



2015-17 BIENNIAL REPORT

Advancing the health and safety of all North Dakotans.

Table of Contents



State Health Officer's Message



Emergency Preparedness and Response



Health Department Overview



Health Resources



Local Public Health Units



Medical Services



Administrative Support



Environmental Health



Community Health



Publications

NDD**ĕ**H By the Numbers

sections committed to the health of North Dakota

Held admin expenses to

§3.6% **§**





dedicated team members

6 A Million

reinvested back into ND communities

2,089,344

new vaccination records entered into the ND Immunization Information System

HTD-

women and children provided healthy food, nutrition education and breastfeeding support through the WIC program.



From the State Health Officer





Mylynn Tufte, MBA, MSIM, BSN State Health Officer



Gratitude

It was with great pleasure that I accepted the offer to join Governor Burgum's team as state health officer in February 2017. As a former critical care nurse turned health care consultant, spending over 18 years setting strategies and transforming clinical, business and information systems has well prepared me for my new position. I'm thankful to follow in the footsteps of Dr. Terry Dwelle, one of the longest serving state health officers. Dr. Dwelle and Arvy Smith, deputy state health officer, assembled a great team of professionals at the North Dakota Department of Health (NDDoH) to achieve the mission of protecting and enhancing the health and safety of all North Dakotans.

Structure

The NDDoH is divided into six sections:
Administrative Support, Community Health,
Environmental Health, Emergency Preparedness &
Response, Health Resources and Medical Services.
These sections encompass divisions that support
evidence-based programs and work that's critical to
the health of North Dakota. In the following pages of
the Biennial Report, you'll be able to read about the
NDDoH, each division, section and program, along
with accomplishments of the last biennium and goals
for the next biennium.

Culture

Our culture of excellence was recognized by the Public Health Accreditation Board (PHAB) when they awarded accreditation to the NDDoH in March 2017. Using the PHAB set of nationally recognized standards

to measure performance has laid the foundation for data-driven methods to increase efficiency, improve service and deliver positive outcomes for the citizens of North Dakota. We will continue to support high quality, evidence-based programs as it's vital to our success moving forward.

Population health

The department has a strong history of collaboration while focused on primary prevention. NDDoH is uniquely positioned to improve health outcomes for North Dakota through successful public and private partnerships. One example of this is the Baby & Me – Tobacco Free program, which has resulted in an 11 percent tobacco usage rate among pregnant women. Due to the work of many partners, his number has dropped nearly 7 percent in the last 10 years and has improved health outcomes for both the mother and baby. Just like this example, I could provide you 100 more.

We cannot do this alone. It takes a dedicated team, successful partnerships, good leadership, financial resources, and an engaged public to create the kind of healthy North Dakota that we know is possible when we all work together. We hope you enjoy what you read.

Mylynn Tufte, MBA, MSIM, BSN State Health Officer

Mission Statement:

The mission of the North Dakota Department of Health (NDDoH) is to protect and enhance the health and safety of all North Dakotans and the environment in which we live.

Department Overview

To accomplish our mission, the NDDoH is committed to:

- Improving the health status of the people of North Dakota
- Improving access to and delivery of quality health care and wellness services
- Preserving and improving the quality of the environment
- Promoting a state of emergency readiness and response
- Achieving strategic outcomes using all available resources
- Strengthening and sustaining stakeholder engagement and collaboration
- Managing emerging public health challenges such as oil impact, flooding and other events

Values

The ND Department of Health values:

- Excellence in providing services to the citizens of North Dakota
- Credibility in providing accurate information and appropriate services
- Respect for our employees, our coworkers, our stakeholders and the public
- Creativity in developing solutions to address our strategic initiatives
- Efficiency and effectiveness in achieving strategic outcomes

Department Overview

The North Dakota Department of Health employs approximately 365 people dedicated to making North Dakota a healthier place to live.

The department's six sections are under the administrative supervision of the state health officer and the deputy state health officer. They include the following:

- Administrative Support
- Community Health
- Emergency Preparedness and Response
- Environmental Health
- Health Resources
- Medical Services

Employees in these sections provide the following core public health services promulgated by Public Health in America:

- Preventing epidemics and the spread of disease.
- Protecting against environmental hazards.
- Preventing injuries.
- Promoting and encouraging healthy behaviors.
- Responding to disasters and assisting communities in recovery.
- Ensuring the quality and accessibility of health services

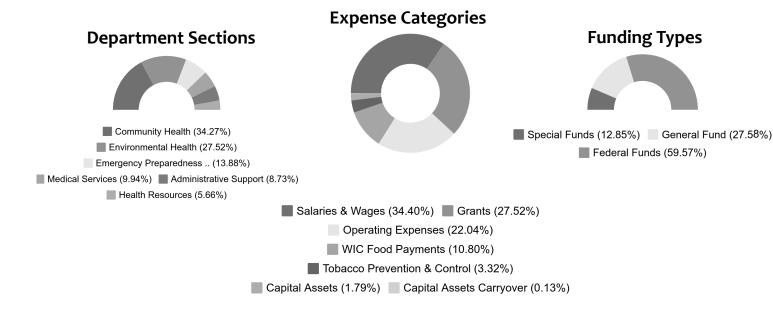


The department logo is a representation of both apples and wheat. An apple is the universal symbol of good health and well-being; the wheat represents the richness of North Dakota's environment.

Financial Summary

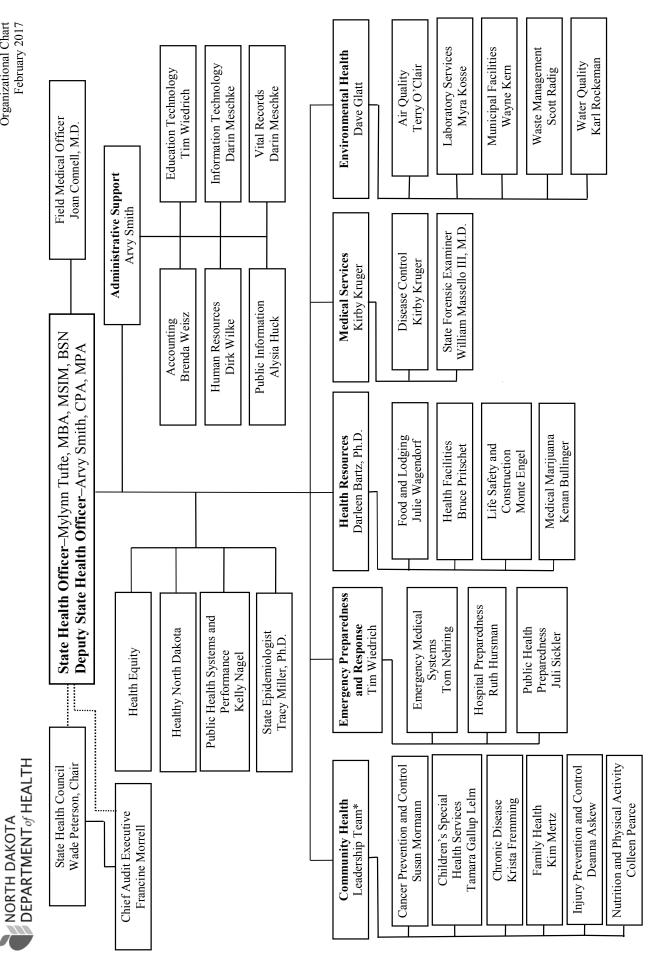
North Dakota Department of Health Appropriations Summary

Description	2015-17 Original Appropriation	SB 2015 Equity Funding	Equity Management		Approved Emergency Commission Request	Funding Change	HB 1024 Deficiency Bill	2015-17 Final Appropriation	
Salaries & Wages Operating Expenses	\$ 62,634,787 44,266,688	\$ 724,558		\$ (443,427) (2,066,243)	\$ 741,630 1,195,170		1,670,000	\$ 63,657,548 45,065,615	
Capital Assets Capital Assets Carryover	3,719,232 0		253,876					3,719,232 253,876	
Grants Tobacco Prevention & Control	57,961,760 6,910,177			(865,000)				57,096,760 6,910,177	
WIC Food Payments	20,200,000							20,200,000	
Total	\$ 195,692,644	\$ 724,558	\$ 253,876	\$ (3,374,670)	\$ 1,936,800			\$ 196,903,208	
General Fund Federal Funds	\$ 51,521,680 123,502,877	\$ 724,558	47,876	\$ (3,374,670)		(493,313)		\$ 48,871,568 123,057,440	
Special Funds	20,668,087		206,000		1,936,800	493,313	1,670,000	24,974,200	
Total	\$ 195,692,644	\$ 724,558		\$ (3,374,670)	\$ 1,936,800	\$ -	\$ 1,670,000	\$ 196,903,208	
Total FTE	365.00							365.00	



North Dakota Department of Health Expenditures

Description	 ministrative Support Section	Medical Services Section	 Health Resources Section	 Community Health Section	Er	vironmental Health Section	P	reparedness & Response Section	E	Total xpenditures
Salaries & Wages	\$ 6,844,236 2,025,883	\$ 5,435,202 10,439,781	\$ 8,106,761 1,543,967	\$ 7,763,950 7,284,972	\$	28,729,083 10,363,664	\$	3,209,088 6,844,854	\$	60,088,320 38,503,121
Operating Expenses Capital Assets Capital Assets Carryover	7,260	492,484	6,953 231,016	7,284,972		1,765,488		861,277		3,133,462 231,016
Grants Tobacco Prevention & Control WIC Food Payments	6,377,189	999,089		20,149,128 5,799,729 18,868,331		7,210,209		13,339,114		48,074,729 5,799,729 18,868,331
Total	\$ 15,254,568	\$ 17,366,556	\$ 9,888,697	\$ 59,866,110	\$	48,068,444	\$	24,254,333	\$	174,698,708
General Fund Federal Funds Special Funds	8,936,783 4,980,183 1,337,602	4,733,712 12,627,659 5,185	2,775,754 5,260,664 1,852,279	7,633,588 47,306,070 4,926,452		14,042,377 23,728,822 10,297,245		10,049,278 10,170,016 4,035,039	\$	48,171,492 104,073,414 22,453,802
Total	\$ 15,254,568	\$ 17,366,556	\$ 9,888,697	\$ 59,866,110	\$	48,068,444	\$	24,254,333	\$	174,698,708
Total FTE	39.10	31.50	50.50	54.65		174.25		15.00		365.00



*The six division directors share responsibility for management of the Community Health Section.

State Health Council

The State Health Council serves as the NDDoH's governing and advisory body. The council's 11 members are appointed by the governor for three-year terms. Four members are appointed from the health care provider community, five from the public sector, one from the energy industry, and one from the manufacturing and processing industry.

The State Health Council's duties include monitoring overall health care costs and quality of health care in North Dakota. The council establishes standards and rules which are necessary for the maintenance of public health and environmental protection. They provide for the development, establishment and enforcement of basic standards for hospitals and related medical institutions, as well as the construction and maintenance of such institutions.

Chair

Wade Peterson, Mandan (Health care)

Vice Chair

Genny Dientsmann, Bismarck (Consumer)

Secretary

Leona Koch, Raleigh (Consumer)

Members

Greg Allen, Jamestown (Manufacturing/Processing)

Howard C. Anderson, R. Ph., Turtle Lake (Health care)

Mike Jones, Bismarck (Energy)

Jerry Jurena, Rugby (Health care)

Gordon Myerchin, Grand Forks (Consumer)

Duane Pool, Bismarck (Consumer)

Jennifer Schaeffer, Medora (Consumer)

Dennis E. Wolf, M.D., Dickinson (Health care)

Office of Internal Audit

The objectives of the Office of Internal Audit are to provide independent assurance to the State Health Council and department management that the department's assets are safeguarded, operating efficiency is enhanced, and compliance with prescribed laws and management policies is maintained.

The Office of Internal Audit provides independent assessments of the department's risk awareness and management of risk, reliability and integrity of the department's data, and achievement of the department's goals and objectives. The Office of Internal Audit also provides department management with assessments and advice for improving processes that will advance the goals and objectives of the department. The Audit Committee of the State Health Council establishes and oversees the Office of Internal Audit.



Strategic Map



CENTRAL CHALLENGE: Protect and Enhance the Health and Safety of All North Dakotans and the Environment in Which We Live **Improve Access** Promote a State Preserve and Improve the to and Delivery Health Status of Improve the of Emergency of Quality the People of Quality of the Readiness Health Care and **North Dakota Environment** and Response **Wellness Services** Decrease Promote and Maintain Preserve Prepare Public Health Vaccine-Preventable and Medical Emergency Statewide Emergency and Improve Disease **Medical Services** Air Quality Response Systems Achieve Healthy Enhance the Maintain Hazard Ensure Weights Quality Safe Public Identification Throughout of Health Care **Drinking Water** Systems the Lifespan Improve Access to Prevent and Reduce Preserve and Improve Maintain Emergency and Utilization of Chronic Diseases and Surface and Ground Communication and Health and Wellness Their Complications Water Quality Alerting Systems Services Prevent and Reduce Coordinate Public Intentional and Improve Health Manage Health and Medical Unintentional Equity Solid Waste **Emergency Response** Injury Prevent and Reduce **Ensure Safe Food** Tobacco Use and Support Other Substance and Lodging Services Abuse Prevention Reduce Infectious and Toxic Disease Rates Manage Emerging Public Health Challenges such as Oil Impact, Flooding and Other Events **Achieve Strategic Outcomes Using All Available Resources** Healthy North Dakota Strengthen and Sustain Stakeholder Engagement and Collaboration

Office of the State Health Officer

The Office of the State Health Officer manages the activities of and provides direction and leadership to the ND Department of Health. The office is comprised of the state health officer, deputy state health officer, field medical officer, state epidemiologist, office of public health systems and performance, and the Healthy North Dakota initiative.

State Health Officer

The state health officer is appointed by the governor to be the chief administrative officer of the department, as well as a member of the governor's cabinet. The state health officer implements state laws governing the department within the guidance of the governor and the rules adopted by the State Health Council. In addition, the state health officer is a statutory member of approximately a dozen boards and commissions. The state health officer also supervises the Public Health Training Center, which is a cooperative effort among the NDDoH, the University of North Dakota, North Dakota State University and the University of Minnesota. As a result of this collaboration, several universities and colleges, including many in North Dakota, are offering public health curricula.

Deputy State Health Officer

The deputy state health officer addresses administrative policy and practice, which allows the state health officer to focus on medical policy and practice. The deputy also serves as section chief for the Administrative Support Section.

Accomplishments

- Achieved national accreditation through the Public Health Accreditation Board (PHAB) in March 2017.
- Coordinated the department's 2017 legislative efforts, including monitoring over 111 bills, approving all department testimony, guiding the department budget through the legislative process, and briefing various organizations on the status and outcome of legislation.
- Coordinated department interim legislative efforts, followed activity of 16 interim committees, and approved all department testimony.

Goals

- Lead the State Health Improvement Plan (SHIP) implementation with the short-term goals of 1) Promoting health through worksite wellness, and 2) Increasing immunization rates in school children.
- Eliminate BreatheND (SB2024) and transfer accountability for tobacco prevention and control to the department.
- Implement the Medical Marijuana Program (SB 2344).
- Establish the ND Department of Environmental Quality (SB 2327).

Lead the State Health Improvement Plan (SHIP)

Eliminate
BreatheND and
obtain tobacco
prevention &
control

Implement the Medical Marijuana Program

Establish the ND Department of Environmental Quality

Office of Public Health Systems & Performance

The Office of Public Health Systems and Performance works through collaboration and partnership to build capacity, improve performance, and strengthen North Dakota's public health system. The office acts as a liaison to local public health units and other key public and private partners. The office director administers the state block grant which provides funding to local public health units, and advises the state health officer about issues related to local public health and the public health system. The director also serves as the performance improvement manager, coordinating efforts in public health accreditation, strategic planning and quality improvement.

Programs Include:

- Public Health Systems
- Public Health Performance

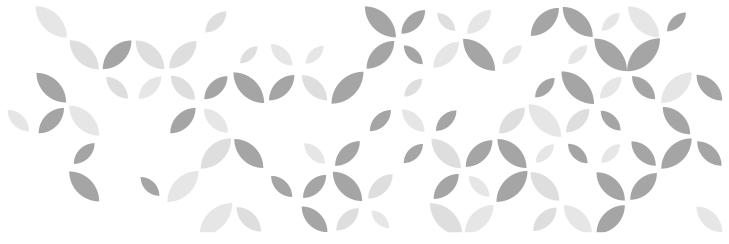
Accomplishments

- Served on the board of directors for the Association of State and Territorial Local Liaison Officials.
- Achieved National Public Health Accreditation status
- Developed and implemented the state health assessment and state health improvement plan.
- Created a system of performance management which includes the measurement of strategic indicators and a process for quality improvement.
- Established an inter-agency Health Equity Committee to address statewide health disparities.

 Awarded funding to increase the capacity and resources of local public health units to provide public health services.



