

2013 HOUSE APPROPRIATIONS

HB 1211

2013 HOUSE STANDING COMMITTEE MINUTES

House Appropriations Human Resources Division
Sakakawea Room, State Capitol

HB 1211
1/31/2013 AM
JOB 18058

☐ Conference Committee

Committee Clerk Signature

Explanation or reason for introduction of bill/resolution:

A BILL for an Act to provide an appropriation to the department of commerce to address health care workforce needs in rural areas of the state

1,2,3,4,5,6,7,8,9,10,11.

Minutes:

00:54

Representative Keith Kempenich, introduced the HB 1211.

2:39

Lynette Dickson, associate Director at the Center for Rural Health, School of Medicine and Health Sciences (SMHS); Program Director of the Area Health Education Center (AHEC) testified in support of HB 1211 - Attachment #1.

14:5

Denise Andress, RN, Director Western ND AHEC testified in support of HB 1211 - Attachment #2.

32:00

Bill Kvivarchka, Director Eastern ND AHEC testified in support of HB 1211 - Attachment - #3.

Kvivarchka, presented ND AHEC Budget Proposal (Sustainability) - Attachment - #4.

59:17

Christopher Shauer, PhD Chairman of Board, Western AHEC - testified in support of HB 1211 - Attachment #5.

1:04:20

Katie Thompson, Education Coordinator Eastern ND AHEC - testified in support of HB 1211 - Attachment #6.

1:20:21

Shelley Peterson, President North Dakota Long Term Care Association - testified in support of HB 1211 - Attachment # 7.

1:21:40

Jerry E. Jurena, President of North Dakota Hospital Association testified in support of HB 1211 - Attachment # 8.

1:22:39

Representative Rick Holman, testified in support of HB 1211 - Attachment # 9.

Written testimony in support of HB 1211 was presented to committee - Attachment # 10.

Letters of support for HB 1211 was presented to committee - Attachment #11.

2013 HOUSE STANDING COMMITTEE MINUTES

House Appropriations Human Resources Division
Sakakawea Room, State Capitol

HB 1211
2/19/2013
19165

☐ Conference Committee

Committee Clerk Signature

Explanation or reason for introduction of bill/resolution:

A BILL for an Act to provide an appropriation to the department of commerce to address health care workforce needs in rural areas of the state

Minutes:

1,2,3.

Chairman Pollert reconvenes the committee.

00:22

Chairman Pollert called on Representative Holman to talk about the HB 1211.

Representative Holman asked the committee to review the North Dakota AHEC Newsletter - Attachment #1.

Representative Holman pointed out to the committee to the ND AHEC Sustainability. - Attachment #2. He also stated that this grant money is a dollar for dollar match.

Representative Holman pointed out to the committee to the NDEC Outcomes (2009-2012) - Attachment #3.

12:43

Representative Kreidt addressed the committee regarding this bill. He stated that the state of ND looking into the future the state could have a return on the contract. He also stated that he could support this bill.

15:18

Representative Holman put forth an amendment to change the dollar amount to \$400,000 With the additional comment if the money is not used that the portion would be return to the state.

Motion made by Representative Holman, second by Representative Nelson to approve the amendment of \$400,000.

22:10

Chairman Pollert called for a roll call vote on the motion on the floor.

Roll call vote taken 5 yeas, 2 nays, 0 absent. Motion passed

22:47

Representative Nelson made a motion of a Do Pass on HB 1211 as amended, second by Representative Holman.

Roll call vote 4 yeas, 2 nays, 0 absent. Adopt Amendment.

2013 HOUSE STANDING COMMITTEE MINUTES

House Appropriations Committee Roughrider Room, State Capitol

HB 1211
2/22/13
Job 19398

☐ Conference Committee

Kristie Helzer

Explanation or reason for introduction of bill/resolution:

Minutes:

Attachment 1

Rep. Holman presented the bill and Attachment 1. Referring to ND Health Education Center and the amendment .01001 (ended 4:35)

Rep Holman: Moved the amendment.

Rep. Kempenich: Second

Chairman Delzer: What does it mean by 'somebody reached'?

Rep. Holman: It is an ongoing, it's a new program, these are contacts made in schools.

Chairman Delzer: What do they do?

Rep. Holman: They do hands on activities with these people, it is called scrub camp.

Rep. Kempenich: 6:12 provides an explanation 7:32

Rep. Grande: I know one of the areas in need of medical services is on our reservations; are we working with students in these areas so they would be recruited? I know they would like tribal individuals to return?

Rep. Kempenich: Yes, one of our board members is a doctor at Fort Yates, and that is a component in there.

Rep. Grande: Do we have any statistics on that? How many reaches we've had there on the tribal lands?

Rep. Holman: I don't have any statistics; they plan to work with every school district in the state, including reservation schools. Right now there are only two education coordinators for the whole state.

Voice vote on amendment carries.

Rep. Bellew: If we pass this, next time they'll ask for \$1M. I realize this has a sunset on it but just another new thing.

Rep. Skarphol: 10:10, I agree with Rep Bellew, I think there are several entities that should be recruiting, and we shouldn't be creating another level of government to do that.

Rep. Kempenich: They are working within the rural health and the med school, where the original grant came from. The education part of it in the younger grades is not happening. You can recruit out of high school, but you need to get them interested in it earlier. This is aimed at the rural areas.

Rep. Monson: This K-12 participant things are not dealing with the kids, one of our mandates is that we have more career counseling. I think this might be what be what help train those counselors to make them career counselors.

Rep. Skarphol: If our campuses spent as much time recruiting students as athletes, we'd have better students and students more focused on getting an education. I do not think we should do this program.

Chairman Delzer: I have some real concerns about this. We seem to be taking over what someone else has started, just because the state had a little money. I'm not making any judgments on the facility or their program. This is a question of whether or not the state should be involved in this and I don't think it should.

Rep. Nelson: I think if you look at the continuum of health care delivery in the state, it's working. 15:16

Rep. Holman: This is something that isn't necessarily for the urban areas, but the areas where the 36 critical hospitals and nursing homes we've been talking about, these are the types of programs that would be helpful there, hopefully the end result would be those residents going into the healthcare.

Rep. Skarphol: 16:19 I would submit to you that Colorado has as much of a shortage as we do, so after 25 years of trying this program has not been very successful.

Rep Grande: Do Not Pass motion as amended.

Rep Skarphol: Second.

Motion failed 8-13-1

Rep Kempenich: Motion to Do Pass as Amended.

Rep Holman: Second.

13-8-1

Carried by: Rep Holman

13.0415.01001
Title.02000

Prepared by the Legislative Council staff for
House Appropriations - Human Resources
Division

February 19, 2013

YR
2/25/13

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1211

Page 1, line 5, replace "\$600,000" with "\$400,000"

Page 1, line 10, after "only" insert "for the purposes authorized in this section and only"

Renumber accordingly

STATEMENT OF PURPOSE OF AMENDMENT:

This amendment reduces funding to the Department of Commerce for matching grants to address health care workforce needs in rural areas by \$200,000 from \$600,000 to \$400,000.

Date: 19 Feb 2013
Roll Call Vote #: 1

**2013 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1211**

House House Appropriations - Human Resources Division Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken: ☒ Do Pass ☐ Do Not Pass ☐ Amended ☒ Adopt Amendment
☐ Rerefer to Appropriations ☐ Reconsider

Motion Made By _____ Seconded By _____

Representatives	Yes	No	Representatives	Yes	No
Chairman Pollert		✓	Representative Holman	✓	
Representative Bellew		✓			
Representative Kreidt	✓				
Representative Nelson	✓				
Representative Wieland	✓				

Total (Yes) 4 No 2

Absent 0

Floor Assignment _____

If the vote is on an amendment, briefly indicate intent:

Date: 2/19/2013
Roll Call Vote #: Motion

2013 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1211

House House Appropriations - Human Resources Division Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken: ☒ Do Pass ☐ Do Not Pass ☐ Amended ☐ Adopt Amendment
☐ Rerefer to Appropriations ☐ Reconsider

Motion Made By _____ Seconded By _____

Representatives	Yes	No	Representatives	Yes	No
Chairman Pollert	✓		Representative Holman	✓	
Representative Bellew		✓			
Representative Kreidt	✓				
Representative Nelson	✓				
Representative Wieland	✓				

Total (Yes) 5 No 1

Absent 0

Floor Assignment _____

If the vote is on an amendment, briefly indicate intent:

Motion by Holman, second by Nelson
to reduce amount to 400,000.

Date: 2/22/13
Roll Call Vote #: 1

2013 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1211

House Appropriations Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number 01001

Action Taken: ☐ Do Pass ☐ Do Not Pass ☐ Amended ☒ Adopt Amendment
☐ Rerefer to Appropriations ☐ Reconsider

Motion Made By Rep. Holman Seconded By Rep. Kempenich

Representatives	Yes	No	Representatives	Yes	No
Chairman Delzer			Rep. Streyle		
Vice Chairman Kempenich			Rep. Thoreson		
Rep. Bellew			Rep. Wieland		
Rep. Brandenburg					
Rep. Dosch					
Rep. Grande			Rep. Boe		
Rep. Hawken			Rep. Glassheim		
Rep. Kreidt			Rep. Guggisberg		
Rep. Martinson			Rep. Holman		
Rep. Monson			Rep. Williams		
Rep. Nelson					
Rep. Pollert					
Rep. Sanford					
Rep. Skarphol					

Total Yes _____ No _____

Absent _____

Floor Assignment _____

If the vote is on an amendment, briefly indicate intent:

voice vote carries

Date: 2/22/13
Roll Call Vote #: 2

2013 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1211

House Appropriations Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken: ☐ Do Pass ☒ Do Not Pass ☒ Amended ☐ Adopt Amendment

☐ Rerefer to Appropriations ☐ Reconsider

Motion Made By Rep. Grande Seconded By Rep. Skarphol

Representatives	Yes	No	Representatives	Yes	No
Chairman Delzer	X		Rep. Streyle	X	
Vice Chairman Kempenich		X	Rep. Thoreson	X	
Rep. Bellew	X		Rep. Wieland		X
Rep. Brandenburg		X			
Rep. Dosch	X				
Rep. Grande	X		Rep. Boe		X
Rep. Hawken		X	Rep. Glassheim		X
Rep. Kreidt		X	Rep. Guggisberg		X
Rep. Martinson			Rep. Holman		X
Rep. Monson		X	Rep. Williams		X
Rep. Nelson		X			
Rep. Pollert	X				
Rep. Sanford		X			
Rep. Skarphol	X				

Total Yes 8 No 13

Absent 1

Floor Assignment _____

If the vote is on an amendment, briefly indicate intent:

Date: 4/22/13
Roll Call Vote #: 3

2013 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1211

House Appropriations Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken: ☒ Do Pass ☐ Do Not Pass ☒ Amended ☐ Adopt Amendment

☐ Rerefer to Appropriations ☐ Reconsider

Motion Made By Rep. Kempenich Seconded By Rep. Holman

Representatives	Yes	No	Representatives	Yes	No
Chairman Delzer		X	Rep. Streyle		X
Vice Chairman Kempenich	X		Rep. Thoreson		X
Rep. Bellew		X	Rep. Wieland	X	
Rep. Brandenburg	X				
Rep. Dosch		X			
Rep. Grande		X	Rep. Boe	X	
Rep. Hawken	X		Rep. Glassheim	X	
Rep. Kreidt	X		Rep. Guggisberg	X	
Rep. Martinson			Rep. Holman	X	
Rep. Monson	X		Rep. Williams	X	
Rep. Nelson	X				
Rep. Pollert		X			
Rep. Sanford	X				
Rep. Skarphol		X			

Total Yes 13 No 8

Absent 1

Floor Assignment Rep. Holman

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

HB 1211: Appropriations Committee (Rep. Delzer, Chairman) recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (13 YEAS, 8 NAYS, 1 ABSENT AND NOT VOTING). HB 1211 was placed on the Sixth order on the calendar.

Page 1, line 5, replace "\$600,000" with "\$400,000"

Page 1, line 10, after "only" insert "for the purposes authorized in this section and only"

Renumber accordingly

STATEMENT OF PURPOSE OF AMENDMENT:

This amendment reduces funding to the Department of Commerce for matching grants to address health care workforce needs in rural areas by \$200,000 from \$600,000 to \$400,000.

2013 SENATE HUMAN SERVICES

HB 1211


2013 SENATE STANDING COMMITTEE MINUTES

Senate Human Services Committee Red River Room, State Capitol

1211
3/18/2013
20053

☐ Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

To provide an appropriation to the department of commerce to address health care workforce needs in rural areas of the state

Minutes:

See attached testimony.

Vice Chairman Larsen opens the hearing for HB 1211

Rep. Kempenich introduces the HB 1211 to the committee. Appropriating 400,000 to help push forward an initiative, a program to help students interested in the medical field.

Bill Krivarchka reads testimony for **Lynette Dickson**. Lynette Dickson Associate Director at the Center for Rural Health, School on Medicine and Health Sciences; Program Director of the Area Health Education Center. **Senator Anderson** questioned about their budget. **Senator Dever** asked about other programs in the area. **Senator Larsen** asked about programs in the rural areas. See attached **testimony #1**

Katie Thompson reads the testimony for **Denise Andreest**, Director of Western ND AHEC, in support of HB 1211. See attached **testimony #2**

Bill Krivarchka Director of Eastern ND AHEC, Testifies in favor of HB 1211. See Attached Testimony #3 Senator **Larsen** asked about education in the high school setting. **Katie Thomas** is recognized. **Senator Dever** asked about recruiting for the health care work force in the rural areas. **Bill Krivarchka** is recognized. Provided additional information see attachment #5

Jerry Jurena , president of the ND Hospital Association : Testified in Favor of HB 1211. When I was hospital administrator in Rugby, ND I worked AHEC program, and job shadowing programs, with the local communities, and I find it a very beneficial program, and in support of this program.

Senator Mathern is in support of HB 1211.

Chairwoman J. Lee asks **Bill Krivarchka** what can't do with \$200,000 drop in appropriation. **Chairwoman J. Lee** asks about the federal match.

Shelly Peterson with the Long Term Care Association: testifies in favor of HB 1211. See attachment #4. **Senator Anderson** asked for clarification of recruitment from the rural areas.

Rep. Holman: testifies in favor HB 1211. Is also a board member of Eastern ND AHEC. This one way to get adequate health care in the rural areas. The results of this is down the road. The federal match is dollar to dollar. **Senator Anderson** questioned about adding funding and support of the bill. **Senator Dever** about Mayville State, and health care programs. There is a discussion about working and living in rural community.

There is no other testimony

Chairwoman J. Lee. Closes the public hearing.

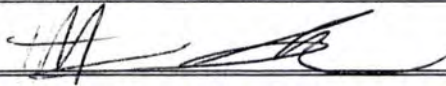
2013 SENATE STANDING COMMITTEE MINUTES

Senate Human Services Committee
Red River Room, State Capitol

1211
3/18/13
20099

☐ Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

Committee Work

Minutes:

Chairwoman J. Lee opens the discussion on HB 1211

Senator Anderson: discusses about the positives of AHEC, and motions an amendment to increase the appropriation to \$600,000

Seconded by **Senator Axness**

The motion passes 4-1-0

Senator Dever: questioned if this was ongoing program, that we have provided funding in the past through AHEC, and what other efforts are taking place for them same purpose across the state.

Senator Larsen: discusses Skills USA, career and technical programs in the high school level. Question about were the funding is being spent, what programs are being funded.

Chairwoman J. lee discusses about getting more information before voting on amended bill.

There are discussions about the programs of AHEC.

Senator Dever: are we duplicating different effort for the same purpose.

There is a discussion about getting more information about programs around the state.

Senator Larsen: a discussion about the chapters at the high school level.

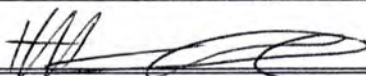
2013 SENATE STANDING COMMITTEE MINUTES

Senate Human Services Committee Red River Room, State Capitol

1211
3-19-13
20188

☐ Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

"Click here to type reason for introduction of bill/resolution"

Minutes:

Chairwoman J. Lee opens committee discussion on HB 1211

(00:30) **Senator Anderson**: There are concerns to matching funds and Move to reconsider the amendment by.

Senator Axness seconds

Senator Anderson because they feel that it would be at risk on the house, and if they could match the funds, and run the two centers they have now.

(1:58) Reconsidered by voice the 5 yes and 0 no. Carried.

There is a discussion about how to pass HB 1211. Vote yes you want it, vote no you don't

Motion made by **Senator Anderson**

Second Axness

1-4 for adopt amendment.

The amendment fails.

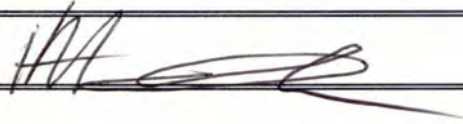
2013 SENATE STANDING COMMITTEE MINUTES

Senate Human Services Committee
Red River Room, State Capitol

HB 1211
3/25/2013
20400

☐ Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

"Click here to type reason for introduction of bill/resolution"

Minutes:

Chairwoman J. Lee opens the discussion on HB 1211.

Chairwoman J. Lee talks about skills USA.

Senator Larson talks about Skills USA.

There is a discussion about Skills USA.

Senator Larsen motions for a Do pass on HB 1211

There is discussion about the removed amendment, and referral to appropriations.

Senator Anderson Seconds

Senator Dever: questioned the funding for the current biennium.

Do Pass 5-0-0

Senator Larsen will carry.

2013 SENATE APPROPRIATIONS

HB 1211

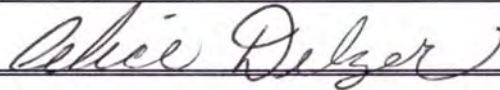
2013 SENATE STANDING COMMITTEE MINUTES

Senate Appropriations Committee Harvest Room, State Capitol

HB 1211
03-25-2013
Job # 20381

☐ Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

A BILL for Department of Commerce to address health care workforce needs

Minutes:

See attached testimony.

Chairman Holmberg called the committee to order on Monday, March 25, 2013 at 9:00 am. Roll call was taken. All committee members were present. Sheila M. Sandness from Legislative Council and Lori Laschkewitsch from OMB were also present.

(02:55) Representative Rick Holman, District 20, introduced HB1211 and provided written testimony (attachment #1) in support of the bill for Area Health Education Center (NDAHEC). (7.09) He referred to a second handout (Attachment #2) which is the NDAHEC Newsletter. The financial is for \$400,000 with a match. Part of the money is already in place with a grant. They will have to raise more money and show that they have that money in place before the Commerce Dept. will disperse any extra money.

Senator Erbele asked if he knew the amount of the money in place already.

The money in place is \$97,000 recent dollars from the Bremer Foundation for the eastern AHEC.

Chairman Holmberg asked why this money goes through the Department of Commerce. It's for education and health care.

Representative Holman: Quite a bit of this is job development, so commerce fits. DPI does make sense but it is perceived as job development.

Chairman Holmberg: That is confusing to members of the legislature and the public.

Senator Gary Lee: I am surprised at the approach of this. My experience isn't that kids don't know where the health careers are. It's that those careers are very competitive in terms of being able to get into them. There are only a limited number of slots. How do you address that? That doesn't get addressed in here.

Representative Holman: This is a rural development activity. The idea is to see that our 36 critical access hospitals and the areas they serve have continued employment. I look at who works in the facilities in my area and nearly all the staff may have left and come back. Our doctors in Mayville are home grown. They went to UND. The idea is to find these students who are qualified academically and who will want to live here, in a rural setting.

Senator Gary Lee: Then the money goes towards supporting the individual student?

Representative Holman: It can. There can also be money for support for those who choose to go there.

Lynette Dickson, Associate Director at the Center for Rural Health, School of Medicine and Health Sciences (SMHS) Program Director of the Area Health Education Center (AHEC) testified in favor of HB 1211. She provided written background information about the area health education program which HB 1211 is intended to support through the Dept. of Commerce (see attached testimony # 3). In general the AHEC works with education as well as health professionals and rural communities to recruit. It isn't just K-12 activities. It's working along what we call the pipeline, working with children when they are younger, and also the students, and also work with the communities to find the right candidate and do recruitment. (21.43)

(22:06) Denise Andress, Regional Director for the Western North Dakota Area Health Education Center, explained some of the things they have seen in the state, especially the rural areas, that have become a priority and a need. She went on to explain some of those needs. They work with kids K-12 in rural areas to create an exposure to health care professions. When the students are in college and choose health care professions they work with them to set up clinical rotations. They work with the health care providers in rural areas to do continuing education credits. They work with guidance counselors in the rural areas. They work with the colleges to recommend that they require a rotation in the rural areas.

Senator Mathern: I noticed there is a change in the bill from \$600,000 to \$400,000. How does your program change from \$600,000 to \$400,000.

Ms. Andress: (27:06) We currently get some federal money and we do have the opportunity for some money from the foundations, a grant. It will affect our program; we won't be able to travel as much but we have been using a lot of technology for that.

Vice Chairman Bowman: How long has this program been going on?

Ms. Andress: The eastern side of the state started in 2008. Initially there were supposed to be three centers - east, southwest and northwest. Because of the federal funding and how it can change so rapidly a decision was made to better use the funds and split to the east and the west. The west or southwest started in 2010.

Vice Chairman Bowman what is the track record so far? We have a hard time recruiting nurses in Bowman. I like this idea of finding someone in our communities that want to stay there.

Ms. Andress: (29:08) She worked in a rural health center prior to this position and did community health. She explained what she did and that the providers at the rural health centers don't have time for that. They might have the access but they may not know how to get into the schools or the community. That's where AHEC comes in. They are invited in to the rural schools all the time. They work into the communities with the continuing education. They have six simulators that they loan to the health centers to assist with continuing education. AHEC is championing the health care professions and saying, this is something you should consider. Then it's up to the health center to say, this is what we have to offer you.

Senator Erbele: Since 2008 have there been any state funds applied toward AHEC? The answer was no.

Chairman Holmberg closed the hearing on HB 1211.

2013 SENATE HUMAN SERVICES

HB 1211

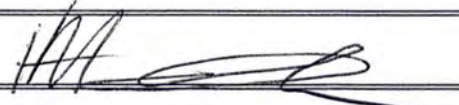
2013 SENATE STANDING COMMITTEE MINUTES

Senate Human Services Committee
Red River Room, State Capitol

HB 1211
3/25/2013
20400

☐ Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

"Click here to type reason for introduction of bill/resolution"

Minutes:

Chairwoman J. Lee opens the discussion on HB 1211.

Chairwoman J. Lee talks about skills USA.

Senator Larson talks about Skills USA.

There is a discussion about Skills USA.

Senator Larsen motions for a Do pass on HB 1211

There is discussion about the removed amendment, and referral to appropriations.

Senator Anderson Seconds

Senator Dever: questioned the funding for the current biennium.

Do Pass 5-0-0

Senator Larsen will carry.

Date: 3-18
Roll Call Vote #: 1

2013 SENATE STANDING COMMITTEE

ROLL CALL VOTES

BILL/RESOLUTION NO. 1266 1211

Senate Human Services Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken: ☒ Do Pass ☐ Do Not Pass ☐ Amended ☒ Adopt Amendment
☐ Rerefer to Appropriations ☐ Reconsider

Motion Made By

Anderson

Seconded By

Axness

Senators	Yes	No	Senator	Yes	No
Chairman Judy Lee	✓		Senator Tyler Axness	✓	
Vice Chairman Oley Larsen	✓	✓			
Senator Dick Dever	✓				
Senator Howard Anderson, Jr.	✓				

Total (Yes) 4 No 1

Absent _____

Floor Assignment _____

If the vote is on an amendment, briefly indicate intent:

INCREASE Appropriation
\$600,000

Date: 5/17/15
Roll Call Vote #: 1

2013 SENATE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1211

Senate Human Services Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number

Action Taken: ☐ Do Pass ☐ Do Not Pass ☐ Amended ☒ Adopt Amendment
☐ Rerefer to Appropriations ☒ Reconsider

Motion Made By Anderson Seconded By Axness

[illegible]

Total (Yes) 5 No 0

Absent

Floor Assignment _____

If the vote is on an amendment, briefly indicate intent:

Date: 3-19-18
Roll Call Vote #: 1

2013 SENATE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1211

Senate Human Services Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken: ☐ Do Pass ☐ Do Not Pass ☐ Amended ☒ Adopt Amendment
☐ Rerefer to Appropriations ☐ Reconsider

Motion Made By ANDERSON Seconded By AXNESS

Senators	Yes	No	Senator	Yes	No
Chairman Judy Lee		✓	Senator Tyler Axness	✓	
Vice Chairman Oley Larsen		✓			
Senator Dick Dever		✓			
Senator Howard Anderson, Jr.		✓			

Total (Yes) 1 No 3 4

Absent _____

Floor Assignment _____

If the vote is on an amendment, briefly indicate intent:

Date: 3-25-1
Roll Call Vote #: _____

2013 SENATE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1211

Senate Human Services Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken: ☒ Do Pass ☐ Do Not Pass ☐ Amended ☐ Adopt Amendment
☒ Rerefer to Appropriations ☐ Reconsider

Motion Made By Larson Seconded By Sen Anderson

Senators	Yes	No	Senator	Yes	No
Chairman Judy Lee	✓		Senator Tyler Axness	✓	
Vice Chairman Oley Larsen	✓				
Senator Dick Dever	✓				
Senator Howard Anderson, Jr.	✓				

Total (Yes) 5 No 0

Absent _____

Floor Assignment Larson

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

HB 1211, as engrossed: Human Services Committee (Sen. J. Lee, Chairman) recommends DO PASS and BE REREFERRED to the Appropriations Committee (5 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). Engrossed HB 1211 was rereferred to the Appropriations Committee.

2013 SENATE APPROPRIATIONS

HB 1211

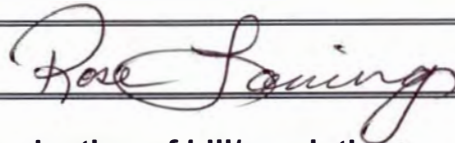
2013 SENATE STANDING COMMITTEE MINUTES

Senate Appropriations Committee Harvest Room, State Capitol

HB 1211
April 9, 2013
Job # 21057

☐ Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

A BILL for an Act to provide an appropriation to the department of commerce to address health care workforce needs in rural areas of the state.

Minutes:

Legislative Council - Becky J. Keller
OMB - Lori Laschkewitsch

Chairman Holmberg opened the hearing on HB 1211. All committee members were present.

Chairman Holmberg said this will be the last bill today. The correct edition of HB 1211 is .02000. It's the \$400,000 to Commerce for the purpose of providing matching funds.

V.Chairman Bowman moved Do Pass on HB 1211.
Senator Carlisle seconded the motion.

Senator Mathern: It was reduced from \$600,000 to \$400,000.

Senator Erbele: Have we put state money into this before?

Senator Gary Lee: I have written that there has been no state money since 2008.

Senator Carlisle said it's \$150,000 per region.

V.Chairman Bowman: My notes said \$400,000 with a match dollar for dollar.

Chairman Holmberg: It is a dollar for dollar match so they have to come up with money too.

A roll call vote was taken. Yea: 12 Nay: 1 Absent: 0

The bill goes to Human Services and Senator Judy Lee will carry the bill.

Date: 4-9-13Roll Call Vote # 12013 SENATE STANDING COMMITTEE
ROLL CALL VOTESBILL/RESOLUTION NO. 1211Senate Appropriations Committee☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken

☐ Adopt Amendment☐ Do Pass as Amended☒ Do Pass☐ Do Not PassMotion Made By Bowman Seconded By Carlisle

Senators	Yes	No	Senator	Yes	No
Chairman Ray Holmberg	✓		Senator Tim Mathern	✓	
Co-Vice Chairman Bill Bowman	✓		Senator David O'Connell	✓	
Co-Vice Chair Tony Grindberg	✓		Senator Larry Robinson	✓	
Senator Ralph Kilzer		✓	Senator John Warner	✓	
Senator Karen Krebsbach	✓				
Senator Robert Erbele	✓				
Senator Terry Wanzek	✓				
Senator Ron Carlisle	✓				
Senator Gary Lee	✓				

Total (Yes) 12 No 1Absent 0Floor Assignment HS Judy Lee

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

HB 1211, as engrossed: Appropriations Committee (Sen. Holmberg, Chairman)
recommends **DO PASS** (12 YEAS, 1 NAYS, 0 ABSENT AND NOT VOTING).
Engrossed HB 1211 was placed on the Fourteenth order on the calendar.

