

# Biennial Report



North Dakota



Department of Health

1997 to 1999

North Dakota Department of Health  
**Biennial Report**  
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Edward T. Schafer, Governor  
Murray G. Sagsveen, State Health Officer

Loreeta Leer Frank, Editor

 North Dakota Department of Health  
600 E. Boulevard Ave.  
Bismarck, N.D. 58505-0200

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# State Health Officer's Message



The North Dakota Department of Health experienced a transition in leadership during the 1997-1999 biennium. Jon Rice, M.D., served as state health officer through Aug. 31, 1997; Robert A. Barnett was the interim state health officer from Sept. 1, 1997, through Jan. 31, 1998; and Governor Schafer appointed me state health officer effective Feb. 1, 1998. Governor Schafer concurrently appointed a physician advisory board in accordance with state law since I am not a physician.

The Department of Health is an incredibly diverse state agency. It is, for example, the primary environmental regulatory agency, is the fiscal agent for most public health programs administered by local public health units, provides professional public health services throughout the state and in support of the local public health units, licenses and surveys many types of health care facilities, supports law enforcement agencies and the courts, and maintains the state's vital records. The state health officer is also a statutory member of many health-related boards and commissions (see page 6).

The department has implemented a number of initiatives to better serve the public, including:

- A much closer working relationship with the public health units (illustrated on page 50).
- Active involvement in national organizations, such as the Association of State and Territorial Health Officials (ASTHO) and affiliated organizations.
- Establishment of a temporary state morgue in a department facility for the state medical examiner (thereby minimizing our reliance on local hospital morgues).
- Provision of additional resources to the crime lab to improve service to the law enforcement community.
- Better use of the internet and e-mail to vastly expand the availability of services and department-generated information for legislators and the public at minimal expense.
- Enhanced air quality monitoring along the Canadian border because of emissions from power plants in Saskatchewan.

We also are implementing a number of laws enacted during the 1999 legislative session, such as:

- Providing additional financial support for training to emergency medical services.
- Establishing local public health units in LaMoure, Dickey, Towner and Rolette counties.
- Developing a facilities master plan for upgrading and modernizing all department facilities.
- Developing a plan for appropriate community-based public health programs that will be funded by tobacco settlement payments to the state.

We look forward to additional efforts during the next biennium to improve services to the public. One planned initiative is the consolidation of the Health Resources and Preventive Health sections into one Community Health Section. In addition, the Health Council will hold public meetings throughout the state to discuss the delivery of public, emergency and acute health care in North Dakota, particularly in rural areas.

I'm proud of our department personnel and the important work they do to safeguard the health of all North Dakotans.

A handwritten signature in black ink, reading "Murray G. Sagsveen".

Murray G. Sagsveen, State Health Officer

# A Look at the Department

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## Mission Statement

We, as public employees, are dedicated to the goal of assuring that North Dakota is a healthy place to live and to the belief that each person should have an equal opportunity to enjoy good health. To accomplish this mission, we are committed to the promotion of healthy lifestyles, protection and enhancement of the environment, and provision of quality health care services for the people of North Dakota.

## 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.

## Physician Advisory Committee

When the state health officer is not a physician, state law requires the appointment of a three-member physician advisory committee whose members are recommended by the North Dakota Medical Association.

## Department Overview

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

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

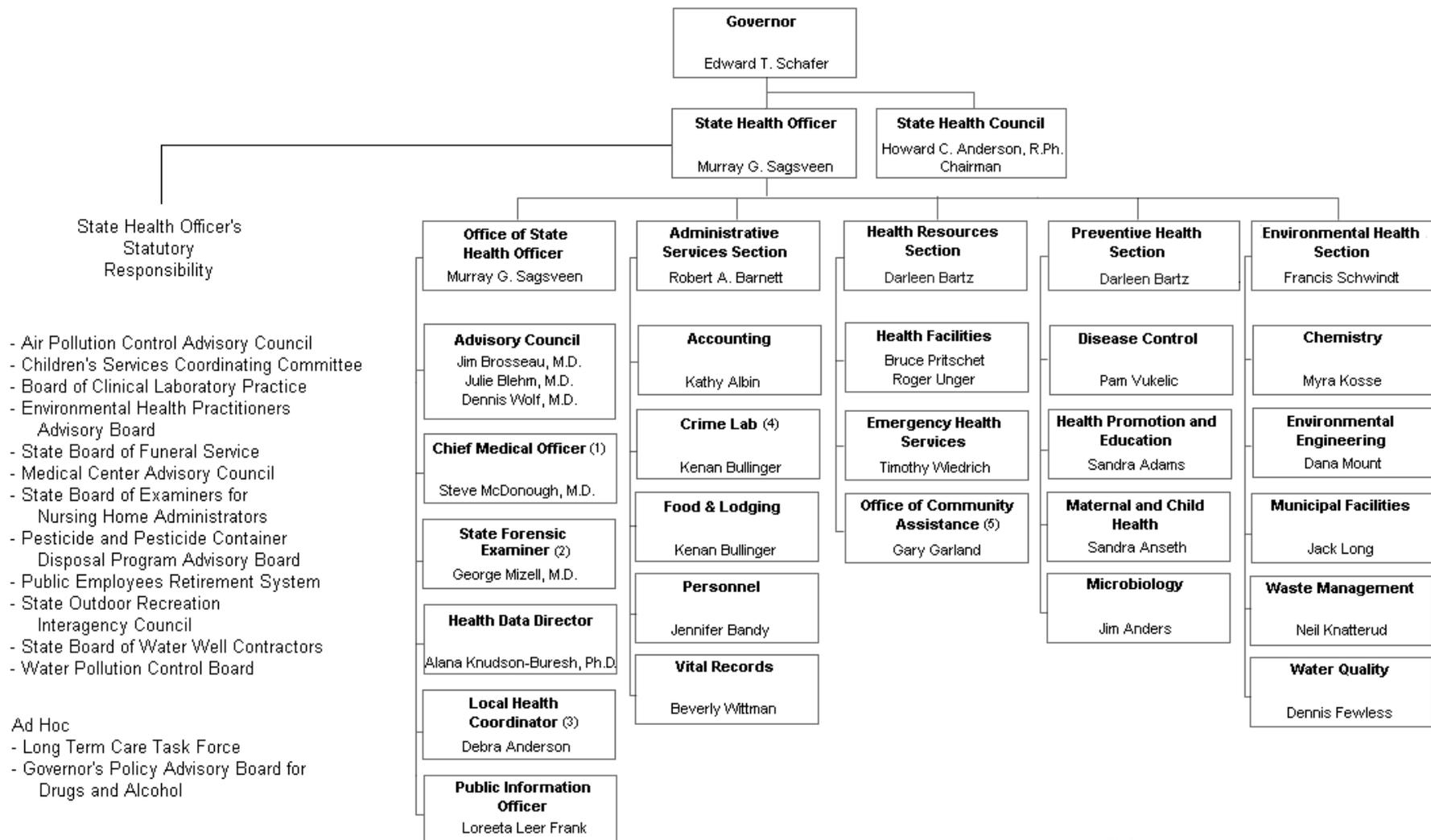
- Administrative Services
- Preventive Health
- Health Resources
- Environmental Health

Employees in these sections provide public health services that benefit the citizens of North Dakota.

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 agricultural industry, the very foundation of our state's heritage.



# Organizational Chart



(1) Coordination with local public health officers  
 (2) Coordination with county coroners  
 (3) Coordination with local public health administrators  
 (4) Coordination with law enforcement  
 (5) Coordination with Center for Rural Health

# Office of State Health Officer

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## 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, such as the governing board of the Public Employees Retirement System, the Children's Services Coordinating Committee and the State Water Pollution Control Board.

The Office of State Health Officer is comprised of the following:

- Local Health Coordinator
- Chief Medical Officer
- Health Data Director
- Public Information Officer
- State Forensic Examiner

## Local Health Coordinator

The local health coordinator acts as liaison between the North Dakota Department of Health and local public health units and other key public and private partners. The local health coordinator 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 health coordinator works with NDDoH staff members to assist public health units during infectious disease outbreaks and natural disasters.

### Accomplishments

- Developed a Core Functions of Public Health training program. About 300 state and local public health employees attended the workshops.
- Worked closely with representatives of state and local public health on the development and passage of SB 2045, which updated state statutes governing local public health.
- Assisted in the development of public health units in Dickey and LaMoure counties.
- Facilitated communication between FEMA and local public health during the 1999 flood recovery efforts.

## Chief Medical Officer

The chief medical officer provides medical direction to programs throughout NDDoH. Areas of emphasis include the health aspects of environmental pollution, newborn metabolic screening, communicable disease control, immunizations, infant mortality, adolescent suicide, cancer cluster investigations and the Children's Health Insurance Program.

### Accomplishments

- Assisted with major public health events, including the meningococcal outbreak and mass immunization in Williston, the tuberculosis outbreak in Lakota, the bovine tuberculosis outbreak in Morton County, and a foodborne illness incident in Bismarck.
- Worked with Lieutenant Governor Rosemarie Myrdal's initiative on adolescent suicide.



### Williston Meningococcal Outbreak

- During a three-day period in February 1999, one child died and two were hospitalized with meningococcal infections.
- NDDoH obtained 5,000 doses of vaccine.
- Upper Missouri District Health Unit offered vaccinations to all Williston children ages 3 through 21.
- No further cases of meningococcal infection occurred.

- Served on the Matters of Life and Death Task Force, a statewide effort chaired by First Lady Nancy Jones Schafer.
- Represented NDDoH on Governor Schafer's Committee on Children's Health Insurance Program.

#### Goals

- Continue to work with the Matters of Life and Death Task Force and the adolescent suicide initiative.
- Develop maternal and child health needs assessment.
- Continue to provide medical input for NDDoH programs, presentations at medical meetings and response to disease outbreaks.

### Health Data Director

The health data director supports NDDoH by providing consultation on health-related data and research projects. A primary role of the director is to coordinate the data systems used by various programs at the state and local levels. The director incorporates the health care claims system and other data sources to assess the health of North Dakotans and to evaluate the effectiveness of department programs. In addition, the director provides training and technical assistance to public health professionals.

#### Accomplishments

- Secured Robert Wood Johnson Foundation grant to examine the impact of the 1997 Red River flooding on health care utilization and health care insurance.
- Published *Selected Health Indicators*, a report on the health of North Dakotans.
- Assisted in the design and development of a decision support system for the Department of Human Services. This system will expand the capabilities of NDDoH's health care analyses.
- Collaborated in design of a study to examine the respiratory health of North Dakota children.

### Public Information Officer

The public information officer 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

- Designed and compiled *A Legislator's Guide to the North Dakota Department of Health*.
- Developed, published and distributed *Health Connection*, a quarterly electronic newsletter designed to inform legislators and others of NDDoH activities.

- Worked with FEMA to distribute flood information to the public.
- Served on the Matters of Life and Death Project, a statewide initiative to address end-of-life issues.
- Collaborated on three successful grant proposals submitted to the Robert Wood Johnson Foundation after the 1997 floods. About \$650,000 was awarded to NDDoH and Grand Forks Public Health Department. This funding was used to determine post-flood health effects, to examine changes in the rate of uninsured North Dakotans and to provide school health and community nursing to Grand Forks residents dealing with the aftermath of the flood.
- Compiled and implemented a department-wide standardization policy.

## 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.

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, toxicological analysis, collection of evidence, follow-up with investigating agencies, certification of cause and manner of death, and court testimony as needed.

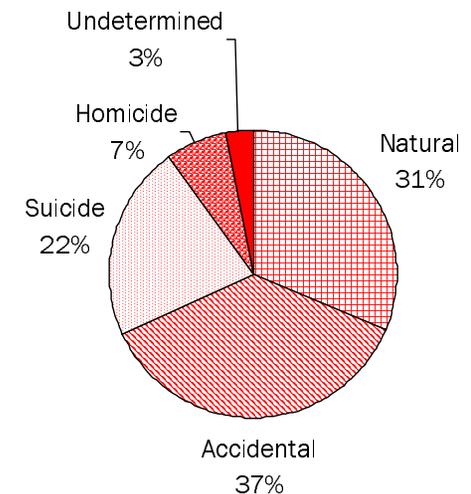
## Accomplishments

- Accepted 355 cases from all areas of the state during the biennium; performed autopsies on the majority of them.
- Provided education statewide to law enforcement officers, county coroners, states attorneys, hospital personnel and others involved in the investigation of deaths.
- Participated in the North Dakota Child Fatality Review Panel, the Mass Fatalities Incident Response Course and the National Disaster Medical System.
- Developed a temporary morgue facility. Housed in borrowed space at the NDDoH Environmental Training Center, this facility is equipped with autopsy and X-ray equipment, and has cold storage facilities for at least five bodies.
- Supervised an administrator and an administrative secretary who perform administrative duties and assist with death investigations.

