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<th>Page</th>
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<td>32</td>
<td>Health Resources</td>
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<td>36</td>
<td>Medical Services</td>
</tr>
<tr>
<td>44</td>
<td>Environmental Health</td>
</tr>
</tbody>
</table>
The DoH comprises six sections committed to the health of North Dakota:

- Fiscal & Operations
- Healthy & Safe Communities
- Health Resources
- Medical Services
- Environmental Health
- Emergency Preparedness & Response

The DoH partnered with Vision Zero to work toward eliminating motor vehicle crash fatalities and serious injuries.

For example: the Office of the State Epidemiologist automated autism reporting by connecting to the ND Health Information Network using existing technology; this improved reporting by over 150%.

The Environmental Health Section became the Department of Environmental Quality on April 29, 2019.

The Division of Medical Marijuana implemented and established a medical marijuana program within the state.

Held Admin Expenses to 3.2%

Technology Improving Outcomes

364 Dedicated Team Members

New Agency

New Division
Our Purpose
Our purpose to EMPOWER PEOPLE, IMPROVE LIVES and INSPIRE SUCCESS is rooted in everything we do. At the end of the biennium, our team updated the strategic plan. They dreamt big and made ambitious plans to work to meet our mission to improve the length and quality of life for all North Dakotans.

How We Help
During the 2017-2019 biennium, the NDDoH was made up of six sections: Environmental Health, Emergency Preparedness & Response, Fiscal & Operations, Health Resources, Healthy & Safe Communities and Medical Services. These sections encompass divisions that support evidence-based programs and work that’s critical to the health of North Dakota. In the following pages of the Biennial Report, you’ll be able to read about the NDDoH, each section, division and program, along with accomplishments of the last biennium and goals for the next biennium. I’m confident that through these pages, you’ll see the talent of our team.

As directed by the 2017 legislative session, on April 29, 2019, the Environmental Health Section separated into the North Dakota Department of Environmental Quality. The work to separate the two, while maintaining shared accounting and human resources services, was a big undertaking, a success and showcases how efficiencies can be created when we work as one.

Healthy & Vibrant Communities
Through public and private partnerships empowered via the Main Street Initiative, we are able to improve the health and wellness of children, adults, and families in their communities. We cannot do this alone. It takes a dedicated team, successful partnerships, good leadership, financial resources, and an engaged public to create the kind of healthy North Dakota that we know is possible when we all work together. We hope you enjoy what you read.

Who We Serve
As a part of Team ND, we serve all citizens of the state including our tribal neighbors that share common geography. In order to meet our common goals, we must embed health equity into the culture of our department, so it becomes second-nature. In this biennium, we initiated structural changes to our agency to advance that goal. Establishing the Office of the State Epidemiologist has resulted in significant success in collaboration on data within the department and also with external partners. We hired a part-time health equity coordinator and finalized our first Health Disparities Report, as well as held our first Health Equity Summit.

Mylynn Tufte, MBA, MSIM, RN
State Health Officer

Mylynn Tufte, MBA, MSIM, RN
State Health Officer
OUR MISSION
Improve the length and quality of life for all North Dakotans

OUR PURPOSE
Empower People | Improve Lives | Inspire Success

DEPARTMENT OVERVIEW

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

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

Overview
The NDDoH employs approximately 364 people dedicated to making North Dakota a healthier place to live.

Employees in these sections provide the following core public health services promulgated by Public Health in America:
• Preventing epidemics and the spread of disease
• Protecting against environmental hazards
• Preventing injuries
• Promoting and encouraging healthy behaviors
• Responding to disasters and assisting communities in recovery
• Ensuring the quality and accessibility of health services

The department’s six sections are under the administrative supervision of the state health officer. They include the following:
• Emergency Preparedness & Response
• Environmental Health
• Fiscal & Operations
• Health Resources
• Healthy & Safe Communities
• Medical Services

In early 2019, the North Dakota Department of Health adopted the North Dakota Be Legendary brand and embraced the effort to unify the brand across all agencies.
STRATEGIC MAP

Mission
Improve the length and quality of life for all North Dakotans

GOALS

Create Healthy and Vibrant Communities
- Reduce the risk of infectious disease
- Prevent and reduce chronic diseases
- Promote safe and sanitary food establishments
  - Support communities in building resiliency
  - Promote community driven wellness
  - Increase healthy lifestyles and behaviors

Enhance and Improve Systems of Care
- Improve access to care in underserved and rural areas
- Enhance health care through technology
- Ensure access to affordable health and preventative services
  - Appropriately regulate and educate workforce to enhance quality and safe care

Strengthen Population Health Actions
- Prevent and reduce tobacco and other substance misuse
- Prevent violence, intentional and unintentional injury
- Reduce the risk of vaccine preventable diseases
- Reduce adverse health outcomes through early detection of disease
- Achieve a healthy weight for children and adults

Promote Public Health Readiness and Response
- Maintain emergency communication and alerting systems
- Manage the state medical supply cache
- Ensure capacity to detect and respond to disease outbreaks
- Coordinate and facilitate the public health statewide response team
- Ensure statewide EMS system readiness

OBJECTIVES

GOALS

Improve Health Equity and Assess Impacts of Social Determinants of Health

Manage Infrastructure for Optimal Outcomes

Integrate a Data-Driven Best Practices Approach
### NORTH DAKOTA DEPARTMENT OF HEALTH APPROPRIATIONS SUMMARY

**July 1, 2017 through June 30, 2019**

#### NORTH DAKOTA DEPARTMENT OF HEALTH EXPENDITURES

<table>
<thead>
<tr>
<th></th>
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<td>$189,635</td>
<td>$189,635</td>
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<td>Tobacco Prevention &amp; Control</td>
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<td>Medical Marijuana</td>
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<td></td>
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<tr>
<td>Total</td>
<td>$201,494,418</td>
<td>(876,918)</td>
<td>$231,550</td>
<td>$233,645</td>
<td>$297,000</td>
<td>$201,379,695</td>
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</table>

| General Fund                      | $43,474,460                       |                      |                                               |                                               | 90,000                                                      | 43,564,460                     |
| Federal Funds                     | 119,132,089                       |                      |                                               |                                               | 174,000                                                     | 119,306,089                    |
| Special Funds                     | 38,887,869                        | (876,918)            | 231,550                                       | 233,645                                       | 33,000                                                      | 38,509,146                     |
| Total                             | $201,494,418                      | (876,918)            | $231,550                                      | $233,645                                      | $297,000                                                    | $201,379,695                    |
| Total FTE                         | 364.00                            |                      |                                               |                                               |                                                            | 364.00                         |

### NORTH DAKOTA DEPARTMENT OF HEALTH EXPENDITURES

<table>
<thead>
<tr>
<th>Description</th>
<th>Fiscal &amp; Operations Section</th>
<th>Medical Services Section</th>
<th>Health Resources Section</th>
<th>Healthy &amp; Safe Communities Section</th>
<th>Environment &amp; Health Section</th>
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<td>5,700</td>
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<td>6,882,781</td>
<td>12,637,826</td>
<td>52,626,017</td>
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<tr>
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<td>-</td>
<td>-</td>
<td>13,344,083</td>
<td>-</td>
<td>-</td>
<td>13,344,083</td>
<td>-</td>
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<tr>
<td>WIC Food Payments</td>
<td>-</td>
<td>-</td>
<td>17,428,772</td>
<td>-</td>
<td>-</td>
<td>17,428,772</td>
<td>-</td>
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<tr>
<td>Medical Marijuana</td>
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<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>1,086,176</td>
<td>-</td>
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<tr>
<td>Total</td>
<td>$17,037,803</td>
<td>$22,990,090</td>
<td>$9,962,924</td>
<td>$6,137,293</td>
<td>$40,796,557</td>
<td>$20,782,255</td>
<td>$179,706,922</td>
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</tbody>
</table>

| General Fund                      | 7,821,424                   | 5,662,946                | 2,509,255                | 6,674,884                          | 11,172,188                  | 8,046,725                      | 41,887,422        |
| Federal Funds                     | 4,821,541                   | 16,104,451               | 5,376,041                | 48,032,285                         | 20,441,733                  | 10,116,228                     | 104,892,279       |
| Special Funds                     | 4,394,838                   | 1,222,693                | 2,077,628                | 13,430,124                         | 9,182,636                   | 2,619,302                      | 32,927,221        |
| Total                             | $17,037,803                  | $22,990,090              | $9,962,924               | $6,137,293                         | $40,796,557                 | $20,782,255                    | $179,706,922      |

| Total FTE                         | 41.60                       | 49.00                    | 49.50                     | 55.15                              | 152.25                     | 16.50                          | 364.00            |
The Office of the State Health Officer manages the activities of and provides direction and leadership to the North Dakota Department of Health.

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

**Accomplishments**
- Eliminated BreatheND (SB 2024) and transferred accountability for tobacco prevention and control to the department.
- Implemented the Medical Marijuana Program (SB 2344).
- Established the ND Department of Environmental Quality (SB 2327).
- Coordinated the department’s 2019 legislative efforts, including monitoring 211 bills, coordinating and approving testimony on 57 bills, guiding the department budget through the legislative process, and briefing various organizations on the status and outcome of legislation.

**Goals**
- Coordinate departments interim legislative efforts.
- Maintain national accreditation through the Public Health Accreditation Board (PHAB).

---

**STATE HEALTH COUNCIL**
The State Health Council serves as the NDDoH’s governing and advisory body. The council’s 9 members are appointed by the governor for three-year terms. Four members are appointed from the health care provider community and five from the public sector.

The council establishes standards and rules which are necessary for the maintenance of public health and environmental protection. They provide for the development, establishment and enforcement of basic standards for hospitals and related medical institutions, as well as the construction and maintenance of such institutions.

