North Dakota Department of Health

2003 ~ 2005 Biennial Report
North Dakota Department of Health
Biennial Report
2003 to 2005

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# Table of Contents

State Health Officer’s Message ................................................................. 4

A Look at the Department ........................................................................ 5

Organizational Chart ............................................................................... 6

Office of State Health Officer ................................................................. 7

Administrative Support Section ............................................................. 10

Community Health Section .................................................................... 14

Emergency Preparedness and Response Section .................................. 24

Medical Services Section ........................................................................ 27

Health Resources Section ....................................................................... 35

Environmental Health Section ............................................................... 39

Local Public Health Units ....................................................................... 54

State Health Council ............................................................................... 57

Financial Summary ................................................................................ 58

Publications ............................................................................................ 60
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The North Dakota Department of Health (NDDoH) has an awesome responsibility – protecting and safeguarding the health of every North Dakotan. Each day, department personnel work tirelessly to do just that.

From environmental issues to disease outbreaks, public health is on the front lines. Here are just a few of our efforts this biennium to find creative public health solutions for the challenges facing our state:

• The NDDoH provides technical assistance and conducts monitoring activities for the Devils Lake Water Management Plan, which strives to achieve long-term solutions for flooding in the Devils Lake basin.
• The vision of the Healthy North Dakota initiative is healthy people, healthy communities. NDDoH personnel from across the department are working with partners from the state’s health, business, education and government sectors to build a healthy North Dakota for all.
• From West Nile virus to whooping cough to salmonella, disease detectives from the department work hard to identify and contain disease outbreaks. Their efforts to educate the public and track down sources of illness help to protect us all.
• No one knows what the next emergency will be. However, NDDoH personnel are enhancing the capabilities of the state’s public health and medical providers to respond to any emergency, including a terrorist attack or an influenza pandemic.

I am so proud of the work of every public health professional on our Department of Health team. I invite you to read this report and learn more about the goals and accomplishments of the NDDoH during the 2003-2005 biennium.

Terry Dwelle, M.D., M.P.H.T.M.
State Health Officer
Mission Statement

The North Dakota Department of Health is dedicated to ensuring that North Dakota is a healthy place to live and that each person has an equal opportunity to enjoy good health. We are committed to the promotion of healthy lifestyles, the protection and enhancement of health and the environment, and the provision of quality health-care services for the people of North Dakota.

We advance our mission by networking, facilitating local efforts, collaborating with partners and stakeholders, and providing expertise in developing creative public health solutions.

State Health Council

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

Department Overview

The North Dakota Department of Health employs about 300 people dedicated to making North Dakota a healthier place to live.

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

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

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

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

The department logo is a representation of both apples and wheat. An apple is the universal symbol of good health and well-being; the wheat represents the richness of North Dakota’s environment.
June 30, 2005
The Office of the State Health Officer manages the activities of and provides direction and leadership to the Department of Health. The office is composed of the state health officer, the deputy state health officer and Healthy North Dakota.

State Health Officer

The state health officer is appointed by the governor to be the chief administrative officer of the department, as well as a member of the governor’s cabinet. The state health officer implements state laws governing the department within the guidance of the governor and the rules adopted by the State Health Council. In addition, the state health officer is a statutory member of about a dozen boards and commissions. The state health officer also supervises the following projects.

Public Health Training Center

The Public Health Training Center – a cooperative effort among the NDDoH, the University of North Dakota and the University of Minnesota – is designed to improve public health practice in the state through advanced public health education.

Approved applicants receive scholarships through the U.S. Centers for Disease Control and Prevention Bioterrorism Preparedness and Response Grant. Eighteen students have completed or are enrolled in the program, and about 70 percent of the state’s public health workforce have indicated interest in applying.

Research Epi Center

The Research Epi Center is a joint project between the NDDoH and UND designed to improve utilization of health data.

Health scientists are working to ensure that communities, policymakers, health planners and public health agencies have information needed to understand the causes of disease and premature death, to ensure the effectiveness of public health programs and to provide the best health care possible for all the state’s citizens.

Goals of the Epi Center include compiling county-specific health data and analyzing the health status of certain vulnerable populations in the state.

The NDDoH currently is working to expand the project to include other institutes of higher education.

Deputy State Health Officer

The deputy state health officer position was created in 2001 to address administrative policy and practice, allowing the state health officer to focus on medical policy and practice. The deputy also serves as section chief for the Administrative Support Section.

Accomplishments

• Conducted organizational cultural assessment and began process to address employee concerns.

Terry Dwelle, M.D., M.P.H.T.M. State Health Officer
• Completed the following building projects for adequate, safe, ADA-compliant and efficient accommodation of staff:
  * Renovation and addition project for the department’s laboratory facility (occupancy, summer 2004)
  * Negotiation for rental of new building and purchase of equipment for Environmental Health and Emergency Preparedness and Response sections
  * Construction of state morgue (occupancy, spring 2005)
  * Remodeling of Judicial Wing floor space
• Approved grants and contracts of approximately $53 million in funding to numerous local entities and other vendors for provision of public health services.
• Coordinated departmental legislative efforts.

Goals
• Update department strategic plan to include system to ensure attainment of departmental strategic goals and performance standards.
• Continue to secure resources (i.e., funding and staff) necessary to implement initiatives of the department and to comply with state and federal laws.
• Transition relocation of Environmental Health and Emergency Preparedness and Response sections to new facility.
• Provide systems and strategy to ensure program efficiency and effectiveness and compliance with state and federal laws, contract requirements and program guidelines.
• Provide for laboratory triage unit to receive unknown biological and chemical agents.
• Determine and establish system to warehouse health-care data and make it available and usable to guide decisions of policy makers, providers and consumers.
• Develop a performance evaluation system that is clearly linked to departmental strategic goals and objectives.

Healthy North Dakota

In 2002, Governor John Hoeven launched the Healthy North Dakota initiative to provide support, education and encouragement to all North Dakotans seeking to improve their health.

The goal of Healthy North Dakota is to support North Dakotans in their efforts to make healthier choices by focusing on wellness and prevention – in schools, workplaces, senior centers, homes and anywhere people live, learn, work and play. Studies show that focusing on wellness and prevention will result in a healthier population, lower health-care costs and an improved quality of life.

Healthy North Dakota works with partners to promote and implement health-related laws, policies and programs. Currently, the program is composed of more than 400 North Dakotans representing about 150 agencies, organizations and businesses from across the state.
During the 2003-2005 biennium, partners worked in the following focus areas:

• Tobacco use
• Healthy weight – nutrition
• Healthy weight – physical activity
• Health disparities
• Worksite wellness
• Community engagement
• Third-party payers/insurance
• Oral health
• Cancer
• Early childhood
• School health
• Aging
• Immunizations
• Cardiovascular health
• Injury prevention and control
• Diabetes

The NDDoH administers the Healthy North Dakota program, providing resources and coordination supporting the program’s partners. The partners work to identify common strategies to address health issues. This process ensures continuity and coordination and creates a more efficient, cost-effective approach to improving health in the state.

Health and wellness are concerns everywhere – from schools and universities to private businesses to hospitals and nursing homes. Healthy North Dakota strives to ensure the best possible use of funds to improve the health of every North Dakotan.

**Accomplishments**

- Developed process to ensure efficiency and improve collaboration.
- Provided training and ongoing technical assistance to worksite wellness specialists.
- Collaborated with the Indian Affairs Commission on the Tribal/Health State Task Force to examine health issues affecting the state’s American Indian population.
- Coordinated development of worksite wellness nutrition education and incentive program with NDPERS.
- Assisted South Dakota in developing its Healthy South Dakota initiative.
- Participated in the Legislators’ Forum with Minnesota, South Dakota and Manitoba to consider joint public health projects.
- Coordinated development of Healthy North Dakota Highlights, which presents data and recommends health strategies.

**Goals**

- Implement an online communication system.
- Update the Healthy North Dakota website.
- Establish a system to assist businesses with implementing worksite wellness programs.
- Determine efficacy in Healthy North Dakota’s community engagement concept.
- Define and implement operational strategy.
- Determine economic model for long-term sustainability.
- Develop marketing and communication plans and a public policy priorities process.
- Integrate focus area plans into overall state health plan.
The Administrative Support Section provides support services to assist all NDDoH divisions in accomplishing their missions. The section consists of the following:

- Accounting
- Human Resources
- Vital Records
- Public Information
- Education Technology
- Local Public Health
- Information Technology

Division of Accounting

The Division of Accounting provides accounting and financial control records that comply with state and federal requirements. This data is distributed monthly to department managers to help them monitor federal and state grant expenditures, revenue and state appropriations. The division prepares financial reports, reviews grant applications, collects revenue, pays expenses, processes the payroll and submits the department’s biennial budget.

Accomplishments

- Submitted the 2005-2007 biennial budget to the Office of Management and Budget in compliance with the governor’s guidelines.
- Implemented and received training for the new statewide accounting system.
- Provided training programs on federal and state grants and appropriation monitoring.
- Reviewed grant applications that resulted in receipt of about $103 million in federal funding.
- Processed about 1,600 contracts providing funding to a variety of entities for promotion of public health services.

Division of Human Resources

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

Accomplishments

- Assisted in development and implementation of a cultural assessment program that included conducting employee surveys, meeting with employees, and serving on employee and executive steering committees.
- Provided assistance regarding laws, rules, policies and personnel issues.

Goals

- Develop standardized performance evaluation system linked to strategic objectives.
- Continue cultural assessment efforts.
- Continue to provide support and assistance to management and staff.
Division of Vital Records

The two main functions of the Division of Vital Records are registration and certification of vital events that occur in the state, including births, deaths, fetal deaths, marriages and divorces.

Accomplishments

• Registered 18,599 certificates of live birth; 12,468 certificates of death; 98 certificates of fetal death; 8,987 marriage records; 3,809 divorce records; and 110 delayed registrations of birth. More than 152,000 requests for certified copies, record searches, amendments and verifications were processed. The fees collected for providing these services were deposited to the state’s general fund.
• Compiled annual reports using data collected from vital event certificates. Also compiled data for specific requests from the public or other state agencies.

Goals

• Maintain 100 percent registration of all vital events in the state. To achieve this goal, extensive querying and follow-up is done.
• Continue to provide timely responses to requests for certified copies of vital event documents. Individuals now can order copies on the department’s website using a credit card for payment, which simplifies the ordering process.
• Develop electronic birth registration system.

Office of Public Information

The Office of Public Information supports the department’s communication of public health information, policies and resources to the citizens of North Dakota. Duties include coordinating media relations; preparing newsletters, brochures and other materials; coordinating special events; providing or arranging communication training; releasing information through the media; and working with various groups to promote public health.

Accomplishments

• Provided consultation to NDDoH personnel concerning communication issues.
• Provided support to eight regional public health public information officers.
• Developed NDDoH emergency hotline.
• Developed and provided spokesperson training to local public health and NDDoH personnel.
• Served as president of the National Public Health Information Coalition.
• Coordinated redesign of department logo and efforts to brand NDDoH as the leading public health resource in North Dakota.
• Planned and hosted annual statewide public information conference.

Goals

• Complete redesign of department website.
• Assist regional public information officers in developing emergency communication plans for special populations.

Vital Signs

On an average day in North Dakota:
• 22 babies are born; 7 of them are born out of wedlock, 2 are born to a teenage mother and 4 are born by Caesarian section.
• 15 people die, 4 of them from heart disease and 3 from cancer.
• 12 couples are married, and 6 are divorced.

In an average week:
• 1 infant dies.
• 1 person commits suicide.
• 4 people die from diabetes.
• 3 people die from influenza and pneumonia.
• 5 people die as a result of accidents.

In an average month:
• 6 children younger than 20 die.
• 8 people die as a result of motor vehicle accidents.
• 3 babies are born outside of a hospital setting.

The average age at death is 75.9.
Division of Education Technology

The Division of Education Technology uses advanced technology to create and distribute quality public health information, education and training. The division also deploys the Health Alert Network, which provides a secure emergency communications system for public health services.

Accomplishments

• Connected all 28 local public health units to the high-speed communications network (STAGEnet).
• Developed and distributed 250 health alerts, advisories and updates to medical professionals across the state.
• Developed and exercised emergency mobile communications trailer.
• Developed and distributed public health education programs on a variety of topics.
• Conducted National Incident Management System training.
• Equipped all 28 local public health units with video-conferencing equipment.
• Implemented high-speed communications network with video-conferencing services in all North Dakota hospitals.