## Goals

- Pursue the development of a permanent facility and adequate number of staff to handle the caseload.
- Continue to provide educational activities for 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.

1998 Coroner Referrals\*  
Causes of Death



\*186 total cases; 2 examined with no autopsy

# Administrative Services Section

The Administrative Services Section provides support services to all NDDoH divisions and assists in coordinating department activities. Divisions within the section provide services in the areas of personnel administration, fiscal management, health statistics and research, criminal justice and certification of vital events.

The section consists of the following divisions:

- Accounting
- Personnel
- Vital Records
- Crime Laboratory
- Food and Lodging

## 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 assist them with the monitoring of 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. The division is becoming more and more reliant upon electronic technology. Reports and funds that once were handled through the mail now are handled electronically.

To learn more about the North Dakota Department of Health, visit our website at [www.health.state.nd.us](http://www.health.state.nd.us).

## Accomplishments

- Submitted a biennial budget to the Office of Management and Budget in compliance with the governor's general fund guidelines of 95 percent.
- Returned to the state's general fund about \$144,000 and expended only 3 percent more general funds for the 1997-1999 biennium than for the previous biennium.
- Completed the first Information Technology Plan as requested by the 1997 Legislature.

## Division of Personnel

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

## Accomplishments

- Conducted in-house training programs, including sexual harassment, safety in the workplace, violence prevention and supervisory management techniques.
- Enhanced the risk management program to include self-assessments of safety.
- Worked with the North Dakota Workers' Compensation Bureau to reduce the frequency and severity of workplace injuries.
- Implemented a new performance management system to provide more frequent and meaningful feedback to employees.

## 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. This includes births, deaths, fetal deaths, marriages and divorces.

### Accomplishments

- During the biennium, registered 18,712 certificates of live birth; 12,564 certificates of death; 127 certificates of fetal death; 8,792 marriage records; 4,421 divorce records; and 210 delayed registrations of birth. More than 125,000 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 North Dakota. To achieve this goal, extensive querying and follow-up is done.
- Continue to provide timely responses to public requests for certified copies of vital event documents. This information is needed for many reasons, including passport applications, school entrance, job applications, Social Security benefits, etc.

## Division of Crime Laboratory

### Forensic Laboratory

The Forensic Laboratory provides technical assistance to the criminal justice system in the investigation of crime. The laboratory accepts evidence from agencies, including prosecutors and law enforcement officers (local, county, state, federal and military), as well as defense counsel.

Lab assistance includes the recognition, recovery, packaging, marking and sealing of evidence. This evidence can be processed by the following techniques: examination for flammable chemicals used in arsons, drug identifications, firearm and tool mark examinations, serological tests, trace evidence examinations, special photographic techniques, development of latent fingerprints, and comparison of tire and footwear impressions.

Drug identification is a major area of analysis and includes identification of clandestine drugs, pharmaceuticals and chemical compounds. The laboratory also provides urine drug screens to the state penitentiary, the Department of Parole and Probation and several county correctional centers.

### Vital Signs

On an average *day* in North Dakota:

- 21.7 babies are born; 5.8 of them are born out of wedlock, and 2 are born to teenage mothers.
- 16 people die, 4.8 of them from heart disease and 3.7 from cancer.
- 12 couples are married, and 6 couples are divorced.

In an average *week*:

- 1.3 infants die.
- 1.4 children between ages 1 and 19 die.
- 1.4 people commit suicide.
- 3.7 die from diabetes.
- 4.9 die from influenza and pneumonia.
- 5.5 die as a result of accidents.

In an average *month*:

- 3.2 children younger than age 20 die as a result of some type of accident.
- 14.6 people die as a result of motor vehicle accidents.

The average age at death is 75.1.

### Accomplishments

- Purchased modern equipment for arson and drug analysis.
- Purchased state-of-the-art equipment and supplies for DNA validation and testing.
- Adopted new administrative rules for collection of DNA samples from convicted offenders.
- Provided staff training on DNA, firearms, drug



Bret Mayo, senior chemist, inspects a breath-testing instrument.

analysis, and crime scene and clandestine lab investigations.

- Received federal funding to hire two additional forensic scientists to combat increased methamphetamine activity in North Dakota.
- Processed evidence from 8,032 cases and testified at 57 trials.

### Goals

- Provide rapid, accurate analysis of evidence and minimize case backlog.
- Implement DNA testing, establish a DNA database of

convicted sex offenders, and update laboratory techniques.

- Begin validation process for DNA testing.
- Develop new evidence tracking and reporting process.
- Pursue funding to outsource sexual assault cases to eliminate backlog.
- Continue staff training and development in criminal case work.

### Toxicology Laboratory

The Toxicology Laboratory provides technical assistance to the criminal justice system, coroners and the medical community for traffic safety, death investigations and other purposes. Staff members accept evidence from local, county, state, federal and military agencies. Assistance includes training officers in breath alcohol determination, maintenance of breath-testing instruments, blood alcohol analysis, and chemical drug and toxic substance analysis. The laboratory also provides expert testimony in criminal prosecutions and traffic safety hearings.

### Accomplishments

- Conducted 41 breath-testing classes and trained 420 law enforcement officers how to determine alcohol levels.
- Conducted 54 classes to train 734 officers in the use of preliminary breath-testing devices.
- Analyzed about 7,900 specimens and testified at more than 70 hearings and trials.

### Goals

- Provide accurate, rapid analysis of evidence and ensure quality of breath alcohol testing; enhance blood- and breath-testing programs, as well as toxicological analysis.
- Implement new case tracking and reporting system.
- Expand analysis of highway fatality samples.
- Expand drug analysis capabilities.
- Begin using new generation breath-testing devices capable of electronic data transmission and online diagnostics.

## Division of Food and Lodging

The Division of Food and Lodging is responsible for protecting public health through licensing and inspection of restaurants, hotels, motels, bars, mobile home parks, campgrounds, bed and breakfast facilities, retail food stores, meat markets and bakeries. 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. 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 Food and Drug Administration's (FDA) liaison in the state on issues related to manufactured food and pesticide residues in food.

### Accomplishments

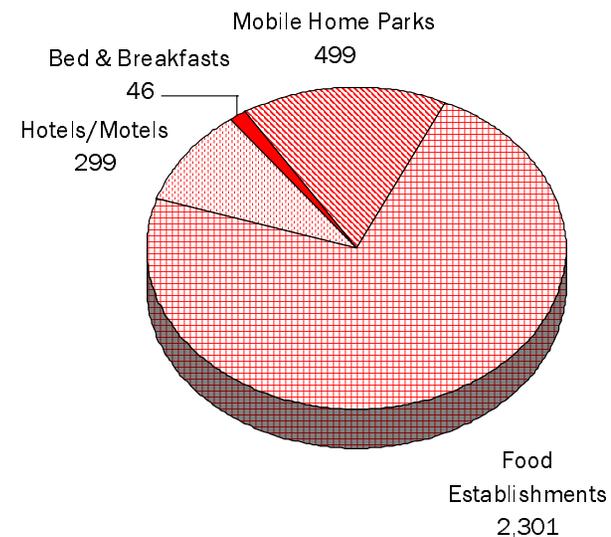
- Adopted new administrative rules dealing with lodging facilities.
- Developed a new food establishment inspection form.

### Goals

- Amend Section 33-33-04 of the North Dakota Administrative Code to conform with FDA's 1999 Model Food Code.

- Develop a new licensing program that will provide enhanced reporting capabilities and be Y2K compliant.
- Review and update the mobile home park, trailer park and campground statutes and rules to conform with national codes.
- Review and develop minimum requirements for primitive lodging facilities.

Establishments Licensed  
by the Division of Food and Lodging



# Health Resources Section

The Health Resources Section consists of two divisions – Health Facilities and Emergency Health Services – and the Office of Community Assistance.

The section is responsible for:

- Licensing inpatient and outpatient health care facilities, basic care facilities, home health agencies, ambulance services, hospice programs, electrologists and electronic hair removal technicians, and certification of emergency medical technicians.
- Certification surveys of all facilities and programs that provide service to people eligible for the federal Medicare and Medicaid programs; certification is voluntary but required for the provider or supplier to receive payment through Medicare and Medicaid.
- Certification of all clinical laboratories that test human body substances for medical purposes.
- Administration of the alternative health care projects program.
- Administration of the nurse aide training and competency evaluation programs and registry.
- Administration of the emergency health services system.
- Providing assistance to communities in determining if alternative health care services are feasible.



The Emergency Medical Services for Children Program trains EMS providers in special pediatric techniques.

## Division of Health Facilities

The Division of Health Facilities strives to ensure that 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 of the division include:

- General acute, primary care and specialized hospitals – 49
- Nursing facilities – 89
- Home health agencies – 42
- Hospice programs – 16
- Basic care facilities – 43 facilities with 1,453 beds
- Electrologists and electronic hair removal technicians – 23

Contractual certification responsibilities include:

- Long-term care nursing facilities – 89 facilities with 7,057 beds
- Hospitals, including swing beds and general acute services – 46 general acute care and critical access hospitals with 3,159 beds; three specialized hospitals with 419 beds
- Intermediate care facilities for the mentally retarded – 66 facilities with 765 beds
- Home health agencies – 34
- Hospice programs – 16
- Rural health clinics – 77

- All clinical laboratories in the state as defined by the Clinical Laboratory Improvement Amendments (CLIA) – 462
- Ambulatory surgical centers – 13
- End stage renal dialysis units – 15
- Portable X-ray units – three

Staff members conduct annual 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 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, 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

- Implemented automation of the federally mandated Resident Assessment Instrument for nursing homes and the Outcome and Assessment Information Set for home health agencies. Through these systems, all nursing homes and home health agencies electronically submit assessment information directly to NDDoH.

- In conjunction with the North Dakota Long Term Care Association, provided several one-day workshops for long-term care providers. These workshops focused on care-related services identified through the survey process.
- Revised licensure rules related to primary care hospitals.
- Implemented the federal Critical Access Hospital Program in North Dakota. This program allows small hospitals to access cost-based reimbursement.
- Revised the nurse aide training, competency evaluation, and registry rules to provide a review process for findings of neglect.



Inspections by the Division of Health Facilities help ensure quality of life and quality of care for nursing facility residents.

#### Goals

- Maintain the average survey interval of 12 months or less for long-term care facilities.
- Address complaints in a manner consistent with revised federal and state guidelines.
- Ensure that new surveyors receive adequate training to pass the national Surveyor Minimum Qualifications Test on the first attempt.
- Work with the Long Term Care Task Force regarding combining basic care and assisted living into one entity and evaluating use of the Resident Assessment Instrument in swing bed facilities.
- Increase the number of onsite surveys of hospitals.

## Division of Emergency Health Services

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

- Annually licenses 141 ground ambulance services that meet standards for service availability, equipment and personnel 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.



Standing Rock ambulance personnel train for heat emergencies.

- Administers an EMS grant program of about \$470,000 per year for training ambulance service personnel.
- Provides technical assistance to local EMS services regarding patient care issues, as well as system design, administration and operation.
- Maintains an EMS personnel data system that contains about 10,000 certification records.

- Maintains an ambulance run report data system that adds about 30,000 ambulance run records per year.

- Provides critical incident stress debriefing services to law enforcement, fire and EMS personnel engaged in EMS.
- Maintains a certified nurse aide registry with about 9,500 registrants.
- Provides continuing education to emergency medical services through distance learning and videotape presentations.
- Implements and maintains a statewide trauma system.