**Chair**
Genny Dientsmann, Bismarck (Consumer)

**Vice Chair**
Duane Pool, Bismarck (Consumer)

**Secretary**
Leona Koch, Raleigh (Consumer)

**Members**
Howard C. Anderson Jr., R. Ph., Turtle Lake (Health Care)
Darrold Bertsch, Beulah (Consumer)
Mike Ferdorhak, Bismarck (Consumer)
Wade Peterson, Bismarck (Health Care)
Kristin Roers, Fargo (Health Care)
Dennis E. Wolf, MD, Dickinson (Health Care)
LOCAL PUBLIC HEALTH UNITS

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

Services offered by each LPHU vary, but all provide services in the areas of maternal and child health, health promotion and education, disease control and prevention, and emergency response preparation and coordination. Some local public health units maintain environmental health programs; others partner with another local public health unit or the NDDoH to provide environmental services, such as public water system inspections, nuisance and hazard abatement, and food service inspections.
<table>
<thead>
<tr>
<th>Health Unit</th>
<th>Location</th>
<th>Administrators</th>
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<tbody>
<tr>
<td>Bismarck-Burleigh Public Health</td>
<td>Bismarck</td>
<td>Renae Moch, MBA, FACMPE</td>
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<tr>
<td>Cavalier County Health District</td>
<td>Langdon</td>
<td>Terri Gustafson, RN</td>
</tr>
<tr>
<td>Central Valley Health District</td>
<td>Jamestown</td>
<td>Robin Izler, RN</td>
</tr>
<tr>
<td>City-County Health District</td>
<td>Valley City</td>
<td>Theresa Will, MPH, RN</td>
</tr>
<tr>
<td>Custer Health</td>
<td>Mandan</td>
<td>Erin Ourade, MPH</td>
</tr>
<tr>
<td>Dickey County Health District</td>
<td>Ellendale</td>
<td>Roxanne Holm</td>
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<tr>
<td>Emmons County Public Health</td>
<td>Linton</td>
<td>Bev Voller, RN</td>
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<tr>
<td>Fargo Cass Public Health</td>
<td>Fargo</td>
<td>Desi Fleming, RN, MSN</td>
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<td>First District Health Unit</td>
<td>Minot</td>
<td>Lisa Clute</td>
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<tr>
<td>Foster County Public Health</td>
<td>Carrington</td>
<td>Lisa Hilbert, RN</td>
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<tr>
<td>Grand Forks Public Health Department</td>
<td>Grand Forks</td>
<td>Debbie Swanson, MS, RN</td>
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<tr>
<td>Kidder County District Health Unit</td>
<td>Steele</td>
<td>Janel Brousseau</td>
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<tr>
<td>Lake Region District Health Unit</td>
<td>Devils Lake</td>
<td>Allen McKay, RS</td>
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<tr>
<td>LaMoure County Public Health</td>
<td>LaMoure</td>
<td>Jessica Duffy, RN</td>
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<tr>
<td>McIntosh District Health Unit</td>
<td>Ashley</td>
<td>Cheryl Reis-Schilling</td>
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<tr>
<td>Nelson/Griggs District Health Unit</td>
<td>McVille</td>
<td>Julie Ferry, MS, RN</td>
</tr>
<tr>
<td>Pembina County Health Department</td>
<td>Cavalier</td>
<td>Rachel Ramsay, RN</td>
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<tr>
<td>Ransom County Public Health</td>
<td>Lisbon</td>
<td>Brenna Welton</td>
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<tr>
<td>Richland County Health Department</td>
<td>Wahpeton</td>
<td>Michelle Eberhardt, BSN, RN</td>
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<tr>
<td>Rolette County Public Health District</td>
<td>Rolla</td>
<td>Barb Frydenlund, RN</td>
</tr>
<tr>
<td>Sargent County District Health Unit</td>
<td>Forman</td>
<td>Brenda Peterson</td>
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<td>Southwestern District Health Unit</td>
<td>Dickinson</td>
<td>Sherry Adams, RS/REHS</td>
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<tr>
<td>Steele County Public Health</td>
<td>Finley</td>
<td>Courtney Tangen, BSN</td>
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<tr>
<td>Towner County Public Health District</td>
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<td>Sherry Walters, BSN, RN</td>
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<td>Traill District Health Unit</td>
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<td>Brenda Stallman, RN</td>
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<td>Upper Missouri District Health Unit</td>
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<td>Javayne Oyloe</td>
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<td>Walsh County Health District</td>
<td>Grafton</td>
<td>Wanda Kratochvil, RN</td>
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<tr>
<td>Wells County District Health Unit</td>
<td>Fessenden</td>
<td>Brittany Long, RN</td>
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November 2019
# Local Public Health Unit Expenditures

For the Period July 1, 2017 through June 30, 2019

<table>
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<tr>
<th>District Health Units</th>
<th>Total Expenditures</th>
<th>Annual Per Capita Expenditures</th>
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<tbody>
<tr>
<td>Cavalier County Health District</td>
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<tr>
<td>Central Valley Health Unit</td>
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<td>City County Health Dept</td>
<td>$2,827,541.00</td>
<td>$129.40</td>
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<tr>
<td>Custer District Health Unit</td>
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<tr>
<td>Dickey County Health District</td>
<td>$1,004,421.00</td>
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<tr>
<td>Emmons County Public Health</td>
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<tr>
<td>First District Health Unit</td>
<td>$9,512,225.00</td>
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<tr>
<td>Foster County Health District</td>
<td>$592,463.00</td>
<td>$89.69</td>
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<tr>
<td>Kidder County District Health Unit</td>
<td>$364,920.00</td>
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<tr>
<td>Lake Region Dist Health Unit</td>
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<tr>
<td>McIntosh Dist Health Unit</td>
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<thead>
<tr>
<th>City/County Health Departments</th>
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<tr>
<td>Bismarck-Burleigh Public Health</td>
<td>$6,547,619.00</td>
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<th>County Health Units</th>
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Total Local Public Health Funding                       $89,996,945.00  $59.37
The Primary Care Office increased loan repayment applications by **147%** from 2015-16 to 2017-18.

Medical Marijuana registered over **700** qualified patients and became the first state to make ID cards accessible via mobile device.

Vital Records processed: **102,309** requests

For more than **275,000** certified copies, record searches, amendments and verifications

Generating **$225,520** to be deposited into the Children’s Trust Fund

Accounting developed two agency budgets, one for the Department of Health and one for the Department of Environmental Quality, for the upcoming 2019-21 biennium.

Reorganized from one State Epidemiologist to the Office of the State Epidemiologist with six full-time employees and four contract/temporary personnel.

2019-21 Biennium

**$160.3 million**

**$58.7 million**
The Fiscal & Operations Section, supervised jointly by the Chief Operating Officer and the Chief Financial Officer, provides support services to assist all NDDoH sections.

FISCAL & OPERATIONS SECTION

ACCOUNTING

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

Accomplishments

• Developed two agency budgets for the 2019 – 2021 biennium – the budget for the Department of Health totaling $160.3 million and the first budget for the newly established Department of Environmental Quality (DEQ) totaling $58.7 million.
• Successfully established accounting processes and procedures in order to provide shared services for the newly established DEQ.
• Held agency administrative expenses to 3.2%.

Goals

• Implement an electronic contract tracking system within the Program Reporting System (PRS).
• Establish a system for electronic filing of invoices for the Department of Health and for DEQ as the shared services provider for that agency.
• Hold administrative expenses to less than 5%.
COMMUNICATIONS
The Division of Communications is responsible for managing internal and external communications, ensuring effective, accurate, and factual messaging.

Accomplishments
• Created, edited and/or approved hundreds of news releases/brochures/posters/letters/etc.
• Implemented statewide unified brand.
• Created Public Health 101 presentation to help educate legislators and the public.

Goals
• Launch new NDDoH website and intranet.
• Collaborate with the ND Department of Human Services on a new video series.

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

Accomplishments
• Developed and currently trialing continuous glucose monitoring (CGM) policy for Special Health Services.
• Connected ND diabetologists with contact at ND Medicaid to work on CGM eligibility.
• Continued eAsthma Clinic outreach to Dickinson in partnership with Catholic Health Initiatives (CHI), University of North Dakota Center for Family Medicine and NDDoH.

Goals
• Improve access to comprehensive care coordination for patients with special health care needs.
• Provide clinical consultation support to NDDoH.
• Provide consultation support for divisional clinical protocol development.
• Provide direction and support during disease outbreaks.
• Incorporate public health into University of North Dakota School of Medicine residency training.
• Participate in the integration of public health programs with clinical medicine.

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

Accomplishments
• Achieved a turnover rate below the state average for both years of the biennium.
  • 2017 - 12.7% state/11.4% NDDoH
  • 2018 - 10.9% state/5.5% NDDoH
• 2017 Silver level North Dakota Well Workplace Award Winner

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

The NDDoH was the first agency to implement a baby-at-work policy nearly 20 years ago. Since then, dozens of government entities and other businesses have modeled similar policies after the NDDoH.
MEDICAL MARIJUANA

The Division of Medical Marijuana is responsible for regulating the Medical Marijuana Program authorized under North Dakota Century Code Chapter 19-24.1. State law provides for the medical use of marijuana for defined debilitating medical conditions, such as cancer, PTSD, epilepsy, and AIDS. The Division of Medical Marijuana is responsible for issuing registry identification cards for qualifying patients, designated caregivers, and agents of the manufacturing facilities and dispensaries. In addition, the Division of Medical Marijuana monitors operations of manufacturing facilities (growing, cultivating, harvesting, extracting, packaging, etc.) and dispensaries to ensure compliance with state laws and rules.

Accomplishments

• Implemented and established a Medical Marijuana Program within the state.
• Registered two manufacturing facilities to grow, process, and produce marijuana and marijuana products.
• Registered two dispensaries to dispense marijuana and marijuana products to registered qualifying patients and registered designated caregivers.
• Registered over 700 qualifying patients and over 30 designated caregivers by the end of the biennium.

Goals

• Eight dispensaries in operation by the end of 2019.
• Expenses of the program paid through fees collected (not from the state’s general fund).
• Effective monitoring of manufacturing facilities and dispensaries to ensure compliance with state laws and rules.
• Efficient processing of applications.

Steps to Success

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>Six additional dispensaries open - End of CY 2019 (projected)</td>
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<td>Electronic cards accessible via mobile device - May 2019</td>
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<td>Second dispensary opens (Grand Forks) - May 2019</td>
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<tr>
<td>First dispensary opens (Fargo) - March 2019</td>
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<tr>
<td>Second manufacturing facility registered (Fargo) - December 2018</td>
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<tr>
<td>Qualifying patient and designated caregiver applications accepted - October 2018</td>
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<tr>
<td>First manufacturing facility registered (Bismarck) - September 2018</td>
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<tr>
<td>Lab selected to conduct compliance testing - May 2018</td>
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<tr>
<td>Legislative review of administrative rules (NDAC Chapter 33-44-01) - March 2018</td>
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<tr>
<td>Information management system selected (BioTrackTHC) - February 2018</td>
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<tr>
<td>Law effective (NDCC Chapter 19-24.1) - April 2017</td>
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OFFICE OF THE STATE EPIDEMIOLOGIST

The Office of the State Epidemiologist (OSE) coordinates epidemiological studies, investigations and surveillance activities; conducts data analysis; and provides technical expertise and consultation. Additional responsibilities include collaborating on disease surveillance, data acquisition, informatics, database management and health intervention activities, and providing information to NDDoH programs and divisions, health care providers, community organizations, and the media.

Accomplishments
• Reorganized from an office of one state epidemiologist to become the Office of the State Epidemiologist with six full-time employees and four temp/contract personnel.
• Secured funding for implementation of the ND violent death reporting program, allowing NDDoH to investigate deaths to find better prevention opportunities for overdoses, suicides, homicides, etc.

Goals
• Improve utilization of the ND Health Information Network for reporting of mandatory reportable conditions
• Use artificial intelligence (AI) and other advanced technology to decrease the time needed for data analysis.

SYSTEMS & PERFORMANCE

The Division of Systems and Performance works through collaboration and partnership to build capacity, improve performance, and strengthen North Dakota’s public health system. The office acts as a liaison to local public health units and other key public and private partners. The office also serves as the lead for performance improvement, coordinating efforts in public health accreditation, strategic planning and quality improvement.