Goals

• Implement management information system for the NDDoH emergency operations center and integrate the system with the Department of Emergency Services emergency operations center.
• Implement a learning management system.
• Complete full integration of communication systems between local public health units and hospitals.

Office of Local Public Health

The Office of Local Public Health acts as liaison to local public health units and other key public and private partners. The local public health liaison administers the State Block Grant, which provides funding to local public health units, and advises the state health officer about issues related to local public health. In addition, the local public health liaison works with NDDoH staff members to assist public health units during disease outbreaks and natural disasters and with other public health issues.

Accomplishments

• Served on board of directors of the Association of State and Territorial Local Health Liaison Officials.
• Provided information to the legislative assembly regarding the local public health capacity study.
• Completed community engagement train-the-trainer course.
The Office of Information Technology works with information technology (IT) professionals throughout the department to coordinate activities and functions. The office also develops and implements the department’s IT plan; monitors IT budgets; assigns IT staff and support; and monitors the security component of the Health Insurance Portability and Accountability Act (HIPAA).

Accomplishments

- Implemented HIPAA security protecting individually identifiable health information.
- Completed three major IT projects: the Disease Reporting Epidemiologic Assessment and Monitoring System, the Health Alert Network communication system, and the WIC information management system.
- Implemented consolidation of certain IT functions within ITD to comply with a legislative requirement.

Goals

- Assist in development of a community engagement facilitation system to enhance community health improvement.
- Assist local public health units in identifying health-status indicators and develop local public health unit health profiles with web-based accessibility.
- Facilitate the completion of local, tribal and state National Public Health Performance Standards assessment tool and the development of a public health improvement plan.
- Assist public health system partners in defining public health core functions and determining minimum services.
- Create networking system for local health officers.

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Goals

- Integrate technology and data collection throughout the department to ensure efficiency.
- Continue to develop and coordinate IT policies and procedures.
The Community Health Section completed a reorganization process that evaluated and realigned the original two divisions: Health Promotion and Maternal and Child Health. The six newly created divisions are:

- Cancer Prevention and Control
- Chronic Disease
- Family Health
- Injury Prevention and Control
- Nutrition and Physical Activity
- Tobacco Control and Prevention

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

The goal of the section remains to promote health and prevent illness and disease. Local public health units and other partners across the state provide many of these services. Through the reorganization process new alliances and partnerships, both within the section and throughout North Dakota, have resulted in better service to the state’s citizens.

**Division of Cancer Prevention and Control**

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

- Comprehensive Cancer Control Planning
- Women’s Way
- Cancer Registry

**Accomplishments**

**Comprehensive Cancer Control Planning Program**

- Worked to expand membership of the North Dakota Cancer Coalition
- Cosponsored Cancer Coalition Summit to begin work on five-year plan for cancer prevention & control
- Prepared a comprehensive review of data to describe the burden of cancer in North Dakota

**Women’s Way**

- Continued to focus on breast and cervical cancer screening for medically underserved North Dakota women, primarily those ages 40 through 64
- Partnered with local public health units, private health-care providers and a statewide volunteer network to provide screening services to eligible women in every North Dakota county and on every reservation
- Screened more than 7,700 women for breast and cervical cancer, 12 percent of whom were American Indian. Detected more than 90 cases of breast cancer and 600 cases of cervical conditions requiring treatment
- Provided professional development for health-care providers, including clinical trainings, inservice trainings, speaker sponsorship and a symposium
- Expanded Women’s Way Medical Advisory Board to include three
American Indian physicians and two pathologists.
• Collaborated with state Medicaid to pay for breast or cervical cancer treatment for 108 Women’s Way clients.
• Continued working with North Dakotans Partnering for Women’s Health to sponsor two annual women’s health summits.
• Completed American Indian Screening Initiative projects on each reservation. Projects included:
  * Needs assessments and focus groups.
  * Cancer 101 trainings.
• Continued to enhance partnerships, including with organizations such as Healthy North Dakota, the American Cancer Society, Blue Cross Blue Shield, the North Dakota Medical Association and others.
• Maintained Women’s Way volunteer network of more than 900 volunteers who use woman-to-woman and small-group strategies to encourage annual cancer screening.
• Conducted research-based public education and awareness promotions.

Cancer Registry
• Responded to data requests from public health officials, national researchers, the media and the public.
• Supported passage of the North Dakota Cancer Registry authorization law.
• Facilitated ability of one local cancer registry facility to submit data on a real-time basis.
• Submitted data to the Central Brain Tumor Registry, the CDC National Program of Cancer Registries – Cancer Surveillance System, and the North American Association of Central Cancer Registries, earning gold standard certification.
• Participated in an American Indian case ascertainment pilot project.
• Provided training to cancer registrars on new collaborative staging guidelines.

Division Goals
• Publish and distribute a five-year state plan for comprehensive cancer control.
• Begin to implement strategies and activities identified in the state plan.
• Expand partnerships to include less-traditional partners.
• Provide breast and cervical cancer screening services to 3,200 eligible North Dakota women each year.
• Continue to enhance Women’s Way recruitment and screening of American Indian women.
• Continue Medicaid treatment program to ensure Women’s Way clients diagnosed with breast and cervical cancer receive treatment.
• Continue working to obtain cancer data from clinics and independent physician offices.
• Obtain additional data exchange agreements with other states and/or individual medical facilities and expand agreement with Aberdeen Area Indian Health Service to include all North Dakota reservations.

The Women’s Way Program works with partners across the state to provide breast and cervical cancer screening services to eligible North Dakota women.
Division of Chronic Disease

The Division of Chronic Disease works to improve the health and quality of life for North Dakotans who have chronic diseases. Programs in the division include:

• Cardiovascular Health
• Diabetes Prevention and Control

Accomplishments

Cardiovascular Health Program

• Began development of a heart disease and stroke prevention program.
• Recognized and provided funding to 19 communities through the 5 Plus 5 Program. Funding will be used to support increased fruit and vegetable consumption and physical activity levels.
• Collaborated with nutritionists and extension agents to promote 5 A Day for Better Health; provided materials and resources to partners for education and skill-building events.
• Provided funding to 19 Roughrider Health Promotion Conference school teams to implement their action plans.
• Collaborated with the Greater Midwest Affiliate of the American Heart Association to identify communities ready to initiate a Community Heart & Stroke Network. Also provided funding to two communities to pilot local cardiovascular health initiatives.

Diabetes Prevention and Control Program

• Continued the North Dakota Diabetes Care Provider Report, a partnership with Blue Cross Blue Shield that monitors diabetes care; recognized providers achieving high-quality diabetes care with the Diabetes Care Provider Award.
• Partnered with the Dakota Medical Foundation and others to establish a diabetes collaborative with the goal of promoting quality diabetes care in North Dakota clinics.
• Completed assessment of the diabetes public health system in North Dakota based on the 10 Essential Public Health Services.
• Partnered with the Department of Human Services and the Dakota Medical Foundation to provide diabetes education and supplies to communities in underserved areas.
• Formed the Dakota Diabetes Coalition to address diabetes prevention, access, technology and funding.

Division Goals

• Improve chronic disease prevention, early diagnosis and disease management by working with communities, health professionals and health systems in the areas of policy, quality improvement and education.
• Reduce illness, disability and death related to heart disease, stroke and related risk factors through education, policy, systems and environmental changes.
• Collect, organize, analyze and report data from a variety of sources to assess chronic
disease prevalence, incidence and impact, and to evaluate the division’s programs.

• Develop diabetes and cardiovascular health state plans.
• Work to eliminate chronic disease health disparities based on gender, race and ethnicity, income and education, disability, rural locality and sexual orientation.
• Increase awareness and improve diabetes management.
• Increase the number of health centers involved in the diabetes collaborative.
• Increase diabetes prevention activities in North Dakota.
• Increase the number of nontraditional chronic disease partners.
• Improve chronic disease surveillance and evaluation methods.
• Collect and share Healthy People 2010 data with health department programs and state plans.

Division of Family Health

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

• Abstinence-Only Education
• Child and Adolescent Health Services/School Nursing
• Coordinated School Health
• Early Childhood Comprehensive Systems
• Family Planning

• Maternal and Child Health Block Grant (MCH)
• Newborn Screening
• Optimal Pregnancy Outcome
• Oral Health
• Pregnancy Risk Monitoring System
• State Systems Development Initiative
• Sudden Infant Death Syndrome
• Women’s Health

Accomplishments

Abstinence-Only Education Program

• Provided funds to regional and tribal entities abstinence-only education activities, such as:
  * Development of a media campaign.
  * Utilization of the Postponing Sexual Involvement program.
  * Utilization of speakers.
  * Development and distribution of educational materials.

Child and Adolescent Health Services/School Nursing

• Conducted school nursing services survey to determine school nurse-to-student ratio.
• Provided technical assistance and resources on school health issues to the North Dakota School Nurse Organization.
• Provided technical assistance to the Dakota Medical Foundation to support its five-year model school nurse project.

Coordinated School Health Program

• Collaborated with the Department of Public Instruction (DPI) to provide 11 schools
or school districts with technical assistance to support implementation of coordinated school health programs.

- Collaborated with DPI on the 2003 and 2005 Youth Risk Behavior Surveys.
- Cohosted annual Roughrider Health Promotion Conference attended by about 65 school teams that developed school health action plans.
- Supported legislation allowing students to possess and self-administer asthma and anaphylactic medication.

**Early Childhood Comprehensive Systems**

- Received the Early Childhood Comprehensive Systems grant to plan and develop an early childhood state plan.
- Developed *Healthy North Dakota* Early Childhood Alliance.
- Collaborated on providing consultation and educational services for child-care entities.

**Family Planning Program**

- Provided medical, education and counseling services to more than 20,000 North Dakotans.
- Continued services to the James River Correctional Facility and the Cass County Jail and expanded services to Spirit Lake and Standing Rock reservations and the Stutsman County Jail.
- Worked to strengthen collaboration with the Department of Public Instruction in addressing education about sexually transmitted diseases, HIV/AIDS and teen pregnancy.

**Maternal and Child Health Block Grant**

- Awarded contracts for about $1.7 million to 27 local public health units, four nonprofit agencies and four American Indian programs. The funds are used for activities such as the Optimal Pregnancy Outcome Program, well-baby clinics, newborn home visits, car seat safety programs, school wellness activities and oral health care for low-income families.

**Newborn Screening Program**

- Incorporated increased testing of all North Dakota newborns for serious metabolic diseases, including biotinidase deficiency, hemoglobinopathies and other conditions.
- Developed a Newborn Screening Healthcare Guidelines Manual, which outlines responsibilities of all entities involved in screening.

**Optimal Pregnancy Outcome Program**

- Served nearly 1,300 pregnant women.
- Participated in the Partnership for the Prevention and Cessation of Tobacco Use in Women of Reproductive Age.
- Collaborated with the Providers Partnership Project on maternal depression.

**Oral Health Program**

- Formed the Oral Health Coalition to develop and promote optimal oral health strategies.
- Received the State Oral Health Collaborative Systems Grant, which emphasizes collaboration with nontraditional partners and service learning opportunities.
• Supported water fluoridation efforts. North Dakota’s 95 percent fluoridation rate exceeds the Healthy People 2010 goal of 75 percent.

**Pregnancy Risk Assessment Monitoring System (PRAMS)**
• Disseminated the 2003 PRAMS survey results with population-based information and data about women’s experiences before, during and following pregnancy.

**State Systems Development Initiative**
• Worked with the Department of Human Services to coordinate the five-year needs assessment, data collection and data reporting for the MCH Title V Block Grant.
• Developed the North Dakota Birth Defects Monitoring System; published and distributed a summary report of findings.

**Sudden Infant Death Syndrome**
• Continued to provide education and information about sudden infant death syndrome (SIDS) to health-care providers, clinics, birthing hospitals, local public health units, and families who suffer a SIDS death.
• Produced educational materials with information about how to reduce the risk of SIDS, including a brochure and display banner for American Indians and a display banner with information about safe sleeping.

**Women’s Health Program**
• Collaborated with the Center for Excellence for Women’s Health.
• Promoted National Women’s Health Week.
• Supported and participated on the planning committees of five women’s health summits.
• Participated in the Partnership for the Prevention and Cessation of Tobacco Use in Women of Reproductive Age; conducted policy and practice surveys of OB/GYNs, family practice physicians, family planning clinicians, and WIC and OPOP providers.

