

















Improving the length and quality of life for all North Dakotans





TABLE OF CONTENTS



WELCOME FROM THE STATE HEALTH OFFICER





Nizar Wehbi, MD, MPH, MBA State Health Officer

It is an honor to serve as North Dakota State Health Officer. My gratitude to Governor Burgum for his confidence and trust in me to lead the Department of Health during these challenging times.

I would like to thank all State Health Officers who came before me; more especially, I would like to thank Dirk Wilke who served as the Interim State Health Officer at a critical time during the pandemic response. My gratitude to all team members who have been working tirelessly to ensure that North Dakotans stay safe and healthy.

March 2020 will go down in history as the time when the world changed. Overnight, we had to respond to a once-in-a-century pandemic. In a matter of days, we had to exponentially expand our capacity for testing, contact tracing and lab capabilities. Then, ramping up for vaccination efforts all while the pandemic lingers. All these efforts would not have been possible without the hard work, dedication and expertise of every single team member at the department and our partners.

As a statement of recognition, the Department of Health team was selected for the 2021 Governor's Roaming Bison Award for the continued leadership and commitment to compassionate, data-driven decision making over the pandemic. Moreover, Molly Howell, DoH Immunization Director, was awarded the Governor's Heritage Award for Excellence in Citizen Focus for her leadership in developing a world-class, compassionate immunization program, and her tireless dedication to the health of North Dakota's citizens.

To be more responsive to the pandemic, the Department of Health is structured into the following sections: Disease Control & Forensic Pathology, Healthy & Safe Communities, Health Resources & Response, Laboratory Services, Licensure & Certification, Office of the State Epidemiologist, Outreach & Response and Administrative Services. Throughout the report, you will be able to read more details about each section and its contributions in the previous biennium.

It is also important to highlight that the Department of Health is in the midst of Public Health Accreditation Board (PHAB) reaccreditation process. It is a badge of honor and distinction to be the only PHAB accredited department in the State of North Dakota. This accreditation is a commitment to being a data driven organization that values quality improvement and works on improving efficiency and delivering excellent services.

Our mission is to improve the length and quality of life for all North Dakotans, and our purpose is to "Empower People, Improve Lives and Inspire Success." Using population health management framework would promote health and wellness and would allow us to achieve the Triple Aim – better health, better experience and lower cost. Thus, paving the way to becoming the healthiest state in the union.

All this work can only be accomplished through the dedication and expertise of our team members, partners and collaborators including Local Public Health Units, Community Health Centers, health care facilities, providers, as well as our federal, state, and local and tribal partners.

Working together is what makes us stronger.

Wellun !!

Nizar Wehbi, MD, MPH, MBA State Health Officer

OUR MISSION

Improve the length and quality of life for all North Dakotans

OUR PURPOSE

Empower People | Improve Lives | Inspire Success

DEPARTMENT OVERVIEW

Our Commitment

- Creating healthy and vibrant communities
- Enhancing and improving systems of care
- Strengthening population health Promoting public health readiness and response

Our 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

Overview

The NDDoH employs approximately 210 full-time workers and 500 temporary staff dedicated to making North Dakota a healthier place to live.



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

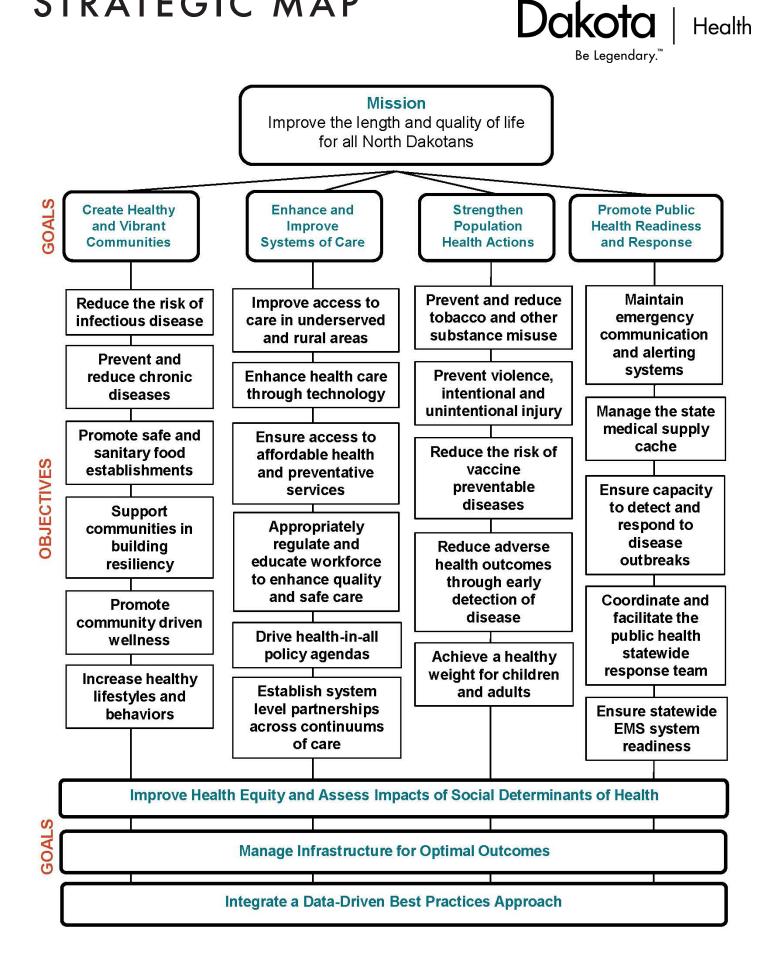
- Administrative Services
- Healthy & Safe Communities
- Disease Control & Forensic Pathology
- Health Resources & Response
- Licensure & Certification
- Laboratory Services
- Office of the State Epidemiologist
- Outreach & Response

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

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

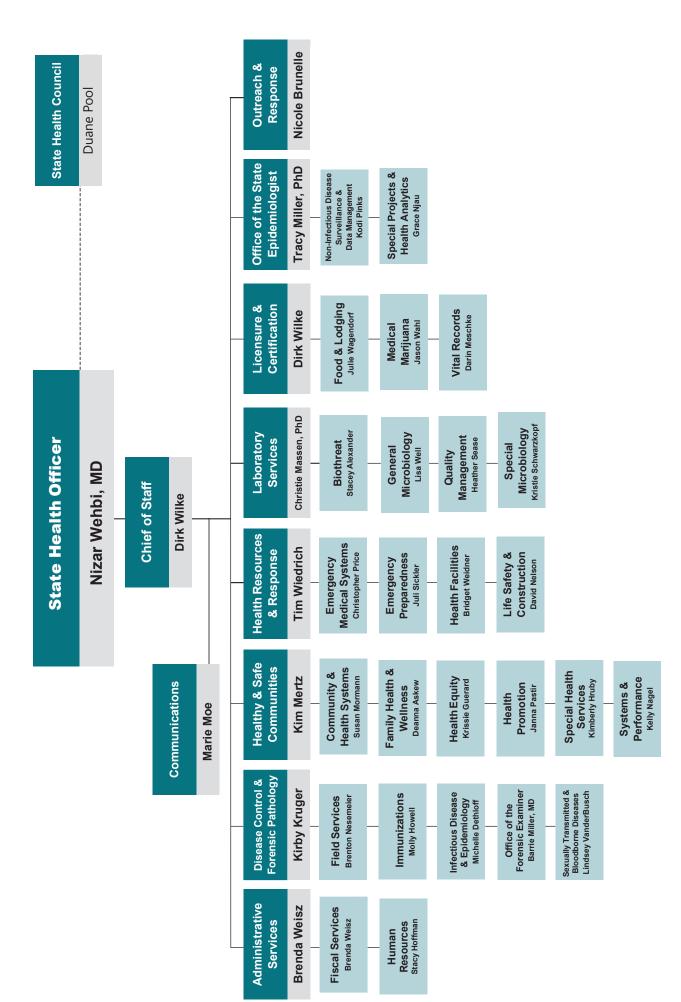


STRATEGIC MAP

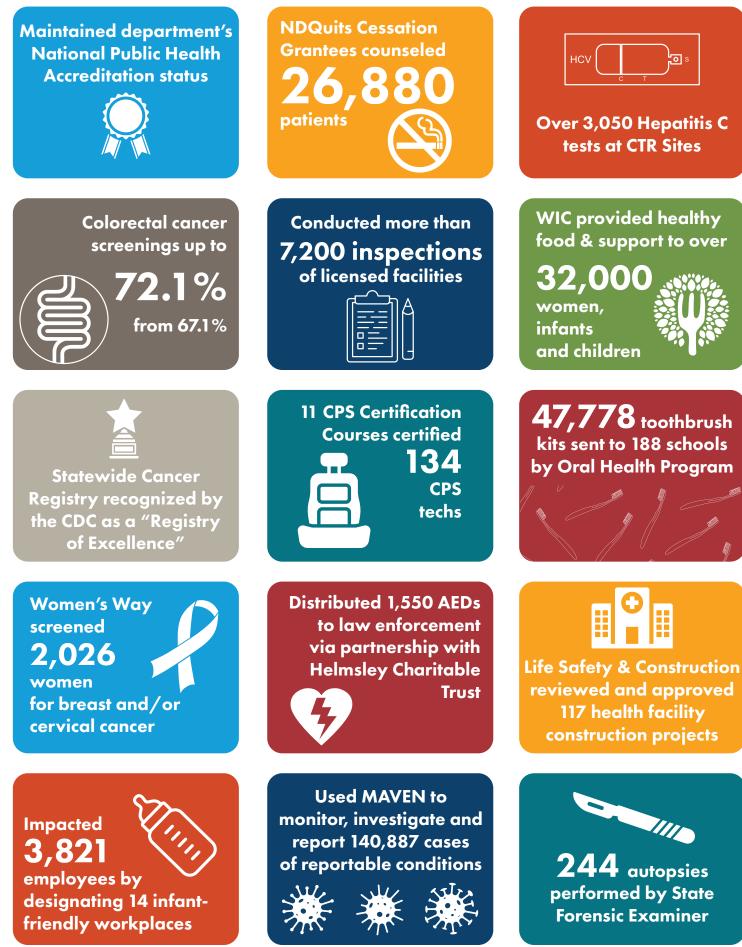


NORTH

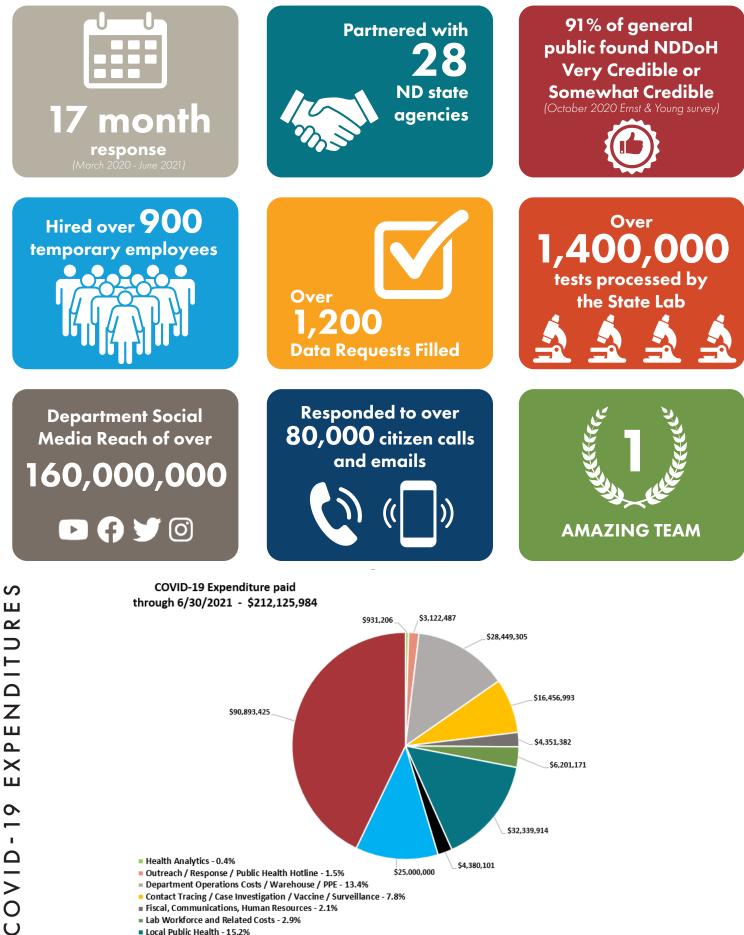
ORGANIZATIONAL CHART



2019-2021 BY THE NUMBERS



COVID-19 RESPONSE BY THE NUMBERS



Contact Tracing / Case Investigation / Vaccine / Surveillance - 7.8%

- Fiscal, Communications, Human Resources 2.1%
- Lab Workforce and Related Costs 2.9%
- Local Public Health 15.2%
- EMS Providers -2.1%