### Accomplishments

- Conducted programs that trained, tested and certified about 2,100 new personnel and 3,000 existing personnel. Courses included First Responder, Emergency Medical Technician-Basic (EMT-B), Emergency Medical Technician-Intermediate (EMT-I) and Emergency Medical Technician-Paramedic (EMT-P).
- Provided licensing and inspection services for 141 ambulance services.
- Conducted distance learning through a videotape-based system that provides monthly continuing education material to 250 sites.
- Provided about 60 critical incident stress debriefings to EMS personnel; conducted training for about 800 EMS providers in healthy stress-coping techniques.
- Implemented trauma systems that resulted in designation of trauma centers, development of local trauma transport plans, maintenance of a trauma registry and training of EMS and trauma center personnel.

- Developed an emergency medical services for children (EMSC) program that trained about 900 EMS providers in special pediatric techniques.
- Provided nurse aide registry services for about 2,400 personnel.

#### Goals

- Create training systems that provide greater accessibility and that meet the needs of rural and frontier areas. Innovative technology such as internet video streaming will be used to deliver training.

## Office of Community Assistance

The Office of Community Assistance administers state and federal programs designed to improve the supply and distribution of health care services, programs and personnel, including:

- State and federal loan repayment programs for health professionals.
- Critical Access Hospital Program.
- J-1 Visa Waiver Program for foreign physicians.
- U.S. Public Health Service Community Development grant.
- Data support through the claims-based data system.

The Office of Community Assistance works with various public and private groups to promote sustainable and accessible health care services.

#### Accomplishments

- Drafted North Dakota's Critical Access Hospital (CAH) Plan, among the first approved by the Health Care Financing Administration (HCFA). Critical access hospitals receive cost-based reimbursement for Medicare patients and may realize cost savings through revised state and federal regulations.
- Created an application packet to assist rural hospitals to meet federal requirements for the CAH Program.
- Worked with various programs to place 13 foreign medical doctors, three primary care physicians and four allied health care professionals in North Dakota communities.
- Conducted hospital market share studies for 24 North Dakota communities to assist in determining the services that meet local needs.
- Advised health care providers and community leaders about options for co-locating health care services, reimbursing costs, and merging competing health care facilities.
- Served on the North Dakota Task Force on Long Term Care Planning, which included drafting or editing recommended legislation.
- Produced the 1998 and 1999 editions of *A Guide to Nursing Facility Charges*, which lists all North Dakota nursing home rates and describes how the rates are established.

Through June 1999, one rural North Dakota hospital was designated and Medicare certified as a Critical Access Hospital. Tioga Medical Center was among the first in the nation to meet all state and federal conditions for participation in the Critical Access Hospital Program. Many other hospitals began the process and are expected to become Critical Access Hospitals during the next biennium.

During the last 100 years, perhaps nothing has improved human lives more fundamentally than public health. Since the dawn of this century, the average human life span in North America has increased by 28 years. Of this remarkable change, 25 years are attributable to public health measures: clean water, immunizations, safer workplaces and improved nutrition – all examples of what population-based prevention and health promotion can accomplish.

– Edith Leyasmeyer, Dean  
University of Minnesota  
School of Public Health

### Goals

- Maintain or improve access to local health care facilities, services and personnel. The objective is to achieve 100 percent access to necessary health care services for all North Dakota residents. The focus is to stabilize local health care delivery systems and reduce health status disparities through improved access to health care services. To meet this goal, the office will:
  - \* Conduct comprehensive health care needs assessments for and provide advice about health care service and delivery options to North Dakota communities.
  - \* Compile and interpret data about health care concerns for the state’s “invisible population” (e.g., migrant workers, refugees, homeless, uninsured, working poor).
  - \* Serve as coordinator for community development projects.

# Preventive Health Section

The Preventive Health Section is responsible for maternal and child health, health promotion and education, disease control and public health microbiology services in the state. The section's goal is to promote health and prevent illness and disease. Many of these services are provided by local public health units.

The section includes the following:

- Maternal and Child Health
- Health Promotion and Education
- Disease Control
- State Epidemiologist
- Senior Advisor for Health Policy
- Microbiology

## Division of Maternal and Child Health

The mission of the Division of Maternal and Child Health (MCH) is to ensure healthy women, children and families. The division supports and encourages better health through education, policy development, advocacy and partnerships.

Programs within the division include:

- Optimal Pregnancy Outcome Program (OPOP)
- Sudden Infant Death Syndrome
- Adolescent Health/School Nursing
- Abstinence Education
- MCH Nurse Consulting
- MCH Nutrition
- Oral Health
- Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

- Sexual Assault
- Domestic Violence
- Injury Prevention
- Newborn Metabolic Screening
- Family Planning
- State System Development Initiative

### Accomplishments

- Surveyed local agencies to determine satisfaction with services provided by the division. In all, 83 percent of agencies who responded to the survey reflected overall satisfaction.
- Conducted a survey of local public health units to determine their views about local influence on the 25 maternal and child health performance measures. The survey indicated local agencies perceived they had the greatest effect on the performance measure related to immunizations and the least effect on measures related to children with special health care needs.
- Conducted outreach activities to ensure enrollment of eligible children in the state's new Child Health Insurance Program (CHIP).
- Partnered with the North Dakota Nurses Association to distribute *Parenting the First Year*, a newsletter mailed to all new parents in the state.
- Conducted a second *New Mothers' Survey*. Results of the survey are used to track the progress of MCH programs that address issues such as use of prenatal vitamins to reduce birth

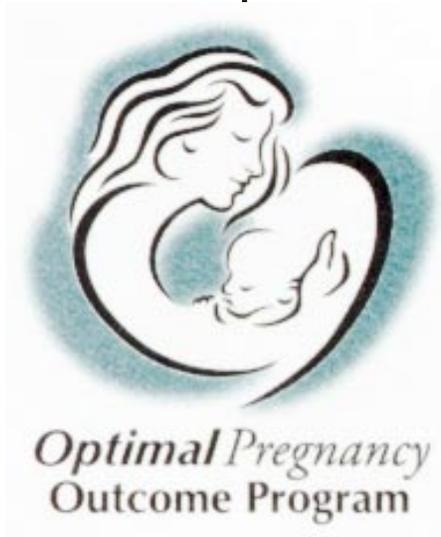


North Dakota's WIC Health Passport Project leads the nation in computer chip-card technology.

defects, early prenatal care, smoking during pregnancy and Shaken Baby Syndrome.

#### **Newborn Home Visiting Committee**

- Distributed 450 copies of *Guidelines for Infant and Early Childhood Home Visiting Programs* to public and private providers, agencies and organizations. The committee developed the *North Dakota Directory for Infant and Early Childhood Home Visiting*, a publication that lists home visit resources and providers, as well as contacts for additional information. The committee also held a conference on newborn home visiting.



#### **Optimal Pregnancy Outcome Program (OPOP)**

- Developed a policy and procedure manual for use at the state and local levels. State System Development Initiative (SSDI) funds were used to develop a new brochure.

#### **Sudden Infant Death Syndrome (SIDS)**

- Presented information at the fall 1998 regional meeting of public health nurses. *New Mothers' Survey* results related to SIDS risk behavior were disseminated to public and private providers, agencies and organizations.

#### **School Nurse Program**

- Worked with various agencies to develop *Emergency Guidelines for North Dakota Schools*, a manual that provides recommended procedures for school staff to use if a nurse is not available. Manuals will be distributed to principals and public health units in the state.

#### **MCH Nutrition Program**

- Continued to integrate nutrition services into all MCH programs and to coordinate activities with other divisions and agencies. Funding for local services was provided through MCH grants. Local nutritionists conducted activities that addressed the issues of healthy weights for children and adolescents, eating more fruits and vegetables, and increasing physical activity.

#### **Oral Health Program**

- Focused on efforts to prevent oral diseases and improve dental care access. School fluoride programs and oral health education programs served 18,018 children during the biennium.
- Worked with various agencies and organizations to include dental benefits in the state's Child Health Insurance Program.
- Developed a new initiative to educate Medicaid- and CHIP-eligible parents on their roles and responsibilities in obtaining dental services for their children.
- Developed a database to assess dental provider distribution in the state. Data indicated that 40 percent of current providers plan to retire in the next 10 years. Recruitment and retention of dentists is an emerging issue.

### **WIC Program**

- Helped initiate a statewide lactation counseling workshop for community teams of WIC, hospital and public health staff. The workshop helped build local coalitions for breastfeeding promotion and support.
- Launched the Health Passport Project, the first of its kind in the nation. The smart-card (a card with a computer chip) stores accurate and current health records – avoiding unnecessary duplication of tests – and assists families in identifying and accessing other support services.

### **Domestic Violence\Rape Crisis Program**

- Provided federal funds to community agencies to address the issues of domestic violence and sexual assault through collaborative and coordinated efforts. The purpose of the STOP Violence Against Women grant is for the state to coordinate and integrate law enforcement, prosecution and judicial efforts, as well as victim services, to identify and respond to crimes of violence against women.
- Formed a statewide training committee composed of agencies that provide services to victims of domestic violence and sexual assault.

### **Injury Prevention Program**

- Completed observation surveys that showed slight increases in car seat and seat belt use by children younger than age 11. The 1999 legislature amended the state's child passenger safety law to require children up to age 18 to ride buckled up anywhere in the vehicle.

- Coordinated the *Never, Never, Never Shake a Baby* campaign, the *Give Your Child A Boost* campaign to increase use of booster car seats, and the formation of a statewide Adolescent Suicide Prevention Task Force.
- Distributed about 750 car seats and more than 3,000 bike helmets.
- Participated in the Child Fatality Review Panel.
- Assisted the U.S. Consumer Product Safety Commission with product recalls and effectiveness checks.

### **Newborn Screening Program**

- Screened all newborns for four medical conditions: Phenylketonuria (PKU), Hypothyroidism, Galactosemia and Congenital Adrenal Hyperplasia (CAH). Early identification and treatment of these conditions prevent mental retardation and save thousands of dollars in special education and health care costs.

### **State System Development Initiative (SSDI)**

- Assisted Regional and Tribal Children Services Coordinating Committees (CSCCs) in allocating funds to community grants that address children's health issues. SSDI is a cooperative program with the North Dakota Department of Human Services.



More than 9,000 North Dakota infants were screened each year for serious congenital disorders.

### Division Goals

- Work cooperatively with other agencies to carry out the performance measures and outcome objectives agreed upon between the federal funding agency and the state. MCH will hold a multi-agency planning retreat during the next biennium to meet this goal.
- Explore the addition of a new newborn screening test for medium-chain acyl-CoA dehydrogenase deficiency (MCAD). This metabolic condition is treated easily by providing glucose and calorie supplements during illness and by avoiding fasting. A pilot program to test the feasibility of screening for MCAD will be conducted in 2000.
- Promote healthy weights for children and adolescents through state and local efforts that advance sound nutrition and physical activity.
- Continue to provide prenatal education that helps pregnant women make healthy lifestyle choices. The OPOP program currently is expanding the manual for local programs and developing prenatal education fact sheets.
- Continue to coordinate follow-up services for families who suffer SIDS deaths and to provide SIDS information/education to health care professionals and the general public.



The Injury Prevention Program provided more than 3,000 bicycle helmets to North Dakota children.

- Expand activities aimed at preventing injuries to adolescents, with special emphasis on motor vehicle crashes and suicides. The State Suicide Prevention Plan will be completed and implementation will begin. Child passenger safety efforts will focus on developing a network of safety technicians trained to conduct car safety seat check-ups.
- Develop a manual of guidelines for registered nurses in North Dakota schools.
- Encourage collaboration and coordination among state and local law enforcement, prosecution, and domestic violence/rape crisis agencies. The Domestic Violence/Rape Crisis Program will emphasize long-term efforts to increase law enforcement resources for the response to and investigation of violence against women; to increase the resources to and availability of prosecution attorneys for domestic violence and sexual assault cases; and to develop, implement and/or strengthen victims services, including domestic violence/sexual assault agencies serving American Indians and non-prosecution/non-law enforcement-based victim witness advocate programs.
- Continue efforts to promote innovative and cost-effective approaches to oral health promotion, disease prevention and dental care access. An initiative to promote parental knowledge of prevention and responsibility for oral health care will be launched in 1999.

## Division of Health Promotion and Education

The mission of the Division of Health Promotion and Education is to enable communities to promote healthy behaviors that prevent and control chronic disease, thus reducing health care costs and improving the quality of life.

