

Ready or Not: Protecting the Public's Health from Diseases, Disasters, and Bioterrorism



NORTH DAKOTA



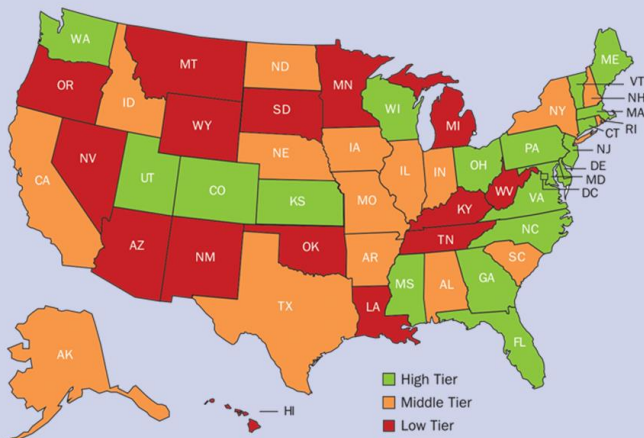
State Performance

Scoring tier, 2022

Middle

- ✓ **Nurse Licensure Compact (NLC)**
State participates in NLC, 2022
- ✓ **Public Health Accreditation Board (2022)**
Accredited by PHAB, 2022
- ✓ **Emergency Management Accreditation Program (EMAP)**
Accredited by EMAP, 2022
- ✓ **Public Health Lab Capacity**
Public health laboratories had a plan for a six- to eight-week surge in testing capacity, 2022

2023 State Emergency Preparedness Rankings: High, Middle, and Low



Public Health System Comprehensiveness

34%

Percentage of population served by a comprehensive public health system, 2018



Public Health Funding¹

20%*

Percentage change, FY 2021-22



Water Security

0%

Percent of population who used a community water system in violation of health-based standards, 2021



Paid Time Off

53%

Percent of employed population who used paid time off, March 2017-22



Seasonal Flu Vaccination

53%*

Season flu vaccination rate for people ages 6 months or older, 2021-22



Patient Safety

0%

Percentage of hospitals with "A" grade, fall 2022

*Indicates percentage is above the national average
¹Several pandemic-related funding actions led some states to see sizable public health funding fluctuations from FY2019 to FY2022

For the full report, please go to:

<https://www.tfah.org/report-details/ready-or-not-2023/>

Priorities for Policy Action



The Administration, Congress, and state lawmakers should modernize public health infrastructure and biodefense by investing \$4.5 billion annually to support foundational public health capabilities. In addition, Congress should increase funding for public health emergency preparedness, healthcare readiness, and data modernization.



Congress should reauthorize the Pandemic & All Hazards Preparedness Act (PAHPA) and enable more effective responses to emergencies.



Congress and state legislatures should invest in effective public health communications, including countering misinformation.



Congress and states should ensure first-dollar coverage for all recommended vaccines, minimize vaccine exemptions for school children, and increase vaccination rates for healthcare workers.



Congress and states should provide job-protected paid leave for illness or family caregiving demands.



Congress should fund the entire medical countermeasures enterprise (MCM), including distribution and dispensing of MCMs, and create incentives for new products to fight antibiotic-resistant infections.



Congress and states should strengthen readiness for extreme weather and environmental health threats.