Hospitals - 11.8%

- Testing Costs 42.8%

FINANCIAL SUMMARY

NORTH DAKOTA DEPARTMENT OF HEALTH APPROPRIATIONS SUMMARY

Description	_	2019 - 2021 Original ppropriation	0	Emergency Commission Requests - Funding pportunities / stem Changes	Emergency Commission Requests - COVID19 Funding	9 - 2021 Final ppropriation
Salaries & Wages	\$	37,719,574	\$	55,000	\$ -	\$ 37,774,574
Operating Expenses		32,753,080		3,690,000	-	36,443,080
Capital Assets / Capital Carryover		3,867,813		1,525,668	-	5,393,481
Grants		53,257,292		325,000	-	53,582,292
Tobacco Prevention & Control		12,902,064		-	-	12,902,064
WIC Food Payments		19,800,000		-	-	19,800,000
COVID19 Funding		-		-	447,868,203	447,868,203
Total	\$	160,299,823	\$	5,595,668	\$ 447,868,203	\$ 613,763,694
General Fund	\$	36,360,590	\$	(10,197)	\$ -	\$ 36,350,393
Federal Funds		102,021,319		2,043,865	447,686,203	551,751,387
Special Funds		21,897,914		3,562,000	-	25,459,914
Total	\$	160,279,823	\$	5,595,668	\$ 447,686,203	\$ 613,561,694
Total FTE		204.00		1.00	-	205.00

NORTH DAKOTA DEPARTMENT OF HEALTH EXPENDITURES

Description	0	Fiscal & perations *	Medical Services & Forensic Pathology	Health Resources & Response		ealthy & Safe Communities	Laboratory Services		Outreach & Response	E	Total xpenditures
Salaries & Wages	\$	9,316,795	\$5,896,863	\$9,925,086	\$	7,535,310	\$3,142,788	¢	_	\$	35,816,842
Operating Expenses	φ	2,604,496	6,811,358	8,432,494	φ	5,756,393	2,609,205	φ	_	φ	26,213,946
Capital Assets		-	195,274	690,126		1,545,454	1,896,804		-		4,327,658
Grants		3,356,386	3,103,292	11,971,148		30,674,159	-		-		49,104,985
Tobacco Prevention		-	-	-		12,096,943	-		-		12,096,943
WIC Food Payments		-	-	-		15,326,450	-		-		15,326,450
COVID19 Funding		1,904,527	16,457,148	58,198,307		37,075,181	97,095,814		1,395,007		212,125,984
Total	\$	17,182,204	\$32,463,935	\$89,217,161	\$	110,009,890	\$104,744,611	\$	1,395,007	\$	355,012,808
General Fund		4,318,423	2,871,865	10,303,900		13,771,912	3,032,338		-		34,298,438
Federal Funds		11,951,911	29,592,070	72,906,942		84,562,205	99,459,381		1,395,007		299,867,516
Special Funds		911,870	-	6,006,319		11,675,773	2,252,892		-		20,846,854
Total	\$	17,182,204	\$32,463,935	\$89,217,161	\$	110,009,890	104,744,611		\$1,395,007		\$355,012,808
Total FTE		52.85	30.00	53.50		49.65	18.00		1.00		205.00

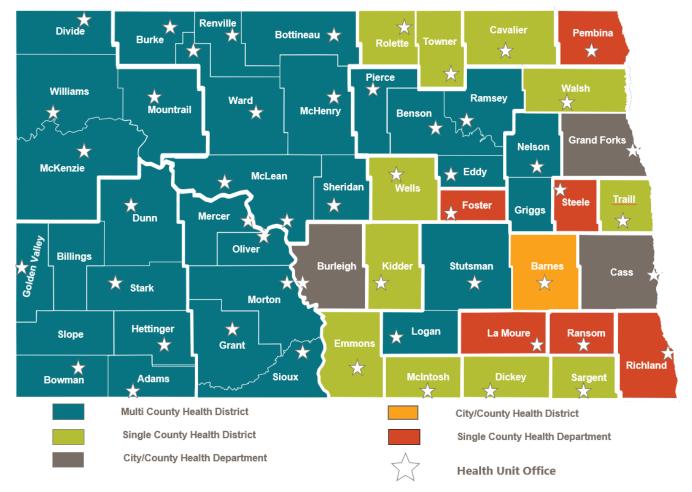
* Represents expenditures of Administrative Services, Licensure & Certification, and Office of the State Epidemiologist

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. All 28 units are important on-location partners of NDDoH, which was especially highlighted during the whole-of-government response to the COVID-19 pandemic in North Dakota.





LOCAL PUBLIC HEALTH UNIT REPRESENTATIVES

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

10

Public Health

Administrators

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

Renae Moch, MBA, FACMPE Stephanie Welsh Robin Izler, RN Theresa Will, MPH, RN Erin Ourada, MPH Roxanne Holm Bev Voller, RN Desi Fleming, RN, MSN Lisa Clute Lisa Hilbert, RN Debbie Swanson, MS, RN Janel Brousseau Allen McKay, RS Jessica Duffy, RN Cheryl Reis-Schilling Julie Ferry, MS, RN Julie Hardy Brenna Welton Kayla Carlson Barb Frydenlund, RN Brenda Peterson Sherry Adams, RS/REHS Kathryn Good Majusta Kleven Brenda Stallman, RN Javayne Oyloe Allen Anderson Caitlyn Roemmich

November 2021

LOCAL PUBLIC HEALTH UNIT EXPENDITURES

Local Public Health Unit Expenditures For the Period July 1, 2019 through June 30, 2021

Central Valley Health Unit 5,322,583 116.6 City County Health Dept 4,549,952 215.8 Custer District Health Unit 6,376,795 66.3 Dickey County Health District 1,134,660 115.7 Emmons County Public Health 771,852 117.1 First District Health Unit 13,476,802 70.6 Foster County Health District 768,491 119.4 Kidder County District Health Unit 373,430 76.2 Lake Region Dist Health Unit 4,378,483 88.1 McIntosh Dist Health Unit 519,173 100.4 Nelson Griggs District Health 926,495 90.8 Rolette County Public Health 3,098,470 108.3 Sargent County District Health 783,767 101.2 Southwestern Dist Health Unit 438,495 27.2 Upper Missouri Dist Health Unit 6,405,718 52.0 Walsh County Dealth Dept 1,632,351 76.5 Wells County District Health 1,632,351 76.5 Wells County District Health 1,632,351 76.5		Total Expenditures	Annual Per Capita Expenditures
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LaMoure Public Health Unit960,898118.2Pembina County Health Unit832,86059.9Ransom County Health Dept1,220,660116.5Richland County Health Dept3,367,192103.6	Grand Forks Public Health	11,824,726	83.54
Pembina County Health Unit 832,860 59.9 Ransom County Health Dept 1,220,660 116.5 Richland County Health Dept 3,367,192 103.6	County Health Units		
Ransom County Health Dept 1,220,660 116.5 Richland County Health Dept 3,367,192 103.6	LaMoure Public Health Unit	960,898	118.28
Richland County Health Dept3,367,192103.6	Pembina County Health Unit	832,860	59.94
		1,220,660	116.54
Steele County Public Health374,36498.3		3,367,192	103.68
	Steele County Public Health	374,364	98.36
Total/Per Capita Local Public Health Funding \$ 119,486,834 ^ \$ 78.6	Total/Per Capita Local Public Health Funding	\$ 119,486,834	^ \$ 78.60

*Annual per capita is based on 2018 Population Census



OFFICE OF THE STATE HEALTH OFFICER

The Office of the State Health Officer manages the activities of and provides direction and leadership to the North Dakota Department of Health.

The State Health Officer is appointed by the governor to be the chief administrative officer of the agency and to serve as a member of the governor's cabinet. The State Health Officer implements state laws governing the agency within the governor's guidance and the rules adopted by the State Health Council. The State Health Officer is a statutory member of approximately a dozen boards and commissions.

Role

During the 2019-2021 biennium, the Department of Health experienced turnover in leadership as the state responded to the ongoing COVID-19 pandemic. The department appreciates the service provided by individuals and is grateful for their leadership as they provided guidance to the state during this challenging and unprecedented era of history.

<u>State Health Officer</u>	<u>Time of Service</u>
Mylynn Tufte	Feb. 20, 2017 - June 1, 2020
Andrew Stahl (int.)	June 1, 2020 - Aug. 31, 2020
Paul Mariani (int.)	Sept. 14, 2020 - Sept. 25, 2020
Dirk Wilke (int.)	Sept. 1, 2020 - Sept. 13, 2021
	Sept. 26, 2020 - Apr. 30, 2021
Nizar Wehbi	May 1, 2021 – present

INIZAR VVenbi

Accomplishments

- Led COVID-19 crisis response efforts for the state of North Dakota, including work internally and collaboratively with other state entities to:
 - Establish a Unified Command process with the Department of Emergency Services and the Governor's Office. Moved to an Incident Command team led by the Department of Health at the end of the state emergency declaration on April 30, 2021.
 - Develop isolation, quarantine and testing protocols.

- Establish disease control practices for responding to the pandemic needs.
- Connect health resources across the state to streamline and standardize responses.
- Implement a statewide courier process for test collection and vaccine distribution.
- Expand testing capacity at the state laboratory.
- Develop and establish communication channels for citizens, which included website dashboards for cases, content creation for social and traditional media, developing fact sheets for citizens and professional providers, increasing hotline capacity and adding web-based citizen self-service portals.
- Facilitate the receipt, management, distribution and reporting of COVID-19 related funding.
- Hire more than 900 temporary team members to ensure timely and professional citizen service.
- Coordinated the department's 2021 legislative efforts, including monitoring 206 bills, coordinating and approving testimony on 28 bills, submitting 17 fiscal notes, and guiding the department through the legislative process, and briefing various organizations on the status and outcome of legislation.

Goals

 Integrate with the Department of Human Services to become the North Dakota Department of Health and Human Services. The unified DHHS will provide a unified and innovative pathway to serve the citizens of North Dakota, contributing to the larger goal of seeing North Dakota become the healthiest state in the nation

• Maintain national accreditation through the Public Health Accreditation Board (PHAB).



STATE HEALTH COUNCIL

The State Health Council serves as the NDDoH's governing and advisory body. The Council's nine members are appointed by the governor for three-year terms. Four members are appointed from the health care pro-vider community and five from the public sector.

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 stan'dards for hospitals and related medical institutions, as well as the construction and maintenance of such institutions.

COMMUNICATIONS

The Division of Communications is responsible for managing internal and external communications, ensuring effective, accurate and factual messaging.

Accomplishments

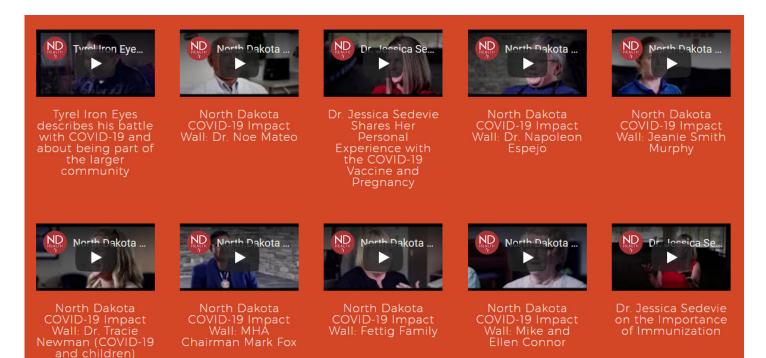
- Created, edited and/or approved hundreds of news releases, brochures, posters, letters, etc.
- Strengthened interagency communication collaboration
- Created the COVID-19 Impact Wall to remember those lost during the pandemic.
- Improved the department's social media following from approximately 8,000 to 135,000 from March 2020 to June 2021.