2013 TESTIMONY

HB 1211

1-31-2013

Legislative Testimony for House Bill 1211

Good morning, Chairman Pollert and committee members. My name is Lynette Dickson and I am an Associate Director at the Center for Rural Health, School of Medicine and Health Sciences(SMHS); Program Director of the Area Health Education Center (AHEC), and am here to testify in support of House Bill 1211.

As background, the federal AHEC grant program was developed by Congress in 1971 to recruit, train and retain a health professions workforce committed to underserved populations. North Dakota was actually classified as a "1st generation AHEC" as the School of Medicine had an AHEC grant in the mid-1970's that was used to create the four medical campuses that are still operated in Bismarck, Fargo, Grand Forks, and Minot. The federal grant dollars ended sometime in the early to mid-1980's and as you are well aware, the Medical School secured support from the state of North Dakota along with tuition dollars and other sources to support medical education at the four campuses. In 2008, the Center for Rural Health applied for and was awarded a new AHEC grant through the Bureau of Health Professions, Health Resources and Service Administration (HRSA). This federal grant has a 1:1 required match which encourages a federal and state partnership to address the challenges of health workforce supply. AHEC programs are required to be administered through medical schools, unless there is not a medical school in the state. Today, 56 AHEC programs with more than 235 centers operate in nearly every state and the District of Columbia. Approximately 120 medical schools and 600 nursing and allied health schools work collaboratively with AHECs to improve health for underserved and under-represented populations.

In North Dakota, the federal AHEC grant is written and administered through the Center for Rural Health which is designated as the AHEC Program Office. The role of the Program Office is to support the regional centers by providing oversight and direction; sharing resources such as technical assistance with communication, web and graphic design and grant development and management. As is common in rural health efforts, building collaborative relationships is fundamental to success. The AHEC program helps bring the resources of academic medicine, to address local community health needs. We work with communities, health organizations, health providers, elementary/secondary/post-secondary education systems, and others to improve health workforce options and opportunities for all North Dakotans. The work of the AHEC involves K-12 students around the state, health professions programs in all ND colleges, universities and is not exclusive to UND. The strength of the AHEC Network is its ability to creatively adapt national initiatives to help address local and regional North Dakota healthcare workforce issues.

The federal expectation is that the majority of the work is conducted by the Regional Centers; therefore the Program Office, is required to disperse no less than 75% of the federal grant funds to the Regional Centers located in Mayville, serving the Eastern ND and Hettinger, serving Western ND. Mayville State University has proven to be a valued partner and serves as the fiscal host for both Regional Centers, by administering both subcontracts from the CRH. The federal funds are awarded for Infrastructure for 6 years; and are reduced significantly to Point of Service which necessitates an increase in non-federal cost-sharing for state workforce issues.

The AHEC staff are located in rural communities and focused on collaborative relationships involving public and private partners working to establish a health education environment that is more comprehensive and inclusive of medical, nursing, dental, pharmacy, public health and other disciplines and needs. The CRH's has been engaged in workforce related activities that complement and support the work of the AHEC such as health care workforce assessment and analysis to better understand our statewide needs both for today and to forecast future needs; Rural Health Scrubs Camps and Academy and assistance with recruitment/retention to rural communities. Much of the CRH work focuses in communities with the 36 rural hospitals; however, we do not have the staff to reach other rural communities which the AHECs are able to do; providing funds are available to sustain the full time staff to do so.

The SMHS and CRH are committed to work in partnership with the Regional Centers to meet the critical need of health care workforce in our state by increasing awareness about opportunities in health careers for our North Dakota youth; increasing interest in rural practice by supporting rural clinical rotations for health profession students; and improving competence and skills of our existing health professions by coordinating continuing education and training; which the AHEC Regional Directors will speak to in more detail.

Through community-based interdisciplinary training programs, AHECs identify, motivate, recruit, train, and retain a health care workforce committed to maintaining access to quality healthcare in our rural communities. Funding support through state appropriation will provide not only required match funds; but more importantly infrastructure support so the AHEC is able to actively address health workforce shortages in our state. As state legislators, you are well aware of the health workforce challenges, which you will hear more about today from my colleagues; and the critical need to maintain access to quality health care services for our residents. We are hopeful that you will agree to support House Bill 1211, which will help sustain the much needed staffing and infrastructure in order to inspire the next doctor, nurse, physical therapist or other health professional from our most precious resource – more valuable than oil, our North Dakota youth.

Thank you for your time and consideration.

2
January 31, 2013

Denise Andress, RN
Director, Western ND AHEC
PO Box 615
Hettinger, ND 58639

Mr. Chairman and members of the committee, my name is Denise Andress. I am here to testify and support in favor of HB 1211.

Thank you for the opportunity to submit written testimony regarding the North Dakota Area Health Education Center (AHEC). The North Dakota AHEC has three focus areas: kindergarten through college education, student clinical rotations, and continuing education for health care providers. All of these focus areas are vital for meeting the health care needs of rural North Dakota.

I am a Registered Nurse, more importantly; I am a proud resident of a rural community in southwestern North Dakota. As I think about what it means to be rural, many things come to mind. As a state we struggle with keeping enough health care providers, in rural areas, having enough health care providers has become critical. What are we doing as a state to promote the number two employer, next to government? The North Dakota Area Health Education Center is working to meet that very need.

To put rural into perspective, North Dakota's number one economic driver is agriculture and 89% of our state is farmland. Essentially, rural communities exist to support the farmers and ranchers who grow our food. We need rural farms and ranches to supply food to the world and we need rural communities to support the agricultural industry by promoting health care to rural areas.

Currently,

- North Dakota's Number one economic driver is agriculture.
- 89% of our state is comprised of farmland.
- 90% of North Dakota's EMS workers are volunteers.

What impact does health care have on a community:

- Only about 10 percent of the physicians practice in rural America despite the fact that nearly one fourth of the population lives in these areas.
- Quality rural health services in rural communities are need to attract business and industry
- On average, 14% of total employment in rural communities is attributed to the health sector.

Rural Primary Care Physician impact:

- One primary care physician in a rural community creates 23 jobs annually
- One primary care physician in a rural community generate 1.0 million in wages, salaries and benefits

- One primary care physician in a rural community generates approximately \$1.8 million in annual total revenue
- The total economic impact of a typical critical access hospital is 195 employees and \$8.4 Million in payroll

How do we attract and keep quality health care in rural North Dakota?

- By exciting students to explore, to study, and to become rural health care providers
- By assisting colleges and universities to create clinical experience rotations with rural health care organizations
- By supporting first-class continuing education for health care providers working in rural areas
- By creating policy to encourage and support admissions of rural students in health care professional education.

Next week, on February 5th will be the one year anniversary of the death of four year old Calvin Steeke. He was victim to an ATV accident on a family farm. His father performed CPR for 45 minutes until the volunteer EMS providers arrived. All too often rural communities experience great travel time for emergency and health care services.

Wendell Berry is quoted as saying "The soil is the great connector of lives, the source and destination of all. It is the healer and restorer and resurrector, by which disease passes into health, age into youth and death into life. Without proper care for it we can have no community, because without proper care for it we can have not life."

I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Thanks you for your time.

Sincerely,

Denise Andress, RN
Western ND AHEC Director

3

January 31, 2013

Bill Krivarchka, Director
Eastern ND AHEC
42 6th Avenue SE
Mayville, ND 58257

Mr. Chairman and members of the committee, my name is Bill Krivarchka, I am here to testify in favor of House Bill 1211.

Thank you for the opportunity to provide testimony about the North Dakota AHEC Program. We respectfully request level funding of \$600,000 in order to sustain a successful statewide, community-based AHEC infrastructure to support health workforce priorities.

As a model of State appropriated funding for an AHEC Program, North Carolina AHEC (established in 1971) has a \$45 million budget with 22% (\$9,900,000) of the funding appropriated by the state of North Carolina. Your \$600,000 investment in the North Dakota AHEC system will grow to an estimated \$1.6 million workforce development initiative through leveraged, federal, local, community and private foundation funding.

Federal funds are only available to AHEC if they are matched by state and community funds. The status of the health care system is something we hear about every day. Although there are many opinions about how to make the system work better for patients and payers, everyone agrees that more primary care providers are needed to meet current and future needs. The North Dakota State Department of Labor forecasts that health care sector jobs will grow at rates more than five times faster than any other field. We're here to help.

AHEC strategies increase the number of students from urban and rural underserved areas who become doctors, nurses and other health professionals. Research shows that these students are more likely to choose primary care and practice in their home communities or similar communities. We work with statewide, regional and local partners such as academic institutions, elementary/secondary schools, hospitals, clinics, community organizations, government agencies, Department of Commerce and businesses – making all of North Dakota State a campus.

So why North Dakota AHEC?

Between 2009 and 2012, the ND AHEC Program:

- AHEC has reached over 10,500 participants and AHEC has reached every county in ND.
- AHEC has given \$28,333 (approximately 5,500 students) in grants to facilitate health occupation activities.
- AHEC has assisted \$4,578 (25) students to clinical rotations
- Has contributed in over \$100,000 (5,000 health professionals) toward continuing education for health care providers.
- Has developed 25 new student rotations in nursing, medicine, physical therapy.
- 48% of health profession students participating in summer clinical experiences in 2010 indicated (via surveys) an intent to practice in communities of 10,000 or less.
- The ND AHEC Program has partnered with the UND College of Nursing and the UND Simulation Training Center to establish the ND Simulation Alliance to provide Simulation training for critical

assess hospitals, health care providers, long term care, EMS and educational institutions throughout the state.

- ND AHEC has developed and implemented other strategies to address workforce needs. The Tri-State AHEC (ND, SD, MN) Collaborative has been established which is a partnership that will assist the three states to 1) create strong regional partnerships, 2) develop strategies to improve the number of American Indian students in health workforce pipelines, and 3) establish a uniform strategy for inter-professional education sites within health care systems that operate in two or more states.

AHECs adapt to meet community needs and partner for economic development in our rural communities.

- Lisbon, ND, a community of 2,300, has a health care workforce of approximately 600 (hospital, clinic, long term care, basic skills, Veterans Soldiers Home, dentist, chiropractor, pharmacy, etc.). Good paying jobs, rewarding employment, and local “trickle” down economics, enhance the local education, betterment of Main Street, and create opportunity for new businesses and industry.
- Northwood, ND, population of 1,000, has a health care workforce of approximately 200, being the largest employer in the community.
- Of the 11 largest employers in the state of North Dakota, (with state government being the largest employer) the next 10 largest employers are all related to health care.

It has been estimated that in the next 10 years, 50% of our nurses will retire, a shortage of approximately 300 primary care physicians, and all health care disciplines will be impacted with workforce shortages, resulting from retirement and the impact of the Affordable Care Act (which in ND will possible increase 70,000 new patients for health care). Where will the health care workforce come from?

The North Dakota AHEC Programs multifaceted recruitment, training and retention strategies are solutions to current and future health workforce shortages. They increase diversity and distribute health care professionals where they are needed most. Our programs result in the sons and daughters of North Dakota becoming health professionals who work to improve health care access and economic development in underserved rural communities.

The ND AHEC Program respectfully request funding of \$600,000 to sustain a successful statewide, community-based AHEC infrastructure to support health workforce priorities.

Thank you for this opportunity and your support.

Respectfully,

Bill Krivarchka, Director
Eastern ND AHEC

(5)

ND AHEC BUDGET PROPOSAL (SUSTAINABILITY)								
Calendar	2013-2014		2014-2015		2015-2016		2016-2017	
Years	Eastern	Western	Eastern	Western	Eastern	Western	Eastern	Western
Projected Salary/Benefits	221,520	243,511	227,970	250,604	234,424	257,696	240,874	264,789
Annual Proposed Full Budget	307,000	323,629	314,000	330,829	321,000	338,029	328,000	345,229
FEDERAL FUNDING								
HRSA/AHEC grant funding	187,500	187,500	76,500	187,500	76,500	76,500	76,500	76,500
TOTAL FEDERAL FUNDING	187,500	187,500	76,500	187,500	76,500	76,500	76,500	76,500
Additional Funding Support Needed	119,500	136,129	237,500	143,329	244,500	261,529	251,500	268,729

63 rd Biennium Request (total need)	\$598,035
--	-----------

January 31, 2013

Christopher Schauer, PhD
Chairman of Board, Western AHEC
PO Box 205
Hettinger, ND 58639

Human Resources Sub Division Members:

Mr. Chairman and members of the committee, my name is Christopher Schauer.

I am here today to urge your support for HB 1211, an appropriations bill for the purpose of supporting the North Dakota Area Health Education Center (AHEC) Program. The AHEC is a statewide organization that assists in the recruitment, distribution, supply, and development of quality personnel who provide health services in rural communities in North Dakota.

As the Chairman of the Board for the Western AHEC and a founding board member, I have witnessed the evolution of the ND AHEC, both at the regional and state level. The ND AHEC was created initially with federal funding and has been supported with additional grant funds. Legislated appropriations are being sought at this time to support the ongoing efforts of the North Dakota AHEC, providing stability to a program that is vital to the state. The work of the AHEC addresses a fundamental quality of life issue: health care in rural communities. Specifically in western ND, the AHEC can provide numerous resources to assist the medical community in servicing the needs of our rural agricultural population, as well as providing resources to the Oil Patch as it struggles to maintain quality and timely health care, particularly in the smaller communities that may not have competitive salaries and rely on volunteers for much of their emergency health care. Assisting in recruiting new health care providers, from high school students becoming EMT's and serving on their local volunteer services, to recruiting potential doctors, nurses, dentists, and other health care providers to serve our rural communities, is the vital mission that is not addressed adequately and that AHEC's can assist in. Additionally, providing new experiences for potential ND residents through clinical rotations, and providing continuing education opportunities to services that cannot provide their own is a service that AHEC can provide. As one example, our rural ambulance services (which I serve on as an EMT on as well as squad leader) do not have the resources in place to address these issues, as 90-95% of rural emergency personnel in ND are volunteers and simply do not have the time to adequately recruit new members and educate their current members. However, as a lifelong ND resident, I believe that if we can recruit our youth to the healthcare community, either as a volunteer or employee, that once they get here they will stay here! But we need extra time and labor to accomplish this mission.

In summary, the ND AHEC is committed to providing K-16 programs to increase health career awareness, assists health profession students with rural clinical experience placements, and provides continuing education for a variety of rural health care providers. All of these efforts result in maintaining support and sustainability of quality healthcare in our rural communities. I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Sincerely,

Christopher Schauer, PhD
Chairman of Board, Western AHEC

January 24, 2013

Mary Anne Marsh, PhD, RN
Chair, Department of Nursing
Dickinson State University
291 Campus Drive
Dickinson, ND 58601-4896

Human Resources Sub Division Members:

Mr. Chairman and members of the committee, my name is Mary Anne Marsh.

I am submitting written testimony to urge your support for HB 1211, an appropriations bill for the purpose of supporting the North Dakota Area Health Education Center (AHEC) Program. The AHEC is a statewide organization that assists in the recruitment, distribution, supply, and development of quality personnel who provide health services in rural communities in North Dakota.

The ND AHEC was created initially with federal funding and has been supported with additional grant funds. Legislated appropriations are being sought at this time to support the ongoing efforts of the North Dakota AHEC. Dickinson State University (DSU) and St. Joseph's Hospital and Health Center in Dickinson have received support from AHEC. The DSU Department of Nursing has used the Noelle birthing simulator to enhance teaching and learning for nursing students for the past two years – which allows students to safely practice nursing care during labor and delivery prior to hospital-based clinicals. The Noelle simulator was also used by the hospital's physician and nursing staff to review care of patients during emergent labor and delivery scenarios. In addition, AHEC has also supported the Department's "Nurse Camp" by providing monetary, equipment, and staff resources. Nurse Camp is held annually to increase awareness of the multitude of career options in the nursing profession, and entice fifth and sixth graders in southwest ND to consider nursing in their future!

I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Sincerely,

Mary Anne Marsh, PhD, RN
Chair, Department of Nursing
Dickinson State University

6

January 31, 2013

Katie Thompson, Education Coordinator
Eastern ND AHEC
624 Hill Avenue
Grafton, ND 58237


Mr. Chairman and members of this committee, my name is Katie Thompson. I am here to urge your support for HB 1211.

I have been the Education Coordinator for the Eastern North Dakota Area Health Education Center (EAHEC) since AHEC began in the spring of 2009. In my position with the Eastern AHEC, I have had the distinct pleasure of interacting with our future health professionals. Our tagline, "connecting students to careers, professionals to communities, and communities to better health," guides our AHEC activities.

My principal role is to interact with students, their parents, and educators to connect students to future health careers. The Eastern ND AHEC has helped students and their parents explore health care career opportunities in North Dakota, through programs like Marketplace for Kids and Crash Course. For example, the ND AHEC had provided health career awareness at all of the Marketplace for Kids events. Do you think you could do surgery on jello with implanted string, buttons, paper clips, sequins...these may be our next surgeons! We share up-to-date workforce and labor market information for health careers with instructors, guidance and career counselors, parents and students. Crash Course is a partnership with Bank of ND, Youth Forward, RUReadyND.com, and ND AHEC to educate participants on the need for rural health care professionals, scholarship and loan repayment programs, and preparatory classes to be completed in high school. We are chartering the North Dakota chapter of HOSA-Future Health Professionals, a student organization exclusive to students interested in health care careers, learn skills necessary in the various fields, and prepare for a career in health care. Integration of HOSA into the classroom is a large emphasis, which greatly benefits the students and the health career programs offered by Career and Technology Education.

AHEC connects current health care professionals to students and citizens in rural communities. Medical students, nursing students, and other health care students volunteer to teach younger students about health care in hands-on activity sessions. For example, Center for Rural Health/AHEC Scrubs Camps/Academy, and Project Succeed 2020, these events provide increased opportunities for health care career awareness for rural students. These activities help the younger students make better informed decisions as they prepare for post-secondary education, training, or employment options.

North Dakota's rural communities attract medical, nursing students, and other health care disciplines to work in North Dakota. Our vision is to "grow our own," then to recruit and retain professionals in our rural medical facilities. Our rural communities suffer tremendously when health care disappears from critical access hospitals or long-term care facilities. Maintaining access to care is our top priority, and the first step to increase awareness of the wide opportunities for health care professional in North Dakota.



I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Partnerships:

- Marketplace for Kids
- Crash Course
- Partners in Nursing Summer Nurse Camp Adventure
- Center for Rural Health Scrubs Camps
- Center for Rural Health Scrubs Academy
- Center for Rural Health HIPAA training
- Hands-on activities with youth service organizations
- Facilitation of simulation activities with health career instructors
- Project Succeed 2020

Sincerely,

Katie Thompson
Eastern ND AHEC Education Coordinator



January 11, 2012

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

On behalf of North Dakota Long Term Care Association, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

Long term care facilities provide care for over 19,000 North Dakotans annually. Sufficient staffing is the number one concern facing facilities. Certified Nursing Assistant (CNAs) turnover is 58% and over one-third of staff is age 50 or older. We have worked collaboratively with ND AHEC for the past four years and see them as a leader in helping us solve our workforce crisis.

In closing, we would like to say that NDLTCA is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,



Shelly Peterson, President
North Dakota Long Term Care Association

SEP/pjt



North Dakota Hospital Association

Vision

The North Dakota Hospital Association will take an active leadership role in major Healthcare issues.

Mission

The North Dakota Hospital Association exists to advance the health status of persons served by the membership.

January 16, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

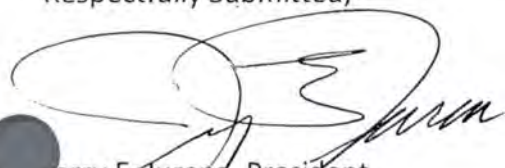
As President of the North Dakota Hospital Association (NDHA), I want to acknowledge my support of the Eastern and Western North Dakota Area Health Education Center (NDAHEC) Programs. The ND AHEC programs: Eastern and Western, focus on providing support across the health care workforce pipeline to address health care workforce shortages of quality health care professionals.

I am pleased to be a member and on the Board of ND AHEC. Many of the Hospitals across the state are struggling with shortages; ND AHEC is an example of people coming together to make a difference. The hospitals have been an active participant in the projects to involve high school students to become interested in medical careers. It continues to be a great partnership.

Again, I want to re-iterate that NDHA is proud to be in partnership with the North Dakota Area Health Education Programs to address a growing need for health care professionals. I believe this support is worthy and meets the needs of future health for North Dakota.

Thank you.

Respectfully Submitted,



Jerry E. Jurena, President
North Dakota Hospital Association

9

January 31, 2013

Testimony to the House Appropriations Committee, Human Services Subdivision.
Representative Rick Holman, ND District 20

Good morning Chairman Pollert and members of the House Appropriations Committee.

I am here to provide additional support for House Bill 1211 which seeks to provide partial funding for the Eastern and Western ND Area Health Education Consortium (NDAHEC). The purpose of AHEC is to encourage people to consider a career in health care. Evidence indicates that someone from North Dakota trained in health care has a higher probability of staying in North Dakota. It's part of a philosophy of "Grow Your Own".

AHEC is relatively new to North Dakota but states like North Carolina and Colorado have years of success using AHEC to help create a stable workforce in rural areas. The first AHEC centers were created over 40 years ago by the Department of Health and Human Services. AHEC works to link the resources of university health centers, educational institutions, clinical resources and local planning. Success is achieved by encouraging and building a healthcare workforce already familiar with rural living.

In Traill County, I can see evidence of the Grow Your Own philosophy. We have two clinics, two hospitals, three nursing homes, opticians, chiropractors, pharmacists, and dentists as well as a wide variety of nurses, technical assistants and aids. When I examine who works in those facilities I find that in nearly every case the people who provide the medical services at all levels are from the local area. In Mayville, two MD's, a PA and a NP all have roots in nearby communities. The two MD's in Hillsboro are from Bismarck and Hillsboro. The same holds true for pharmacists, chiropractors, opticians, and dentists and support staff. Their roots are from North Dakota. Looking at the staff of the three nursing homes, from management to CNA, we find the same. By encouraging people from North Dakota to seek a healthcare occupation and providing them a place to work in North Dakota where they can settle down and raise their family we will all ultimately benefit.

AHEC can be part of the solution to workforce needs in our state. Helping our local citizens learn of opportunities in health care and encouraging them to enter the healthcare field, will be one step toward filling our future healthcare workforce needs.

I ask you to support House Bill 1211.

Thank you for your time.

January 31, 2013

Bill E. Krivarchka, Director
Eastern ND AHEC
42 6th Avenue SE
Mayville, ND 58257


Mr. Chairman and members of the committee, my name is Bill Krivarchka. I am here to testify and support HB 1211.

"Connecting health care professions and students to rural communities," is a major part of the mission of the ND AHEC Program. Health science students from many North Dakota colleges and universities studying allied health, medicine, nursing, public health, pharmacy, social work, and psychology received part of their training under AHEC auspices in community hospitals, physician offices, rural health center, public health departments and other health related settings. The two regional ND AHECs enable state wide community training for health professionals and students to reverse a trend toward shortages and uneven distribution of health care practitioners in the states rural areas.

The ND AHEC has worked to prepare students through field placements. Seventeen clinical sites are utilized for participation in interdisciplinary rotations with twenty five students receiving new AHEC-based rotations. Examples of rural clinical experiences are:


- Dental clinical rotation at Quentin Burdick Memorial Health Center, Belcourt, ND
- UND Nursing Co-ops in Mayville, Hillsboro, Northwood, McVile, Grafton, Hettinger, and Bowman
- Mayville State University and Valley City State University Nursing Student mental health rotation at the State Hospital in Jamestown

Kelsey Erickson, a UND co-op nursing student: "Three years ago, the summer before my last semester of nursing school at the University of North Dakota, I felt like something was missing from my educational experience. I finally figured out what was missing. I was lucky enough to be offered the opportunity to further my nursing education by participating in a nursing co-op at Sanford Medical Center Mayville. After already four semesters of clinicals under my belt, it was hard to believe that no attention was directed towards rural nursing. Coming from a small town I was very interested and excited to have the opportunity to expand my learning. This experience would not have been possible if it hadn't been provided by Eastern ND AHEC. The Eastern ND AHEC provided me with living expenses and also helped provide the hospital with funds to give me this experience for the summer during my co-op. During this experience I was able to see how a hospital functions in a rural setting. I was able to be in the role of a real rural nurse under the supervision of a Registered nurse. During this summer I noticed a definite increase in my critical thinking, communication and interdisciplinary skills. I will never forget those wonderful people who took the time out of day to help me learn and grown as a person and a student. Because of this experience I find I am a better nurse today. I am so thankful that the Eastern ND AHEC was there to help provide me with this amazing opportunity."



Stefan Hofer at Sanford Medical Center Mayville: "West Traill Ambulance collaborated with the Eastern ND AHEC on the purchase of MegaCode Kelly Advanced, including the SimPad System. This simulator has been used in numerous emergency medicine continuing education opportunities at Sanford Medical Center Mayville and is currently being utilized for an EMT class at Mayville State University. Sixteen students are enrolled in the EMT class; many of these students will graduate with a degree in elementary education. Combining the EMT education with their elementary education, affords an opportunity to provide EMT services in the rural communities where they will also be educators, providing an invaluable resource to their schools as well as their health care community. The simulation health care education will also be used in other communities to provide CPR training to citizens of all ages."

The Eastern ND AEHC and the Otto Bremer Foundation will collaborate with others in developing interprofessional training opportunities involving primary care residents, physician assistants, nurse practitioners, dentists, nurses, pharmacy, public health, and other allied health programs. The Eastern ND AHEC was recently awarded a \$98,000 grant by The Bremer Foundation to establish a model interprofessional clinic experience in Carrington, ND. This rural experience offers the interprofessional health care students, rural clinical experiences, collaboration on community public health initiative, and immersion in rural community dynamics resulting in recruitment opportunities and improving quality health care.



Through these rural clinical experiences, research and studies, have shown that the participating students have a one and a half to two times more tendency to seek rural practice opportunities.

I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Sincerely,

Bill Krivarchka, Director
Eastern ND AHEC

January 31, 2013

Kelsey J. Erickson, RN
1949 Sheyenne St., Unit D
West Fargo, ND 58078

Mr. Chairman, and members of the committee, my name is Kelsey Erickson.

I am submitting written testimony to urge your support for House Bill 1211 for these reasons:

Three years ago, the summer before my last semester of nursing school at the University of North Dakota, I felt like something was missing from my educational experience. I finally figured out what was missing. I was lucky enough to be offered the opportunity to further my nursing education by participating in a nursing co-op at Sanford Medical Center Mayville. After already four semesters of clinicals under my belt, it was hard to believe that no attention was directed towards rural nursing. Coming from a small town I was very interested and excited to have the opportunity to expand my learning. This experience would not have been possible if it hadn't been provided by Eastern ND AHEC. The Eastern ND AHEC provided me with living expenses and also helped provide the hospital with funds to give me this experience for the summer during my co-op. During this experience I was able to see how a hospital functions in a rural setting. I was able to be in the role of a real rural nurse under the supervision of a Registered nurse. During this summer I noticed a definite increase in my critical thinking, communication and interdisciplinary skills. I will never forget those wonderful people who took the time out of day to help me learn and grown as a person and a student. Because of this experience I find I am a better nurse today. I am so thankful that the Eastern ND AHEC was there to help provide me with this amazing opportunity.

I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Sincerely,

Kelsey Erickson, RN

January 31, 2013

Julie Traynor, RN, MSN
Director, Dakota Nursing Program

Mr. Chairman and members of the committee, my name is Julie Traynor.