**Division Goals**
• Promote healthy lifestyle choices through education, awareness and partnerships.
• Decrease the rates of childhood illness and death.
• Increase involvement by males in family health programs.
• Pursue funding for abstinence education.
• Develop school health service guidelines.
• Build education and health agency capacity to implement coordinated school health programs across agencies and within schools.
• Complete the Early Childhood Comprehensive Systems State Plan.
• Reduce the rate of unintended pregnancies.
• Pursue revision of the MCH Block Grant funding formula.
• Increase the number of women receiving prenatal care in the first trimester.
• Continue to provide education to help pregnant women make healthy choices.
• Complete the Oral Health State Plan.

The Newborn Screening Program ensures that all babies born in North Dakota are tested for certain serious birth defects. Early treatment often can prevent serious complications such as mental retardation or even death.
• Work to decrease the number of dental cavities in all populations.
• Continue to coordinated follow-up services for families who suffer SIDS deaths and to provide information and education to healthcare providers, parents and caregivers.
• Pursue additional PRAMS funding.
• Continue collaboration on women’s issues and dissemination of health information.

**Division of Injury Prevention and Control**

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

- Injury Prevention
- Injury Surveillance
- Traumatic Brain Injury
- Domestic Violence/Rape Crisis
- Lead

**Accomplishments**

**Injury Prevention Program**

- Developed interventions to reduce injuries, with special emphasis on children.
- Measured restraint use by children in 10 communities. Results showed that 97 percent of infants and 85 percent of toddlers ages 1 through 5 were restrained. In addition, 78 percent of children ages 6 through 10 were restrained, up from 69.5 percent in 2002.
- Supported changes in the state’s child passenger safety law to require that children younger than 7 ride in a car safety seat or booster seat. Conducted a statewide campaign to inform parents and caregivers about the revised law.
- Conducted child passenger safety courses; certified 86 safety technicians.
- Provided about 3,400 car safety seats for distribution to parents of young children.
- Coordinated or assisted with car safety seat checkups, inspecting 2,057 car seats.
- Assisted the U.S. Consumer Product Safety Commission with product recall effectiveness checks and all-terrain vehicle investigations.
- Coordinated and chaired the North Dakota Adolescent Suicide Prevention Task Force.
- Coordinated development of the North Dakota Injury Prevention Coalition.
- Worked with the Mental Health Association to coordinate suicide prevention activities and to respond to high rates of suicide on Standing Rock Reservation.

**Injury Surveillance**

- Collaborated on development of centralized statewide injury data
- Developed draft state injury prevention plan based on morbidity and mortality data.

**Traumatic Brain Injury Program**

- Collaborated on a statewide assessment of the needs and resources of North Dakotans with traumatic brain injury and their families.
Domestic Violence/Rape Crisis Program
• Funded five centers providing safe places for visitation with and the exchange of children in cases of domestic violence, child abuse, sexual assault or stalking.
• Provided state and federal funds to local agencies that serve victims of domestic violence, sexual assault and stalking.
• Distributed STOP Violence Against Women funds to law enforcement, judicial, victim-service and other agencies that provide services to victims of violence.
• Collaborated on the development of a model law enforcement domestic violence policy.

Lead Program
• Investigated reports of elevated blood lead levels in 64 children younger than 18. Testing confirmed that 21 had elevated levels.
• Coordinated the North Dakota Regional Conference on Lead Awareness.

Division Goals
• Continue working to reduce childhood injuries and deaths, particularly from motor vehicle crashes and suicide.
• Expand the role of the Injury Prevention Program in suicide prevention by seeking state and federal funds to address the high rates of suicide in North Dakota.
• Continue working to reduce domestic violence, sexual assault and stalking crimes through grants, trainings and partnerships.
• Collaborate with North Dakota partners, the CDC and three other states to increase program planning and evaluation to address sexual violence.
• Provide physicians with information about lead poisoning and the recommendations for managing elevated blood levels in children.

Division of Nutrition and Physical Activity
The Division of Nutrition and Physical Activity promotes healthy eating and physical activity in order to prevent and reduce overweight, obesity and related chronic diseases in North Dakota. Division programs include:
• Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
• Maternal and Child Health Nutrition

Accomplishments
Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
• Provided healthy food, nutrition education, breastfeeding support and referrals to more than 48,000 women, infants and children.
• Partnered with Iowa WIC for the planning and implementation of a new web-based information management system.
• Received a research grant from the U.S. Department of Agriculture to study motivational interviewing to change dietary and physical activity behaviors.
• Initiated a peer counseling program for promotion and support of breastfeeding.

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a program for pregnant and breastfeeding women, infants, and children younger than 5. WIC offers healthy food for proper growth and development and helps families choose healthier ways of eating.
**Maternal and Child Health Nutrition**

- Coordinated the Healthy Weight Council with members representing public, private and nonprofit sectors.
- Provided support to local nutritionists for addressing the issues of healthy weight for children, promotion of increased fruit-and-vegetable intake and increased physical activity (5 + 5 community initiatives).
- Coordinated activities of the Healthy North Dakota nutrition priority areas, including breastfeeding, healthy school nutrition and fruits and vegetables.

**Division Goals**

- Increase the percentage of mothers who breastfeed their infants at hospital discharge.
- Increase the percentage of healthy-weight adults and decrease the percentage of obese adults.
- Implement the USDA research study.
- Implement the WIC peer counseling program.
- Support biennial breastfeeding conference.
- Promote implementation of the breastfeeding-friendly hospital procedure.
- Support development of local breastfeeding coalitions.
- Continue to facilitate the Healthy North Dakota Healthy Weight Council.
- Participate in community programs, including development of walking programs and promotion of the 5+5 Program and “low fat milk” campaigns.
- Partner in school environment activities such as the USDA school wellness initiative.

**Division of Tobacco Prevention and Control**

The Division of Tobacco Prevention and Control works to reduce the health and economic consequences of tobacco use and promote tobacco-free lifestyles.

**Accomplishments**

- Hosted conference on Evidence-Based Strategies in Tobacco Control: Making Sense of What Works to assist communities with tobacco use prevention.
- Continued implementation of the Community Health Grant Program that supports tobacco prevention efforts in all 28 local public health units across the state. Funds from the Centers for Disease Control and Prevention also support state and local tobacco control initiatives in local public health units and the four American Indian tribes and one Indian Service Area. Highlights of efforts include:
  * Provided evidence-based tobacco prevention curricula in 300 schools, reaching more than 55,000 students.
  * Continued the statewide public education campaign on secondhand smoke. Post-campaign evaluation indicated increased support for smoke-free environments in schools, entertainment arenas, restaurants and private businesses.
  * Provided tobacco cessation services in more than 60 locations for more than 1,800 individuals.
* Supported tobacco-free school grounds policies in 88 school districts covering more than two-thirds of North Dakota students.
* Supported passage of smoke-free ordinances in four communities – Fargo, West Fargo, Grafton and Grand Forks.
* Supported passage of statewide smoke-free legislation that required all enclosed areas of public places and places of employment to be smoke-free, with a few exceptions.
* Collaborated with local public health units to develop Make It Your Business: A Tobacco-Free Workplace Employer’s Tool Kit to assist businesses in developing tobacco-free worksites.
* Implemented the North Dakota Tobacco Quitline, which provides free counseling to any North Dakota tobacco user interested in quitting. During the biennium, the Quitline served more than 2,300 callers. More than 39 percent of the callers were tobacco free six months after completing the program.
* Developed and implemented a surveillance and evaluation system to track progress in tobacco prevention efforts. The data was used to publish the first Tobacco Prevention and Control in North Dakota: A Status Report of Leading Indicators to report progress and trends in tobacco prevention efforts.
* Conducted the Youth Tobacco Survey in coordination with the Youth Risk Behavior Survey to assess youth tobacco attitudes and behaviors and evaluate tobacco prevention program efforts. According to the YRBS survey, the percentage of North Dakota youth who currently smoke cigarettes significantly decreased from 35 percent in 2001 to 30 percent in 2003.

**Goals**

- Develop a plan to address disparities in tobacco use among specific populations.
- Develop and implement strategies to prevent and reduce spit tobacco use.
- Continue working with North Dakota communities to develop and maintain comprehensive tobacco control programs that follow best practices.
- Continue to promote smoke-free environments to eliminate exposure to secondhand smoke.
- Continue programs to reduce youth and adult tobacco use.

The Tobacco Prevention and Control Program supports efforts to eliminate exposure to secondhand smoke.
Emergency Preparedness and Response Section

The Emergency Preparedness and Response Section works to enhance the preparedness and response capabilities of the state’s public health and private medical providers. The section utilizes federal grants provided to all states for this purpose: the Centers for Disease Control and Prevention grant funds efforts to build the state’s public health infrastructure, and the Health Resources Services Administration grant funds hospital preparedness.

The section works to create and promote a state of readiness and response to protect the health of North Dakotans during catastrophic events, large-scale disasters and emergencies. Efforts include coordinating assessment, planning, response and support services with public health providers, private medical providers, public safety agencies and government officials.

The section integrates emergency preparedness with many other divisions and sections of the NDDoH, including Disease Control, Microbiology, Chemistry, Public Information and Education Technology. In addition, the section chief serves on the governor’s Continuum of Government Committee and the Division of Emergency Services advisory committee. The section chief also provides training and leadership to the NDDoH in incident command.

The following efforts throughout the NDDoH are funded by emergency preparedness grants.

**Emergency Preparedness and Response Section**

**Accomplishments**

- Completed bioterrorism public health and medical plans for the NDDoH; coordinated local public health unit planning efforts.
- Conducted local and regional exercises.
- Developed public health volunteer reserve corps.
- Coordinated completion of NDDoH continuum of government plan.
- Coordinated hospital surge capacity planning.
- Coordinated identification of hospital mass casualty equipment needs; developed mechanism to prioritize, acquire and distribute equipment.
- Completed ambulance and first-responder assessment; coordinated emergency medical services surge capacity planning and training.
- Established inventory system for emergency pharmaceuticals and medical supplies.
- Established protocol and conducted incident command training.

**Goals**

- Increase use and development of interventions for chemical, biological and radiological agents and naturally occurring health threats.
- Decrease time needed to classify health events as terrorism or naturally occurring and to detect and report agents that threaten the public’s health.
- Develop advance registration and credentialing system for clinicians.
• Improve timeliness and accuracy of information reported by clinicians and through electronic early event detection.
• Decrease the time needed to identify causes, risk factors and interventions and to provide guidance during a public health threat.
• Decrease the time needed to restore health and environmental services.
• Establish systems to provide triage treatment and stabilization during a terrorism incident or other public health emergency.
• Ensure adequate decontamination systems.

Division of Disease Control
Accomplishments
• Continued development of a web-based disease reporting and electronic laboratory reporting system (DREAMS).
• Continued development and evaluation of syndromic surveillance monitoring that includes “real-time” monitoring of emergency room visits, poison control calls and health hotline calls.
• Continued update of regional epidemiology response teams to provide coordinated response to outbreaks and other public health emergencies.
• Initiated web-based reporting system for disease contacts.
• Sponsored “Epidemiology in Action” course.
• Integrated animal disease reporting system with the state veterinarian and the North Dakota Veterinary Diagnostic Laboratory.

Goals
• Integrate the state’s major private labs into the electronic laboratory reporting system.
• Develop a “real-time” emergency medical services response reporting system.
• Develop a data analytic module for the disease reporting system (DREAMS).

Division of Microbiology
Accomplishments
• Established testing protocols for samples collected by postal biodetection automated alert systems.
• Evaluated and began upgrading emergency communication system for biosafety level-three laboratories.
• Completed anthrax immunization of biothreat testing team.
• Completed certification of air-flow systems in all biosafety level-three laboratories and the Division of Microbiology laboratory.

Goals
• Develop respiratory protection plan and fit-test all laboratory staff.
• Bar code and distribute new biological/chemical agent transport kits.

Division of Chemistry
Accomplishments
• Developed protocols and procedures for potential chemical terrorism events.
• Provided training about shipping chemical specimens.
• Established the health emergency laboratory personnel corp for response to address surges in critical needs testing.
• Redesigned the biological/chemical agent transport kit to function as an all-hazard transport kit.
• Expanded laboratory capacity to include testing of human urine for metals in a chemical terrorism event.

Goals
• Continue to develop and update the chemical terrorism laboratory component of the state’s public health emergency preparedness and response plan.
• Continue partnership with the Division of Microbiology and the health emergency laboratory personnel corp.