Council Members 2019-2021

- Duane Pool, Chairman Dennis Wolf, Vice Chairman
- •
- Darrold Bertsch, Secretary
- James Brosseau
- Genny Dienstmann Tyler Lannoye •
- Kristin Roers ٠
- Torey Sayler
- Mike Fedorchak

Goals

- Make the website available in multiple languages.
- Develop a multimedia asset bank and blog.
- Integrate communication activities with Human Services.
- Strengthen internal communication efforts.





FISCAL SERVICES

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

Accomplishments

- Managed the overall receipt and expenditure of \$212.1 million of COVID-19 related funding.
- Implemented Electronic Records Management for all voucher and payment records.
- Held administrative expenses to 2.85%.

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, payroll processing, safety, wellness and HIPAA.

Accomplishments

- Achieved a turnover rate below the state average for both years of the biennium.
 - 2019: 13.4% state / 11% NDDoH
 - 2020: 10.7% state / 8% NDDoH

Goals

- Provide leadership and fiscal direction in the integration of the Department of Health and the Department of Human Services as outlined in HB 1247 passed by the 2021 Legislative Assembly.
- Hold administrative expenses to less than 5%.
- Hired over 900 temporary employees to assist with the COVID-19 pandemic.
- Converted paper timesheets to an electronic timekeeping system.

Goals

- Keep turnover rates below the state average for the biennium.
- Increase overall employee satisfaction as measured by our Gallup Survey results.



The purpose of the Healthy & Safe Communities Section is to support individuals, families and communities by providing quality programs that protect and enhance the health and safety of all North Dakotans. Healthy & Safe Communities comprises seven offices/ divisions:

- Health Equity Office
- Systems and Performance Office
- Community & Health Systems Division
- Family Health & Nutrition Division
- Health Promotion Division
- Injury & Violence Prevention Division
- Special Health Services Division

TITLE V / MATERNAL & CHILD HEALTH

The section chief manages the Maternal and Child Health (MCH) Block Grant and the Pediatric Mental Health Care Access Program Grant.

Accomplishments

- Initiated a Work-As-One Needs Assessment Integration process to align the work of multiple state agencies and other entities in data collection and reporting. Through this process, new 2021-2025 MCH priorities were determined.
- Established the Pediatric Mental Health Care Access Consultation Line, (888) 522-9654, which connects primary care providers with a child and adolescent psychiatrist for a free consultation.
- Provided co-management of the COVID-19 Public Health Hotline, which responded to 83,265 citizen calls. Many Healthy & Safe Communities section staff served as hotline operators.

Goals:

- Increase MCH workforce development by partnering with North Dakota State University (NDSU), Public Health Department, to develop and implement a MCH Public Health Graduate Certificate Program.
- Host a Pediatric and Primary Care Behavioral Health Symposium that brings together pediatric, primary care and behavioral health providers, along with experts in trauma and suicide intervention to share strategies and skills that will influence pediatric patient care.

HEALTH EQUITY OFFICE

Health equity is giving everyone the same opportunity to the highest level of health care that meets their needs.

The NDDoH Health Equity Office (HEO) works to understand and reduce health disparities among all North Dakotans with the primary goal to reduce rates of disease by providing opportunities for interventions and improving access to health care; thereby, ensuring all North Dakotans receive the highest quality of services.

Accomplishments:

- Four staff completed and received the Diversity and Inclusion Certificate from Cornell University. Established the Youth, New American/Foreign Born/Immigrant (NFI), and the LGBTQ2S+ BeYOU Advisory Boards.
- Increased capacity of the HEO by hiring the following positions: four Tribal Health Liaisons, NFI Health Liaison, Special Populations Coordinator, Health Equity Immunization Coordinator and COVID-19 Health Equity Coordinator.
- Developed the COVID-19 Health Equity Strategic
 Plan.
 - Revised the Health Equity Office Strategic Plan
 - Through the Office of Minority Health, the HEO received a \$600,000 grant for two years to address hypertension and diabetes in disparate communities in North Dakota

(State/Tribal/Territorial Partnership Initiative to Document and Sustain Disparity-Reducing Interventions: September 30, 2020 – September 29, 2022).

 The HEO received a two-year, \$31 million dollar grant from the Centers for Disease Control and Prevention (CDC) to address health equity and COVID-19 (National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities: June 1, 2021 – May 31, 2023).

Goals:

- Advance health equity through a health in all polices approach.
- Support policy and system changes including diversity and inclusion in programmatic work and in the workforce.
- Establish a health care provider initiative that will increase professional knowledge of cultural awareness and unconscious bias.
- Establish a Tribal Health Board in collaboration with NDSU, American Indian Public Health Resource Center.
- Increase training and knowledge capacity on equity, diversity and inclusion.
- Support public, private and community partnerships.



SYSTEMS & PERFORMANCE

The Office of Systems & 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 also serves as the lead for performance improvement, coordinating efforts in public health accreditation, strategic planning, quality improvement and state health assessment and planning processes.

Accomplishments:

- Maintained the Department's National Public Health Accreditation status through the five-year timeframe.
- Established a COVID-19 result notification process to support local public health/ community testing efforts.

Goals:

- Achieve the Department's National Public Health Reaccreditation status in 2022 and maintain when the NDDoH and the North Dakota Department of Human Services become one agency (NDHHS).
- Establish a North Dakota data reporting process to better identify primary care, dental and mental health underserved areas and populations in the state.
- Establish a resource referral management system through the North Dakota Health Information Network (NDHIN).
- Implement a newly established state health improvement planning process.



Primary Care Office

The Primary Care Office (PCO) is included within the Office of Systems and Performance. The goal of the PCO 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, behavioral health and dental services - and the recruitment and retention of critical health care providers. Activities 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; promoting the National Health Service Corps Program; and managing the Federal State Loan Repayment Program.

Accomplishments

- Created an online loan repayment application and verification processes for the North Dakota Healthcare Professional and Federal State Loan Repayment Programs.
- Established an NDDoH and Federally Qualified Health Centers (FQHC) meeting to better support COVID-19 response efforts and communication needs.
- Six behavioral health professionals were awarded and retained in Human Service Centers and the State Hospital with Otto Bremmer matching funds.

Goals:

- Develop and implement a Health Care Workforce Advisory Council.
- Develop a recruitment and retention database that will track all health care professionals practicing in North Dakota using data provided by the licensure boards.
- Increase the number of applicants and awards for the State and Federal Loan Repayment Programs through new partners, funding opportunities, and increased promotion and marketing efforts.

COMMUNITY & HEALTH SYSTEMS

The Division of Community & Health Systems works to prevent disease and promote health at every stage of life through evidence-based and culturally responsive strategies.

Accomplishments:

Comprehensive Cancer Prevention & Control

• Partnered with both Women's Way and the NDDoH Immunization Program both years to fund an additional \$300,000 in grants.

North Dakota Cancer Screening Initiative

• Colorectal cancer screening rates increased from 67.1% to 72.1% during the 19-21 biennium.

Statewide Cancer Registry

- Achieved gold certification for data timeliness, completeness and quality.
- Recognized as a CDC National Program of Cancer Registries (NPCR) Registry of Excellence.



Women's Way

- Screened 2,026 women for breast and/or cervical cancer, resulting in 18 individuals diagnosed with breast cancer and 23 cervical conditions that required treatment.
- Women's Way provided navigation services to 604 clients, of which 498 were screened (83%).

Tobacco Prevention & Control

- Quit Week began as an annual event to collaborate with all Tobacco Prevention and Control Program (TPCP) partners to promote quitting commercial tobacco products. Media evaluations indicated a significant increase in calls to NDQuits in 2020 and 2021 during Quit Week – and Quit Week for these two years resulted in an over 45% increase in enrollments to NDQuits.
- NDQuits served 4,412 unique tobacco users and implemented a youth-specific program, My Life My Quit. The TPCP grantees are a vital source of

referrals with over 95% of the total referrals.

- The NDQuits Cessation (NDQC) Grant Program expanded into more health care systems, including rural and frontier areas, to increase tobacco treatment resources in North Dakota. Cumulatively during the biennium, grantees counseled 26,880 patients, provided 2,830 bridge Nicotine Replacement Therapy (NRT), referred nearly 2,000 patients to NDQuits and trained 190 health care staff as Tobacco Treatment Specialists (TTS).
- Electronic Nicotine Delivery Systems (ENDS) are tobacco products and remain a priority issue for the TPCP. The TPCP has a unique stance - compared to other states - to recognize that ENDS are not proven to be safe for anyone. The TPCP hosted the second annual North Dakota ENDS Summit as a series of virtual presentations. Nationally recognized experts in tobacco prevention presented on ENDS use with youth and behavioral health populations, local and federal policy, advocacy efforts and ENDS nicotine content.
- Statewide tobacco sale age increased to 21 (T21). Local policy initiatives were implemented to reduce youth access to tobacco products in Linton, St. John, Dickinson, Cando, Wells County, Devils Lake, Fargo, Lincoln and Bismarck.
- Expanded the reach of the Youth Action Summit to educate a wider audience of young North Dakotans on tobacco and empower these students to advocate for changes that will impact their future.
- Ongoing collaboration with DHS to expand the youth access compliance checks as part of the Synar Program. This program allowed additional funding to be offered to local public health units to coordinate tobacco compliance checks.
- Collaborated with the Behavioral Risk Factor Surveillance System (BRFSS) to assess adult tobacco attitudes and behaviors. From 2018 to 2020, the percentage of North Dakota adults who currently smoke cigarettes and those that use ENDS decreased from 19.1% to 17.4% and 23.3% to 17.9%, respectively.
- Expanded work on each North Dakota Indian Reservations to implement a Native American Adult Tobacco Survey.
- Engaged community leaders on each North Dakota Indian Reservation to establish commercial tribal tobacco control coalitions to address commercial tobacco addiction through education of traditional tobacco uses for each community.

COMMUNITY & HEALTH SYSTEMS

Goals

- Increase breast, cervical and colorectal cancer screenings through systems change, patient navigation, target messaging and collaboration with state-wide partners and organizations.
- 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 North American Association of Central Cancer

FAMILY HEALTH & WELLNESS

The Division of Family Health & Wellness works on initiatives that encourage healthy, active and wellnourished children, youth, women, men and families. The division also works to prevent and respond to unintentional and intentional injury and violence.

Programs include:

- Breastfeeding Promotion & Support
- Child & Adolescent Obesity Prevention
- Reproductive Health
- Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
- Child Passenger Safety
- Domestic Violence/Rape Crisis
- Infant & Child Death Services
- Cribs for Kids
- Injury Prevention

Accomplishments:

Breastfeeding Promotion and Support

- Provided funding and technical assistance to three local public health units to increase breastfeeding at six months.
- Impacted 3,821 employees by designating 14 workplaces across North Dakota as Infant Friendly.

Child and Adolescent Obesity Prevention

- Provided funding and technical assistance to one local public health unit, one regional education association and NDSU Extension Service to implement strategies to reduce overweight/obesity in children.
 - Fargo Cass Public Health continued to work with city officials in Fargo and West Fargo to implement the Child Care Physical Activity Health Code that includes daily required minutes of physical activity, staff participation in annual approved physical

Registries (NAACCR) standards.

- Improve chronic disease prevention, early diagnosis, disease management, surveillance and evaluation by working with communities, health professionals and health systems in the areas of policy, quality improvement and education.
- Provide grants, training, education and technical assistance to communities and health care providers.

activity training, "tummy time" for infants, limits electronic media for children, and restricting/ limiting fruit juice – and is working to extend this to rural communities in Cass County.

- The Southeast Education Cooperative (SEEC) provided Interactive Health Technology devices for teachers. These devices can capture students' activity throughout a day or a class period. SEEC also provided on-going professional development trainings to school staff and faculty on the "Whole School, Whole Community, Whole Child Model (WSCC). SEEC's Health and Wellness Coordinator is a trainer on Trauma Sensitive Schools.
- The NDSU Extension Program provided "On the Move" health curriculums for western North Dakota to help students develop awareness (before, during and after-school) of food and activity choices and habits that contribute to healthy living.

Family Planning

- Provided medical, education and counseling services to over 8,000 individuals at 20 locations statewide. Implemented telemedicine in six additional family planning service sites, one of which is located within the New England Women's Prison.
- Collaborated with the Title V Maternal and Child Health (MCH) Block Grant to provide depression screenings to clients aged 15-24.
- Provided professional development to local family planning staff on topics including health equity, mandatory reporting, screening for victimization, human trafficking and intimate partner violence.