Intervention programs in communities, schools and local agencies focus on tobacco-free lifestyles, healthy eating, regular physical activity and use of preventive health services for early detection. Support programs collect data about healthy behaviors and incidence of disease and provide educational resources for communities, schools and health professionals.

Programs and services include:

- Cancer Prevention and Control
- Cardiovascular Health
- Tobacco Prevention and Control
- School Health
- Youth Risk Behavior Survey
- Cancer Registry
- Resource Library
- Behavioral Risk Factor Surveillance System

### Accomplishments

#### **Cancer Prevention and Control**

- Continued to focus on breast and cervical cancer screening for medically underserved women by participating in the National Breast and Cervical Cancer Early Detection Program. North Dakota's program, known as *Women's Way*, has expanded its partnerships to provide screening services to a growing number of

eligible women. Through local public health units, private health care providers and a statewide volunteer network, *Women's Way* has provided screening services to women age 40 to 64 in every North Dakota county.

- Screened more than 1,500 eligible women for breast and cervical cancer, about 8 percent of whom are American Indian. Screenings detected six breast cancers and 19 cases of cervical dysplasia. Each enrolled woman diagnosed with cancer has received treatment.
- Implemented a train-the-trainer program to enhance the skills of practitioners in the performance of quality clinical breast exams.
- Recruited, trained and supported 350 *Women's Way* volunteers. The volunteer network uses woman-to-woman and small-group strategies to encourage annual cancer screening.
- Participated in the first annual North Dakotans Partnering for Women's Health summit. Led by First Lady Nancy Jones Schafer, the summit included training related to breast and cervical health and the recognition of more than 100 volunteers.

#### **Cardiovascular Health**

- Worked to improve the cardiovascular health of North Dakotans by promoting healthy lifestyles and policies that increase physical activity and improve eating behaviors.



Eligible women receive quality mammograms through *Women's Way*.

- Collaborated with local nutritionists and county extension agents to promote *5 A Day for Better Health*, a national nutrition campaign that encourages Americans to eat five or more servings of fruits and vegetables each day. Activities were implemented through public awareness campaigns, lifestyle change programs and creation of supportive environments.
- Worked with the North Dakota Healthy Heart Council, a statewide coalition that supports heart-healthy lifestyles, to recognize six communities as *5 Plus 5 Communities*.
- Implemented a statewide media campaign to promote physical activity through everyday opportunities, such as walking, gardening and housework, reinforcing the message that every physical activity counts toward reducing the risk of chronic disease.



Tobacco-free messages created by middle school students are displayed on billboards across the state.

### **Tobacco Prevention and Control**

- Worked with five communities to pass new ordinances that restrict vending machines, license tobacco retailers, require retail compliance surveys and place tobacco behind clerk-operated counters. A total of 14 cities have passed ordinances that reach nearly one-half of the state's population. Cities enforce licensing ordinances with several compliance checks each year. Retailers who

illegally sell tobacco to minors face license suspension.

- Co-sponsored town meetings, a statewide training for regulatory agencies and a medical continuing education class, all of which featured a leading national expert on secondhand smoke.
- Worked to extend smoke-free policies to more restaurants, as well as certain outdoor areas. One public health unit, one medical center, one county and nearly 60 percent of all schools enforce smoke-free or tobacco-free policies in buildings and on grounds.
- Provided training to teachers on Life Skills and Project TNT tobacco-use prevention curricula. These curricula focus on positive skills for life to help children stay tobacco-free. Four specially trained North Dakota classroom teachers provided 14 workshops across the state.

### **School Health Program**

- Assisted 13 North Dakota middle schools to better meet the needs of young adolescents by creating a healthy environment for students and staff, strengthening health education and accessing student health services. In collaboration with the University of North Dakota and the Department of Public Instruction (DPI), the School Health Program works to strengthen connections between schools and community health professionals.
- Completed a *Youth Risk Behavior Survey* and a *School Health Education Profile* in conjunction with DPI. Survey results were provided to local school boards, administrators, educators and other decision-makers to help

- plan programs that address common youth health problems such as tobacco use, poor eating behaviors and physical inactivity.
- Organized the annual Roughrider Health Promotion Conference. This conference brings together school and community teams who return to their local communities with plans to protect youth from health risks. These school-based teams carry out activities that reach more than 58,000 North Dakota residents.
  - Continued to distribute the *Dakota's Best Healthy Kids* newsletter to more than 1,800 educators. A cooperative project with DPI, the newsletter provides North Dakota classroom teachers with ideas for teaching about health and life skills.

### **Cancer Registry**

- Completed development of a central cancer registry reporting system for data collection that meets needs unique to North Dakota. Baseline incidence data for 1997 was collected. The full central cancer registry operations include data collection, case consolidation, continuous quality improvement, death certificate clearance and follow-back activities. The registry obtained data exchange agreements with Aberdeen Area IHS Unit, Florida, Montana, Texas, Washington and Wyoming to assess North Dakotans whose cancers were diagnosed or treated out of state.

### **Resource Library**

- Continued to serve as a reference clearinghouse for health professionals, educators, community leaders and department staff members. Internet searches were conducted regularly, and resource materials were listed in the state library's ODIN database.

### **Behavioral Risk Factor Surveillance System**

- Collected information about North Dakota residents and the behaviors that put them at risk for disease and injury. Yearly surveys of 1,800 households provide information to assist program planners, lend insight to health professionals and inform the public about the status of a variety of health issues.

### **Division Goals**

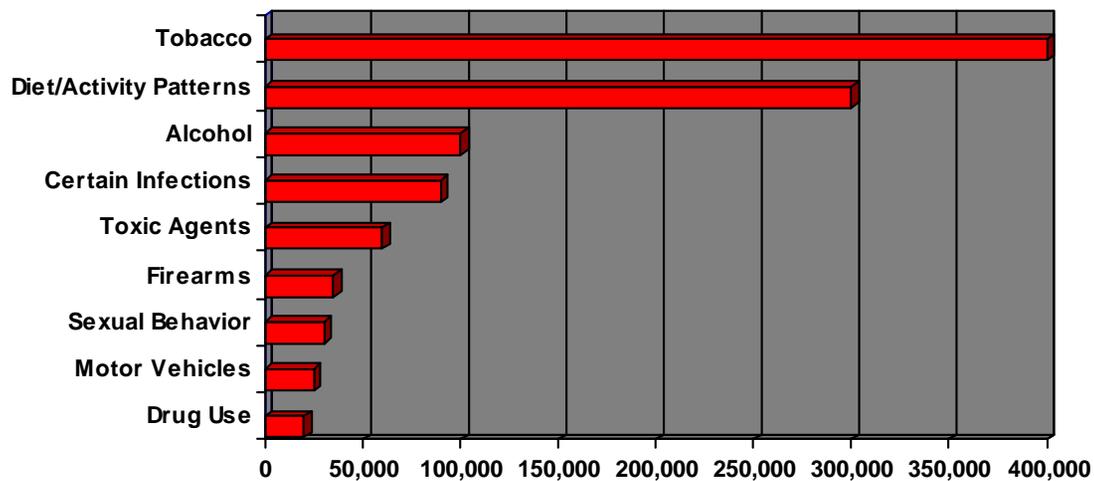
- Provide cancer screening services to 1,800 eligible North Dakota women each year. *Women's Way* staff members will define operational procedures for case management, the newest program component, and will implement a quality assurance plan.
- Pilot a paid *Women's Way* outreach worker program in Fargo to be managed cooperatively with Fargo Cass Public Health.
- Continue to cooperate with North Dakotans Partnering for Women's Health in conducting an annual summit. Future conferences will cover a wider variety of women's health issues by developing more partnerships with agencies and organizations interested in women's health.



The Division of Health Promotion and Education encourages physical activity for good health.

- Continue to support cardiovascular health assessment, coalition development, program implementation and evaluation in local communities. In addition, the Cardiovascular Health Program will develop a state plan outlining specific strategies to prevent and control cardiovascular disease. The program will support community physical activity and nutrition interventions.

## Real Causes of Death United States ~ 1990



Of the more than one million deaths in the United States in 1990, about 700,000 can be attributed to tobacco, diet and inactivity patterns, all of which are behavioral choices.

Source: McGinnis, J.M., and Foege, W.H., *Actual Causes of Death in the United States*, 1993

- Continue to work with communities to protect the public from secondhand smoke and youth from easy access to tobacco. In addition, the Tobacco Prevention and Control Program will work with public and private health care providers to ensure that all citizens have access to affordable tobacco-use cessation services.
- Establish an American Indian Tobacco Control Network in North Dakota. This network will provide advice about the most effective ways to reach the American Indian population with information, policies, cessation services and school tobacco-use prevention programs.
- Continue to strengthen quality school health programs through training and technical assistance. Data collection about youth risk behaviors and school health program status will continue, and surveillance results will be provided to program planners and key decision-makers. Pilot schools will implement CDC guidelines for a comprehensive youth tobacco education program.
- Obtain cancer data from clinics and independent physician offices throughout the state.
- Publish at least two in-depth, site-specific, yearly Cancer Registry reports, in addition to the annual report.
- Develop and institute audit processes to ensure that all newly diagnosed cancers are being reported to the state registry.
- Obtain at least two additional data exchange agreements with other states, and ultimately secure agreements with all states.

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## Division of Disease Control and Prevention

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 questions and issues. The division often works with the media to provide timely public education.

Programs within the division include:

- Immunization
- Agriculture Health and Safety
- Sexually Transmitted Diseases
- Diabetes
- HIV/AIDS
- Tuberculosis Control
- Epidemiology

During the 1999 legislative session, the division successfully sponsored or supported several statutory revisions related to rabies, immunizations, confidentiality of records and HIV/AIDS.

The division consists of 10 staff members who coordinate program activities, six field epidemiologists who conduct epidemiological activities throughout the state, and four support staff personnel. In addition, four agricultural health nurses are under contract with local public health units to conduct agriculture health and safety surveillance and intervention activities.

Cooperative agreements with the Centers for Disease Control and Prevention (CDC) and the

U.S. Department of Health and Human Services, Health Resources and Service Administration (HRSA), provide program assistance and financial support to the division.

Health care providers and laboratories statewide notify the division of mandated reportable diseases. During the biennium, division personnel investigated about 2,900 cases of reportable conditions. In addition, division personnel work closely with private health care providers, health care facilities, local public health units and residents to reduce the incidence of communicable diseases and to ensure the public health of North Dakotans.

### Division Accomplishments

- Investigated a meningococcal infection that caused one Williston-area child to die and two children to become ill. Vaccine was provided to Upper Missouri District Health Unit, which administered 4,550 doses to prevent additional cases. Division personnel conducted surveillance and provided information to the media and the public.
- Conducted a rabies investigation after a tiger injured a child at the 1998 North Dakota State Fair. The tiger was removed from the state before the rabies investigation was completed. Concern about possible exposure resulted in the child receiving rabies treatment.



North Dakota continues to have the lowest prevalence of HIV/AIDS in the nation.

- Investigated reports of human exposure to potentially rabid animals statewide. During the biennium, 294 animals tested positive for rabies and 166 people received treatment.
- Conducted five foodborne illness investigations in which about 700 people reported illness. The division worked closely with the Division of Food and Lodging, as well as local environmental health practitioners, to determine the causes of the illnesses and to ensure that food service businesses were preparing and serving food safely.

### **Immunization Program**

The role of the Immunization Program is to ensure that children and adults are protected against vaccine-preventable diseases. In addition, the program investigates suspected and confirmed cases of vaccine-preventable diseases and conducts active influenza surveillance.

Vaccine coverage levels for children remained high during the biennium. The National Immunization Survey (NIS) for the period of July 1997 to June 1998 showed that 84 percent of North Dakota children ages 19 months to 35 months were age-appropriately immunized. The Healthy People 2000 goal is 90 percent.