Office of Public Information
Accomplishments
• Conducted spokesperson training.
• Provided support to eight regional public health public information officers.
• Coordinated development of guidelines for communicating with special populations.
• Translated emergency information into seven languages spoken by certain special populations in the state.
• Developed and distributed newspaper insert with emergency response information.
• Developed NDDoH emergency hotline.
• Hosted annual crisis emergency risk communication conference.

Goals
• Complete local and regional emergency communication plans for special populations.
• Coordinate communication planning with key partners from across the state.

Division of Education Technology
Accomplishments
• Connected all 28 local public health units to the high-speed communication network (STAGEnet).
• Developed and distributed health alerts, advisories and updates to health and medical professionals across the state.
• Developed and exercised mobile communications trailer.
• Conducted incident management training.
• Equipped all 28 local public health units with video-conferencing equipment.
• Implemented high-speed communications network in all North Dakota hospitals.

Goals
• Implement information management system for the NDDoH emergency operations center; integrate system with Department of Emergency Services EOC.
• Implement a learning management system.
• Complete integration of local public health and hospital communication systems.
The Medical Services Section

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

The section includes the following:
- Field Medical Officers
- Disease Control
- State Epidemiologist
- Microbiology
- Forensic Examiner

Field Medical Officers

The field medical officers provide medical direction and support to programs throughout the NDDoH. Areas of emphasis include the health aspects of environmental pollution, newborn metabolic screening, disease control, immunizations, infant mortality, adolescent suicide, cancer cluster investigations, bioterrorism, long-term care, emergency medical services and the Children’s Health Insurance Program.

Accomplishments
- Provided consultation to NDDoH sections about health-related programs, projects and patient-care issues.
- Improved communications between the NDDoH and private physicians and clinics.
- Provided a variety of continuing medical education sessions on public health issues.
- Collaborated on development of a public health training program in conjunction with the University of Minnesota.
- Provided pediatric consultation services for the tracking program and Indian Health Service clinic at Spirit Lake Nation.
- Provided web-based training for school asthma and allergy action plans.

Goals
- Continue to provide clinical consultation support to NDDoH divisions.
- Provide consultation support for divisional clinical protocol development.
- Continue to provide presentations, as well as education and dialogue forums, at medical meetings.
- Continue to provide direction and support during disease outbreaks.
- Continue to provide other special clinical insight and consultation for NDDoH committees.
- Develop policy initiatives to address health-care disparities.

Division of Disease Control

The Division of Disease Control identifies and analyzes disease trends and implements appropriate intervention activities to reduce illness and death. The division also acts as a resource for health-care providers and the public regarding public health issues and often

The Medical Services Section works to safeguard all North Dakotans from diseases such as West Nile virus and influenza.
works with the media to provide timely public education.

Programs within the division include:
- Epidemiology and Surveillance
- HIV/AIDS
- Immunization
- Sexually Transmitted Diseases
- Tuberculosis Control

Health-care providers and laboratories statewide notify the division of mandated reportable diseases. During the biennium, division personnel investigated about 2,300 cases of reportable conditions. In addition, division personnel work closely with private health-care providers, health-care facilities, local public health units and the public to reduce the incidence of communicable diseases and to help ensure the public health of North Dakotans.

**Division Accomplishments**

- Participated in national investigation of perinatal-related West Nile virus.
- Continued to develop regional epidemiology response teams for disease outbreaks and other public health emergencies.
- Investigated seven outbreaks of gastrointestinal illness involving more than 400 people, of whom more than 100 were ill.
- Investigated a foodborne illness outbreak at a school involving about 240 students.
- Supported legislation that was passed to clarify procedures for blood-borne pathogen exposure of public safety workers.

- Investigated an outbreak of pertussis.
- Implemented syndromic surveillance utilizing data from six emergency departments and one ask-a-nurse calling center.
- Implemented the web-based disease reporting and electronic laboratory reporting system.

**Epidemiology and Surveillance Program**

The Epidemiology and Surveillance Program works to strengthen collaboration between epidemiology and laboratory practices through the CDC Epidemiology and Laboratory Capacity Grant. The goal of this program is to increase surveillance and response; build epidemiology and laboratory infrastructure; provide training and education; and increase reporting systems.

**Accomplishments**

- Increased hepatitis services by employing a hepatitis coordinator; conducted survey of North Dakota physicians to determine hepatitis education needs.
- Developed hepatitis website.
- Continued seasonal influenza sentinel physician network and implemented year-round influenza syndromic surveillance network.
- Collaborated with level-A laboratories to conduct surveillance for influenza and respiratory synctial virus (RSV).
- Enrolled eight regional schools to report absenteeism and enlisted long-term care facilities to increase reporting of influenza-like illness outbreaks.
- Developed draft pandemic influenza plan.
• Continued collaboration with statewide agencies for influenza campaign planning.
• Collaborated with U.S. Department of Agriculture wildlife services to expand bird monitoring to include sentinel chicken flocks; collaborated with the North Dakota State University Veterinary Diagnostic Laboratory on testing of equine and avian samples.
• Collaborated with local youth groups to distribute West Nile virus brochures and mosquito repellent wipes at local functions.
• Developed West Nile virus-prevention television and radio messages, posters and brochures, including tribe-specific brochures for each reservation.
• Provided mosquito repellent wipes for distribution at community functions.
• Identified and investigated 637 West Nile virus cases.
• Purchased servers for DREAMS project.

**Accomplishments**

• Completed annual comprehensive HIV Prevention Plan in collaboration with the North Dakota Community Planning Group.
• Collaborated with the Hepatitis Program to implement pilot study of proportion of pregnant women who receive hepatitis and HIV screening during pregnancy.
• Implemented a quality assurance program for the HIV counseling and testing sites.
• Began offering prevention case management services for people at high-risk of transmitting or contracting HIV.
• Implemented release of the CDC’s Program Evaluation Monitoring System to document NDDoH activities and to provide a standardized, confidential data collection system.

The mission of the **HIV Surveillance Program** is to monitor the disease through surveillance activities and HIV incidence and prevalence studies. The data collected by the program focuses policy and resource allocation.

North Dakota continues to have the lowest incidence and prevalence of HIV/AIDS in the nation; through June 30, 2005, a total of 351 HIV infections have been reported in the state.

**Accomplishments**

• Participated in the Interstate De-duplication Evaluation Project to evaluate case duplication in the national HIV/AIDS data base.
• Enhanced HIV case surveillance with the addition of CD4 test results to the state’s reportable conditions list.

**HIV/AIDS Programs**

The mission of the **HIV/AIDS Prevention Program** is to reduce and prevent the transmission of HIV and to reduce the associated illnesses and deaths of HIV-infected people. HIV prevention services are conducted at 25 contractual sites, including local public health units, family planning clinics, college/university student health centers, substance-abuse treatment centers and community action agencies. The services include HIV testing, pre- and post-test risk-reduction counseling, partner notification, referrals, education and case management.
The **Ryan White Care Program** helps low-income HIV-positive residents access and maintain health-care and supportive services. Available services include case management; assistance with purchasing drugs; and assistance accessing primary medical services.

**Accomplishments**
- Expanded client access to case management and supportive services through partnerships with community action agencies.
- Observed a 32 percent increase in the number of HIV-positive North Dakotans participating in the program.

**Immunization Program**

The role of the Immunization Program is to ensure that children and adults are protected against vaccine-preventable diseases. Program staff also investigate suspected and confirmed cases of vaccine-preventable diseases and conducts influenza surveillance.

Vaccine coverage levels for North Dakota children remain high. The National Immunization Survey estimates that 82 percent of children ages 19 months to 35 months were up to date on their immunizations. The goal for Healthy People 2010 is 90 percent.

**Accomplishments**
- Implemented mandatory varicella (chickenpox) vaccinations.
- Hosted visit by Rosalynn Carter and Betty Bumpers from Every Child by Two, a national nonprofit organization that promotes childhood vaccinations.
- Responded to a 2004 pertussis outbreak with 757 reported cases; recommended acceleration of infant vaccination.
- Promoted and supplied influenza vaccine for all children ages 6 to 23 months.
- Responded to influenza vaccine shortage during 2004-2005 season; worked with local public health and private health-care providers to ensure vaccination of high-risk individuals.

**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.

**Accomplishments**
- Continued to provide free chlamydia, gonorrhea and syphilis medication for infected people and their partners unable to pay.
- Continued to provide free examinations, testing and counseling in five North Dakota cities for chlamydia, gonorrhea and syphilis to patients who are at risk and unable to pay.
- Screened more than 30,000 females and 5,900 males for chlamydia through the Region VIII Infertility Prevention Project.
- Observed a 42 percent increase in chlamydia testing.
• Contacted 3,327 sexual partners of people diagnosed with chlamydia, more than one-fifth of whom were diagnosed with the disease.

**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.

TB continues to be a disease of low incidence in the state, with the number of cases ranging from four to six each year from 2000 through 2004.

**Accomplishments**

• Produced *Epidemiological Report on Tuberculosis* with information about TB activity in the state, treatment or infection-control guidelines, policy changes and laboratory information.
• Developed TB control and elimination plan and a TB outbreak response plan.
• Employed a training designee to coordinate and conduct statewide TB training.
• Began participation in the CDC’s TB Genotyping program. The program is designed to link TB cases within and among states and to detect outbreaks, identify testing and intervention needs, and monitor progress in elimination of TB transmission.

**Division Goals**

• Continue to provide quality public and provider health information and education.
• Increase utilization of the immunization registry for better monitoring of vaccinations.
• Maintain high vaccination-coverage levels.
• Increase adolescent vaccination services.
• Increase STD screening of high-risk people.
• Implement innovative STD educational messages.
• Continue progress toward eradication of tuberculosis in North Dakota.
• Continue to provide screening support of people at increased risk of tuberculosis.
• Continue improved reporting of communicable diseases.
• Improve communication between NDDoH and local public health units during West Nile and influenza seasons.
• Increase education efforts to improve influenza vaccination rate of health-care workers.
• Develop and implement targeted HIV testing programs in high-risk populations.
• Continue to increase community-based HIV intervention activities.
• Increase HIV testing in nontraditional sites for high-risk residents.
• Continue to increase identification and reporting of HIV cases.
• Increase number of HIV-positive residents accessing primary health care.
• Ensure client access to a full range of HIV medications.
**State Epidemiologist**

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

**Accomplishments**

- Coordinated epidemiology and surveillance program for CDC bioterrorism grant.
- Assisted in coordination of full-time CDC Epidemic Intelligence Service officer.
- Initiated development of a web-based contact tracing and sexually transmitted disease reporting system.
- Conducted numerous presentations about bioterrorism and other public health issues.
- Participated in public health response to suspicious powder incidents.
- Participated in special surveillance programs for Lewis and Clark Signature Events.

**Goals**

- Complete development of DREAMS with public and private health-care providers.
- Provide epidemiological assistance to the department.
- Provide timely epidemiological response for health-care providers and the public.

**Division of Microbiology**

The Division of Microbiology (the Public Health Laboratory) provides diagnostic and regulatory services to physicians, health-care facilities, local public health units, veterinarians, state and federal agencies and the public. The laboratory performs testing in the areas of bacteriology, mycology, parasitology, immunology, virology, molecular diagnostics, aeroallergens, and dairy and water bacteriology.

The division is responsible for providing rapid detection and identification of pathogens that may threaten the public’s health. The division is committed to expanding testing capabilities to ensure timely responses to outbreaks, whether caused by newly emerging diseases or bioterrorism threats. In addition, the division provides training and consultation regarding testing methodologies and safety.

**Accomplishments**

- Implemented laboratory information management system (LIMS) linking laboratory analytical systems directly to the LIMS data base.
- Tested more than 4,000 specimens during a 2003 West Nile virus outbreak.
- Tested more than 7,000 specimens during a 2004 pertussis outbreak.
- Developed laboratory website with online ordering and centralized information.
- Enhanced the North Dakota Laboratory Response Network (NDLRN), a network of laboratories trained to recognize and/or rule out biological and chemical threats.

