

2002 Financial Statement

REVENUES

LOCAL REVENUES

Local Taxes: Inside Millage and Tuberculosis Levy	\$933,283
Contracts with Governmental Agencies	603,880
Environmental Health License, Registration, and Permit Fees	753,310
Personal Health Services Patient Fees	95,778
Donations	70,050
Laboratory Services Fees	101,428
Rental Income	49,760
Miscellaneous Revenues	521

SUB-TOTAL LOCAL REVENUES

\$2,608,010

STATE AND FEDERAL REVENUES

Ohio Department of Health Funded Grants/Projects

State Funded Dollars Include: \$640,377

Child and Family Health Services Block Grant

Rabies Prevention Grant

Rabies Surveillance Contract

Help Me Grow Program

Tuberculosis Control Funds

Tobacco Compliance Check Contract

Federal Funded Dollars Include: 227,935

Childhood Lead Poisoning Prevention CDC Grant

Lead Regional Resource Center Grant

WIC Program

Medicaid/ Medicare Reimbursement for Services 121,500

Other State and Federal Dollars Include: 240,089

Adult Day Services Grant - Area Agency on Aging

Safe Communities Grant - Ohio Dept. of Public Safety

Passport Program - Area Agency on Aging

H.U.D. Lead Abatement Grant

Homestead and Rollback Reduction Funds

State Subsidy 50,467

SUB-TOTAL STATE AND FEDERAL REVENUES 1,280,368

TOTAL REVENUES \$3,888,378

EXPENDITURES FEDERAL/STATE LOCAL TOTALS

Personal Health Services	\$915,193	\$429,623	\$1,344,816
Environmental Health Services	72,734	1,247,591	1,320,325
Administrative & Support Services	50,467	507,649	558,116
Laboratory Services	-	340,200	340,200
Health Promotion and Assessment	72,281	83,029	155,310
TOTAL EXPENDITURES	\$1,110,675	\$2,608,092	\$3,718,767

THIS IS AN UNAUDITED FINANCIAL STATEMENT

**District Board of Health
Mahoning County**
50 Westchester Drive
Youngstown, Ohio 44515

Health Commissioner

Environmental Health & Plumbing

Health Promotion & Assessment

Lead Poisoning Prevention Program

Nursing and Clinics

Solid Waste Program

(330) 270-2855

Adult Day Services

(330) 782-1749

Laboratory Services

(330) 270-2841

Tuberculosis Clinic

(330) 744-4246

Toll-free in Mahoning County

1-800-873-MCHD

Years ago...

Excerpts from the records of the District Board of Health

75 years ago

October 9, 1928 – the Board of Health declares a Jackson township stream insanitary and a “menace to the health of the inhabitants” and calls upon township trustees and other officials to clean the stream.

50 years ago

April 7, 1953 – the Board of Health enacts sanitary regulations for the operation of camps, motels, and tourist homes and sets a permit fee of two dollars.

25 years ago

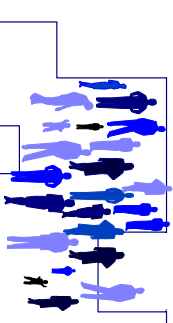
May 2, 1978 – the Chamber of Commerce urges the Board of Health to pursue merger talks with the Youngstown Board of Health. The Campbell and Struthers Boards of Health decline to participate.

October 3, 1978 – the county tuberculosis sanitarium closes, forcing Board of Health public health nurses to relocate offices and clinics to Youngstown.

10 years ago

May 29, 1993 – the Board of Health purchases a trailer for use as a mobile drinking water testing laboratory to be located at the Joint Vocational School in Canfield.

July 14, 1993 – the Board of Health contracts with Mahoning County Commissioners to create a tuberculosis control program for Mahoning County.



Mahoning County

DISTRICT BOARD OF HEALTH

“A Report on the Health of the District in 2002”

March 2003

SMALLPOX VACCINATION PLANNING CHALLENGES LOCAL PUBLIC HEALTH RESPONSE TEAM

Although the World Health Organization declared the global eradication of smallpox in 1980, the United States and former Soviet Union each maintained stocks of the virus that cause the disease. After September 11th, 2001, fears have arisen that the virus could fall into the hands of terrorists. Smallpox inoculation was discontinued in the United States in 1972. With little or no immunity to the disease in the population, a bioterrorist attack would find most Americans vulnerable to smallpox.