I am submitting written testimony in favor of HB 1211, an appropriations bill for the purpose of supporting the North Dakota Area Health Education Center (AHEC) Program. This organization has assisted the Dakota Nursing Program in accessing simulation equipment for student in Mayville, Minot, Williston and New Town during the past 2 years. These sites did not have the necessary equipment to do the simulation activities. AHEC stepped in and offered not only the use of the simulators but also the expertise of AHEC personnel in running the simulators so the nursing faculty could facilitate the learning with students. These are the students who are the future nurses working in health care facilities in rural communities in the state of North Dakota.

AHEC has collaborated with the Dakota Nursing Program to implement the program into the Mayville area. There is a great need for nursing not only in rural ND but also in the more populated Red River Valley cities. AHEC saw a need and got the right people together to develop the program.

AHEC representatives collaborate with the gerontology initiative in ND as active members of the committees. They bring networking, marketing and education expertise to the table. AHEC staff have presented at many nursing and medical conferences and meetings throughout the state since they became active in ND.

I see AHEC involved in Scrubs Camps across the state in the towns served by the Dakota Nursing Program. They are committed to increasing health career awareness in our elementary and high school students. They have the staff with the knowledge and connections to be able to be a legitimate resource.

Our rural nursing students have been supported with AHEC funds as they travel to clinical in different locations. For example, all of our PN students travel to Jamestown for a 3 day clinical at the ND State Hospital. They stay in a hotel and have other travel expenses. AHEC has been able to assist them and ease the heavy financial burden that they carry.

We are looking forward to collaborating with AHEC in the future to create interdisciplinary opportunities for our students. The Institute of Medicine encourages nursing students to work with other healthcare students to develop that teamwork mentality that will help them to be safer practitioners in the future.

I appreciate your support of how AHEC helps us to "Grow our own nurses" in North Dakota and hope you will vote yes on HB 1211. Thank you.

Sincerely,

Julie Traynor, RN, MSN
Director of Dakota Nursing Program

COLLEGE OF NURSING
NURSING BUILDING
430 OXFORD STREET STOP 9025
GRAND FORKS ND 58202-9025
(701) 777-4174
FAX (701) 777-4096

January 25, 2013

Appropriations Committee,
North Dakota State Legislature
North Dakota State Capitol
600 E Boulevard Ave
Bismarck, ND, 58505

Dear Mr. or Madam Chairman and the members of the Committee,

I am pleased to be able to provide this written testimony in relation to HB 1211.

HB 1211 provides appropriated moneys to address important workforce needs in relation to health services in rural areas of our state, through the work of the North Dakota Area Health Education Center (AHEC). As a collaborating partner on the North Dakota AHEC, the University of North Dakota College of Nursing and Professional Disciplines (CNPD) has had the opportunity to work closely with both our Western and Eastern regional AHEC offices. The AHEC's goal of recruitment and retention of health care professionals into rural areas of our state is highly relevant to the health care needs of our state and is also consistent with the priorities of the CNPD at UND. The state Nursing Needs Study indicates that nurses in North Dakota are maldistributed, with rural communities feeling the greatest impact of the nursing shortage.

The CNPD faculty is currently revising all of our nursing curricula, at the undergraduate, masters, and doctoral levels, in order to increase the number of rural clinical experiences that our nursing students will receive. We know that students are not apt to choose careers in rural communities if they have not been exposed to rural clinical placements as students. The regional AHEC offices will be instrumental in helping us secure quality rural placements for our students as we move forward with expanded rural opportunities. The staff in the regional AHEC offices are in constant communication with their rural health care agencies, and will act as a liaison in developing further rural academic-community partnerships. We have already begun working with the regional AHEC offices to develop a host family model, in which students would be placed with host families while they are at a rural clinical experience. We envision that rural families will be able to act as ambassadors for their communities, and help students integrate into the community and begin to understand the rich opportunities that are possible as a nurse (or other health professional) practicing in a rural area. We believe that all of our nursing students, from pre-licensure registered nurses, to advance practice nurses (such as nurse practitioners, nurse anesthetists, and family practice nurses) to nurse scientists at the PhD level. Students will all have a more robust education by understanding the health care

needs of rural populations, encounter unique experiences about rural health care delivery, and have the opportunity to learn through first hand experiences in rural communities.

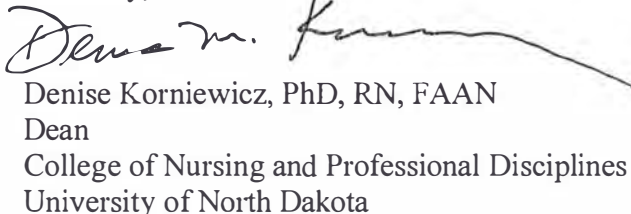
The regional AHEC offices have already had an active role in assisting the CNPD with expanding our clinical opportunities in rural communities for our nursing students. AHEC has supported our summer nursing co-op opportunities, by providing financial support to rural health care agencies, who would not have been able to hire a nursing student without the support of AHEC. Additionally, students, who often cannot afford to commute to rural communities or the extra housing costs associated with living for a summer in a rural community, have received a small amount of financial support for these costs from our regional AHEC offices. Students have reported very positive experiences during these summer co-op opportunities, and some have gone on to work in those same rural agencies.

The College of Nursing and Professional Disciplines is an interdisciplinary college, as we are home to not only nursing students, but also students in nutrition, dietetics, and social work. One of AHEC's goals is to develop, implement, and coordinate interdisciplinary clinical experiences throughout rural communities in our state. The need for education in effective interdisciplinary communication is now viewed as an essential competence to produce health professionals who provide quality and safe healthcare. We embrace AHEC's efforts to bring more interdisciplinary clinical experiences for the CNPD to collaborate with other health professional students at the University of North Dakota, as well as other academic institutions throughout the state.

In summary, the College of Nursing and Professional Disciplines at the University of North Dakota has been a collaborating partner in the development phases of the ND AHEC. We have continued to be a partner as the AHEC is moving forward in implementing programs to address the recruitment, distribution, supply, quality, and efficiency needs of health care providers in rural areas. The AHEC will play an instrumental role in assisting us to expand the opportunities that our nursing, nutrition, dietetics, and social work students receive for clinical experiences in rural areas.

Thank you for the opportunity to provide this written testimony in relation to HB 1211.

Sincerely,


Denise Korniewicz, PhD, RN, FAAN
Dean
College of Nursing and Professional Disciplines
University of North Dakota

January 31, 2013

Stefan Hofer, NREMT-P, CCP
Paramedic/President,
West Traill Ambulance Service
42 6th Avenue SE
Mayville, ND 58257

Mr. Chairman and member of the committee, my name is Stefan Hofer.

I am submitting written testimony to urge your support for HB 1211, an appropriations bill for the purpose of supporting the North Dakota Area Health Education Center (AHEC) Program.

West Traill Ambulance collaborated with the Eastern ND AHEC on the purchase of MegaCode Kelly Advanced, including the SimPad System. This simulator has been used in numerous emergency medicine continuing education opportunities at Sanford Medical Center Mayville and is currently being utilized for an EMT class at Mayville State University. Sixteen students are enrolled in the EMT class; many of these students will graduate with a degree in elementary education. Combining the EMT education with their elementary education, affords an opportunity to provide EMT services in the rural communities where they will also be educators, providing an invaluable resource to their schools as well as their health care community. The simulation health care education will also be used in other communities to provide CPR training to citizens of all ages.

I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Sincerely,

Stefan Hofer, NREMT-P, CCP
Paramedic

HB 1211 Testimony

Good morning, Mr Chairman and members of the Committee:

I am Representative Alan Fehr, District 36.

I am here to testify in support of HB 1211 for an appropriation to address health care workforce needs in rural areas.

I would like to briefly share my experiences working on a professional education project.

I'm a clinical psychologist and have spent the past 30 years working in ND. I'm also the Director of Psychological Health for the ND National Guard.

For the past couple years I have been involved in developing a project with the help of several partners, including the Area Health Education Centers, the Dept of Human Services, UND School of Medicine, UND Social Work Dept, UND Counseling Psychology Dept, and others.

This project is called the Military Culture Certificate Program, the purpose of which is to help professionals understand our service members, veterans, and family members. The program provides continuing education around the state to any professional who works with the military, including counselors, medical personnel, clergy, attorneys, emergency workers, and others who may be interested.

As a trainer in this program, there is no cost for my time. Our biggest expense is to pay the fees to licensing boards and entities that authorize continuing education credits. By working together with project partners, we will be able to provide continuing education to professionals and improve their ability to work with the military population.

This is one project that will benefit from this appropriation. I am asking for your support of HB 1211 and I would welcome your questions.



11
ndrha.org

January 28, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress, RN
Western ND AHEC Director
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

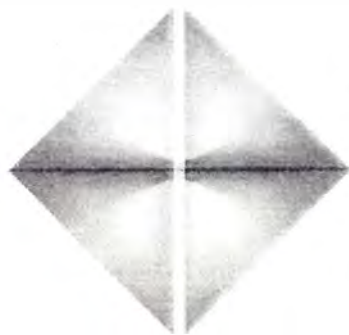
I am writing this letter on behalf of the North Dakota Rural Health Association (NDRHA) in support of the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply, and quality health care professionals.

As an advocate for the health and wellness of those who are proud to call rural North Dakota home, the North Dakota Rural Health Association values the import work of the North Dakota AHEC. Helping to insure the availability of an adequate workforce for our health care providers and exposing are youth to potential careers in health related vocations is something the North Dakota AHEC is dedicated to and we are pleased to support in whatever way possible.

In closing, we would like to say that the North Dakota Rural Health Association is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities, and quality health for North Dakota. Thank you.

Best regards,

Darrold Bertsch, President
North Dakota Rural Health Association



North Dakota Center for Nursing

A unified voice for nursing excellence

January 9, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health
UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center
Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Address, RN
Western ND AHEC Director
P.O. Box 615
109 South Main Street
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka and Ms. Address,

On behalf of North Dakota Center for Nursing, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC), the Eastern North Dakota Area Health Education Center (Eastern ND AHEC) and the Western Area Health Education Center (WAHEC). The ND AHEC/Eastern ND AHEC/Western AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

The North Dakota Center for Nursing proudly serves on the ND AHEC Program Office Advisory Board and the ND AHEC has membership on the ND Center for Nursing Board of Directors. Several of our initiatives are complementary and we are able to effectively leverage resources in order to ensure a quality health care workforce in North Dakota.

In closing, we would like to say that the North Dakota Center for Nursing is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center, the Eastern North Dakota Area Health Education Center and the Western Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Patricia Moulton, PhD
Executive Director
North Dakota Center for Nursing

Patricia Moulton, PhD Executive Director
701-852-1810
patricia.moulton@ndcenterfornursing.org

DAKOTA NURSING PROGRAM

Bismarck State College • Dakota College at Bottineau • Fort Berthold Community College
Lake Region State College • Williston State College

January 29, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Address
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Address,

On behalf of the Dakota Nursing Program, I am writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program. This organization has assisted the Dakota Nursing Program in accessing simulation equipment for students in Mayville, Minot, Williston and New Town during the past 2 years. These sites did not have the necessary equipment to do the simulation activities. AHEC stepped in and offered not only the use of the simulators but also the expertise of AHEC personnel in running the simulators so the nursing faculty could facilitate the learning with students. These are the students who are the future nurses working in health care facilities in rural communities in the state of North Dakota.

AHEC has collaborated with the Dakota Nursing Program to implement the program into the Mayville area. There is a great need for nursing not only in rural ND but also in the more populated Red River Valley cities. AHEC saw a need and got the right people together to develop the program.

AHEC representatives collaborate with the gerontology initiative in ND as active members of the committees. They bring networking, marketing and education expertise to the table. AHEC staff have presented at many nursing and medical conferences and meetings throughout the state since they became active in ND.

I see AHEC involved in Scrubs Camps across the state in the towns served by the Dakota Nursing Program. They are committed to increasing health career awareness in our elementary and high school students. They have the staff with the knowledge and connections to be able to be a legitimate resource.

Our rural nursing students have been supported with AHEC funds as they travel to clinical in different locations. For example, all of our PN students travel to Jamestown for a 3 day clinical at the ND State Hospital. They stay in a hotel and have other travel expenses. AHEC has been able to assist them and ease the heavy financial burden that they carry.

We are looking forward to collaborating with AHEC in the future to create interdisciplinary opportunities for our students. The Institute of Medicine encourages nursing students to work with other healthcare students to develop that teamwork mentality that will help them to be safer practitioners in the future.

I appreciate your support of AHEC in helping us to "Grow our own nurses" in North Dakota and hope you will vote yes on HB 1211. Thank you.

Julie Traynor, MS, RN
Nursing Director
Dakota Nursing Program
Julie.Traynor@lrsc.edu
701.662.1492 (Office)



Vice-President for
Academic Affairs

January 16, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave.
Mayville, ND 58257

Denise Address
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Address,

On behalf of Mayville State University, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

Over the past few years (2010-2013), Mayville State University (MaSU) has been a strong supporter and collaborator with the ND AHEC/E AHEC by agreeing to be the Recipient to the Contractor (University of North Dakota) to assist the performance of the Eastern ND AHEC scope of work. In the fall 2012 MaSU agreed to a similar relationship for the Western ND AHEC. In addition Mayville State University has supported ND AHEC through partnering with K-12 health career fairs, establishment of the Dakota Nursing Program on the Mayville State University campus, and collaboration with MaSU STEM (Science, Technology, Engineering, Math) curriculum. Mayville State University also supports ND AHEC by being an Eastern AHEC and Western AHEC Advisory Board member.

In closing, we would like to say that Mayville State University is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

A handwritten signature in black ink, reading 'Gary Hagen'.

Dr. Gary Hagen, President
Mayville State University

A handwritten signature in black ink, reading 'Keith Stenejem'.

Dr. Keith Stenejem, VP for Academic Affairs
Mayville State University



Stands for Jobs

EASTERN NORTH DAKOTA AHEC

42 6th Avenue SE Mayville 58257 • 701-788-4477

eastern.ndahec.org

January 18, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Dear Ms. Dickson and Dr. Krivarchka,

As Chairman of Eastern ND AHEC Advisory Board, I am writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

We have found that support afforded us through Eastern ND AHEC, such as the mobile training and support of rural EMS to our Eastern counties, shows how we are meeting some of the goals of Eastern ND AHEC in providing support for quality health care in rural areas.

In closing, I would like to say that Eastern ND AHEC Advisory Board is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Roger Baier
Chairman of Eastern ND AHEC Advisory Board
On behalf of Eastern ND AHEC Advisory Board



Stands for Jobs

WESTERN NORTH DAKOTA AHEC

PO Box 615 109 South Main Hettinger, ND 58639 • 701.637.0177

western.ndahec.org

1/28/2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
426th Ave. SE
Mayville, ND 58257

Denise Andress, RN
Western ND AHEC Director
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka and Mrs. Andress,

On behalf of Western ND AHEC board of directors, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

The Western ND AHEC board has been integral in the establishment of the Western ND AHEC from the beginning of the program. We have shepherded it through its establishment to where it is today. At this point, we believe it is the appropriate time to pursue state funding to support this program to provide stability in programming heading into the future. In western ND, the AHEC can provide numerous resources to assist the medical community in servicing the needs of our rural agricultural population, as well as providing resources to the Oil Patch as it struggles to maintain health care, particularly in the smaller communities. Assisting in recruiting new health care providers, from high school students becoming EMTs to recruiting potential doctors and nurses, and bringing cutting edge technology to rural providers to assist in continuing education are just some of the potential benefits from having a stable AHEC in ND.

In closing, we would like to say that Western ND AHEC board is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Christopher Schauer
Western ND AHEC board chairman



RBHN Mission: To improve access to behavioral healthcare and eliminate behavioral health disparities in rural and tribal communities.

**RBHN GOVERNANCE
COMMITTEE**

**Coal Country Community
Health Centers**

Essentia Health

**Mental Health America
of North Dakota**

MHA Nation

**North Dakota Area Health
Education Center**

**North Dakota Federation
of Families for Children's
Mental Health**

**Sakakawea Medical
Center**

January 21, 2013

Lynette Dickson, MS
Director ND AHEC
Director

Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director

Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Address, RN
Western ND AHEC

PO Box 615
Hettinger, ND 58639

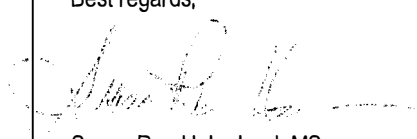
Dear Ms. Dickson, Dr. Krivarchka and Mrs. Address,

The North Dakota Rural Behavioral Health Network (ND RBHN) supports the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

ND AHEC is an original partner of the ND RBHN and our mission is *to improve access to behavioral healthcare and eliminate behavioral health disparities in rural and tribal communities*. The ND RBHN also includes the following agencies: Coal Country Community Health Centers; Essentia Health; MHA Nation; North Dakota Federation of Families for Children's Mental Health; and Sakakawea Medical Center.

In closing, we would like to say that ND RBHN is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,


Susan Rae Helgeland, MS
Project Director, ND RBHN

SANFORD MAYVILLE

SANFORD™
HEALTH

January 10, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

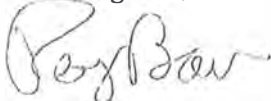
Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

On behalf of Sanford Mayville, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

Being rural, we find that sending staff distances for training is almost impossible as it takes staff away from our facility. With the EAHEC mobile training, unit available, we were able to train some of our staff in our own facility. What a positive way to meet needs in rural North Dakota.

In closing, we would like to say that Sanford Mayville is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,



Roger Baier
Chief Executive Officer

RB:kjm

January 15, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Address, RN
Western ND AHEC Director
109 So. Main St.
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka and Ms. Address,

On behalf of the North Dakota Comprehensive Cancer Control Program and the North Dakota Cancer Coalition, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support for the North Dakota health care workforce addressing workforce shortages through a variety of means such as distribution, diversity, supply and quality health care professionals. A well trained workforce addressing cancer prevention and control is a major need for our state as well as nationally.

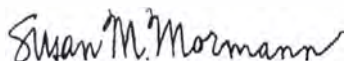
The ND Eastern and Western AHEC programs have partnered with the North Dakota Comprehensive Control Program and the North Dakota Cancer Coalition to provide education to healthcare professionals across the state, especially targeting providers from rural settings. The AHEC programs have provided financial support for the following trainings over the past three years:

- Program evaluation
- The burden of cancer in North Dakota and what organizations can do to address this burden
- What primary care healthcare professional need to know about genetic testing for cancer risk

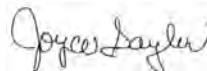
These are all pertinent topics that expand knowledge and increase capacity to provide care and program management in a variety of settings.

In closing, we would like to say that The North Dakota Comprehensive Cancer Control Program and the North Dakota Cancer Coalition are pleased to continue a mutually beneficial relationship with the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe our collaborative efforts provide a means to meet the needs of future health care students and current professional providers in North Dakota. Thank you.

Regards,



Susan M. Mormann, Director
Division of Cancer Prevention and Control
North Dakota Department of Health



Joyce Sayler, Program Coordinator
Division of Cancer Prevention and Control
North Dakota Department of Health

LANGDON AREA HIGH/MIDDLE SCHOOL
"HOME OF THE CARDINALS"

FOR EXCELLENCE

PRINCIPAL: DARYL TIMIAN

PHONE: Home 701-256-2687
Work 701-256-5291
FAX: Work 701-256-2606

715 14TH Avenue
Langdon, ND 58249
E-mail: daryl.timian@sendit.nodak.edu

January 10, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Address, RN
Western ND AHEC Director
109 So. Main Street
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka and Ms. Address:

On behalf of Langdon Area High School, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

We have worked closely with the North Dakota Area Health Education Center (ND AHEC) for several years. AHEC has offered educational opportunities for our students in collaboration with our health care facilities and medical professionals to expand their understanding of the many health careers available. Examples would be the HOPE grant, health careers information and statistics (including powerpoints), and expansion of HOSA (Health Occupations Students of America) into North Dakota.

In closing, we would like to say that Langdon Area High School is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Daryl Timian
Principal
Carla Symons, RN
Instructor—Health Careers

WEST TRAILL EMS

January 17, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

On behalf of West Traill Ambulance Service, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

West Traill Ambulance collaborated with NDAHEC on the purchase of MegaCode Kelly Advanced, including the SimPad System. This simulator has been used in numerous emergency medicine continuing education opportunities at Sanford Medical Center Mayville and is currently being utilized for an EMT class at Mayville State University. It will also be used in other communities to provide CPR training to citizens of all ages.

In closing, we would like to say that West Traill Ambulance Service is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,



Stefan Hofer, NREMT-P, CCP
Paramedic/President, West Traill Ambulance Service

West River Ambulance Service

PO Box 205

Hettinger, ND 58639

1/28/2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress, RN
Western ND AHEC Director
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka and Mrs. Andress,

On behalf of the West River Ambulance Service volunteers, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The NDAHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

As a rural volunteer ambulance service, our largest issues are recruiting new members and providing continuation education to our ambulance squad. The AHEC can provide assistance in these areas through recruitment of high school students into the medical field utilizing Emergency Medical Services as a learning experience for future medical careers, and through assisting in continuing education. For a volunteer ambulance service time is our most precious commodity; the AHEC provides the resources to utilize our time more efficiently, assistance in recruiting new members and technology to make providing continuing education training on par with our urban counterparts.

In closing, we would like to say that West River Ambulance Service is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,



Christopher Schauer
Volunteer Squad Leader, West River Ambulance Service



Public Health
Prevent. Promote. Protect.
City-County Health District

CITY-COUNTY HEALTH DISTRICT

PUBLIC HEALTH AND HOME CARE

BARNES COUNTY COURTHOUSE
230 4TH Street NW, Room 102
Valley City, ND 58072

PHONE: 701-845-8518

FAX: 701-845-8542

WEB: WWW.CITYCOUNTYHEALTH.ORG

January 9, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Address, RN
Western ND AHEC Director
109 So. Main Street
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Address,

On behalf of City-County Health District, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

City-County Health District has collaborated with NDAHEC on two projects which potentially benefitted all Barnes County residents. The first project was a presentation to ND health care professionals by Drs. James Hart and Stephen McDonough. They addressed two goals: increasing skills regarding how to effectively promote better community health by incorporating proven preventive strategies into daily activities, and increasing understanding of the policy and system changes needed to support health improvement. The second project featured Kostas Voutsas, a respected trainer/speaker and Professor of Business at Dickinson State University. He addressed cultural diversity in the community and school settings. This presentation was especially helpful to those who work directly with foreign-born residents in our community.

In closing, we would like to say that City-County Health District is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Theresa Will, RN
Director



Public Health
Prevent. Promote. Protect.

Walsh County Health District Public Health & WIC

Administration Building • 638 Cooper Avenue ~ Suite 3 • Grafton, ND 58237

(701) 352-5139 • Fax (701) 352-5074

1/9/2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Dear Ms. Dickson and Dr. Krivarchka,

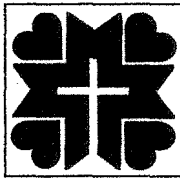
On behalf of Walsh County Health District, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

Our agency was a recipient of grant moneys from the Eastern ND AHEC in 2010. We received a \$5000.00 grant that allowed us to send 20 nurses/nurse practitioners from Walsh County to the State Immunization Conference. Without this grant money, most of the small rural clinics and hospitals that employed these nurses/nurse practitioners would not have been able to send their staff to this training. The training allowed us to develop a network of immunization providers in Walsh County that continues to this day.

In closing, we would like to say that Walsh County Health District is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Wanda Kratochvil, RN
Walsh County Health District
Administrator



**First Care Health Center
PO Box I
Park River, ND 58270**

January 24, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Address
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Address,

On behalf of First Care Health Center, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

First Care Health Center provides western Walsh County 5th grade students the opportunity to learn about health careers with the help of ND AHEC and the Inspector Wellness and the Case of the Many Medical Careers Program. The 5th grade students have the opportunity to learn about health careers with the help of Inspector Wellness and First Care Health Center staff through visits with medical professionals to learn about health careers, participating in a hands-on activity relating to the chosen medical field, and touring First Care Health Center. Because of our rural area and small school population, this program provides many students the only opportunity to learn about medical careers first hand. We find this program and the support of ND AHEC very valuable to promote medical careers to our area students.

In closing, we would like to say that First Care Health Center is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Ruth Jelinek

Ruth Jelinek, Marketing & Development
First Care Health Center

Carrington Health Center

January 28, 2013

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave SE
Mayville, ND 58257

Dear Dr. Krivarchka:

On behalf of Carrington Health Center we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

Carrington Health Center just finished a very successful Scrubs Camp that has been the cause of excitement among our young students who are now interested in health care careers.


Carrington Health Center is also working closely with ND AHEC as we are excited to be part of a new opportunity to train more higher education level students at one time over a period of months as they pursue a variety of health care fields across the continuum of care.

In closing, we would like to say that Carrington Health Center is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

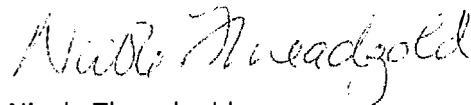
Best regards,



Mariann Doeling
President
Carrington Health Center



Jennifer Whitman
Wellness and Disease Management Manager
Carrington Health Center



Nicole Threadgold
Foundation Development Officer
Carrington Health Center



Stands for Jobs
NATIONAL AHEC ORGANIZATION

Headquarters Office
7044 S. 13th Street
Oak Creek, WI 53154
Tel: (414) 908-4953
(888) 412-7424
Fax: (414) 768-8001
www.nationalahec.org
info@nationalahec.org

The National AHEC Organization supports and advances the AHEC Network to improve health by leading the nation in the recruitment, training and retention of a diverse health workforce for underserved communities.

January 24, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
109 So. Main St
42 6th Ave. SE
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

On behalf of the National AHEC Organization (NAO), I am writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

The National AHEC Organization is the national association that supports and advances the AHEC Network to improve health by leading the nation in the recruitment, training and retention of a diverse health workforce for underserved communities, which we do by supporting AHECs throughout the country in a great variety of ways. Our collective vision is that the AHEC network becomes the national leader in developing a highly competent and diverse health care workforce for underserved populations. The North Dakota AHEC is a vital component of our national efforts in working to ensure access to quality health care, particularly primary and preventive care, by improving the supply and distribution of healthcare professionals through community/academic educational partnerships.

NAO is pleased to continue and build upon a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. I believe this support is extremely worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota.

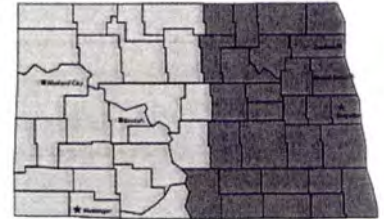
Very best regards,

Robert M. Trachtenberg, MS
Executive Director
National AHEC Organization



Stands for Jobs
NORTH DAKOTA AHEC

**North Dakota Area Health
Education Center**
Mayville • Hettinger



Growing Rural ND Workforce

K-16 Activities

North Dakota AHEC Recruits students and individuals from rural and underserved areas of North Dakota into health professions, utilizing the health care workforce pipeline. Career Awareness events:

- School visits
- Community organizations
- Career fairs
- Health Occupation Student Association (HOSA)

Clinical Rotations

North Dakota AHEC Develops and implements strategies to foster and provide health professions students community-based training in rural and underserved areas.

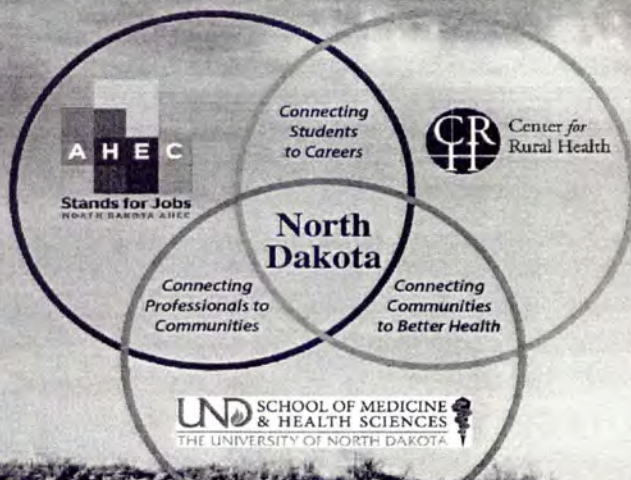
- Identify student placements
- Provide information about loan repayment programs
- Promotes rural training experience for health care profession students

Continuing Education

North Dakota AHEC Retains current health care professionals by promoting continuing education opportunities in rural and underserved areas.