**Microbiology Testing**

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<tr>
<th>Category</th>
<th>Number of Tests</th>
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<tr>
<td>Dairy Products</td>
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<tr>
<td>HIV</td>
<td>35,986</td>
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<tr>
<td>Tuberculosis</td>
<td>29,580</td>
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<tr>
<td>Mycology/Legionella</td>
<td>1,449</td>
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<tr>
<td>Parasites</td>
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<td>Hepatitis A, B, C</td>
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<td>Rabies (human exposure)</td>
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<tr>
<td>Shiga Toxin</td>
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<td>STDs</td>
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<tr>
<td>Virology/Immunology</td>
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<tr>
<td>Water Analyses</td>
<td>16,000</td>
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<td>Aeroallergens</td>
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<td>Bacterial/Biothreat</td>
<td>27,312</td>
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<tr>
<td>Mosquito Surveillance</td>
<td>3,204</td>
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<td><strong>Total</strong></td>
<td><strong>260,542</strong></td>
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</table>
The role of the state forensic examiner is to provide medical examiner services to county coroners and law enforcement officials in the investigation of sudden and unexpected deaths in North Dakota. Once a case has been referred to the state forensic examiner, the body is brought to Bismarck for an autopsy. 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.

Goals

- Complete integration of the STAR LIMS system with the North Dakota DREAMS project, a national electronic disease surveillance system.
- Begin electronic reporting from all areas of the laboratory using the STAR LIMS system.
- Complete development of new division and NDLRN websites.
- Develop a respiratory protection plan and fit-test all laboratory staff.
- Develop a new directory of services and conduct a customer satisfaction survey.
- Develop genetic sequencing capabilities for identification of bacterial isolates.

State Forensic Examiner

The role of the state forensic examiner is to provide medical examiner services to county coroners and law enforcement officials in the investigation of sudden and unexpected deaths in North Dakota.

In the spring of 2005, the Office of the Forensic Examiner moved into the newly constructed morgue facility located at 2639 East Main Ave., Bismarck, N.D.
**Accomplishments**

- Accepted 440 cases during the biennium; performed autopsies and examinations.
- Provided education statewide to law enforcement officers, county coroners and other agencies involved in death investigations.
- Participated in the North Dakota Child Fatality Review Panel, the Mass Fatalities Incident Response Course and the National Disaster Medical System.
- Received referrals of cases from all geographical areas of the state, with local county coroners responding very favorably to availability of forensic examiner services.
- Developed and completed construction of permanent morgue facility.

**Goals**

- Pursue adequate number of staff to handle the caseload.
- Continue to provide educational activities for county coroners, law enforcement officers and other officials involved with death investigations.
- Continue to perform duties and to provide vital information to county coroners, law enforcement personnel, public health officials and families of the deceased in an effective, timely and courteous manner.

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**Coroner Referrals**

**2003–2005 Biennium**

**Manner of Death**

- **Suicide**: 23%
- **Accident**: 34%
- **Natural Causes**: 36%
- **Homicide**: 5%
- **Undetermined**: 2%

*440 total cases; two examined with no autopsy*
The Division of Health Facilities strives to ensure that the buildings, equipment and staff of North Dakota’s inpatient care facilities and outpatient programs provide services consistent with generally accepted practice and meet applicable standards.

Licensure responsibilities:
- General acute, primary care and specialized hospitals – 51
- Nursing facilities – 83
- Home health agencies – 28
- Hospice programs – 15
- Basic care facilities – 57
- Electrologists and electronic hair removal technicians – 23

Certification responsibilities:
- Long-term care nursing facilities – 83
- Hospitals, including swing beds and general acute services – 47 general acute care and critical access hospitals; four specialized hospitals
- Intermediate care facilities for the mentally retarded – 71
- Home health agencies – 28
- Hospice programs – 15
- Rural health clinics – 64
- Clinical laboratories that are state surveyed – 74
- Ambulatory surgical centers – 17
• End-stage renal dialysis units – 14
• Portable X-ray units – 1

Staff members conduct periodic surveys to determine compliance with state licensure requirements and federal certification Conditions of Participation contained in Title XVIII (Medicare), Title XIX (Medicaid) and CLIA of the Social Security Act. In addition, the division is responsible for investigating quality-of-care complaints.

The licensure and certification surveys are conducted by surveyors who represent a wide range of professional disciplines, including certified lab technicians, licensed social workers, licensed registered dietitians, registered nurses, physical therapists, occupational therapists, qualified mental retardation professionals and fire safety surveyors.

The nurse aide training and competency evaluation programs provide for state approval of nurse aide training programs in order to be consistent with federal certification requirements for long-term care facilities.

Accomplishments
• Convened the Long Term Care Advisory Committee consisting of representatives from the long-term care community.
• Conducted several workshops in conjunction with the state’s provider associations. The workshops focused on care-related services identified through the survey process.
• Continued to assist rural hospitals with the critical access hospital designation, which allows greater flexibility in the use of nursing and medical staff, as well as a more favorable Medicare reimbursement process.
• Added a paid feeding assistant program to assist with nourishment and hydration of dependent long-term care residents.
• Awarded loan repayment dollars to five dentists through the Dental Loan Repayment Program.
• Established 19 foreign physicians in North Dakota workforce shortage areas through the J-1 Visa Waiver Program.
• Awarded loan repayment dollars to one physician and one physician assistant to work in underserved areas.
• Awarded $489,500 in grants to 83 long-term care facilities to support scholarship or loan-repayment programs for employees.

Goals
• Maintain the average survey interval of 12 months or less for long-term care facilities.
• Address complaints in a manner consistent with federal and state guidelines.
• Ensure that new surveyors receive adequate training to pass the national Surveyor Minimum Qualifications Test on the first attempt.
• Conduct hospital surveys every three years.
• Certify critical access hospitals as permitted by the federal Rural Hospital Flexibility Act.
Division of Emergency Medical Services

The Division of Emergency Medical Services is the lead agency for North Dakota’s Emergency Medical Services (EMS) System. The division conducts the following activities:

- Annually licenses 139 ground ambulance services that meet standards for service availability, equipment and training.
- Updates and maintains training, testing and certification programs for EMS advanced life support and basic life support personnel, including emergency medical technicians and paramedics.
- Administers an EMS grant program of about $470,000 per year for training ambulance service personnel.
- Provides technical assistance to EMS services regarding patient care issues, as well as system design, administration and operation.
- Maintains a data system that contains about 20,000 EMS certification records.
- Maintains an ambulance run data system that adds about 48,000 records per year.
- Provides critical incident stress debriefing services to law enforcement, fire and EMS personnel engaged in EMS.
- Coordinates and maintains Emergency Medical Services for Children Program.
- Provides continuing education to emergency medical services through distance learning and videotape presentations.
- Implements and maintains a statewide trauma system.
- Reviews and approves continuing education curricula.

Accomplishments

- Trained, tested and certified about 2,100 new personnel and 3,000 existing personnel. Courses included First Responder, Emergency Medical Technician-Basic, Emergency Medical Technician-Intermediate and Emergency Medical Technician-Paramedic.
- Provided licensing and inspection services for 143 ambulance services.
- Conducted distance learning through a videotape-based library system that provides continuing education material to 250 sites.
- Provided 56 critical incident stress debriefings to EMS personnel; conducted training for about 487 EMS providers in healthy stress-coping techniques.
- Maintained a trauma system that designates 34 trauma centers, develops trauma transport plans, maintains a trauma registry and trains EMS and trauma center personnel.
- Conducted emergency medical services for children programs that trained 237 EMS providers in caring for pediatric patients.

Goals

- License EMS training institutions; require standards that ensure high-quality training.
- Implement strategies that attempt to minimize the adverse impact of several negative factors on the state’s EMS system. These factors include reduced population, greater concentrations of older citizens, a reduction
in the level of volunteerism, and inadequate reimbursements. Strategies include the following:

* Implementation of grant dispersal policies that focus on the most vulnerable ambulance services.
* Revision of licensure requirements to facilitate regionalization of EMS services.
* Development of quick-response units to replace struggling ambulance services, when appropriate.

Division of Food and Lodging

The Division of Food and Lodging is responsible for protecting public health through licensing and inspection of 755 restaurants, 405 bars and limited restaurants, 411 lodging facilities, 503 mobile-home parks and campgrounds, 79 bed-and-breakfast facilities, 558 retail food stores, 47 meat markets, 21 bakeries and 52 assisted-living facilities. Inspection procedures ensure that these licensed establishments meet both sanitation and certain fire/life safety standards before opening to the public and while in operation.

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

The division serves as the U.S. Food and Drug Administration’s (FDA) liaison in the state on issues related to manufactured food and pesticide residues in food.

Accomplishments

- Conducted more than 5,000 inspections of licensed facilities.
- Reviewed and updated mobile-home park, trailer park and campground rules.
- Provided foodborne outbreak investigation training.
- Updated memorandums of understanding with local public health units.
- Formed the statewide Food Security and Safety Task Force.

Goals

- Continue to standardize local public health unit inspector procedures.
- Update state food code for uniformity with 2005 FDA food code.
- Post inspection results for various facilities on department website.
- Establish new annual license fees through the administrative rules process.
The Environmental Health Section's five divisions work closely with the federal Environmental Protection Agency (EPA), special interest groups, local governments and the citizens of the state to safeguard the quality of North Dakota's air, land and water resources. Staff members deal with issues that affect the comfort, health, safety and well-being of all North Dakota citizens and their environment. Enforcement of state and federal environmental laws is accomplished through permitting, inspecting, sampling, analytical services and monitoring activities.

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

The Environmental Health Section consists of the following divisions:
- Chemistry
- Air Quality
- Waste Management
- Municipal Facilities
- Water Quality

Division activities are coordinated by the section chief's office. Employees in this office oversee quality assurance procedures; help coordinate public information and education efforts; and coordinate computer and data management activities, environmental emergency response efforts and funding requests.

The section's role in the initial response to an environmental incident is one of support to local responders and the Division of Emergency Services. The section customarily takes the lead role in post-emergency environmental cleanup activities.

The section chief's office coordinates the annual state/EPA agreement, which defines the scope of environmental program responsibilities and commitments made by the section and the EPA.

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

The section chief's office also includes a small business ombudsman. The ombudsman serves as an advocate for small businesses in need of assistance to understand and comply with environmental laws and rules.

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

The Environmental Health Section protects the public's health by safeguarding the quality of North Dakota's air, land and water resources.
Division of Chemistry

The Division of Chemistry provides analytical services to a variety of environmental protection, public health, agricultural and petroleum regulatory programs and laboratory certification for a variety of environmental protection programs. The NDDoH’s environmental protection programs use data generated by the laboratory to regulate air quality; solid and hazardous waste; municipal wastewater; agricultural runoff; surface, ground and drinking water; petroleum products; and other media of environmental or public health concern.

The Department of Agriculture uses laboratory data to regulate livestock feed, pet foods, and agricultural and home-use fertilizers.

The division consists of seven analytical laboratory sections and one laboratory certification section. The following describes each analytical laboratory:

- **Demands Laboratory:** Provides analytical data used to determine compliance with permit requirements of municipal and industrial wastewater discharges.

- **Feed and Fertilizer Lab:** Provides analytical data to the Department of Agriculture; tests agriculture feeds and fertilizers, pet foods and lawn and garden fertilizers to determine compliance with labeling.

- **Mineral Lab:** Tests a variety of matrices for major cation and anion parameters. Typical analyses include fluoride, chloride, chemical oxygen demand, nitrate, sodium, ammonia and total Kjeldahl nitrogen.

- **Organic Lab:** Provides identification and quantification of insecticides, herbicides, volatile and semi-volatile organic compounds, PCBs and other synthetic organic compounds in drinking, surface and ground water; soil; river and lake sediments; foliage; fish tissue; sludge; oil; landfill wastes; and other environmental sources.

- **Petroleum Lab:** Tests petroleum products such as gasoline and diesel for quality.

- **Radiation Lab:** Identifies and quantifies radioactive elements in drinking water supply systems and radon analysis; participates in a nationwide program that monitors atmospheric background radiation.

- **Spectroscopy Lab:** Identifies and quantifies metal concentrations in drinking water sources and distribution systems, surface and ground water resources, fish, hazardous and solid wastes, river and lake sediments, and other environmental media.

Accomplishments

- Continued to assist the Environmental Health Section during environmental emergencies, including 24-hour services during major emergencies to ensure timely response. Some analysis associated with emergency situations this biennium included:
  * Testing of water run-off from a fire at a battery sales establishment.
  * Testing of unknown powders found in mail-sorting facilities and post offices.

- Provided analytical support to help public water systems comply with federal and state...
drinking water rules and regulations. About 7,100 samples were tested for more than 24,000 analytical components, including nitrates, metals, fluoride, pesticides, volatile organic compounds, haloacetic acids and trihalomethanes.

