—

3 “(1) either be—

4 “(A) a State-designated trauma center, or
5 a trauma center verified by the American Col-
6 lege of Surgeons, that conducts or seeks to con-
7 duct a violence intervention or violence preven-
8 tion program; or

9 “(B) a nonprofit entity that conducts or
10 seeks to conduct a program described in sub-
11 paragraph (A) in cooperation with a trauma
12 center described in such subparagraph;

13 “(2) serve a community in which at least 100
14 incidents of intentional violent trauma occur annu-
15 ally; and

16 “(3) submit to the Secretary an application at
17 such time, in such manner, and containing such in-
18 formation as the Secretary may require.

19 “(c) SELECTION OF GRANT RECIPIENTS.—

20 “(1) GEOGRAPHIC DIVERSITY.—In selecting
21 grant recipients under subsection (a)(1), the Sec-
22 retary shall ensure that, collectively, grantees rep-
23 resent a diversity of geographic areas.

24 “(2) PRIORITY.—In selecting grant recipients
25 under subsection (a)(1), the Secretary shall

1 prioritize applicants that serve one or more commu-
2 nities with high absolute numbers or high rates of
3 intentional violent trauma.

4 “(3) HEALTH PROFESSIONAL SHORTAGE
5 AREAS.—

6 “(A) ENCOURAGEMENT.—The Secretary
7 shall encourage entities described in paragraphs
8 (1) and (2) that are located in or serve a health
9 professional shortage area to apply for grants
10 under subsection (a)(1).

11 “(B) DEFINITION.—In subparagraph (A),
12 the term ‘health professional shortage area’
13 means a health professional shortage area des-
14 ignated under section 332.

15 “(d) REPORTS.—

16 “(1) REPORTS TO SECRETARY.—

17 “(A) IN GENERAL.—An entity that re-
18 ceives a grant under subsection (a)(1) shall
19 submit reports on the use of the grant funds to
20 the Secretary, including progress reports, as re-
21 quired by the Secretary. Such reports shall in-
22 clude—

23 “(i) any findings of the program es-
24 tablished, or expanded, by the entity
25 through the grant; and

1 “(ii) if applicable, the manner in
2 which the entity has incorporated such
3 findings in the violence intervention or vio-
4 lence prevention program conducted by
5 such entity.

6 “(B) OPTION FOR JOINT REPORT.—To the
7 extent feasible and appropriate, an entity that
8 receives a grant under subsection (a)(1) may
9 elect to coordinate with one or more other enti-
10 ties that have received such a grant to submit
11 a joint report that meets the requirements of
12 subparagraph (A).

13 “(2) REPORT TO CONGRESS.—Not later than 6
14 years after the date of enactment of the SUPPORT
15 for Patients and Communities Reauthorization Act,
16 the Secretary shall submit to Congress a report—

17 “(A) on any findings resulting from re-
18 ports submitted to the Secretary under para-
19 graph (1);

20 “(B) on best practices developed by the
21 Secretary under subsection (e); and

22 “(C) with recommendations for legislative
23 action relating to intentional violent trauma
24 prevention that the Secretary determines appro-
25 priate.

1 “(e) BEST PRACTICES.—Not later than 6 years after
2 the date of enactment of the SUPPORT for Patients and
3 Communities Reauthorization Act, the Secretary shall—

4 “(1) develop, and post on a public website of
5 the Department of Health and Human Services, best
6 practices for intentional violent trauma prevention,
7 based on any findings reported to the Secretary
8 under subsection (d)(1); and

9 “(2) disseminate such best practices to stake-
10 holders, as determined appropriate by the Secretary.

11 “(f) AUTHORIZATION OF APPROPRIATIONS.—To
12 carry out this section, there is authorized to be appro-
13 priated \$10,000,000 for the period of fiscal years 2024
14 through 2027.”.