FAMILY HEALTH & WELLNESS

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

- Provided healthy food, nutrition education, breastfeeding support and referrals to more than 32,000 women, infants and children.
- Met the U.S. Department of Agricultural (USDA) federal mandate to implement Electronic Benefit Transfer (EBT) statewide by October 2020. Paper check issuance was converted to the use of an online eWIC card for participants to redeem their monthly food benefits. Approximately 140 WIC authorized stores across the state had their Point of Sale (POS) systems certified to accept the eWIC card. The WIC EBT pilot started in July 2020, with statewide rollout completed in October of 2020.
- Implemented WIC Shopper app, which allows participants easy access to their monthly benefit balance, the WIC allowable food list and recipes.
- Continued to provide service operations to our WIC families throughout the COVID-19 pandemic via use of available waivers.

Child Passenger Safety (CPS)

- Conducted 11 national CPS certification courses and certified 134 CPS technicians.
- Provided 851 car safety seats to low-income parents of young children through statewide car seat distribution programs.
- Coordinated 117 car safety checkups and inspected 903 car seats statewide. Assisted 311 CPS certified technicians with their recertification.
- Created an online CPS Maps Resource to provide more detailed information to the public about car seat checkups, distribution programs and hospital CPS classes.

Domestic Violence/Rape Crisis

- Provided state and federal funds to four domestic violence/rape crisis agencies to implement Green Dot, a bystander intervention strategy, in their communities and partnered with CAWS ND to host a Campus Green Dot training that certified 30 persons as trained facilitators. Over 400 persons attended trainings to learn how to be an active bystander.
- 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.
- Provided state funds to six agencies to support domestic violence offender treatment programs in nine communities.

Infant & Child Death Services

 Promoted the Safe to Sleep North Dakota media campaign statewide. The campaign highlights the importance of safe sleep practices, protective factors from breastfeeding and the risk of second-hand smoke. Materials were distributed to community partners, home visiting programs, childcare, clinics, hospitals, local public health, American Indian reservations, gas stations, county court houses, casinos and grocery stores.

Cribs for Kids

• Safe sleep education materials and 405 crib kits were provided to 32 partner locations throughout the state thorough collaboration with WIC, local public health, home visiting programs, hospitals and clinics.

Count the Kicks

• Promoted Count the Kicks, a stillbirth prevention campaign that educates parents on the importance of tracking baby movements during the third trimester of pregnancy. Since the launch in June 2019, 482 expectant parents have downloaded the app and more than 2,945 North Dakotans have visited the Count the Kicks website.

Injury Prevention

- Partnered with Vision Zero to work towards eliminating motor vehicle crash fatalities and serious injuries.
- Provided materials to support 13 Stepping On Senior Falls Prevention workshops conducted by community leaders across North Dakota, with 152 older adults participating.
- Assisted the U.S. Consumer Product Safety Commission with 17 product recall effectiveness checks.

FAMILY HEALTH & WELLNESS

Injury Prevention (cont'd)

• Funded two distracted teen driving programs, reaching 3,148 youth.

In addition to these accomplishments, the division's School Health Specialist led the department's COVID-19 K-12 school response team. This team developed processes, procedures and resources to support all North Dakota K-12 Schools (Public, Private and Tribal) with strategies to reduce the transmission of COVID-19.

Goals:

- Provide leadership to workplaces with breastfeeding support policies through the Infant-Friendly Work-place Designation.
- Continue to work with MCH grantees on priority initiatives.
- Support and expand the WIC breastfeeding peer counseling program.

HEALTH PROMOTION

The mission of Health Promotion is to encourage, support and facilitate strategies in communities by collaborating with health care providers, public health, tribes and non-traditional partners to implement local policies, systems and environmental changes to improve nutrition, increase physical activity and reduce chronic diseases.

Accomplishments:

Diabetes and Hypertension Prevention and Control (DPHP) Programs

- The Diabetes Prevention and Control Program (DPCP) contracted with ProVention Health Foundation to launch a North Dakota-specific platform for online delivery of the National Diabetes Prevention Program (DPP). Launch of the platform allowed for the development of three new National DPP's, including the first CDC-recognized tribal program in North Dakota.
- The DPCP hosted a 10-session ECHO series on best practices in diabetes management. The series reached over 75 providers across the state during the pandemic to improve health outcomes for individuals with Diabetes.
- Heart Disease & Stroke Prevention partnered with Blue Cross Blue Shield of ND to train over 400 health care providers across the state, (including 250

- Reduce domestic violence, sexual assault and stalking crimes through grants, trainings and partnerships.
- Support the use of evidence-based sexual violence programs.
- Support Cribs for Kids and Count the Kicks to reduce the number of infant deaths statewide.
- Partner with Vision Zero to eliminate motor vehicle crash fatalities and serious injuries.
- 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.

OBGYN/Labor and Delivery providers across five health systems) on how to take blood pressure accurately.

- Launched a remote patient monitoring program for diabetes and hypertension at Heart of America in Rugby. Through this program, pharmacists can track blood glucose and blood pressure in real time to allow medication adjustment recommendations, demonstrate the impact of lifestyle choices and reduce the need for in-clinic appointments during clinic restrictions.
- Through partnership with NDSU School of Pharmacy, an Enhanced Medication Therapy Management (EMTM) Rural Rotation was developed and completed by 17, year-four pharmacy students in the 2020-2021 school year. While on rotation, they conducted a total of 203 MTM encounters, 94 self-measured blood pressure consultations, 391 blood pressure screens and 369 prediabetes risk tests.

Oral Health

 Partnered with the National Association of Chronic Disease Directors (NACDD) to host the first ever Oral Health Statewide Engagement Meeting (StEM) in May 2021. Forty partners attended, representing the NDDoH and DHS, local foundations, academics, ND Medicaid,

HEALTH PROMOTION

FQHCs, public health, private dental clinics, Indian Affairs Commission, Quality Healthcare Associates and others. An Oral Health Coalition is being reestablished as a result.

- The Medical-Dental Integration clinic-based hygienist provided oral screenings and fluoride varnish services to 630 people that do not have a dental home.
- In the 2020-2021 school year, the Prevention Coordinator facilitated distribution of 47,778 toothbrush kits to 188 schools to ensure children had supplies for healthy teeth and gums during COVID-19 dental care and school closures.



 There were over 43,470 screenings conducted for elevated blood pressure at partner dental clinics resulting in 5,266 identified high blood pressures, 883 referrals to primary care and 332 follow up referrals for treatment.

Health Promotion Special Projects

- NDC3 (Community, Clinical, Collaborative), a referral platform for chronic disease community programs, launched in July 2019. There were 842 users and 682 participants in the community-based lifestyle change programs.
- Facilitated Blue Zones readiness assessments with four communities and provided reports with proposed strategies for implementation that address policy, system and environmental changes that improve quality of life and health metrics.

• Established North Dakota's first Alzheimer's Strategic Planning Steering Committee to develop the first Strategic State Plan to be completed in the 2021-2023 biennium. This plan will allow North Dakota to apply for federal Alzheimer's funding in the future. The Steering Committee represents over 20 organizations that are stakeholders in diagnosis, treatment, and quality of life of people with Alzheimer's Disease and Dementia.

Goals:

- Develop and implement sustainability plan with NDSU School of Pharmacy for the EMTM Rural Rotation and expand the training opportunities and data collection to all fourth-year students.
- Increase the number of DPP and DSME Diabetes Self-Management and Education Program providers that bill the Centers for Medicare & Medicaid Services (CMS) and third-party payers for services to sustain the program.
- Expand chronic disease training opportunities for practicing pharmacists in North Dakota.
- The OHP will assess education and training needs for water operators and provide education to water operators on the importance of water fluoridation.
- Continue to provide toothbrush kits to children in schools.
- Improve and implement sustained process change for medical professionals implementing oral health screening and dental providers implementing screening for elevated blood pressure.
- Complete the Alzheimer's Disease State Plan and apply for funding to implement plan strategies.



SPECIAL HEALTH SERVICES

The Division of Special Health Services (SHS) works to promote a system of care and services that improves the health and well-being of individuals with special health care needs and their families.

Programs and services include:

- Coordinated Services Program
- Financial Coverage Program
- Newborn Screening & Follow-up Program
- Children with Special Health Care Needs System
 Enhancement Program
- Fetal Alcohol Syndrome

Accomplishments:

Coordinated Services Program

- Provided metabolic food and low protein modified food products for about 25 individuals who have phenylketonuria (PKU) and maple syrup urine disease (MSUD).
- Annually supported multidisciplinary clinics coordinating management of chronic health conditions for over 1,000 children resulting in approximately 1,500 clinic visits each year.
- Directly managed statewide cleft lip/palate clinics and provided care coordination services to an average of approximately 85 children annually.
- Administered the Cardiac Care for Children Program to approximately 1,200 children, which provided care coordination and payment for the initial pediatric cardiology examination and routine testing.
- Provided support and technical assistance at the state level to approximately 94 school nurses statewide.

Financial Coverage Program

- Assisted over 650 families with payment for medical services for eligible children, which helped ensure early diagnosis and access to specialty care.
- Administered a special program for children with Russell Silver Syndrome. The program served five children by the end of the biennium by providing increased access to growth hormone treatment, medical food, and expert consultation and management.

Newborn Screening and Follow-up Program

 Established a statewide seven-day per week courier service to ensure timely delivery and processing of newborn screening specimens to the lowa laboratory; thereby, reducing the disparity of screening results that occurred depending on when or where a baby was born.

- Updated the newborn screening brochure to include education on long-term follow-up, critical congenital heart disease and hearing screening.
- Provided long-term follow-up services for children with confirmed disorders (ongoing to age six) for 50 infants.
- Partnered with the ND Early Hearing Detection and Intervention (EHDI) Program to ensure goals and objectives of the ND EHDI Program are supported by the NDDoH through collaboration, linkage to state resources and care coordination for families.
- Provided education and training to providers regarding state mandated screenings that screen newborns for potential conditions that can cause serious illness, disability or death.
- Added spinal muscular atrophy to the state newborn screening panel.

System Enhancement Program

- Provided nine health care transition trainings to over 900 school and health professionals in a year.
- Provided funding to Family Voices of North Dakota to support approximately 1,200 families and 700 professionals through a variety of health information and education center activities, including support of a nearly 150 trainings offered in a year.

Fetal Alcohol Syndrome

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

Goals:

- Provide direct and enabling services to approximately 2,000 children each year.
- Continue providing newborn screening to identify conditions early so that timely treatment and intervention can take place.
- Continue providing education and trainings regarding care coordination, health transition and quality improvement on behalf of individuals with special health care needs and their families.
- Support initiatives that lead to a communitybased 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.

DISEASE CONTROL & FORENSIC PATHOLOGY SECTION

The section formerly known as the Medical Services Section underwent reorganization in July of 2020. The section became the Disease Control and Forensic Pathology Section (DCFP). The changes involved the removal of Laboratory Services Division to become the Laboratory Services Section.

The goal of the DCFP Section is to prevent disease and disability and to assist county coroners and law enforcement in determining the cause and manner of death among North Dakota citizens. The section is responsible for disease prevention, surveillance and identification, as well as epidemiologic investigation and forensic examinations. DCFP now comprises the following divisions:

- Office of the Forensic Examiner
- Division of Infectious Diseases and Epidemiology
- Division of Immunizations
- Division of Sexually Transmitted and Bloodborne Diseases
- Division of Field Services

COVID-19 RESPONSE

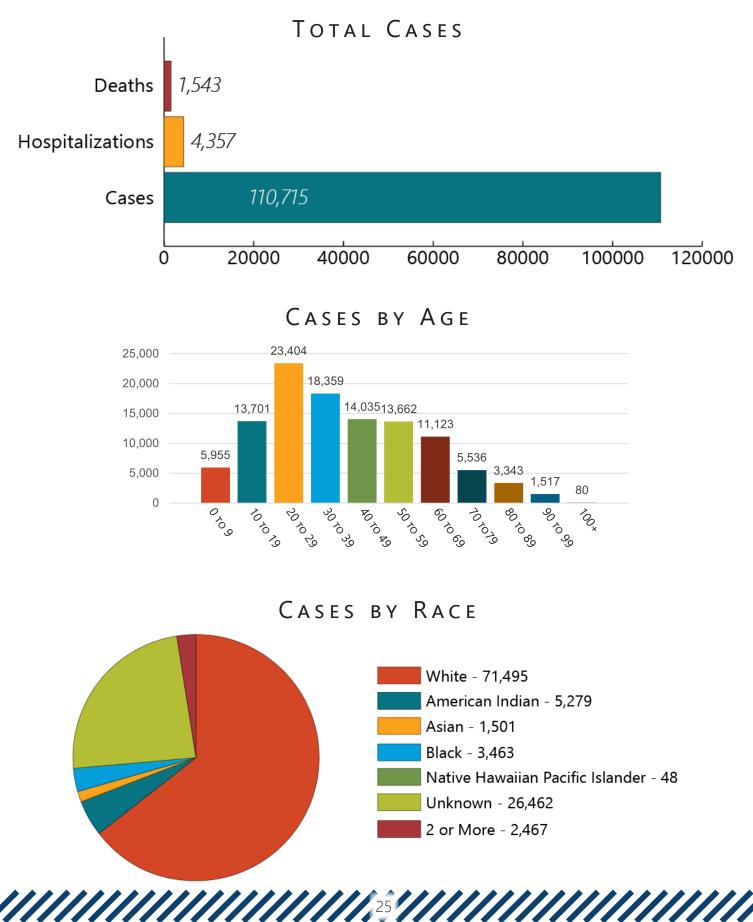
In late 2019, a new coronavirus emerged in Asia. On December 31, 2019, the Chinese government announced that human infections involving the virus would be named SARS-CoV-2, which stands for Severe Acute Respiratory Syndrome Coronavirus. In February 2020, the World Health Organization named the human infection of SARS-CoV-2 "COVID-19." This is the third new coronavirus to emerge to cause human illness since 2003. The first two being the SARS-CoV-1 virus and the Middle East Respiratory Syndrome virus.