- ND AHEC simulators for use in rural continuing education opportunities
- AgriSafe-Education and training to health care providers in agricultural communities
- Veteran's mental health program for rural communities and health care providers

We will strive to be innovative, adaptive, and willing to take risks to create new ways of thinking, learning and addressing the health care workforce issues for North Dakota rural communities.



**Partners in
Collaboration**





Stands for Jobs
NORTH DAKOTA AHEC

North Dakota Area Health Education Center *Mayville • Hettinger*



Our Core Mission

North Dakota AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply, and quality of health care professionals.

The North Dakota AHEC is a pivotal vehicle to meet the state's health care needs through collaboration

Current ND Workforce

- 91% of North Dakota counties have less than the national average of physicians to population
- 89% of North Dakota counties are federally designated as health professional shortage areas (HPSA)
- 47% of North Dakota counties have less than the national average of primary care providers to population. There will a shortage of 200 rural family practice physicians by 2020
- 32% of North Dakota counties have fewer nurses than the national average. 50% of rural nurses will retire in the next 5 years

Impact

- Healthcare, behind government, is the Number 2 employer in ND
- Agriculture is the Number 1 economic driver in ND, with the energy segment following a distant 2nd
- Cardiovascular disease, cancer, and chronic obstructive pulmonary disorder are the chronic diseases that comprise 49% of the mortality in ND
- Ambulance response time has increased 30-60 minutes in some areas of ND
- 90-95% of rural emergency personnel in ND are volunteers
- ND is third in the nation among the states for multiple-job holders contributing to rural stress

ND AHEC Budget Request

ND AHEC BUDGET PROPOSAL (SUSTAINABILITY)								
Calendar	2013-2014		2014-2015		2015-2016		2016-2017	
Years	Eastern	Western	Eastern	Western	Eastern	Western	Eastern	Western
Projected Salary/Benefits	221,520	243,511	227,970	250,604	234,424	257,696	240,874	264,789
Annual Proposed Full Budget	307,000	323,629	314,000	330,829	321,000	338,029	328,000	345,229
FEDERAL FUNDING								
HRSA/AHEC grant funding	187,500	187,500	76,500	187,500	76,500	76,500	76,500	76,500
TOTAL FEDERAL FUNDING	187,500	187,500	76,500	187,500	76,500	76,500	76,500	76,500
Additional Funding Support Needed	119,500	136,129	237,500	143,329	244,500	261,529	251,500	268,729

Budget Restrictions:

- Decrease the amount of funding to rural communities for health care immersion events
- Decreases amount of funding for on site continuing education credits to health care providers
- Decreases travel to rural communities and local health care organizations



The End Result...

SAFER Rural Areas • SUCCESSFUL Healthcare Organizations • HEALTHIER communities • EDUCATED Healthcare Providers

North Dakota Area Health Education Center

Mayville • Hettinger

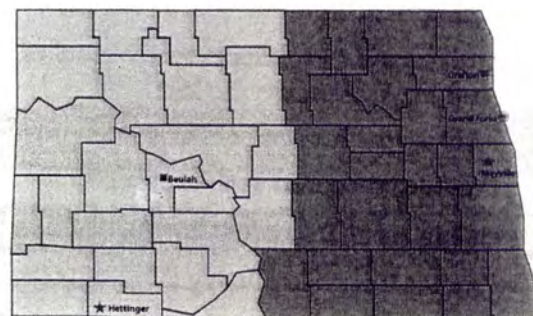
AHEC

Stands for Jobs

NORTH DAKOTA AHEC

Our mission

We focus on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply, and quality of health care professionals.



Why AHEC?

- North Dakota AHEC links health career awareness to our rural guidance counselors to assist in health career counseling.
- By encouraging students to choose careers health care, we believe they are more likely to pursue those careers.
- Many health care careers require higher education. AHEC assists students as a resource for health career educational planning as a pipeline tool to higher education.
- Misperceptions about rural practice need to be eliminated; if students believe rural practice is not favorable they are not likely to choose to work in rural areas.
- AHEC lessens rural health professionals isolation, either socially or professionally, by facilitating community involvement and multidisciplinary professional education.

The need for health care professionals

- 91% of North Dakota counties have less than the national average of physicians to population.
- 89% of North Dakota counties are federally designated as health professional shortage areas (HPSA).
- 47% of North Dakota counties have less than the national average of primary care providers to population. There will a shortage of 200 rural family practice physicians by 2020.
- 32% of North Dakota counties have fewer nurses than the national average. 50% of rural nurses will retire in the next five years.
- 90-95% of rural emergency personnel in North Dakota are volunteers.

We are unique

- We support all individuals in the workforce pipeline: from students in grade school to rural professionals near retirement.
- We promote rural health care and rural health care work force development.
- Located in Hettinger, Mayville, Grafton, and Beulah, we support rural, from rural.



We address workforce shortages

connect students to careers, professionals to communities, and communities to better health.

Connecting Students to Health Careers

- Introduce K-16 students to a variety of health careers through school visits, career fairs, and Health Occupations Student Association (HOSA).
- Increase the number of rural students into health careers.
- Provide education and training opportunities using human simulators.

Connecting Health Professionals to Communities

- Provide interdisciplinary clinical experience in rural settings for health professions students.
- Identify communities interested in hosting health care professions students for rural rotations.
- Educate students on scholarship and loan repayment opportunities.

Connecting Communities to Better Health

- Provide contact hours for low-cost, high quality continuing education programs.
- Support community education programs.
- Facilitate learning opportunities for health professionals and community partners through AgriSafe education, simulation, and mental training for health care professionals.

Our funding

We are supported through federal dollars with a Health Services Resources Administration (HRSA) grant from the Bureau of Health Professions which requires a 1:1 federal/state match. In addition, we have an Otto Bremer grant to develop our rural interdisciplinary educational opportunities for health professions students.

Additional funding

Additional funding would allow us to develop and expand projects to support rural health projects according to our mission.

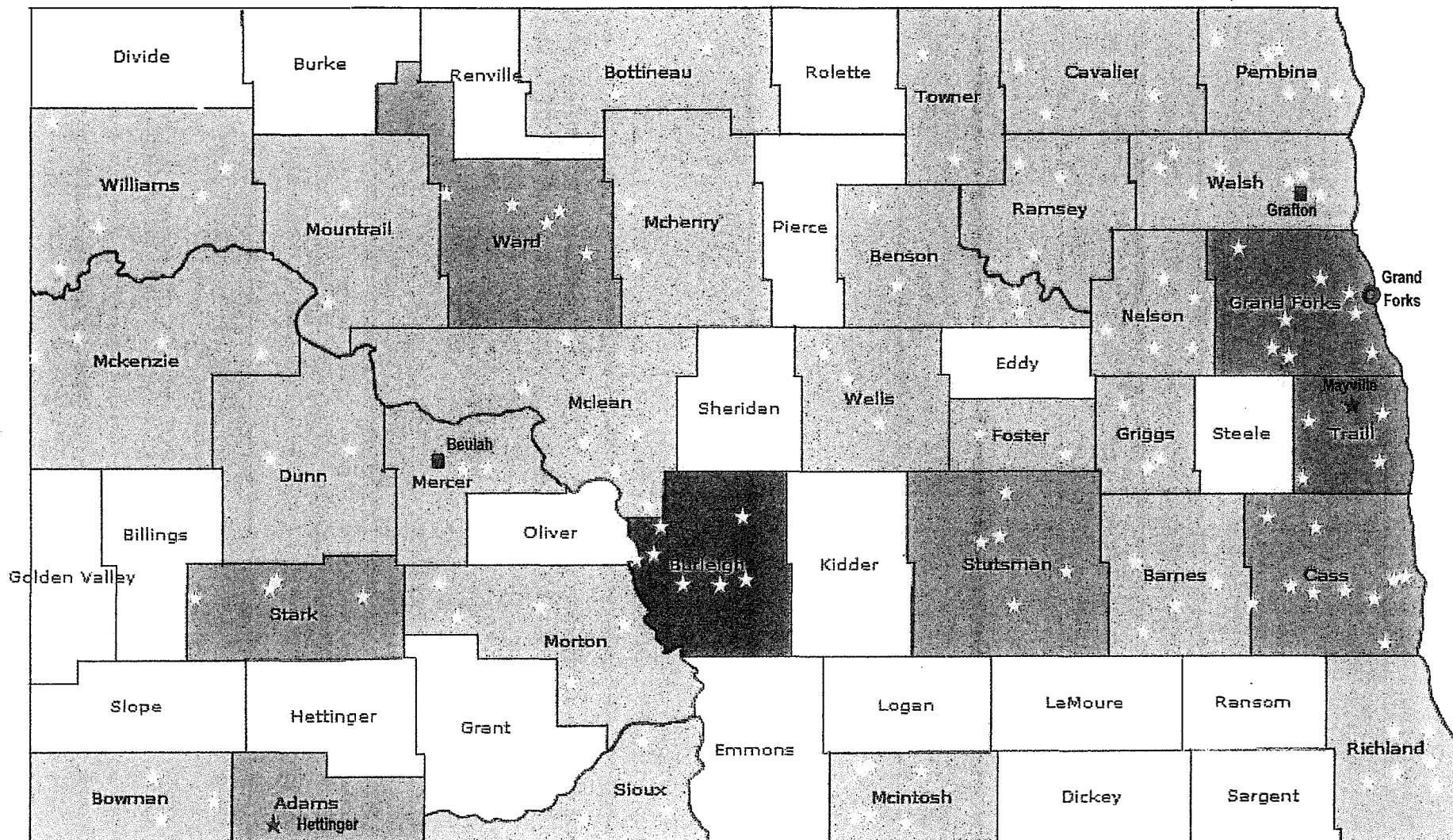
- Development of a Veteran's mental health program for rural communities and health care providers.
- Expansion of the R-COOL-Health Scrubs program, a collaborative effort between AHEC and the Center for Rural Health, supported by state appropriated funds.
- Continued support for AHEC staff to work with rural communities, students, and health professionals.
- Leveling of decreased federal funding.

Our key partners

North Dakota Area Health Education Center, along with the Center for Rural Health and the UND School of Medicine and Health Sciences, understand the importance of rural health care and work together so we can do more with our resources through dollars and personnel. Additionally, Mayville State University serves as the fiscal host for both Mayville and Hettinger regional centers.



Communities Visited by the North Dakota AHEC



- ★ Regional Center
- Satellite Office
- ⊙ State Program Office
- ND AHEC Visit

Visit our web site at www.ndahec.org
for more information or to contact our
offices call:
Eastern AHEC—701.788.4475
Western AHEC—701.637.0178

Data from 9/7/10 to present
The darker the color noted on the
county means more individuals were
contacted during visits and/or events.



Stands for Jobs
NORTH DAKOTA AHEC



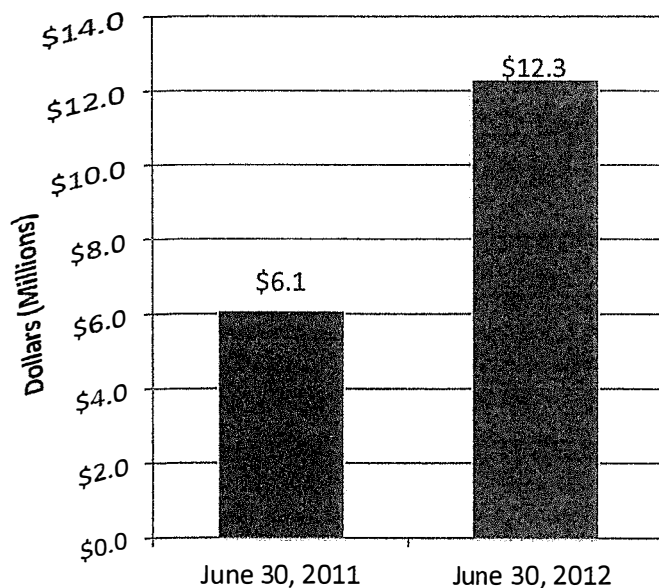
Nursing Facility Workforce

Nursing Facility Workforce

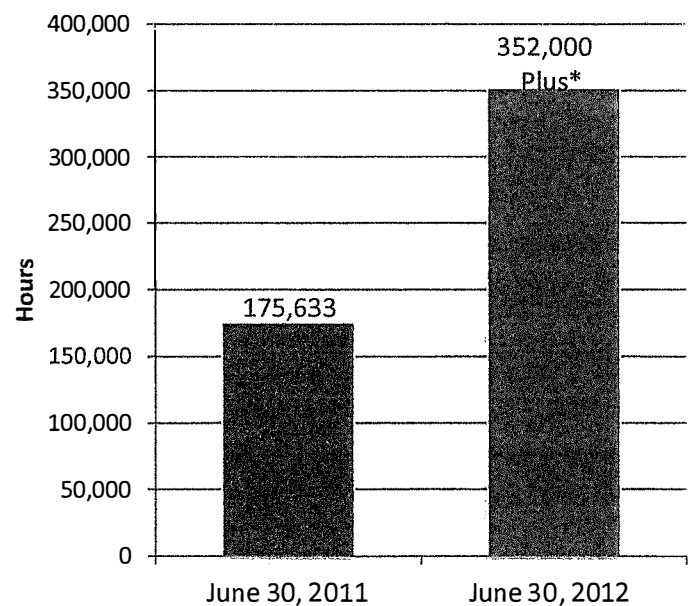
- Top issue facing nursing facilities is staffing.
- Number of individuals employed in 68 nursing facilities was 9,267. Based upon this ratio, total people employed by 83 nursing facilities are estimated to be 11,311.
- July 1, 2012, sixty-three nursing facilities reported 751 vacant positions.
- Nine of sixty-six reporting nursing facilities stopped admissions in 2012 because of a lack of staff.
- Sixty-six percent of nursing facilities, 2 out of 3 facilities, used contract agency staff in 2012.
- Contract nursing hours and dollars more than doubled in twelve months.
- The 2012 average salary increase provided was 2.9%, however one-third of nursing facilities also provided an extra enhancement to retain their employees. Enhancements were as high as \$5 per hour to 20% increases.

Contract Nursing

Dollars Spent



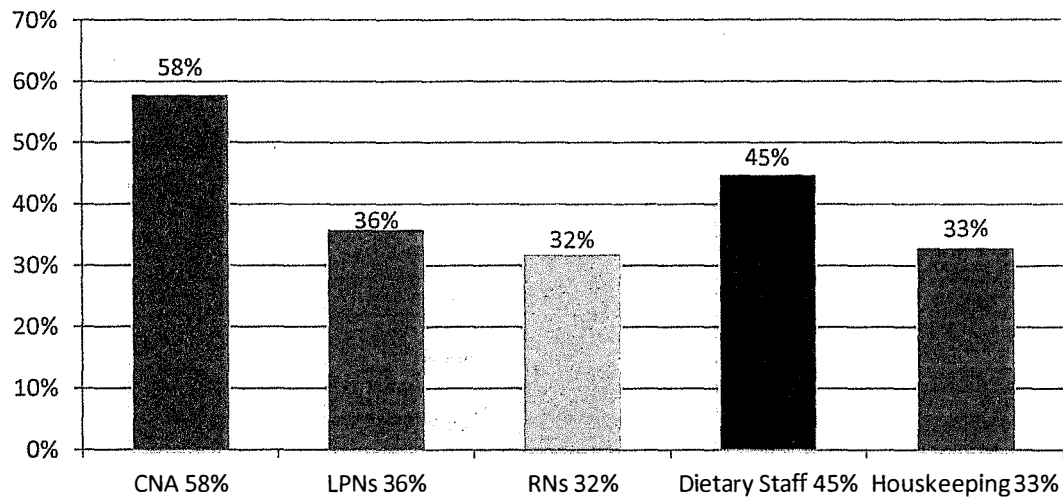
Contracted Hours



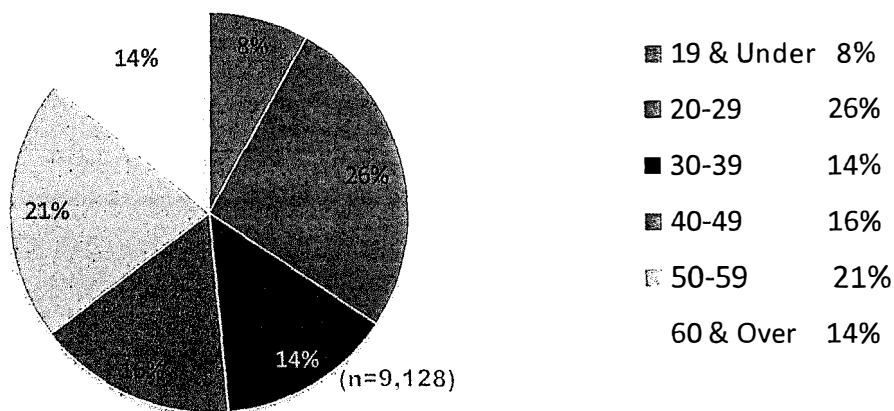
*Not all facilities submitted hours

Nursing Facility Workforce (continued)

2012 Staff Turnover



Age of Nursing Facility Workforce



- Turnover and age of our workforce will create an unprecedented demand for employees in the next 10 years.
- The youngest employee is 14 and the oldest employee is 99.
- Over one-third of our workforce is age 50 and older.
- North Dakota will need 1,880 additional nurses by 2018.


**North Dakota
Long Term Care**
 ASSOCIATION
 1900 N 11th St (701) 222.0660
 Bismarck, ND 58501 www.ndltca.org

North Dakota AHEC Partners

- Center for Rural Health
- The University of North Dakota School of Medicine and Health Sciences
- The University of North Dakota College of Nursing
- Mayville State University

Why AHECs?

- The North Dakota AHEC is a pivotal vehicle to meet the state's health care needs through collaboration
- 91% of North Dakota counties have less than the national average of physicians to population
- 47% of North Dakota counties have less than the national average of primary care providers to population
- 89% of North Dakota counties are federally designated as health professional shortage areas (HPSAs)
- 32% of North Dakota counties have fewer nurses than the national average

Contact

Eastern North Dakota Regional Center

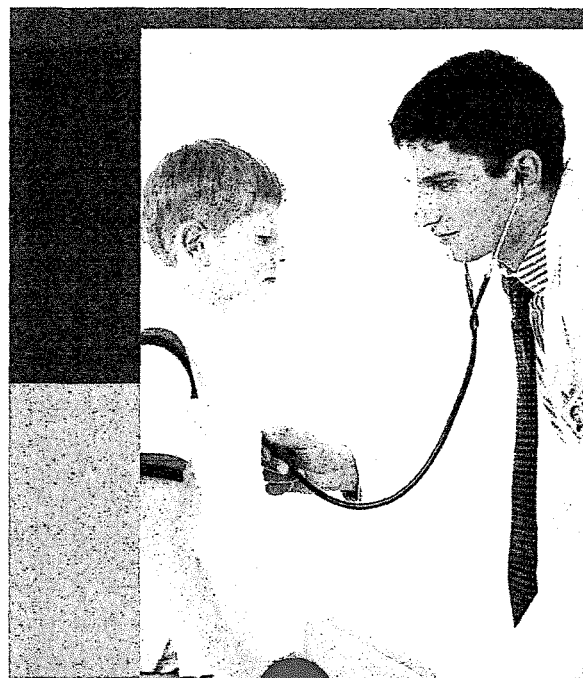
Dr. Bill Krivarchka, DDS, Director
bill@ndahec.org
701.788.4477

Western North Dakota Regional Center

Denise Andress, RN, Director
denise@ndahec.org
701.637.0178

North Dakota Program Office

Lynette Dickson, MS, RD, LRD, Director
lynette.dickson@med.und.edu
701.777.6049



NORTH DAKOTA



AREA HEALTH
EDUCATION CENTERS

*AHEC
Stands for Jobs*

www.ndahec.org

Who We Serve

Eastern North Dakota Regional Center

- 381,377 people, 28 counties, and 33,099 square miles in eastern North Dakota

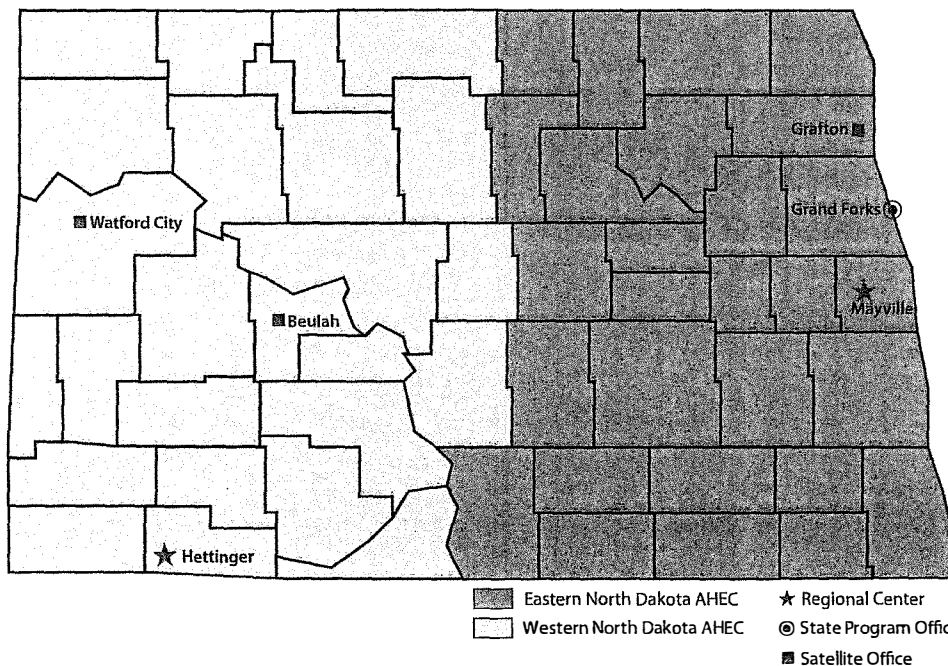
Western North Dakota Regional Center

- 291,214 people, 25 counties, and 37,600 square miles in western North Dakota

North Dakota Program Office

- Located at the UND Center for Rural Health in Grand Forks, we provide overall program support to the Regional Centers

North Dakota Area Health Education Center



What We Can Do for You



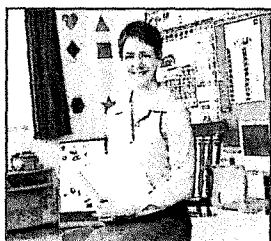
STUDENTS K — COLLEGE

- Assist you in exploring the 200+ careers in the health care industry
- Discover where your interests lie
- Provide tools and opportunities to pursue your goals
- Enhance your field or clinical experiences



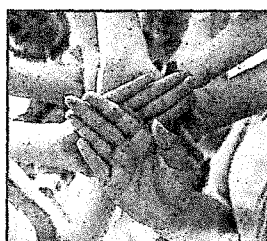
MEDICAL PROFESSIONALS

- Facilitate and promote continuing education
- Connect you to health professions students
- Support community faculty and preceptors



RURAL COMMUNITIES

- Learn how you can provide housing assistance, become a host family, or mentor a health professions student



EDUCATORS

- Provide resources to assist you in preparing students for professions in health care
- Discover creative opportunities for your school and classroom meant to inspire health care careers

Connecting students to careers, professionals to communities, communities to better health

NORTH DAKOTA AHEC NEWSLETTER



Stands for Jobs
NORTH DAKOTA AHEC

*Connecting students to careers, professionals
to communities, communities to better health*

4431211
2/19/2013
Allison

In-A-Box-Curricula



The Eastern and Western North Dakota AHECs have available five of "In-A-Box" Health and Science curricula tools for the classroom. Each box (Guts In-A-Box, Eye In-A-Box, Brain In-A-Box, Bones and Muscles In-A-Box and Ear In-A-Box) has a unique combination of hands-on

activities, models and technology, books, DVDs, teacher guides, reproducible, lesson extensions, resource lists, glossaries and background information. Examples of the material can be viewed at, www.inaboxcurriculum.net.

The In-A-Box Curricula is available for use, free of charge, to North Dakota teachers by contacting Katie Thompson, Eastern ND AHEC Education Coordinator, katie@ndahec.org, and in the Western ND AHEC area, please contact Denise Andress, Director, denise@ndahec.org. This link, ruralhealth.und.edu/topics/workforce/inabox.php, will provide information as to what the Center for Rural Health has to offer.

Scrubs Academy



The Scrubs Academy will be held June 17-20 at The University of North Dakota. This event is for any North Dakota student who has completed 6th, 7th or 8th grade and costs \$150.

Students will become CPR and HIPAA certified, interact with human simulators, explore a giant colon and much more!

You will learn about a variety of professions including but not limited to: Pharmacy, Nursing, Mental Health, EMS and more!

For more information email Kylie Nissen at kylie.nissen@med.und.edu or apply at ruralhealth.und.edu/projects/scrubs/academy.php

Inside this issue:

In-A-Box-Curricula	1
Scrubs Academy	1
Spotlight Facility	1
AgriSafe	2
What's Next with AHEC	2
HIPE Week	2
Counselor's Corner	2
Hands-On Health Careers	2
AHEC of a Good Idea	2
Contact Information	2



Spotlight Facility: Sakakawea Medical Center

The Sakakawea Medical Center serves the communities, residents and visitors of Mercer County, and portions of Oliver and Dunn Counties in North Dakota, which encompasses over 2000 square miles and a combined population of over 13,000.

Sakakawea Medical Center is located in the heart of rural Mercer County with the main office and facility housed in the City of Hazen. Sakakawea Medical Center (SMC) originally operated under the name of the Hazen Memorial Hospital Association and dates back as far as 1969 when the Hazen Memorial Hospital Association took over the hospital from the Lutheran Hospital Homes Society. In 1988 the name was changed to Sakakawea Medical Center. Currently SMC is classified as a "Critical Access Hospital" and is a community owned and operated hospital under the Hazen Memorial Hospital Association whose operation is governed by a volunteer board of directors elected through its membership.

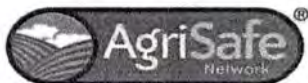
Sakakawea Medical Center operates more than just the hospital. In addition, we operate and manage a rural health clinic, licensed basic care facility, two rehabilitation departments, home health care and hospice care program. SMC strives to be a complete healthcare system dedicated to providing the best comprehensive care possible to the area that we serve. The vision of SMC is to: "Enhance the lives of our patients, families and area communities through High Quality Healthcare and Services."

Our community commitment is reflected through the Sakakawea Medical Center's mission goals to:

- Provide high quality care that is measured and continuously improved.
- Provide individualized care that exceeds expectations of those we serve.
- Strengthen partnerships with providers to enhance coordination of care and improve system performance.
- Be a steward of resources.
- Commit to service excellence.
- Be a vital contributor to our area communities.
- Recognize the value of each employee and provide opportunities for personal growth and development that



AgriSafe



The AgriSafe Network, a non-profit national membership organization, represents health professionals who are concerned about the health and safety of farm families. The AgriSafe Network is dedicated to supporting AgriSafe health professionals who are prepared to serve the health care needs of farmers. Member benefits include training, educational materials, contact with other clinicians in the field, and updates on the most cutting-edge developments in agricultural health and safety. Only health professionals who have received extensive training in the field of agricultural health and safety earn the right to be named "AgriSafe Providers". AgriSafe envisions a day when farmers across the country have access to highly trained AgriSafe professionals. That local AgriSafe clinician will provide superior disease management and prevention services to match the farmer's specific exposures. For more information, visit www.agrisafe.org or email info@agrisafe.org, or Denise Andress at denise@ndahec.org.

HIPE WEEK March 11-15, 2013

Attention: K-12 teachers and health care providers!!