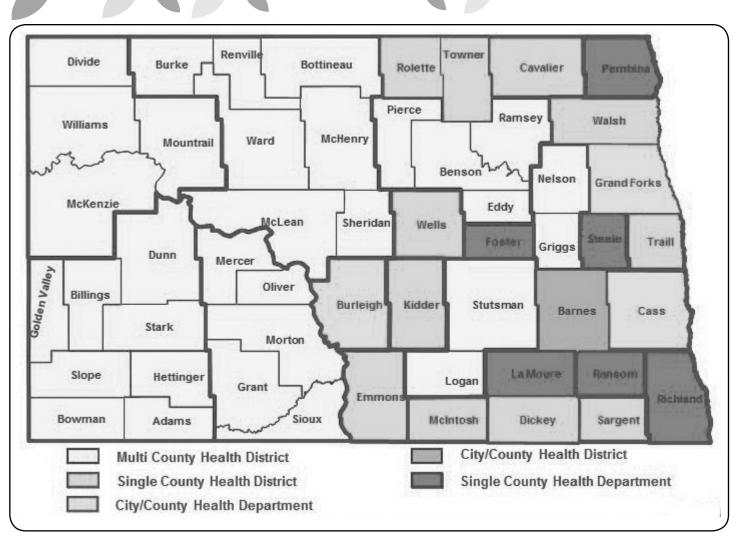
- Strengthen the department's performance management system by building a culture of quality improvement.
- Create a coordinated system to assist local public health units in preparing for National Public Health Accreditation.
- Maintain the department's National Public Health Accreditation status.
- Assist regional public health networks in strategy implementation and sustaining the networks.
- Create a system for public health, primary care, and behavioral health prevention integration.



Local Public Health Units

North Dakota's public health system is made up of 28 single and multi-county local public health units (LPHUs).

Services offered by each LPHU vary, but all provide services in the areas of maternal and child health, health promotion and education, disease control and prevention, and emergency response preparation and coordination. Some local public health units maintain environmental health programs; others partner with another local public health unit or the NDDoH to provide environmental services, such as public water system inspections, nuisance and hazard abatement, and food service inspections.



Local Public Health Unit Represenatives









Health Unit

Bismarck-Burleigh Public Health **Cavalier County Health District Central Valley Health District City-County Health District Custer Health Dickey County Health District Emmons County Public Health** Fargo Cass Public Health First District Health Unit **Foster County Public Health Grand Forks Public Health Department Kidder County District Health Unit** Lake Region District Health Unit LaMoure County Public Health Department McIntosh District Health Unit Nelson/Griggs District Health Unit **Pembina County Health Department** Ransom County Public Health Department **Richland County Health Department Rolette County Public Health District Sargent County District Health Unit** Southwestern District Health Unit **Steele County Public Health Department Towner County Public Health District** Traill District Health Unit Upper Missouri District Health Unit

Walsh County Health District

Wells County District Health Unit

Location

Bismarck Langdon Jamestown Valley City Mandan Ellendale Linton Fargo Minot Carrington **Grand Forks** Steele Devils Lake LaMoure Ashley McVille Cavalier Lisbon Wahpeton Rolla Forman Dickinson Finley Cando Hillsboro Williston Grafton Fessenden

Administrators

Renae Moch, MBA, CMPE

Terri Gustafson, R.N. Robin Izler, R.N. Theresa Will, R.N. Keith Johnson Roxanne Holm Bev Voller, R.N. Ruth Bachmeier, R.N. Lisa Clute Lisa Hilbert, R.N. Debbie Swanson Ianel Brousseau Allen McKay Tony Hanson Cheryl Reis-Schilling Julie Ferry, R.N. Jeanne Kujava Brenna Welton Debra Flack, R.N., M.S. Barb Frydenlund, R.N. Brenda Peterson **Sherry Adams** Brittany Ness. R.N. Sherry Walters, B.S.N., R.N. Brenda Stallman, R.N. Javayne Oyloe Wanda Kratochvil, R.N. Brittany Long, R.N.

October 2017

Local Public Health Unit Expenditures

For the Period July 1, 2015, through June 30, 2017

	Total	Annual Per Capita
District Health Units	Expenditures	Expenditures
Cavalier County Health District	\$ 783,559	\$ 101.63
Central Valley Health Unit	5,077,908	110.04
City County Health Dept	2,316,298	103.93
Custer District Health Unit	4,920,118	60.64
Dickey County Health District	770,562	74.81
Emmons County Public Health	544,301	79.53
First District Health Unit	10,382,541	53.05
Foster County Public Health	497,261	73.95
Kidder County District Health Unit	358,760	74.00
Lake Region Dist Health Unit	3,339,386	66.32
McIntosh Dist Health Unit	352,459	62.92
Nelson Griggs District Health	711,894	66.36
Rolette County Public Health	1,643,212	56.21
Sargent County District Health	464,161	59.04
Southwestern Dist Health Unit	6,546,622	70.31
Towner County Public Health	422,531	91.46
Trail District Health Unit	640,060	39.60
Upper Missouri Dist Health Unit	4,571,103	41.30
Walsh County Health Dept	1,176,276	53.61
Wells County Dist Health Unit	873,803	104.22
City/County Health Departments		
Bismarck-Burleigh Public Health	5,013,059	27.70
Fargo Cass Public Health	20,946,076	62.71
Grand Forks Public Health Dept	8,515,995	60.71
County Health Units		
LaMoure Public Health Unit	674,497	81.28
		40.16
Pembina County Health Unit Ransom County Health Dept	572,498 585,536	78.82
Richland County Health Dept	2,554,493	77.73
Steele County Public Health	149,231	38.17
Siecie County r uone meatin	147,431	30.17
Total Local Public Health Funding	\$86,482,058	\$58.47 Average Per Capita

Healthy North Dakota

Healthy North Dakota's mission is to inspire and support North Dakotans to improve physical, mental and emotional health by building innovative statewide partnerships.



Launched in 2002, Healthy North Dakota's role is to bring together partners and stakeholders to identify common strategies and innovative approaches to public health issues. Currently, the program links more than 60 agencies, organizations, higher education

institutions, and businesses from across the state. This prevents duplication of effort and helping groups to work toward common prevention goals.

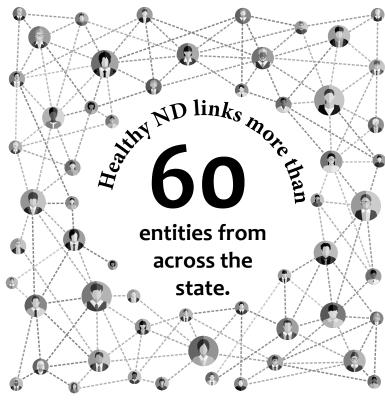
Specifically, Healthy
North Dakota has
identified and filled gaps
in prevention efforts,
provided consistent
language and messaging
for prevention, connected
partners working on
similar activities, and
helped to obtain grants.

Healthy North Dakota is funded by a grant from the Centers for Disease Control and Prevention. on health disparities experienced by American Indian people and people with low and moderate incomes.

• Implemented the strategic plan for Creating a Hunger Free North Dakota. This included:

- o Working to address the unmet food and hunger needs of the people of North Dakota through system and policy changes.
- o Holding the Creating Hunger Free Communities Summit with 91 participants attending.
- o Providing an assessment toolkit to state pediatricians to help link clinical and food access needs of patients to community resources.
- o Providing education to broaden the understanding of hunger issues through the

website and Rural Grocer Summit and Tribal Food Summit.



Accomplishments

- Participated with the state's health care leaders and the Statewide Vision and Strategy for Healthier North Dakota group to focus efforts on improving the health of employees and increasing student vaccination rates.
- Helped to obtain funding from the Bush
 Foundation and coordinated efforts to increase
 student vaccination rates in the western part of the
 state.
- Facilitated discussions with statewide partners during bi-monthly meetings to provide education

- Continue to implement the coalition's strategic plan for Creating a Hunger Free North Dakota, which envisions a hunger-free state through education and outreach, advocacy, raising awareness and sustainability.
- Identify strategies for improved collaboration and alignment with Governor Burgum's Main Street Initiative.

Field Medical Officer

The field medical officer provides medical direction and support to programs throughout the NDDoH, including serving as medical director of Special Health Services. Areas of emphasis and advocacy include improving access to quality care, building partnerships that result in improved services and population health, and serving as a liaison between patients and providers, health care organizations and public health.

Accomplishments

- Provided consultation concerning programs, projects and patient care issues.
- Improved communications with private physicians and clinics.
- Increased pool of providers trained in comprehensive care coordination.
- Supported projects that resulted in partnerships between state public health and University of North Dakota (UND) School of Medicine.
- Supported projects that resulted in partnerships between North Dakota medical associations and public health.

Goals

- Improve access to care through traditional and innovative strategies.
- Improve access to comprehensive care coordination for patients with special health care needs.
- Provide clinical consultation support to NDDoH.
- Improve communication between patients and providers, health care organizations, and the NDDoH.
- Provide consultation support for divisional clinical protocol development.
- Provide presentations, education and dialogue forums at medical meetings.
- Provide direction and support during disease outbreaks.
- Incorporate public health into University of North Dakota School of Medicine residency training.
- Participate in the integration of public health programs with clinical medicine.
- Support MPH programs at the UND and North Dakota State University (NDSU).



State Epidemiologist

The state epidemiologist coordinates epidemiological studies, investigations and surveillance activities; conducts data analysis; and provides technical expertise and consultation. Additional responsibilities include collaborating on disease surveillance, data acquisition, database management and health intervention activities, and providing information to health care providers, community organizations, and the media.

Accomplishments

 Participated in authoring articles published in the American Journal of Infection Control, International Journal of Systematic and Evolutionary Microbiology, and The Lancet.

- Secured new data sources for the NDDoH, including hospital discharge data and prescription drug monitoring program data.
- Continued participation in the National Alliance for Radiation Readiness (NARR) situational awareness meetings held in Alexandria, VA.
- Appointed by the governor to the Health Information Technology Advisory Committee.

- Improve opioid surveillance and reporting.
- Develop health surveillance surrounding the new medical marijuana program.
- Improve laboratory reporting for newborn screening.

Primary Care Office

The goal of the Primary Care Office is to improve primary care service delivery and workforce availability. This is accomplished by facilitating and coordinating activities within the state that relate to the delivery of primary care services and the recruitment and retention of critical health care providers.

Activities managed by the North Dakota Primary Care Office include:

- Designating workforce shortage areas.
- Managing state loan repayment programs for dentists, physicians, physician assistants, advanced practice nurses, behavioral health professionals, and veterinarians.
- Managing the J-1 Visa Waiver program for foreign medical graduates.
- Administering the National Health Service Corps Program.
- Managing the Federal State Loan Repayment Program.

Accomplishments

- Forty-two providers were extended contracts for State Loan Repayment Programs providing care in underserved areas of the state.
- Through promotional efforts and community match commitment, the providers receiving the Federal State Loan Repayment increased from eight to 14.

Goals

 Increase the number of applicants and awards for the State and State Federal Loan Repayment Programs through new partners, increased promotion efforts, and funding opportunities.



Administrative Support Section

The Administrative Support Section, supervised by the Deputy State Health Officer, provides support services to assist all NDDoH sections. The section consists of the following divisions:





Division of Accounting

The Division of Accounting is responsible for fiscal operations of the agency, including providing purchasing guidance, processing expenditures and revenue, budget preparation and submission, budget management, financial reporting, grant application review, and administering contracts and grants.

Accomplishments

- Formalized and streamlined the grant application approval process.
- Formalized the purchasing, revenue, and budgeting policies into an accounting manual.
- Held administrative expenses to 3.6 percent.

- Implement an electronic contract tracking system within PRS.
- Provide leadership and direction in establishing shared services to the new Department of Environmental Quality (DEQ).
- Hold administrative expenses to less than 5 percent.



Division of Education Technology

The Division of Education Technology provides an infrastructure for communicating and training public health and medical personnel through distance learning. Some activities are in response to emergencies and are immediate and some are delivered over an extended period. Most training and communications products are archived and accessible on the web.

Accomplishments

• Established a joint public information and training facility with appropriate capabilities to produce press conferences, traditional classroom training, and statewide public health and medical emergency preparedness distance learning.

Goals

• Produce distance learning materials that address public health and medical emergency preparedness and response operations protocols and procedures.



Division of Human Resources

The Division of Human Resources provides a variety of services to the NDDoH, including employee relations, recruitment, position classification, training and development, salary and benefits administration, policy development, safety, wellness and HIPAA.

Accomplishments

- Achieved a turnover rate below the state average for both years of the biennium.
 2015- 12.6% state 10.3% NDDoH
 2016- 11.3% state 7.6% NDDoH
- Achieved a bronze level award from the American Heart Association for the 2016 Workplace Health Achievement.

Goals

- Keep turnover rates below the state average for the biennium.
- Achieve recognition of bronze level or higher for worksite wellness program.



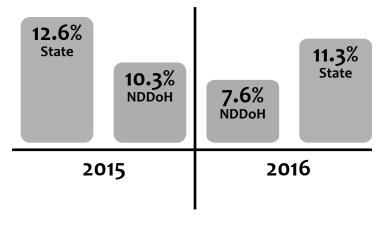
Office of Public Information

The Office of Public Information is responsible for managing department communications and ensuring effective, accurate, and factual messaging.

Accomplishments

 Edited and approved hundreds of news releases/ brochures/posters/letters/etc.

Employee Turnover NDDoH vs. State



- Reorganize and redesign the department website.
- Develop a department PIO manual.



Office of Information Technology

The Office of Information Technology provides leadership to information technology (IT) professionals throughout the department in coordinating activities and functions. The office also develops and implements the department's IT plan; monitors IT budgets; assigns IT staff and support; and monitors the security component of the Health Insurance Portability and Accountability Act (HIPAA).

Accomplishments

• The Division of Food & Lodging implemented

their new web based Information Management System (FIMS) that allows their staff to more efficiently and effectively enter data regarding inspections and licensing.

Goals

- Implement cost-effective technology solutions throughout the department.
- Expand the use of web-based solutions for easier access to both internal and external customers.



Division of Vital Records -

The two main functions of the Division of Vital Records are registration and certification of vital events that occur within the state. This includes records of all births, deaths, fetal deaths, marriages and divorces. In addition, the division provides certified copies of vital event documents as requested by the public either in-person or via the website.

Accomplishments

- Registered 25,719 certificates of live birth;
 13,704 certificates of death; 170 certificates of fetal death; 9,122 marriage records; 4,056 divorce records; 33 delayed registrations of birth; and 271 births that occurred at home or outside of a hospital setting.
- Processed 100,527 requests for more than 266,000 certified copies, record searches, amendments and verifications. The fees collected for providing these services were deposited to the state's general fund.

Goals

- Maintain 100 percent registration of all vital events in the state. To achieve this goal, extensive querying and follow-up is done.
- Continue timely response to requests for certified copies of vital event documents.



Vital Statistics

On an average day in North Dakota:

- 31 babies are born; 10 of them are born out of wedlock, 1 is born to a teenage mother and 4 are born by Cesarean section
- 17 people die, 4 of them from heart disease and 3 from cancer
- 12 couples are married, and 5 are divorced

In an average week:

- 1 infant dies
- 2 people die from suicide
- 3 people die from diabetes
- 2 people die from influenza and pneumonia
- 6 people die as a result of accidents

In an average month:

- 4 children younger than 20 die
- 5 people die as a result of motor vehicle accidents
- 11 babies are born outside of a hospital setting

The average age at death is 75.



The goal of the Community Health Section is to promote health and prevent illness and disease. Local public health units and other partners across the state provide many of these services.

The director from each division is a member of the Leadership Team and serves in rotation as section lead.

Community Health Section is comprised of six divisions:

- Cancer Prevention and Control
- Children's Special Health Services
- Chronic Disease
- Family Health
- Injury Prevention and Control
- Nutrition and Physical Activity

Cancer Prevention and Control

The Division of Cancer Prevention and Control works to reduce the incidence of death from cancer in North Dakota. Programs include:

- Behavioral Risk Factor Surveillance System
- Comprehensive Cancer Prevention and Control
- North Dakota Cancer Screening Initiative
- Statewide Cancer Registry
- Women's Way

Accomplishments

Behavioral Risk Factor Surveillance System (BRFSS)

• Provided data support for a variety of programs within the department. Significant support was provided to the Comprehensive Cancer Prevention and Control Program, the Chronic Disease Division, and to the Healthy People 2020 program.

Comprehensive Cancer Prevention and Control

- Increased North Dakota Cancer Coalition (NDCC) member/organization engagement from 44 percent to 82 percent. This group implemented strategies from the North Dakota State Cancer Plan to impact cancer prevention, screening, treatment, and survivor quality of life.
- Worked with the NDCC treatment and survivorship work groups to conduct the third biennial Cancer

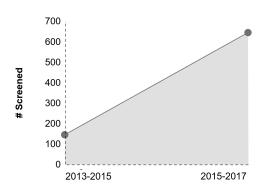
Cancer Prevention and Control

Patient Survey, with participation from 100 percent of all accredited cancer centers in North Dakota. The survey was completed by 715 cancer patients, a 21 percent increase in participation over the last survey. The results are used by cancer centers to improve survivor services, make ongoing system and policy changes to improve patient care during and after treatment, and meet Commission on Cancer patient assessment requirements.

- Increased HPV immunization rates for 9 providers (7 counties and 2 metropolitan health systems) between 10 and 40 percent through implementation of evidence-based policy and systems changes via the Comprehensive Cancer Control Sub-Contract Program.
- Continued partnership with American Cancer Society to co-lead a statewide colorectal cancer roundtable. Through roundtable efforts, we increased the number of organizations that signed the 80% by 2018 screening pledge from 1 to 22. Colorectal cancer screening rates increased from 62 percent to 65 percent during the 15-17 biennium.