Case surveillance definitions were established for disease surveillance. Staffing was expanded to assist with data collection and analysis, case investigations, contact tracing, coordinating vaccinations and providing guidance to schools, childcare centers, businesses and health care facilities. The response was coordinated with multiple state agencies, local public health, schools, businesses, childcare centers and health care facilities, including long term care facilities.

North Dakota's first case of COVID-19 was reported on March 11, 2020. The data in the following tables represents reported cases among North Dakota residents from March 11, 2020 through June 30, 2021.

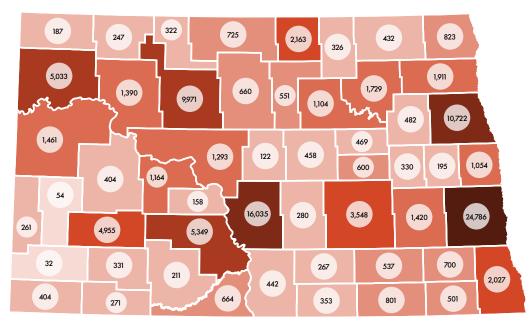
COVID-19 RESPONSE

TOTALS THROUGH 6/30/21



DISEASE CONTROL

CASES BY COUNTY THROUGH 6/30/21



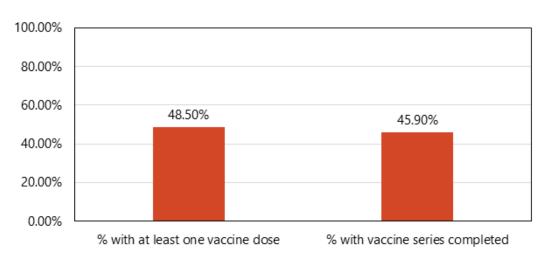
COUNTY	CASES	COUNTY	CASES
A D A M S	271	MCLEAN	1,293
B A R N E S	1,420	MERCER	1,164
BENSON	1,104	MORTON	5,349
BILLINGS	54	MOUNTRAIL	1,390
BOTTINEAU	725	NELSON	482
BOWMAN	404	OLIVER	158
BURKE	247	PEMBINA	823
BURLEIGH	16,035	PIERCE	5 5 1
CASS	24,786	RAMSEY	1,729
CAVALIER	432	RANSOM	700
DICKEY	801	RENVILLE	322
DIVIDE	187	RICHLAND	2,027
DUNN	404	ROLETTE	2,163
EDDY	469	SARGENT	501
EMMONS	442	SHERIDAN	122
FOSTER	600	SIOUX	664
GOLDEN VALLEY	261	SLOPE	32
GRAND FORKS	10,722	STARK	4,955
G R A N T	211	STEELE	195
GRIGGS	330	STUTSMAN	3,548
HETTINGER	3 3 1	TOWNER	326
KIDDER	280	TRAILL	1,054
LAMOURE	537	WALSH	1,911
LOGAN	267	WARD	9,971
MCHENRY	660	WELLS	458
MCINTOSH	3 5 3	WILLIAMS	5,033
MCKENZIE	1,461	TOTAL	110,715

DISEASE CONTROL

In December 2020, the first of three vaccines was authorized by the Food and Drug Administration to prevent COVID-19 and severe outcomes associated with COVID-19. Two additional vaccines were authorized by the FDA shortly after. Two of the vaccines are messenger RNA vaccines, each requiring two doses, and one is an adenovirus vector vaccine which requires one dose. The vaccine was distributed to the states by the federal government. Over 400 vaccinators registered to administer vaccine in the state. Initial groups to receive the vaccine were health care workers and long term care residents, followed by older people, people with high risk medical conditions and those who work in critical jobs. The general public was able to start receiving the vaccine in March of 2020. The vaccines were first available to adolescents and adults 16 years of age or older.

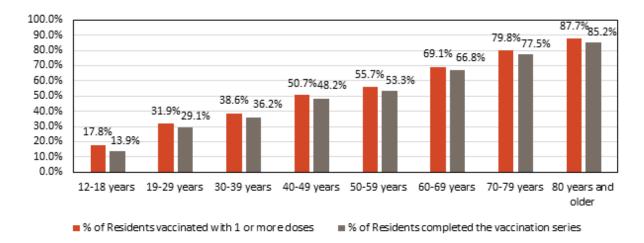
The first doses of vaccine arrived in December of 2020. The following tables describe vaccine administration in the state from December 2020 through June 2021.

Percent of North Dakota residents vaccinated with at least one dose and with a completed primary vaccine series



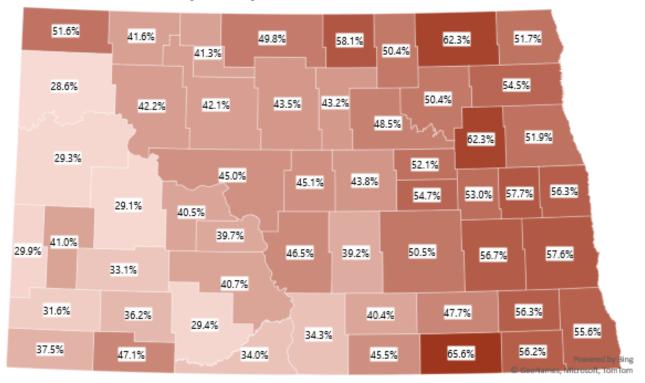
тнгоидн 6/30/21

VACCINATION BY AGE GROUPS THROUGH 6/30/21



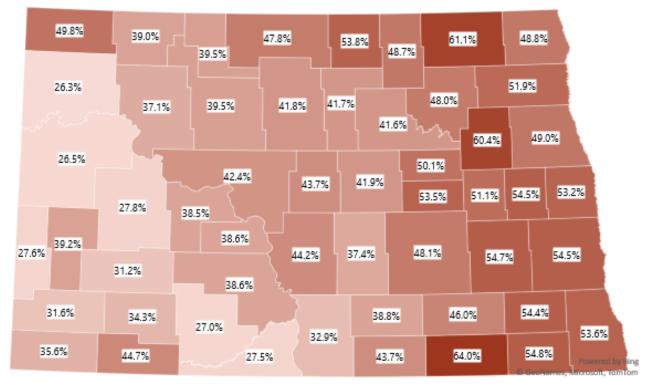
DISEASE CONTROL

VACCINATION BY COUNTY THROUGH 6/30/21



% of ND Residents by County with 1 or more doses of COVID-19 Vaccine

% of ND Residents by county with a completed COVID-19 Vaccination Series

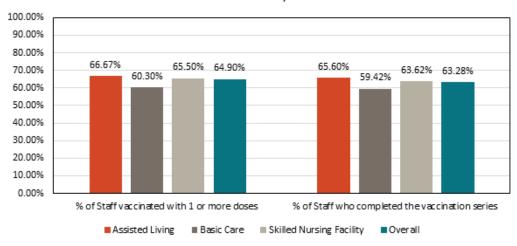


DISEASE CONTROL VACCINATION FOR LTC STAFF/RESIDENTS

COVID-19 as of June 30, 2021 100.00% 98.00% 95.18% 93.78% 94.79% 96.00% 93.41% 93.32% 94.00% 92.54% 92.28% 90.99% 92.00% 90.00% 88.00% 86.00% % of Residents vaccinated with 1 % of Residents completed the vaccination series or more doses ■ Basic Care ■ Skilled Nursing Facilities ■ Overall Assisted Living

Percent of Long Term Care Staff vaccinated against COVID-19

as of June 30, 2021



The SARS-CoV-2 virus undergoes frequent mutations. Although most mutations don't impact how the virus affects people, several virus variants emerged that had genetic characteristics associated with increased ability to escape immunity, be more resistant to available treatments or to be more infectious than previous virus variants. Two new variants emerged that were more infectious than previous versions of virus and quickly became the predominate SARS-CoV-2 viruses in the United States. The first was the Alpha variant, which was first identified in the United Kingdom in September of 2020 and first detected in a North Dakota case that was diagnosed in January of 2021. The second variant, the Delta variant, was first detected in India in October 2020 and was first detected in North Dakota in a case diagnosed in May of 2021. By the end of June 2021, the Delta variant was rapidly becoming the predominant variant virus in the state.

Percent of Long Term Care Residents vaccinated against COVID-19 as of June 30, 2021

DIVISION OF INFECTIOUS DISEASES & EPIDEMIOLOGY

The goals of the Infectious Diseases & Epidemiology Division are to increase disease surveillance and response; build epidemiology and health information systems infrastructure; provide training and education; improve outbreak detection and response; and improve disease reporting systems. The division 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 health care facilities and general outbreak response activities. This division 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. This division also includes management of MAVEN, North Dakota's electronic disease surveillance system.

Accomplishments:

MAVEN surveillance system was used to collect, investigate, monitor and report information for 28,994 cases of reportable conditions. Including COVID-19 investigations, there were a total of 140,887 cases.

- Investigated 63 enteric disease clusters and outbreaks, including 24 multistate outbreaks.
- Conducted 41 on-site infection control • assessments at North Dakota hospital, skilled nursing, basic care, assisted living, and outpatient care facilities and 151 remote infection control assessments.
- Investigated 26 reported outbreaks of influenzalike illness in long-term care, basic care and assisted living facilities, 5 schools and 1 shelter/ group home.
- Investigated a cluster of illness associated with Shiga toxin-producing E. coli (STEC) infection among staff and attendees at a North Dakota childcare facility. Measures to interrupt transmission included testing staff and attendees, excluding those ill, providing education to staff and attendees and on-site technical assistance. Two different serotypes of STEC contributed to the outbreak. Sixteen confirmed cases were identified with an additional 10 individuals identified as probable cases (probable cases did not have laboratory evidence of infection with the outbreak strain).
- Increase training and knowledge capacity on equity, diversity and inclusion.
- Support public, private and community partnerships.

DIVISION OF SEXUALLY TRANSMITTED & BLOODBORNE DISEASES

The Division of Sexually Transmitted & Bloodborne Diseases is 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 health.nd.gov/hiv.

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 37 sites. The services include HIV testing, preand 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 continue the authorization of four syringe service programs in North Dakota. These programs are located in Mandan, Fargo, Minot and Valley City. One additional program in Grand Forks was added in the biennium. These programs served over 1,500 individuals this biennium.
- Provided over 8,000 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 over 380,000 condoms to people at risk • for HIV or other STD infections.

DIVISION OF SEXUALLY TRANSMITTED & BLOODBORNE DISEASES

- 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.
- Held a statewide symposium surrounding HIV, STD, TB and Viral Hepatitis Prevention and Care issues that was attended by over 100 health professionals.
- Entered into a contract relationship with NDSU to provide detailed health care provider education around Sexual Health topics.

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, 2020, there were 500 HIV positive persons reported to be living in North Dakota.