Accomplishments
• Maintained National Public Health Accreditation status.

Goals
• Maintain the department’s National Public Health Accreditation status.
• Enhance workforce development efforts for public health, primary care and behavioral health practitioners.
**VITAL RECORDS**

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

**Accomplishments**

- Registered 25,523 certificates of live birth; 14,805 certificates of death; 144 certificates of fetal death; 8,598 marriage records; 3,798 divorce records; 8 delayed registrations of birth; and 249 births that occurred at home or outside a hospital setting.
- Processed 102,309 requests for more than 275,000 certified copies, record searches, amendments and verifications. Based on the number of birth certificates issued during the biennium, a total of $225,520 was deposited into the Children’s Trust fund. The remaining fees collected were deposited into the state’s general fund.

**Goals**

- Maintain 100% registration of all vital events in the state. To achieve this goal, extensive querying and follow-up is done.

**Biennial Vital Statistics**

**On an average day in North Dakota:**

- 34 babies are born; 10 of them are born out of wedlock, 1 is born to a teenage mother and 6 are born by Cesarean section
- 20 people die, 4 of them from heart disease and 4 from cancer
- 11 couples are married and 5 are divorced

**In an average week:**

- 1 infant dies
- 3 people die by suicide
- 4 people die from diabetes
- 4 people die from influenza and pneumonia
- 8 people suffered accidental deaths

**In an average month:**

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

The average age at death is 75.
HEALTHY & SAFE COMMUNITIES

BY THE NUMBERS

NDQuits served over 7,000 tobacco users in the state. 40% were tobacco free seven months after completing the program.

Heart Disease & Stroke Prevention partnered with Blue Cross Blue Shield of ND to train over 350 health care providers across the state on how to take blood pressure accurately.

Women’s Way screened 2,947 women for breast and/or cervical cancer, resulting in 21 individuals diagnosed with breast cancer and 18 cervical conditions that required treatment.

Child Passenger Safety provided 1,224 free car safety seats to low-income parents.

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SPECIAL HEALTH SERVICES ADMINISTERED THE CARDIAC CARE FOR CHILDREN PROGRAM TO APPROXIMATELY 950 CHILDREN STATEWIDE.
The purpose of the Healthy & Safe Communities Section is to support individuals, families and communities by providing quality programs that protect and enhance the health and safety of all North Dakotans.

Healthy and Safe Communities comprises the Title V Office and five divisions:

**Title V / Health Equity Office**

The Title V / Health Equity Office manages the Maternal and Child Health (MCH) Block Grant, the Pediatric Mental Health Care Access Program Grant and is responsible for providing statewide leadership for advancing health equity.

**Accomplishments:**

- Initiated a Work-As-One Needs Assessment Integration process to align the work of multiple state agencies and other entities in data collection and reporting.
- Received the Pediatric Mental Health Care Access Program Grant to increase tele-behavioral health services to children and adolescents living in underserved areas of the state.
- Developed and published the North Dakota 2017 Health Disparities Report.

**Goals:**

- Determine new 2021-2025 MCH priorities.
- Implement web-based trainings to extend knowledge to pediatric primary care professionals across the state for the early identification, diagnosis, treatment and referral of mental health disorders in children.
- Advance health equity through a health in all policies approach.
COMMUNITY & HEALTH SYSTEMS

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

Programs include:
• Colorectal Cancer Screening
• Comprehensive Cancer Control
• Women’s Way
• Statewide Cancer Registry
• Tobacco Prevention & Control

Accomplishments

Comprehensive Cancer Prevention & Control
• Worked with the North Dakota Cancer Coalition (NDCC) treatment and survivorship work groups to conduct the fourth biennial Cancer Patient Survey, with participation from 100% of all accredited cancer centers in North Dakota. The survey was also completed by 615 cancer patients.
• Comp Cancer partnered with both Women’s Way and the ND Immunization Program both years to fund an additional $100,000 in grants.
• Colorectal cancer screening rates increased from 64.7% to 67.1% during the 17-19 biennium.

North Dakota Cancer Screening Initiative
• North Dakota Cancer Screening Initiative grantees provided 13,097 navigation service encounters that resulted in 560 mammograms, 1,275 Pap tests, 799 IFOB/FIT tests, and 293 colonoscopies.

Statewide Cancer Registry
• Achieved gold certification for data timeliness, completeness, and quality five years in a row (from 2013 to 2017) by the North American Association of Central Cancer Registry (NAACCR).
• Recognized as a Centers for Disease Control and Prevention (CDC) National Program of Cancer Registries (NPCR) Registry of Excellence. This indicates that the statewide cancer registry met all the CDC NPCR standards for data completeness and quality. The North Dakota Statewide Cancer Registry is one of only 17 registries that achieved this recognition.

Women’s Way
• Screened 2,947 women for breast and/or cervical cancer; resulting in 21 individuals diagnosed with breast cancer and 18 cervical conditions that required treatment.
• Women’s Way provided navigation services to 496 clients, of which 477 were screened (96%). The results caused the CDC to create a new policy for all funded programs to provide navigation services to non-program eligible women who qualify for public insurance programs such as Medicare Part B, Medicaid and Medicaid Expansion.

Personal Connections Make All the Difference

Tobacco Prevention & Control
• Successfully managed the transition of state tobacco prevention and control activities from the tobacco prevention foundation (the Center for Tobacco Prevention and Control Policy) to the NDDoH Tobacco Prevention and Control Program (TPCP). This involved partner engagement, updating the State Plan, strategic planning and functional sustainability planning.
• NDQuits served more than 7,000 unique tobacco users. More than 40% of members were tobacco free seven months after completing the program.
• Implemented direct electronic referrals to NDQuits from health system electronic health records. Health systems that implemented direct electronic referrals nearly doubled the number of referrals sent to NDQuits.
• Implemented and expanded the NDQuits Cessation (NDQC) Grant Program in health care systems. Cumulatively during the biennium, there were 24,000 patients counseled; 2,600 bridge nicotine replacement therapy (NRT) given; and over 3,400 patients referred to NDQuits.
• Collaborated with the Behavioral Risk Factor Surveillance System (BRFSS) to assess adult tobacco attitudes and behaviors. According to the BRFSS, the percentage of North Dakota adults who currently smoke cigarettes decreased from 21.9% in 2011 to 19.1% in 2018.
COMMUNITY & HEALTH SYSTEMS

• Conducted the Youth Tobacco Survey (YTS) in coordination with the Youth Risk Behavior Survey (YRBS) to assess youth tobacco attitudes and behaviors and evaluate tobacco prevention programs. The YRBS indicated that North Dakota youth who currently smoke cigarettes significantly decreased from 19.4% in 2011 to 8.3% in 2019.
• Implemented the BABY & ME - Tobacco Free™ Program (BMTFP) in additional health care systems. This program provides one-on-one tobacco cessation support and relapse prevention for pregnant women. BMTFP participants reported an increase in birthweight that was statistically significant as compared to birthweights reported by smoking mothers in North Dakota in 2017 (7.47 lbs versus 7.06 lbs).
• Collaborated with the ND Department of Human Services to expand the youth access compliance checks as part of the Synar Program. This program allowed additional funding to be offered to local public health units to coordinate tobacco compliance checks.
• Established Electronic Nicotine Delivery System (ENDS) as tobacco products and a priority issue for TPCP. The TPCP took a unique stance (compared to other states) to recognize that ENDS are not proven to be safe for anyone.
• Hosted the first North Dakota ENDS Summit. Nationally recognized experts in tobacco prevention shared current information and strategies to address the ENDS epidemic. A second day of strategic planning addressed the need for ongoing surveillance and an efficient coordinated response to this growing concern affecting all North Dakota residents.

Goals
• Increase breast, cervical and colorectal cancer screenings through systems change, patient navigation, target messaging and collaboration with statewide partners and organizations.
• Maintain the security requirements necessary for cancer data storage or transmission and maintenance of registry software to ensure data collected meets the CDC NPCR requirements and NAACCR standards.
• Improve chronic disease prevention, early diagnosis, disease management, surveillance and evaluation by working with communities, health professionals and health systems in the areas of policy, quality improvement and education.
• Provide grants, training, education and technical assistance to communities and health care providers.

FAMILY HEALTH & NUTRITION

The Division of Family Health & Nutrition works on initiatives that encourage healthy, active and well-nourished children, youth, women, men and families.

Programs include:
• Abstinence Education
• Breastfeeding Promotion & Support
• Child & Adolescent Obesity Prevention
• Reproductive Health
• School Nursing
• Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
FAMILY HEALTH & NUTRITION

Accomplishments

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

Breastfeeding Promotion & Support
• Impacted 12,215 employees by designating 57 business locations across North Dakota as Infant Friendly.
• Trained 200 additional health care providers working with mothers and infants through the North Dakota Breastfeeding Friendly Skills Trainings.
• Provided funding and technical assistance to local public health and tribal entities to establish new policies and practices addressing barriers to breastfeeding.

Child & Adolescent Obesity Prevention
• Provided funding and technical assistance to various entities to implement strategies to reduce overweight/obesity in children.
• South East Education Cooperative (15 cohort schools) provided Interactive Health Technology devices for teachers and on-going professional development trainings around healthy school environments.
• Fargo Cass Public Health worked with city officials in Fargo and West Fargo to pass a Child Care Physical Activity Health Code that includes daily required minutes of physical activity, staff participation in annual approved physical activity training, “tummy time” for infants, limits on electronic media for children and restricting/limiting fruit juice.
• North Dakota State University Extension Service provided On the Move health curriculums for western North Dakota to help students develop an awareness of food and activity choices and habits that contribute to healthy living.

Family Planning
• Provided medical, education and counseling services to over 13,000 individuals at 18 locations statewide. Implemented telemedicine in one family planning service site.
• Collaborated with the State Suicide Prevention Program to provide suicide screenings to almost 10,000 family planning clients.
• Provided professional development to local family planning staff on topics including: sexually transmitted infections, telemedicine, Screening Brief Intervention Referral for Treatment (SBIRT), ICD-10 billing and coding, suicide prevention assessments, breast cancer and colorectal cancer screening guidelines, nursing scope of practice, reproductive health and human trafficking.

School Health
• Implemented tele-school nursing services in 14 schools that provided services to 2,394 students through a Bush Foundation grant.

Special Supplemental Nutrition for Women, Infants & Children (WIC)
• Provided healthy food, nutrition education, breastfeeding support and referrals to more than 39,730 women, infants and children.
• Implemented an appointment reminder system statewide to send reminder texts to WIC participants.
• Expanded the breastfeeding backpack project to increase breastfeeding initiation rates within the American Indian population through two local WIC agencies (Turtle Mountain Band of Chippewa and Spirit Lake Sioux) and within rural communities through eight local WIC agencies. All agencies that have participated with the project have shown an increase in their breastfeeding initiation rates.
FAMILY HEALTH & NUTRITION

- Supported local agency WIC staff to become International Board-Certified Lactation Consultants (IBCLC); there are currently eight WIC IBCLCs statewide.
- Completed an electric breast pump pilot at four local WIC agencies. Pilot results showed that most breastfeeding women who were issued a breast pump did not take infant formula from WIC and had an average breastfeeding duration of about five months.