North Dakota Cancer Screening Initiative

Colorectal Cancer Screenings



- Collaborated with *Women's Way*, the Colorectal Cancer Screening Initiative, and the Comprehensive Cancer Control Program to develop a new structure to increase cancer screenings among those eligible based on age, income and insurance status.
- Promoted and implemented utilization of take-home stool tests as front-line testing for average risk patients. Screened an additional 497 individuals with the inclusion of the new test and increased the total number of colorectal cancer screenings from 144 to 641.
- North Dakota Cancer Screening Initiative grantees provided 5,107 navigation service encounters that resulted in the following screens: 510 mammograms, 778 Pap tests, 476 IFOB/FIT tests, and 165 colonoscopies.
- Partnered with North Dakota Comprehensive Cancer Control and American Cancer Society to provide focused training for all federally qualified health centers, tribal health, and Indian Health Services.

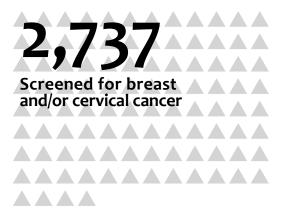
Statewide Cancer Registry

- Awarded "Registry of Excellence" by CDC/NPCR for providing complete and timely National Program of Cancer Registry (NPCR) data in 2013, 2014 and 2015. Fifty central NPCR registries exist in the United States and territories and only 13 awards for excellence were made in 2013 and 19 in 2014. In 2016, the Cancer Registry was awarded "Registry of Distinction," only 23 awards were made.
- Achieved gold certification for data timeliness, completeness, and quality five years in a row (from 2013 to 2017) by North American Association of Central Cancer Registry (NAACCR).
- Responded to 163 data requests or "cancer cluster" inquiries from ND Cancer Prevention and Control program, North Dakota hospitals, university faculties and students, and research foundations.
- Initiated internal quality review of coding for chronic lymphocytic leukemia (CLL), a cancer that occurs at a very high rate in North Dakota, and is suspected of being associated with environmental risk factors. This study demonstrated a significant correlation between residential radon and incidence rates for chronic lymphocytic leukemia. Source: County level incidence rates of chronic lymphocytic leukemia are associated with residential radon levels. Future Oncology Journal (2017) 13(21), 1573–1581.

Cancer Prevention and Control

Women's Way

• Screened 2,737 women for breast and/or cervical cancer. During this time frame, 20 individuals were

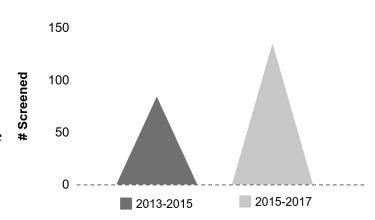


diagnosed with breast cancer, as well as 27 cervical conditions required treatment.

• Women's Way had 728 women transition to Medicaid Expansion and received authorization from CDC to provide patient navigation services to these women. Women's Way provided navigation services to 525 clients, of which 345 were screened (66%) and resulted in 314 breast procedures and 299 cervical procedures. These results caused the CDC to create a new policy for all their funded programs to provide navigation services to non-program eligible women who qualify for public insurance programs such as Medicare Part B, Medicaid, and Medicaid Expansion.

- A lay tribal navigator provided services for women on the Fort Berthold Reservation, which included women's breast and cervical cancer education, *Women's Way* enrollments and encouragement or assistance with appointment scheduling. This increased the number of women enrolled and receiving screening from 84 women last biennium to 135 this biennium.
- The *Women's Way* program director was appointed to the National Breast and Cervical Cancer Early Detection and Control Advisory Committee by the Secretary of Health and Human Services (HHS), Sylvia M. Burwell.

Fort Berthold Breast and Cervical Cancer Screenings



- Provide breast and cervical cancer screening and diagnostic services annually to approximately 1,000 to 1,500 eligible *Women's Way* women.
- Provide colorectal cancer screenings and diagnostic services to enrolled individuals associated with selected grantees.
- Provide treatment services to uninsured *Women's Way* clients with breast or cervical cancer through the Medicaid-*Women's Way* Treatment Program.
- Increase breast, cervical, and colorectal cancer screenings through systems change, patient navigation, target messaging and collaboration with statewide partners and organizations.
- Annually merge Women's Way data with the North Dakota State Cancer Registry.
- Continue implementation of strategies identified in the state Cancer Control Plan for Comprehensive Cancer Control.
- Maintain North American Association of Central Cancer Registries certification.
- Maintain the security requirements necessary for cancer data storage or transmission and maintenance of registry software to ensure data collected meets the CDC/NPCR requirements and NAACCR standards.

Children's Special Health Services

The Division of Children's Special Health Services (CSHS) provides services for children with special health care

needs and their families and promotes family-centered, community-based, coordinated services and systems of health care.

Programs include:

- Autism Spectrum Disorder (ASD) Database
- Care Coordination Program
- Children with Special Health Care Needs (CSHCN) Service System
- Information Resource Center
- Metabolic Food
- Multidisciplinary Clinics
- Russell-Silver Syndrome Program
- Specialty Care Diagnostic and Treatment Program
- State Systems Development Initiative (SSDI)



Accomplishments

Autism Spectrum Disorder (ASD) Database

- Drafted administrative rules for the ASD database, which became effective January 1, 2016.
- Implemented a new ASD Database in February 2016. Over 450 ASD reports have been submitted since the database was initiated.
- Convened an ASD Database Advisory Group in March 2017 to advise the NDDoH and represented the department on the governor-appointed ASD Task Force.

Care Coordination

- Funded care coordination services through select medical home practices and county social service staff that served children and youth with special health care needs; annually 275-300 families were served.
- Provided a variety of care coordination training opportunities to support children with special health care needs and their families, including funding for a medical home care coordination online course, a presentation on care coordination best practices and tips for family engagement, and planning efforts for delivery of a pediatric care coordination course created by Boston Children's Hospital. Training was provided to 112 participants.

Children with Special Health Care Needs (CSHCN) Service System

- Continued partnering with the North Dakota Center for Persons with Disabilities (NDCPD) to implement an early hearing detection and intervention program.
- Staff participated in approximately 30 committees advocating for a community-based system of services for families having children and youth with special health care needs. Staff also convened a 10 member Family Advisory Council that met every four months and a 12 member medical advisory council that met annually.
- New grant application guidance was drafted that incorporated patient centered medical home recognition, medical home quality improvement practice initiatives, and family leadership and engagement.
- Education and training was provided to advance youth transition. This included dissemination of a fact sheet with the Six Core Elements of Health Care Transition brochure to a wide range of health care providers, as well as conducting a presentation on health transition to the North Dakota School Nurse Organization. 147 individuals received education on health care transition in 2016.

Children's Special Health Services

Information Resource Center

 Provided funding to Family Voices of North Dakota to support 813 families and 500

professionals through a variety of health information and education center activities, including support of a Parent Leadership Institute in June 2017.



Metabolic Food

- Provided metabolic food and low-protein modified food products for about 25 individuals who have phenylketonuria (PKU) and maple syrup urine disease (MSUD).
- Developed policies to expand provision of medical food for males up to 26 years of age with PKU or MSUD.

Multidisciplinary Clinics

- Supported multidisciplinary clinics coordinating management of chronic health conditions for over 1,500 children each year.
- Disseminated an annual clinic directory to 2,500 providers across the state.
- Directly managed 15 statewide cleft lip/palate clinics and the Cardiac Care for Children Program. Care coordination services were also provided for the 1,107 children who attended. Changes to the Cardiac Care for Children Program, which included coverage for an initial cardiac office visit, were successfully implemented on January 1, 2017.
- New grant application guidance was drafted for multidisciplinary clinic services that incorporated youth transition to adult health care.

Russell-Silver Syndrome Program

 Administered a special program for children with Russell-Silver Syndrome. The program served four children each year of the biennium by providing increased access to growth hormone treatment, medical food, and expert consultation and management.

Specialty Care Diagnostic and Treatment

- Assisted over 400 families during the biennium with payment for medical services for eligible children, which helped to ensure early diagnosis and access to specialty care.
- Continued to collaborate with the North Dakota Medicaid Program in the roll-out, testing, and updates for the ND Health Enterprise Medicaid Management Information System.
- Revised and reprinted the Family Handbook, a publication that provides guidance to families served through the diagnostic and treatment programs.

State Systems Development Initiative (SSDI)

- Provided extensive data required for the annual Title V Maternal Child Health (MCH) block grant application and assisted in its submission. This included identification of evidence-based strategies and intervention measures that address national and state priorities.
- Implemented the North Dakota Birth Defects Monitoring System.

- Provide direct services to 2,000 children each year.
- Continue care coordination training and quality improvement efforts on behalf of individuals with special health care needs and their families.
- Initiate new assessment activities for the upcoming five-year Title V MCH needs assessment.
- Develop reports and fact sheets using data from the 2016 National Children's Health Survey.
- Support initiatives that lead to a community-based system of services for children with special health care needs. Focus areas include screening, medical home, family partnership and satisfaction, adequate insurance, community-based service systems, and transition.

Chronic Disease -

The Division of Chronic Disease works to prevent chronic diseases and improve quality of life for North Dakota residents by promoting healthy behaviors, supporting health care improvement measures, developing community policies and practices, and increasing disease risk awareness.

Programs include:

- Coordinated Chronic Disease Prevention
- Heart Disease and Stroke Prevention
- Tobacco Prevention and Control

Accomplishments

Coordinated Chronic Disease Prevention

- Hosted annual meeting for partners to network and share accomplishments in chronic disease prevention and management, as well as to plan for future collaboration opportunities.
- Coordinated monthly communication with all partners to share chronic disease-related events/trainings and opportunities for collaboration.



Heart Disease and Stroke Prevention

- Partnered with Altru Health System, Sanford Health and Essentia Health on identification and management of patients with hypertension, diabetes and prediabetes.
- Implemented two Hypertension Summits to educate health care providers on best practices related to the prevention, identification and management of patients with high blood pressure.
- Partnered with Blue Cross Blue Shield of North Dakota to train over 350 health care providers across the state on how to take blood pressure accurately.
- Raised public awareness of hypertension (high blood pressure) through a partnership with NDDoH's
 Division of Emergency Medical Systems Cardiac-Ready Communities Project. Part of the designation
 criteria for cardiac-ready communities is conducting community blood pressure screening events that
 include a referral to primary care for those with high blood pressure.

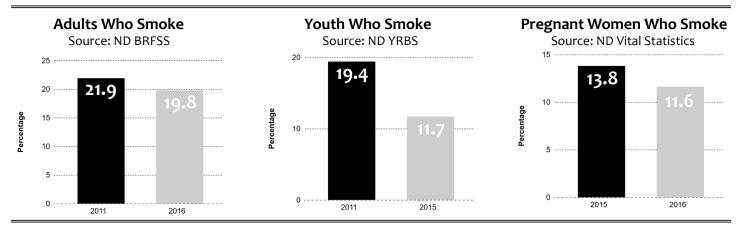
Tobacco Prevention and Control

- During the biennium, NDQuits served more than 7,000 unique tobacco users. More than 36 percent of
 members were tobacco free seven months after completing the program. NDQuits provides free phone and
 online coaching and nicotine replacement therapy (for those who qualify) to any North Dakota tobacco user
 interested in quitting.
- Implemented direct electronic referrals to NDQuits from health system electronic health records. Health systems that have implemented direct electronic referrals have nearly doubled the number of referrals sent to NDQuits.
- Collaborated with the Behavior Risk Factor Surveillance System (BRFSS) to assess adult tobacco attitudes and behaviors, and to evaluate tobacco prevention programs. According to the BRFSS, the percentage of North Dakota adults who currently smoke cigarettes decreased from 21.9 percent in 2011 to 19.8 percent in 2016.

Chronic Disease

Conducted the Youth Tobacco Survey (YTS) in coordination with the Youth Risk Behavior Survey (YRBS) to assess youth tobacco attitudes and behaviors and evaluate tobacco prevention programs. The YRBS indicated that North Dakota youth who currently smoke cigarettes significantly decreased from 19.4 percent in 2011 to 11.7 percent in 2015.

- Improve chronic disease prevention, early diagnosis and disease management by working with communities, health professionals, and health systems in the areas of policy, quality improvement, and education.
- Increase the reach of tobacco cessation services in the state.



- Implemented the North Dakota Smoke-Free Casino project with the Intertribal Tobacco Abuse Coalition (ITAC), which has members from every tribe and reservation in North Dakota. In February 2017, ITAC celebrated its first major victory with Spirit Lake Casino's implementation of a smokefree policy on the main gaming floor. Smoke-free casino education and implementation continues on Standing Rock and Turtle Mountain reservations.
- Implemented the BABY & ME Tobacco Free™
 Program in health care systems. This program
 provides tobacco cessation support and relapse
 prevention for pregnant women. Between 2015
 and 2016, the rate of North Dakota women who
 smoked during pregnancy dropped from 13.8 to
 11.6 percent.

- Provide grants, training, education and technical assistance to communities and health care providers.
- Increase the number of nontraditional chronic disease partners.
- Improve chronic disease surveillance and evaluation methods; increase epidemiology capacity.
- Collect, analyze and report data to assess chronic disease prevalence, incidence and impact, and to evaluate programs.



Family Health

The Division of Family Health administers state and federal programs designed to improve the health of North Dakota families. Programs include:

- Abstinence Education
- Cribs for Kids
- · Family Planning
- Fetal Alcohol Syndrome
- Infant and Child Death Services
- Maternal Child Health/Oral Health Epidemiology

- Pregnancy Risk Assessment Monitoring System (PRAMS)
- Newborn Screening
- Optimal Pregnancy Outcome
- Oral Health
- School Health
- Title V/Maternal and Child Health
- Women's Health



Abstinence Education

- Provided funding for performances and workshops throughout the state that delivered a powerful message to youth dealing with issues such as bullying, drugs, sex, self-image issues, suicide, cutting and self-harm, abusive relationships, and violence.
- Provided funding for the development and implementation of middle school and high school curriculum that
 includes the following lessons: respect for self and positive self-image, respect for others, proper use of the
 internet and social media, risks of using alcohol and other drugs, healthy relationships and dating violence,
 potential physical and mental consequences of sexual involvement, and the merits of adopting abstinence as the
 safest lifestyle choice.

Cribs for Kids

- Safe sleep education materials and 450 crib kits were provided to 21 partner locations throughout the state for
 placement with low-income families. Crib kits included a Graco Pack n' Play, crib sheet, pacifier, and a swaddle
 sack.
- Added three rural partner sites to expand coverage to more families in North Dakota.

Family Planning

- Provided medical, education, and counseling services to over 16,000 individuals at 18 locations statewide.
- Collaborated with the State Suicide Prevention Program to provide suicide screenings to almost 11,000 family planning clients.
- Provided professional development to local family planning staff on a variety of topics, including: sexually transmitted infections, Quality Family Planning, ICD-10 coding, suicide prevention assessments, breast cancer screening guidelines, colorectal cancer screening guidelines, nursing scope of practice, reproductive health, quality improvement initiatives, billing and coding, and intimate partner violence and trauma informed care.

Family Health

Fetal Alcohol Syndrome

 Provided grant oversight to the University of North Dakota's Fetal Alcohol Syndrome Center for program activities.

Infant and Child Death Services

- Developed a Sleep Safe North Dakota media campaign to promote safe sleep practices statewide.
 The campaign includes posters, window clings, video and radio public service announcements.
- Distributed safe sleep mini-grants to 18 grantees statewide to promote safe sleep and distribute educational materials.
- Participated in the national Infant Mortality
 Collaborative for Improvement and Innovation
 Network (CoIIN) Initiative to promote safe sleep
 practices.

Maternal Child Health/Oral Health Epidemiology

- Completed a statewide, comprehensive needs assessment for the maternal and child health population resulting in the selection of state priorities.
- Completed evaluation of maternal risk factors for newborn screening refusal.
- Completed Title X/Family Planning three-year needs assessment.
- Completed the Oral Health Basic Screening Survey of Older Adults to measure and monitor the burden of oral disease in older adults.
- Partnered with the Head Start Association to collect data and monitor the oral health of Head Start children.
- Conducted dental workforce data collection and dissemination.

Pregnancy Risk Assessment Monitoring System (PRAMS)

- Received PRAMS grant funding to collect, analyze and translate data from new mothers on health risk behaviors prior to, during and immediately after pregnancy.
- Established tribal, local and state partnerships to serve as the PRAMS Steering Committee.

Newborn Screening

- Produced a video and placed billboards to educate the public on the importance of newborn screening.
- On May 20, 2016, more than 150 people attended the first Newborn Screening Conference.
- Severe Combined Immune Deficiency (SCID) was added to the North Dakota Newborn Screening Panel on July 1, 2016.
- The program was awarded a two year grant from the Newborn Screening Technical Assistance and Evaluation Program (NewSTEPs) to assist with improving timeliness in newborn screening.

Optimal Pregnancy Outcome Program (OPOP)

 Promoted Text4Baby, a free cell phone text messaging service that provides information on healthy pregnancy and a healthy baby.