Accomplishments

- Enhanced surveillance system to identify individuals who have fallen out of care or who have not reached sustained viral suppression to link to care services. This has allowed our viral suppression rate to exceed the national average (82% in ND v. 64.7% nationally). While admirable, the impact of the COVID-19 pandemic was evident in that the overall viral suppression rate decreased from the end of 2019 to 2020. Follow-up with individuals who fell out of care determined that they had delayed care due to the pandemic, however most have re-engaged in 2021. The goal established by the Ending the HIV Epidemic strategic plan is 90% by 2030. Viral Suppression is the current desired status for people living with HIV. People who achieve and maintain viral suppression have effectively no risk of sexually transmitting their infection to others.
- Development of an HIV outbreak response plan to work across departments and with stakeholders on the process for responding in the event that an outbreak occurs in North Dakota.

Ryan White Part B Program

The Ryan White Part B Program assists eligible lowincome HIV-positive North Dakota residents in accessing and maintaining health care and supportive services. As of December 31, 2020, there were 254 clients receiving services through the Ryan White program and a total of 336 people were enrolled at some time during the year. This this is a 2% decrease from 2019.

Accomplishments

- Increased the eligibility threshold for clients from 400% Federal Poverty Level (FPL) to 500% based on household size and composition.
- 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. Of the people served by the Ryan White Part B program, 84% had achieved and maintained a status of viral suppression.
- Provided AIDS Drug Assistance Program (ADAP) assistance to 254 people to assure access to antiretroviral medications. Of those, 67 clients received insurance premium assistance who were otherwise ineligible for employer-based insurance, North Dakota Medicaid or Medicare.
- Provided housing assistance to 55 individuals to ensure that over 90% of clients were able to have permanent/stable housing. Housing stability has been shown to have an impact on an individual's ability to stay engaged with the health care process and is a priority for HIV Prevention and Care programs.

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

 Between July 1, 2019 and June 30, 2021, 11,097 cases of chlamydia, gonorrhea and syphilis were reported to NDDoH. Of those, 1,204 were interviewed, from these interviews, over 626 partners were identified for referral into public health for testing and/or treatment. Efforts to engage more individuals with reported STIs were impacted by the COVID-19 response and are expected to return to normal in the next bienium.

DIVISION OF SEXUALLY TRANSMITTED & BLOODBORNE DISEASES

 As of June 30, 2021, 75% of women reported with early syphilis infection were interviewed. From these interviews 81% provided the name of a contact who was able to be contacted by NDDoH. Of those contacts all were either referred for treatment and/or testing.

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 2020, 10 cases of active TB were reported and of those, 7 (70%) were born outside of the United States in countries where tuberculosis is endemic.

Viral Hepatitis Program

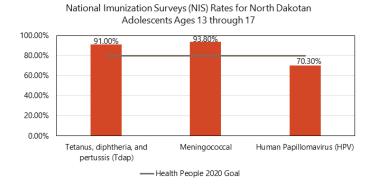
The goal of the Viral Hepatitis Program is to reduce and prevent the transmission of viral hepatitis and associated illnesses, including cirrhosis and liver cancer. Twenty sites are contracted to provide services including testing, counseling, referrals, vaccinations and education.

Accomplishments

- Over 3,050 hepatitis C rapid tests were conducted at Counseling Testing and Referral sites to target people at increased risk for hepatitis C infection between July 1, 2019 and June 30, 2021. This metric was a decrease from the previous biennium due to the redirection of activities to COVID-19 duties.
- Received funding from the Centers for Disease Control and prevention to institute a hepatitis surveillance system which will allow us to better understand the overall prevalence of hepatitis C in North Dakota.

DIVISION OF IMMUNIZATIONS

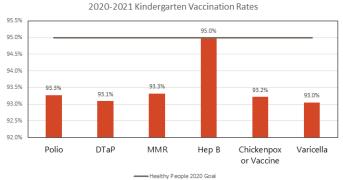
The vision of the Immunization Program is to ensure all North Dakotans are vaccinated and protected against vaccine preventable diseases. The mission of the program is to continue to protect the health of North Dakotans by preventing and mitigating vaccine preventable diseases through immunization, by 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 91.0% of North Dakota adolescents ages 13 through 17 were up-to-date on tetanus, diphtheria and pertussis (Tdap) vaccine; 93.8% for meningococcal vaccine; and 70.3% were up-to-date

for human papillomavirus (HPV) vaccine in 2020. The goal for Healthy People 2020 is 80% for each vaccine.

According to the 2020–2021 school immunization survey, 93.3% of kindergarten students were up-todate for polio, 93.1% for diphtheria/tetanus/pertussis, 93.3% for measles/mumps/rubella, 95.0% for hepatitis B, and 93.2% for chickenpox. Of children entering kindergarten, 3.9% of parents or guardians claimed a religious or personal belief exemption to the school immunization requirements. Healthy People 2020 goals for kindergarten entry immunization rates are 95%. State, county and school-level immunization coverage rates are posted on the immunization program website at https://www.health.nd.gov/ immunize/schools-and-childcare.



DIVISION OF IMMUNIZATIONS

Quarterly immunization coverage rates according to the North Dakota Immunization Information System (NDIIS) for all age groups are posted on the immunization program website at www.health.nd.gov/immunize/coverage-rates

Accomplishments

- Continued interoperability between the NDIIS and provider electronic health record systems.
 - The NDIIS is interoperable with the North Dakota Health Information Network, MAVEN and 463 individual provider sites.
 - More than 80% of all vaccine doses entered into the NDIIS are electronically submitted.
 - Interoperability has increased the percentage of adults with at least one dose in the NDIIS to 100%.
- North Dakota was one of eleven states to receive additional cooperative agreement funding for immunization information systems. Funding was awarded to support development of best practices for IIS for coverage assessment and other programmatic functions; and to help assess state and national coverage using IIS data. Funding was awarded to the NDIIS due to high participation and high quality of data.
- The NDIIS successfully supported all COVID vaccine data reporting with no outages and all functionality available prior to December 2020 when the vaccine campaign began. NDIIS data is used to populate the COVID-19 Vaccine Data Dashboard and provide two public use data sets for COVID vaccination doses administered and coverage rates by age and by county.
- Set up a mass vaccination application, PrepMod, for North Dakota immunization providers to use for scheduling, patient pre-registration and vaccine administration documentation for mass vaccination events. PrepMod was used successfully during the COVID-19 vaccination campaign and will continue to be used for both COVID and non-COVID vaccination events. PrepMod is also electronically connected to the NDIIS and submits vaccination in real-time.
- Contracted with NDSU's Center for Immunization Research and Education (CIRE) to evaluate immunization disparities in North Dakota. Of interest, the CIRE team met with immunization stakeholders to better understand immunization

disparities among children and adolescents on some American Indian reservations. Additionally, the CIRE team evaluated childhood immunization disparities based on mother's country of origin.

- Contracted with CIRE to provide vaccine education to future health care professionals in the state.
 Over 500 students took part in the education, and there was a significant increase in vaccine confidence and vaccine knowledge among participants.
- Published a journal article about immunization coverage rate disparities between white and American Indian children in North Dakota in the Public Health journal.
- Published a journal article on the uptake of Tdap vaccination in pregnant women in North Dakota in the Journal of Public Health Management and Practice.
- Conducted reminder/recall of infants, school-aged children and adolescents who were 30 or more days past due for recommended immunizations or who were coming due for recommended immunizations; 232,880 postcards and letters were mailed to parents during the biennium.
 - Continued collaboration with the Ryan White Program to send immunization reminder/recall letters to Ryan White clients. In the time period between when the letters went out on February 24, 2020 and August 17, 2020, statewide Ryan White client immunization rates improved for all recommended vaccines since the project began. Immunization coverage among Ryan White clients for Td/Tdap vaccine have increased from 59.8% to 90.3%; rates for PCV vaccine have increased from 60.9% to 77.0%; rates for PPSV23 vaccine have increased from 56.6% to 59.0%; rates for MCV4 vaccine have increased from 12.2% to 39.2%; rates for hepatitis A vaccine have increased from 8.5% to 37.1%; rates for hepatitis B vaccine have increased from 22.2% to 46.8%; and rates for HPV vaccine have increased from 6.3% to 95.3%.

DIVISION OF FIELD SERVICES

The Division of Field Services is managed by a staff of six who work across all areas of the section. They assist all divisions in ensuring that disease investigations and personal interviews are done in a timely manner. The field epidemiologists are regionally located within the region they serve. The field regions consist of the following regional hubs; Fargo (SE Region), Grand Forks (NE Region), Jamestown/Devils Lake (Central Region), Minot (NC Region), Bismarck/Mandan (WC Region) and Dickinson/Williston (W Region).

Accomplishments

- Assisted the Office of the State Epidemiologist in chart review of E-cigarette or Vaping useassociated injury (EVALI) when first identified in 2019.
- Field epidemiologist collaborated with LPHU and worked directly with counties on assisting with COVID-19 response.
- Provided disease information and other resources to hospitals and clinics in their respective regions
- Conducted numerous presentations to community organizations on reportable conditions within their respective regions.



OFFICE OF THE FORENSIC EXAMINER

On July 1, 2020, Dr. Barrie Miller assumed the role of the State Forensic Examiner. Dr. Miller earned her medical degree from the University of Minnesota Medical School, completed her residency at the Ohio State University Wexner Medical Center and her forensic pathology fellowship at the Tarrant County Medical Examiner's Office in Fort Worth, Texas. She is board certified in anatomic pathology and forensic pathology. Dr. Miller replaces Dr. William Massello III, who retired June 30, 2019. Dr. Massello served the state for 12 years as the Forensic Examiner and continues to work as needed, assisting when Dr. Miller is not available.

Autopsies are performed by the forensic examiner in Bismarck and by 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 2019-2021 biennium, a total of 923 autopsies were performed by the state of North Dakota. During this time, 244 (26.4%) autopsies were performed at the NDDoH's Forensic Examiner's Office (FEO).
- The FEO performed or had jurisdiction over a total of 244 autopsies for the 2019–2021 biennium. The cause of death is as follows:
 - Accidental: 107 (43.9%)
 - Homicide: 25 (10.2%)
 - Natural: 37 (15.2%)
 - Suicide: 50 (20.5%)
 - Undetermined: 22 (9.0%)
 - Pending Investigation 3 (1.2%)

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.



The Health Resources & Response Section is responsible for the planning and coordination of the public health and medical response to daily emergencies and large-scale disasters.

The section consists of the following divisions:

- Emergency Medical Systems
- Emergency Preparedness & Response
- Health Facilities
- Life Safety & Construction

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, the statewide Trauma System and the Emergency Medical Services for Children program. 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

- ND became the 17th state admitted to the Interstate Commission for EMS Personnel Practice-The EMS Compact. This compact facilitates the everyday movement of EMS personnel across state boundaries to perform EMS duties. It authorizes the state EMS office to recognize EMS personnel licensed in any other compact state immediately.
- The development of revised EMS Operations rules and subsequent endorsement by the Emergency Medical Services Advisory Council (EMSAC).
 Implemented the ravised psychometer skills
- Implemented the revised psychomotor skills

assessment process (the "portfolio process") in all Emergency Medical Technician training programs-a modernized way of testing and evaluating new EMT Basics.

- Pediatric Emergency Care Coordinator Training Manual created and distributed to existing coordinators.
- Advancement of the Cardiac System of Care, including "Acute Cardiac Ready" designation criteria for critical access hospitals with the capabilities to care for a patient experiencing an acute cardiac event.
- Enhancement of the State Stroke System of Care to include up-to-date treatment guidelines of acute ischemic stroke, transient ischemic attack, and stroke triage and transfer.
- Adoption of stroke screening and severity assessment tools; BEFAST and FAST ED and the distribution of BEFAST "badge" guides statewide.
- Distribution of 1550 connected automated external defibrillators (AEDs) to law enforcement agencies throughout the state via a \$4.3 million grant from The Helmsley Charitable Trust.
- The Trauma System of Care provided an airway or

EMERGENCY MEDICAL SYSTEMS

chest tube mannikin for all level IV and V trauma centers in the state for critical skills training.

 All DEMS activities have occurred in the presence of our participation in the statewide COVID response. DEMS staff provided initial leadership within the Department's Operations Center and have continued to support the COVID response.

Goals

- Update the statewide model prehospital care protocols.
- Revise the EMS Personnel rules and develop rules for the Community Paramedic program.
- Combine the EMS Licensure Management System with the Nurse Aid Registry to improve user experience and provide a self-service portal.
- Implement the plan to bolster Pediatric Safe Transport aims in the state by providing pediatric transport equipment and training to ambulance services.