Goals
- Provide leadership to workplaces with breastfeeding support policies through the Infant-Friendly Workplace Designation.
- Support and expand the WIC breastfeeding peer counseling program.
- Address increasing obesity rates through trainings and assistance to partners on strategies that support increasing access to physical activity opportunities and access to healthy food in schools, early childhood settings and worksites.
- Encourage healthier communities by collaborating with health care providers, public health, tribes and non-traditional partners to implement local policies and environmental changes to improve nutrition, increase physical activity and reduce chronic diseases.
- Assure innovative quality family planning and related preventive health services that lead to improved reproductive health outcomes and overall optimal health.
- Provide the tools necessary for the inclusion of substance use disorder screening into family planning services and foster interaction with community and faith-based organizations.
- Implement WIC EBT (Electronic Benefits Transfer) in 2020.

HEALTH PROMOTION

The Division of Health Promotion works to improve health through evidence-based strategies that prevent and manage chronic disease.

The director manages the Preventive Health & Health Services Block Grant and is responsible for implementing local strategies that address Healthy People 2020 objectives. Projects selected annually address high priority indicators from data sources such as community needs assessments.

Programs and services include:
- Diabetes Prevention & Control
- Heart Disease and Stroke Prevention
- Oral Health
- Community Clinical Coordination

Accomplishments

Diabetes Prevention & Control
- Facilitated a statewide engagement and strategic planning stakeholder meeting with 88 attendees. This led to the formation of subcommittees addressing awareness, access and insurance coverage for National Diabetes Prevention Programs (NDPP).
- Evaluated Diabetes Prevention Program lifestyle coach barriers and facilitated a learning community to improve recruitment, retention and delivery of the NDPP.
- Initiated pharmacy partnerships for integration of diabetes education and pre-diabetes screening in community and ambulatory care pharmacies. This includes 17 pharmacists at six pharmacies.
- Supported the development of new Diabetes Prevention Program (DPP) and Diabetes Self-Management Education sites.

Heart Disease & Stroke Prevention
- Partnered with Altru Health System, Sanford Health and Essentia Health to implement Electronic Health Record enhancements to identify undiagnosed patients or those at risk for diabetes and/or hypertension.
- Partnered with Blue Cross Blue Shield of North Dakota to train over 350 health care providers
HEALTH PROMOTION

including doctors, nurses, dentists, hygienists, and chiropractors across the state on how to take blood pressure accurately.

- Initiated pharmacy partnerships for integration of hypertension screening using community and ambulatory care pharmacists and improving medication therapy management for patients with hypertension and diabetes.

Oral Health

- Seal!ND, a school-based fluoride varnish and sealant program provided services to 3,000 students this biennium. Services include an initial screening, sealant placement, and fluoride varnish application.
- Seal!ND became recognized as a ND Medicaid provider in November 2017 and is able to bill for school-based sealant program services at an encounter rate; an important step toward program sustainability.
- Seal!ND developed an online oral health screening form to end the use of paper charts, collect screening data in real time, and to be able to provide immediate follow-up and coordination for children with urgent dental needs.
- Collaborated with the Ronald McDonald Care Mobile to provide access to oral health services for children in the western part of the state.
- Participated in and supported the North Dakota Mission of Mercy in September 2018. This event drew 570 volunteer dental providers and resulted in over 1,700 dental procedure services valued at over $550,000.

Community Clinical Coordination

- Worked collaboratively with partners to develop NDC3, a referral platform for chronic disease prevention and management community-based programs.

Goals

- Increase the number of pharmacies screening for pre-diabetes and providing Medication Management for patients with diabetes. Also increase the number providing Medication Therapy Management for patients with hypertension.
- Increase the number of recognized National Diabetes Prevention Program sites.
- Increase the number of health systems/clinics screening, testing and referring for pre-diabetes and the number actively tracking and prescribing self-measured blood pressure for patients with hypertension.
- Continue providing school-based services through the Seal!ND program while implementing care coordination and expanding partnerships with private dental practices across North Dakota.
- Enhance the oral public health infrastructure and capacity by placing another public health hygienist in a second medical facility to provide oral health screenings, fluoride varnish, education, referrals and care coordination to low income and uninsured patients.
- Enhance medical-dental integration in the state to increase the number of referrals between providers.
INJURY & VIOLENCE PREVENTION

The Division of Injury & Violence Prevention works to prevent and respond to unintentional and intentional injury and violence.

Programs include:
• Child Passenger Safety
• Domestic Violence/Rape Crisis
• Infant & Child Death Services
• Crib for Kids
• Injury Prevention
• Suicide Prevention

Accomplishments

Child Passenger Safety (CPS)
• Conducted eight national child passenger safety certification courses and certified 131 child passenger safety technicians.
• Provided 1,224 car safety seats to low-income parents of young children through statewide car seat distribution programs.
• Approximately 157 agencies, including law enforcement, public health, school health nurses and other partners, gave 1,425 school presentations to 46,414 children.
• Coordinated 126 car safety checkups and inspected 1,522 car seats statewide. Assisted 399 child passenger safety certified technicians with their recertification.

Domestic Violence/Rape Crisis
• Funded two domestic violence/rape crisis agencies to implement Green Dot Bystander Intervention Strategy in their communities and hosted a Green Dot training that certified 34 persons as trained facilitators.
• Funded eight supervised parenting centers that provide supervised visits or exchanges of children in cases of domestic violence, child abuse, sexual assault or stalking.
• Provided state and federal funds to agencies that serve victims of domestic violence, sexual assault, dating violence and stalking, including 20 domestic violence/rape crisis agencies, law enforcement, prosecution and other agencies.
• Provided state funds to five agencies to support domestic violence offender treatment programs and established new programs in four additional communities.

Infant & Child Death Services
• Promoted the Safe to Sleep North Dakota media campaign statewide. The campaign highlights the importance of safe sleep practices, protective factors from breastfeeding and the risk of second-hand smoke.

Crib for Kids
• Safe sleep education materials and 552 crib kits were provided to 26 partner locations throughout the state for placement with low-income families.

Count the Kicks
• Launched Count the Kicks, a stillbirth prevention campaign that educates parents on the importance of tracking baby movements during the third trimester of pregnancy. Since the launch in June 2019, 60 expectant parents have downloaded the app and more than 700 North Dakotans have visited the Count the Kicks website.

Injury Prevention
• Partnered with Vision Zero to work towards eliminating motor vehicle crash fatalities and serious injuries.

VISION ZERO

• Provided materials to support 45 Stepping On Senior Falls Prevention workshops conducted by community leaders across North Dakota, with 551 older adults participating.
• Assisted the U.S. Consumer Product Safety Commission with 24 product recall effectiveness checks.
• Funded two distracted teen driving programs, reaching 3,148 youth.
INJURY & VIOLENCE PREVENTION

Suicide Prevention
- Supported FirstLink, North Dakota’s National Suicide Prevention lifeline (crisis hotline) provider, to expand their follow-up phone service to those at risk of suicide. The Follow-up Caring contact provided over 1,000 caring follow-up calls in 2018. FirstLink was also funded to provide suicide crisis line service to over 10,000 callers at-risk, which is nearly double the previous biennium.
- Funded five of North Dakota’s regional education associations to provide suicide prevention or mental health crisis training to 35 schools and trained an estimated 12,000 education professionals.
- Supported the statewide Sources of Strength initiative, an evidence-based prevention program for suicide, substance use and bullying prevention. Worked with private and tribal nations to expand implementation of Sources of Strength to 57 schools, reaching an estimated 10,000 students across state and tribal lands.
- Provided 82 nationally-recognized trainings and programming to an estimated 1,500 individuals.
- Funded community clinics to provide evidence-based depression screening to over 12,000 clients. Of these clients, over 3,000 clients were found at risk of depression or suicide and referred to behavioral health services.

Goals
- Partner with Vision Zero to eliminate motor vehicle crash fatalities and serious injuries.
- Reduce domestic violence, sexual assault and stalking crimes through grants, trainings and partnerships.
- Support the North Dakota Injury Prevention Coalition and other partners in implementing the North Dakota Injury Prevention Plan to reduce unintentional injuries and deaths related to motor vehicle crashes, falls, unintentional poisonings and unintentional suffocation.
- Support the use of evidence-based sexual violence primary prevention strategies in communities.
- Support Cribs for Kids and Count the Kicks to reduce the number of infant deaths statewide.
- Transition the Suicide Prevention Program to the North Dakota Department of Human Services Behavioral Health Division with the goal to provide a more comprehensive approach to suicide prevention that not only includes primary prevention, but also treatment and recovery.

SPECIAL HEALTH SERVICES

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

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

Accomplishments

Coordinated Services Program
- Provided metabolic food and low-protein modified food products for about 25 individuals who have phenylketonuria (PKU) and maple syrup urine disease (MSUD).
- Supported multidisciplinary clinics coordinating management of chronic health conditions for over 2,600 children.
SPECIAL HEALTH SERVICES

- Directly managed 15 statewide cleft lip/palate clinics and provided care coordination services to approximately 130 children annually.
- Administered the Cardiac Care for Children Program to approximately 950 children, which provided care coordination and payment for the initial pediatric cardiology examination and routine testing.

SUPPORTED over 2,600 children at multidisciplinary clinics

Financial Coverage Program
- Assisted approximately 450 families with payment for medical services for eligible children, which helped ensure early diagnosis and access to specialty care.
- Administered a special program for children with Russell Silver Syndrome. The program served four children each year of the biennium by providing increased access to growth hormone treatment, medical food, and expert consultation and management.

Newborn Screening & Follow-up Program
- Implemented a seven-day courier service statewide to ensure timely delivery and processing of newborn screening specimens to the Iowa lab; thereby, reducing the disparity of screening results that occurred depending on where a baby was born.
- Developed the infrastructure for a long-term follow-up program that monitors children with a confirmed disorder to age 6.
- Partnered with the ND Early Hearing Detection and Intervention (EHDI) Program to ensure goals and objectives of the ND EHDI Program are supported by the NDDoH through collaboration, linkage to state resources, and care coordination for families.
- Provided education and training to providers regarding state mandated screening that screens newborns for potentially serious heart defects.

Children with Special Health Care Needs (CSPCNS) System Enhancement Program
- Funded care coordination services through select medical home practices and county social service staff that served children and youth with special health care needs; annually 275-300 families were served.
- Provided health care transition education and training in 2018 to 771 individuals.
- Provided funding to Family Voices of North Dakota to support 1,292 families and 662 professionals through a variety of health information and education center activities, including support of a Parent Leadership Institute attended by 55 families this biennium.