Oral Health

• The school-based fluoride varnish and sealant program (Seal!ND) provided services to 3,124 students in 2016-2017. Services include an initial screening, sealant placement, and fluoride varnish application.



- Collaborated with the Ronald McDonald Dental Care Mobile to provide access to oral health services for children in the western part of the state.
- Participated in a Minnesota /North Dakota Mission of Mercy in July 2016. This event drew volunteer oral health providers and resulted in over 2,500 dental procedure services valued at over one million dollars.

over 2,500 services performed at Mission of Mercy

Family Health

- Provided outreach and training in fluoride varnish application to 248 health professionals in 2016 through the Smiles for Life online oral health training curriculum.
- Provided grant oversight to the Donated Dental Services Program, which provides essential dental care for people with disabilities, elderly and medically-compromised individuals who cannot afford care.
- Maintained 97 percent community water fluoridation.

School Health

 Collaborated with the North Dakota Department of Public Instruction, the North Dakota School Board Association, and the North Dakota Board of Nursing to develop an online medication administration training that can be used by nurses as a train-thetrainer model to educate unlicensed staff in schools on how to administer medications safely to students.







- Collaborated with the North Dakota Emergency Medical Services for Children program to update the resource, Emergency Guidelines for North Dakota Schools.
- A team from North Dakota representing school health was accepted into a two-year program with the Johnson and Johnson School Health Leadership Program; as a result, a grant was submitted to the Bush Foundation to support telehealth school nursing in rural communities.

Title V/Maternal and Child Health (MCH) Block Grant

- Implemented a new system to distribute MCH grant funds to align with state and national MCH priorities.
- Contracted with the American Indian Public Health Resource Center at North Dakota State University to work with tribal programs to determine available resources and data related to infant mortality and commercial tobacco use; and to host the The Earth, The Moon and The Sacred Stars MCH Symposium.

 Partnered with the March of Dimes North Dakota Chapter on the development of a Text4baby public service announcement targeting American Indian women.

Women's Health

• Promoted National Women's Health Week.

- Work with chronic disease and school health partners to provide training opportunities on best practice school health policies and practices related to physical activity.
- Reduce the rate of unintended pregnancies.
- Partner on statewide efforts to reduce tobacco use in pregnant women.
- Collaborate with the American Indian Public Health Resource Center to implement strategies on tribal reservations to reduce infant mortality.
- Evaluate the new MCH grant funding system to determine program success.
- Expand the reach of the Seal!ND.
- Increase the number of health care professionals who provide fluoride varnish applications and oral health education.
- Increase the number of long-term care facilities receiving on-site oral health services.
- Increase awareness about the importance of oral health as it relates to overall health.
- Provide training and technical assistance to school nurses to promote health for children and adolescents.
- Provide oversight to the telehealth school nursing project and collaborate with the North Dakota Dental Foundation to promote the telehealth project.
- Maintain 97 percent fluoridation for our community water systems.
- Form and strengthen partnerships with families, American Indians and underrepresented populations.
- Improve service availability and accessibility, and promote women and men's reproductive health and related preventative health services.
- Increase the number of abstinence education activities and events throughout the state that support the benefits of postponing sexual activity.

Injury Prevention and Control

The Division of Injury Prevention and Control is dedicated to reducing the frequency and severity of intentional and unintentional injuries to North Dakotans. Programs include:

- Child Passenger Safety
- Domestic Violence/Rape Crisis
- Injury Prevention
- Suicide Prevention

Accomplishments

Child Passenger Safety (CPS)

- Conducted seven national child passenger safety certification courses and certified 101 child passenger safety technicians.
- Provided 1,250 car safety seats to parents of young children through 31 car seat distribution programs.
 Car seats are distributed to families who are lowincome.
- educational materials for Child Passenger Safety Month activities. Approximately 161 law enforcement and public health partners gave 852 school presentations to 31,773 children. In addition, 906 classrooms received educational materials without presentations.



• Coordinated 121 car safety checkups and inspected 1,479 car seats statewide. Assisted 360 child passenger safety certified technicians with their recertification.



- The standardized special needs car seat training was provided to certified child passenger safety technicians in the state. Approximately 15 child passenger safety technicians attended the training.
- Hosted the 2015 ND Child Passenger Safety Conference attended by 80 certified technicians.
- Coordinated 16 four-hour child passenger safety trainings to 338 attendees from five law enforcement academies. Attendees were either students pursuing a law enforcement education or those currently working in enforcement.

Domestic Violence/Rape Crisis

- Funded two domestic violence/rape crisis agencies to implement and evaluate sexual violence strategies and prevention in their communities.
- Hosted quarterly Primary Prevention Partners meetings. Developed and promoted the online Intimate Partner and Sexual Violence Prevention toolkit, which contains activities, evidence-based strategies, and evaluation resources.
- Funded eight supervised parenting centers that provide supervised visits or exchanges of children in cases of domestic violence, child abuse, sexual assault, or stalking.
- Provided state and federal funds to agencies that serve victims of domestic violence, sexual assault, dating violence, and stalking, including 20 domestic violence/rape crisis agencies, law enforcement, prosecution, and other agencies.

Injury Prevention

- Hosted the 2016 Injury Prevention and Control Conference attended by 115 people.
- Distributed bicycle safety materials to 9,000 individuals.
- Provided youth and toddler bike helmets and education materials at 24 bike education and safety events.
- Disseminated materials regarding the Poison Control Helpline (11,731 stickers and 12,948 magnets) and poison education brochures (11,851) promoting awareness and prevention of unintentional poisonings.
- During Poison Prevention week in March, we collaborated with various partners to produce a

Injury Prevention and Control

poison prevention resource toolkit; promoted Poison Prevention Week with daily Facebook posts and a news release, and participated in radio and television interviews.

- Facilitated the North Dakota State Injury
 Prevention Coalition comprised of partners from
 other state agencies, private businesses, public
 health and private health care.
- Coordinated training for 29 community leaders and master trainers regarding the Stepping On Senior Falls Prevention Program.
- Provided materials to support 38 Stepping On Senior Falls Prevention workshops conducted by community leaders across North Dakota, with 446 older adults taking part.
- Assisted the U.S. Consumer Product Safety Commission with 43 product recall effectiveness checks.
- Supported the distracted teen driving program, "Impact Teen Drivers, What Do You Consider Lethal?" which reached 653 youth.

Suicide Prevention

- Supported over 30 regional, tribal, and local community suicide prevention projects.
- Supported FirstLink to expand a program to provide free follow-up phone service to those at risk of suicide. FirstLink was also funded to provide suicide crisis line service to over 6,000 callers.
- Funded six of North Dakota's regional education associations to provide suicide prevention training to area schools, meeting the teacher training mandate for 96 schools and training an estimated 12,000 education professionals.
- Launched the statewide Sources of Strength initiative, a prevention program for suicide, substance use and bullying prevention. The program reached an estimated 10,000 students in 30 schools across the state and tribal lands, including

Standing Rock and Turtle Mountain.



 Provided statewide, nationally-recognized trainings to an estimated 1,200 residents, including: ASIST (Applied Intervention Skill Training), SafeTALK,

- Mental Health First Aid, Counseling on Access to Lethal Means, and Question Persuade Refer (QPR).
- Funded 16 medical sites to provide depression and suicide screening, brief counseling and referrals to over 40,000 patients. 518 were provided follow-up care, with over 340 identified and referred for symptoms of substance use disorder.
- Provided online training to 833 middle school staff on how to identify suicide warning signs and talk to students about suicidal thoughts.
- Trained over 200 officers and rural clergy in

Screened over 40,000 patients

on depression and suicide screening

518 recieved follow-up care 340 were referred for symptoms of substance abuse disorder

suicide prevention and trained 25 community chaplains to provide crisis on-call services in rural communities.

- Support the North Dakota Injury Prevention
 Coalition and other partners in implementing the
 North Dakota Injury Prevention Plan to reduce
 unintentional injuries and deaths related to motor
 vehicle crashes, falls, unintentional poisonings and
 unintentional suffocation.
- Support the use of evidence-based sexual violence primary prevention strategies in communities.
- Work to reduce domestic violence, sexual assault, and stalking crimes through grants, trainings and partnerships.
- Collaborate with the Suicide Prevention Coalition and local grantees to reduce suicides through implementing prevention and early intervention efforts highlighted in the North Dakota Suicide Prevention Plan.

Nutrition and Physical Activity

The Division of Nutrition and Physical Activity (NPA) supports growth and development; prevents overweight and obesity; and prevents and controls diabetes through programs designed to improve healthful eating and physical activity. The vision of NPA is for all North Dakotans to be physically active, eat healthy foods, and live in communities that support those behaviors.

Programs include:

- Breastfeeding Promotion & Support/ Maternal & Child Health Nutrition
- Diabetes Prevention & Control
- Healthy Communities
- Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
- Worksite Wellness

Accomplishments

Breastfeeding Promotion and Support

- Impacted 7,250 employees by designating 54 businesses across North Dakota as infant friendly.
- Designated one birth center as North Dakota Breastfeeding-Friendly, affecting 10 percent of North Dakota births.
- Provided three continuing education opportunities for professionals and students working with mothers and infants. The North Dakota Breastfeeding Friendly Skills Trainings educated 297 professionals and 86 students; the Certified Lactation Counselor training trained 24 health care professionals from six of the 12 birth centers in North Dakota, and the five online breastfeeding modules trained over 128 professionals.
- Provided leadership to three Local Public Health

"I chose to breastfeed for the bond. I feel that it formed a great relationship between my son and I."
-Kenmare, ND Mom

Units who were awarded Maternal and Child Health Block Grant funding to increase the rate of breastfeeding at six months of age.

Diabetes Prevention and Control

- Acted as a liaison to the Dakota Diabetes Coalition (DDC), supporting mutual goals related to diabetes prevention, diabetes self-management education, provision of qualified continuing education, facilitating the growth of Certified Diabetes Educators in North Dakota and networking among lifestyle coaches/diabetes educators. State staff helped the Coalition maintain its 501(c)(3) status, develop an organized structure for managing fiscal and regulatory paperwork, update board positions and revitalize board member engagement.
- Coordinated the Diabetes Summit on behalf of the Dakota Diabetes Coalition, offering continuing education credit and doubling attendance from the prior summit, with 138 diabetes educators, lifestyle coaches and vendors participating.
- Assisted numerous Diabetes Self-Management Education (DSME) Programs in obtaining or maintaining their accreditation through minigrants and/or technical assistance. There are now DSME programs in 24/53 North Dakota counties.
- Helped coordinate and support National Diabetes Prevention Program lifestyle coach training, and doubled the number of individuals trained from the prior period to over 100 coaches.
- Supported the development of new Diabetes Prevention Program (DPP) sites and provided quarterly networking calls with technical assistance on ways to overcome barriers to enrollment, participant engagement, provider referrals, program sustainability and coordination. Worked to develop a DPP collaboration model within regions to help lifestyle coaches work together for mutual support and program success.
- Developed Diabetes in North Dakota 2016, a legislative report highlighting the status of diabetes and state agency interventions.

Healthy Communities

 Provided funding for training 115 early care and education providers, early childhood educators, directors, and trainers from across North Dakota

Nutrition and Physical Activity

- on simple, low-cost ways to improve physical activity rates among children.
- Provided funding and technical assistance to Child Care Aware for providing training and technical assistance to child care providers to improve nutrition and physical activity environments in their child care settings.
- Provided funding and technical assistance to 11 communities for the prevention and management of chronic diseases.

Special Supplemental Nutrition for Women, Infants and Children (WIC)

- Provided healthy food, nutrition education, breastfeeding support, and referrals to more than 44,000 women, infants and children.
- Used the WIC annual participant survey to assess participant satisfaction with WIC services and benefits.
- The WIC state nutritionist serves on the board of directors for the National WIC Association to offer a rural state perspective on national policies and initiatives.
- Piloted a successful appointment reminder system (sending reminder texts to WIC participants) with four local WIC agencies.
- WIC staff, with state procurement, negotiated a
 new contract with Mead Johnson for the WIC
 infant formula rebates July 1, 2017 through June
 30, 2019. Last year's rebated amount was over
 \$2.5 million. Also related to cost containment,
 the program contracts with the Special Formula
 Distribution Center for the higher cost special
 infant formulas.
- Staff expanded a pilot breastfeeding backpack project to increase breastfeeding initiation rates within the American Indian population through two local WIC agencies (Turtle Mountain Band of Chippewa Tribal WIC Program and Spirit Lake Sioux Tribal WIC Program) and through two rural WIC agencies (Emmons and Traill/ Steele Counties). At the end of the initial project at Rolette County and Turtle Mountain WIC, 78 percent of moms who received a breastfeeding bag initiated breastfeeding. Prior to the project, the average breastfeeding initiation rate was 53 percent.

- ND WIC hosted the Mountain Plains State WIC directors meeting in October 2016 for the ten-state geographic area. Regional and national USDA staff participated.
- ND WIC implemented the Mountain Plains SAM Consortium management information system (named LegeNDS) in October 2015 and joined the multi-state consortium that shares the system.
- In preparation for WIC Electronic Benefit Transfer (EBT) 2020 mandate, the state received EBT planning funding to develop a ND WIC EBT Feasibility Study and the implementation planning document. With the approval of the planning document, ND WIC was invited to submit a request for EBT implementation funding.
- Developed nutrition education cards on a variety of topics including bottle-feeding basics, weaning to a cup, breastfeeding websites, feeding toddlers, safety tips about fish, weight loss tips for women, and community services.
- Continued to promote and support breastfeeding by offering breastfeeding training for all WIC staff, participating in the statewide breastfeeding conference, offering training and support to the three breastfeeding peer counseling sites, providing support for staff to become certified as International Board Certified Lactation Consultants (IBCLC), working with Medicaid on providing coverage for breast pumps, and developing a resource list for local WIC staff with the ND WIC Breastfeeding Committee.

"I love the WIC program so much.

It has taught me a

about being a firsttime mother.

I recommend it to every family."

-North Dakota WIC Participant

Nutrition and Physical Activity

Worksite Wellness

- Conducted four worksite wellness summits with a focus on improving physical activity in worksites.
- Engaged employees through group walks, fruit and vegetable demonstrations, and wellness picnics for all NDDoH employees.
- Presented on a national webinar for the Centers for Disease Control and Prevention on worksite wellness initiatives in North Dakota.

Provided funding and technical assistance to four communities for their work on worksite wellness.

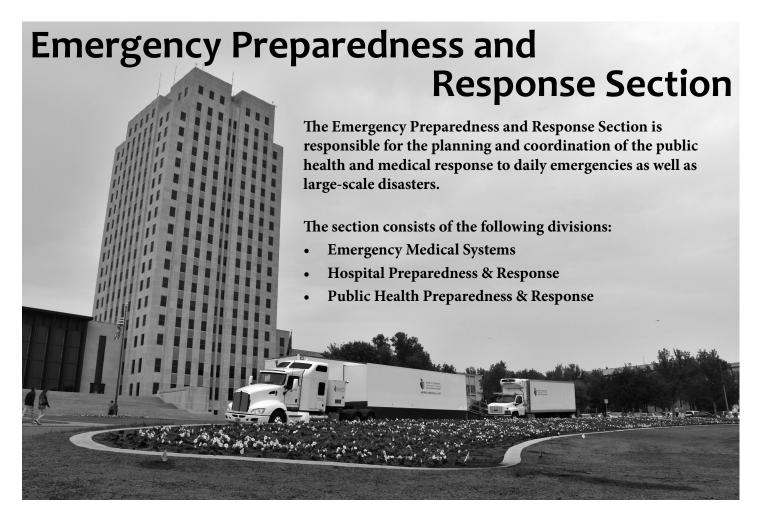


ND Department of Health employees received 3rd place in the April 2017 state employee walking challenge.

- Continue to provide leadership to hospitals through the North Dakota Breastfeeding-Friendly Hospital Designation and workplaces with breastfeeding support policies through the Infant-Friendly Workplace Designation.
- Increase the number of patients being served by an accredited Diabetes Self-Management Education (DSME) program.
- Increase public and provider awareness about prediabetes, and the Diabetes Prevention Program (DPP) by promoting awareness.
- Ensure North Dakota WIC is ready for EBT by the 2020 deadline by working with stakeholders and using the Vendor Advisory Committee.
- Coordinate activities, services, and information

- with health care providers to improve the quality of life for WIC families by coordinating and collaborating with MCH and chronic disease initiatives.
- Continue to support the WIC breastfeeding peer counseling program.
- Strengthen local staff by supporting the statewide biennial breastfeeding conference; provide local agency staff with resources for breastfeeding promotion and support; continue to work with the North Dakota Breastfeeding Coalition to disseminate breastfeeding promotion and support information; and support local WIC staff in advanced breastfeeding training (International Board Certified Lactation Consultant).
- Increase the number of worksites in North Dakota with worksite wellness programs; support worksite wellness summits; and explore opportunities to broaden the worksite wellness network by developing a Worksite Wellness Council.
- Address increasing obesity rates through trainings and assistance to partners on strategies that support increasing access to physical activity opportunities and access to healthy food in schools, early childhood settings, and worksites.
- Support work toward achieving the MCH priorities on breastfeeding initiation and duration, nutrition, and physical activity.
- Encourage healthier communities by collaborating with health care providers, public health, tribes, and non-traditional partners to implement local policies and environmental changes to improve nutrition, increase physical activity and reduce chronic diseases.