- Provided the analytical services necessary to monitor ground water quality. Testing included nitrates, metals, pesticides and water quality parameters. In addition, the laboratory analyzed samples for the environmental assessment of ground water and other factors related to feedlot operations.
- Participated in special projects, such as analyzing samples for a biochemical oxygen demand study.
- Maintained website with information about the lab’s services, sample submission procedures, analytical procedures, quality assurance plan and other general topics.
- Continued to participate in and successfully complete several laboratory performance evaluation programs. In addition, the division certifies the state’s environmental laboratories and reviews and recognizes other states’ certifications for out-of-state laboratories that meet the requirements of North Dakota’s certification program.
- Continued to provide information to other laboratories through training and conferences.
- Continued to provide analytical support to the North Dakota Water Commission.
- Analyzed about 41,750 samples for more than 265,000 analytical parameters.

- Completed construction of a new laboratory annex and remodel of existing facilities as provided by the 2001 and 2003 legislatures.

**Goals**

- Maintain or increase laboratory efficiency and responsiveness; provide continued analytical support for environmental protection, public health, agriculture and petroleum regulatory programs.
- Continue membership in performance evaluation programs; maintain current EPA laboratory certification and obtain certification for new drinking water components as they become regulated by EPA.

### Division of Air Quality

The Division of Air Quality is responsible for protecting the air quality resources and for ensuring control of radiation. Staff members also provide technical assistance during environmental emergency response efforts.

### Air Pollution Control Program

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

Program staff members consist of scientists, meteorologists, engineers and technicians whose primary responsibilities include evaluating permit applications, issuing permits that
restrict emission levels to ensure that standards are met, inspecting facilities to ensure compliance, investigating air pollution complaints, conducting computer modeling of potential impacts to air quality and operating a statewide ambient air quality monitoring network.

**Radiation Control and Indoor Air Quality Program**

The Radiation Control and Indoor Air Quality Program (1) monitors the development and use of ionizing and nonionizing radiation sources to protect the health and safety of North Dakotans and the environment and (2) evaluates and mitigates asbestos, radon, lead and other indoor air quality concerns, as well as implements an indoor air quality public awareness and education program.

**Accomplishments**

- Maintained attainment status for all state and national Ambient Air Quality Standards.
- Complied with all federal program requirements and maintained federal delegation responsibilities for Environmental Protection Agency programs.
- Reviewed a proposed ethanol production plant, power plant and coal mine to determine their effect on air quality, and issued permits to ensure compliance with the Air Pollution Control Rules.
- Responded to and assisted in the mitigation of environmental emergencies involving oil distribution, commercial battery sales and coal gasification facilities.
- Implemented medical x-ray operator training requirements for nonregistered technologists.
- Distributed environmental information to the public and provided public education and outreach by holding public information meetings, scheduling discussion sessions with local public health units, and participating in college and other agency seminars directed at providing education to the public.
- Developed automated reporting of ozone, PM$_{2.5}$ and PM$_{10}$ to AIRNow for five ambient monitoring sites.

**Goals**

- Maintain delegation and responsibility for federally mandated programs.
- Continue to work with officials at EPA to resolve issues surrounding the Prevention of Significant Deterioration Program.
- Further define and develop emergency response capabilities.
- Continue education and outreach activities to keep the public informed about environmental issues specific to air and radiation.
- Provide cross training to staff to improve versatility and job satisfaction and to provide an effective public response.
- Continue to provide responses to indoor air quality concerns by direct intervention and assistance to local public health personnel.
- Coordinate training programs to improve radiation technology education for facilities that offer such services to the public.
- Develop state plans for the reduction of regional haze and mercury emissions.
Division of Waste Management

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

The division includes the following:
• Hazardous Waste Program
• Underground Storage Tank Program
• Solid Waste Program
• Abandoned Motor Vehicle Program

Hazardous Waste Program

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

In addition to other inspections, the program conducts polychlorinated biphenyls (PCB) inspections at facilities or sites known or suspected to have equipment containing PCBs. The program also coordinates assessments and cleanups at Brownfield sites, which are properties owned by a city, county or development organization that are underdeveloped due to actual or perceived contamination.

Accomplishments

• Conducted permitting and inspections of the regulated community, which consists of about 700 businesses that have notified the division of hazardous waste activity. This includes small- and large-quantity generators; transporters; and treatment, storage and disposal facilities.
• Inspected about 120 facilities that generate or manage hazardous waste; provided compliance assistance to other hazardous waste facilities.
• Conducted about 30 PCB inspections; assisted businesses and tribes in investigating and managing regulated PCB waste; and promoted the management of unregulated PCB waste as regulated PCB waste.
• Worked with five facilities in investigating and remediating contaminated soil or ground water.
• Worked with the U.S. Drug Enforcement Agency and the N.D. Bureau of Criminal Investigation on clandestine drug labs.
• Responded to citizen complaints and assisted in the cleanup of environmental spills.
• Assessed six Brownfield properties in five communities, and removed contamination at five sites.
• Received recognition from EPA for meeting the national goal of issuing hazardous waste permits to all facilities that require them and for meeting environmental indicators at all facilities that required cleanup.
Goals

• Continue to conduct inspections at facilities that generate or manage hazardous waste and to provide compliance assistance to the regulated community.
• Reissue appropriate hazardous waste permits.
• Continue to review investigation reports, proposed remedies and remediation progress at facilities with corrective-action permits.
• Continue to conduct PCB inspections and to promote the proper handling and disposal of regulated and unregulated PCB waste.
• Seek additional EPA funding for Brownfield assessment and remediation activities.
• Conduct training that provides a general overview of regulations and requirements and helps businesses comply with state rules.
• Develop “Guide to Hazardous Waste Management in North Dakota” CD for businesses that generate hazardous waste, as well as other interested parties.
• Maintain partnership with the regulated community. This partnership has had a positive impact on compliance, which protects public health and the environment from mismanagement of hazardous waste.

Accomplishments

• Regulated 920 active tank facilities, for a total of 2,269 tanks. Compliance is monitored by a mail-in self-certification process, as well as onsite visitations. Program staff observed more than 40 tank closures, conducted 500 onsite inspections, and investigated and monitored cleanup of more than 70 leaking UST sites.
• Collected and analyzed 495 petroleum samples; processed and notified petroleum retailers of analysis results, including octane and distillation end points.
• Registered 38 antifreeze manufacturers and 136 bulk antifreeze retailers.
• Used Leaking Underground Storage Tank (LUST) Trust Fund money to investigate suspected UST releases and to conduct corrective actions when a release had occurred but the responsible party was recalcitrant, unable to pay or could not be

Underground Storage Tank Program

The Underground Storage Tank Program (UST) regulates petroleum and hazardous-substance storage tanks, establishes technical standards for the installation and operation of underground tanks, maintains a tank notification program, establishes financial responsibility for tank owners and provides for state inspection and enforcement.

UST regulations are designed to find and correct problems created by leaks and spills, prevent future leaks and spills, and ensure that owners and operators can pay to correct the problems created by leaking tank systems. Leaking USTs can cause fires or explosions that threaten human safety and can contaminate nearby soil, ground water or surface water.

The program also works with retailers and manufacturers to ensure that specifications and standards for petroleum and antifreeze are met.
identified. LUST Trust Fund money also was used to install and operate a pilot clean-up system for diesel fuel contamination in downtown Mandan.

• Continued outreach to tank owners about proper maintenance and operation of USTs. More than 9,400 USTs have been removed during the 16 years the UST Program has been in existence. Many of these tanks leaked or had the potential to leak.

Goals

• Assist tank owners with contamination assessment/clean-up activities following upgrade and/or replacement of USTs or when leaks occur.
• Provide compliance monitoring, inspections and public outreach to inform tank owners about the proper operation of USTs (e.g., leak detection, spill reporting, etc.).
• Use LUST Trust Fund money to investigate and properly close additional abandoned UST sites throughout the state; provide oversight for the remediation of downtown Mandan.
• Collect petroleum samples from retailers and respond to product and labeling deficiencies.
• Review antifreeze registration requests and respond to formulation and labeling deficiencies.

The Solid Waste Program

The Solid Waste Program regulates the collection, transportation, storage and disposal of nonhazardous solid waste. The program promotes resource recovery, waste reduction and recycling activities that preserve and enhance the quality of the state’s natural resources. In addition, the program assists individuals, businesses and communities to provide efficient, environmentally acceptable solid waste management systems.

Accomplishments

• Regulated 14 municipal solid waste landfills, 31 transfer stations, three industrial waste landfills, 21 special energy and oil industry landfills and 182 inert waste landfills.
• Continued implementation of the Nutrient Management requirements to help food processing and livestock facilities recycle organic waste materials; facilitated cleanup of a large stockpile of manure used to reclaim an anhydrous ammonia spill.
• Reviewed the environmental impact assessment and attended hearings regarding the proposed city of Grand Forks landfill site.
• Facilitated cleanup of a lead battery recycling site, an oil company fire, scrap metal and auto salvage facilities, and numerous oil product and chemical releases and spills.
• Evaluated tire disposal issues, including illegal disposal; improper management; and fire, water pollution and disease concerns.
• Conducted annual landfill operator training and certification sessions attended by about 40 operators and solid waste professionals.
• Developed guidelines for utilizing coal ash for feedlots, road construction, abandoned mine reclamation and land stabilization for crop storage areas.
• Assisted in response to an anthrax outbreak among cattle in southeast North Dakota.
• Cosponsored recycling workshops and the annual Solid Waste Symposium; made presentations to various groups about waste reduction, recycling, composting, disposal and waste hauling.
• Worked with nonprofit organizations to develop educational materials, host workshops and partner in grant opportunities.
• Provided environmental compliance and pollution prevention training to 26 state park employees.
• Completed environmental assessments and follow-up reports on pollution prevention practices at three state parks.
• Helped four agricultural entities develop and implement nutrient management plans for nutrient-rich waste materials.
• Developed website for exchange of unwanted materials to reduce waste materials.
• Developed and distributed information concerning best practices in fleet maintenance to state shop managers.

Goals
• Promote integrated waste management, including waste reduction, reuse, recycling and composting.
• Continue implementing and evaluating beneficial uses of materials to help reduce the need for newly manufactured products, as well as the amount of waste in landfills.
• Promote development of effective solid waste practices and facilities, including long-term solutions for solid waste needs.
• Continue education efforts through training, workshops and educational materials.
• Work with high school science programs to minimize the risk of exposure to hazardous materials such as mercury; assist with the removal of high-risk chemicals; and instruct schools about health risks and liability issues.
• Encourage auto scrap metal facilities to adapt pollution prevention practices, including the removal of mercury-containing devices, coolants and fluids before crushing, dismantling or smelting.

Abandoned Motor Vehicle Program
The Abandoned Motor Vehicle Program focuses on assisting political subdivisions in the cleanup of scrap metal.

Accomplishments
• Worked with local public health units to complete projects in Benson, Ramsey, Ransom and Cass counties, as well as in several smaller communities; began surveying counties in Custer Health and First District health units; collected and recycled about 3,400 tons of scrap metal.
• Evaluated and facilitated cleanup of numerous tire disposal sites.

Goal
• Promote the use of AMV funds to clean up unwanted scrap and to evaluate alternative uses and management of scrap tires.
Division of Municipal Facilities

The division consists of the following four programs that help municipalities and other political subdivisions maintain public health and safety: (1) the Public Water Supply Supervision Program; (2) the Operator Training, Certification and Facility Inspections Program; (3) the Drinking Water State Revolving Loan Fund Program; and (4) the Clean Water State Revolving Loan Fund Program.

Public Water Supply Supervision Program
The PWSS Program works with the 519 public water systems in North Dakota to ensure that drinking water meets all standards established by the Safe Drinking Water Act. This is accomplished by monitoring contaminants, providing operator training and certification, conducting sanitary surveys, reviewing plans and specifications, and providing technical assistance. Program staff also administer the state’s fluoridation program and provides technical assistance to private water systems.

Operator Training, Certification and Facility Inspections Program
The Operator Training, Certification and Facility Inspections Program provides training for and certification of people in charge of the day-to-day operation of water treatment and distribution facilities, as well as wastewater collection and treatment plants. There are 1,024 certified operators in the state.

Four inspectors/trainers annually inspect about 704 public water and wastewater systems to ensure that facilities comply with state and federal public health standards. Program activities contribute to the proper operation and maintenance of these facilities.

Drinking Water State Revolving Loan Fund
The DWSRF Program provides low-interest loans to help public water systems finance the infrastructure needed to comply with the SDWA. Eligible borrowers can obtain financing to construct water treatment works at below-market interest rates. Through June 30, 2005, loans totaling about $107 million have been approved to assist North Dakota water systems.