Team up with the Center for Rural Health to promote health careers—**start planning for HIPE Week now!**

NEW THIS YEAR!!! Healthcare Workforce Vide Contest open to North Dakota students in grades K-12! Encourage students to use their creativity to design a healthcare video and they may be the winner of a cash prize! Deadline for video submission is March 1, 2012. Go to <http://ruralhealth.und.edu/projects/hipe/video-contest.php> to view contest rules and submission information.

Visit ruralhealth.und.edu/projects/hipe/ to access numerous career activities, poster, table tents, and other resources. Celebrate HIPE week and let us know how it went by emailing your comments to kylie.nissen@med.und.edu.

For more information, go to ruralhealth.und.edu/projects/hipe/ or contact Kylie Nissen at 701-777-5380 or kylie.nissen@med.und.edu.

Counselor's Corner



Counselor's Corner provides you with current information about health care careers. It is a resource that you can share on-line with students and parents to explore careers, salaries, future work trends, interviews, and videos.

You can view past Counselor's Corners' from the North Dakota AHEC archives at eastern.ndahec.org/educators/counselors-corner.php. Our future editions will feature careers in occupational and physical therapy, dental professions, social work and psychology, public health, emergency medical services, and nursing.

Contact Information

Eastern AHEC:

Bill Krivarchka—Director

701.788.4477 or bill@ndahec.org

Katie Thompson—Education Coordinator

701.352.4689 or katie@ndahec.org

Lois Karlstad—Project Coordinator

701.788.4475 or lois@ndahec.org

Western AHEC:

Denise Andress—Director

701.637.0177 or denise@ndahec.org

John Graham—Education Coordinator

701.873.7788 ext. 102 or john@ndahec.org

Christi Miller—Project Coordinator

701.637.0178 or christi@ndahec.org

What's Next With AHEC

HIPE Week Video Deadline	March 1
Marketplace for Kids at Lake Region State College	March 11
Scrubs Camp in Lisbon	March 13
Scrubs Academy Applications Due	March 15
Scrubs Camp in Hazen	March 27
Scrubs Camp in Rugby	March 28
Scrubs Camp in Devils Lake	April 4
Marketplace for Kids at Northwood Public Schools	April 8
Scrubs Camp in Mohall	April 12
Marketplace for Kids at Minot State University	April 17
Dickinson State University Nurse Camp	April 20
Marketplace for Kids at Williston State College	April 23
Girl Scouts Medi-Fun Day in Bismarck	April 27
Marketplace for Kids at North Dakota State College of Science	May 14
Marketplace for Kids at Jamestown College	May 17

Hands-On Health Careers

Hands-On Health Careers: It's the Doctor's Orders was a session at Marketplace for Kids events held throughout the states. Marketplace for Kids is an organization that coordinates educational events throughout the state. Fourth through sixth grade teachers are invited to bring their classrooms to the events to encourage students to be creative, solve problems, and practice innovation. The North Dakota AHEC participated in nine of ten events impacting 843 students, where they learned about the many careers in health care, names of major bones and organs of the human body, and hands-on activities with our patient simulator, Jack. We look forward to attending Marketplace for Kids events in the future!

AHEC of a Good Idea

Ever wonder why NDAHEC is a great organization? Curious as to what we are about? Take a moment to view the video and learn why AHEC is a "AHEC of a Good Idea" www.youtube.com/watch?v=iFV-oOMNM8s&feature=youtu.be

**ND AHEC SUSTAINABILITY
HB1211**

AHEC Grant Years 5-9	Year 5 2012-2013			Year 6 2013-2014			Year 7 2014-2015			Year 8 2015-2016			Year 9 2016-2017		
	Program	Eastern	Western	Program	Eastern	Western	Program	Eastern	Western	Program	Eastern	Western	Program	Eastern	Western
Proposed Budget	103,264	299,000	273,139	125,000	307,970	281,333	128,750	317,209	289,773	132,613	326,725	298,466	136,591	336,527	307,420
Personnel	71,693	221,532	204,574	87,500	227,898	211,000	90,125	234,735	217,330	92,829	241,777	223,850	95,614	249,030	230,565
Operating	31,571	77,468	68,565	37,500	80,072	70,333	38,625	82,474	72,443	39,784	84,948	74,616	40,977	87,497	76,855
Federal AHEC Funding	103,264	154,896	154,896	103,264	154,896	154,896	88,000	76,500	154,896	51,000	76,500	76,500	51,000	76,500	76,500
Additional Funding	0	143,725	92,609	0	22,200	8,000	0	31,000	16,500	0	0	0	0	0	0
HPOG	0	13,800	0	0	14,200	0	0	14,500	0	0	0	0	0	0	0
Bremer Foundation	0	97,000	0	0	0	0	0	0	0	0	0	0	0	0	0
UND Cash Match	0	0	0	0	8,000	8,000	0	16,500	16,500	0	0	0	0	0	0
Carry-Forward	0	32,925	92,609	0	0	0	0	0	0	0	0	0	0	0	0
Budget Short	0	379	25,634	21,736	130,874	118,437	40,750	209,709	118,377	81,613	250,225	221,966	85,591	260,027	230,920

Budget Shortfall	639,883
63rd Bienium Request	600,000

AHEC grant year cycle is September 1st - August 31st.

NOTE: In the grant years 2012/2013 was decreased from \$187,500 to 154,896. We are able to request the full amount of funding, however it is very likely that federal funding is expected to decrease. For example, 2012-2013 \$187,500/AHEC reg. center was requested; award was reduced by \$32,604 resulting in \$154,896/AHEC.

HB 1211
2/19/2013
Attachment #2

HB 1211
2/19/2013
Attachment #3

North Dakota Area Health Education Center (AHEC) Outcomes (2009-2012)

Workforce development is a combination of multiple activities using a variety of 'touch points' to address future supply of healthcare professional by "growing our own" with K-12 activities; arranging rural clinical rotations for health professional students in order to encourage and increase interest in working in a rural community; recruiting health professionals to rural North Dakota communities; and maintaining competence and skills by providing continuing education and training to health professionals.



Stands for Jobs
NORTH DAKOTA AHEC

K-12 Activities (examples):

<ul style="list-style-type: none"> • Classroom visits by request • Career fairs • Marketplace for Kids • Crash Course(Parent/Student focus) 	<ul style="list-style-type: none"> • Scrubs Camps and Scrubs Academy • Partners in Nursing(PIN) Summer Nurse Adventure • HOSA-Future Health Professionals student organization • Nurse Camps (DSU and NDSU)
---	---

Number of K-12 Participants Reached:

- Total students informed about health career opportunities - over 6800
- Total parents informed about health career opportunities - 325
- Total school counselors, teachers, administrators informed about health career - 220

Rural Clinical Rotations and Other Activities for Health Profession Students (examples)

Examples of Activities: Provide financial support (e.g. stipends/ travel reimbursement or coordination of rural experience); job fairs featuring ND health care facilities.

Rural Clinical Rotations	<ul style="list-style-type: none"> • Provide financial support for nursing students: (1) McVile; (1) Park River; (4) Mayville, (1) Hillsboro, (2) Portland and (3) Jamestown; (2) Northwood; Dakota Nursing Program; Dickinson State University Nursing Program • Provided financial support for one dental student, Belcourt; and • Provide financial support for one physical therapy student.
Other	<ul style="list-style-type: none"> • Provided funding to support UND's Indians in to Medicine (INMED) summer program. • Shared job opportunities at job fairs (e.g. UND, Primary Care Week Meet and Greet, NDSU and Bismarck State University) • Provided funding support to West Traill Ambulance Service, Mayville, ND for EMT Class at Mayville State University

Number of Health Profession Students and Instructors Reached:

- Total health professions students reached - nearly 900
- Total instructors/preceptors reached – over 280

Continuing Education and Training:

- Total number of participants reached – 1590
- Total number of continuing education contact hours provided – over 14,000

Recruitment of Health Professionals to Rural Communities:

Assistance is provided at NO COST, supported by AHEC federal funds.

Cost to a health care facility when using a professional recruiting firm to provide referrals, assist with recruitment and placement.

- \$20,000 when recruiting a physician
- \$10,000- \$15, 000 when recruiting a nurse practitioner or physician assistant

Health professional candidates referred to North Dakota hospitals, clinics and community health centers (2010-2012).

<ul style="list-style-type: none">• 37 Family Medicine• 57 Internal Medicine• 9 General Surgery• 11 Dentists	<ul style="list-style-type: none">• 38 Registered Nurse(RN)• 29 Nurse Practitioner(NP)• 23 Physician Assistant(PA)• 174 Other Specialties
---	--

Outcome of Referrals:

<ul style="list-style-type: none">• PA in Stanley (in place)• Three PAs in Rolla (in place)• RN in Garrison(in place)• Dentist in Langdon (in place)• NP in Mayville (starts in May)	<ul style="list-style-type: none">• NP in Turtle Lake (pending)• Internal Medicine Physician in Cavalier (pending)• Dentist in Turtle Lake (pending)
--	--

Economic impact of one primary care physician on a rural community.

- One primary care physician creates 23 jobs annually.
- One primary care physician generates \$1.0 million in wages, salaries and benefits annually.
- One primary care physician generates approximately \$1.8 million in annual total revenue.

Economic Impact of Rural Health Care, National Center for Rural Health Works

Economic impact of one PA and NP on a rural community (average salary range is \$82,000-90,000 +)

- One PA/NP will employ, at minimum, a registered nurse (salary level \$49,000).
- One PA/NP in a rural community generates over \$175,000 in wages, salaries, and benefits annually.

**This information does not include potential annual revenue generated.*

Economic impact of one dentist to a rural community (average salary \$175,000).

- One dentist will employ, at minimum, one Dental Hygienist (average salary \$59,000); one Dental Assistant (average salary \$33,000); and Office Manager (average salary \$50,000).
- One dentist in a rural community generates over \$400,000 in wages, salaries, and benefits annually.

**This information does not include potential annual revenue generated.*

For more information, contact:

Bill Krivarchka, DDS, Director, Eastern ND AHEC, 701-788-4477, bill@ndahec.org

Denise Andress, RN, Director, Western ND AHEC, 701-637-0178, denise@ndahec.org

Lynette Dickson, MS, RD, LRD, Program Director, AHEC Program Office, lynette.dickson@med.und.edu

HB 1211
2/22/13
Attachment 1

North Dakota Area Health Education Center (AHEC) Outcomes (2009-2012)

Workforce development is a combination of multiple activities using a variety of 'touch points' to address future supply of healthcare professional by "growing our own" with K-12 activities; arranging rural clinical rotations for health professional students in order to encourage and increase interest in working in a rural community; recruiting health professionals to rural North Dakota communities; and maintaining competence and skills by providing continuing education and training to health professionals.



Stands for Jobs
NORTH DAKOTA AREA HEALTH EDUCATION CENTER

K-12 Activities (examples):

<ul style="list-style-type: none"> Classroom visits by request Career fairs Marketplace for Kids Crash Course(Parent/Student focus) 	<ul style="list-style-type: none"> Scrubs Camps and Scrubs Academy Partners in Nursing(PIN) Summer Nurse Adventure HOSA-Future Health Professionals student organization Nurse Camps (DSU and NDSU)
---	---

Number of K-12 Participants Reached:

- Total students informed about health career opportunities - over 6800
- Total parents informed about health career opportunities - 325
- Total school counselors, teachers, administrators informed about health career - 220

Rural Clinical Rotations and Other Activities for Health Profession Students (examples)

Examples of Activities: Provide financial support (e.g. stipends/ travel reimbursement or coordination of rural experience); job fairs featuring ND health care facilities.

Rural Clinical Rotations	<ul style="list-style-type: none"> Provide financial support for nursing students: (1) McVillie; (1) Park River; (4) Mayville, (1) Hillsboro, (2) Portland and (3) Jamestown; (2) Northwood; Dakota Nursing Program; Dickinson State University Nursing Program Provided financial support for one dental student, Belcourt; and Provide financial support for one physical therapy student.
Other	<ul style="list-style-type: none"> Provided funding to support UND's Indians in to Medicine (INMED) summer program. Shared job opportunities at job fairs (e.g. UND, Primary Care Week Meet and Greet, NDSU and Bismarck State University) Provided funding support to West Traill Ambulance Service, Mayville, ND for EMT Class at Mayville State University

Number of Health Profession Students and Instructors Reached:

- Total health professions students reached - nearly 900
- Total instructors/preceptors reached – over 280

Continuing Education and Training:

- Total number of participants reached – 1590
- Total number of continuing education contact hours provided – over 14,000

Recruitment of Health Professionals to Rural Communities:

Assistance is provided at NO COST, supported by AHEC federal funds.

Cost to a health care facility when using a professional recruiting firm to provide referrals, assist with recruitment and placement.

- \$20,000 when recruiting a physician
- \$10,000- \$15, 000 when recruiting a nurse practitioner or physician assistant

Health professional candidates referred to North Dakota hospitals, clinics and community health centers (2010-2012).

<ul style="list-style-type: none">• 37 Family Medicine• 57 Internal Medicine• 9 General Surgery• 11 Dentists	<ul style="list-style-type: none">• 38 Registered Nurse(RN)• 29 Nurse Practitioner(NP)• 23 Physician Assistant(PA)• 174 Other Specialties
---	--

Outcome of Referrals:

<ul style="list-style-type: none">• PA in Stanley (in place)• Three PAs in Rolla (in place)• RN in Garrison(in place)• Dentist in Langdon (in place)• NP in Mayville (starts in May)	<ul style="list-style-type: none">• NP in Turtle Lake (pending)• Internal Medicine Physician in Cavalier (pending)• Dentist in Turtle Lake (pending)
--	--

Economic impact of one primary care physician on a rural community.

- One primary care physician creates 23 jobs annually.
 - One primary care physician generates \$1.0 million in wages, salaries and benefits annually.
 - One primary care physician generates approximately \$1.8 million in annual total revenue.
- Economic Impact of Rural Health Care, National Center for Rural Health Works*

Economic impact of one PA and NP on a rural community (average salary range is \$82,000-90,000 +)

- One PA/NP will employ, at minimum, a registered nurse (salary level \$49,000).
 - One PA/NP in a rural community generates over \$175,000 in wages, salaries, and benefits annually.
- *This information does not include potential annual revenue generated.*

Economic impact of one dentist to a rural community (average salary \$175,000).

- One dentist will employ, at minimum, one Dental Hygienist (average salary \$59,000); one Dental Assistant (average salary \$33,000); and Office Manager (average salary \$50,000).
 - One dentist in a rural community generates over \$400,000 in wages, salaries, and benefits annually.
- *This information does not include potential annual revenue generated.*

For more information, contact:

Bill Krivarchka, DDS, Director, Eastern ND AHEC, 701-788-4477, bill@ndahec.org

Denise Andress, RN, Director, Western ND AHEC, 701-637-0178, denise@ndahec.org

Lynette Dickson, MS, RD, LRD, Program Director, AHEC Program Office, lynette.dickson@med.und.edu

3-18-2013 Legislative Testimony to Senate Human Services Committee - House Bill 1211

Good morning, Chairman Lee and committee members. My name is Lynette Dickson and I am an Associate Director at the Center for Rural Health, School of Medicine and Health Sciences (SMHS); Program Director of the Area Health Education Center (AHEC). I intended to attend in person; however, due to travel advisory and poor road conditions I was unable to make it. I would like to provide background information about the AHEC program, which Bill 1211 is intended to support through the Department of Commerce.

As background, the federal AHEC grant program was developed by Congress in 1971 to recruit, train and retain a health professions workforce committed to underserved populations. North Dakota was actually classified as a "1st generation AHEC" as the School of Medicine had an AHEC grant in the mid-1970's that was used to create the four medical campuses that are still operated in Bismarck, Fargo, Grand Forks, and Minot. The federal grant dollars ended sometime in the early to mid-1980's and as you are well aware, the Medical School secured support from the state of North Dakota along with tuition dollars and other sources to support medical education at the four campuses. In 2008, the Center for Rural Health applied for and was awarded a new AHEC grant through the Bureau of Health Professions, Health Resources and Service Administration (HRSA). This federal grant has a 1:1 required match which encourages a federal and state partnership to address the challenges of health workforce supply. AHEC programs are required to be administered through medical schools, unless there is not a medical school in the state. Today, 56 AHEC programs with more than 235 centers operate in nearly every state and the District of Columbia. Approximately 120 medical schools and 600 nursing and allied health schools work collaboratively with AHECs to improve health for underserved and under-represented populations.

In North Dakota, the federal AHEC grant is written and administered through the Center for Rural Health which is designated as the AHEC Program Office. The role of the Program Office is to support the regional centers by providing oversight and direction; sharing resources such as technical assistance with communication, web and graphic design and grant development and management. As is common in rural health efforts, building collaborative relationships is fundamental to success. The AHEC program helps bring the resources of academic medicine, to address local community health needs. We work with communities, health organizations, health providers, elementary/secondary/post-secondary education systems, and others to improve health workforce options and opportunities for all North Dakotans. The work of the AHEC involves K-12 students around the state, health professions programs in all ND colleges, universities and is not exclusive to UND. The strength of the AHEC Network is its ability to creatively adapt national initiatives to help address local and regional North Dakota healthcare workforce issues. The federal expectation is that the majority of the work is conducted by the Regional Centers; therefore the Program Office, is required to disperse no less than 75% of the federal grant funds to the Regional Centers located in Mayville, serving the Eastern ND and Hettinger, serving Western ND. Mayville State University has proven to be a valued partner and serves as the fiscal host for both Regional Centers, by administering

both subcontracts from the CRH. The federal funds are awarded for Infrastructure for 6 years; and are reduced significantly to Point of Service which necessitates an increase in non-federal cost-sharing for state workforce issues.

The AHEC staff are located in rural communities and focused on collaborative relationships involving public and private partners working to establish a health education environment that is more comprehensive and inclusive of medical, nursing, dental, pharmacy, physical therapy, public health and other disciplines and needs. The CRH is engaged in workforce related activities that complement and support the work of the AHEC such as health care workforce assessment and analysis to better understand our statewide needs both for today and to forecast future needs; Rural Health Scrubs Camps and Academies and assistance with recruitment/retention to rural communities. Much of the CRH work focuses in communities with the 36 rural hospitals; however, we do not have the staff to reach other rural communities which the AHECs are able to do; providing funds are available to sustain the full time staff to do so.

The SMHS and CRH are committed to work in partnership with the Regional Centers to meet the critical need of health care workforce in our state by increasing awareness about opportunities in health careers for our North Dakota youth; increasing interest in rural practice by supporting rural clinical rotations for health profession students; and improving competence and skills of our existing health professions by coordinating continuing education and training; which the AHEC Regional Directors will speak to in more detail. Through community-based interdisciplinary training programs, AHECs identify, motivate, recruit, train, and retain a health care workforce committed to maintaining access to quality healthcare in our rural communities.

Funding support through state appropriation will provide not only required match funds; but more importantly infrastructure support so the AHEC is able to actively address health workforce shortages in our state. As state legislators, you are well aware of the health workforce challenges, which you will hear more about today from my colleagues; and the critical need to maintain access to quality health care services for our residents. State appropriated funds from HB 1211 would be used to sustain the much needed staffing and operations in order to inspire the next doctor, nurse, physical therapist or other health professional from our most precious resource – more valuable than oil, our North Dakota youth. Health care workforce development is the responsibility of all - local health care facilities and their community; K-12 and secondary education, and state and federal programs. AHEC serves as the glue to coordinate all the resources. Thank you for your time and consideration.

March 18, 2013

Chairman and Committee Members,

Good Morning Madam Chairman and members of the committee, my name is Denise Andress, the Director of the Western Area Health Education Center. I am here to testify and support in favor of HB 1211.

Thank you for the opportunity to submit written testimony regarding the North Dakota Area Health Education Center (AHEC). The North Dakota AHEC has three focus areas: kindergarten through college education, student clinical rotations, and continuing education for health care providers. All of these focus areas are vital for meeting the health care needs of rural North Dakota.

I am a Registered Nurse, more importantly; I am a proud resident of a rural community in southwestern North Dakota. As I think about what it means to be rural, many things come to mind. As a state, we struggle with keeping enough health care providers, and in rural areas, this has become critical. What are we doing as a state to promote the number two employer, next to government? The North Dakota Area Health Education Center is working to meet that very need.

To put rural into perspective, North Dakota's number one economic driver is agriculture and 89% of our state is farmland. Essentially, rural communities exist to support the farmers and ranchers who grow our food. We need rural farms and ranches to supply food to the world and we need rural communities to support the agricultural industry by promoting health care in rural areas.

What impact does health care have on a community:

- Only about 10 percent of the physicians practice in rural America despite the fact that nearly one fourth of the population lives in these areas.
- Quality rural health services in rural communities are needed to attract business and industry
- On average, 14% of total employment in rural communities is attributed to the health sector.

Rural Primary Care Physician impact:

- One primary care physician in a rural community creates 23 jobs annually
- One primary care physician in a rural community generate 1.0 million in wages, salaries and benefits
- One primary care physician in a rural community generates approximately \$1.8 million in annual total revenue
- The total economic impact of a typical critical access hospital is 195 employees and \$8.4 Million in payroll

How do we attract and keep quality health care in rural North Dakota?

- By exciting students to explore, to study, and to become rural health care providers

- By assisting colleges and universities to create clinical experience rotations with rural health care organizations
- By supporting first-class continuing education for health care providers working in rural areas
- By creating policy to encourage and support admissions of rural students in health care professional education.

It seems that rural facilities should be able to handle the recruitment of rural health care providers; however, it has become a complicated process. As communities are addressing shortages of housing, infrastructure development, and finances resources for recruitment has become a challenge. AHEC can provide the connections between rural and urban to strengthen and enhance current recruitment efforts.

Last month, on February 5th was the one year anniversary of the death of four year old Calvin Steeke. He was victim to an ATV accident on a family farm. His father performed CPR for 45 minutes until the volunteer EMS providers arrived. Currently, ND has 4300 first responders, of which 3900 are volunteers. In ND we must count on volunteers to offer critical services to our communities. These volunteers support community services while having jobs and families of their own. All too often rural communities experience great travel time for emergency and health care services.

Wendell Berry is quoted as saying "The soil is the great connector of lives, the source and destination of all. It is the healer and restorer and resurrector, by which disease passes into health, age into youth and death into life. Without proper care for it we can have no community, because without proper care for it we can have not life."

I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211.

Thank you for your time.

March 18, 2013

Bill Krivarchka, Director
 Eastern ND AHEC
 42 6th Avenue SE
 Mayville, ND 58257

Madam Chairman and members of the committee, my name is Bill Krivarchka, I am here to testify in favor of House Bill 1211.

Thank you for the opportunity to provide testimony about the North Dakota AHEC Program. We respectfully request level funding of \$400,000 in order to sustain a successful statewide, community-based AHEC infrastructure to support health workforce priorities.

As a model of State appropriated funding for an AHEC Program, North Carolina AHEC (established in 1971) has a \$45 million budget with 22% (\$9,900,000) of the funding appropriated by the state of North Carolina. Your \$600,000 investment in the North Dakota AHEC system will grow to an estimated \$1.6 million workforce development initiative through leveraged, federal, local, community and private foundation funding.

Federal funds are only available to AHEC if they are matched by state and community funds. The status of the health care system is something we hear about every day. Although there are many opinions about how to make the system work better for patients and payers, everyone agrees that more primary care providers are needed to meet current and future needs. The North Dakota State Department of Labor forecasts that health care sector jobs will grow at rates more than five times faster than any other field. We're here to help.

AHEC strategies increase the number of students from urban and rural underserved areas who become doctors, nurses and other health professionals. Research shows that these students are more likely to choose primary care and practice in their home communities or similar communities. We work with statewide, regional and local partners such as academic institutions, elementary/secondary schools, hospitals, clinics, community organizations, government agencies, Department of Commerce and businesses – making all of North Dakota State a campus.

So why North Dakota AHEC?

Between 2009 and 2012, the ND AHEC Program:

- AHEC has reached over 10,500 participants and AHEC has reached every county in ND.
- AHEC has given \$28,333 (approximately 5,500 students) in grants to facilitate health occupation activities.
- AHEC has assisted \$4,578 (25) students to clinical rotations
- Has contributed in over \$100,000 (5,000 health professionals) toward continuing education for health care providers.
- Has developed 25 new student rotations in nursing, medicine, physical therapy.
- 48% of health profession students participating in summer clinical experiences in 2010 indicated (via surveys) an intent to practice in communities of 10,000 or less.
- The ND AHEC Program has partnered with the UND College of Nursing and the UND Simulation Training Center to establish the ND Simulation Alliance to provide Simulation training for critical

assess hospitals, health care providers, long term care, EMS and educational institutions throughout the state.

- ND AHEC has developed and implemented other strategies to address workforce needs. The Tri-State AHEC (ND, SD, MN) Collaborative has been established which is a partnership that will assist the three states to 1) create strong regional partnerships, 2) develop strategies to improve the number of American Indian students in health workforce pipelines, and 3) establish a uniform strategy for inter-professional education sites within health care systems that operate in two or more states.

AHECs adapt to meet community needs and partner for economic development in our rural communities.

- Lisbon, ND, a community of 2,300, has a health care workforce of approximately 600 (hospital, clinic, long term care, basic skills, Veterans Soldiers Home, dentist, chiropractor, pharmacy, etc.). Good paying jobs, rewarding employment, and local “trickle” down economics, enhance the local education, betterment of Main Street, and create opportunity for new businesses and industry.
- Northwood, ND, population of 1,000, has a health care workforce of approximately 200, being the largest employer in the community.
- Of the 11 largest employers in the state of North Dakota, (with state government being the largest employer) the next 10 largest employers are all related to health care.

It has been estimated that in the next 10 years, 50% of our nurses will retire, a shortage of approximately 300 primary care physicians, and all health care disciplines will be impacted with workforce shortages, resulting from retirement and the impact of the Affordable Care Act (which in ND will possibly infuse 70,000 new patients for health care). Where will the health care workforce come from?

The North Dakota AHEC Programs multifaceted recruitment, training and retention strategies are solutions to current and future health workforce shortages. They increase diversity and distribute health care professionals where they are needed most. Our programs result in the sons and daughters of North Dakota becoming health professionals who work to improve health care access and economic development in underserved rural communities.

The ND AHEC Program respectfully requests funding of \$400,000 to sustain a successful statewide, community-based AHEC infrastructure to support health workforce priorities.

Thank you for this opportunity and your support.

Respectfully,

Bill Krivarchka, Director
Eastern ND AHEC

ND AHEC SUSTAINABILITY

HB1211

AHEC GRANT YEARS 5-9	YEAR 5 2012-2013			YEAR 6 2013-2014			YEAR 7 2014-2015			YEAR 8 2015-2016			YEAR 9 2016-2017		
	Program	Eastern	Western	Program	Eastern	Western	Program	Eastern	Western	Program	Eastern	Western	Program	Eastern	Western
Proposed Budget	103,264	299,000	273,139	125,000	307,970	281,333	128,750	317,209	289,773	132,613	326,725	298,466	136,591	336,527	307,420
Personnel	71,693	221,532	204,574	87,500	227,898	211,000	90,125	234,735	217,330	92,829	241,777	223,850	95,614	249,030	230,565
Operating	31,571	77,468	68,565	37,500	80,072	70,333	38,625	82,474	72,443	39,784	84,948	74,616	40,977	87,497	76,855
Federal AHEC Funding	103,264	154,896	154,896	103,264	154,896	154,896	88,000	76,500	154,896	51,000	76,500	76,500	51,000	76,500	76,500
Additional Funding	0	143,725	92,609	0	22,200	8,000	0	31,000	16,500	0	0	0	0	0	0
HPOG	0	13,800	0	0	14,200	0	0	14,500	0	0	0	0	0	0	0
Bremer Foundation	0	97,000	0	0	0	0	0	0	0	0	0	0	0	0	0
UND Cash Match	0	0	0	0	8,000	8,000	0	16,500	16,500	0	0	0	0	0	0
Carry-Forward	0	32,925	92,609	0	0	0	0	0	0	0	0	0	0	0	0
Budget Short	0	379	25,634	21,736	130,874	118,437	40,750	207,709	118,377	81,613	250,225	221,966	85,581	260,027	230,920
				13,586	81,817	74,036	25,473	131,102	73,999						
				Budget shortfall			639,883								
				63rd Bienium Request			400,000								

AHEC grant year cycle is September 1st – August 31st.