Emergency Medical Systems

The Division of Emergency Medical Systems (DEMS) is the lead entity for North Dakota's emergency medical services and is responsible for the development and coordination of the Cardiac System of Care, the Stroke System of Care, and the statewide Trauma System. DEMS distributes grants to Emergency Medical Service (EMS) systems and personnel. DEMS licenses air and ground ambulance services, quick response units, as well as EMS professionals such as paramedics, emergency medical technicians, and others.

Accomplishments

 The inclusion of Naloxone administration into the scope of practice for all EMS professionals, as well as the addition of Naloxone at the basic life support levels in the published State EMS Protocols.
 Seventy-five percent of ambulance services in North Dakota either carry naloxone or have staff trained to administer it.

- Advancement of the Stroke System of Care, including "stroke ready" designation for critical access hospitals with the capabilities to care for a patient suffering acute stroke symptoms.
- The formation and designation of four Cardiac Ready Communities – a new effort this biennium. Twenty-two additional communities have signed letters of intent.
- Improvement in trauma code activation compliance through education and training to designated trauma centers.

- Update EMS Administrative Rules.
- Establish hospital designations and criteria for the cardiac system.

Hospital Preparedness & Response

The Division of Hospital Preparedness & Response facilitates emergency planning activities with hospitals, long-term care facilities, emergency medical services, and clinics. Through contracts with the North Dakota Healthcare Association and the North Dakota Long Term Care Association, the division encourages and assists medical facilities with developing and exercising emergency response plans and integrating their emergency response with the NDDoH's emergency operations center.

Accomplishments

 Long-term emergency response to the Dakota Access Pipeline (DAPL) event, including the coordination and provision of medical equipment, supplies, and staffing for 24-hour on-scene medical triage, stabilization, treatment and transportation.

Goals

- Develop a training and exercise program that improves the emergency response capabilities of hospitals, nursing homes and other medical facilities, and meets the new federal Centers for Medicare and Medicaid Services exercise requirements.
- Increase the quantities of medical emergency response equipment and supplies prepositioned in the field to reduce emergency response times.

Public Health Preparedness & Response

The Division of Public Health Preparedness & Response coordinates emergency preparedness and planning activities with local public health units and tribal nations. The division coordinates and supports emergency preparedness activities across the healthcare continuum by maintaining incident command and control, sustaining tactical communications, maintaining the state medical cache, providing planning and response contracts, providing just-in-time training, and utilizing the Emergency System for Advanced Registry of Volunteer Health Professionals.

Accomplishments

• Provided long-term emergency response to the Dakota Access Pipeline (DAPL) event from October 2016 through March 2017, including the coordination and provision of public health equipment, supplies, and staffing for 24-hour on-scene food services, dormitory services, public health monitoring, and command and control. Representatives from Public Health and Medical Emergency Preparedness and Response served over 60,000 meals over the 11-month life of the protest. At peak operational periods, 50 medical personnel including physicians, nurses, paramedics, and emergency medical technicians were on duty to staff the mobile medical unit (16-patient capacity), medical tents (30-patient

- capacity), ten ambulances (10-patient capacity), and two ambulance buses (36-patient capacity). Additionally, command and control staff provided services at the State Emergency Operations Center and the North Dakota Department of Health Emergency Operations Center.
- Secured additional public health supplies and equipment for the state public health and medical cache for use by local and state responders during emergencies.

- Complete and maintain the development of the Public Health Emergency Response Team.
- Increase the quantities of public health emergency response equipment and supplies prepositioned in the field to reduce emergency response times.





The Health Resources Section consists of three divisions:

- Food and Lodging
- Health Facilities
- Life Safety and Construction
- Medical Marijuana

The section promotes quality care and services for the people of North Dakota by:

- Licensing and inspecting restaurants, bars, retail food stores, meat markets, bakeries, childcare/ pre-school kitchens, school kitchens (K-12), food processing plants, mobile-home parks, trailer parks, campgrounds, lodging facilities, bed-andbreakfast facilities, and assisted-living facilities (food services and fire/life safety standards).
- Licensing and inspecting tanning and body art establishments and electrologists.
- Licensing inpatient and outpatient health-care facilities, basic-care facilities, home-health agencies and hospice programs.

- Conducting certification surveys of all facilities and programs that provide service to people eligible for the federal Medicare and Medicaid programs. Certification is voluntary but required for the provider to receive payment through Medicare and Medicaid.
- Certifying clinical laboratories that test human body substances for medical purposes.
- Administering the nurse aide training and competency evaluation programs and registry.
- Reviewing and approving facility construction plans.
- Conducting on-site inspections of new construction and remodeling in licensed health care facilities.
- Developing Medical Marijuana program rules and systems/processes necessary to implement NDCC 19-24.1 Medical Marijuana.
- Creating a process for application and registration of Medical Marijuana compassion centers, qualifying patients, designated caregivers, and compassion center agents.

Food and Lodging —

The Division of Food and Lodging is responsible for protecting public health through licensure and inspection of food, lodging and other establishments in North Dakota. By law, through a Memorandum of Un-

derstanding with individual local public health units (LPHU), the NDDoH inspects those establishments LPHUs do not inspect.



Food and Lodging -

The Division of Food and Lodging inspects:

- ✓ 530 restaurants
- ✓ 308 bars and limited restaurants
- √ 474 lodging facilities
- √ 644 mobile home parks, trailer parks and campgrounds
- ✓ 38 bed-and-breakfast facilities
- ✓ 578 retail food stores
- ✓ 48 meat markets
- ✓ 16 bakeries
- ✓ 44 assisted-living facilities
- ✓ 7 tattoo/ body art facilities
- ✓ 47 tanning facilities
- ✓ 10 electrologists

Inspection procedures ensure that these licensed establishments meet both sanitation and fire/life safety standards before opening to the public and while in operation.

Under an agreement with the Department of Human Services, staff members also license and inspect 44 preschools and daycare centers that prepare food. Staff members license and inspect 57 schools and migrant food service sites through an agreement with the Department of Public Instruction. The division provides educational courses in safe food handling, reviews plans for new establishments and extensive remodeling projects, and helps investigate possible foodborne illness outbreaks.

The division has one FDA commissioned standardization officer. This employee standardizes and certifies that other state and local health inspectors are proficient and provide comprehensive application of the state's food code regulations.

The division serves as the U.S. Food and Drug Administration's liaison in the state on issues related to manufactured food, adulterated and misbranded food, and food recalls.

Accomplishments

- Conducted more than 6,000 inspections of licensed facilities.
- Fully implemented a new, electronic license and inspection information management system.
- Provided technical support for local environmental health programs to have free, web-based access and use of the state license and inspection information management system.
- Continued standardization of state and local public health inspectors.
- Held a public hearing and proposed the adoption of the 2013 FDA Model Food Code and its supplement to repeal and replace administrative rules for state food code regulations.
- Provided education and outreach regarding the new legislation, "Cottage Food Production and Sales" (commonly referred to as the ND Cottage Foods Act) found in North Dakota Century Code 23-09.5.

- Fully implement the electronic license and inspection information management system at local environmental health programs statewide.
- Make food establishment inspection reports available on the division's website and make information readily available to the public.
- Hold administrative hearings regarding proposed changes to our state food code regulations, which are modeled after the 2013 FDA Model Food Code and its supplement.



Health Facilities

The Division of Health Facilities works to ensure that North Dakota's inpatient care facilities, outpatient programs, and staff-provided-services meet applicable health care standards.

The division licenses the following:

- Nursing facilities 80
- Basic care facilities 68
- General acute, primary care and specialized hospitals 51
- Home health agencies –21
- Hospice programs –11



The division has certification responsibilities for the following:

- Long-term care nursing facilities 80
- Hospitals 36 critical access hospitals, 6 general acute hospitals, 2 long-term acute care hospitals, 3 psychiatric hospitals, and 1 rehabilitation hospital
- Intermediate care facilities for individuals with intellectual disabilities 71
- Home health agencies –17
- Hospice programs -11
- Rural health clinics 54
- Clinical laboratories 669
- Ambulatory surgical centers 11
- End-stage renal dialysis units 16
- Portable X-ray units 1
- Psychiatric residential treatment facilities 6

Staff members conduct periodic surveys to determine compliance with state licensure requirements and federal certification regarding Conditions of Participation or Conditions of Coverage contained in Title XVIII (Medicare), Title XIX (Medicaid) and the Clinical Laboratory Improvement Amendments (CLIA) of the Social Security Act. In addition, the division investigates quality-of-care complaints.

The division approves nurse aide training and competency evaluation of 52 programs, and more than 70 medication assistant training programs, consistent with state licensing rules and/or federal certification requirements for long-term care facilities. The department's nurse aide registry maintains a record of individuals who successfully complete an approved competency evaluation.

Accomplishments

- Conducted workshops and training sessions that focused on care-related services that were identified through the survey process in conjunction with the state's provider associations.
- Maintained state approval for 31 paid feeding assistant programs to assist with nourishment and hydration of dependent long-term care residents.
- Implemented NDAC 33-03-24.1-22 Optional endof-life care services in basic care facilities.

- Maintain the average survey interval of 12 months or less for long-term care facilities and intermediate care facilities for individuals with intellectual disabilities.
- Train all long-term care survey staff on the new Centers for Medicare and Medicaid Services survey process, and implement the new computer based survey process effective November 28, 2017.
- Promote consistency in the survey process through provision of training to all survey staff to enhance consistency during the survey process.
- Finalize and implement NDAC 33-03-24.1-24 Optional Alzheimer's, dementia, special memory
 care, or traumatic injury facility or unit services in
 basic care facilities.

Life Safety and Construction

The focus of the Division of Life Safety and Construction is to protect and safeguard the citizens of North Dakota by ensuring a safe environment for the elderly and people with disabilities who are living in an institutional setting. This includes conducting Life Safety Code surveys and reviewing construction plans for licensed health care facilities.

Accomplishments

- Implemented the updated construction standards (North Dakota Administrative Code) for hospitals, nursing facilities, and basic care facilities.
- Provided training at provider association sponsored conferences.
- Attain an average survey interval of 12 months or less for nursing facilities and intermediate care facilities for individuals with intellectual disabilities.

 Reviewed and approved 108 construction projects for new facilities, additions, remodeling, and installations in hospitals, nursing facilities, and basic care facilities.

Goals

- Maintain average survey interval of 12 months or less for nursing facilities and intermediate care facilities for individuals with intellectual disabilities.
- Cross-train current staff to assist with the Life Safety Code survey process.
- Prepare staff for implementation of federal emergency preparedness rules survey process.

Medical Marijuana

The Medical Marijuana Division was established in February 2017 with the passage of Initiated Measure #5, the Compassionate Care Act. This initiated measure, which became effective December 8, 2016 added North Dakota Century Code (NDCC) chapter 19-24 providing for the medical use of marijuana for defined debilitating medical conditions, such as cancer, AIDS, hepatitis C, ALS, glaucoma and epilepsy. During the 2017 legislative session, NDCC chapter 19-24 was replaced with NDCC Chapter 19-24.1 Medical Marijuana. This new law was declared an emergency and signed by the governor on April 17, 2017.

This new law directs the department to create and issue identification cards for qualifying patients, designated caregivers, and compassion center agents. Two types of compassion centers will be registered by the department: growers/manufacturers and retail dispensaries. The law creates procedures for monitoring, inventorying, dispensing, cultivating, growing and manufacturing marijuana. The law provides for corrective action, suspension, revocation, appeal, hearings and referral for criminal prosecution.

Accomplishments

 Testified on SB 2154 to delay implementation of the initiated measure in order to bring clarity to the Compassionate Care Act passed by the voters. Testified on SB 2344 which clarified the intent of the law and provided for needed decriminalization language for the growing, dispensing and possession and medical use of marijuana by patients.

- Implement the final rules.
- Develop compassion center application procedures and requirements and begin taking applications to select growers/manufacturers and dispensaries.
- Review applications submitted and select two growers and eight dispensaries, as allowed by law.
- Develop application procedures and requirements for selection of a third party, independent laboratory to provide compliance testing of medical marijuana through a contract with the department.
- Develop specifications and prepare a request for proposal (RFP) for an information tracking and registration system.
- Select an IMS vender and implement the system once it's developed.
- Full implementation of the Medical Marijuana Program.

Medical Services Section



The goal of the Medical Services Section is to prevent disease and disability in North Dakota. The section is responsible for disease prevention, surveillance and identification, as well as epidemiologic investigation and forensic examinations.

The section includes the following divisions:

- Disease Control
- Forensic Examiner

Disease Control

The Division of Disease Control is responsible for identifying and analyzing disease trends and implementing appropriate intervention activities to reduce illness and death. Programs include:

- Epidemiology and Surveillance
- HIV/STD/TB/Viral Hepatitis Program
- Immunization

Health care providers and laboratories statewide notify the division of mandated reportable diseases. During the last biennium, division personnel collected



information for or conducted investigations into 25,162 cases of reportable conditions. In addition, division personnel worked closely with private health

care providers and facilities, local public health units, and the general public to reduce the incidence of communicable diseases and help ensure the health of North Dakotans.

Epidemiology and Surveillance

The goals of the Epidemiology and Surveillance Program are to increase disease surveillance and response; build epidemiology, laboratory, and health information systems infrastructure; provide training and education; and improve disease reporting systems. The program focuses on, among others, enteric/foodborne illness, vector borne diseases, zoonotic diseases, influenza, antibiotic resistant infections, parasitic infections, waterborne diseases, non-flu respiratory viruses, mycotic infections, health care-associated infections, antibiotic stewardship, infection control improvement in healthcare facilities, and general outbreak response activities. This program also includes management of MAVEN, North Dakota's electronic disease surveillance system.

This program also includes the NDDoH's syndromic surveillance program. Syndromic surveillance is used for disease or event detection, situation awareness for mass gatherings and public health emergencies, and ad hoc

and population health trend analyses. Facilities are able to use their participation in syndromic surveillance to help meet eligibility for increased federal reimbursement rates.

Accomplishments

- Investigated 42 reported outbreaks of influenza like illness in long-term care facilities (40) and schools (2).
- Developed a mechanism to monitor individuals for illness following possible exposures in response to an outbreak of high pathogenic avian influenza by utilizing the capabilities in MAVEN.
- Investigated a cluster of severe Human Metapneumovirus infection in children that included a CDC Epi-Aid. The associated Morbidity and Mortality Weekly Report (MMWR) article can be found at https://www.cdc.gov/mmwr/volumes/66/wr/pdfs/mm6618.pdf.

• Conducted eight health care-associated infection, multi-drug resistant infection, and infection control breech

investigations. This included an investigation into a novel mechanism for drug resistance to carbapenem antibiotics.

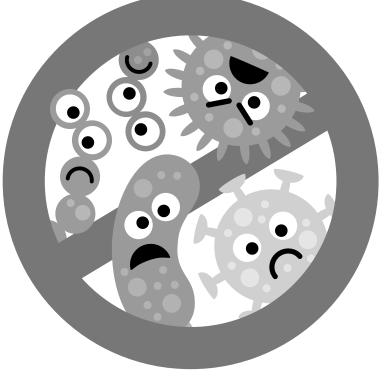
antibiotics.

- Contracted with North Dakota State University (NDSU) to advance antibiotic stewardship practices in the state, and to provide infectious disease expertise toward reducing antibiotic resistance and multi-drug resistant organism burden.
- Conducted 41 infection control assessments at North Dakota hospital, skilled nursing, dialysis, and ambulatory surgery center facilities.
- Conducted Ebola readiness assessments at three North Dakota Ebola assessment/treatment hospitals.
- Monitored travelers for Ebola risk (44 travelers).
- Conducted epidemiological investigations on 20 gastrointestinal and foodborne illness clusters.
- Responded to and lead the Zika virus outbreak and response efforts in North Dakota.
- Increased the volume of mandatory reportable condition reports that come in via electronic laboratory reporting from 57 to 79 percent.
- MAVEN and the North Dakota Immunization Information System (NDIIS) became interoperable, greatly
 reducing the need for time-consuming vaccine searching and data entry.
- Increased the number of production syndromic surveillance messages from 26 to 56 health care facilities in the state.



The HIV Prevention, HIV Surveillance, Sexually Transmitted Diseases (STD), Tuberculosis, Viral Hepatitis and Ryan White Part B programs are managed and executed by a staff of five who work across all of the program areas. The HIV and Viral Hepatitis Prevention and Care activities are guided by the ND Community Planning Group.

Annually the program publishes an epidemiologic profile of HIV, STDs, Tuberculosis and Viral Hepatitis in North Dakota. The full version of that report can be found at http://www.ndhealth.gov/hiv/Docs/EpiProfile_Current.pdf.

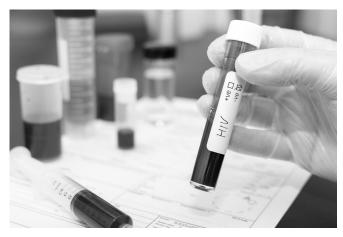


1. HIV Prevention Program

The mission of the HIV Prevention Program is to reduce and prevent transmission of HIV and to reduce the associated illnesses and deaths of HIV infected people. HIV prevention services are conducted at 21 contracted sites. If you count satellite sites, the number increases to 32. The services include HIV testing, pre- and post-test risk reduction counseling, partner notification, referrals, education and prevention case management. Additional activities include working with HIV positive clients to ensure that people who have been exposed to their illness are referred for testing and offered appropriate medical care.