Program staff also review about 150 drinking water projects each year to ensure that new or modified public water system facilities meet state design criteria before construction. The reviews help ensure that the facilities achieve desired public health objectives and can be properly operated and maintained.

Clean Water State Revolving Loan Fund
The CWSRF Program provides low-interest loans to fund conventional wastewater and nonpoint source pollution control needs. Through June 30, 2005, loans totaling about $158 million have been approved to assist North Dakota wastewater systems. Eligible
borrowers can obtain financing to build wastewater treatment works at below-market interest rates. In addition, staff members review about 150 plans for new and modified wastewater systems each year.

**Accomplishments**
- Complied with all major federal program requirements and maintained federal delegation responsibilities for EPA programs.

**Goals**
- Maintain delegation for federally mandated programs.
- Continue to provide funding for the state’s drinking water and wastewater needs.

### Division of Water Quality

The primary statute providing for water quality protection is the federal Clean Water Act of 1972. This act and its amendments have proven to be the driving force behind many recent water quality improvements. Even before the federal Clean Water Act, North Dakota had its own law to protect water quality – the North Dakota Water Pollution Control Act enacted in 1967. The NDDoH is largely responsible for monitoring the quality of the state’s lakes, reservoirs, streams and wetlands. The Division of Water Quality helps ensure that water stays clean for people today and in the future.

Polluted water may carry certain diseases that result in dangerous illnesses and increased health-care costs. Contaminated water costs more to treat and is less appealing for recreational uses. And, of course, there is an environmental cost since polluted water affects the plants and animals dependent upon it.

Water quality has improved since passage of the Clean Water Act in 1972, but much remains to be done to achieve the goal of restoring and maintaining the quality of the state’s and nation’s waters.

**Water Quality Standards**

The state’s Water Quality Standards establish the beneficial uses of the state’s water and assign numeric criteria for chemical concentrations necessary to achieve the designated uses. The standards provide guidance to the North Dakota Pollutant Discharge Elimination System Program and set goals for the Nonpoint Source Pollution Management Program and the Section 303(d) Total Maximum Daily Load Program. The Clean Water Act requires that the standards be reviewed and, if necessary, revised every three years to accommodate the contemporary needs of the state and to incorporate the latest scientific information. Preliminary review for the next revision has begun, and final adoption is planned for 2006.

**Special Project: Devils Lake**

The NDDoH is the lead agency for monitoring water quality and providing technical information in the Devils Lake basin. The
monitoring consists of seven sites in the Devils Lake chain of lakes. The NDDoH also is involved in special studies as needed. Implementation of the Devils Lake Water Management Plan is necessary to achieve long-term solutions for flooding in the Devils Lake basin. Technical assistance has been provided for protection and maintenance of water distribution and wastewater treatment systems. The NDDoH also has provided regulatory oversight for threatened fuel storage areas, potential hazardous materials sites and other environmental threats.

The NDDoH issued a permit to the North Dakota State Engineer to discharge water through West Bay of Devils Lake to the Sheyenne River. The permit controls the discharge to protect the water quality and flows in the Sheyenne River. An adaptive management plan was implemented to further ensure the maintenance of all beneficial uses.

**Pollutant Discharge Elimination System Permit Program**

Point source pollution is defined simply as pollution coming from a specific source, like the end of a pipe. Environmental regulations implemented during the last 20 years have resulted in a significant reduction in pollution from major point sources (e.g., municipal and industrial wastewater treatment facilities).

Since 1975, the program has issued about 500 wastewater discharge permits (25 percent industrial and 75 percent municipal).

Since 1992, permits have been required for stormwater discharges associated with construction activities and industrial facilities. About 1,000 facilities are covered by general permits for stormwater discharges. This biennium, the primary focus in the area of stormwater discharges has been meeting the obligations of Phase II of the Environmental Protection Agency’s (EPA’s) Stormwater Rule.

Impacts to water from livestock operations are an increasing concern in North Dakota. Currently, about 584 livestock facilities have been approved to operate. Most of these are cattle, hog and dairy facilities that are part of a farmer’s total farm operation. In recent years, however, there has been an increase in the number of large concentrated animal feeding operations (CAFOs) proposed in North Dakota.

**Accomplishments**

- Conducted 122 stormwater inspections.
- Submitted for approval the final program package transferring the regulatory authority for the industrial pretreatment program from the EPA to the NDDoH. The NDDoH is awaiting final language for the addendum to the memorandum of agreement with the EPA for pretreatment delegation.
- Revised application and guide forms for the construction stormwater permit to match the conditions of the new permit; restructured the permit to provide a means of transferring permit responsibilities on a project.
Nonpoint Source Pollution Management Program

One of the primary challenges to maintaining or improving the quality of the state’s surface water resources is nonpoint source (NPS) pollution because this pollution does not come from one point. NPS pollution includes runoff from construction sites, city streets, livestock feedlots and agricultural lands. Runoff carries pollutants—including sediment, nutrients and pesticides—and deposits them in the state’s waters.

Accomplishments

- Provided about $9.5 million in Section 301 funding to support more than 50 locally sponsored projects. These projects used the funding to cost-share agricultural practices, conduct education events, deliver technical assistance to agricultural producers and evaluate water quality trends or conditions.

Surface Water Quality Monitoring and Assessment Program

The state’s surface water resources are significant. Currently, the NDDoH recognizes 224 publicly owned and managed lakes and reservoirs totaling 715,000 surface acres. The two largest are Lake Sakakawea (368,000 acres) and Devils Lake (125,000 acres). There are 54,427 miles of rivers and streams in the state. Estimates of river and stream miles are based on the National Hydrography Dataset (NHD) and include ephemeral, intermittent and perennial rivers and streams. In addition,
the state contains about 2.5 million acres of wetlands, the majority of which are located in what is commonly called the Prairie Pothole Region.

**Total Maximum Daily Load Program**

Section 303(d) of the Clean Water Act requires pollution-reduction targets to be developed for surface waters considered water-quality limited and requires load allocations, waste load allocations and Total Maximum Daily Loads (TMDLs). Typically, surface waters not meeting their designated beneficial uses are included on the TMDL list.

Regional TMDL/watershed liaison staff work with local stakeholders in the development of water quality assessments and TMDLs based on the Section 303(d) list of impaired waters. Regional staff provide technical assistance to local soil conservation districts and water resource boards, assist in the development of nonpoint source pollution management projects, provide technical expertise to local stakeholder groups and assist with youth and adult information/education events.

**Accomplishments**

- Maintained a network of 33 monitoring sites on 19 rivers to assess water quality trends and to describe the general chemical character of the state’s major river basins.
- Initiated a two-year biological monitoring and assessment program for rivers and streams in the Red River Basin. The NDDoH will sample macroinvertebrates and fish at 100 sites and combine the data with that being collected by the Minnesota Pollution Control Agency. The data will be used to develop and/or refine existing multi-metric biological indices and to assess the general biological condition of the Red River Basin.
- Conducted water quality monitoring on Devils Lake four times each year and maintained an active water quality monitoring program on Lake Sakakawea. Working cooperatively with the North Dakota Game and Fish Department, the department sampled Lake Sakakawea weekly during the open-water period in 2004 and 2005. Resulting data is used to provide estimates of the lake’s cold-water habitat and to support the state’s lawsuit with the U.S. Army Corps of Engineers regarding reservoir management.
- Completed and received EPA approval for the Cannonball River bacteria TMDL; completed draft of a bacteria TMDL for Cedar Creek/Crooked Creek and draft nutrient and sediment TMDLs for Lake Hoskins, Northgate Dam and Dead Colt Creek Dam.
- In cooperation with local stakeholders, initiated TMDL development projects for Dickinson Dike Dam, Short Creek Dam, Sheep Creek Dam, Brewer Lake, Sweetbriar Dam, Crown Butte Dam, Lower Wild Rice River and Wintering River.
- Completed water quality assessments for the following TMDL-targeted watersheds: Blacktail, McGregor, Carbury, Northgate, Armourdale and Indian Creek dams.
• Monitored for mercury and other contaminants by collecting fish from the state’s lakes, reservoirs and rivers. Issued a 2003 update of *A Guide to Safe Eating of Fish in North Dakota* with information about eating fish caught in the state's lakes and rivers.

**Ground Water Program**

North Dakota’s ground water protection programs are designed to control potential sources of contamination. This is accomplished through permit programs, waste discharge limits, performance and design standards, contaminant remediation and best management practices for NPS pollution. The degree to which contamination incidents are investigated or remediated depends upon the contaminant, its impact on the beneficial use of the resource and the overall risk to the public or the environment.

**Accomplishments**

• Successfully protected human health and the environment at spill sites, such as the Canadian Pacific Railway train derailment in Minot and the Burlington Northern diesel fuel release in downtown Mandan.

• Worked with livestock producers to locate new facilities in areas with minimal risk to ground water and to reduce risk at existing facilities by upgrading waste handling systems where needed.

**Wellhead and Source Water Protection Programs**

The 1996 Amendments to the Safe Drinking Water Act established the Source Water Protection Program to serve as an umbrella of protection efforts for all public water systems, including ground water- and surface water-dependent systems. The Wellhead Protection Program continues for ground water-dependent systems. The Source Water Protection Program for surface water-dependent systems involves (1) the delineation of protection areas along rivers or reservoirs that provide source water for the systems and (2) an inventory of potential contaminant sources within the protection areas. These programs help the NDDoH define the susceptibility of public water systems to potential contaminant sources found in their protection areas.

**Accomplishments**

• Completed source water assessments for all systems to meet Safe Drinking Water Act deadlines. North Dakota was one of the few states in the region to complete the assessments on time.

**Underground Injection Control Program**

The Underground Injection Control (UIC) Program helps prevent contamination of underground sources of drinking water (USDW) by injection wells (e.g., domestic waste, industrial wastewater or motor vehicle waste disposal).
There are five classes of underground injection wells, defined according to the types of fluid they inject and where the fluid is injected. The Division of Water Quality regulates Class I and Class V underground injection wells.

Accomplishments

- Issued permits to two new, deep industrial waste disposal wells at the Mandan Tesoro Refinery.
- Conducted inspections at 56 facilities located in high-risk areas such as wellhead protection areas and other sensitive ground water areas.
- Obtained closure of 12 high-risk wells located in wellhead protection areas or other sensitive ground water areas.
- Conducted public outreach to UIC well owners concerning new rule requirements.