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

Goals
- Provide direct and enabling services to approximately 2,000 children each year.
- Continue care coordination training and quality improvement efforts on behalf of individuals with special health care needs and their families.
- Initiate new assessment activities for the upcoming five-year Title V MCH needs assessment.
- Support initiatives that lead to a community-based system of services for children with special health care needs. Focus areas include screening, medical home, family partnership and satisfaction, adequate insurance, community-based service systems and transition.
EMERGENCY PREPAREDNESS & RESPONSE
BY THE NUMBERS | IN-STATE RESPONSE

1. Western ND July 2017 Summer Fire Risk Management
2. Bismarck August 2017 State Phone System Outage
3. Bismarck June 2018 CHI Staffing Shortfall
4. Watford City July 2018 EF2 Tornado Response
5. Lisbon Summer 2018 Life Safety Concern Response
6. Richardton Summer 2018 Life Safety Concern Response
7. Crosby Summer 2018 Life Safety Concern Response
8. Elgin Summer 2018 Life Safety Concern Response
11. Strasburg Summer 2018 Back-up Power Protection
13. Statewide December 2018 Bitcoin Bomb Threats
14. Fargo February 2019 Essentia Health Heat Loss
15. Ashley February 2019 Ashley Medical Center Fire
16. Fargo April 2019 LPHU Suspicious Letter
The Emergency Preparedness and Response Section is responsible for the planning and coordination of the public health and medical response to daily emergencies and large-scale disasters.

The section consists of the following divisions:

- Education Technology
- Emergency Medical Systems
- Hospital Preparedness & Response
- Public Health Preparedness & Response

EDUCATION TECHNOLOGY

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

Accomplishments

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

Goals

- Produce distance learning materials that address public health and medical emergency preparedness and response operations protocols and procedures.
EMERGENCY MEDICAL SYSTEMS

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

Accomplishments

• Implementation of a statewide EMS data repository that is fully compliant with the latest version of the National EMS Information Service (NEMSIS) data standard. All North Dakota ambulance services have been provided with an electronic patient care reporting system (ePCR) at no cost or given the option to use the ePCR of a participating vendor.
• Adoption of the 2018 National EMS Scope of Practice Model for all levels of licensed personnel.
• Advancement of the Stroke System of Care, including “stroke ready” designation for critical access hospitals with the capabilities to care for a patient suffering acute stroke symptoms. All but eight critical access hospitals have this voluntary designation.
• The formation and designation of 11 Cardiac Ready Communities. Twenty-seven additional communities have signed letters of intent. Distribution of over 100 automated external defibrillators to participating communities throughout the state.
• Development of revised Trauma Rules and subsequent endorsement by the statewide Trauma Committee.
• Renewed the contract with the Health Resources and Services Administration for the continuance of the Emergency Medical Services for Children state partnership program.

Goals

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

CARDIAC READY COMMUNITIES
**HOSPITAL PREPAREDNESS & RESPONSE**

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

**Accomplishments**
- Coordinated with hospitals, long-term care facilities and statewide public health in the development and implementation of table top and full-scale exercises that enable hospitals and long-term care facilities to meet requirements put forth by the Centers for Medicare/Medicaid Services (CMS).

**Goals**
- Develop a training and exercise program that improves the emergency response capabilities of hospitals, nursing homes and other medical facilities, and meets the new federal Centers for Medicare and Medicaid Services exercise requirements.
- Increase the quantities of medical emergency response equipment and supplies prepositioned in the field to reduce emergency response times.
- Increase statewide participation in North Dakota’s Health Care Coalition activities.

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**PUBLIC HEALTH PREPAREDNESS & RESPONSE**

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

**Accomplishments**
- Established a Statewide Response Team utilizing local public health staff from eight large public health jurisdictions in North Dakota.
- Prevented evacuation of residents at 13 assisted living facilities with assets from the North Dakota State Medical Cache. Technical issues ranged from AC system failures to power outages and backup emergency generator failure.
- Secured additional public health supplies and equipment for the state public health and medical cache for use by local and state responders during emergencies.

**Goals**
- Increase online long-distance training opportunities for health and medical responders in North Dakota.
- Increase the quantities of public health emergency response equipment and supplies prepositioned in the field to reduce emergency response times.
**HEALTH RESOURCES BY THE NUMBERS**

The Health Resources section licensed and inspected:

- **2,389** Food Establishments
- **517** Lodging and Bed & Breakfast Facilities
- **64** Basic Care Facilities
- **80** Long-Term Care Facilities
- **51** Hospitals
- **123** Construction Projects in Hospitals, Nursing Facilities and Basic Care Facilities

Health Facilities licensees among Basic Care Facilities, Long-Term Care Facilities and Hospitals comprise **11,316 BEDS**

As of June 30, 2019, the Nurse Aide Registry had active:

- **CNA** - 14,389
- **NA** - 1,275
- **MA I** - 1,234
- **MA II** - 873

Food & Lodging conducted more than **6,100** inspections of licensed facilities, including **108** consumer health and safety concerns

Health Facilities began the process of implementing an online nurse aide registry application and renewal process.
The section promotes quality care and services for the people of North Dakota by:

• Licensing and inspecting food establishments, including restaurants, bars, retail food stores, meat markets, bakeries, childcare/pre-school kitchens, and school kitchens (K-12) food processing plants, mobile-home parks, trailer parks, campgrounds, lodging facilities, bed-and-breakfast facilities, and assisted-living facilities.

• Licensing and inspecting tanning facilities, tattoo and body art facilities and electrologists.

• Licensing inpatient and outpatient health care facilities, basic care facilities, home-health agencies and hospice programs.

• Conducting certification surveys of all health care facilities and programs that provide service to people eligible for the federal Medicare and Medicaid programs. Certification is voluntary but required for the provider to receive payment through Medicare and Medicaid.

• Certifying clinical laboratories that test human body substances for medical purposes.

• Administering the nurse aide training and competency evaluation programs and registry.

• Reviewing and approving facility construction plans.

• Conducting on-site inspections of new construction and remodeling in licensed health care facilities.

FOOD & LODGING

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

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

The NDDoH has a memorandum of understanding with nine individual local public health units (LPHU) to conduct inspections. The NDDoH inspects the establishments LPHUs do not inspect.
FOOD & LODGING

The Division of Food and Lodging licenses and inspects:
• 2,389 Food Establishments
• 101 Food Processors
• 517 Lodging and Bed and Breakfast Facilities
• 628 Mobile Home Parks, Trailer Parks and Campgrounds
• 55 Assisted Living Facilities (food service & fire safety)
• 61 Tanning Facilities, Tattoo and Body Art Facilities, and Electrologists

Accomplishments
• Conducted more than 6,100 inspections of licensed facilities.
• Investigated 108 consumer health and safety concerns brought to the division.
• Assisted 496 new establishments in obtaining licensure to operate.
• Fully implemented an electronic license and inspection information management system available to local environmental health programs for no additional cost. The integration of local public health departments to the system has enhanced the ability to share data and align programs.
• Effectively maintained certification of the FDA commissioned standardization officer to carry out the division’s standardization and certification procedure for state and local retail food inspectors. Standardization of the inspection process promotes an integrated and uniform retail food regulatory program ensuring that food inspections are risk-based, achieve compliance, and are conducted with a high level of knowledge, understanding, and application of food safety principles.
• Successfully met Standard 1 of the voluntary National Retail Food Regulatory Program in having a sufficient regulatory foundation.
• Provided education and outreach regarding North Dakota Century Code 23-09.5, Cottage Food Production and Sales.

Goals
• Fully implement the electronic license and inspection information management system statewide at local environmental health programs.
• Make licensed establishment inspection reports readily available online to inform and engage the community while creating a more user-friendly portal for licensed operators to access their license information.
• Develop educational outreach and training resources available for industry.

HEALTH FACILITIES

The Division of Health Facilities works to ensure that North Dakota’s inpatient care facilities, outpatient programs, and staff-provided-services meet applicable health care standards.
The division licenses the following:
• Nursing facilities – 80
• Basic care facilities – 64
• General acute, primary care and specialized hospitals – 51
• Home health agencies – 22
• Hospice programs – 13
HEALTH FACILITIES

The division has certification responsibilities for the following:

- Long-term care nursing facilities – 80
- Hospitals – 36 critical access hospitals, 6 general acute hospitals, 2 long-term acute care hospitals, 3 psychiatric hospitals, and 1 rehabilitation hospital
- Intermediate care facilities for individuals with intellectual disabilities – 73
- Home health agencies – 18
- Hospice programs – 13
- Rural health clinics – 57
- Clinical laboratories – 669
- Ambulatory surgical centers – 13
- End-stage renal dialysis units – 16
- Portable X-ray units – 1
- Psychiatric residential treatment facilities – 6

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

The division also approves nurse aide training and competency evaluation of 52 programs, and more than 70 medication assistant training programs, consistent with state licensing rules and/or federal certification requirements for long-term care facilities.

The department’s nurse aide registry maintains a record of individuals who successfully complete an approved competency evaluation.

Accomplishments

- Conducted workshops and training sessions that focused on care-related services that were identified through the survey process in conjunction with the state's provider associations.
- Began implementation of an online nurse aide registry application and renewal process to create a friendly paperless experience.

Goals

- Maintain the average survey interval of 12 months or less for long-term care facilities and intermediate care facilities for individuals with intellectual disabilities.
- Promote consistency in the survey process through provision of training to all survey staff to enhance consistency during the survey process.
- Revise rules related to end of life services in basic care facilities and laboratory services in hospitals.

LIFE SAFETY & CONSTRUCTION

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

Accomplishments

- Attained an average Life Safety Code survey interval of 12 months or less for nursing facilities and intermediate care facilities for individuals with intellectual disabilities.
- Reviewed and approved 123 construction projects for new facilities, additions, remodeling, and installations in hospitals, nursing facilities, and basic care facilities.
- Implemented the legislative requirement to complete initial review of all construction projects of $1,000,000 or less within 60 days of receipt.

Goals

- Maintain an average Life Safety Code survey interval of 12 months or less for nursing facilities and intermediate care facilities for individuals with intellectual disabilities.
- Maintain the skills of currently cross-trained staff to assist with the Life Safety Code survey process.
In 2018, 100% of all women found to have syphilis during pregnancy were treated in a timely and appropriate manner. The state did not have any reported cases of congenital syphilis in the biennium.

The HIV Prevention Program provided over 10,000 free HIV tests to at-risk persons at Counseling, Testing & Referral sites in the state. Of those who tested positive, all received their results and were referred to appropriate medical care.

The State Forensic Examiner Conducted 493 autopsies, with the causes of death being:
- **Undetermined** - 29
- **Homicide** - 23
- **Natural** - 89
- **Suicide** - 176
- **Accidental** - 176
- **Undetermined** - 29

Microbiology received and processed 95,633 specimens resulting in 158,466 analytical tests.

Disease Control worked to authorize four syringe service programs in the state, located in:
- Mandan
- Fargo
- Minot
- Valley City
Medical Services Section is responsible for disease prevention, surveillance and identification, as well as epidemiologic investigation and forensic examinations. The section includes the following divisions:

- Disease Control
- Microbiology Laboratory
- Forensic Examiner

Disease Control

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

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

Health care providers and laboratories statewide notify the division of mandated reportable diseases. During the last biennium, division personnel collected information for or conducted investigations into 32,945 cases of reportable conditions. In addition, division personnel worked closely with private health care providers and facilities, local public health units, and the general public to reduce the incidence of communicable diseases.