Accomplishments

- Worked to establish new policies and laws around syringe exchange programs.
- Conducted compliance audits on adherence to written protocols, record keeping, specimen collection and handling, appropriateness of services and referrals, and staff training and education at contract sites.
- Provided over 4,000 free HIV tests to at-risk persons in North Dakota. Of those who tested positive, all received their results and were referred to appropriate medical care.



- Provided HIV education and testing at events in conjunction with Family HealthCare.
- Partnered with the Dakota AIDS Education
 Training Center to provide monthly Lunch and
 Learn presentations on topics relating to HIV.STD.
 TB and Viral Hepatitis.

2. HIV Surveillance Program

The HIV Surveillance Program monitors the incidence and prevalence of HIV in North Dakota residents through active disease surveillance activities. North Dakota continues to have low incidence and prevalence of HIV/AIDS in the United States. As of December 31, 2016, there were 390 HIV positive persons reported to be living in North Dakota.

Accomplishments

 Created enhancements to MAVEN to monitor all HIV related surveillance data, which allows for enhanced surveillance for reportable co-morbid conditions.

3. Ryan White Part B Program

The Ryan White Part B Program assists eligible low-income HIV-positive North Dakota residents in accessing and maintaining health care and supportive services. As of December 31, 2016, there were 216 clients receiving services through the Ryan White program and a total of 258 people were enrolled at some time during the year. This is a 13 percent increase from 2015.

Accomplishments

Routinely identified persons living with HIV
 who are not in care to re-engage into care. This is
 done through routine monitoring of surveillance
 data. North Dakota has a higher proportion of
 individuals with undetectable levels of HIV in their
 blood at 71 percent of all people living with HIV
 in North Dakota, versus national estimates of 55
 percent.

4. STD Program

The goal of the Sexually Transmitted Disease (STD) Program is to prevent and control the spread of sexually acquired infections. Staff members provide education, partner notification, and referral for screening and clinical services. Program staff also provide technical assistance and guidance regarding prevention, testing and treatment of STDs.

Accomplishments

 Followed up on or investigated over 5,000 cases of chlamydia, gonorrhea and syphilis.

5. Tuberculosis Program

The Tuberculosis (TB) Program works to prevent, control and eliminate TB in North Dakota. Program activities include identifying and reporting all cases of active TB, ensuring completion of treatment, identifying and screening all people who have had contact with infectious cases of TB and offering laboratory services. In 2016, 22 cases of active TB were reported and of those, 16 (73 percent) were born outside of the United States in countries where tuberculosis is endemic.

Accomplishments

- Reduced costs to the general fund by contracting with a pharmacy to conduct third party billing for medications and oversee the delivery of medications to North Dakotans with both tuberculosis infection and tuberculosis disease.
- Successfully oversaw the treatment of the first ever report of multi-drug resistant tuberculosis in North Dakota; the patient required two years of follow-up and is doing well.
- Worked with the Division of Microbiology and the Epidemiology and Surveillance Program to procure the GeneXpert, which helps to earlier identify cases of TB. If there are concerns for antibiotic resistance it ensures patients are on the correct treatment earlier.

6. Viral Hepatitis Program

The goal of the Viral Hepatitis Program is to reduce and prevent the transmission of viral hepatitis and associated illnesses, including cirrhosis and liver cancer. Twenty-one sites are contracted to provide services including testing, counseling, referrals, vaccinations and education.

Accomplishments

• Over 1,400 hepatitis C rapid tests were conducted at Counseling Testing and Referral sites to target

people at increased risk for hepatitis C infection.

 Instituted active follow-up of cases under the age of 35 to better understand risk factors for infection. Of those assessed, 87 percent indicated that injection drug use was a risk factor for hepatitis C infection.

Immunization

The vision of the immunization program is to ensure all North Dakotans are vaccinated and protected against vaccine preventable diseases. The mission of the program is to continue to protect the health of North Dakotans by preventing and mitigating vaccine preventable diseases through immunization, by managing immunization resources and immunization information systems, and by identifying and promoting evidence based public health best practices.

The National Immunization Survey (NIS) estimates that 68.2 percent of North Dakota children ages 19 to 35 months were up-to-date on their immunizations (DTaP, polio, MMR, haemophilus influenzae type B, hepatitis B, chickenpox, and pneumococcal) in 2015. The goal for Healthy People 2020 is 80 percent.

The NIS estimates that 92 percent of North Dakota adolescents were up-to-date on tetanus, diphtheria, and pertussis (Tdap) vaccine; 92 percent for meningococcal vaccine; and 60.2 percent of girls and 45.5 percent of boys were up-to-date for human papillomavirus (HPV) vaccine in 2016. The goal for Healthy People 2020 is 80 percent for each vaccine.

According to the 2016–2017 school immunization survey, 93.98 percent of kindergarten students were up-to-date for polio, 93.79 percent of diphtheria/ tetanus/pertussis, 93.84 percent for measles/mumps/ rubella, 95.58 percent for hepatitis B, and 92.95 percent for chickenpox. Of children entering kindergarten, 3.14 percent of parents or guardians claimed an exemption to the school immunization requirements. Healthy People 2020 goals for kindergarten entry immunization rates are 95 percent.



68% of children 19-35 mo. were up-to-date on vaccinations

GOAL: 80%



92%

of adolescents were up-to-date on tetanus, diphtheria and pertussis

GOAL: 80%



94%

of kindergarten students were upto-date for polio & diphtheria/ tetanus/pertussis

GOAL: 95%



93%

of kindergarten students were up-to-date for chicken pox

GOAL: 95%

Immunizations



3.14%

of parents claimed an exemption to kindergarten immunization requirements

GOAL: < 5%

Quarterly immunization coverage rates according to the NDIIS for all age groups are posted on the immunization program website at www.ndhealth.gov/Immunize/NDIIS/Rates.aspx.

Accomplishments

- Continued interoperability between the NDIIS and statewide electronic medical records.
 - o The NDIIS is interoperable with the North Dakota Health Information Network, MAVEN and 306 provider sites.
 - o Seventy-nine percent of doses entered into the NDIIS are electronically submitted.
 - o Interoperability has increased the percentage of adults with at least one dose in the NDIIS to 92 percent.
 - o Published an article about the impact of interoperability on immunization information system data quality in the Online Journal of Public Health Informatics.
- One of six states to receive an immunization information system sentinel site grant; sentinel sites have achieved high data quality standards to use their IIS for program evaluation and vaccine use assessments.
- Conducted more than 211 Vaccines For Children (VFC) site visits at provider offices to assess compliance with federal requirements
- Conducted more than 113 Assessment/Feedback/ Incentive/eXchange (AFIX) visits at provider offices to implement quality improvement for

immunization rates

- Contracted with NDSU's CIRE to gain an understanding of the current state of school immunization and exemption attitudes and opinions in North Dakota, to facilitate meaningful participation in in-depth discussions on current immunization and exemption policies and practices in North Dakota, and to make recommendations for potential policy, rule, or practice/process changes to the current immunization and exemption system in North Dakota. The final report is available at www. ndhealth.gov/Immunize/Documents/Schools ImmunizationandExemptionPoliciesand PracticesinNorthDakota_20160615.pdf.
- Conducted reminder/ recall of infants, school-aged children and adolescents who were 30 or more days past due for recommended

258,439
immunization
postcards & letters
mailed to parents

- immunizations; 258,439 postcards and letters were mailed to parents during the biennium.
- Instituted adult immunization reminder/recall in three counties for adults ages 60 and older who were 30 or more days past due for pneumococcal and zoster vaccines; 19,707 postcards and letters were mailed in March of 2017.
- Collaborated with the Ryan White Program to send immunization reminder/recall letters to Ryan White clients.

- o 214 Ryan White clients received letters.
 o Immunization coverage rates amongst Ryan
 White clients increased for most vaccines; the
 largest increases were for pneumococcal (+10.05
 and +12.70 percent) and meningococcal vaccines
 (+23.28 percent).
- Coordinated the surveillance and investigation of more than 337 cases of vaccine preventable diseases, including pertussis, mumps, chickenpox and hepatitis A.
- Transitioned from supplying state vaccines for insured children vaccinated at local public health units to local public health units purchasing private vaccines and billing insurance.
- Received a CDC public health advisor who started an adult immunization program to increase adult immunization rates in North Dakota.



- Increase the percentage of children ages 19 to 35 months who are up-to-date on vaccines to greater than 80 percent.
- Increase the percentage of adolescent females and males ages 13 to 17 who have completed the HPV series to 80 percent.
- Increase the number of children up-to-date on MMR vaccine for kindergarten entry to 95 percent.
- Reduce the number of newly diagnosed HIV cases in people 13 years and older to 30 cases per year.
- Maintain the rate of primary and secondary syphilis among women to below 1.9 per 100,000 women.
- Reduce the infection ratio for Clostridium difficile infections in North Dakota Hospitals to standardized infection ratio (SIR) of 0.65.
- Reduce the infection ratio for hospital onset central line associated blood stream infections (CLASBI) in North Dakota to a SIR of 0.25.



Forensic Examiner

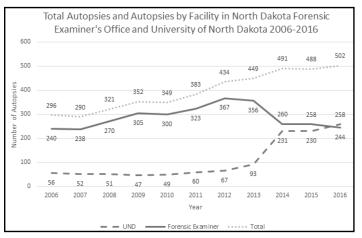
Autopsies are performed by the forensic examiner in Bismarck and by the University of North Dakota (UND) under a contract with the NDDoH. The services provided include autopsy or examination of the body, photographic documentation, toxicology analysis, collection of evidence, follow-up with investigating agencies, certification of cause and manner of death, and court testimony, as needed.

Accomplishments

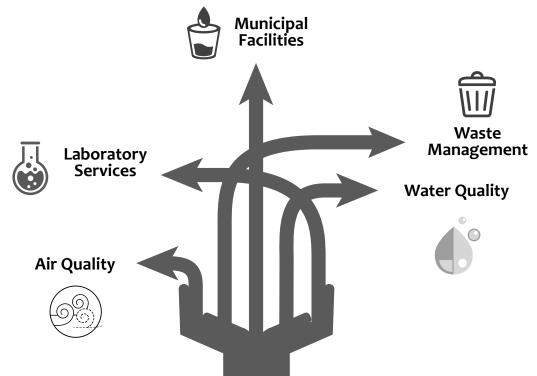
- During the 2015-2017 biennium, a total of 976 autopsies were performed in North Dakota. During this time, 460 (47.1%) autopsies were performed at the NDDoH's Forensic Examiner's Office (FEO). The FEO performed or had jurisdiction over a total of 482 autopsies for the 2015–2017 biennium. The cause of death is as follows:
 - o Accidental: 187 (38.8%) o Homicide: 17 (3.5%) o Natural: 86 (17.8%) o Suicide: 161 (33.4%) o Undetermined: 31 (6.4%)
- The number of autopsies being performed at the FEO from 2008 through 2015 were well above the 250 autopsies recommended by the National Association of Medical Examiners for a single forensic pathologist.

• The 2015 legislature appropriated \$480,000 to be used to continue the contract with UND.

UND provides services to 21 counties in eastern North Dakota, including: Barnes, Cass, Cavalier, Grand Forks, Griggs, Nelson, Pembina, Ransom, Richland, Sargent, Steele, Traill, Walsh, Benson, Eddy, Foster, Pierce, Ramsey, Rolette, Towner, and Wells.



Environmental Health Section



To safeguard North Dakota's air, land and water resources, the Environmental Health Section works with both federal and state agencies, as well as with special interest groups, local governments, health care providers, veterinarians and the citizens of the state.

Staff members deal with issues that affect the comfort, health, safety and wellbeing of all North Dakota citizens and their environment. Compliance with state and federal environmental laws is accomplished through permitting, inspecting, enforcement, analytical services and monitoring activities. Laboratory services provide rapid responses to public health threats.

An important section goal is to maintain delegation of all federal environmental programs for North Dakota and to ensure the regulated community complies with state environmental statutes.

During the biennium, the Environmental Health Section consisted of the following divisions:

- Air Quality
- Laboratory Services
- Municipal Facilities
- Waste Management
- Water Quality

Division activities are coordinated by the section chief.

Employee's oversee quality assurance; public information efforts; staff training; and coordinating computer and data management activities, emergency response efforts and funding requests.

The section supports local responders, the department's Emergency Preparedness and Response Section and the state's Department of Emergency Services during initial response to environmental incidents. The section customarily takes the lead role in post-emergency environmental cleanup activities.

Staff in the section chief's office coordinates development of the EPA/North Dakota Performance Partnership Agreement, which defines the scope of environmental program responsibilities and commitments.

An assistant attorney general assigned to the section chief's office provides legal counsel to the section and assistance with enforcement procedures regarding violations of state environmental laws. During the biennium, this involved resolving violations of air, water quality, hazardous waste, and solid waste management statutes and rules.

The section encourages public participation through opportunities for public comment, public hearings, and the establishment of ad hoc task forces and advisory groups.



Air Quality

The Division of Air Quality is comprised of two major programs responsible for protecting the state's air quality resources and ensuring control of radiation. Staff scientists, meteorologists, engineers and technicians provide technical assistance during environmental emergencies.

The Division of Air Quality's two principal programs are:

- Air Pollution Control
- Radiation Control and Indoor Air Quality

Air Pollution Control

The Air Pollution Control Program is responsible for protecting and fostering the state's air quality resources. The program promotes clean air activities, conducts compliance outreach, and initiates enforcement actions to correct air pollution problems.

Program staff members' primary responsibilities include evaluating permit applications, conducting computer modeling of potential impacts to air quality, issuing permits that restrict emission levels to ensure that standards are met, inspecting facilities to ensure compliance, reviewing reports to ensure compliance with applicable regulations, investigating air pollution complaints and operating a statewide ambient air quality monitoring network. This work has significantly expanded as the Bakken oil formation has developed and now has more than 10,000 oil production facilities.

Radiation Control and Indoor Air Quality

The Radiation Control and Indoor Air Quality Program performs two major functions:

- Monitoring the development and use of ionizing and non-ionizing radiation sources to protect the health and safety of North Dakotans and the environment.
- Evaluating and mitigating asbestos, radon, lead and other indoor air quality concerns, as well as implementing a public awareness and education program on these health risks.



Inspections





Accomplishments

- Maintained attainment status for all state and national Ambient Air Quality Standards during the 2015-2017 biennium.
- Evaluated more than 150 submissions for Permits to Construct to determine effects on air quality;

facilities evaluated included ethanol plants, grain elevators, refineries, natural gas processing facilities and compressor stations.

- Conducted approximately 220 air quality compliance inspections of permitted facilities
- Updated the Air Pollution Control rules to match federal requirements.
- Processed approximately 2,500 oil and gas facility registrations and completed approximately 445 inspections of oil and gas installations.
- Obtained a FLIR camera through a grant request; the camera has been instrumental in identifying excessive emissions in the field.
- Began working with most Bakken oil and gas producers to proactively address excessive emissions in North Dakota.
- Provided health information outreach materials to the public during region-wide wildfire smoke events.
- Expanded network of ambient air quality monitoring stations from nine to 10, to more effectively monitor oil and gas activity in the Bakken region.
- Updated the Radiological Health Rules to reflect the latest technology used in the state and adopted the Nuclear Regulatory Commission rules by reference.
- Awarded approximately \$280,000 in Clean Diesel Grants to 14 public school districts.

Goals

- Maintain delegation and responsibility for federally mandated programs.
- Continue education and outreach activities to keep the public informed about environmental issues specific

to air and radiation.

• Continue to respond to indoor air quality concerns by direct intervention and assistance to local public health personnel.



- Expand modeling capability through implementation of new air quality models and updating of input databases.
- Become more proactive in communicating about the quality of the state's air and the work conducted by the division.
- Continue work on the Clean Diesel Grants and the Volkswagen Settlement.
- Continue to work with Bakken oil and gas producers

to minimize, to the extent possible, the amount of uncontrolled releases of hydrocarbon gases (a multiyear project involving significant time and resources from the state and industry partners).



Laboratory Services -

The Division of Laboratory Services consisted of two principal programs in the 2015-2017 biennium:

- Chemistry
- Microbiology

Chemistry

The chemistry laboratory provides analytical chemistry data to environmental protection, public health, agricultural and petroleum regulatory programs in the state. The laboratory also maintains a certification program for North Dakota laboratories that provide environmental testing services.

The NDDoH's environmental protection programs use laboratory data to monitor and/or regulate air quality; solid and hazardous waste; municipal wastewater; agricultural runoff; surface, ground and drinking water quality; petroleum products; and other media of environmental or public health concern. The North Dakota Department of Agriculture uses data to regulate livestock feed, pet foods, and agricultural and household fertilizers.

The laboratory consists of six analytical sections and one certification section. The analytical sections include:

- 1. Demands Lab: Performs biochemical oxygen demand, total suspended solids and pH tests; provides analytical data used to determine compliance with permit requirements of municipal and industrial wastewater discharges.
- 2. Feed and Fertilizer Lab: Provides analytical data to the department of agriculture; tests agriculture feeds and fertilizers, pet foods, and lawn and garden fertilizers to determine compliance with labeling.