According to the NIS, the following immunization data apply to North Dakota children born between August 1994 and November 1996:

- 84%\* have 4 diphtheria/tetanus/pertussis (DTP), 3 polio and 1 measles/mumps/rubella (MMR)
  - 95% have 3 DTP
  - 87% have 4 DTP
  - 91% have 3 polio
  - 90% have 1 MMR
  - 93% have 3 *Haemophilus influenzae* type B
  - 87% have 3 hepatitis B
- \*The national average was 79 percent.*

### **Accomplishments**

- Received data for the statewide immunization registry from about 95 percent of providers.
- Annually purchased and distributed about 200,000 doses of vaccine for immunization of children and adults.
- Investigated 54 confirmed and suspected cases of pertussis. A total of 356 people were identified as close contacts, all of whom received follow-up treatment and testing as needed.
- Worked with the 1999 Legislative Assembly to pass legislation that requires hepatitis B immunization of children.
- Provided technical assistance to health care providers regarding immunization issues; e.g., laws, vaccine administration policies/standards and vaccine storage/handling concerns.
- Received no reports of the following diseases: diphtheria, measles, polio, rubella, Hib in children age 5 and younger, and tetanus.
- Developed an adult immunization card and annually distributed about 6,000 copies to local public health units and private providers.



NDDoH joined efforts with First Lady Nancy Jones Schafer and the Department of Human Services to promote the importance of immunizations. New parents now receive a congratulatory greeting card and a health record booklet in honor of their baby's birth.

### **Agriculture Health and Safety Program**

The goal of the Agriculture Health and Safety Program is to reduce the frequency and severity of agriculture-related injuries and illnesses through surveillance and educational efforts. Through cooperative agreements with the National Institute for Occupational Safety and Health (NIOSH), the program administered two grant awards during the biennium.

The first grant established two occupational injury/illness surveillance systems in the Red River Valley region. One system – hospital based in the communities of Fargo, Grand Forks and Grafton – identified agriculture-related injuries among children age 18 and younger. The second system – based in five community migrant health clinics – identified agriculture-related injuries and illnesses in the migrant worker population. In addition, migrant workers were surveyed to determine if they had received federally mandated EPA worker protection standards training.

The second grant evaluated the effectiveness of two adolescent agriculture safety education initiatives: a classroom presentation to fifth grade students about farm hazards and the NDSU Extension Service's tractor safety certification course. About 800 youth participated in these two programs during the biennium. Evaluation of the programs will be completed in 1999.

#### **Accomplishments**

- Assisted in the development and passage of a revised rabies statute for North Dakota.

### **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 clinical services, education, screening, interviewing and partner notification.

#### **Accomplishments**

- Received no reports of primary, secondary or early latent syphilis cases. Increased syphilis surveillance will become important as the nation embarks on a program to eliminate domestically acquired syphilis.
- Observed a 2.8 percent decrease in reported chlamydia cases, from 2,011 cases the previous biennium to 1,954 this biennium.
- Continued to participate in the Region VIII chlamydia project, along with South Dakota, Montana, Wyoming, Utah and Colorado.
- Observed a 93 percent increase in reported gonorrhea cases, from 88 cases the previous biennium to 170 cases this biennium.
- Conducted partner follow-up for gonorrhea cases. During the biennium, 200 partner contacts were initiated and 64 cases were diagnosed; of those, 68 percent received therapeutic or preventive treatment.
- Revised gonorrhea screening criteria because of low rates in some populations. As a result, family planning clinics no longer perform routine gonorrhea screening; instead, clinical or risk history is used as the screening criteria. The STD program supports selected screening for populations who continue to be at higher risk for contracting gonorrhea.

During the biennium, 15- to 19-year-old adolescents and 20- to 29-year-old young adults accounted for 84 percent of gonorrhea cases in the state. Females comprised 67 percent of the cases. As with chlamydia, females are more likely to be tested because of the disease's potential for reproductive complications.



Darian Schaubert, Diabetes Control program manager, discusses diabetes care with Miss America Nicole Johnson. A diabetic herself, Ms. Johnson visited North Dakota to help raise awareness during Diabetes Alert Month.

### **Diabetes Control Project**

The North Dakota Diabetes Control Project works to reduce the burden of diabetes by assisting health care providers and communities to implement programs that respond to the needs of people who have the disease. Diabetes is a major public health problem in North Dakota, associated with one out of every six deaths in 1997.

#### **Accomplishments**

- Established a surveillance system of diabetes-related births, deaths, complications and care practices.
- Assisted North Dakota Health Care Review Inc. and more than 20 medical centers to implement programs that improve diabetes care.
- Worked to improve insurance coverage of diabetes care, including coverage for uninsured children who have diabetes, managed care case management, and education by licensed registered dietitians and pharmacists.
- Established certified diabetes educators in regions of the state formerly without access to education services, increasing the number of state-recognized diabetes education centers from nine to 14.
- Coordinated with the American Diabetes Association to produce and distribute diabetes public awareness campaigns.
- Coordinated three professional education symposiums, 150 community education programs, and nine satellite education programs to promote diabetes care standards.

- Established a website with links to diabetes programs, organizations, services and education materials. The site was accessed more than 1,200 times during its first year of operation.
- Established regional networks to coordinate plans for improving access to diabetes education and preventive care services.
- Worked with various groups to implement culturally sensitive diabetes education programs for American Indians and Hispanic farm workers.
- Coordinated with the Department of Human Services to distribute diabetes educational campaigns to more than 800 senior citizen programs.
- Coordinated with the NDSU School of Pharmacy to implement a certified diabetes education program. Twelve pharmacists completed the program.
- Established a video library that includes about 40 diabetes care educational programs.

### **HIV/AIDS Program**

The **HIV Prevention Program**'s mission 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 performed at 16 contractual sites, including local public health units, family planning clinics, college health centers and drug abuse treatment centers. The services include pre- and post-test counseling, partner notification, referrals, and prevention education.

## Accomplishments

- Contracted with an advertising agency to develop and implement an HIV prevention media campaign. The campaign used radio, newspapers, posters, brochures and the Internet to promote HIV prevention messages. The campaign received several regional and national advertising awards.
- Collaborated with several other agencies to coordinate an annual HIV/AIDS symposium. The symposium is attended by more than 200 people, including medical professionals, students, teachers, social workers and HIV-infected and HIV-affected people.
- Developed a website that contains local HIV/AIDS statistics, conference and workshop agendas, local and national links and other program information.

The **HIV/AIDS Surveillance Program** monitors the epidemic through both surveillance activities and HIV incidence and prevalence studies. The program's mission is to implement and conduct HIV surveillance, to evaluate the performance of HIV/AIDS surveillance systems and to implement projects that enhance and extend the ability to plan for public health programs and resource allocation.

North Dakota continues to have the lowest prevalence of HIV/AIDS in the nation; through June 30, 1999, a total of 240 HIV infections had been reported in the state.

## Accomplishments

- Modified the *HIV Quarterly Report* to include information about sexually transmitted diseases. Renamed the *HIV/STD Report*, the publication provides updated information and data about the diseases.

The **Ryan White Comprehensive AIDS Resources Emergency (CARE) Act II Program** conducts activities to improve the quality, availability and organization of health care and support services to people who have HIV and their families. Program activities are administered by case managers at 10 local public health units throughout the state. Assistance covered by Ryan White funds is subject to limitation but includes services such as HIV/AIDS medications, home health care, nutritional supplements, hospice care and others as described by program policies. The Ryan White program is the payer of last resort.

Federal agencies mandated an increase in collaborative efforts between the Medicaid and Ryan White programs to ensure that resources available through Medicaid are accessed for Medicaid-eligible people.

The HIV/AIDS Advisory Board, which meets on an annual basis, recommended a change from 80 percent to 100 percent reimbursement for HIV/AIDS drugs.



The HIV prevention media campaign received several regional and national awards.

### Accomplishments

- Developed and distributed a state Ryan White manual, which contains information about program eligibility, reimbursement policies and Medicaid.

### **Tuberculosis Control and Elimination Program**

The Tuberculosis Control and Elimination Program's mission is to prevent, control and eventually eliminate TB in the state. Program activities include finding and reporting all cases of active TB, ensuring completion of therapy, finding and screening all people who have had contact with active and infectious cases of TB, evaluating them for TB infection and disease, conducting TB surveillance and offering laboratory services.

TB continues to be a disease of low incidence in the state, with an average of nine active cases per year reported during the last five years (1994 – 1998).

A total of 426 people were placed on preventive therapy for TB infection in 1998, an increase of about 60 percent from the previous year.



Disease Control Epidemiologist Julie Jacobson, RN, administers a tuberculin skin test during the TB outbreak in Lakota.

### Accomplishments

- Assisted Nelson/Griggs District Health Unit following the diagnosis of TB in three Lakota residents. During the investigation, 435 people were tested for TB exposure. Of those, 70 people tested positive and were prescribed preventive treatment.
- Investigated possible human exposure to tuberculosis from a herd of dairy cattle in Morton County. As a result, 106 people who were exposed to the herd or to unpasteurized dairy products underwent skin testing, and one person received treatment.

## State Epidemiologist

The primary responsibilities of the state epidemiologist include coordinating epidemiological studies, investigations and surveillance activities; conducting data analysis; and providing technical expertise and consultation with public and private health professionals. Additional responsibilities include collaborating with other state and federal health professionals to conduct disease surveillance, control, prevention and health intervention activities. The state epidemiologist also provides public health information to health care providers, community organizations and the media.

## Accomplishments

- Assisted in outbreak investigations, including foodborne illnesses, TB in Lakota, and meningococcal infections in Williston.
- Coordinated investigations of two methicillin-resistant *Staphylococcus aureus* (MRSA) outbreaks in medical facilities.
- Authored *Epidemiology of Reportable Conditions in North Dakota, 1994-1996*.
- Co-authored *Prevalence of Coxiella burnetii Infections Among North Dakota Sheep Producers*, Journal of Occupational and Environmental Medicine, Nov. 1998.
- Partnered with Altru Health System to conduct a study sponsored by the Robert Wood Johnson Foundation, *Epidemiological Study of Sentinel Health Conditions Associated with Flooding*.
- Served on a task force that evaluated the extent and effects of fuel oil exposure related to the 1997 Grand Forks flood.
- Assisted FEMA regarding potential health effects of exposure to flood-related mold.
- Initiated a surveillance program to monitor the extent of MRSA and vancomycin-resistant enterococcus infections in North Dakota.
- Served on a task force designed to develop a state plan for response to weapons of mass destruction (WMD).
- Made presentations on health-related issues to several groups, including the North Dakota Rural Health Conference, Bismarck; and the North Central Epidemiology Meeting, Chicago, Ill.

## Goals

- Continue to provide technical and epidemiological expertise to NDDoH, health care providers and the public.
- Assist local public health units, communities, health care providers and first responders to develop plans and training programs for response to WMD events.
- Assist in developing a plan to respond to an influenza epidemic.
- Assist in developing approaches to deal with the problem of antibiotic-resistant organisms.

## Senior Advisor for Health Policy

The senior advisor for health policy reviews NDDoH programs and policies and makes recommendations about program development to the state health officer and the State Health Council. In addition, the senior advisor prepares reports about the cost and utilization of health care services and drafts legislation and testimony related to health care issues.

## Accomplishments

- Drafted and testified in support of NDDoH-sponsored legislative bills.
- Testified before the Legislative Assembly on numerous other health care bills.
- Presented several reports on the cost, utilization and access to health care in North Dakota.
- Drafted and conducted hearings on three administrative rules.

## Ten Great Public Health Achievements

United States ~ 1900 to 1999

- Vaccination
- Motor-vehicle safety
- Workplace safety
- Infectious disease control
- Decline in deaths from coronary heart disease and stroke
- Safer and healthier foods
- Healthier moms and babies
- Family planning
- Fluoridation of drinking water
- Recognition of tobacco use as a health hazard

—Centers for Disease Control and Prevention

## Division of Microbiology

The Division of Microbiology (the Public Health Laboratory) provides diagnostic and referral services to physicians, veterinarians, clinics, hospitals, local public health units, other NDDoH divisions, other agencies and the public in the areas of bacteriology, mycology, mycobacteriology, parasitology, immunology, virology, and dairy and water bacteriology.

The laboratory conducts testing for many exotic diseases and emerging infections (i.e., hantavirus, rabies, encephalitis) that private hospitals and clinics don't have the expertise or resources to provide. The laboratory continues to serve as the state's central laboratory and certifying agency for the Food & Drug Administration (FDA) and the Environmental Protection Agency (EPA) dairy and water bacteriological testing programs.

### Microbiology Testing

A total of 28,431 HIV tests were completed during this biennium, compared to 25,873 the previous biennium.