Epidemiology & Surveillance Program

The goals of the Epidemiology and Surveillance Program are to increase disease surveillance and response; build epidemiology, laboratory, and health information systems infrastructure; provide training and education; and improve disease reporting systems. The program focuses on, among others, enteric/food-borne illness, vector borne diseases, zoonotic diseases, influenza, antibiotic resistant infections, parasitic infections, waterborne diseases, non-flu respiratory viruses, mycotic infections, health care-associated infections, antibiotic stewardship, infection control improvement in healthcare facilities, and general outbreak response activities. This program includes the NDDoH's Syndromic Surveillance Program. Syndromic surveillance is used for disease or event detection, situation awareness for mass gatherings and public health emergencies, and ad hoc and population health trend analyses. This program also includes management of Maven, North Dakota's electronic disease surveillance system.

Accomplishments

- Identified and investigated a North Dakota resident with variant influenza. This was the first time variant influenza has been identified in the state.
- Investigated and responded to a severe cluster of Kingella kingae infections, a bacterial infection, in a North Dakota child care facility. This organism has been documented to cause outbreaks in these settings and has the potential to cause severe illness. Antibiotic preventive treatment of 91 children who...
attended the child care facility along with other infection control measures were recommended.

- Identified the vehicle of transmission for a multi-state outbreak of Salmonella infections linked to consuming Kratom through case investigation and laboratory analysis of samples from the patient and kratom product.
- Identified and investigated the first case of Acute Flaccid Myelitis (AFM) in the state.
- Responded to a case of infant botulism and ensured receipt of BabyBIG® treatment. The child recovered without any complications.
- Partnered with ND Quality Health Associates to develop an infection and antibiotic tracking tool to support North Dakota health care facilities in logging and tracking infections, antibiotic use, and susceptibility data.
- Developed standing orders for influenza antivirals that could be used by assisted living facilities or other long-term care facilities if access to a medical director is limited.
- Investigated 58 reported outbreaks of influenza-like illness in long-term care, basic care, and assisted living facilities, six schools, and two shelters/group homes.
- Conducted 61 on-site infection control assessments at North Dakota hospital, skilled nursing, dialysis, and ambulatory surgery center facilities and 93 remote infection control reassessments.
- Investigated 68 enteric disease clusters and outbreaks, including 19 multi-state outbreaks.
- Coordinated response to a cluster of Legionellosis cases associated with a hotel water park in North Dakota. Response included environmental sampling, remediation recommendations, health care provider education, and public notification. Additionally, coordinated response to a potential healthcare-associated Legionellosis case associated with a long-term care facility. A total of 17 cases of Legionellosis (single cases and outbreak cases) were investigated which is a 42% increase from the previous biennium.
- Responded to North Dakota’s first Carbapenem resistant pseudomonas aeruginosa (CRPA) containing the Verona Integron Metallo-Beta-Lactamase (VIM) gene in a resident at a long-term care facility in North Dakota. Response included an on-site infection control assessment, infection prevention recommendations, and colonization screening of potential contacts. Organism was contained and no additional cases were identified.
- Coordinated the response to a mass bat exposure at a recreational facility in North Dakota which resulted in rabies post-exposure prophylaxis recommendations for 22 individuals in North Dakota and 13 individuals in Montana.
- Collaborated with subject matter experts from the Centers for Disease Control and Prevention’s Bacterial Special Pathogens Branch and animal health officials to provide guidance to livestock owners after a potential anthrax exposure.
- Updated the rabies control law during the 2019 legislative session.

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

HIV Prevention Program
The mission of the HIV Prevention Program is to reduce and prevent transmission of HIV and to reduce the associated illnesses and deaths of HIV infected people. HIV prevention services are conducted at 23 contracted sites. If you count satellite sites and non-contracted partners, the number increases to 42. The services include HIV testing, pre- and post-test risk reduction counseling, partner notification, referrals, education and prevention case management. Additional activities include working with HIV positive clients to ensure that people who have been exposed to their illness are referred for testing and offered appropriate medical care.
Accomplishments

• Worked to authorize four syringe service programs in North Dakota. These programs are located in Mandan, Fargo, Minot and Valley City.
• Provided over 10,000 free HIV tests to at-risk persons in North Dakota. Of those who tested positive, all received their results and were referred to appropriate medical care.
• Provided HIV education and testing at events in conjunction with Family HealthCare and Rural AIDS Action Network.
• Held the first HIV Awareness Walk in conjunction with the Community Planning Group in September 2018.

HIV Surveillance Program
The HIV Surveillance Program monitors the incidence and prevalence of HIV in North Dakota residents through active disease surveillance activities. North Dakota continues to have low incidence and prevalence of HIV/AIDS in the United States. As of December 31, 2018, there were 457 HIV positive persons reported to be living in North Dakota.

Accomplishments

• Enhanced surveillance system to identify individuals who have fallen out of care or who have not reach sustained viral suppression to link to care services. This has allowed our viral suppression rate for people living with HIV to increase from 71% in 2016 to 83% in 2018. The goal established by the Ending the HIV Epidemic strategic plan is 90% by 2030. Viral Suppression is the current desired status for people living with HIV. People who achieve and maintain viral suppression have effectively no risk of sexually transmitting their infection to others.

Ryan White Part B Program
The Ryan White Part B Program assists eligible low-income HIV-positive North Dakota residents in accessing and maintaining health care and supportive services. As of December 31, 2018, there were 244 clients receiving services through the Ryan White program and a total of 320 people were enrolled at some time during the year. This is a 3% increase from 2017.

Accomplishments

• Routinely identified persons living with HIV who are not in care to re-engage into care. This is done through routine monitoring of surveillance data. Of the people served by the Ryan White Part B program, 93% had achieved and maintained a status of viral suppression.
• Provided medication and/or copay assistance to over 223 people to assure access to antiretroviral medications.
• Provided insurance premium assistance to 56 clients who were otherwise ineligible for employer-based insurance, North Dakota Medicaid or Medicare.
• Provided housing assistance to 91 individuals to
ensure that over 92% of clients were able to have permanent/stable housing. Housing stability has been shown to have an impact on an individual’s ability to stay engaged with the health care process and is a priority for HIV Prevention and Care programs.

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

**Accomplishments**
- This biennium, 9,958 cases of chlamydia, gonorrhea and syphilis were reported to NDDoH. Of those, 3,075 were interviewed, from these interviews, over 2,321 partners were identified for referral into public health for testing and/or treatment.
- In 2018, 100% of people who were found to have syphilis during pregnancy were treated in a timely and appropriate manner. North Dakota did not have a reported congenital syphilis case in the biennium.
- As of June 30, 2019, 100% of women reported with syphilis infection were interviewed. From these interviews 100% provided the name of a contact who was able to be contacted by NDDoH. All of the contacts were either referred for treatment and/or testing.

**Tuberculosis Program**
The Tuberculosis (TB) Program works to prevent, control and eliminate TB in North Dakota. Program activities include identifying and reporting all cases of active TB, ensuring completion of treatment, identifying and screening all people who have had contact with infectious cases of TB and offering laboratory services. In 2018, 13 cases of active TB were reported and of those, 9 (69%) were born outside of the United States in countries where tuberculosis is endemic.

**Accomplishments**
- Reduced costs to the general fund by contracting with a pharmacy to conduct third party billing for medications and oversee the delivery of medications to North Dakotans with both tuberculosis infection and tuberculosis disease.
- Worked with the Division of Microbiology and the Epidemiology and Surveillance Program to validate the Maldi ToF which helps to earlier identify cases of TB.
- Established tuberculosis infection (also known as latent tuberculosis infection or LTBI) as a reportable condition in 2018.
- Of the 393 reports of tuberculosis infection in 2018, 317 (80.7%) are known to have initiated preventative therapy through the state-contracted medication program.
- Of the tuberculosis disease cases reported in 2017, 92.3% of those individuals completed treatment within 12 months of initiation.

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

**Accomplishments**
- Over 3,259 hepatitis C rapid tests were conducted at Counseling Testing and Referral sites to target people at increased risk for hepatitis C infection.
- Continued active follow-up of cases under the age of 35 to better understand risk factors for infection. Of those assessed, 88% indicated that injection drug use was the primary risk factor for hepatitis C infection.
- Produced a vulnerability index utilizing hepatitis C
infection reported in people under the age of 35 as a surrogate for person who inject drugs. This index identified the factors that put communities at increased risk for HIV or hepatitis C outbreak due to injection drug use and provide data to identify areas that would most benefit from the establishment of harm reduction programs aimed at persons who inject drugs.

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

The National Immunization Survey (NIS) estimates that 78.6% of North Dakota children were up-to-date on their immunizations (DTaP, polio, MMR, haemophilus influenzae type B, hepatitis B, chickenpox, and pneumococcal: 4:3:1:3:1:4 series) by 24 months in 2018. The goal for Healthy People 2020 is 80%.

The NIS estimates that 90.2% of North Dakota adolescents ages 13 through 17 were up-to-date on tetanus, diphtheria, and pertussis (Tdap) vaccine; 92.5% for meningococcal vaccine; and 72.2% of girls and 55.5% of boys were up-to-date for human papillomavirus (HPV) vaccine in 2016. The goal for Healthy People 2020 is 80% for each vaccine.

According to the 2018–2019 school immunization survey, 94% of kindergartners were up-to-date for polio, 93.8% of diphtheria/tetanus/pertussis, 93.8% for measles/mumps/rubella, 95.4% for hepatitis B, and 93.4% for chickenpox. Of children entering kindergarten, 3.9% of parents or guardians claimed a religious or personal belief exemption to the school immunization requirements. Healthy People 2020 goals for kindergarten entry immunization rates are 95%. State, county and school-level immunization coverage rates are posted on the immunization program website. Quarterly immunization coverage rates according to the NDIIS for all age groups are posted on the immunization program website.