- 3. Mineral Lab: Tests matrices such as water and soil for major cation and anion parameters or general chemical quality; typical analyses include sulfates, fluoride, chloride, chemical oxygen demand, nitrate, sodium, ammonia and total Kjeldahl nitrogen.
- 4. Organic Lab: Provides identification and quantification of insecticides, herbicides, volatile and semi-volatile organic compounds, polychlorinated biphenyls (PCBs) and other synthetic organic compounds in water, soil, river and lake sediments, foliage, fish tissue, sludge, oil, landfill wastes and samples from other environmental sources.
- **5. Petroleum Lab:** Tests products such as gasoline and diesel for product quality.
- 6. Spectroscopy (or Metals) Lab: Identifies and quantifies metal concentrations in drinking water sources and distribution systems, surface and ground water resources, fish, hazardous and solid wastes, river and lake sediments, and other environmental media.





Laboratory Services

Accomplishments

- Received and analyzed 24,139 samples for approximately 464,974 analytes.
- Provided analytical support to help public water systems comply with federal and state drinking water rules and regulations; 7,377 samples were tested for more than 51,524 analytical components.
- Provided water quality and sulfate testing related to the Devils Lake outlet (approximately 1,190 samples for 24,484 analytes).
- Provided analytical chemistry data to the State Water Commission ground water program (approximately 2,873 samples for 72,632 analytes).
- Provided oilfield-related testing of 1,019 samples for 57,787 analytes. Included was testing in support of:
 - o The department's response to the Ash Coulee Creek release in December 2016.
 - o Continued follow-up to the Blacktail Creek release that occurred in early 2015.
- Provided analytical support to the environmental programs within the department.
- Successfully audited in April 2016 by EPA Region 8 for the determination of regulated parameters in drinking water.
- Implemented three EPA Methods that are more efficient than those they replaced.
- Certified the state's other environmental laboratories and reviewed and recognized other state certification programs for out-of-state laboratories that meet the requirements of North Dakota's certification program.
- Researched and purchased a Liquid Chromatograph/Mass Spectrometer/Mass Spectrometer (LC/MS/MS). This will significantly enhance our capabilities when fully implemented.

Goals

- Maintain or increase laboratory efficiency and responsiveness
- Provide analytical testing support for NDDoH oilfield responses and other emergencies

Microbiology

The microbiology (public health) laboratory performs testing in the areas of bacteriology, mycology, parasitology, immunology, virology, molecular diagnostics, bioterrorism response, and dairy and water bacteriology. The laboratory is responsible for providing rapid, accurate detection and identification of organisms that may threaten the public's health. Outbreak response and control is dependent upon the laboratory's continuing commitment to maintain and develop new technologies, and to its ability to respond quickly and effectively to new and emerging organisms and biothreat agents. In addition, the laboratory provides training and consultation expertise regarding safety and testing methodologies.

Accomplishments

- Received and processed 101,322 specimens resulting in 151,244 analytical tests.
- Maintained mosquito surveillance program for West Nile virus and other arboviruses, and piloted tick and dead bird surveillance programs.
- Collaborated with the Department of Corrections to complete a Hepatitis C Virus infection rate and genotype point-prevalence study among inmates.
- Responded to a number of outbreaks, including a Hepatitis C Virus outbreak in a long-term care facility.
- Maintained federal testing certification for dairy products (Food and Drug Administration), Clinical Laboratory Improvement Amendments (CLIA), drinking water (EPA) and select agent registration (CDC).
- Reported 29,561 reportable condition results electronically to the Division of Disease Control's MAVEN system and other public health partners via HL7 message.
- Submitted 404 bacterial DNA fingerprint patterns to CDC's national PulseNet database to assist in nationwide, foodborne outbreak disease detection efforts.
- Received funding from the Association of Public Health Laboratories to improve and implement the online Biosafety Workshop and provide the training nationally through the CDC TRAIN platform.



Laboratory Services -

- Implemented new technology/instrumentation on several platforms:
 - o Cepheid GeneXpert Polymerase Chain Reaction (PCR) for the detection of Mycobacteria tuberculosis and Carbapenemase genes for the detection of antibiotic resistance.
 - o QuantStudio PCR for various infectious diseases that include, but are not limited to: Zika virus, Herpes virus and Influenza virus.
 - o Dynex DSX Automation for various Enzyme Immunoassays that include, but are not limited to: Quantiferon, West Nile virus IgM serology and Lyme disease IgM serology.
 - o NucliSENSE EasyMAG automated extraction method for various PCR methods that include, but are not limited to: Middle Eastern Respiratory Syndrome (MERS Coronavirus), Influenza and Herpes.
 - o Qiagen QiaCube automated extraction method for various PCR methods that include, but are not limited to: Enterovirus D68, Enterovirus, Measles, Mumps and Bordetella pertussis.
 - o BioRad Geenius Immunochromatographic method for the confirmation of HIV 1 and 2.
- Validated the following new methods:
 - o Zika virus PCR
 - o Zika virus, Chikungunya virus, and Dengue virus PCR
 - o Zika IgM Enzyme Immunoassay (EIA)
 - o Herpes virus 1, 2 IgM serology Enzyme Linked Immunosorbent Assay (ELISA)
 - o Hepatitis C virus RNA PCR
 - o Hepatitis C virus Genotyping
 - o Carba-R PCR
 - o MTB/Rifampin PCR
 - o Chlamydia and Gonorrhea PCR on Abbott M2000
 - o Hantavirus IgG/IgM EIA



- Maintain or increase laboratory efficiency and responsiveness.
- Provide continued support to department staff, physicians, health care facilities, local public health units, veterinarians, state and federal agencies, and the public.
- Continue membership in proficiency programs and maintain current certifications, including CLIA and state licensure.
- Enhance data management systems and develop electronic capabilities to improve efficiency and accuracy in laboratory test ordering and reporting to customers.
- Update and distribute new directory of services and conduct customer satisfaction survey.
- Implement new technology/assays to include respiratory pathogenic panel and 4th generation Quantiferon test.





Municipal Facilities

The Division of Municipal Facilities administers the following programs that help communities, industries and citizens of North Dakota in the areas of water supply and treatment and wastewater collection and treatment:

- Clean Water State Revolving Loan Fund (CWSRF)
- Drinking Water State Revolving Loan Fund (DWSRF)
- Public Water Supply Supervision (PWSS)



CWSRF

The CWSRF Program provides low interest loans to fund conventional wastewater and nonpoint source pollution control needs. Eligible borrowers can obtain financing to build wastewater treatment works at below market interest rates. Since inception of the program in 1990 through June 30, 2017, loans totaling approximately \$612 million have been approved to assist North Dakota wastewater systems. Program staff members also review approximately 250 projects each year to ensure compliance with state design criteria before construction.

DWSRF

The DWSRF Program provides low-interest loans to help public water systems finance the infrastructure needed to comply with the Safe Drinking Water Act. Eligible borrowers can obtain financing to construct water treatment works at below-market interest rates. Since inception of the program in 1997 through June 30, 2017, loans totaling approximately \$510 million have been approved to assist North Dakota water systems. Program staff members also review approximately 250 drinking water projects each year to ensure compliance with state design criteria before construction.

PWSS

The PWSS Program works with the 475 public water systems in North Dakota to ensure that drinking water meets all standards established by the Safe Drinking Water Act. This is accomplished by monitoring contaminants and providing technical assistance to the systems.

The program provides training for and certification of operators in charge of water treatment and distribution facilities and wastewater collection and treatment plants. There are 1,113 certified operators in the state. Program staff members also administer the state's fluoridation program and provide technical assistance to private water systems.

Six inspectors/trainers inspect public water and wastewater systems to ensure that facilities comply with state and federal public health standards. Program activities contribute to the proper operation and maintenance of these facilities.

Accomplishments

- Complied with all major federal program requirements and maintained federal delegation responsibilities for EPA programs.
- Maintained community water system compliance rate of 99 percent with health-based standards under the Safe Drinking Water Act; this rate is among the highest in the region and the nation.
- Issued loans totaling approximately \$132 million through the DWSRF and CWSRF programs to North Dakota communities for addressing drinking water and wastewater compliance and infrastructure needs.

- Maintain state delegation and responsibility for the PWSS, DWSRF and CWSRF programs.
- Maintain or increase community water system compliance with health-based standards under the Safe Drinking Water Act.
- Continue to assist North Dakota communities in addressing drinking water and wastewater compliance and infrastructure improvement needs through the DWSRF and CWSRF programs.





Waste Management

The Division of Waste Management works to safeguard public health through programs designed for generators of solid and hazardous waste and operators of underground storage tanks.

Programs include:

- Hazardous Waste
- Solid Waste
- Underground Storage Tank

Hazardous Waste

The Hazardous Waste Program regulates facilities that generate, store, treat, dispose of or transport hazardous waste. The program encourages practices that minimize or eliminate hazardous waste generation and ensures that hazardous waste does not adversely affect human health or the environment.

Accomplishments

- Amended state Hazardous Waste Management Rules effective January 1, 2016.
- Inspected approximately 95 facilities that generate and/or manage hazardous waste or PCBs; provided compliance assistance to other facilities that generate hazardous waste.
- Responded to citizen complaints.
- Conducted site assessments and removed contamination at Brownfield sites in six communities.
- Assisted schools with managing their obsolete laboratory chemicals.
- Issued and reissued hazardous waste, infectious waste and transporter permits.

Goals

- Continue to inspect facilities that generate or manage hazardous waste and PCBs and provide compliance assistance to regulated facilities.
- Continue to work with and assist communities, counties and other governmental entities with Brownfields properties located throughout the state.
- Maintain a good working partnership with the regulated community to positively contribute to compliance.

Solid Waste

The Solid Waste Program regulates the collection, transportation, storage and disposal of nonhazardous solid waste. The program promotes resource recovery, waste reduction and recycling activities that preserve and enhance the quality of the state's natural resources. The program also assists individuals, businesses and communities in providing efficient, environmentally acceptable solid waste management systems, and promotes pollution prevention to increase efficiency and reduce pollution at the source, rather than after it is produced.

Accomplishments



- Conducted 1,006 inspections of 292 facilities that manage solid waste; provided compliance assistance to numerous facilities that generate or manage solid waste.
 - Revised permits for 12 existing oilfield special/industrial waste disposal facilities, and reviewed plans and completed permits for two new oilfield special/industrial waste disposal facilities.
 - Renewed permits, including expansions of three existing Municipal Solid Waste (MSW) landfills in western North Dakota; provided guidance on

handling the increased amount and complexity of municipal and industrial solid waste in the region.

- Adopted and implemented new rules on management of low-level Technologically Enhanced Naturally Occurring Radioactive Materials (TENORM).
- Began review of two applications for oilfield special/industrial waste disposal facilities to accept TENORM waste with concentrations between 5.0 and 50 picocuries per gram.
- Conducted more than 20 workshops with trained operators, waste generators and waste haulers



Waste Management

- about increased complexity and volume of waste coming to MSW landfills, waste reduction and recycling, inert waste and transfer station issues, and other related topics.
- Issued 255 waste hauler permits with additional conditions to reduce spillage and report releases, spills and rejected loads.
- Implemented nutrient management requirements to help food processing and livestock facilities manage and recycle organic waste materials.
- Co-sponsored (with the North Dakota Solid Waste and Recycling Association) the annual Solid Waste Conference in Minot, ND (September 2015) and Deadwood, SD (jointly with the South Dakota Solid Waste Management Association (September 2016).
- Conducted annual landfill operator training and certification sessions for solid waste professionals.
- Worked with local public health units and units of government to complete abandoned motor vehicle projects in Divide, Kidder, McKenzie, Mountrail and Williams counties.

Goals

- Promote integrated waste management, including waste reduction, reuse, recycling, composting and energy recovery.
- Continue implementing new rules for managing TENORM generated in oil exploration and production.
- Work to obtain approval for state-run program for coal combustion residuals (CCR) rules.
- Update solid waste management rules and guidance regarding CCR, financial assurance, regulated infectious waste, landfill development, final closure and integrated waste management.
- Conduct training and workshops to address challenges with inert waste management in rural areas, dealing particularly with issues related to economic development, abandoned and dangerous buildings, and disaster debris management.
- Promote "Pay as You Throw," or volume-based waste services and fees, which encourage waste reduction and recycling.

- Promote development of effective solid waste practices, including long-term solutions for solid waste needs.
- Educate the public, solid waste facility operators and stakeholders about timely solid waste issues through training, workshops and educational materials.
- Promote the use of Abandoned Motor Vehicle
 Program funds to clean up unwanted scrap and
 evaluate alternative uses and management of scrap
 tires.

Underground Storage Tank

The Underground Storage Tank Program (UST) regulates petroleum and hazardous-substance storage tanks, establishes technical standards for installing and operating underground tanks, maintains a tank notification program, establishes financial responsibility requirements for tank owners, and provides state inspection and enforcement. The program also works with retailers and manufacturers to ensure specifications and standards are met for petroleum and antifreeze.

Accomplishments

• Regulated more than 830 active tank facilities with a total of 2,239 tanks.



- Monitored compliance by on-site visits at least once every three years (compliance rate of 88.9 percent), as well as mail-in self-certification.
- Observed 95 tank closures, conducted more than 504 on-site inspections, and investigated and monitored cleanup of more than 44 leaking UST sites.



∏ Waste Management

- Conducted routine collection and analysis of 492 petroleum samples.
- Registered all antifreeze manufacturers and retailers in the state.
- Used Leaking Underground Storage Tank (LUST)
 Trust Fund to investigate suspected UST releases
 and conduct corrective actions. LUST Trust Fund
 provided financing for cleanup and/or removal of
 leaking/potentially leaking USTs throughout the
 state.
- Initiated the updating of the UST rules and regulations as mandated by the EPA.

Goals

 Assist tank owners with contamination assessment/ cleanup activities following upgrade and/or replacement of USTs or when leaks occur.

- Provide compliance monitoring, inspections and public outreach to inform tank owners about the proper operation of USTs.
- Enforce guidelines regarding delivery prohibition, secondary containment and owner/operator training.
- Provide online owner/operator training to tank owners to comply with the EPA guidelines.
- Use the LUST Trust Fund to investigate and properly close abandoned UST sites throughout the state.
- Collect petroleum samples from retailers and respond to product and labeling deficiencies.
- Review antifreeze registration requests and respond to formulation/labeling deficiencies.
- Complete the update of the UST rules and regulations as mandated by EPA.



Water Quality -

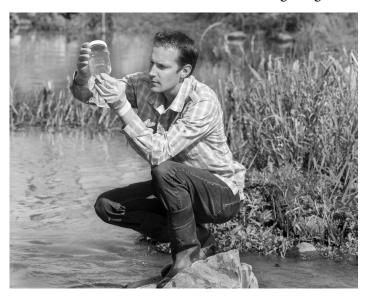
The Division of Water Quality monitors lakes, reservoirs, rivers, streams and wetlands, to ensure water stays clean for people today and in the future. The division works to maintain water quality to ensure continued beneficial use for municipalities, agriculture, industry and ecosystem health.

Programs include:

- Groundwater Protection
- North Dakota Pollutant Discharge Elimination System (NDPDES) Permit
- Special Projects, Certification and Standards
- Spill Reporting/Emergency Response/ Environmental Investigation and Cleanup
- Surface Water Quality Monitoring and Assessment
- Watershed Management

Ground Water Protection

The Ground Water Protection Program is designed to control potential sources of contamination and to restore ground water impacted by contaminants. The Ground Water Protection Program consists of several subprograms, including the Source Water Protection Program, the Underground Injection Control Program and the Ambient Ground Water Monitoring Program.



Accomplishments

1. Source Water Protection

- Completed the first cycle of a five-year rotation of updating wellhead protection reports for every active community water system.
 - Educated community water systems about zoning



Water Quality

issues and the impacts of new facilities within source water protection areas.

 Provided new delineations and updated reports for water systems that installed new wells or plugged existing wells.

2. <u>Underground Injection Control (UIC)</u>

- Reviewed permit applications for one new Class I injection well and one application for a Class I to Class II well conversion.
- Increased focus on expanding UIC registration by working with the Division of Municipal Facilities to ensure that septic system registration is part of the approval process.
- Facilitated closure of several high-risk wells located in source water protection areas or other sensitive ground water areas.

3. Ambient Ground Water Monitoring

- As part of the Agricultural Ground Water Sampling Program, sampled approximately 344 wells in 31 aquifers for trace metals, general water chemistry parameters, nitrates and pesticides.
- As part of the Western Ground Water Sampling Program, sampled 184 wells in 21 aquifers for trace metals, bromide, general water chemistry parameters, nitrates, benzene, toluene, ethylbenzene, and xylene (BTEX), diesel range organics (DRO) and gasoline range organics (GRO). Through the Western Program, more impacts to ground water from the Blacktail Creek spills were discovered and delineated.

North Dakota Pollutant Discharge Elimination System (NDPDES) Permit

The North Dakota Pollutant Discharge Elimination System Program (NDPDES) issues point source wastewater discharge permits. Point source pollution comes from a specific source, such as the end of a pipe.