NOTE: In the grant years 2012/2013 was decreased from \$187,500 to \$154,896. We are able to request the full amount of funding, however it is very likely that federal funding is expected to decrease. For example, 2012-2013 \$187,500/AHEC reg. center was requested; award was reduced by \$32,604 resulting in \$154,896/AHEC

Nursing Facility Workforce

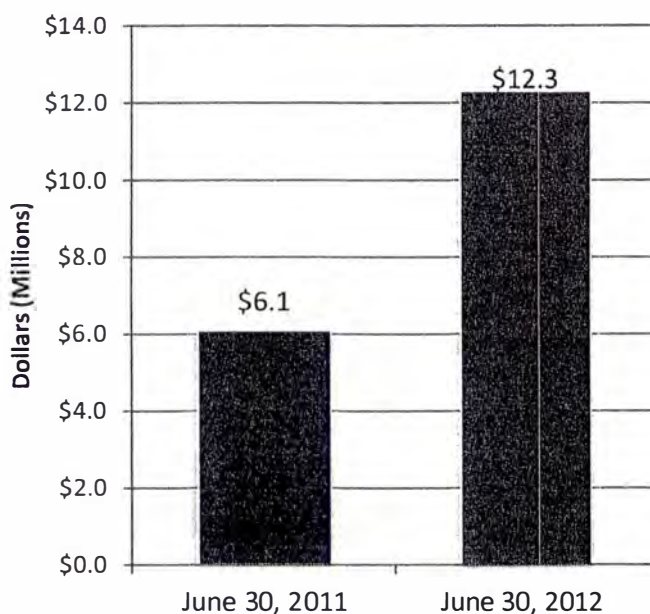
(47)

Nursing Facility Workforce

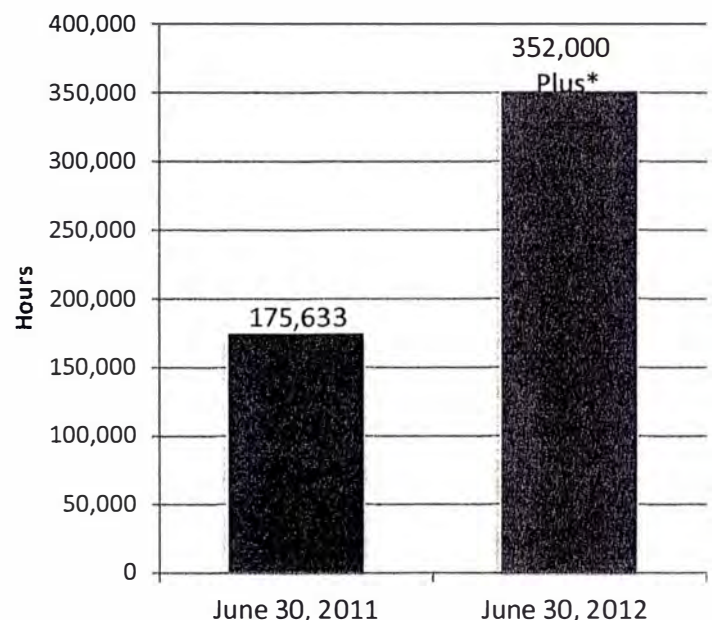
- Top issue facing nursing facilities is staffing.
- Number of individuals employed in 68 nursing facilities was 9,267. Based upon this ratio, total people employed by 83 nursing facilities are estimated to be 11,311.
- July 1, 2012, sixty-three nursing facilities reported 751 vacant positions.
- Nine of sixty-six reporting nursing facilities stopped admissions in 2012 because of a lack of staff.
- Sixty-six percent of nursing facilities, 2 out of 3 facilities, used contract agency staff in 2012.
- Contract nursing hours and dollars more than doubled in twelve months.
- The 2012 average salary increase provided was 2.9%, however one-third of nursing facilities also provided an extra enhancement to retain their employees. Enhancements were as high as \$5 per hour to 20% increases.

Contract Nursing

Dollars Spent



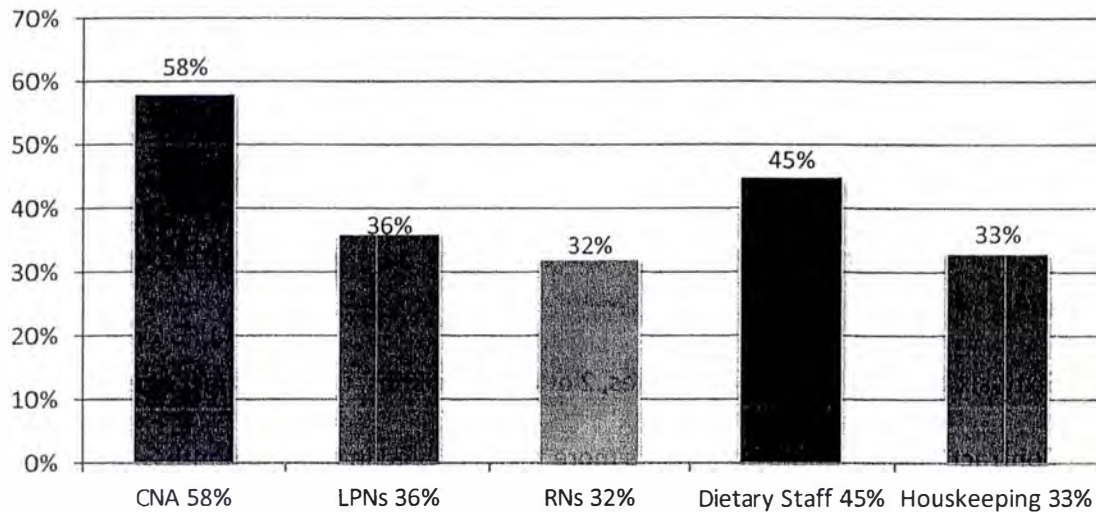
Contracted Hours



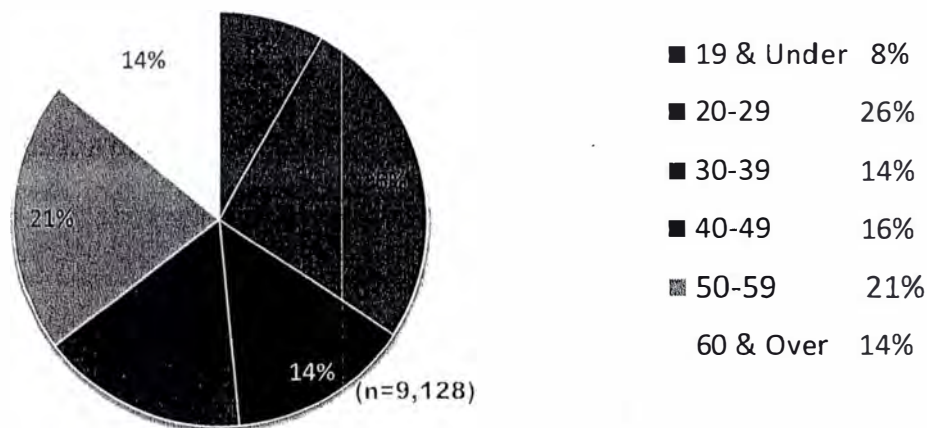
*Not all facilities submitted hours

Nursing Facility Workforce (continued)

2012 Staff Turnover



Age of Nursing Facility Workforce



- Turnover and age of our workforce will create an unprecedented demand for employees in the next 10 years.
- The youngest employee is 14 and the oldest employee is 99.
- Over one-third of our workforce is age 50 and older.
- North Dakota will need 1,880 additional nurses by 2018.

**North Dakota
Long Term Care**
ASSOCIATION
1900 N 11th St (701) 222.0660
Bismarck, ND 58501 www.ndltca.org

#5

March 18, 2013

Bill E. Krivarchka, Director
Eastern ND AHEC
42 6th Avenue SE
Mayville, ND 58257


Madam Chairman and members of the committee, my name is Bill Krivarchka. I am here to testify and support HB 1211.

"Connecting health care professions and students to rural communities," is a major part of the mission of the ND AHEC Program. Health science students from many North Dakota colleges and universities studying allied health, medicine, nursing, public health, pharmacy, social work, and psychology received part of their training under AHEC auspices in community hospitals, physician offices, rural health center, public health departments and other health related settings. The two regional ND AHECs enable state wide community training for health professionals and students to reverse a trend toward shortages and uneven distribution of health care practitioners in the states rural areas.

The ND AHEC has worked to prepare students through field placements. Seventeen clinical sites are utilized for participation in interdisciplinary rotations with twenty five students receiving new AHEC-based rotations. Examples of rural clinical experiences are:


- Dental clinical rotation at Quentin Burdick Memorial Health Center, Belcourt, ND
- UND Nursing Co-ops in Mayville, Hillsboro, Northwood, McVile, Grafton, Hettinger, and Bowman
- Mayville State University and Valley City State University Nursing Student mental health rotation at the State Hospital in Jamestown

Kelsey Erickson, a UND co-op nursing student: "Three years ago, the summer before my last semester of nursing school at the University of North Dakota, I felt like something was missing from my educational experience. I finally figured out what was missing. I was lucky enough to be offered the opportunity to further my nursing education by participating in a nursing co-op at Sanford Medical Center Mayville. After already four semesters of clinicals under my belt, it was hard to believe that no attention was directed towards rural nursing. Coming from a small town I was very interested and excited to have the opportunity to expand my learning. This experience would not have been possible if it hadn't been provided by Eastern ND AHEC. The Eastern ND AHEC provided me with living expenses and also helped provide the hospital with funds to give me this experience for the summer during my co-op. During this experience I was able to see how a hospital functions in a rural setting. I was able to be in the role of a real rural nurse under the supervision of a Registered nurse. During this summer I noticed a definite increase in my critical thinking, communication and interdisciplinary skills. I will never forget those wonderful people who took the time out of day to help me learn and grown as a person and a student. Because of this experience I find I am a better nurse today. I am so thankful that the Eastern ND AHEC was there to help provide me with this amazing opportunity."



Stefan Hofer at Sanford Medical Center Mayville: "West Traill Ambulance collaborated with the Eastern ND AHEC on the purchase of MegaCode Kelly Advanced, including the SimPad System. This simulator has been used in numerous emergency medicine continuing education opportunities at Sanford Medical Center Mayville and is currently being utilized for an EMT class at Mayville State University. Sixteen students are enrolled in the EMT class; many of these students will graduate with a degree in elementary education. Combining the EMT education with their elementary education, affords an opportunity to provide EMT services in the rural communities where they will also be educators, providing an invaluable resource to their schools as well as their health care community. The simulation health care education will also be used in other communities to provide CPR training to citizens of all ages."

The Eastern ND AEHC and the Otto Bremer Foundation will collaborate with others in developing interprofessional training opportunities involving primary care residents, physician assistants, nurse practitioners, dentists, nurses, pharmacy, public health, and other allied health programs. The Eastern ND AHEC was recently awarded a \$98,000 grant by The Bremer Foundation to establish a model interprofessional clinic experience in Carrington, ND. This rural experience offers the interprofessional health care students, rural clinical experiences, collaboration on community public health initiative, and immersion in rural community dynamics resulting in recruitment opportunities and improving quality health care.




Through these rural clinical experiences, research and studies, have shown that the participating students have a one and a half to two times more tendency to seek rural practice opportunities.

I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Sincerely,

Bill Krivarchka, Director
Eastern ND AHEC



**ND AHEC SUSTAINABILITY
HB1211**

AHEC Grant Years 5-9	Year 5 2012-2013			Year 6 2013-2014			Year 7 2014-2015			Year 8 2015-2016			Year 9 2016-2017		
	Program	Eastern	Western	Program	Eastern	Western	Program	Eastern	Western	Program	Eastern	Western	Program	Eastern	Western
Proposed Budget	103,264	299,000	273,139	125,000	307,970	281,333	128,750	317,209	289,773	132,613	326,725	298,466	136,591	336,527	307,420
Personnel	71,693	221,532	204,574	87,500	227,898	211,000	90,125	234,735	217,330	92,829	241,777	223,850	95,614	249,030	230,565
Operating	31,571	77,468	68,565	37,500	80,072	70,333	38,625	82,474	72,443	39,784	84,948	74,616	40,977	87,497	76,855
Federal AHEC Funding	103,264	154,896	154,896	103,264	154,896	154,896	88,000	76,500	154,896	51,000	76,500	76,500	51,000	76,500	76,500
Additional Funding	0	143,725	92,609	0	22,200	8,000	0	31,000	16,500	0	0	0	0	0	0
HPOG	0	13,800	0	0	14,200	0	0	14,500	0	0	0	0	0	0	0
Bremer Foundation	0	97,000	0	0	0	0	0	0	0	0	0	0	0	0	0
UND Cash Match	0	0	0	0	8,000	8,000	0	16,500	16,500	0	0	0	0	0	0
Carry-Forward	0	32,925	92,609	0	0	0	0	0	0	0	0	0	0	0	0
Budget Short	0	379	25,634	21,736	130,874	118,437	40,750	209,709	118,377	81,613	250,225	221,966	85,591	260,027	230,920

Budget Shortfall	639,883
63rd Bienium Request	600,000

AHEC grant year cycle is September 1st - August 31st.

NOTE: In the grant years 2012/2013 was decreased from \$187,500 to 154,896. We are able to request the full amount of funding, however it is very likely that federal funding is expected to decrease. For example, 2012-2013 \$187,500/AHEC reg. center was requested; award was reduced by \$32,604 resulting in \$154,896/AHEC.

For More Information Contact:

Bill Krivarchka, DDS, Director, Eastern ND AHEC, 701-788-4477, bill@ndahec.org

Denise Andress, RN, Director, Western ND AHEC, 701-637-0178, denise@ndahec.org

Lynette Dickson, MS, RD, LRD, Program Director, AHEC Program Office, lynette.dickson@med.und.edu

March 18, 2013

Christopher Schauer, PhD
Chairman of Board, Western AHEC
PO Box 205
Hettinger, ND 58639

Human Resources Committee Members:

Madam Chairman and members of the committee, my name is Christopher Schauer.

I am here today to urge your support for HB 1211, an appropriations bill for the purpose of supporting the North Dakota Area Health Education Center (AHEC) Program. The AHEC is a statewide organization that assists in the recruitment, distribution, supply, and development of quality personnel who provide health services in rural communities in North Dakota.

As the Chairman of the Board for the Western AHEC and a founding board member, I have witnessed the evolution of the ND AHEC, both at the regional and state level. The ND AHEC was created initially with federal funding and has been supported with additional grant funds. Legislated appropriations are being sought at this time to support the ongoing efforts of the North Dakota AHEC, providing stability to a program that is vital to the state. The work of the AHEC addresses a fundamental quality of life issue: health care in rural communities. Specifically in western ND, the AHEC can provide numerous resources to assist the medical community in servicing the needs of our rural agricultural population, as well as providing resources to the Oil Patch as it struggles to maintain quality and timely health care, particularly in the smaller communities that may not have competitive salaries and rely on volunteers for much of their emergency health care. Assisting in recruiting new health care providers, from high school students becoming EMT's and serving on their local volunteer services, to recruiting potential doctors, nurses, dentists, and other health care providers to serve our rural communities, is the vital mission that is not addressed adequately and that AHEC's can assist in. Additionally, providing new experiences for potential ND residents through clinical rotations, and providing continuing education opportunities to services that cannot provide their own is a service that AHEC can provide. As one example, our rural ambulance services (which I serve on as an EMT on as well as squad leader) do not have the resources in place to address these issues, as 90-95% of rural emergency personnel in ND are volunteers and simply do not have the time to adequately recruit new members and educate their current members. However, as a lifelong ND resident, I believe that if we can recruit our youth to the healthcare community, either as a volunteer or employee, that once they get here they will stay here! But we need extra time and labor to accomplish this mission.

In summary, the ND AHEC is committed to providing K-16 programs to increase health career awareness, assists health profession students with rural clinical experience placements, and provides continuing education for a variety of rural health care providers. All of these efforts result in maintaining support and sustainability of quality healthcare in our rural communities. I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Sincerely,

Christopher Schauer, PhD
Chairman of Board, Western AHEC

5
March 18, 2013

Mary Anne Marsh, PhD, RN
Chair, Department of Nursing
Dickinson State University
291 Campus Drive
Dickinson, ND 58601-4896

Madam Chairman and members of the committee, my name is Mary Anne Marsh.

I am submitting written testimony to urge your support for HB 1211, an appropriations bill for the purpose of supporting the North Dakota Area Health Education Center (AHEC) Program. The AHEC is a statewide organization that assists in the recruitment, distribution, supply, and development of quality personnel who provide health services in rural communities in North Dakota.

The ND AHEC was created initially with federal funding and has been supported with additional grant funds. Legislated appropriations are being sought at this time to support the ongoing efforts of the North Dakota AHEC. Dickinson State University (DSU) and St. Joseph's Hospital and Health Center in Dickinson have received support from AHEC. The DSU Department of Nursing has used the Noelle birthing simulator to enhance teaching and learning for nursing students for the past two years – which allows students to safely practice nursing care during labor and delivery prior to hospital-based clinicals. The Noelle simulator was also used by the hospital's physician and nursing staff to review care of patients during emergent labor and delivery scenarios. In addition, AHEC has also supported the Department's "Nurse Camp" by providing monetary, equipment, and staff resources. Nurse Camp is held annually to increase awareness of the multitude of career options in the nursing profession, and entice fifth and sixth graders in southwest ND to consider nursing in their future!

I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Sincerely,

Mary Anne Marsh, PhD, RN
Chair, Department of Nursing
Dickinson State University

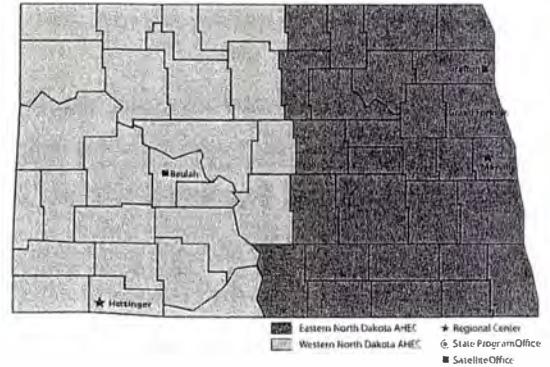
North Dakota Area Health Education Center

Mayville • Hettinger

A H E C

Stands for Jobs

NORTH DAKOTA AHEC



Our mission

We focus on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply, and quality of health care professionals.

Why AHEC?

- North Dakota AHEC links health career awareness to our rural guidance counselors to assist in health career counseling.
- By encouraging students to choose careers health care, we believe they are more likely to pursue those careers.
- Many health care careers require higher education. AHEC assists students as a resource for health career educational planning as a pipeline tool to higher education.
- Misperceptions about rural practice need to be eliminated; if students believe rural practice is not favorable they are not likely to choose to work in rural areas.
- AHEC lessens rural health professionals isolation, either socially or professionally, by facilitating community involvement and multidisciplinary professional education.

The need for health care professionals

- 91% of North Dakota counties have less than the national average of physicians to population.
- 89% of North Dakota counties are federally designated as health professional shortage areas (HPSA).
- 47% of North Dakota counties have less than the national average of primary care providers to population. There will a shortage of 200 rural family practice physicians by 2020.
- 32% of North Dakota counties have fewer nurses than the national average. 50% of rural nurses will retire in the next five years.
- 90-95% of rural emergency personnel in North Dakota are volunteers.

We are unique

- We support all individuals in the workforce pipeline: from students in grade school to rural professionals near retirement.
- We promote rural health care and rural health care work force development.
- Located in Hettinger, Mayville, Grafton, and Beulah, we support rural, from rural.



We address workforce shortages

We connect students to careers, professionals to communities, and communities to better health.

Connecting Students to Health Careers

- Introduce K-16 students to a variety of health careers through school visits, career fairs, and HOSA – Future Health Professionals.
- Increase the number of rural students into health careers.
- Provide education and training opportunities using human simulators.

Connecting Health Professionals to Communities

- Provide interdisciplinary clinical experience in rural settings for health professions students.
- Identify communities interested in hosting health care professions students for rural rotations.
- Educate students on scholarship and loan repayment opportunities.

Connecting Communities to Better Health

- Provide contact hours for low-cost, high quality continuing education programs.
- Support community education programs.
- Facilitate learning opportunities for health professionals and community partners through AgriSafe education, simulation, and mental training for health care professionals.

Our funding

We are supported through federal dollars with a Health Services Resources Administration (HRSA) grant from the Bureau of Health Professions which requires a 1:1 federal/state match. In addition, we have an Otto Bremer grant to develop our rural interdisciplinary educational opportunities for health professions students.

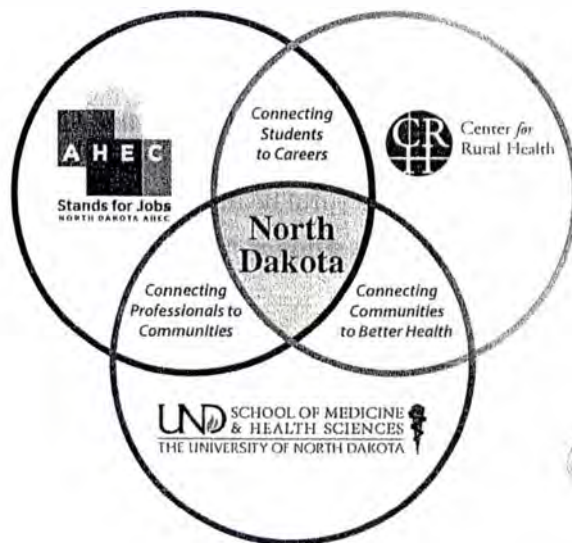
Additional funding

Funding will allow us to develop and expand projects to support rural health projects according to our mission.

- We have reached over 10,500 participants and every county in North Dakota.
- We have given \$28,333 toward the facilitation of health occupation activities for over 5,500 students.
- We have provided \$4,578 to assist 25 students in completing clinical rotations.
- We have contributed over \$100,000 toward continuing education for over 5,000 health care professionals.
- We developed 25 new student rotations in nursing, medicine, physical therapy across the state.
- We partnered with the UND College of Nursing and the UND Simulation Training Center to establish the North Dakota Simulation Alliance to provide simulation training for health care facilities, providers, and educational institutions throughout the state.

Our key partners

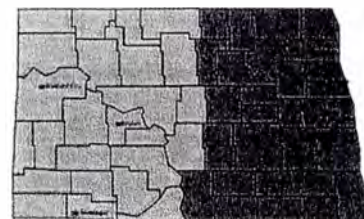
North Dakota Area Health Education Center, along with the Center for Rural Health and the UND School of Medicine and Health Sciences, understand the importance of rural health care and work together so we can do more with our resources through dollars and personnel. Additionally, Mayville State University serves as the fiscal host for both the Mayville and Hettinger regional centers.





Stands for Jobs
NORTH DAKOTA AHEC

North Dakota Area Health Education Center Mayville • Hettinger



5

Our Core Mission

North Dakota AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply, and quality of health care professionals.

The North Dakota AHEC is a pivotal vehicle to meet the state's health care needs through collaboration

Current ND Workforce

- 91% of North Dakota counties have less than the national average of physicians to population
- 89% of North Dakota counties are federally designated as health professional shortage areas (HPSA)
- 47% of North Dakota counties have less than the national average of primary care providers to population. There will a shortage of 200 rural family practice physicians by 2020
- 32% of North Dakota counties have fewer nurses than the national average. 50% of rural nurses will retire in the next 5 years

Impact

- Healthcare, behind government, is the Number 2 employer in ND
- Agriculture is the Number 1 economic driver in ND, with the energy segment following a distant 2nd
- Cardiovascular disease, cancer, and chronic obstructive pulmonary disorder are the chronic diseases that comprise 49% of the mortality in ND
- Ambulance response time has increased 30-60 minutes in some areas of ND
- 90-95% of rural emergency personnel in ND are volunteers
- ND is third in the nation among the states for multiple-job holders contributing to rural stress

ND AHEC Budget Request

ND AHEC BUDGET PROPOSAL (SUSTAINABILITY)								
Calendar	2013-2014		2014-2015		2015-2016		2016-2017	
Years	Eastern	Western	Eastern	Western	Eastern	Western	Eastern	Western
Projected Salary/Benefits	221,520	243,511	227,970	250,604	234,424	257,696	240,874	264,789
Annual Proposed Full Budget	307,000	323,629	314,000	330,829	321,000	338,029	328,000	345,229
FEDERAL FUNDING								
HRSA/AHEC grant funding	187,500	187,500	76,500	187,500	76,500	76,500	76,500	76,500
TOTAL FEDERAL FUNDING	187,500	187,500	76,500	187,500	76,500	76,500	76,500	76,500
Additional Funding Support Needed	119,500	136,129	237,500	143,329	244,500	261,529	251,500	268,729

Budget Restrictions:

- Decrease the amount of funding to rural communities for health care immersion events
- Decrease amount of funding for all the continuing education credits to health care providers
- Decrease funds to rural communities providing health care services

The End Result...

SAFER Rural Areas • SUCCESSFUL Healthcare Organizations • HEALTHIER communities • EDUCATED Healthcare Providers





Stands for Jobs
NORTH DAKOTA AHEC

**North Dakota Area Health
Education Center**
Mayville • Hettinger



Growing Rural ND Workforce

K-16 Activities

North Dakota AHEC Recruits students and individuals from rural and underserved areas of North Dakota into health professions, utilizing the health care workforce pipeline. Career Awareness events:

School visits

Community organizations

Career fairs

Health Occupation Student Association (HOSA)

Clinical Rotations

North Dakota AHEC Develops and implements strategies to foster and provide health professions students community-based training in rural and underserved areas.

Identify student placements

Provide information about loan repayment programs

Promotes rural training experience for health care profession students

Continuing Education

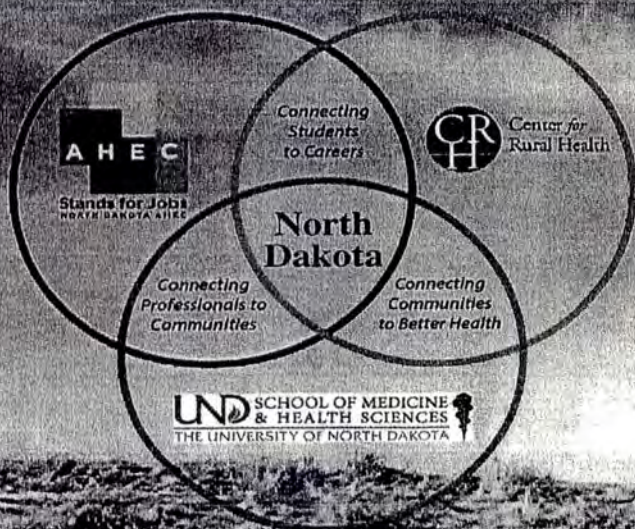
North Dakota AHEC Retains current health care professionals by promoting continuing education opportunities in rural and underserved areas.

ND AHEC simulators for use in rural continuing education opportunities

AgriSafe-Education and training to health care providers in agricultural communities

Veteran's mental health program for rural communities and health care providers

We will strive to be innovative, adaptive, and willing to take risks to create new ways of thinking, learning and addressing the health care workforce issues for North Dakota rural communities.



**Partners in
Collaboration**



5

March 18, 2013

Katie Thompson, Education Coordinator
Eastern ND AHEC
624 Hill Avenue
Grafton, ND 58237


Madam Chairman and members of this committee, my name is Katie Thompson. I am here to urge your support for HB 1211.