Accomplishments
• Implemented the new school immunization requirement for 11th and 12th graders to receive the booster dose of meningococcal conjugate vaccine. In the first year of implementation (2018–2019 school year), a 90% immunization coverage rate was achieved.
• Continued interoperability between the NDIIS and statewide electronic medical records.
  o The NDIIS is interoperable with the North Dakota Health Information Network, MAVEN and 386 provider sites.
  o 82% of doses entered into the NDIIS are electronically submitted.
  o Interoperability has increased the percentage of adults with at least one dose in the NDIIS to
MICROBIOLOGY

The microbiology (public health) laboratory performs testing in the areas of bacteriology, mycology, parasitology, immunology, virology, molecular diagnostics, bioterrorism response, and dairy and water bacteriology. The laboratory is responsible for providing rapid, accurate detection and identification of organisms that may threaten the public’s health. Outbreak response and control is dependent upon the laboratory’s continuing commitment to maintain and develop new technologies and advanced testing capabilities considering new and emerging organisms and biothreat agents. In addition, the laboratory provides training and consultation expertise regarding safety and testing methodologies to sentinel laboratories throughout out North Dakota.
MICROBIOLOGY

Accomplishments
- Received and processed 95,633 specimens resulting in 158,466 analytical tests; down from 101,322 specimens and up from 151,244 tests in the previous biennium.
- Expanded the mosquito and tick surveillance program for various vector-borne diseases.
- Submitted 374 bacterial DNA fingerprint patterns to CDC’s national PulseNet database to assist in nationwide, foodborne outbreak disease detection efforts.
- Isolated Salmonella I 4,5,12:b:- from both the patient sample and kratom product that resulted in North Dakota being the first state to link the product to the disease outbreak.
- Completed the Clinical Laboratory Improvement Amendments (CLIA) laboratory inspection and recertification process in February of 2019.
- Obtained recertification for federal testing for dairy products (Food and Drug Administration) and drinking water (EPA).
- Certified 3 dairy and 10 EPA laboratories.
- Supported the statewide courier system to transport clinical laboratory specimens from a network of hospitals/clinics/public health units to the laboratory.
- Reported 13,644 laboratory reportable condition results electronically to the Division of Disease Control’s MAVEN system.
- Identified a variant influenza (H3N2v) through CDC’s influenza subtyping analytical method.
- Created and published 10 biothreat, biosafety, and emerging disease online presentations. The presentations are available nationally through CDC’s TRAIN platform and available for PACE credits.
- Upgraded the security and video surveillance systems that protect the laboratory.
- Conducted a point-prevalence study with the North Dakota Department of Corrections to identify Hepatitis C prevalence and genotypes among the inmate population.

Goal
- Complete the laboratory information management system upgrade.

FORENSIC EXAMINER

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

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

Accomplishments
- During the 2017-2019 biennium, a total of 994 autopsies were performed in North Dakota. During this time, 493 (49.6%) autopsies were performed at the ND DoH’s Forensic Examiner’s Office (FEO).
- The FEO performed or had jurisdiction over a total of 493 autopsies for the 2017–2019 biennium. The cause of death is as follows:
  o Natural: 89 (18.0%)
  o Suicide: 176 (35.7%)
  o Undetermined: 29 (5.9%)
- The number of autopsies being performed at the FEO from 2008 through 2017 were close to or above the 250 autopsies recommended by the National Association of Medical Examiners for a single forensic pathologist.
- The 2017 legislature appropriated $480,000 to be used to continue the contract with UND.
The Environmental Health Section became a new state agency—the North Dakota Department of Environmental Quality—on April 29, 2019.

**98% COMPLIANCE**

Municipal Facilities maintained a community water system compliance rate of 98% with health-based standards under the Safe Drinking Water Act.

**$1,400,000,000**

The Clean Water State Revolving Loan Fund and Drinking Water State Revolving Loan Fund programs combined to award 596 loans worth over $1.4 billion since the programs began.

**Waste Management Staff conducted inspections at:**
- 827 underground tank facilities
- 308 solid waste facilities
- 78 hazardous waste generators & permitted facilities

**Air Quality is developing new software to streamline reporting and review of annual emissions inventories from the regulated community.**

**The Division of Chemistry analyzed about 21,000 samples for approximately 418,000 parameters.**

**Water Quality staff investigated and followed up on 1,331 incidents (e.g., pipeline breaks, vehicle accidents, tank overflows) during the biennium.**
To safeguard North Dakota’s air, land and water resources, the Environmental Health Section works with federal and state agencies, as well as with special interest groups, local governments, health care providers, veterinarians and the citizens of the state.

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

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

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

- Air Quality
- Chemistry
- Municipal Facilities
- Waste Management
- Water Quality

Division activities are coordinated by the section chief. Employees in the section chief’s office oversee quality assurance; public information; staff training; and coordination of computer and data management activities, emergency response efforts and funding requests. Staff also coordinate development of the Environmental Protection Agency/North Dakota Performance Partnership Agreement, which defines the scope of environmental program responsibilities and commitments.

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

An assistant attorney general assigned to the section chief’s office provides legal counsel to the section and assists with enforcement procedures involving violations of state environmental laws.

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

1The Environmental Health Section of the North Dakota Department of Health became the North Dakota Department of Environmental Quality on April 29, 2019.
AIR QUALITY

The Division of Air Quality is responsible for protecting the state’s air quality resources. Scientists, engineers and technicians provide technical assistance during environmental evaluations and environmental emergencies.

Air Pollution Control Program
This program is responsible for protecting and fostering the state’s air quality resources. It promotes clean air activities, monitors ambient air quality, conducts compliance outreach and initiates enforcement actions to correct air pollution problems. Primary responsibilities include:

- Evaluating permit applications.
- Conducting computer modeling of potential impacts to air quality.
- Issuing permits that restrict emission levels to ensure standards are met.
- Inspecting facilities for compliance.
- Reviewing reports to ensure they comply with applicable regulations and emission limits.
- Investigating air pollution complaints.
- Operating a statewide ambient air quality monitoring network.

All the above work has significantly expanded as the Bakken oil formation has developed and now has more than 15,000 active oil production facilities in the state.

Accomplishments

- Maintained attainment status for all state and national Ambient Air Quality Standards during the biennium.
- Evaluated more than 150 submissions for Permits to Construct to determine effects on air quality. Facilities included ethanol plants, sugar beet processing, grain elevators, manufacturing facilities, refineries, natural gas processing facilities and compressor stations. The division has prioritized the processing of natural gas capture projects to reduce flaring.
- Conducted approximately 185 air quality compliance inspections of permitted facilities.
- Updated the Air Pollution Control Rules to match federal requirements.
- Processed approximately 3,500 oil and gas facility registrations and completed about 1,000 inspections of oil and gas installations.
- Obtained a forward-looking infrared radar (FLIR) camera through a grant request; the camera has been instrumental in identifying excessive emissions in the field.
- Continued to work with most Bakken oil and gas producers to proactively address excessive emissions. This includes prioritizing of gas capture projects and alternative uses of gas on well pads; operation and maintenance on well pads to reduce fugitive emissions; and working on approving a 99% destruction and removal efficiency (DRE) flare.
- Awarded approximately $450,000 in Clean Diesel Grants to 21 public school districts.
- Began development of the state’s Second Implementation Period Compliance Plan for the Regional Haze Rule.
- Initiated a summer internship program for college students and/or recent graduates to gain valuable work experience pertaining to regulatory work in air quality. The first individual hired under the program was ultimately rehired as an FTE.
- Received beneficiary status on behalf of the State of North Dakota for the Volkswagen Settlement.
- Reduced review time for regulatory air dispersion modeling required for the division’s pre-construction program, while still conducting thorough and protective reviews using new processes. What previously took about 400 hours now averages about 70 hours.

Radiation Control and Indoor Air Quality Program

This program monitors the development and use of ionizing and non-ionizing radiation sources to protect the health and safety of North Dakotans and the environment. The program is also involved in evaluating and mitigating asbestos, radon, lead and other indoor air quality concerns, as well as implementing a public awareness and education program on these health risks.

Accomplishments

- Tested 30 schools across the state for radon and assisted with mitigation of any high radon levels.
- Participated in six home shows promoting radon and asbestos awareness.

Goals

- Maintain delegation and responsibility for federally mandated programs.

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2The Division of Laboratory Services was separated into two divisions — Microbiology and Chemistry — effective July 1, 2017. The new Department of Environmental Quality retained the Division of Chemistry, and the Division of Microbiology remained under the Department of Health.

3The Radiation Control and Indoor Air Quality Program was transferred to the Division of Waste Management effective July 2019.
CHEMISTRY

The Division of Chemistry laboratory provides analytical testing data for environmental protection, public health, agriculture and petroleum regulatory programs in North Dakota. The laboratory is certified by U.S. EPA Region 8 for the determination of 71 regulated parameters in drinking water.

Accomplishments

The laboratory’s Inorganic and Organic programs analyzed about 21,000 samples for approximately 418,000 analytes. Data generated were used to monitor or regulate:

- Surface, ground and drinking water.
- Municipal and industrial wastewater.
- Solid and hazardous waste.
- Spills/releases of oilfield-related materials.
- Livestock feed, pet foods, and agricultural and household fertilizers.
- Gasoline and diesel fuel.

The laboratory’s certification section — the North Dakota Environmental Laboratory Certification Program (NDELCP) — provides:

- Certification for about 26 in-state environmental laboratories.
- Reciprocal certification for about 55 out-of-state environmental laboratories doing work for clients in North Dakota.
- Program and technical support for NDELCP-certified laboratories.

Goals

- Implement analytical capabilities using new technologies purchased in the biennium.
- Increase analytical capabilities using technologies the laboratory already possesses.
- Pursue third-party certification status for select non-drinking water parameters.
- Replace aging and outdated Laboratory Information Management System.
- Continue to work on the second round of Regional Haze Rule emission reductions.
- Continue work on adopting two federal rules for controlling air pollution from the oil and natural gas industry, as mandated by HB 1024 during the 66th Legislative Assembly. Along with adopting these rules, HB 1024 authorized 10 new FTEs and $1.5 million in equipment and a new software system for environmental reporting and compliance.
- Begin development of the state implementation plan for the Affordable Clean Energy Rule.
- Implement more robust database and electronic reporting capabilities.
- Conduct radon testing in 55 schools during 2019-2020 school year.

AIR QUALITY

- Expand modeling capability by implementing new air quality models and updating input databases.
- Continue work on the Clean Diesel Grants and the Volkswagen Settlement.
- Continue work with Bakken oil and gas producers to minimize, to the extent possible, the amount of uncontrolled releases of hydrocarbon gases (a multi-year project involving significant time and resources from the state and industry partners).
- Continue to work on the second round of Regional Haze Rule emission reductions.
- Continue work on adopting two federal rules for controlling air pollution from the oil and natural gas industry, as mandated by HB 1024 during the 66th Legislative Assembly. Along with adopting these rules, HB 1024 authorized 10 new FTEs and $1.5 million in equipment and a new software system for environmental reporting and compliance.
- Begin development of the state implementation plan for the Affordable Clean Energy Rule.
- Implement more robust database and electronic reporting capabilities.
- Conduct radon testing in 55 schools during 2019-2020 school year.
MUNICIPAL FACILITIES

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

Drinking Water State Revolving Fund (DWSRF) Program

This program provides low-interest loans to help public water systems finance the infrastructure needed to comply with the Safe Drinking Water Act. Eligible borrowers can obtain financing to construct water treatment works at below-market interest rates.

Since inception of the program in 1997 through June 30, 2019, 258 loans totaling approximately $632 million have been approved to assist North Dakota water systems. Program staff also review about 200 drinking water projects each year to ensure compliance with state design criteria before construction.

Clean Water State Revolving Fund (CWSRF) Program

This program provides low interest loans to fund conventional wastewater and nonpoint source pollution control needs. Eligible borrowers can obtain financing to build wastewater treatment works at below-market interest rates. Since inception of the program in 1990 through June 30, 2019, 338 loans totaling approximately $806 million have been approved to assist North Dakota wastewater systems. Program staff also review about 200 projects each year to ensure compliance with state design criteria before construction.