Accomplishments

 Worked closely with cities of Williston and Watford City on development and construction of a new Water Resource Recovery Facility (WRRF) to treat wastewater for each city. Both systems use oxidation ditches and are nearly identical, except

- that the Williston facility is the first in the state to produce biosolids.
- Began expanding Electronic Reporting
 Information System (ERIS) in response to EPA's
 2015 Electronic Reporting Rule (eRule). Increased efficiency of electronic reporting has enabled staff to concentrate less on data entry and more on core program elements and permittee assistance.
- Worked to update steam electric generating facility permits to implement requirements of the federal 2015 Effluent Limitation Guideline Rule. State implementation has resulted in reasonable restrictions to reduce pollutants discharged while still allowing coal-fired power plants to operate.

Special Projects, Certification and Standards

The NDDoH is the lead agency for monitoring water quality, providing technical review, and ensuring water quality standards are met. The NDDoH takes a proactive approach to this duty by participating on multiple local, state and international water-related boards and committees.

Accomplishments

- Conducted the triennial review of the water quality standards and drafted recommended changes necessary to protect the state's water resources and maintain compliance with the federal Clean Water Act.
- Reviewed and provided clean water certification or conditional certification on approximately 75 federal actions.
- Coordinated with various agencies and private entities on projects such as pipelines, local surface water drains, the Fargo diversion and the Mouse River Flood Enhancement.

Spill Reporting/Emergency Response/ Environmental Investigation and Cleanup

Any spill or discharge of waste that may pollute the state's waters must be reported to the NDDoH within 24 hours of the release. Reports are submitted through an on-line reporting system located on the NDDoH website. When the program receives report of a spill, an investigator or team is sent to evaluate the site. Some releases may require immediate response by



Water Quality

trained personnel; others may require investigation beyond initial cleanup to determine the full environmental impact. The program follows the spill remediation until cleanup is accomplished.

Accomplishments

More than 3,235 general and oilfield environmental incidents occurred in the state during the biennium (e.g., pipeline breaks, vehicle accidents, tank overflows, materials handling mishaps); of those, program staff investigated and followed up on 1,272 incidents, and the remaining incidents were determined to have no environmental impact

or to be the responsibility of other agencies.

Evaluated impacts to Ash Coulee Creek during the Belle Fourche pipeline incident; provided oversight of cleanup of the creek while protecting the Little Missouri River from impacts; continued oversight of soil cleanup at the pipeline break.



 Worked with landowners, other state agencies and industry to implement guidelines for the cleanup of saltwater impacts due to oilfield spills.

Watershed Management

The Watershed Management Program includes programs, projects and activities which can be grouped into three categories. These include (1) monitoring and assessment; (2) total maximum daily loads (TMDL); and (3) nonpoint source (NPS) pollution management.

Monitoring and Assessment

- Initiated a Harmful Algal Blooms (HABs)
 Surveillance Program in 2015 in response to blue-green algae bloom on Homme Dam in the northeastern North Dakota.
- Responded to 19 reports of blue-green algae blooms on lakes/reservoirs in 2016; of these, investigations resulted in NDDoH advisories or warnings for 15 lakes and reservoirs.

NPS Pollution Management

- Approximately \$3.5 million was allocated to NPS Program through Section 319 grants.
- Awarded Section 319 funding to 56 NPS projects, including 26 watershed projects, 14 educational projects and 12 development phase projects.
 Another four support projects were also provided grant funding to address specific priority issues (e.g., manure management and soil salinity) or to provide engineering assistance to watershed restoration projects.

Watershed Management and TMDL

Developed and began implementing the Basin
Water Quality Management Framework, which
will serve as a guide for water quality management
planning and implementation through a targeted
basin management approach. This should promote
coordination of the collection and sharing of
information, increase availability of technical and
financial resources, and focus on more effective
water quality management activities.

- Maintain delegation and responsibility for federally mandated programs.
- Continue education and outreach activities to keep the public informed about environmental issues specific to water quality.
- Become more proactive in communicating about the quality of the state's water resources and the work conducted by the division.
- Adoption of proposed amendments to the Standards of Quality for Waters of the State.
- Provide necessary and increasing oversight on pipeline breaks, tanker truck rollovers, and numerous oil and saltwater spills in the oil patch of western North Dakota.
- Maintain state funding for nonpoint source pollution projects.
- Develop a comprehensive nutrient reduction strategy for lakes, reservoirs, rivers and streams that, when implemented, will help the state target and prioritize watersheds and BMPs to achieve cost-effective water quality improvements.
- Develop and adopt Crude Oil Release Cleanup Guidelines.

The following publications can be accessed on the North Dakota Department of Health website at ndhealth.gov, or by calling 701.328.2372.

Administrative Support Section

Reports

- 2016 North Dakota State Health Assessment
- 2016 North Dakota State Health Improvement Plan
- Annual C-Section Reports
- Annual Fast Facts Reports
- Annual Induced Termination of Pregnancy Report
- NDDoH Biennial Report
- Vital Events Summary



Community Health Section

Booklets

- Autism Spectrum Disorders Resource Booklet (revised)
- Cardiac Resource Booklet (revised)
- North Dakota Health Snapshot Pocket Guide
- Your Own Special Goodbye

Brochures

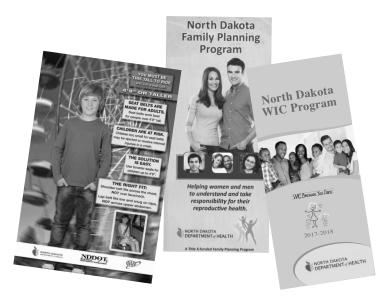
- 10 Things Breastfeeding Moms Should Know Before Leaving the Hospital
- Are you at Risk of a Heart Attack?
- Blood Pressure
- Booster Seat Best Practices
- Breastfeeding: Getting Started
- Child Passenger Safety Best Practices
- Common Warning Signs of a Heart Attack
- Community Based Blood Pressure Screening Algorithm
- Dental Care for Your Child
- Family Planning (2016)
- Get Facts about Mouth and Throat Cancer
- Guidelines for Becoming a Recognized Infant-Friendly Worksite
- Handling your Child's Dental Emergency
- Health Smiles for Mother and Baby

- Healthy Mouth, Healthy Body
- Impact Teen Drivers
- Measuring Blood Pressure the Right Way
- Newborn Bloodspot Screening
- Newborn Bloodspot Screening (Spanish version)
- Poison Brochure
- Pregnancy and Oral Health
- Quit Smoking
- Rear-facing Until Two
- Safe Sleep for Babies
- Safe Sleep for Babies (Spanish version)
- Safe Transportation of Children with Special Needs
- Sealants Quick Reference
- Stroke Risk Scorecard
- Sport Safety
- Taking Care of Your Teeth and Gums
- Taking Steps to be Active
- Tooth Decay
- Why Baby Teeth are Important
- WIC Outreach Brochure
- Your Child's Teeth From Ages 6 to 12
- Your Child's Teeth Helpful Tips for Parents and Caregivers

Fact Sheets

- Adult Cigarette Smoking
- Adult Smokeless Tobacco and Cigar Use
- Adult Tobacco Use
- Adverse Child and Family Experiences Among American Indian Children in North Dakota: Analysis of 2011/12 National Survey of Children's Health Data
- Car Seat Misuse Infographics
- Cardiac Program
- Changes to Survey Sampling Methods
- Child Passenger Safety Observation Survey Infographics
- CSHS Diagnostic and Treatment Services
- Directory of Dental Access Programs
- Division of Children's Special Health Services
- Electronic Cigarettes (E-Cigarettes)
- Health and Economic Costs of Tobacco
- Hookah
- Hypertension

- Medicaid Cessation Coverage
- NDQuits
- NDQuits Information for School Staff
- Oral Health for Children with Special Health Care Needs
- Other Tobacco Products
- Other Youth Tobacco Use in 2015
- Safe Ride News Fact Sheets 2016-2017
- Smiles for Life Fluoride Varnish (fact sheet for medical professionals)
- Smiles for Life Geriatric Oral Health (fact sheet for medical professionals)
- The Effects of Secondhand Smoke on Children
- The Facts about Secondhand Smoke
- Thirdhand Smoke
- Title V/Maternal and Child Health State Performance Measure
- Tobacco Cessation
- Tobacco Use and Lung Cancer
- Tobacco's Toll on North Dakota
- Trends in Adult Tobacco Use
- Trends in Youth Tobacco Use (Grades 7-8)
- Trends in Youth Tobacco Use (Grades 9-12)
- Youth Cigarette Smoking in 2015
- Youth Tobacco Use



Newsletters

- Building Blocks to Safety (sent electronically)
- Healthcare Provider Examiner
- Parenting the First Year Magazine
- Pick-WIC Paper

Reports

- 2014-2016 North Dakota Suicide Prevention Plan
- 2016 North Dakota Chronic Disease Burden Report
- 2016 North Dakota Diabetes Burden Report
- 2017 Youth Risk Behavior Survey
- Child Restraint Misuse In North Dakota
- Chronic Disease in North Dakota A Status Report for 2014
- ND Title V FY 2017 Block Grant Application and FY 2015 Annual Report
- ND Title V FY 2018 Block Grant Application and FY 2016 Annual Report
- North Dakota Diabetes Report (June 2014)
- North Dakota Family Planning 2014 Annual Report
- North Dakota MCH 2016-2020 Needs Assessment Survey Summary Report
- North Dakota Oral Health Surveillance Plan
- North Dakota WIC 2016 Annual Report
- Oral Health Healthy People 2020 Indicators
- Oral Health Third-Grade Basic Screening Body Mass Index Data Tables
- Oral Health Third-Grade Basic Screening Survey Data Tables

- 2015-2017 Child Passenger Safety Activity Booklets for Children Grades K-2 and 3-6
- A Best Practice Guide to Healthy Eating for Early Childhood and a Best Practice Guide to Active Play for Early Childhood
- A Bicycle Helmet for My Child
- A Connection for Families and Agencies Resources for North Dakota Children Ages Birth to 8 (online resource)
- Annual Children's Special Health Services Multidisciplinary Clinic Directory
- Best Practices for Nutrition in Early Care and Education Settings
- Best Practices for Physical Activity in Early Care and Education Settings
- Booster Banners promoting booster use for children shorter than 4'9" Coordinated School Health Blueprint
- Check for Safety: A Home Fall Prevention Checklist for Older Adults
- Child Passenger Safety Best Practice Banners

- Child Passenger Safety Law Flyer (translated into English, Bosnian, Chinese, Farsi, Nepali, Somalian, and Spanish)
- Child Passenger Safety Law Posters
- Child Passenger Safety Law/Best Practice Litter Bags
- Child Passenger Safety Month K-6 classroom Presenter Kits
- CPS Best Practice Quick Reference Guide's for Law Enforcement Laminated Cards
- Making Change Happen Improving the health and well-being of all North Dakota infants, mothers, children, children with special health care needs and their families-ND Compass
- Easy Steps to Properly Fit a Bicycle Helmet
- Emergency Guidelines for North Dakota Schools Manual
- Family Handbook for Diagnostic and Treatment Services
- Handbook for Public Playground Safety
- Head Lice: A Lousy Problem
- Health Guidelines For North Dakota Schools Manual
- Helmet Fit Banner
- Helmet Fit Checklist
- Home Safety Checklist
- How Children See Traffic
- How to Remove Head Lice
- Incidence and Prevalence of Birth Defects in North Dakota were reported in the annual Congenital Malformation Report published by the National Birth Defects Prevention Network
- Information About Pregnancy and Abortion
- Is Your Home Playground a Safe Place to Play?
- Newborn Screening Healthcare Guidelines
- Outdoor Home Playground Safety Handbook
- Playground Safety Banner
- Poison Prevention Activity Book
- Skateboard Helmets
- Sleep Safe ND Floor Stickers
- Sleep Safe ND Posters
- Sleep Safe ND Posters (Spanish version)
- Sleep Safe ND Window Clings
- Suicide Prevention Cards
- Suicide Prevention Posters
- Umbilical Cord Blood Donation Information
- What You Can Do to Prevent Falls

- Women's Way Program Card
- Women's Way Program Card (Spanish version)

Emergency Preparedness & Response Section

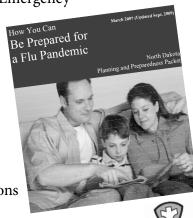
Reports

- North Dakota Data Report (2014)
- Rural EMS Improvement Project

Brochures

- Become a Public Health Emergency Volunteer
- EMSC: When to Call 911 for a Child
- North Dakota Cardiac Ready Community
 Program: Building Heart Strong Neighborhoods
- North Dakota Critical Incident Stress Management Team: Providing Care for the Care Providers
- Stroke Changes Lives: Know the Signs of Stroke and Act FAST When It Strikes

- 2015 ND State Trauma Treatment Manual
- Be Aware and Prepare: An Emergency and Terrorism Preparedness Guide for North Dakotans
- Bioterrorism Planning Guide for North Dakota Hospitals
- Chempack Controlled Substance Transfer Form
- Chempack Deployment Protocols
- Chempack EMS/Hospital Container Content
- Chempack Monthly Quality Assurance Assessment
- Designated Stroke Centers
- Future of EMS (2016)
- HC Standard Healthcare Module Instructions
- Health and Medical Emergency
 Preparedness and
 Response Resource
 and Asset Guide
 (2016)
- Hospitals/Health
 Care Facilities –
 Homeland Security
 Advisory System
 Threat Levels &
 Recommended Actions
- Prepared for a Flu Pandemic



- Life Threatening Differential Chest Pain Diagnoses Supplemental Guide
- ND Acute Stroke Treatment Guidelines (2017)
- ND Cardiac Guidelines (2017)
- ND EMS in Numbers (2015)
- ND EMS Week 2014 Video
- ND Trauma System Map (2015)
- NDLTCA Directory & Buyers Guide
- NDLTCA Emergency Preparedness Quick Guide & Directory
- North Dakota Briefing Book
- North Dakota EMS Treatment Protocols (2016)
- North Dakota Ground Ambulance Map Application
- Pandemic Influenza Response Plan Summary
- Pediatric Restraint Reference Chart for EMS Agencies
- Port-a-Count Fit Testing Instrument Protocols
- Port-a-Count Pictorial
- Public Health and Medical All Hazards Plan Summary
- Redacted Response Plans

Environmental Health Section

Newsletters

- Lab Quarterly
- Official Bulletin

Reports

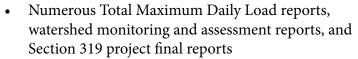
- 2016 and 2017 Section 319 Nonpoint Source Pollution Program annual reports to U.S. EPA
- Air Quality Monitoring Annual Report (2015 and 2016)
- Annual Capacity Development Program Report (2015 and 2016)
- Annual Drinking Water Compliance Report (2015 and 2016)
- Annual North Dakota Mosquito Surveillance Report (2015 and 2016)
- Annual Operator Certification Program Report (2015 and 2016)
- Biological Assessment of Blacktail Creek and the Little Muddy River Following the Meadowlark-Midstream Pipeline Rupture of 2015
- Clean Water State Revolving Loan Fund Annual Report (2015 and 2016)
- Development of a Fish Index of Biotic Integrity

(IBI) for Wadeable Streams of the Northwestern

Glaciated Plains (42) and Northwestern Great Plains (43) Ecoregions of North Dakota

- Drinking Water State Revolving Loan Fund Annual Report (2015 and 2016)
- NDPDES Annual Compliance Monitoring Report (2015 and 2016)
- NDPDES Annual Non-Compliance Report (2015 and 2016)
- North Dakota 2016
 Integrated Section 305(b)
 Water Quality Assessment
 Report and Section 303(d)

List of Waters Needing Total Maximum Daily Loads



- SP-12 Success Story Report for Shortfoot Creek in Sargent County, North Dakota
- SP-12 Success Story Report for Thirty Mile Creek in Stark, Hettinger and Grant Counties, North Dakota
- WQ-10 Success Story Recreational Use Attained Through Best Management Practice Implementation and Targeted Technical Assistance in the Thirty Mile Creek Watershed

- Air Regulations for Grain Facilities Guide
- Ambient Air Quality Monitoring Program Quality Assurance Project Plan
- Arsenic in Drinking Water Fact Sheet
- Lead in Household Water Systems Fact Sheet
- North Dakota Air Pollution Control Rules
- North Dakota Public Water Supply Systems Rules
- Oilfield Impacts and the North Dakota Department of Health Environmental Health Section
- "Our Water Keeping It Clean" articles in the North Dakota Water magazine
- Policy for the Control of Hazardous Air Pollutant Emissions in North Dakota



- Public Water System User's Guide
- Recommended AERSURFACE Inputs (North Dakota)
- Sanitary Pumper Rules
- Septic Pumper Guidance
- State Revolving Loan Fund Program Project Manual
- Uranium in Drinking Water Fact Sheet

Health Resources Section

Newsletters

- CLIA Bits
- Dialysis Dialogue
- Hospital Happenings
- Long Term Care Highlights

Medical Services Section

Newsletters

- Epi Report
- Immunization Newsletter
- Pump Handle

Reports

- Comprehensive HIV/STD/Heptitis/TB Prevention Plan
- HIV/AIDS/STD/Hepatitis/TB Annual Profile
- Immunization Program Strategic Plan
- Ryan White Care Plan
- Weekly Influenza Summary (during flu season)
- West Nile Virus (WNV) Weekly Summary (during WNV season)

- Child Care/School Infection Control Manual
- Foodborne Outbreak Manual
- Healthcare-Associated Infections Prevention Plan and Reference Manual
- School Immunization Toolkit