I have been the Education Coordinator for the Eastern North Dakota Area Health Education Center (EAHEC) since AHEC began in the spring of 2009. In my position with the Eastern AHEC, I have had the distinct pleasure of interacting with our future health professionals. Our tagline, "connecting students to careers, professionals to communities, and communities to better health," guides our AHEC activities.

My principal role is to interact with students, their parents, and educators to connect students to future health careers. The Eastern ND AHEC has helped students and their parents explore health care career opportunities in North Dakota, through programs like Marketplace for Kids and Crash Course. For example, the ND AHEC had provided health career awareness at all of the Marketplace for Kids events. Do you think you could do surgery on jello with implanted string, buttons, paper clips, sequins...these may be our next surgeons! We share up-to-date workforce and labor market information for health careers with instructors, guidance and career counselors, parents and students. Crash Course is a partnership with Bank of ND, Youth Forward, RUReadyND.com, and ND AHEC to educate participants on the need for rural health care professionals, scholarship and loan repayment programs, and preparatory classes to be completed in high school. We are chartering the North Dakota chapter of HOSA-Future Health Professionals, a student organization exclusive to students interested in health care careers, learn skills necessary in the various fields, and prepare for a career in health care. Integration of HOSA into the classroom is a large emphasis, which greatly benefits the students and the health career programs offered by Career and Technology Education.

AHEC connects current health care professionals to students and citizens in rural communities. Medical students, nursing students, and other health care students volunteer to teach younger students about health care in hands-on activity sessions. For example, Center for Rural Health/AHEC Scrubs Camps/Academy, and Project Succeed 2020, these events provide increased opportunities for health care career awareness for rural students. These activities help the younger students make better informed decisions as they prepare for post-secondary education, training, or employment options.

North Dakota's rural communities attract medical, nursing students, and other health care disciplines to work in North Dakota. Our vision is to "grow our own," then to recruit and retain professionals in our rural medical facilities. Our rural communities suffer tremendously when health care disappears from critical access hospitals or long-term care facilities. Maintaining access to care is our top priority, and the first step to increase awareness of the wide opportunities for health care professional in North Dakota.



I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Partnerships:

- Marketplace for Kids
- Crash Course
- Partners in Nursing Summer Nurse Camp Adventure
- Center for Rural Health Scrubs Camps
- Center for Rural Health Scrubs Academy
- Center for Rural Health HIPAA training
- Hands-on activities with youth service organizations
- Facilitation of simulation activities with health career instructors
- Project Succeed 2020

Sincerely,



Katie Thompson
Eastern ND AHEC Education Coordinator



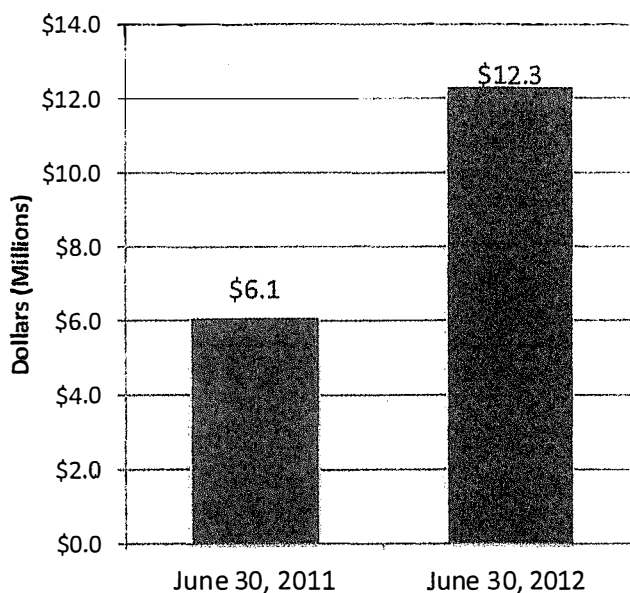
Nursing Facility Workforce

Nursing Facility Workforce

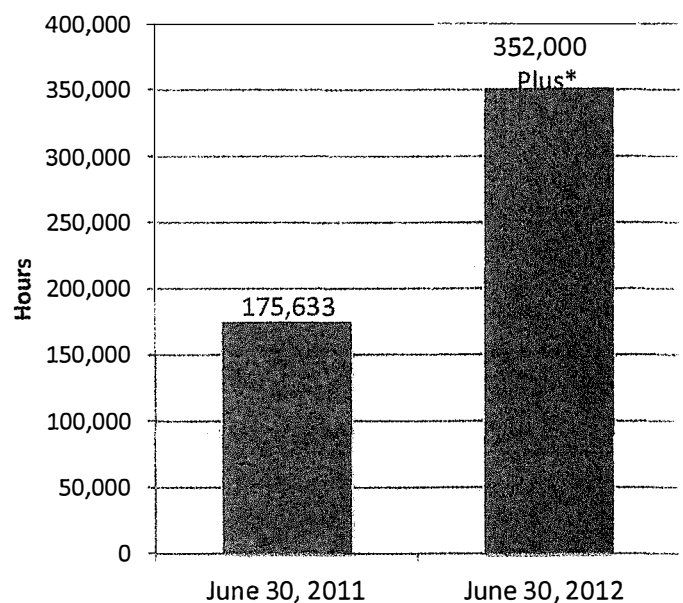
- Top issue facing nursing facilities is staffing.
- Number of individuals employed in 68 nursing facilities was 9,267. Based upon this ratio, total people employed by 83 nursing facilities are estimated to be 11,311.
- July 1, 2012, sixty-three nursing facilities reported 751 vacant positions.
- Nine of sixty-six reporting nursing facilities stopped admissions in 2012 because of a lack of staff.
- Sixty-six percent of nursing facilities, 2 out of 3 facilities, used contract agency staff in 2012.
- Contract nursing hours and dollars more than doubled in twelve months.
- The 2012 average salary increase provided was 2.9%, however one-third of nursing facilities also provided an extra enhancement to retain their employees. Enhancements were as high as \$5 per hour to 20% increases.

Contract Nursing

Dollars Spent



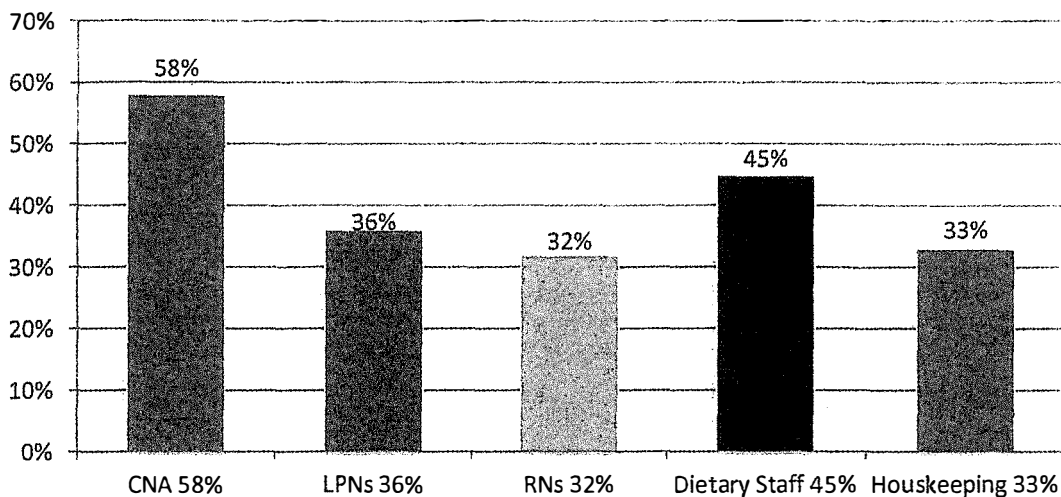
Contracted Hours



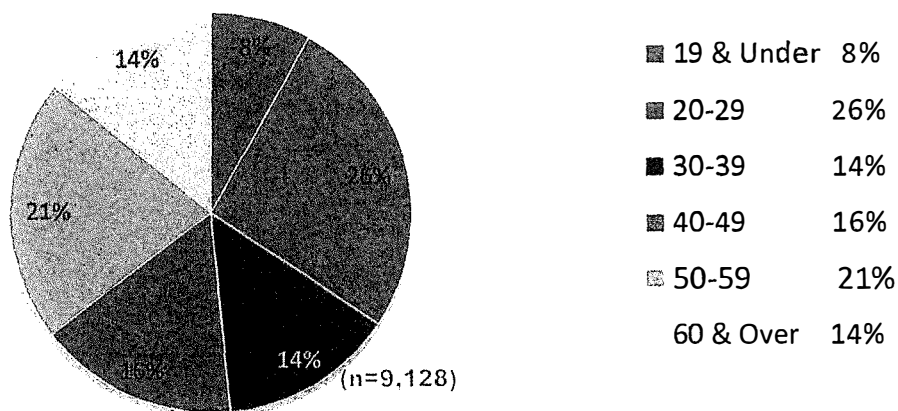
*Not all facilities submitted hours

Nursing Facility Workforce (continued)


2012 Staff Turnover



Age of Nursing Facility Workforce



- Turnover and age of our workforce will create an unprecedented demand for employees in the next 10 years.
- The youngest employee is 14 and the oldest employee is 99.
- Over one-third of our workforce is age 50 and older.
- North Dakota will need 1,880 additional nurses by 2018.


**North Dakota
Long Term Care**
 ASSOCIATION
 1900 N 11th St (701) 222.0660
 Bismarck, ND 58501 www.ndltca.org

HB 1211 Testimony

March 18, 2013

Good morning, Madam Chairman and members of the Committee.

I am Representative Alan Fehr, District 36.

I am here to testify in support of HB 1211 for an appropriation to address health care workforce needs in rural areas.

I would like to briefly share my experiences working on a professional education project.

I'm a clinical psychologist and have spent the past 30 years working in ND. I'm also the Director of Psychological Health for the ND National Guard.

For the past couple years, I have been involved in developing a project with the help of several partners, including the Area Health Education Centers, the Dept. of Human Services, UND School of Medicine, UND Social Work Dept., UND Counseling Psychology Dept. and others.

This project is called the Military Culture Certificate Program, the purpose of which is to help professionals understand our service members, veterans, and family members. The program provides continuing education around the state to any professional who works with the military, including counselors, medical personnel, clergy, attorneys, emergency workers, and others who may be interested.

As a trainer in this program, there is no cost for my time. Our biggest expense is to pay the fees to licensing boards and entities that authorize continuing education credits. By working together with project partners, we will be able to provide continuing education to professionals and improve their ability to work with the military population.

This is one project that will benefit from this appropriation. I am asking for your support of HB 1211 and I would welcome your questions.

5

March 18, 2013

Kelsey J. Erickson, RN
1949 Sheyenne St., Unit D
West Fargo, ND 58078

Madam Chairman, and members of the committee, my name is Kelsey Erickson.

I am submitting written testimony to urge your support for House Bill 1211 for these reasons:

Three years ago, the summer before my last semester of nursing school at the University of North Dakota, I felt like something was missing from my educational experience. I finally figured out what was missing. I was lucky enough to be offered the opportunity to further my nursing education by participating in a nursing co-op at Sanford Medical Center Mayville. After already four semesters of clinicals under my belt, it was hard to believe that no attention was directed towards rural nursing. Coming from a small town I was very interested and excited to have the opportunity to expand my learning. This experience would not have been possible if it hadn't been provided by Eastern ND AHEC. The Eastern ND AHEC provided me with living expenses and also helped provide the hospital with funds to give me this experience for the summer during my co-op. During this experience I was able to see how a hospital functions in a rural setting. I was able to be in the role of a real rural nurse under the supervision of a Registered nurse. During this summer I noticed a definite increase in my critical thinking, communication and interdisciplinary skills. I will never forget those wonderful people who took the time out of day to help me learn and grown as a person and a student. Because of this experience I find I am a better nurse today. I am so thankful that the Eastern ND AHEC was there to help provide me with this amazing opportunity.

I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Sincerely,

Kelsey Erickson, RN

March 18, 2013

Mayville, ND

Members of the legislature;

I am a recent graduate (May, 2012) of the Dakota Nursing Program (through Lake Region College) at the Mayville site. I was among the first class of nursing students to graduate from this site. As a new site, Mayville was initially not fully equipped to facilitate the most up to date learning environment. Equipment and supplies were often brought in as the need presented. At times we had to seek support from outside sources. That is where AHEC stepped in. AHEC provided us with the use of their adult simulator and a trained representative. With the use of the simulator nursing students were able to practice critical thinking skills for trauma and cardiac scenarios in a safe environment. These skills were invaluable to me as I now work at Sanford Mayville Hospital, a rural critical access hospital. I provide bedside care to patients admitted to the facility as well as care to patients seen through the emergency room. Having practiced these skills with the simulator, aides me in providing rapid, quality care to my patients.

AHEC was also fundamental in covering expenses, for a three day mental health clinical in Jamestown, for Mayville nursing students. AHEC provided us with funds to cover motel and food expenses. This eased the burden of an already stretched budget most students deal with and allowed us to focus more fully on the clinical experience.

Programs like AHEC are important in sustaining continuing education for rural health care personnel. Knowing there is support and possible assistance with expenses is an encouragement to those who wish to enter or enhance their skills in the healthcare field and remain to practice in a rural setting where they are needed.

I personally am grateful for the opportunity to speak up for AHEC and thank them for the assistance they have provided me throughout my nursing education. I hope they will be able to continue on with what I believe to be a valuable resource and support in rural healthcare.

Sincerely,

Luanne Scallon, RN, ADN

March 18, 2013

Julie Traynor, RN, MSN
Director, Dakota Nursing Program

Madam Chairman and members of the committee, my name is Julie Traynor.

I am submitting written testimony in favor of HB 1211, an appropriations bill for the purpose of supporting the North Dakota Area Health Education Center (AHEC) Program. This organization has assisted the Dakota Nursing Program in accessing simulation equipment for student in Mayville, Minot, Williston and New Town during the past 2 years. These sites did not have the necessary equipment to do the simulation activities. AHEC stepped in and offered not only the use of the simulators but also the expertise of AHEC personnel in running the simulators so the nursing faculty could facilitate the learning with students. These are the students who are the future nurses working in health care facilities in rural communities in the state of North Dakota.

AHEC has collaborated with the Dakota Nursing Program to implement the program into the Mayville area. There is a great need for nursing not only in rural ND but also in the more populated Red River Valley cities. AHEC saw a need and got the right people together to develop the program.

AHEC representatives collaborate with the gerontology initiative in ND as active members of the committees. They bring networking, marketing and education expertise to the table. AHEC staff have presented at many nursing and medical conferences and meetings throughout the state since they became active in ND.

I see AHEC involved in Scrubs Camps across the state in the towns served by the Dakota Nursing Program. They are committed to increasing health career awareness in our elementary and high school students. They have the staff with the knowledge and connections to be able to be a legitimate resource.

Our rural nursing students have been supported with AHEC funds as they travel to clinical in different locations. For example, all of our PN students travel to Jamestown for a 3 day clinical at the ND State Hospital. They stay in a hotel and have other travel expenses. AHEC has been able to assist them and ease the heavy financial burden that they carry.

We are looking forward to collaborating with AHEC in the future to create interdisciplinary opportunities for our students. The Institute of Medicine encourages nursing students to work with other healthcare students to develop that teamwork mentality that will help them to be safer practitioners in the future.

I appreciate your support of how AHEC helps us to "Grow our own nurses" in North Dakota and hope you will vote yes on HB 1211. Thank you.

Sincerely,

Julie Traynor, RN, MSN
Director of Dakota Nursing Program

COLLEGE OF NURSING
NURSING BUILDING
430 OXFORD STREET STOP 9025
GRAND FORKS ND 58202-9025
(701) 777-4174
FAX (701) 777-4096

March 12, 2013

Appropriations Committee,
North Dakota State Legislature
North Dakota State Capitol
600 E Boulevard Ave
Bismarck, ND, 58505

Dear Mr. or Madam Chairman and the members of the Committee,

I am pleased to be able to provide this written testimony in relation to HB 1211.

HB 1211 provides appropriated moneys to address important workforce needs in relation to health services in rural areas of our state, through the work of the North Dakota Area Health Education Center (AHEC). As a collaborating partner on the North Dakota AHEC, the University of North Dakota College of Nursing and Professional Disciplines (CNPD) has had the opportunity to work closely with both our Western and Eastern regional AHEC offices. The AHEC's goal of recruitment and retention of health care professionals into rural areas of our state is highly relevant to the health care needs of our state and is also consistent with the priorities of the CNPD at UND. The state Nursing Needs Study indicates that nurses in North Dakota are maldistributed, with rural communities feeling the greatest impact of the nursing shortage.

The CNPD faculty is currently revising all of our nursing curricula, at the undergraduate, masters, and doctoral levels, in order to increase the number of rural clinical experiences that our nursing students will receive. We know that students are not apt to choose careers in rural communities if they have not been exposed to rural clinical placements as students. The regional AHEC offices will be instrumental in helping us secure quality rural placements for our students as we move forward with expanded rural opportunities. The staff in the regional AHEC offices are in constant communication with their rural health care agencies, and will act as a liaison in developing further rural academic-community partnerships. We have already begun working with the regional AHEC offices to develop a host family model, in which students would be placed with host families while they are at a rural clinical experience. We envision that rural families will be able to act as ambassadors for their communities, and help students integrate into the community and begin to understand the rich opportunities that are possible as a nurse (or other health professional) practicing in a rural area. We believe that all of our nursing students, from pre-licensure registered nurses, to advance practice nurses (such as nurse practitioners, nurse anesthetists, and family practice nurses) to nurse scientists at the PhD level. Students will all have a more robust education by understanding the health care

6

needs of rural populations, encounter unique experiences about rural health care delivery, and have the opportunity to learn through first hand experiences in rural communities.

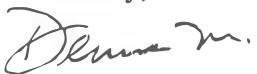
The regional AHEC offices have already had an active role in assisting the CNPD with expanding our clinical opportunities in rural communities for our nursing students. AHEC has supported our summer nursing co-op opportunities, by providing financial support to rural health care agencies, who would not have been able to hire a nursing student without the support of AHEC. Additionally, students, who often cannot afford to commute to rural communities or the extra housing costs associated with living for a summer in a rural community, have received a small amount of financial support for these costs from our regional AHEC offices. Students have reported very positive experiences during these summer co-op opportunities, and some have gone on to work in those same rural agencies.

The College of Nursing and Professional Disciplines is an interdisciplinary college, as we are home to not only nursing students, but also students in nutrition, dietetics, and social work. One of AHEC's goals is to develop, implement, and coordinate interdisciplinary clinical experiences throughout rural communities in our state. The need for education in effective interdisciplinary communication is now viewed as an essential competence to produce health professionals who provide quality and safe healthcare. We embrace AHEC's efforts to bring more interdisciplinary clinical experiences for the CNPD to collaborate with other health professional students at the University of North Dakota, as well as other academic institutions throughout the state.

In summary, the College of Nursing and Professional Disciplines at the University of North Dakota has been a collaborating partner in the development phases of the ND AHEC. We have continued to be a partner as the AHEC is moving forward in implementing programs to address the recruitment, distribution, supply, quality, and efficiency needs of health care providers in rural areas. The AHEC will play an instrumental role in assisting us to expand the opportunities that our nursing, nutrition, dietetics, and social work students receive for clinical experiences in rural areas.

Thank you for the opportunity to provide this written testimony in relation to HB 1211.

Sincerely,



Denise Korniewicz, PhD, RN, FAAN

Dean

College of Nursing and Professional Disciplines
University of North Dakota

5
March 18, 2013

Stefan Hofer, NREMT-P, CCP
Paramedic/President,
West Traill Ambulance Service
42 6th Avenue SE
Mayville, ND 58257

Madam Chairman and member of the committee, my name is Stefan Hofer.

I am submitting written testimony to urge your support for HB 1211, an appropriations bill for the purpose of supporting the North Dakota Area Health Education Center (AHEC) Program.

West Traill Ambulance collaborated with the Eastern ND AHEC on the purchase of MegaCode Kelly Advanced, including the SimPad System. This simulator has been used in numerous emergency medicine continuing education opportunities at Sanford Medical Center Mayville and is currently being utilized for an EMT class at Mayville State University. Sixteen students are enrolled in the EMT class; many of these students will graduate with a degree in elementary education. Combining the EMT education with their elementary education, affords an opportunity to provide EMT services in the rural communities where they will also be educators, providing an invaluable resource to their schools as well as their health care community. The simulation health care education will also be used in other communities to provide CPR training to citizens of all ages.

I appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you.

Sincerely,

Stefan Hofer, NREMT-P, CCP
Paramedic

Lee, Judy E.

From: leahec@polarcomm.com
Sent: Tuesday, March 19, 2013 8:20 AM
Subject: Lee, Judy E.; Larsen, Oley L.; Anderson, Jr., Howard C.; Dever, Dick D.; Axness, Tyler
HB1211

Greetings Senators,

On behalf of the ND Area Health Education Center (AHEC), thank you for the opportunity to present the "needs" and the mission of our program to support rural healthcare in North Dakota. Your sensitivity to the issue, candid discussion and pertinent questions are appreciated as we resolve to impact with positive outcomes:

- Dental needs of Carrington
- CNA, LPN RNs in long term care facilities in New Salem
- Support Critical Access Hospitals in Stanley, Kenmare, Garrison
- Continuing Education for EMS/EMT Heart of America Medical Center, Rugby
- Support Science, Technology, Engineering, Mathematics (STEM) - grades 5-12, West Fargo
- Rural clinical nursing rotation experiences in Mayville and Hillsboro

We appreciate your support of sustainable rural healthcare and hope you will continue your support by voting yes on HB 1211. Thank you!

Dr. Bill E. Krivarchka, Director
Eastern ND AHEC
42 6th Ave SE
Mayville, ND 58257
701-788-4477
beahec@polarcomm.com
ndahec.org



Stands for Jobs
NORTH DAKOTA AHEC

Connecting students to careers, professionals to communities, communi



Stands for Jobs

EASTERN NORTH DAKOTA AHEC

42 6th Avenue SE Mayville 58257 • 701-788-4477

eastern.ndahec.org

LETTERS OF SUPPORT

Carrington Health Center
North Dakota Rural Health Association
Western North Dakota Area Health Education Center
West Traill Ambulance
West River Ambulance Service
National Area Health Education Center Organization
North Dakota Hospital Association
North Dakota Long Term Care Association
North Dakota Center for Nursing
Mayville State University
Eastern North Dakota Area Health Education Center
Rural Behavioral Network
Sanford Medical Center Mayville
North Dakota Department of Health, Cancer Coalition
Langdon School
City County Health District
Walsh County Health District
1st Care Health Center

Carrington Health Center

January 28, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dear Ms. Dickson:

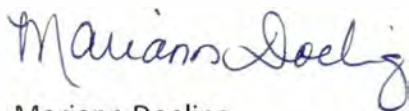
On behalf of Carrington Health Center we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

Carrington Health Center just finished a very successful Scrubs Camp that has been the cause of excitement among our young students who are now interested in health care careers.

Carrington Health Center is also working closely with ND AHEC as we are excited to be part of a new opportunity to train more higher education level students at one time over a period of months as they pursue a variety of health care fields across the continuum of care.

In closing, we would like to say that Carrington Health Center is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,



Mariann Doeling
President
Carrington Health Center



Jennifer Whitman

Wellness and Disease Management Manager
Carrington Health Center



Nicole Threadgold
Foundation Development Officer
Carrington Health Center



January 28, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress, RN
Western ND AHEC Director
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

I am writing this letter on behalf of the North Dakota Rural Health Association (NDRHA) in support of the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply, and quality health care professionals.

As an advocate for the health and wellness of those who are proud to call rural North Dakota home, the North Dakota Rural Health Association values the import work of the North Dakota AHEC. Helping to insure the availability of an adequate workforce for our health care providers and exposing are youth to potential careers in health related vocations is something the North Dakota AHEC is dedicated to and we are pleased to support in whatever way possible.

In closing, we would like to say that the North Dakota Rural Health Association is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities, and quality health for North Dakota. Thank you.

Best regards,

Darrold Bertsch, President
North Dakota Rural Health Association



Stands for Jobs

WESTERN NORTH DAKOTA AHEC

PO Box 615 109 South Main Hettinger, ND 58639 • 701.637.0177

western.ndahec.org

1/28/2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress, RN
Western ND AHEC Director
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka and Mrs. Andress,

On behalf of Western ND AHEC board of directors, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

The Western ND AHEC board has been integral in the establishment of the Western ND AHEC from the beginning of the program. We have shepherded it through its establishment to where it is today. At this point, we believe it is the appropriate time to pursue state funding to support this program to provide stability in programming heading into the future. In western ND, the AHEC can provide numerous resources to assist the medical community in servicing the needs of our rural agricultural population, as well as providing resources to the Oil Patch as it struggles to maintain health care, particularly in the smaller communities. Assisting in recruiting new health care providers, from high school students becoming EMTs to recruiting potential doctors and nurses, and bringing cutting edge technology to rural providers to assist in continuing education are just some of the potential benefits from having a stable AHEC in ND.

In closing, we would like to say that Western ND AHEC board is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Christopher Schauer
Western ND AHEC board chairman



January 17, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

On behalf of West Traill Ambulance Service, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

West Traill Ambulance collaborated with NDAHEC on the purchase of MegaCode Kelly Advanced, including the SimPad System. This simulator has been used in numerous emergency medicine continuing education opportunities at Sanford Medical Center Mayville and is currently being utilized for an EMT class at Mayville State University. It will also be used in other communities to provide CPR training to citizens of all ages.

In closing, we would like to say that West Traill Ambulance Service is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you

Best regards,

A handwritten signature in dark ink, appearing to read "Stefan Hofer", is written over a horizontal line.

Stefan Hofer, NREMT-P, CCP
Paramedic/President, West Traill Ambulance Service

West River Ambulance Service

PO Box 205

Hettinger, ND 58639

1/28/2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress, RN
Western ND AHEC Director
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka and Mrs. Andress,

On behalf of the West River Ambulance Service volunteers, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

As a rural volunteer ambulance service, our largest issues are recruiting new members and providing continuation education to our ambulance squad. The AHEC can provide assistance in these areas through recruitment of high school students into the medical field utilizing Emergency Medical Services as a learning experience for future medical careers, and through assisting in continuing education. For a volunteer ambulance service time is our most precious commodity; the AHEC provides the resources to utilize our time more efficiently, assistance in recruiting new members and technology to make providing continuing education training on par with our urban counterparts.

In closing, we would like to say that West River Ambulance Service is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,



Christopher Schauer
Volunteer Squad Leader, West River Ambulance Service



Stands for Jobs

NATIONAL AHEC ORGANIZATION

Headquarters Office
7044 S. 13th Street
Oak Creek, WI 53154
Tel: (414) 908-4953
(888) 412-7424
Fax: (414) 768-8001
www.nationalahec.org
info@nationalahec.org

The National AHEC Organization supports and advances the AHEC Network to improve health by leading the nation in the recruitment, training and retention of a diverse health workforce for underserved communities.

January 24, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
109 So. Main St
42 6th Ave. SE
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

On behalf of the National AHEC Organization (NAO), I am writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

The National AHEC Organization is the national association that supports and advances the AHEC Network to improve health by leading the nation in the recruitment, training and retention of a diverse health workforce for underserved communities, which we do by supporting AHECs throughout the country in a great variety of ways.

Our collective vision is that the AHEC network becomes the national leader in developing a highly competent and diverse health care workforce for underserved populations. The North Dakota AHEC is a vital component of our national efforts in working to ensure access to quality health care, particularly primary and preventive care, by improving the supply and distribution of healthcare professionals through community/academic educational partnerships.

NAO is pleased to continue and build upon a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. I believe this support is extremely worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota.

Very best regards,

Robert M. Trachtenberg, MS
Executive Director
National AHEC Organization



North Dakota Hospital Association

Vision

The North Dakota Hospital Association will take an active leadership role in major Healthcare issues.

Mission

The North Dakota Hospital Association exists to advance the health status of persons served by the membership.