- Implement the Acute Cardiac Ready Hospital designation process, including the statewide cardiac registry to enhance North Dakota's Cardiac System of Care.
- Implement the Cardiac Arrest Registry to Enhance Survival (CARES) in all ambulance services and hospitals in ND.
- Revise the Cardiac Ready Community/Campus Guidelines to be more straightforward and attainable by a community of any size.
- Develop an annual Difficult Airway Course for Providers. This one-day course will include didactic and hands-on learning focused on building airway management skills for providers across the state.

EMERGENCY PREPAREDNESS & RESPONSE

The Division of Emergency Preparedness & Response facilitates emergency planning activities with local public health agencies, tribal nations, hospitals, longterm care facilities, emergency medical services and clinics. The division coordinates and supports emergency preparedness activities across the health care 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. Through contracts with the local public health agencies, the North Dakota Healthcare Association and the North Dakota Long Term Care Association, the division encourages and assists facilities with developing and exercising emergency response plans and integrating their emergency response with the NDDoH emergency operations center.

NDDoH has also coordinated over 450 medical professionals in response to the COVID-19 pandemic, providing coverage for surge staffing in hospitals and long-term care facilities, testing events at long-term care facilities and for the general public and vaccine administration. At this time, NDDoH has provided over 3 million hours of work performed by medical professionals throughout the state.

The State Medical Cache has over 900 emergency response items available for public health and medical disaster response. These items include in part pharmaceuticals such as antivirals, antibiotics; disposable medical supplies such as IV tubing, personal protection equipment; durable medical equipment such as ventilators, defibrillators and major assets such as medical tents, procedure trailers and ambulance buses. These items from the medical cache prevented shortages that were experienced by other states. The NDDoH medical cache has fulfilled 10,864 requests since February 1, 2020.

Since the beginning of the pandemic in North Dakota, NDDoH has completed 12,490 courier missions transporting testing supplies and samples, PPE, vaccine and vaccine supplies and other emergency equipment such as ventilators, medications and blood. Since March 18, 2021, there have been 1,067 vaccine pop-up clinics with 12,127 doses administered throughout the state.

EMERGENCY PREPAREDNESS & RESPONSE

Accomplishments

- Established the State Medical Cache, able to provide personal protective equipment and other medical supplies when the items were not available through world-wide resources/vendors.
- Coordinated more than 450 medical professionals in response to COVID-19 pandemic, establishing resources for gap staffing in health care facilities and provide vaccination and testing support for health care facilities and local public health.
- 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 promotes quality care and services for the people of North Dakota by:

- Licensing hospitals, nursing facilities, basic-care facilities, home-health agencies and hospice programs.
- Conducting certification surveys of all health care 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.

The division licenses the following:

- Nursing facilities 80
- Basic care facilities 64
- General acute, primary care and specialized hospitals 51
- Home health agencies –22
- Hospice programs 13

The division has certification responsibilities for the following:

Long-term care nursing facilities – 79

• Coordinated state-wide communications network with local public health, hospitals and long-term care facilities to support ongoing briefings during COVID-19.

Goals

- Develop a training and exercise program that meets the new federal Centers for Medicare and Medicaid Services exercise requirements.
- Use lessons learned during the COVID-19 response to revise existing response plans to meet emergency response needs of health and medical facilities in North Dakota.
- Hospitals 36 critical access hospitals, 6 general acute hospitals, 2 long-term acute care hospitals, 2 psychiatric hospitals and 1 rehabilitation hospital
- Intermediate care facilities for individuals with intellectual disabilities – 73
- Home health agencies -18
- Hospice programs –13
- Rural health clinics 56
- Clinical laboratories 876
- Ambulatory surgical centers 13
- End-stage renal dialysis units 15
- 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.



HEALTH FACILITIES

The division approves nurse aide training and competency evaluation of 45 programs and more than 80 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

- As part of the COVID-19 Public Health Emergency (PHE), division staff participated in rapid response calls, contact tracing, assisted in the Department Operations Center, participated on stakeholder calls for long-term care, hospitals, and the developmentally disabled population and assisted facilities with COVID-19 test scheduling.
- Division staff completed 100% of the Centers for Medicare and Medicaid Services (CMS) COVID-19 Focused Infection Control surveys in the timeframe established by CMS. In addition, staff completed Focused Infection Control surveys in all basic care facilities and assisted living facilities as directed by the governor.
- Developed a process to allow for registration of temporary nurse aides during the COVID-19 PHE.

Goals

- Complete survey and certification workload as directed by CMS.
- Develop rules for end-of-life facilities and extended stay centers as directed by the legislature.

LIFE SAFETY & CONSTRUCTION

The focus of the Division of Life Safety & Construction (LSC) 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 use of third party plan reviewers to support the LSC staff. Two parties are currently under contract and will begin assisting in larger projects which stretch LSC staff capacity to meet current review requirements.
- During the COVID-19 pandemic, LSC has given a high priority to work with owners, architects, engineers and contractors to develop plans of action for COVID specific patients, ICU units, inspection of satellite facilities, temporary expansion of licensed beds and outdoor visitation options.
- Reviewed and approved 117 construction projects for new facilities, additions, remodeling and installations in hospitals, nursing facilities and basic care facilities.

- Conducted an intensive search to fill two FTE's with professionals trained in health care and fire protection plan review and inspection.
- Implemented legislative requirement to complete initial review of all construction projects of no more than one million dollars within 28 days; more than one million dollars but no more than four million dollars within 42 days; and more than four million dollars within 56 days of receipt of a complete application.

Goals

- Maintain an average Life Safety Code survey interval of 12 months or less for nursing facilities and intermediate care facilities for individuals with intellectual disabilities.
- Develop a methodology to ensure plan reviews are timely and in accordance with state guidelines.
- Support the training of staff and maintain the skills of currently cross-trained staff to assist with the Life Safety Code survey process.
- Reintroduce the publication of our quarterly newsletter which serves as an outreach educational tool for all facilities we survey for life safety compliance.

LICENSURE & CERTIFICATION SECTION

The Licensure & Certification Section consists of three divisions:

- Medical Marijuana
- Food & Lodging
- Vital Records

The Licensure & Certification Section is responsible for the implementation of regulation programs that protect the health and safety of North Dakotans through education and the inspection of licensed establishments. The section also is responsible for the registration and certification of all vital events that occur within the state.

MEDICAL MARIJUANA

The Medical Marijuana Division is responsible for the regulation of the Medical Marijuana Program. Two registered manufacturing facilities, one in Bismarck and one in Fargo, are responsible for all the processing and producing of marijuana. The manufacturing facilities package all products and transport products to reg-istered dispensaries. Eight registered dispensaries are located in the state.

The Medical Marijuana Division is also responsible for the registration of qualifying patients, designated caregivers and agents of the manufacturing facilities and dispensaries. As of June 30, 2021, there were over 5,750 registered qualifying patients (just over 700 individuals were registered as of June 30, 2019). The section consists of the following divisions:

- Food & Lodging
- Medical Marijuana
- Vital Records

Accomplishments

- Registered the maximum number of dispensaries (eight).
- Implemented an online payment option for paying application fees.
- Paid expenses of the program through the fees collected (no general funds).
- Significant increase in the number of registered qualifying patients.

- Process renewal applications for manufacturing facilities and dispensaries.
- Process applications for qualifying patients, designated caregivers and agents in a timely manner.
- Effectively monitor operations of the program.
- Update administrative rules.

FOOD & LODGING

The Division of Food & Lodging is responsible for protecting public health through licensure and inspection of food, lodging and other establishments in North Dakota. Inspection and licensing procedures ensure that these establishments meet sanitation, fire and life safety standards before opening to the public and while in operation. The division provides education in safe food handling, provides consultation and reviews plans for new establishments and extensive remodeling projects, and helps investigate complaints and foodborne illness outbreaks.

The division serves as the FDA's liaison in the state on issues related to manufactured food, adulterated and

misbranded food, and food recalls. By law, through a Memorandum of Understanding with nine individual LPHUs, the NDDoH inspects the establishments LPHUs do not inspect.

The Division of Food & Lodging licenses and inspects:

- 2,396 food establishments
- 104 food processors
- 479 lodging and bed & breakfast facilities
- 601 mobile home parks, trailer parks and campgrounds
- 41 assisted living facilities
- 56 tanning facilities, tattoo and body art facilities, and electrologists



Accomplishments

- Conducted more than 7,200 inspections of licensed facilities.
- Investigated 271 consumer health and safety concerns brought to the division.
- Assisted 547 new establishments in obtaining licensure to operate.
- Fully implemented an electronic license and inspection information management system available to local environmental health programs for no additional cost. The integration of local public health departments to the system has enhanced the ability to share data and align programs.
- Created a web-based search portal making licensed establishment inspection reports readily available online.

• Effectively maintained certification of the FDA commissioned standardization officer to carry out the division's standardization and certification procedure for state and local retail food inspectors ensuring uniform, risk-based inspections.

- Implement cost-effective technology solutions to process data requests and reports more efficiently.
- Improve accessibility to web-based tools which allow operators opening new businesses to initiate license applications and plans submittals online.
- Continue to align regulatory program work with national program standards.
- Provide access to food-safety educational and outreach resources for licensed establishments.

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, divorces and induced terminations of pregnancy. In addition, the division provides certified copies of vital event documents as requested by the public either through the regular mail or through our web ordering application.

Accomplishments

- Our office registered 32,237 certificates of live birth; 16,242 certificates of death; 147 certificates of fetal death; 8,089 marriage records; 3,722 divorce records.
 - There were 16 delayed registrations of births and 365 births that occurred at home or outside a hospital
- Processed over 102,000 requests for more than 238,000 certified copies, record searches, amendments and verifications. The fees collected for providing these services make up the bulk of the division's biennial budget with any remaining fees deposited to the state's general fund.

- Maintain 100% 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.



LABORATORY SERVICES

The Laboratory Services section—also known as the State Public Health Laboratory—includes test capabilities in the areas of bacteriology, mycology, parasitology, immunology, virology, molecular diagnostics, bioterrorism response, water bacteriology and whole genome sequencing. The laboratory personnel are 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 continuing commitment to maintain and develop new technologies and advanced test capabilities considering new and emerging organisms and biothreat agents. In addition, the laboratory provides training and consultation expertise regarding safety and test methodologies to other labs that handle specimens that may contain microbial agents or toxins, known as sentinel laboratories, throughout North Dakota.

Accomplishments

- Scaled to meet COVID-19 test demand from 197 COVID-19 samples per day in March 2020 to 7,500 COVID-19 samples per day in December 2020.
- Received, processed and reported 1,415,509 analytical tests.
- Implemented whole-genome sequencing of SARS-CoV-2. Whole-genome sequencing can map the entire genetic sequencing of a virus which allows for the detection of drift and shift in the genetic code. For example, it can identify and confirm variants that may match variants circulating in other areas of the country and world.
- Validated and confirmed 87 new tests, equipment and procedures.

42

The Laboratory Services Section consists of four divisions:

- Biothreat
- General Microbiology
- Quality Management
- Special Microbiology
- Grew from 18 FTEs and one temporary employee to over 180 team members at the peak of the pandemic response.
- Scaled the distribution program from 150 COVID-19 sample collection devices per day, to over 5,500 per day. This program services more than 858 laboratories and/or facilities.
- Supported an increase in COVID-19 test capacity at two hospital laboratories in North Dakota by providing equipment and reagents – Altru in Grand Forks, ND and Essentia in Fargo, ND.
- Established surge capacity for the detection of SARS-CoV-2 at two alternate laboratories including the UND Medical Laboratory Science program and NDSU Veterinary Diagnostic laboratory.
- Completed several building upgrades and improvements to become more energy efficient and reduce costs. These upgrades were part of the UNESCO project to make the laboratory more energy efficient and included improving lighting, air handling, occupancy sensors and fume hoods (ventilated enclosures where harmful chemicals can be utilized safely). In addition, the laboratory completed a major roof repair, three mobile laboratories were added in the parking lot and a generator was installed and tested to provide emergency power.
- Submitted 315 bacterial DNA fingerprint patterns to CDC's national PulseNet database to assist in nationwide, foodborne outbreak disease detection efforts.
- Submitted 2,386 genetic sequences for SARS-CoV-2 to the following national databases: GISAID and CDC.