In addition, the following specimens were tested:

- 32,383 chlamydia
- 10,014 gonorrhea
- 9,350 prenatal hepatitis
- 3,109 tuberculosis
- 1,783 parasite
- 908 rabies
- 3,945 dairy products
  - \* 1,450 Grade A pasteurized
  - \* 969 Grade A raw
  - \* 689 Grade B raw
  - \* 837 frozen desserts
- 20,469 waters
  - \* 8,688 communities
  - \* 1,577 non-communities
  - \* 1,146 lagoons
  - \* 708 Indian health
  - \* 2,760 private wells
  - \* 3,448 rivers and lakes
  - \* 1,222 swimming pools
  - \* 918 dairy waters

### Accomplishments

- Passed three federal certifications: FDA Grade A dairy product testing, EPA safe drinking water testing and HCFA clinical testing.
- Changed mailing containers to reflect user-needs survey. New mailers that meet federal guidelines for interstate shipping were implemented in TB, parasitology and immunology.
- Updated and distributed *1999-2001 Directory of Services*.
- Performed evaluations of 21 laboratories, including 10 appendix N dairy labs, three Grade A dairy product testing labs, and eight water labs.
- Provided training and continuing education courses for laboratorians and health care providers, including two on-site workshops and 40 teleconferences.
- Completed customer satisfaction and educational needs surveys.

### Goals

- Implement confirmatory testing of reportable diseases; evaluate fingerprinting technology for epidemiologic tracking.
- Re-evaluate fully automated TB test system.

# Environmental Health Section

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The Environmental Health Section's five divisions work closely with the federal Environmental Protection Agency (EPA) 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
- Environmental Engineering
- Waste Management
- Municipal Facilities
- Water Quality

Division activities are coordinated by the section chief's office. Employees in this office oversee quality assurance procedures and coordinate computer and data management activities, as well as environmental emergency response efforts.

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

The section chief's office coordinates the annual State/EPA Agreement. This agreement defines the scope of environmental program responsibilities and commitments made by the section and the EPA.

An assistant attorney general, located in 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 works to safeguard the quality of North Dakota's air, land and water resources.

## Division of Chemistry

The Division of Chemistry provides analytical services and laboratory certification to a variety of environmental protection, public health, agricultural and petroleum regulatory programs.

NDDoH's environmental protection programs use analytical data generated by the laboratory to regulate air quality; solid and hazardous waste; municipal wastewater; agricultural runoff; surface, ground, and drinking water quality; petroleum products; and other media of environmental or public health concern.

The Department of Agriculture uses analytical data generated by the laboratory to regulate pesticides, livestock and pet foods, and agricultural and home-use fertilizers, and to verify instances of misapplication of pesticides.

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

- **Biochemical Oxygen Demands Analytical Laboratory:** Performs tests such as biochemical oxygen demand, total suspended solids and chemical oxygen demand. The lab provides analytical data used to determine compliance with permit requirements of municipal and industrial wastewater discharges.



Dean Woehl, laboratory technician, tests a gasoline sample to determine its octane rating.

- **Feed and Fertilizer Lab:** Provides analytical data to the Department of Agriculture. This lab tests agriculture feeds and fertilizers, as well as 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, 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 multiple matrices. Matrices include drinking, surface and ground water; soil; river and lake sediments; foliage; fish tissue; sludge; oil; landfill wastes; pesticide formulations; and other environmental sources.
- **Petroleum Lab:** Tests petroleum products such as gasoline and diesel for product quality.
- **Radiation Lab:** Identifies and quantifies radioactive elements in public drinking water supply systems and radon analyses. The laboratory also participates in a nationwide monitoring program that looks at the trends in background radiation through bulk air samples.
- **Spectroscopy Lab:** Identifies and quantifies metal concentrations in drinking water sources and distributions, surface and ground water resources, fish, hazardous and solid wastes, river and lake sediments, and other environmental media.

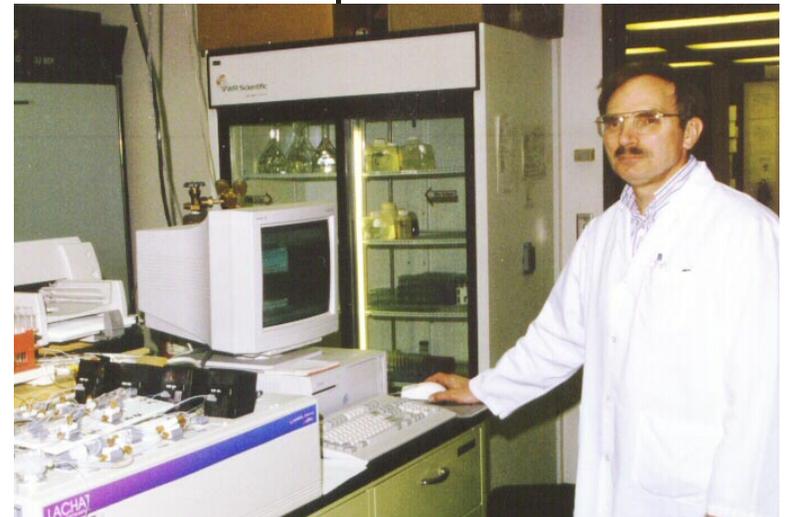
## Accomplishments

- Continued to assist the Environmental Health Section during environmental emergencies. The laboratory provides 24-hour services during major emergencies to ensure timely response.
- Provided analytical support to help public water systems comply with federal and state drinking water rules and regulations. About 5,900 samples were tested for more than 25,000 analytical components, including nitrates, metals such as lead and copper, fluoride, pesticides and volatile organic compounds such as benzene and toluene.
- Provided the analytical services necessary to monitor ground water quality across the state. Testing included nitrates, metals, pesticides and general 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 in addition to routine analyses. For example, the division analyzed ground water from the Oakes Aquifer for nitrate contamination from various sources, including agricultural production.
- Established an Internet website to provide information about the division's services, sample submission procedures, analytical procedures, quality assurance plan and other general topics.
- Continued to participate in several laboratory performance evaluation programs, which the division regularly completes successfully. In addition, the division certifies the state's environmental laboratories and offers reciprocal certification for out-of-state laboratories.

- Participated in the development of standards for a proposed national environmental laboratory accreditation program. The division also continued to provide information to other laboratories through training and conferences.
- Analyzed nearly 33,000 samples for more than 320,000 analytical parameters.

## Goals

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



Dennis Jones, chemist, analyzes samples for nitrates.

## Division of Environmental Engineering

Responsibilities of the Division of Environmental Engineering include air pollution control, radiation control and occupational safety and health onsite consultation. Staff members also provide technical assistance during emergency response efforts.

### Air Pollution Control Program

The Air Pollution Control Program is responsible for protecting the state's air quality. Staff members promote clean air activities and initiate enforcement actions to correct air pollution problems.

Major activities include issuing conditional permits for the construction and operation of sources that emit air pollution, registering oil and gas wells, investigating air pollution complaints and operating a statewide ambient air quality monitoring network.

### Accomplishments

- Provided assistance to small businesses that operate sources in the following categories: dry cleaners, chrome platers, halogenated solvent cleaners, wood furniture manufacturers and aerospace manufacturers.

- Processed 90 percent of submitted Title V permit applications.
- Initiated rule revisions and program development for several state and federal programs.
- Conducted system and/or performance audits of three of the five industries that report ambient air quality data to NDDoH.
- Developed and initiated operation of an air quality monitoring network along the U.S./Canadian border through a cooperative effort with Canadian officials.
- Audited and monitored emission tests at more than 120 sources.
- Responded to more than 100 air pollution complaints.
- Completed all inspections required by state/EPA agreements.
- Issued Notices of Violation (NOV) against five major sources.
- Signed a consent agreement with Dakota Gasification Company that included a civil penalty of \$1.3 million for violations at their coal gasification plant near Beulah.

### Goals

- Process the remaining Title V permit applications.
- Implement Maximum Achievable Control Technology standards at applicable sources.
- Implement the regional haze reduction program.
- Implement the compliance assurance emissions monitoring program.



NDDoH has issued more than 50 Title V permits as required by the Clean Air Act.

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### **Occupational Safety and Health Program**

At the request of employers, the Occupational Safety and Health Program provides onsite safety and health consultation surveys that focus on physical and chemical hazards found in workplace environments.

The program has provided information and training to small businesses about topics emphasized by the federal Occupational Safety and Health Administration, including silica, trench hazards and fall protection in grain handling industries. Staff members also provide interpretation of federal standards for workplace safety.

#### **Accomplishments**

- Performed about 260 health and worker safety surveys at the request of employers.

#### **Goals**

- Promote onsite consultations with employers targeted by new OSHA rules and policies.

### **Radiation and Asbestos Control Program**

The Radiation and Asbestos Control Program monitors the development and use of ionizing and nonionizing radiation sources to protect the health and safety of North Dakotans and the environment. The program also regulates asbestos through a contractor licensing, worker certification and inspection program.

The program licenses radioactive material users and registers X-ray facilities. Staff members track about 75 radioactive material licensees and more than 750 X-ray registrants. The

program also includes a radon education outreach program and a nonoccupational indoor air quality program.

#### **Accomplishments**

- Provided professional training and technical assistance to local public health units in response to indoor air quality concerns related to excessive moisture. In addition, the program responded weekly to between eight and 10 citizen calls about the issue. The program also established agreements with the American Lung Association to assist in outreach activities.
- Annually inspected all facilities that provide mammography services for compliance with the Mammography Quality Standards Act. An additional 120 X-ray facilities were inspected for compliance with state rules.
- Passed a program review by the United States Nuclear Regulatory Commission, which found the program to be adequate to protect public health and safety and compatible with federal requirements.
- Developed a newsletter to improve communication between NDDoH and the regulated community.
- Created radon partnerships with 15 local public health units, the American Lung Association of North Dakota and two home builder and realtor organizations. The purpose was to extend radon education to the public and



The Occupational Safety and Health Program performed about 260 health and worker safety surveys during the biennium and identified nearly 750 serious or life-threatening hazards.

various trade groups. Direct intervention resulted in radon mitigation or reduction in several schools and public buildings.

- Distributed a summary of asbestos requirements to 5,000 contractors each year.

#### Goals

- Continue efforts to raise awareness and provide mitigation of radon in all buildings.
- Enhance response to indoor air quality problems by direct intervention and assistance to local public health personnel.
- Improve radiation safety through better public outreach and education, as well as increase compliance inspection frequency through restructuring and improved efficiency.
- Improve local and city government participation in informing contractors of the asbestos requirements related to demolition and renovation of buildings.

## Division of Waste Management

The Division of Waste Management administers several programs that safeguard the safety and environmental health of North Dakotans. These programs are designed for generators of solid and hazardous waste and operators of underground storage tanks.

The division includes the following:

- Hazardous Waste
- Polychlorinated Biphenyls (PCB) Inspection

- Underground Storage Tank
- Solid Waste
- Abandoned Motor Vehicle

### **Hazardous Waste Program**

The Hazardous Waste Program regulates facilities that generate, store, treat, dispose of or transport hazardous waste. The program works to ensure safe waste management so that hazardous waste generated or managed in North Dakota does not adversely affect human health or the environment. The program also encourages minimizing or eliminating the generation of hazardous waste.

#### Accomplishments

- Conducted permitting and routine inspections of the regulated community, which consists of about 750 businesses that have notified the division of hazardous waste activity. This includes about 180 small quantity generators, 35 transporters, 13 large quantity generators and nine permitted treatment, storage and disposal facilities.
- Provided training sessions for small businesses that generate hazardous waste. The purpose of the training was to help businesses comply with hazardous waste rules. About 200 people attended the training.
- Reissued permits to three facilities and modified or approved modifications to several existing permits. Five facilities are conducting corrective action to investigate, and, if necessary, remediate contaminated soil or ground water.



The Division of Waste Management provides technical assistance in the removal and disposal of hazardous waste.

All five facilities have controlled exposure to humans and four have controlled releases to ground water.

- Directed clean-up activities at a closed hazardous waste storage facility.
- Inspected about 100 facilities that generate or manage hazardous waste. Several facilities requested compliance assistance visits to determine what actions, if any, were needed to meet requirements.

#### Goals

- Reissue appropriate hazardous waste permits.
- Continue to review investigation reports, proposed remedies and remediation progress at facilities with corrective action permits.
- Conduct training that provides a general overview of regulations and requirements and helps businesses comply with state rules. The training may be expanded to include other programs within the Environmental Health Section.
- Maintain partnership between the program and the regulated community. This partnership has had a positive impact on the regulated community's compliance, which protects public health and the environment from mismanagement of hazardous waste in North Dakota.