Division Goals

- Include a watershed approach in all monitoring, assessment and control programs.
- Help local public water supply systems manage source water protection areas, including wellhead protection areas.
- Increase state level funding for NPS pollution projects.
- Increase public awareness of the proper construction, use and potential hazards of underground injection wells.
- Refine and expand the monitoring and assessment of aquatic life for lakes and streams.
- Expand monitoring for pesticides, revise information about pesticides and develop criteria that include pesticides currently in use.
- Improve Geographic Information System (GIS) capabilities to help ensure multi-agency and public access to water quality data.
- Improve communication and data sharing among local, state and federal agencies.
- Maintain and/or improve the cold water habitat in Lake Sakakawea.
North Dakota’s public health system is made up of 28 single- and multi-county local public health units (LPHUs). Services offered by each LPHU vary, but all provide services in the areas of maternal and child health, health promotion and education, disease control and prevention, and emergency response preparation and coordination. Some local public health units maintain environmental health programs; others partner with the NDDoH to provide environmental services, such as public water system inspections, nuisance and hazard abatement, and food service inspections.
<table>
<thead>
<tr>
<th>Health Unit</th>
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<th>Administrators</th>
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<tr>
<td>Bismarck-Burleigh Public Health</td>
<td>Bismarck</td>
<td>Paula Flanders, R.N.</td>
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<td>Cavalier County Health District</td>
<td>Langdon</td>
<td>Terri Gustafson, R.N.</td>
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<td>Central Valley Health Unit</td>
<td>Jamestown</td>
<td>Sharon Unruh, R.N.</td>
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<td>City-County Health Department</td>
<td>Valley City</td>
<td>Theresa Will, R.N.</td>
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<td>Custer Health</td>
<td>Mandan</td>
<td>Keith Johnson</td>
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<tr>
<td>Dickey County District Health Unit</td>
<td>Ellendale</td>
<td>Roxanne Holm</td>
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<td>Emmons County Public Health</td>
<td>Linton</td>
<td>Bev Voller, R.N.</td>
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<td>Fargo Cass Public Health</td>
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<td>Mary Kay Herrmann, R.N.</td>
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<td>First District Health Unit</td>
<td>Minot</td>
<td>Lisa Clute</td>
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<td>Foster County Health Department</td>
<td>Carrington</td>
<td>Jackie Schroeder, R.N.</td>
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<td>Don Shields</td>
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<tr>
<td>Kidder County District Health Unit</td>
<td>Steele</td>
<td>Lana Fischer</td>
</tr>
<tr>
<td>Lake Region District Health Unit</td>
<td>Devils Lake</td>
<td>Karen Halle, R.N.</td>
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<tr>
<td>LaMoure County Public Health Department</td>
<td>LaMoure</td>
<td>Tony Hanson</td>
</tr>
<tr>
<td>McIntosh District Health Unit</td>
<td>Ashley</td>
<td>Cathy Brendel</td>
</tr>
<tr>
<td>Nelson/Griggs District Health Unit</td>
<td>McVille</td>
<td>Julie Ferry, R.N.</td>
</tr>
<tr>
<td>Pembina County Health Department</td>
<td>Cavalier</td>
<td>Eleanor Stuberg, R.N.</td>
</tr>
<tr>
<td>Ransom County Public Health Department</td>
<td>Lisbon</td>
<td>Deb Bergstrom, B.S.N.</td>
</tr>
<tr>
<td>Richland County Health Department</td>
<td>Wahpeton</td>
<td>Debra Flack</td>
</tr>
<tr>
<td>Rolette County Public Health District</td>
<td>Rolla</td>
<td>Barb Frydenlund, R.N.</td>
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<tr>
<td>Sargent County District Health Unit</td>
<td>Forman</td>
<td>Colleen Sundquist</td>
</tr>
<tr>
<td>Southwestern District Health Unit</td>
<td>Dickinson</td>
<td>Carlotta Ehlis</td>
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<tr>
<td>Steele County Public Health Department</td>
<td>Finley</td>
<td>Diane Jacobson, R.N.</td>
</tr>
<tr>
<td>Towner County Public Health District</td>
<td>Cando</td>
<td>Les Wiestock</td>
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<tr>
<td>Traill District Health Unit</td>
<td>Hillsboro</td>
<td>Brenda Stallman, R.N.</td>
</tr>
<tr>
<td>Upper Missouri District Health Unit</td>
<td>Williston</td>
<td>Mike Melius</td>
</tr>
<tr>
<td>Walsh County Health Department</td>
<td>Grafton</td>
<td>Wanda Kratochvil, R.N.</td>
</tr>
<tr>
<td>Wells County District Health Unit</td>
<td>Fessenden</td>
<td>Karen Volk, R.N.</td>
</tr>
</tbody>
</table>

June 30, 2005
## Local Public Health Unit Expenditures

For the Period July 1, 2003, through June 30, 2005

<table>
<thead>
<tr>
<th>District Health Units</th>
<th>Total Expenditures</th>
<th>Annual Per Capita Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cavalier County Health Dist</td>
<td>$355,533</td>
<td>$40.62</td>
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<tr>
<td>Central Valley Health Unit</td>
<td>2,493,614</td>
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<tr>
<td>City County Health Dept</td>
<td>1,567,285</td>
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<tr>
<td>Custer District Health Unit</td>
<td>3,818,701</td>
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<td>Dickey County Health District</td>
<td>211,688</td>
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<tr>
<td>Emmons County Public Health</td>
<td>307,354</td>
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<tr>
<td>First District Health Unit</td>
<td>5,881,151</td>
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<tr>
<td>Kidder County District Health Unit</td>
<td>252,736</td>
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<tr>
<td>Lake Region Dist Health Unit</td>
<td>2,174,339</td>
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<tr>
<td>McIntosh Dist Health Unit</td>
<td>153,722</td>
<td>24.56</td>
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<tr>
<td>Nelson Griggs District Health</td>
<td>386,294</td>
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<tr>
<td>Rolette County Public Health</td>
<td>534,597</td>
<td>19.33</td>
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<tr>
<td>Sargent County District Health</td>
<td>218,332</td>
<td>26.56</td>
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<tr>
<td>Southwestern Dist Health Unit</td>
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<td>40.49</td>
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<td>Towner County Public Health</td>
<td>51,200</td>
<td>9.94</td>
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<td>Traill District Health Unit</td>
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<td>Upper Missouri Dist Health Unit</td>
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<tr>
<td>Wells County Dist Health Unit</td>
<td>30,039</td>
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<table>
<thead>
<tr>
<th>City/County Health Departments</th>
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</thead>
<tbody>
<tr>
<td>Bismarck-Burleigh Public Health</td>
<td>3,928,078</td>
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<tr>
<td>Fargo Cass Public Health</td>
<td>11,871,567</td>
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<tr>
<td>Grand Forks Public Health Dept</td>
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<table>
<thead>
<tr>
<th>County Health Units</th>
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</thead>
<tbody>
<tr>
<td>Foster County Health Dept</td>
<td>271,762</td>
<td>38.91</td>
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<tr>
<td>LaMoure Public Health Unit</td>
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<td>Pembina County Health Unit</td>
<td>309,342</td>
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<td>Ransom County Health Dept</td>
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<td>Richland County Health Dept</td>
<td>1,873,585</td>
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<tr>
<td>Steele County Public Health</td>
<td>81,526</td>
<td>19.77</td>
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<tr>
<td>Walsh County Health Dept</td>
<td>437,356</td>
<td>18.78</td>
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</tbody>
</table>

Total Local Public Health Funding: $48,650,802 $38.35
CHAIR
    Hjalmer Carlson, Jr., consumer, Minot

VICE CHAIR
    Joel Smith, manufacturing and processing industry, Fargo

SECRETARY
    Dennis E. Wolf, M.D., health care, Dickinson

MEMBERS
    Howard C. Anderson, R.Ph., health care, Turtle Lake
    Jeff Burgess, energy industry, Bismarck
    Lowell Herfindahl, health care, Tioga
    Marlene Kouba, consumer, Regent
    Lee Larson, consumer, Leeds
    Gordon Myerchin, consumer, Grand Forks
    Gary Riffe, health care, Jamestown
    Carmen Toman, consumer, Bismarck

June 30, 2005
# Financial Summary

## North Dakota Department of Health
### Appropriations Summary

**For the Period July 1, 2003, through June 30, 2005**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
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<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Salaries &amp; Wages</td>
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<td></td>
<td>$55,000</td>
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<td>Operating Expenses</td>
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<td>(116)</td>
<td></td>
<td>$553,000</td>
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<td>$192,000</td>
<td>4,381,837</td>
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<td>Capital Construction Carryover</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Grants</td>
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<td>8,587,097</td>
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<tr>
<td>WIC Food Payments</td>
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<td></td>
<td>17,680,000</td>
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<tr>
<td><strong>Total</strong></td>
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<td>$781,889</td>
<td>$2,693,464</td>
<td>$7,175,000</td>
<td>$ (116)</td>
<td>$204,000</td>
<td>$2,765,000</td>
<td>$133,201,985</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
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<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>General Funds</td>
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<tr>
<td>Federal Funds</td>
<td>$92,793,771</td>
<td>6,967,000</td>
<td>400,000</td>
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<td>$2,765,000</td>
<td>103,707,660</td>
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<tr>
<td>Special Funds</td>
<td>$13,687,885</td>
<td>2,693,464</td>
<td>208,000</td>
<td>(400,000)</td>
<td>204,000</td>
<td>16,393,349</td>
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<tr>
<td><strong>Total</strong></td>
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<td>$781,889</td>
<td>$2,693,464</td>
<td>$7,175,000</td>
<td>$ (116)</td>
<td>$204,000</td>
<td>$2,765,000</td>
<td>$133,201,985</td>
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</table>
### North Dakota Department of Health
### Expenditures by Section
### For the Period July 1, 2003, through June 30, 2005

<table>
<thead>
<tr>
<th>Use of Funds</th>
<th>Administrative Services Section</th>
<th>Medical Services Section</th>
<th>Health Resource Section</th>
<th>Community Health Section</th>
<th>Environmental Health Section</th>
<th>Emergency Preparedness &amp; Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries &amp; Wages</td>
<td>$3,491,519</td>
<td>$4,321,938</td>
<td>$4,780,453</td>
<td>$2,887,437</td>
<td>$13,159,379</td>
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<td>Operating Expenses</td>
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<td>7,681,456</td>
<td>1,176,821</td>
<td>4,802,616</td>
<td>5,092,984</td>
<td>1,057,014</td>
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<tr>
<td>Capital Assets</td>
<td>26,336</td>
<td>2,470,995</td>
<td>6,687</td>
<td>8,026</td>
<td>1,203,592</td>
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<tr>
<td>Capital Construction Carryover</td>
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<td>0</td>
<td>0</td>
<td>2,954,028</td>
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<td>Grants</td>
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<td>1,997,331</td>
<td>2,103,747</td>
<td>14,327,770</td>
<td>9,352,306</td>
<td>5,604,662</td>
</tr>
<tr>
<td>Tobacco Program</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WIC Food Payments</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$9,481,281</strong></td>
<td><strong>$16,871,720</strong></td>
<td><strong>$8,067,708</strong></td>
<td><strong>$45,004,480</strong></td>
<td><strong>$31,100,289</strong></td>
<td><strong>$7,018,124</strong></td>
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<tr>
<td><strong>Total FTE's</strong></td>
<td>35.55</td>
<td>47.25</td>
<td>53.50</td>
<td>36.70</td>
<td>137.00</td>
<td>3.50</td>
</tr>
</tbody>
</table>
Copies of the following publications can be accessed on the North Dakota Department of Health website at www.ndhealth.gov or by calling 701.328.2372.

**Community Health Section**

**Newsletters**
- Building Blocks to Safety/Buckle Update
- Focus on Oral Health
- Health Care Provider Examiner
- Tobacco Prevention and Control Newsletter

**Reports**
- American Indian Initiative Needs Assessment Report
- Breast and Cervical Cancer Rescreening in North Dakota’s Women’s Way Program
- Estimates of Diabetes Prevalence by County – July 2003
- Learning Styles, Channels of Communication, and Knowledge of Women’s Health Services Among American Indian Women in North Dakota: Results of Focus Groups Held in 2004
- North Dakota Healthy People 2000 Summary Report – October 2002
- North Dakota PRAMS 2002 Survey
- North Dakota 2003 Youth Risk Behavior Survey
- Tobacco Prevention and Control in North Dakota: A Status Report of Leading Indicators

**Other**
- Make It Your Business: A Tobacco-Free Workplace employers’ tool kit
- A White Paper on Comprehensive School Tobacco Policies

**Medical Services Section**

**Newsletters**
- Disease Update
- Epi Report
- Immunization Newsletter
- Influenza Weekly Surveillance Report
- MicroReport
- Pump Handle

**Reports**
- Epidemiology Semi-Annual Update
- HIV/AIDS in North Dakota, Mid-Year Update
- 2001 Epidemiological Report on Tuberculosis

**Other**
- Directory of Services – Division of Microbiology
Environmental Health Section

Newsletters
- Indoor Air Quality Monitor
- Official Bulletin
- Quality Water
- Radioactive News

Reports
- Air Quality Monitoring Data Summary 2003
- Annual Drinking Water Compliance Report Summary for 2004
- Chemical, Physical and Biological Characterization of Devils Lake 1995-2003
- Devils Lake Outlet Briefing Paper
- North Dakota 2004 Integrated Section 305(b) Water Quality Assessment Report and Section 303(d) List of Waters Needing Total Maximum Daily Loads
- SK-ND Transboundary Ambient Monitoring Network Air Quality Reports (quarterly)
- State/Industry Ambient Monitoring Network Air Quality Reports (quarterly)
- A Survey of Naturally Occurring Uranium in Groundwater in Southwestern North Dakota
- Water Quality Results for the Cannonball River Watershed Assessment Project
- Williston Monitoring Data (quarterly)

Other
- Air Quality Issues in North Dakota (web publication)
- Macroinvertebrate educational cards
- North Dakota Air Pollution Control Rules
- “Our Water – Keeping It Clean” monthly article in the North Dakota Water magazine

Health Resources Section

Newsletters
- CLIA Bits
- Dialysis Dialogue
- Home Health Update
- Long Term Care Highlights

Reports
- A Guide to Nursing Facility Charges

Administrative Support Section

Reports

Other
- Be Aware and Prepare: An Emergency and Terrorism Preparedness Guide for North Dakotans – newspaper insert