Accomplishments

- Issued 68 loans totaling approximately $289 million through the DWSRF and CWSRF programs to North Dakota communities for addressing drinking water and wastewater compliance and infrastructure needs.

Public Water System Supervision (PWSS) Program

This program works with 329 public water systems in North Dakota to ensure that drinking water meets all standards established by the Safe Drinking Water Act. This is accomplished by monitoring contaminants and providing technical assistance to the systems.

The program provides training for and certification of operators in charge of water treatment and distribution facilities and wastewater collection and treatment plants. There are 1,240 certified operators in the state. Program staff members also administer the state’s fluoridation program and provide technical assistance to private water systems.

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

Accomplishments

- Complied with all major federal program requirements and maintained federal delegation responsibilities for EPA programs.
- Maintained a community water system compliance rate of 98% with health-based standards under the Safe Drinking Water Act; this rate is among the highest in the region and the nation.

Goals

- Maintain state delegation and responsibility for the DWSRF, CWSRF and PWSS programs.
- Continue to assist communities in addressing drinking water and wastewater compliance and infrastructure improvement needs through the DWSRF and CWSRF programs.
- Maintain or increase community water system compliance with health-based standards under the Safe Drinking Water Act.
The Division of Waste Management works to safeguard public health through programs designed for generators of solid and hazardous waste and operators of underground storage tanks.

Programs include:
- Hazardous Waste
- Solid Waste
- Underground Storage Tank

**Hazardous Waste Program**
This program regulates facilities that generate, store, treat, dispose of or transport hazardous waste. The program encourages practices that minimize, or eliminate, hazardous waste generation. When practices are unable to eliminate the generation of hazardous waste, the Hazardous Waste Program ensures hazardous waste operators’ practices do not adversely affect human health or the environment.

**Accomplishments**
- Inspected 78 hazardous waste generators and permitted facilities, as well as an additional 28 polychlorinated biphenyl (PCB) facilities. Compliance assistance is provided when operators contact the program.
- Completed site assessments at 14 potentially contaminated sites for Brownfield Assistance Program. Fourteen additional sites received funding for environmental cleanups: 13 sites had asbestos material removed, while one site had a partial removal of TENORM (technologically enhanced naturally occurring radioactive material) contaminated soil.
- Issued and renewed permits for storage, treatment, disposal and transport activities.
- Minot Air Force Base’s Hazardous Waste Permit HW-021 was renewed for Corrective Action activities.

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

**Accomplishments**
- Regulated more than 827 active tank facilities with a total of 2,059 tanks.
- Monitored compliance by on-site visits at least once every three years (compliance rate of 86.8%), as well as mail-in self-certification.
- Observed 66 tank closures, conducted more than 634 on-site inspections, and investigated and monitored cleanup of more than 36 leaking UST sites.

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

**Accomplishments**
- Conducted 1,004 inspections of 308 facilities that manage solid waste; provided compliance assistance to numerous facilities that generate or manage solid waste.
- Renewed and/or revised permits for 35 existing facilities including industrial, inert, municipal solid waste and special waste disposal facilities.
- Implemented new rules on management of low-level TENORM.
- Reviewed application for oilfield special/industrial waste disposal facility to accept TENORM waste.
- Conducted 11 workshops with trained operators, waste generators and haulers on a variety of waste topics.
- Issued 356 waste hauler permits with additional conditions to reduce spillage and report releases, spills and rejected loads.
- Implemented nutrient management requirements to help food processing and livestock facilities manage and recycle organic waste materials.
- Contracted with local public health units and units of government to complete abandoned motor vehicle projects in Burleigh, Divide, Emmons, Grant, Kidder, McKenzie, Mercer, Morton, Mountrail, Oliver, Sioux and Williams counties, as well as the city of Washburn.
Conducted routine collection and analysis of 394 petroleum samples.
- Registered all antifreeze manufacturers and retailers in the state.
- Used Leaking Underground Storage Tank (LUST) Trust Fund to investigate suspected UST releases and conduct corrective actions. LUST Trust Fund provided for cleanup and/or removal of leaking/potentially leaking USTs.

Goals
- Assist operators with proper management of hazardous wastes through inspections and requested compliance assistance.
- Use Brownfields Assistance Program to continue to aid communities in restoring environmentally contaminated properties to a useable state.
- Continue implementing new rules for managing TENORM generated in oil exploration and production.
- Work to obtain approval for state-run program for coal combustion residuals (CCR) rules.
- Update solid waste management rules and guidance regarding CCR, financial assurance, regulated infectious waste, landfill development, final closure and integrated waste management.
- Conduct training to address challenges with inert waste management in rural areas (economic development, abandoned and dangerous buildings, and disaster debris management).
- Promote “Pay as You Throw,” or volume-based waste services/fees, encouraging waste reduction and recycling.
- Promote use of Abandoned Motor Vehicle Program funds to clean up unwanted scrap and evaluate alternative uses and management of scrap tires.
- Assist tank owners with contamination assessment/cleanup activities following upgrade and/or replacement of USTs or when leaks occur.
- Provide compliance monitoring, inspections and public outreach about the proper operation of USTs.
- Provide online owner/operator training to tank owners to comply with EPA guidelines.
- Use the LUST Trust Fund to investigate and properly close abandoned UST sites.
- Collect petroleum samples from retailers and respond to product and labeling deficiencies.
- Review antifreeze registration requests and respond to formulation/labeling deficiencies.
- Complete update of the UST rules and regulations as mandated by EPA.

Waste Management

WATER QUALITY

The Division of Water Quality administers the following programs to ensure the state’s water stays clean and to protect continued beneficial use for municipalities, agriculture, industry and ecosystem health.

Groundwater Protection Program
The Groundwater Protection Program works to control potential sources of contamination and to restore groundwater impacted by contaminants. There are three subprograms.

Accomplishments
Source Water Protection Program
- Completed the first two years of the second of a five-year rotation of updating source water protection reports for every active community and non-community water system. Added one new community system and had several updates within non-community systems.
- Worked with the Natural Resources Conservation Service for new source water protection grant funding projects in Walsh County.
- Reassessed delineations and updated reports for systems that installed new wells or plugged existing wells.

Underground Injection Control (UIC) Program
- Issued permits for three new Class I injection wells, including two commercial wells.
- Worked with Division of Municipal Facilities to ensure septic system registration is part of
WATER QUALITY

• Facilitated closure of several high-risk wells located in source water protection areas or other sensitive groundwater areas.
• Completed Class I and Class V well inspections for new and existing wells.

Ambient Groundwater Monitoring Program
• Agricultural Groundwater: sampled approximately 380 wells in 17 aquifers for trace metals, general water chemistry parameters, nitrates and pesticides.
• Western Groundwater: sampled 165 wells in 19 aquifers for trace metals; bromide; general water chemistry parameters; nitrates; benzene, toluene, ethylbenzene and xylene (BTEX); diesel range organics (DRO) and gasoline range organics (GRO).

North Dakota Pollutant Discharge Elimination System (NDPDES) Program
The NDPDES Program issues point source wastewater discharge permits. Point source dischargers can be publicly owned treatment works, commercial or industrial facilities.

Accomplishments
• Worked to update all four sets of rules the program has been charged with implementing. These updates have enabled the department and permitted facilities to better streamline regulatory processes.
• Worked to reduce Significant Noncompliance (SNC) with permitted facilities. The program's SNC rate is currently less than the national average and is among the lowest in EPA Region 8.

Special Projects Program
To protect waters of the state, the Special Projects Program helps ensure a collaborative process involving federal, local, state and international water-related agencies, boards, committees, districts and private citizens. Responsibilities include:
• Ensuring that the water quality standards are up to date through the triennial review process.
• Issuing Clean Water Act Section 401 certification.
• Reviewing and commenting on environmental impacts.
• Responding to environmental incidents.

Spill Investigation Program
Any spill or discharge of waste that may pollute the state’s waters must be reported within 24 hours of the release. Reports are submitted through an online reporting system on the division’s web page. When the program receives a report, an investigator or team is sent to evaluate the site. Some releases may require immediate response by trained personnel; others may require investigation beyond initial cleanup to determine the full environmental impact. The program follows the remediation until cleanup is accomplished.

Accomplishments
• More than 2,631 general and oilfield environmental incidents occurred during the biennium (e.g., pipeline breaks, vehicle accidents, tank overflows).
Of those, staff investigated and followed up on 1,331 incidents. Remaining incidents were determined to have no environmental impact or be the responsibility of other agencies.

• Continued to evaluate impacts from the Belle Fourche pipeline incident at Ash Coulee Creek and the Summit Midstream incident at Blacktail Creek. Provided oversight for protection of these waterways and continued oversight of soil cleanup at the pipeline breaks.

• Worked with landowners, other state agencies and industry to develop guidelines for the cleanup of hydrocarbon impacts due to spills.

Watershed Management Program
The Watershed Management Program is responsible for the monitoring and assessing of water quality in streams, rivers, lakes and wetlands across North Dakota. Accomplishments are listed for programs and projects which can be grouped into three categories: Monitoring and Assessment, Nonpoint Source Pollution Management, and Watershed Management and Total Maximum Daily Load.

Accomplishments
Monitoring and Assessment
• Developed an on-line reporting tool through the division’s web page, allowing the public to report potential HABs in North Dakota waterbodies.
• Participated in the National Lakes Assessment in 2017 by visiting 50 randomly selected lakes to assess their biological, chemical and physical condition.
• Participated in the two-year National Rivers and Streams Assessment. Staff completed 22 site visits in 2018 on randomly selected river and stream locations to assess biological, chemical and physical conditions.

Nonpoint Source (NPS) Pollution Management
• Allocated approximately $7.7 million was to the NPS Program through two Section 319 grants.
• Utilized Section 319 funding to support 53 NPS projects including 24 watershed projects, 12 educational projects and 12 development phase projects. Another five support projects were also granted funding to address specific priority issues (e.g., riparian area and manure management) or to provide engineering assistance for watershed restoration projects.

Watershed Management and Total Maximum Daily Load (TMDL)
• Began implementing the Basin Water Quality Management Framework to guide water quality management planning and implementation through a targeted basin approach. This should promote coordination of the collection and sharing of information, increase availability of technical and financial resources, and focus on more effective water quality management activities.
• In 2018 removed a total of 27 waterbody-pollutant combinations from the state’s list of threatened and impaired waters, also known as the 303(d) list. These combinations were primarily removed due to an EPA-approved TMDL being written or water quality standard attainment through new data collection.

Goals
• Provide necessary and increasing oversight on pipeline breaks, tanker truck rollovers, and numerous oil and saltwater spills in the oil patch.
• Maintain state funding for NPS pollution projects.
• Develop a comprehensive nutrient reduction strategy that, when implemented, will help the state target and prioritize watersheds and best management practices to achieve cost-effective water quality improvements.
• Develop and adopt crude oil release cleanup guidelines.