January 16, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

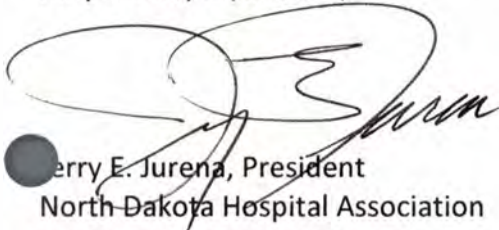
As President of the North Dakota Hospital Association (NDHA), I want to acknowledge my support of the Eastern and Western North Dakota Area Health Education Center (NDAHEC) Programs. The ND AHEC programs: Eastern and Western, focus on providing support across the health care workforce pipeline to address health care workforce shortages of quality health care professionals.

I am pleased to be a member and on the Board of ND AHEC. Many of the Hospitals across the state are struggling with shortages; ND AHEC is an example of people coming together to make a difference. The hospitals have been an active participant in the projects to involve high school students to become interested in medical careers. It continues to be a great partnership.

Again, I want to re-iterate that NDHA is proud to be in partnership with the North Dakota Area Health Education Programs to address a growing need for health care professionals. I believe this support is worthy and meets the needs of future health for North Dakota.

Thank you.

Respectfully Submitted,



Jerry E. Jurena, President
North Dakota Hospital Association

January 11, 2012

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

On behalf of North Dakota Long Term Care Association, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

Long term care facilities provide care for over 19,000 North Dakotans annually. Sufficient staffing is the number one concern facing facilities. Certified Nursing Assistant (CNAs) turnover is 58% and over one-third of staff is age 50 or older. We have worked collaboratively with ND AHEC for the past four years and see them as a leader in helping us solve our workforce crisis.

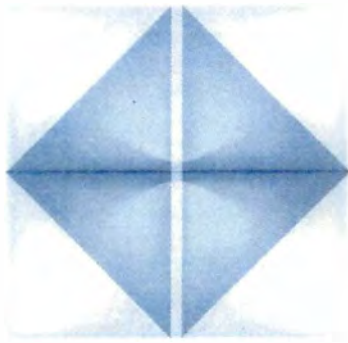
In closing, we would like to say that NDLTCA is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,



Shelly Peterson, *President*
North Dakota Long Term Care Association

SEP/pjt



North Dakota Center for Nursing

A unified voice for nursing excellence.

January 9, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health
UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center
Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress, RN
Western ND AHEC Director
P.O. Box 615
109 South Main Street
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka and Ms. Andress,

On behalf of North Dakota Center for Nursing, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC), the Eastern North Dakota Area Health Education Center (Eastern ND AHEC) and the Western Area Health Education Center (WAHEC). The ND AHEC/Eastern ND AHEC/Western AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

The North Dakota Center for Nursing proudly serves on the ND AHEC Program Office Advisory Board and the ND AHEC has membership on the ND Center for Nursing Board of Directors. Several of our initiatives are complementary and we are able to effectively leverage resources in order to ensure a quality health care workforce in North Dakota.

In closing, we would like to say that the North Dakota Center for Nursing is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center, the Eastern North Dakota Area Health Education Center and the Western Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Patricia Moulton, PhD
Executive Director
North Dakota Center for Nursing

Patricia Moulton, PhD Executive Director
701-852-1810
patricia.moulton@ndcenterfornursing.org



January 16, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
426th Ave.
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

On behalf of Mayville State University, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

Over the past few years (2010-2013), Mayville State University (MaSU) has been a strong supporter and collaborator with the ND AHEC/E AHEC by agreeing to be the Recipient to the Contractor (University of North Dakota) to assist the performance of the Eastern ND AHEC scope of work. In the fall 2012 MaSU agreed to a similar relationship for the Western ND AHEC. In addition Mayville State University has supported ND AHEC through partnering with K-12 health career fairs, establishment of the Dakota Nursing Program on the Mayville State University campus, and collaboration with MaSU STEM (Science, Technology, Engineering, Math) curriculum. Mayville State University also supports ND AHEC by being an Eastern AHEC and Western AHEC Advisory Board member.

In closing, we would like to say that Mayville State University is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Dr. Gary Hagen, President
Mayville State University

Dr. Keith Stenehjem, VP for Academic Affairs
Mayville State University



Stands for Jobs

EASTERN NORTH DAKOTA AHEC

42 6th Avenue SE Mayville 58257 • 701-788-4477

eastern.ndahec.org

January 18, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Dear Ms. Dickson and Dr. Krivarchka,

As Chairman of Eastern ND AHEC Advisory Board, I am writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

We have found that support afforded us through Eastern ND AHEC, such as the mobile training and support of rural EMS to our Eastern counties, shows how we are meeting some of the goals of Eastern ND AHEC in providing support for quality health care in rural areas.

In closing, I would like to say that Eastern ND AHEC Advisory Board is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Roger Baier
Chairman of Eastern ND AHEC Advisory Board
On behalf of Eastern ND AHEC Advisory Board



RBHN Mission: To improve access to **behavioral** healthcare and eliminate behavioral **health** disparities in rural and tribal communities.

**RBHN GOVERNANCE
COMMITTEE**

**Coal Country Community
Health Centers**

Essentia Health

**Mental Health America
of North Dakota**

MHA Nation

**North Dakota Area Health
Education Center**

**North Dakota Federation
of Families for Children's
Mental Health**

**Sakakawea Medical
Center**

January 21, 2013

Lynette Dickson, MS
Director ND AHEC
Director
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director

Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress, RN
Western ND AHEC

PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka and Mrs. Andress,

The North Dakota Rural Behavioral Health Network (ND RBHN) supports the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

ND AHEC is an original partner of the ND RBHN and our mission is *to improve access to behavioral healthcare and eliminate behavioral health disparities in rural and tribal communities*. The ND RBHN also includes the following agencies: Coal Country Community Health Centers; Essential Health; MHA Nation; North Dakota Federation of Families for Children's Mental Health; and Sakakawea Medical Center.

In closing, we would like to say that ND RBHN is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Susan Rae Helgeland, MS
Project Director, ND RBHN

SANFORD MAYVILLE

SANFORD™
HEALTH

January 10, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

On behalf of Sanford Mayville, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

Being rural, we find that sending staff distances for training is almost impossible as it takes staff away from our facility. With the EAHEC mobile training, unit available, we were able to train some of our staff in our own facility. What a positive way to meet needs in rural North Dakota.

In closing, we would like to say that Sanford Mayville is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,



Roger Baier
Chief Executive Officer

RB:kjm



NORTH DAKOTA
DEPARTMENT of HEALTH

DIVISION OF CANCER PREVENTION AND CONTROL
Community Health Section
600 East Boulevard Avenue, Dept. 301
Bismarck, N.D. 58505-0200
www.ndhealth.gov

January 15, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Address, RN
Western ND AHEC Director
109 So. Main St.
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka and Ms. Address,

On behalf of the North Dakota Comprehensive Cancer Control Program and the North Dakota Cancer Coalition, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support for the North Dakota health care workforce addressing workforce shortages through a variety of means such as distribution, diversity, supply and quality health care professionals. A well trained workforce addressing cancer prevention and control is a major need for our state as well as nationally.

The ND Eastern and Western AHEC programs have partnered with the North Dakota Comprehensive Control Program and the North Dakota Cancer Coalition to provide education to healthcare professionals across the state, especially targeting providers from rural settings. The AHEC programs have provided financial support for the following trainings over the past three years:

- Program evaluation
- The burden of cancer in North Dakota and what organizations can do to address this burden
- What primary care healthcare professional need to know about genetic testing for cancer risk

These are all pertinent topics that expand knowledge and increase capacity to provide care and program management in a variety of settings.

In closing, we would like to say that The North Dakota Comprehensive Cancer Control Program and the North Dakota Cancer Coalition are pleased to continue a mutually beneficial relationship with the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe our collaborative efforts provide a means to meet the needs of future health care students and current professional providers in North Dakota. Thank you.

Regards,

Susan M. Mormann, Director
Division of Cancer Prevention and Control
North Dakota Department of Health

Joyce Sayler, Program Coordinator
Division of Cancer Prevention and Control
North Dakota Department of Health

LANGDON AREA HIGH/MIDDLE SCHOOL

“HOME OF THE CARDINALS”

FOR EXCELLENCE

PRINCIPAL: DARYL TIMIAN

PHONE: Home 701-256-2687
Work 701-256-5291
FAX: Work 701-256-2606

715 14TH Avenue
Langdon, ND 58249
E-mail: daryl.timian@sendit.nodak.edu

January 10, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress, RN
Western ND AHEC Director
109 So. Main Street
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka and Ms. Andress:

On behalf of Langdon Area High School, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

We have worked closely with the North Dakota Area Health Education Center (ND AHEC) for several years. AHEC has offered educational opportunities for our students in collaboration with our health care facilities and medical professionals to expand their understanding of the many health careers available. Examples would be the HOPE grant, health careers information and statistics (including powerpoints), and expansion of HOSA (Health Occupations Students of America) into North Dakota.

In closing, we would like to say that Langdon Area High School is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Daryl Timian
Principal
Carla Symons, RN
Instructor—Health Careers



Public Health
Prevent. Promote. Protect.
City-County Health District

CITY-COUNTY HEALTH DISTRICT

PUBLIC HEALTH AND HOME CARE

BARNES COUNTY COURTHOUSE
230 4TH Street NW, Room 102
Valley City, ND 58072

PHONE: 701-845-8518

FAX: 701-845-8542

WEB: WWW.CITYCOUNTYHEALTH.ORG

January 9, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Address, RN
Western ND AHEC Director
109 So. Main Street
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Address,

On behalf of City-County Health District, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) Program and the Eastern and Western North Dakota Area Health Education Centers (Eastern ND AHEC, Western ND AHEC). The ND AHEC/Eastern/Western ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

City-County Health District has collaborated with NDAHEC on two projects which potentially benefitted all Barnes County residents. The first project was a presentation to ND health care professionals by Drs. James Hart and Stephen McDonough. They addressed two goals: increasing skills regarding how to effectively promote better community health by incorporating proven preventive strategies into daily activities, and increasing understanding of the policy and system changes needed to support health improvement. The second project featured Kostas Voutsas, a respected trainer/speaker and Professor of Business at Dickinson State University. He addressed cultural diversity in the community and school settings. This presentation was especially helpful to those who work directly with foreign-born residents in our community.

In closing, we would like to say that City-County Health District is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Program and the Eastern/Western North Dakota Area Health Education Centers. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Theresa Will, RN
Director



Public Health
Prevent. Promote. Protect.

Walsh County Health District Public Health & WIC

Administration Building • 638 Cooper Avenue ~ Suite 3 • Grafton, ND 58237

(701) 352-5139 • Fax (701) 352-5074

1/9/2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Dear Ms. Dickson and Dr. Krivarchka,

On behalf of Walsh County Health District, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

Our agency was a recipient of grant moneys from the Eastern ND AHEC in 2010. We received a \$5000.00 grant that allowed us to send 20 nurses/nurse practitioners from Walsh County to the State Immunization Conference. Without this grant money, most of the small rural clinics and hospitals that employed these nurses/nurse practitioners would not have been able to send their staff to this training. The training allowed us to develop a network of immunization providers in Walsh County that continues to this day.

In closing, we would like to say that Walsh County Health District is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Wanda Kratochvil, RN
Walsh County Health District
Administrator



**First Care Health Center
PO Box I
Park River, ND 58270**

January 24, 2013

Lynette Dickson, MS
Director ND AHEC
Center for Rural Health, UNDSMHS
501 N Columbia Rd, Stop 9037
Grand Forks, ND 58202

Dr. Bill E. Krivarchka
Eastern ND AHEC Director
Sanford Medical Center Mayville
42 6th Ave. SE
Mayville, ND 58257

Denise Andress
Western ND AHEC Director
109 So. Main St
PO Box 615
Hettinger, ND 58639

Dear Ms. Dickson, Dr. Krivarchka, and Ms. Andress,

On behalf of First Care Health Center, we are writing this letter to support the North Dakota Area Health Education Center (ND AHEC) and the Eastern North Dakota Area Health Education Center (Eastern ND AHEC). The ND AHEC/Eastern ND AHEC focuses on providing support across the health care workforce pipeline to address health care workforce shortages through distribution, diversity, supply and quality health care professionals.

First Care Health Center provides western Walsh County 5th grade students the opportunity to learn about health careers with the help of ND AHEC and the Inspector Wellness and the Case of the Many Medical Careers Program. The 5th grade students have the opportunity to learn about health careers with the help of Inspector Wellness and First Care Health Center staff through visits with medical professionals to learn about health careers, participating in a hands-on activity relating to the chosen medical field, and touring First Care Health Center. Because of our rural area and small school population, this program provides many students the only opportunity to learn about medical careers first hand. We find this program and the support of ND AHEC very valuable to promote medical careers to our area students.

In closing, we would like to say that First Care Health Center is pleased to continue a relationship that is beneficial to us and the North Dakota Area Health Education Center and the Eastern North Dakota Area Health Education Center. We believe this support is worthy and meets the needs of future health care students and professional providers, rural communities and quality health for North Dakota. Thank you.

Best regards,

Ruth Jelinek

Ruth Jelinek, Marketing & Development
First Care Health Center

Testimony to Senate Appropriations, March 25, 2013
Representative Rick Holman, ND District 20

AB 1211
3-25-13

The **North Dakota Area Health Education Center (NDAHEC)** works to enhance access to quality primary care and public health in rural and underserved areas, by improving the supply and distribution of health care professionals through community and school partnerships.

The North Dakota Area Health Education Center includes a statewide program office located in Grand Forks and two regional centers in Mayville and in Hettinger, North Dakota. The Eastern North Dakota AHEC serves 28 counties. The Western North Dakota AHEC serves 25 counties.

North Dakota AHEC works to recruit, educate and sustain health professionals in rural North Dakota, connecting students to careers, professionals to communities, and communities to better health.

Rural North Dakota has needs different from urban centers. Our 36 Critical Access Hospitals and related medical facilities and nursing homes need a steady reliable stable workforce. The Goal of AHEC is to work with rural health care providers, healthcare professionals, schools, and students to provide opportunities which may lead them to consider a career in healthcare. It's part of the philosophy of "Grow Your Own". A great number of our healthcare workers in rural North Dakota are from rural North Dakota so are acquainted with the lifestyle. AHEC's goal is to help maintain that pool of workers in rural North Dakota.

Educators: Educators are in the profession that creates all others. NDAHEC has resources to help prepare students for professions in health care. With large health care workforce shortages, especially in rural North Dakota, NDAHEC can help students with what is needed to be prepared for college and careers. NDAHEC can help teachers and counselors find opportunities and resources for school and classroom to promote health care education.

Students: Most students do not know that there are over 200 careers in health care. NDAHEC helps middle and high school students interested in a career in the health care industry, find ways to explore career areas, discover interest areas, and locate tools and opportunities to pursue their interests. College students can find ways to enhance field experiences and clinical experiences.

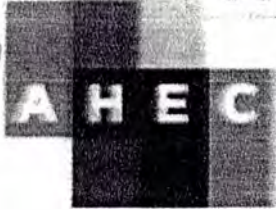
Medical Professionals: Medical professionals in underserved areas can strengthen their practices. NDAHEC provides: Accredited continuing education opportunities, Resources, Connections for health professions students with inter-professional opportunities

Community Resources: Due to the economic impact health care facilities have in rural communities, NDAHEC has worked to engage community members and organizations to help recruit health professionals to work in their communities. Community members can help by providing housing assistance, mentoring a health professions student, and by doing what they can to make their community a friendly place for visitors.

Thank You

HB 1211 3-25-13 #2

NORTH DAKOTA AHEC NEWSLETTER



Stands for Jobs

NORTH DAKOTA AHEC

In-A-Box-Curricula



The Eastern and Western North Dakota AHECs have available five of "In-A-Box" Health and Science curricula tools for the classroom. Each box (Guts In-A-Box, Eye In-A-Box, Brain In-A-Box, Bones and Muscles In-A-Box and Ear In-A-Box) has a unique combination of hands-on

activities, models and technology, books, DVDs, teacher guides, reproducible, lesson extensions, resource lists, glossaries and background information. Examples of the material can be viewed at, www.inaboxcurriculum.net.

The In-A-Box Curricula is available for use, free of charge, to North Dakota teachers by contacting Katie Thompson, Eastern ND AHEC Education Coordinator, katie@ndahec.org, and in the Western ND AHEC area, please contact Denise Andress, Director, denise@ndahec.org. This link, ruralhealth.und.edu/topics/workforce/inabox.php, will provide information as to what the Center for Rural Health has to offer.

Scrubs Academy



The Scrubs Academy will be held June 17-20 at The University of North Dakota. This event is for any North Dakota student who has completed 6th, 7th or 8th grade and costs \$150.

Students will become CPR and HIPAA certified, interact with human simulators, explore a giant colon and much more!

You will learn about a variety of professions including but not limited to: Pharmacy, Nursing, Mental Health, EMS and more!

For more information email Kylie Nissen at kylie.nissen@med.und.edu or apply at ruralhealth.und.edu/projects/scrubs/academy.php

Inside this issue:

In-A-Box-Curricula	1
Scrubs Academy	1
Spotlight Facility	1
AgriSafe	2
What's Next with AHEC	2
HIPE Week	2
Counselor's Corner	2
Hands-On Health Careers	2
AHEC of a Good Idea	2
Contact Information	2



Spotlight Facility: Sakakawea Medical Center

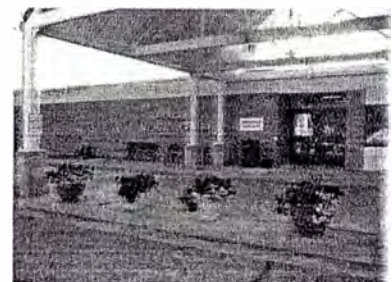
The Sakakawea Medical Center serves the communities, residents and visitors of Mercer County, and portions of Oliver and Dunn Counties in North Dakota, which encompasses over 2000 square miles and a combined population of over 13,000.

Sakakawea Medical Center is located in the heart of rural Mercer County with the main office and facility housed in the City of Hazen. Sakakawea Medical Center (SMC) originally operated under the name of the Hazen Memorial Hospital Association and dates back as far as 1969 when the Hazen Memorial Hospital Association took over the hospital from the Lutheran Hospital Homes Society. In 1988 the name was changed to Sakakawea Medical Center. Currently SMC is classified as a "Critical Access Hospital" and is a community owned and operated hospital under the Hazen Memorial Hospital Association whose operation is governed by a volunteer board of directors elected through its membership.

Sakakawea Medical Center operates more than just the hospital. In addition, we operate and manage a rural health clinic, licensed basic care facility, two rehabilitation departments, home health care and hospice care program. SMC strives to be a complete healthcare system dedicated to providing the best comprehensive care possible to the area that we serve. The vision of SMC is to: "Enhance the lives of our patients, families and area communities through High Quality Healthcare and Services."

Our community commitment is reflected through the Sakakawea Medical Center's mission goals to:

- Provide high quality care that is measured and continuously improved.
- Provide individualized care that exceeds expectations of those we serve.
- Strengthen partnerships with providers to enhance coordination of care and improve system performance.
- Be a steward of resources.
- Commit to service excellence.
- Be a vital contributor to our area communities.
- Recognize the value of each employee and provide opportunities for personal growth and development that



AgriSafe



The AgriSafe Network, a non-profit national membership organization, represents health professionals who are concerned about the health and safety of farm families. The AgriSafe Network is dedicated to supporting AgriSafe health professionals who are prepared to serve the health care needs of farmers. Member benefits include training, educational materials, contact with other clinicians in the field, and updates on the most cutting-edge developments in agricultural health and safety. Only health professionals who have received extensive training in the field of agricultural health and safety earn the right to be named "AgriSafe Providers". AgriSafe envisions a day when farmers across the country have access to highly trained AgriSafe professionals. That local AgriSafe clinician will provide superior disease management and prevention services to match the farmer's specific exposures. For more information, visit www.agrisafe.org or email info@agrisafe.org, or Denise Andress at denise@ndahec.org.

HIPE WEEK March 11-15, 2013

Attention: K-12 teachers and health care providers!!

Team up with the Center for Rural Health to promote health careers—**start planning for HIPE Week now!**

NEW THIS YEAR!!! Healthcare Workforce Vide Contest open to North Dakota students in grades K-12! Encourage students to use their creativity to design a healthcare video and they may be the winner of a cash prize! Deadline for video submission is March 1, 2012. Go to <http://ruralhealth.und.edu/projects/hipe/video-contest.php> to view contest rules and submission information.

Visit ruralhealth.und.edu/projects/hipe/ to access numerous career activities, poster, table tents, and other resources. Celebrate HIPE week and let us know how it went by emailing your comments to kylie.nissen@med.und.edu.

For more information, go to ruralhealth.und.edu/projects/hipe/ or contact Kylie Nissen at 701-777-5380 or kylie.nissen@med.und.edu.

Counselor's Corner



Counselor's Corner provides you with current information about health care careers. It is a resource that you can share on-line with students and parents to explore careers, salaries, future work trends, interviews, and videos.

You can view past Counselor's Corners' from the North Dakota AHEC archives at eastern.ndahec.org/educators/counselors-corner.php. Our future editions will feature careers in occupational and physical therapy, dental professions, social work and psychology, public health, emergency medical services, and nursing.

Contact Information

Eastern AHEC:

Bill Krivarchka—Director

701.788.4477 or bill@ndahec.org

Katie Thompson—Education Coordinator

701.352.4689 or katie@ndahec.org

Lois Karlstad—Project Coordinator

701.788.4475 or lois@ndahec.org

Western AHEC:

Denise Andress—Director

701.637.0177 or denise@ndahec.org

John Graham—Education Coordinator

701.873.7788 ext. 102 or john@ndahec.org

Christi Miller—Project Coordinator

701.637.0178 or christi@ndahec.org

What's Next With AHEC

HIPE Week Video Deadline	March 1
Marketplace for Kids at Lake Region State College	March 11
Scrubs Camp in Lisbon	March 13
Scrubs Academy Applications Due	March 15
Scrubs Camp in Hazen	March 27
Scrubs Camp in Rugby	March 28
Scrubs Camp in Devils Lake	April 4
Marketplace for Kids at Northwood Public Schools	April 8
Scrubs Camp in Mohall	April 12
Marketplace for Kids at Minot State University	April 17
Dickinson State University Nurse Camp	April 20
Marketplace for Kids at Williston State College	April 23
Girl Scouts Medi-Fun Day in Bismarck	April 27
Marketplace for Kids at North Dakota State College of Science	May 14
Marketplace for Kids at Jamestown College	May 17

Hands-On Health Careers

Hands-On Health Careers: It's the Doctor's Orders was a session at Marketplace for Kids events held throughout the states. Marketplace for Kids is an organization that coordinates educational events throughout the state. Fourth through sixth grade teachers are invited to bring their classrooms to the events to encourage students to be creative, solve problems, and practice innovation. The North Dakota AHEC participated in nine of ten events impacting 843 students, where they learned about the many careers in health care, names of major bones and organs of the human body, and hands-on activities with our patient simulator, Jack. We look forward to attending Marketplace for Kids events in the future!

AHEC of a Good Idea

Ever wonder why NDAHEC is a great organization? Curious as to what we are about? Take a moment to view the video and learn why AHEC is a "AHEC of a Good Idea" www.youtube.com/watch?v=jFV-oOMNMBs&feature=youtu.be

3-25-2013

3-25-13
HB 1211

3

Legislative Testimony to Senate Appropriations Committee - House Bill 1211

Good morning, Chairman Holmberg and committee members. My name is Lynette Dickson and I am an Associate Director at the Center for Rural Health, School of Medicine and Health Sciences (SMHS); Program Director of the Area Health Education Center (AHEC). I am here today to provide background information about the AHEC program, which Bill 1211 is intended to support through the Department of Commerce.

As background, the federal AHEC grant program was developed by Congress in 1971 to recruit, train and retain a health professions workforce committed to underserved populations. North Dakota was actually classified as a "1st generation AHEC" as the School of Medicine had an AHEC grant in the mid-1970's that was used to create the four medical campuses that are still operated in Bismarck, Fargo, Grand Forks, and Minot. The federal grant dollars ended sometime in the early to mid-1980's and as you are well aware, the Medical School secured support from the state of North Dakota along with tuition dollars and other sources to support medical education at the four campuses. In 2008, the Center for Rural Health applied for and was awarded a new AHEC grant through the Bureau of Health Professions, Health Resources and Service Administration (HRSA). This federal grant has a 1:1 required match which encourages a federal and state partnership to address the challenges of health workforce supply. AHEC programs are required to be administered through medical schools, unless there is not a medical school in the state. Today, 56 AHEC programs with more than 235 centers operate in nearly every state and the District of Columbia. Approximately 120 medical schools and 600 nursing and allied health schools work collaboratively with AHECs to improve health for underserved and under-represented populations.

In North Dakota, the federal AHEC grant is administered through the Center for Rural Health which is designated as the AHEC Program Office. The role of the Program Office is to support the regional centers by providing oversight and direction; sharing resources such as technical assistance with communication, web and graphic design and grant development and management. As is common in rural health efforts, building collaborative relationships is fundamental to success. The AHEC program helps bring the resources of academic medicine, to address local community health needs. We work with communities, health organizations, health providers, elementary/secondary/post-secondary education systems, and others to improve health workforce options and opportunities for all North Dakotans. The work of the AHEC involves K-12 students around the state, health professions programs in all ND colleges, universities and is not exclusive to UND. The strength of the AHEC Network is its ability to creatively adapt national initiatives to help address local and regional North Dakota healthcare workforce issues.

The expectation of the federal grant is that the majority of the work is conducted by the rural Regional Centers; therefore the Program Office, is required to disperse no less than 75% of the federal grant funds to the Regional Centers located in Mayville, serving the Eastern ND and Hettinger, serving Western ND. Mayville State University has proven to be a valued partner and serves as the fiscal host for both Regional Centers, by administering both subcontracts from the CRH. The federal funds require a 1:1 non-federal match. These funds are first awarded for Infrastructure Development for 6 years; and are reduced significantly to Point of Service which necessitates an increase in non-federal cost-sharing for state workforce issues.

The AHEC staff are located in rural communities and focused on collaborative relationships involving public and private partners working to establish a health education environment that is more comprehensive and

inclusive of medical, nursing, dental, pharmacy, physical therapy, public health and other disciplines and needs. The CRH is engaged in workforce related activities that complement and support the work of the AHEC such as health care workforce assessment and analysis to better understand our statewide needs both for today and to forecast future needs; Rural Health Scrubs Camps and Academies and assistance with recruitment/retention to rural communities. Much of the CRH work focuses in communities with the 36 rural hospitals; however, we do not have the staff to reach other rural communities which the AHECs are able to do; providing funds are available to sustain the full time staff to do so.

The SMHS and CRH are committed to work in partnership with the Regional Centers to meet the critical need of health care workforce in our state by increasing awareness about opportunities in health careers for our North Dakota youth; increasing interest in rural practice by supporting rural clinical rotations for health profession students; and improving competence and skills of our existing health professions by coordinating continuing education and training; which the AHEC Regional Directors will speak to in more detail.

Through community-based interdisciplinary training programs, AHECs identify, motivate, recruit, train, and retain a health care workforce committed to maintaining access to quality healthcare in our rural communities. Funding support through state appropriation will provide not only required match funds; but more importantly infrastructure support so the AHEC is able to actively address health workforce shortages in our state. As state legislators, you are well aware of the health workforce challenges, which you will hear more about today from my colleagues; and the critical need to maintain access to quality health care services for our residents. State appropriated funds from HB 1211 would be used to sustain the necessary staffing and operations in order to inspire the next doctor, nurse, physical therapist or other health professional from our most precious resource – more valuable than oil, our North Dakota youth. Health care workforce development is the responsibility of all - local health care facilities and their community; K-12 and secondary education, and state and federal programs.

The AHEC is dedicated to working in partnership with existing programs, services and resources, related to health career development. More importantly, the AHEC is committed to develop and make available programs, services and resources to schools, communities where there are minimal or no such available activities are available, for our North Dakota students, with the ultimate goal of addressing the health workforce shortages in our state.

Thank you for your time and consideration.