LABORATORY SERVICES

- Completed the Clinical Laboratory Improvement Amendments (CLIA) laboratory inspection and recertification process with no noted deficiencies.
- Performed tests for two Legionella and one E coli 0157 (daycare) outbreak investigations.
- Performed approximately 50 Legionella tests for the Casselton Hotel pool and Fargo Broadway Sanford Facility including multiple meetings with CDC and the NDDoH Disease Control & Forensic Pathology Section.
- Completed a (virtual) site visit from CDC for the TB laboratory.
- Obtained recertification for federal testing of dairy products (FDA) and drinking water (EPA).
- Certified three dairy and four EPA laboratories.

- Supported the statewide courier system to transport clinical laboratory specimens from a network of hospitals/clinics/public health units to the laboratory.
- Upgraded the Laboratory Information Management system and implemented a laboratory web portal.

- Expand the Laboratory Response Network
- Expand the functionality of the laboratory web portal



OFFICE OF THE STATE

The Office of the State Epidemiologist (OSE), supervised by 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, government officials and the media.

STATE EPIDEMIOLOGIST

Accomplishments

- Participated in authoring published articles, abstracts and presentations.
- Selected as Chair for the CSTE Surveillance and Policy Committee.
- Selected as Board member for the NDSU College of Health Professions MPH Advisory Committee.
- Collaborated with NDSU School of Public Health Chair on an opportunity to implement and teach a class on Public Health Surveillance.
- Worked with Amazon Web Services, Abilis and Talend on a machine learning influenza project and presented this project to the Surgeon General during his visit to ND.

• Continued collaboration and participation in the COVID-19 response.

Goals

- Improve data collection on substance use for improved surveillance and reporting.
- Continue to work with Special Health Services Division on their newly implemented electronic reporting tool.
- Continue to find opportunities for implementing student workers into the NDDoH workforce.
- Identify better strategies for collecting and reporting racial breakdowns

NON-INFECTIOUS DISEASE SURVEILLANCE & DATA MANAGEMENT

The Division of Non-Infectious Disease Surveillance & Data Management works on initiatives to promote healthy living, identify high risk behaviors, reduce violent deaths and support health equity.

Programs include:

- Autism Surveillance and Education
- Behavioral Risk Factor Surveillance System (BRFSS)
- Chronic Disease Surveillance and Education
- Health Equity Special Projects
- Maternal and Child Health Surveillance and Education
- Opioid/Recovery Projects
- State Systems Development Initiative (SSDI)
- State Capacity Building
- Violent Death Surveillance and Education

This division provides epidemiological support to Family Health and Wellness, Tobacco Prevention & Control, Heart Disease & Stroke Prevention, Diabetes Prevention, Oral Health, Newborn Screening, Special Health Services and other sections and outside agencies/partners.

NON-INFECTIOUS DISEASE SURVEILLANCE & DATA MANAGEMENT

Accomplishments

- Assisted with data procurement, management, reporting and analyses to the NDDoH and Incident/Unified Command during the COVID-19 pandemic.
- Participated in various presentations, conferences and trainings including the State Engagement Meeting for Oral Health, ND Suicide Prevention Coalition 4th Annual Statewide Meeting, and data science and machine learning with Python.
- Completed the first year of data closeout for the National Violent Death Reporting System (NVDRS). Provided monthly preliminary death data to partners for targeted prevention efforts.
- Transitioned the ND Youth Tobacco Survey from paper to being administered online.

Goals

- Modify and expand the Microsoft PowerBI dashboards
- Create public use datasets
- Acquire additional datasets

SPECIAL PROJECTS & HEALTH ANALYTICS

The Division of Special Projects & Health Analytics is tasked with providing analytical support to various divisions, programs and initiatives within NDDoH, through literature reviews, statistical analyses, quality improvement, predictive modeling and data dissemination and/or visualization. Examples of projects include ND COVID-19 Response, ND State Health Assessment, NDDoH Quality Improvement and the ND Pregnancy Risk Assessment Monitoring System.

Accomplishments

- Provided analytical and intelligence support to NDDoH, Incident and Unified Command responses to the COVID-19 pandemic.
- Completed the ND Five-Year Maternal and Child Health Needs Assessment.
- Initiated the ND State Health Assessment.
- Participated in various presentations, conferences, and trainings.

Goals

- Complete a public facing State Health Assessment platform
- Complete county level inequities models for Local
 Public Health Units
- Create a state-specific health professionals access model, expanding on pre-existing HRSA generated tools



The Outreach & Response (O&R) Section was established on June 1, 2020. The section is responsible for assisting with the planning, coordination and implementation of the state's COVID-19 testing strategy and response efforts. O&R collaborates with all sections within NDDOH, the DHS, the Governor's Office, NDIT, NDDES, NDNG, LPHUs and multiple other medical entities and associations to assure that all North Dakota citizens have access to COVID-19 testing and receive their test results in a timely fashion to prevent the spread of COVID-19 and keep our state healthy and safe. The section consists of the following programs or activities:

- Testing Strategy & Planning
- Community Health
- Student Health
- Medical Training & Support
- Resulting & Support

OUTREACH & RESPONSE

Testing Strategy & Support

The state's testing strategy, since the beginning of the pandemic, has been to provide testing to all citizens regardless of symptoms in order to better identify, trace and isolate. O&R works very closely with the state's lab to assure that scheduled polymerase chain reactions (PCR) COVID-19 test numbers remain within our lab's testing capacity. O&R also works very closely with the NDDOH's Department Operation Center to assist testing events with staff and additional resources needed to perform their testing events. O&R assists all entities with the development of a testing strategy to meet their specific needs, by utilizing PCR tests that will be sent to our state lab, MAKO Lab or another state supported lab (NDSU & Altru Health), the use of the rapid antigen BinaxNOW tests or a combination

of both. In May of 2020, O&R began collaborating with NDIT in the development of a software program, Dynamics, for our state to utilize for test registration, linking of specimens and the reporting of results to individuals through e-notification (text message/emails) for short form results or the Citizen Portal for long form results.

OUTREACH & RESPONSE

Accomplishments

- Ranked top in country for testing per capita, multiple times in 2020.
- Assisted with the creation and maintenance of the Testing Event Matrix for the scheduling of testing events across the state. Between April 2020 and June 2021, scheduled nearly 18,500 testing events statewide.
- The BinaxNOW screening program was implemented at the beginning of 2021. To date, there are over 403 entities operational across the state, which includes small & large businesses, community events, medical facilities (hospitals, clinics, eye, dental), EMS agencies, government agencies, law enforcement, daycares and higher education, etc.

Community Health

Community Health works closely with the 28 LPHUs, tribal communities, businesses, clinics, critical access hospitals (CAH), EMS agencies, Federally Qualified Health Centers (FQHCs), the NDDoH Disease Control & Forensic Pathology section, the DHS, and the OSE to assure that testing is available, and events are scheduled appropriately in areas that are identified as having an outbreak or a potential outbreak. O&R also works closely with our vulnerable populations (long-term care facilities, corrections, group homes, homeless shelters and new immigrants, etc.), assisting with developing testing strategies, scheduling of testing events and support resources and facilitating the reporting of timely results; to assure identification, contact tracing and isolation can happen as soon as possible, preventing a devastating spread within their facilities.

Accomplishments

- Assisted with the creation of a statewide testing group which divides the state into eight testing regions with a LPHU or Emergency Manager Lead. NDNG created mobile testing teams to assist LPHUs with their testing efforts in all eight regions, resulting in thousands of successful large testing events across the state in our urban, rural and frontier areas. This collaboration brought together and strengthened our relationships with the LPHUs and tribal communities.
- Assisted with testing efforts to be one of the first states to test the most vulnerable populations on a regular basis (LTC, corrections, homeless shelters, etc.).

 Collaborated with the FQHCs to add additional testing site locations in rural areas during November to January to assist with the increased testing needs of migrant workers needing to return home safely. Our increased testing availability was also appreciated and utilized by our neighboring state's farmers that did not have the testing capabilities for their migrant workers.

Student Health

Student Health has worked closely with the North Dakota University System and private, public and tribal colleges/universities to assist with the development of testing strategies to meet their unique needs to open and remain open during the height of the pandemic. Collaboration with LPHUs, the ND National Guard, ND Department of Transportation and ND Civil Air Patrol to coordinate large testing events and specimen transport for opening day, holidays and for students to continuously participate in athletics and other extracurricular activities.

The program received a grant in April 2021 to assist with the implementation of screening/testing in K-12 schools to reopen and keep schools operating safely. O&R has collaborated with the LPHUs, the Regional Education Association (REA), Department of Public Instruction (DPI), NDDoH School Contact Tracing Team and local leadership/governance boards to provide outreach, information and support to all schools and summer camps in ND and assist each participating school with the development of a testing strategy, identifying staff and supplying resources within their communities, provide testing supplies and training on specimen collection and the reporting software, Dynamics.

Accomplishments

- Between August 10, 2020 to September 5, 2020

 over 100 testing events were scheduled in 28 different towns (on and off campus) across the state specifically held for college students to test at, both prior to the start and during the first week of school.
- With 10,000 plus tests being scheduled a day across the state during this time, scheduled air transport with NDDoT and ND Civil Air Patrol to fly to distant testing locations to pick up specimens and bring to the State Lab throughout the day to prevent a bottleneck of tests received during evening hours, giving the state lab the ability to test continuously 24/7. In addition, some LPHUs and other large testing events specimens were sent to a 3rd party lab in order to accommodate high testing demand and to prevent going over the state's lab capacity.

OUTREACH & RESPONSE

- Developed a new "Close Contact Guidelines" strictly for K-12 schools to utilize that allows students and staff to remain in school as long as they remain asymptomatic, test daily/every other day and have negative results for seven days.
- As of June 2021, there were 49 K-12 schools utilizing rapid antigen for screening staff and/or students.

Medical Training & Support

Medical Training & Support assists with the development of processes, procedures, training modules and training videos for medical and nonmedical individuals for PCR and BinaxNOW testing/ screening models, specimen collection and transport, infectious control, testing supplies and platforms, and Dynamics software. O&R works closely with NDIT on the development of the Dynamics software (test registration, linking of specimens, importing/exporting, reporting and resulting), to assure that NDDoH stays compliant with relevant laws and provides our citizens with the resources they need to register for tests and receive their test results in a timely and efficient manner. O&R assists the Department Operations Center, LPHUs, schools, BinaxNOW screening program participants, etc. with training of medical and nonmedical staff

Accomplishments

- Provided training for 100s of medical & nonmedical individuals assisting with ND testing.
- Trained multiple NCAA athletic trainers, nursing, pharmacy, other medical degree college students to establish sustainable testing staff resources within their facilities.
- Developed training procedures and checklist for Certified Nursing Assistants and Certified Medical Assistants (NDDoH, LPH, K-12 schools) to assist testing efforts with BinaxNOW specimen collections, which will increase trained testing staff greatly throughout ND.
- Developed training criteria for the BinaxNOW screening program participants implemented across the state for medical and non-medical testing/screening models.

Resulting & Support

The Resulting Team was created in March of 2021 to assist citizens with obtaining their long form COVID-19 test results through survey and phone requests for traveling, medical procedures, employers and for general purposes. The Result Line assists all citizens, including foreign language speakers, with result questions and test results. In addition to the survey, O&R collaborated with NDIT to develop a Citizen Portal that launched in June of 2021, that utilizes ND login accounts for individuals to have a record of all their test results and also to have ability to access and track their children's as well.

Accomplishments

 Completed close to 3,000 test requests (surveys, emails & phone calls) from March 2021 to June 2021.

Goals

- To continue to be able to offer free testing and to make testing more available in our frontier and rural areas through increase in testing locations and the utilization of home-based tests.
- Maintain close relationships and continued collaboration with LPH units, tribal communities, vulnerable population agencies and the Disease Control & Forensic Pathology Section to provide a proactive testing strategy and testing availability to all North Dakotans.
- Continue to collaborate with LPHUs, REAs, DPI and school officials to provide outreach & support to all schools with the implementation and sustaining of the COVID-19 screening program, to continue to have a safe environment for in-person learning.
- Strive to continue to provide and sustain testing efforts to keep our citizens safe and healthy by identifying individuals as soon as possible to reduce the spread of COVID-19.
- Continue to assist and train individuals assisting with all testing efforts across the state in order to increase our testing staff resources.
- Continue to assist all citizens to assure that they receive their COVID-19 test results in an efficient and timely manner.

48



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