#### **Polychlorinated Biphenyls (PCB) Inspection Program**

The PCB Inspection Program, funded through an EPA Toxic Substance Control Act grant, conducts inspections at facilities or sites known or suspected to have equipment containing PCBs.

#### Accomplishments

- Conducted about 35 inspections, with emphasis on electrical utilities and facilities that had not been inspected for several years. Inspection reports were forwarded to EPA, which, in some cases, initiated enforcement action for noncompliance with federal rules.
- Encouraged facilities to manage unregulated PCB articles, such as fluorescent light ballasts, in the same manner they manage regulated PCB articles.

#### Goals

- Continue the PCB inspection program, which is viewed as successful by EPA and is popular with the regulated community. North Dakota is one of only six states that received federal grant monies to administer a PCB inspection program in lieu of EPA inspections.

#### **Underground Storage Tank Program**

The Underground Storage Tank (UST) Program defines the types of tanks which may be installed, establishes technical standards for the installation and operation of underground storage tanks, maintains a tank notification program, establishes financial responsibility requirements for tank owners and provides for state inspection and enforcement.

UST regulations were developed to ensure attainment of the following goals: find leaks and spills, correct problems created by leaks and spills, prevent future leaks and spills, and ensure that owners and operators of USTs can pay to



NDDoH provides guidance for the demolition of sites that may contain hazardous waste.

correct the problems created by leaking tank systems. Leaking USTs may contaminate nearby ground water and may cause fires or explosions that threaten human safety.



The Division of Waste Management assists in the closure of abandoned underground storage tanks.

#### Accomplishments

- Regulated 715 active tank facilities, for a total of 2,503 tanks. Compliance is monitored by a mail-in self-certification process, as well as onsite visitations. The program observed 444 tank closures, conducted 480 onsite inspections, and investigated and monitored cleanup of 130 leaking UST sites.
- Utilized 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 identified. Thirty-five site investigations were conducted; 10 have progressed to cleanups and four have been completed.

- Emphasized public outreach to inform tank owners about operating and replacement regulations that required tank and piping replacement or upgrade by Dec.22, 1998. The UST Program achieved 100 percent compliance with this requirement. More than 6,500 underground storage tanks have been removed during the 10 years the program has been in existence. Many of these tanks leaked or had the potential to leak.

#### Goals

- Assist tank owners with contamination assessment/cleanup activities following upgrade and/or replacement of USTs.
- Provide compliance monitoring and inspections, along with public outreach, to inform tank owners about the proper operation of USTs (e.g., leak detection, spill reporting, etc.).
- Utilize LUST Trust Fund money to investigate and properly close numerous abandoned UST sites throughout the state.

#### The Solid Waste Program

The responsibility of the Solid Waste Program is to plan for and regulate the safe collection, transportation, storage and disposal of inert, industrial, special and municipal solid wastes. The program promotes resource recovery, waste reduction and recycling systems that preserve and enhance the quality of our natural resources. The program assists individuals, businesses and communities in providing efficient, environmentally acceptable solid waste management systems.

#### Changes

Changes were made to Article 33-20 NDAC, regarding agricultural waste. The new rules require that materials resulting from the processing of agricultural crops and livestock be used beneficially without adversely impacting the environment.

## Accomplishments

- Regulated 289 waste haulers, 14 municipal solid waste landfills, 31 transfer stations used to facilitate transport of municipal solid waste and other waste, two industrial waste landfills, 21 special waste (energy and oil industry) landfills and 172 inert waste landfill facilities.
- Oversaw the permitting, construction and operation of three new landfill facilities for ash waste from the state's largest power plants. In addition, the operations of two oil field waste facilities were upgraded to treat oily waste before disposal, helping to reduce toxicity and to prevent potential environmental impact.
- Facilitated the permitting and construction of a medical waste treatment facility in Valley City.
- Assisted in a number of voluntary evaluations and cleanups of scrap metal/auto salvage facilities. Developed new guidelines to help metal salvage facilities prevent pollution of ground and surface water.
- Worked with the city of Washburn and Ottertail Power Company to reclaim an old ash disposal site near the Missouri River.
- Helped to evaluate potential loss of competition in waste services for a seven-county area. Working closely with the U. S. Department of Justice and the North Dakota Attorney General's staff resulted in the establishment of a rate guarantee for existing contracts.
- Required the cleanup of several unpermitted manure disposal sites near the Sheyenne River, as well as cleanup of a meat packing plant.

- Conducted annual landfill operator training and certification sessions attended by about 40 landfill operators and solid waste professionals.
- Worked with the coal industry to develop means to utilize coal combustion ash for low-strength flowable fills, road construction, etc.
- Cohosted the 1998 and 1999 Solid Waste Symposiums to educate civic leaders, interested citizens and solid waste professionals about integrated waste management.
- Made numerous presentations to interested groups across the state. Using Project Learning Tree materials, the program cohosted teacher training workshops that focused on recycling and municipal solid waste management. Four statewide recycling and solid waste conferences were held.
- Worked closely with various non-profit organizations, such as Keep North Dakota Clean and the North Dakota Recyclers' Association. The program developed educational materials, hosted annual workshops, and partnered in federal and foundation grant opportunities.

### **Abandoned Automobile Program**

The Abandoned Automobile Program focuses on assisting local public health units to complete cleanup of scrap metal around the state. Three health units are targeting small "one site" cleanups that have been concerns for years and that contain abandoned or stored car bodies and other scrap metal.



The Division of Waste Management assists local public health units to clean up abandoned automobiles.

### Accomplishments

- Increased public awareness activities in small communities, including education about litter prevention, abatement and illegal dumping.
- Provided more easily accessible AAP funds for small, one-time cleanups.

## Division of Municipal Facilities

The division consists of four programs that help municipalities and other political subdivisions maintain public health and safety: the Public Water

Supply Supervision (PWSS) Program; the Operator Training, Certification and Facility Inspections Program; the Clean Water State Revolving Loan Fund (CWSRF) Program; and the Drinking Water State Revolving Loan Fund (DWSRF) Program.

### **Public Water Supply Supervision Program**

The PWSS Program works with the 567 public water systems in North Dakota to ensure that drinking water meets all standards established by the Safe Drinking Water Act (SDWA). This is accomplished by

monitoring contaminants, providing operator training and certification, conducting sanitary

surveys, reviewing plans and specifications, and providing technical assistance. The program also administers 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 trains and certifies 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 816 certified operators in the state.

Four inspectors/trainers annually inspect about 835 public water and wastewater systems and inert landfills 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 Fund**

The DWSRF Program provides low-interest loans to help public water systems finance the infrastructure needed to comply with the SDWA. Funding is expected to continue at least through fiscal year 2003, during which about \$75 million will be provided to maintain the fund. To date, loans totaling about \$21.6 million have been approved to assist North Dakota water systems.

Program staff members also review about 150 drinking water projects each year. The reviews ensure that new or modified public water system facilities meet state design criteria before



Division of Municipal Facilities activities help to ensure the availability of safe drinking water.

construction. The reviews help ensure that the facilities achieve desired public health objectives and can be properly operated and maintained.

**Accomplishments**

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

**Goals**

- Maintain responsibility for federally mandated programs.

**Clean Water State Revolving Fund**

The CWSRF Program provides low-interest loans to fund conventional wastewater and nonpoint source pollution control needs.

Funding for the program is expected to continue at least through fiscal year 2005 and will provide about \$100 million to maintain the revolving loan fund. Eligible borrowers can obtain financing to build wastewater treatment works at below market interest rates. In addition, staff members review plans for new and modified wastewater systems; about 125 plans are reviewed each year.

Abercrombie	Wastewater Treatment	\$300,875
Berthold	Interceptor Sewer	82,875
Carrington	Sewer Rehabilitation	805,000
Casselton	Stormwater Sewer	125,000
Christine	Wastewater Treatment	400,000
Cooperstown (Increase)	Sewer Rehabilitation	125,000
Enderlin	Interceptor and Stormwater Sewer	385,000
Fargo	Wastewater Treatment	1,800,000
Fargo	Wastewater Treatment	10,781,484
Frontier	Stormwater Sewer	109,000
Gackle	Wastewater Treatment	160,700
Grand Forks	Wastewater Treatment	13,700,000
Grand Forks	Stormwater Sewer	3,940,000
Grand Forks	Stormwater Sewer	4,290,000
Grandin	Interceptor Sewer	101,600
Granville	Sewer Rehabilitation	42,000
Gwinner	Interceptor Sewer	304,000
Hillsboro	Wastewater Treatment	360,000
Horace	Wastewater Treatment	290,000
Jamestown	Landfill	2,375,000
Kindred	Wastewater Treatment	1,450,000
Lakota	Sewer Rehabilitation	2,120,000
Mandan	Wastewater Treatment	5,400,000
Mapleton	Wastewater Treatment	190,000
Minnewaukan	Wastewater Treatment	218,000
Reiles Acres (Fargo)	Wastewater Treatment	210,000
Sanborn	Sewer Rehabilitation	76,588
SE Cass WRD	Collection System	214,000
Taylor	Wastewater Treatment	86,500
Wimbledon	I & I Correction	132,000
Wishek	Wastewater Treatment	165,000
<b>Total</b>		<b>\$50,739,622</b>

## 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.

NDDoH is largely responsible for monitoring the quality of the state's lakes, streams and rivers. 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 in North Dakota and the nation has improved since passage of the Clean Water Act in 1972, but much remains to be done if the goal of restoring and maintaining the quality of the state's and nation's waters is to be achieved.

## 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 some major point sources; for example, municipal and industrial wastewater treatment facilities.

Since 1975, the North Dakota Pollutant Discharge Elimination System Program has issued about 500 wastewater discharge permits (25 percent industrial and 75 percent municipal). Since 1992, the program has required permits for storm water discharges/runoffs from industrial facilities. Currently, about 500 facilities are covered by general permits for storm water discharges. In addition, program staff members have been working with major municipalities on the development and implementation of a guidance document for snow disposal/storage.

Impacts to water from livestock operations are an increasing concern in North Dakota. Currently, more than 900 livestock facilities have been approved to operate. Most of these are cattle-wintering, hog, and dairy facilities that are part of a farmer's total farm operation. However, the number of confined feeding operations for turkeys, hogs and dairy cattle has increased the past few years. As a result, the division has updated its approval process to require better management of animal waste.



The Division of Water Quality oversees proper manure handling at large confinement facilities.

## Accomplishments

- Continued to provide educational materials to livestock producers and the public about the impact livestock waste has on the state's waters. In addition, the division continued to work closely with various local, state and federal entities and producer groups to provide information about livestock pollution concerns and state regulations.

### **Nonpoint Source Pollution Management Program**

Most threatening to 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.

Efforts to control NPS pollution are primarily achieved through the North Dakota NPS Pollution Management Program, which came into existence in 1987 with the addition of Section 319 to the Clean Water Act. Under Section 319, EPA is authorized to award grants to state or local groups to control NPS pollution. The NPS Pollution Task Force provides input and recommendations about local projects funded through Section 319. The task force is comprised of representatives from a number of public and private entities. The Division of Water Quality is responsible for administering these funds and implementing the NPS Pollution Management Program in North Dakota.

## Accomplishments

- Provided financial support to 48 projects since 1990. Of these projects, 30 are currently active and 18 have been completed. While the size, type and target audiences of these projects may vary significantly, they all share the same basic goals:
  - \* To increase public awareness of NPS pollution
  - \* To reduce and/or prevent delivery of NPS pollutants to waters of the state
  - \* To disseminate information about solutions to NPS pollution

### **Surface Water Management**

Historically, surface water quality monitoring conducted by the division consisted of a network of chemical monitoring stations. Typical water quality variables for which monitoring was conducted included temperature, dissolved oxygen, pH, major ions, nutrients (i.e., phosphorus, ammonia, nitrate) and fecal coliform bacteria. Currently, the division has 27 ambient chemical monitoring sites across the state. The division will maintain these as long-term monitoring sites for the purpose of assessing water quality trends and to describe the general chemical character of the state's major river basins.



Eric Pearson, environmental scientist, displays a catfish that will be tested for mercury and other contaminants.

