

**Mr. Robert Sprinkle**  
**EXTERN Summer 2012**  
**Missouri Southern State University**  
**Bemidji Area Office**  
**Bemidji, MN**



My EXTERN assignment was with the Bemidji Area Indian Health Service (IHS), under the supervision of CDR Tim Duffy. I am currently a senior at Missouri Southern State University in Joplin, MO, where I am working on my bachelor's degree in Environmental Health.

I spent my summer working for the Indian Health Service as an Environmental Health Specialist in the Bemidji Area Office (BAO) which provides service and support to 34 Federally-recognized Tribes and 4 Urban Indian Health programs located in Illinois, Indiana, Michigan, Minnesota and Wisconsin. Tribes in the Bemidji Area include Ojibwe (Chippewa), Ho-Chunk, Menominee, Mohican, Oneida, Odawa, Potawatomi, and Sioux. My duties were also in close coordination with the Minnesota District Office (MDO), also based in Bemidji, which focuses solely on Minnesota.

One of the things I really liked about IHS is there is always something different going on. From performing a survey of a food establishment, analyzing incident data, giving safety training or performing a disaster drill, no two days are the same. *Semper Gumby* – always flexible.

Speaking of flexibility, one of my first days at IHS was evaluating emergency preparedness. At White Earth Health Center, one of the three federal healthcare facilities, I assisted in a disaster drill simulating a mass causality exercise. This helped show a marked improvement in staff preparedness and training over the previous event and of course showed areas that could be improved.

Process improvement permeates the culture at IHS, to include its own staff. One of the other benefits of this Externship is becoming familiar with the ServSafe program. ServSafe is the food industry's retail "best practices" training program and I had the opportunity to become a ServSafe certified instructor and teach a food handling course to vendors and their employees.

One of my tasks was to take safety-related incident information from the IHS's reporting program WebCident and analyze the data. This allowed us to identify patterns that safety officers and staff at our healthcare facilities could use to prevent more incidents such as slips, trips and falls or blood borne pathogen exposures.

Another study I was able to participate in was an analysis of cleaning chemicals used by the housekeeping staff in our various hospitals and clinics. This study was specifically aimed at identifying and replacing cleaning products that had compounds that were known or suspected endocrine disruptors, developmental neurotoxins and volatile organic compounds (VOCs). Exposure to these chemicals can cause birth and developmental defects either directly or in the children of those exposed to them.

Other ways we ensure the safety of our patients and employees is to provide fit testing to health care providers and staff at our various clinics. Fit testing is measuring someone for a specific type of respirator to protect them from hazardous materials and organisms (in this setting *Mycobacterium tuberculosis* being the foremost concern). This was not always easy as everyone's face is different and finding the right respirator for each was sometimes a real issue. I was responsible for not only conducting the tests for staff members but also training a new IHS staff person to conduct these tests.



However the majority of my time was spent doing what I found most enjoyable - conducting safety surveys of various institutions and businesses under tribal authority. These included surveys of restaurants, pools, casinos, PowWow grounds and their temporary food vendors, community centers, elderly nutrition programs, head starts, campgrounds, food warehouses and water/wastewater treatments plants. I enjoyed this most because it allowed me the opportunity to interact with the food vendors, wastewater operators, local officials, business owners, etc. that provide the foundation of our civilization – reliable access to safe and abundant food and water – something that most of us don't really think about ever, except as a portion of our paycheck. Helping to perform these surveys allowed me to observe how they worked and how our role as consultants and advisers ensured they continued to operate in a safe and efficient manner. This is the reason I became interested in public health as opposed to clinical medicine - to help prevent people from getting sick in the first place. Illness prevention is a *HUGE* deal – more people have died from disease throughout history than any other factor, hands down.

To summarize, my Externship at IHS was a dynamic experience that helped me learn in a field environment (at times far more effective than a classroom) the intricacies of my newly chosen field of work and reinforced my commitment to performing it. I would highly recommend the COSTEP/Externship experience to anyone interested in the environmental health field. Special thanks to CAPT Diana Kuklinski, CDR Tim Duffy, LT Tim Taylor, Carolyn Garcia, LCDR David Kostamo, LT Megan Arndt and all others at the BAO/MDO.