### Accomplishments

- Expanded the program's biological monitoring program to include the Lower Red River, Souris River and James River basins. The department will add monitoring in the Upper Missouri River/Lake Sakakawea Basin in 1999 and the Lower Missouri River/Lake Oahe Basin in 2000. Beginning in 2001, this "rotating basin" approach will start over with the Upper Red River Basin. The division has increased the number of monitored sites each year, resulting in an improvement in both the quantity and quality of data collected from the state's rivers and streams.
- Began monitoring mid- and large-sized reservoirs in the state, including Lake Darling and Upper Des Lacs reservoirs in 1997, Jamestown and Pipestem reservoirs in 1998 and lakes Sakakawea and Oahe in 1999.
- Monitored for mercury and other contaminants by collecting fish from the state's lakes and rivers. At the end of the biennium, fish consumption advisories for mercury existed for 20 lakes and two rivers. The advisory is updated each April.

### **Ground Water Program**

Nearly 95 percent of the state's rural population and 60 percent of the state's total population rely on ground water to supply water for daily consumption. Agriculture and industry also use large quantities of water on a routine basis.

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 (BMPs) for NPS pollution. The degree to which contamination incidents are investigated or remediated depends on the contaminant, its impact on the beneficial use of the resource and the overall risk it poses to the public or the environment.

### Accomplishments

- Completed ambient ground water quality monitoring programs for more than 1,000 monitoring wells during a five-year period.

### **Wellhead Protection Program**

The Wellhead Protection Program protects ground water resources by addressing the link between land uses and ground water quality. Potential contaminant sources in a defined protection area around a community's drinking water wells are identified. Communities then can determine if these sources should be removed, restricted or monitored.

### Accomplishments

- Received EPA approval of the North Dakota Source Water Assessment Plan. The plan defines the establishment of surface and ground water assessment areas for community and noncommunity public drinking systems.



### **Underground Injection Control Program**

The Underground Injection Control (UIC) Program helps prevent contamination of underground sources of drinking water by injection wells, such as domestic or industrial wastewater disposal wells.

#### Accomplishments

- Developed a UIC Class V implementation strategy to help identify problem wells.

#### Division Goals

- Include a watershed approach in all monitoring, assessment and control programs.
- Develop BMPs for agricultural chemical storage facilities; design BMPs to minimize nutrient loadings to ground water from irrigated land.
- Enhance federal funding for source water protection areas. This funding will be used to help local public water supply systems manage source water protection areas, including well-head protection areas.
- Increase funding for NPS pollution projects to ensure that sufficient resources are available to address NPS pollution in the state.
- Expand the Livestock Waste Pollution Prevention Program, including public education and cooperation with other entities to implement approved, nonpolluting livestock waste systems.
- Increase public awareness of the proper construction, use and potential hazards of underground injection wells.
- Emphasize concerns about stormwater discharges by industries in selected watersheds.

- Refine and expand the monitoring and assessment of aquatic life.
- Expand monitoring for toxics, revise information about toxics and develop criteria that include pesticides currently in use.
- Increase funding for restoration of lakes. Although the list of potential clean lakes projects is growing, funds virtually have disappeared.
- Improve Geographic Information System (GIS) capabilities to help ensure multi-agency and public access to water quality data. Better access is valuable for the management of water resources.
- Improve communication and data sharing among local, state and federal agencies to enhance management of water resources and to eliminate duplication of efforts.
- Finalize revision of North Dakota's standards of water quality. The revised standard is more user-friendly, utilizes the most current information to ensure protection of human and aquatic life, supports the state's commitment to protect each body of water's designated uses, and outlines the department's regulation of point source discharges.



Greg Sandness, environmental scientist, takes flow measurements in a North Dakota river.

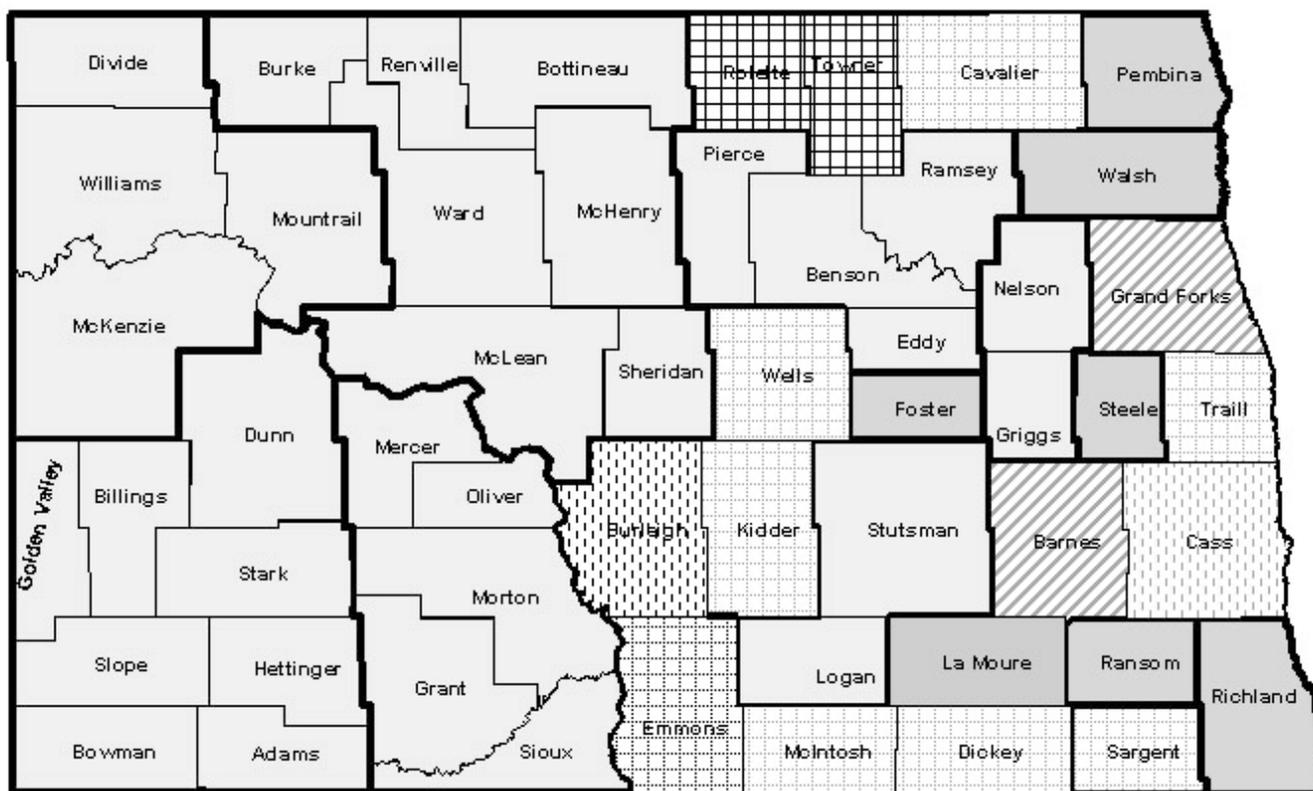
# Local Public Health Units

North Dakota's public health system is made up of 26 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, and disease prevention and control. Some local public health units maintain environmental health programs; others partner with NDDoH to

provide environmental services, such as public water system inspections, nuisance and hazard abatement, and food service inspections.

Adopted by the 1999 legislature, N.D.C.C. Chapter 23-35 requires every county to have a LPHU. At the end of the biennium, Dickey and LaMoure counties were in the process of organizing health units; Rolette and Towner counties are required to implement health units by Jan. 1, 2001.



- Multi County Health District
- Single County Health District
- City/County Health District
- City/County Health Department
- Single County Health Department
- None

Health Unit	Location	Administrators
<b>Bismarck-Burleigh Nursing Service</b>	Bismarck	Paula Flanders, RN
<b>Cavalier County Health District</b>	Langdon	Terri Gustafson, RN
<b>Central Valley Health Unit</b>	Jamestown	Sharon Unruh, RN
<b>City-County Health Department</b>	Valley City	Marcy Grant, RN
<b>Custer District Health Unit</b>	Mandan	Keith Johnson
<b>Dickey County Health District</b>	Ellendale	Robert Carlson
<b>Emmons District Health Unit</b>	Linton	Bev Voller, RN
<b>Fargo Cass Public Health</b>	Fargo	Mary Kay Herrmann, RN
<b>First District Health Unit</b>	Minot	Lisa Clute
<b>Foster County Health Department</b>	Carrington	Jean Kulla, RN
<b>Grand Forks Public Health Department</b>	Grand Forks	Don Shields
<b>Kidder County District Health Unit</b>	Steele	Lana Fischer
<b>Lake Region District Health Unit</b>	Devils Lake	Karen Halle, RN
<b>LaMoure County Health Department</b>	LaMoure	Tony Hanson
<b>McIntosh District Health Unit</b>	Ashley	Maureen Kosiak, RN
<b>Nelson/Griggs District Health Unit</b>	McVille	Julie Ferry, RN
<b>Pembina County Health Department</b>	Cavalier	Mary Sandison, RN
<b>Ransom County Health Department</b>	Lisbon	Deb Bergstrom, RN
<b>Richland County Health Department</b>	Wahpeton	Kathy McKay, RN
<b>Sargent County District Health Unit</b>	Forman	Colleen Sundquist
<b>Southwestern District Health Unit</b>	Dickinson	Carlotta Ehlis
<b>Steele County Public Health Department</b>	Finley	Diane Jacobson, RN
<b>Trail District Health Unit</b>	Hillsboro	Brenda Stallman, RN
<b>Upper Missouri District Health Unit</b>	Williston	Janice Trimmer
<b>Walsh County Health Department</b>	Grafton	Betty Jo Misialek, RN
<b>Wells County District Health Unit</b>	Fessenden	Karen Volk, RN



# Advisory Groups

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## State Health Council

### **CHAIR**

**Howard C. Anderson, R.Ph.**, health care, Turtle Lake

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## Physician Advisory Committee

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# Financial Summary

## North Dakota Department of Health Comparative Statement of Appropriations and Expenditures

For the Period July 1, 1997, through June 30, 1999

Use of Funds	Original Appropriation	Emergency Commission Mar-98	Adjusted Appropriation	Expenditures	Unexpended Appropriation
Salaries & Wages	\$ 24,851,601		\$ 24,851,601	\$ 23,784,588	\$ 1,067,013
Operating Expenses	31,307,181	386,000	31,693,181	27,811,640	3,881,541
Equipment	1,230,440	165,000	1,395,440	1,366,510	28,930
Capital Improvements	28,143		28,143	0	28,143
Grants	19,537,146	1,087,000	20,624,146	17,765,806	2,858,340
Total	<u>\$ 76,954,511</u>	<u>\$ 1,638,000</u>	<u>\$ 78,592,511</u>	<u>\$ 70,728,544</u>	<u>\$ 7,863,967</u>
General Funds	\$ 14,934,440		\$ 14,934,440	\$ 14,790,155	144,285
Federal Funds	56,369,609	1,252,000	57,621,609	51,638,856	5,982,753
Special Funds	5,650,462	386,000	6,036,462	4,299,533	1,736,929
Total	<u>\$ 76,954,511</u>	<u>\$ 1,638,000</u>	<u>\$ 78,592,511</u>	<u>\$ 70,728,544</u>	<u>\$ 7,863,967</u>

**North Dakota Department of Health  
Appropriations Report by Section**

**For the Period July 1, 1997, through June 30, 1999**

Use of Funds	Administrative Services Section	Health Resources Section	Preventive Health Section	Environmental Health Section	Total Expenditures
Salaries & Wages	\$ 3,737,431	\$ 3,586,964	\$ 5,744,774	\$ 10,715,419	\$ 23,784,588
Operating Expenses	1,236,477	824,179	21,466,844	4,284,140	27,811,640
Equipment	503,300	68,607	189,683	604,920	1,366,510
Capital Improvements	0	0	0	0	0
Grants	202,850	544,038	14,245,229	2,773,689	17,765,806
Total	<u>\$ 5,680,058</u>	<u>\$ 5,023,788</u>	<u>\$ 41,646,530</u>	<u>\$ 18,378,168</u>	<u>\$ 70,728,544</u>
Total FTE's	45.0	48.0	79.5	135.5	308.0