Public health response team member Diana Colianni administers the smallpox inoculation to Dr. Brian Gordon.

To prepare for the possibility of such an event, the public health system has been developing plans to protect Americans against the threat of smallpox. The District Board of Health and other health districts in the Mahoning Valley are working with local hospitals and emergency management officials to institute a voluntary smallpox inoculation plan.

Smallpox inoculations will proceed in a three-phase plan recommended by the U.S. Centers for Disease Control and Prevention (CDC). In Phase I, public health and hospital response teams of physicians, nurses, and support staff who would care for smallpox cases and control the spread of disease will be vaccinated. In later phases, other first responders, such as police, firefighters, and emergency medical personnel will be offered the vaccine. Participation in the smallpox vaccination program is strictly voluntary. Vaccination of response teams is expected to begin in late February 2003.

The smallpox vaccine is a live virus and is not recommended for pregnant women, children, those with weakened immunity, and those with certain skin conditions, according to Brian Gordon, M.D., director of medicine for the District Board of Health. The risk of serious and life-threatening reactions to the vaccine is rare, but the risks still outweigh the benefits of the vaccine for the general public unless there is a terrorist attack, Gordon said.

In the event of a biological attack using the smallpox virus, persons exposed to the disease would be protected if vaccinated within four days of exposure. The District Board of Health is working with local hospital systems and emergency management officials to plan for emergency mass inoculations if an attack occurs. Although the probability of an intentional release of the smallpox virus is low, the CDC believes that communities must be prepared for such an event. For more information about smallpox and bioterrorism, visit the District Board of Health website at www.mahoning-health.org or call the bioterrorism information line at 888-246-2675.

BOARD OF HEALTH WINS GRANT AWARD TO STUDY VALLEY ENVIRONMENTAL HEALTH CONDITIONS

The District Board of Health is one of eight public health agencies in the U.S. chosen to pilot a process that allows local governments to identify environmental health issues, rank local environmental health concerns, and prioritize activities to protect and improve environmental health. The agency has received a \$20,000 grant from the U.S. Centers for Disease Control and Prevention and National Association of County and City Health Officials to fund the project, known as the Protocol for Assessment of Community Excellence in Environmental Health – or PACE EH. Health commissioner Matthew Stefanak expects that the process will take at least 18 months to complete. Boards of health in Trumbull County and Youngstown will also participate in the study.



“This process offers us a way to integrate scientific assessments of environmental health concerns with the values and perceptions of the communities we serve,” Stefanak said.

In its grant application to CDC, the District Board of Health cited several indicators of environmental health problems that Stefanak said will be addressed in the study:

- ✓ Since 1994, over 1,000 children in Youngstown have been diagnosed with lead poisoning. Over 70% of the housing stock was constructed before 1950 and more than 6,000 children are at risk for lead exposure in these older homes.
- ✓ Over 10,000 families depend on private wells for drinking water in Mahoning County. One-third of wells routinely show evidence of bacterial contamination.
- ✓ As more of the Mahoning Valley’s population migrates to suburban and rural areas, dependence on septic systems is growing. More than 17,000 households depend on septic systems for wastewater treatment in Mahoning County alone; up to half of these systems may be failing to adequately treat wastewater.
- ✓ A century of steelmaking in the Mahoning Valley has contributed to persistent contamination of sediments in our primary waterway - the Mahoning River. A fishing, swimming, and wading advisory against contact with the river has been in place since 1988.
- ✓ The Ruetgers-Nesse Superfund site on Mahoning County’s southern border has released mirex and other cancer-causing compounds into the Little Beaver Creek. Remediation of creek sediments has not yet occurred.
- ✓ Childhood asthma prevalence and hospitalization rates in the Valley have been growing steadily. Health departments, medical care providers and others have just begun to organize efforts to address environmental tobacco smoke, molds, and other agents that can irritate and trigger this condition.
- ✓ Several closed landfills in fast developing areas of Mahoning County operated at a time when this technology was not available and accepted wastes that may present a future threat to groundwater in the area.
- ✓ The growing prevalence of childhood and adult obesity in the Mahoning Valley can be attributed in part to limited access to public places for recreation that enable children and adults to be physically active.
- ✓ The Healthy Valley Alliance, a regional community health assessment and planning coalition, has created a steering committee to oversee recruitment of the 25-member Commission for Environmental Health that will be appointed to conduct the PACE EH project in Mahoning and Trumbull Counties. The Commission is expected to begin its work in May 2003.



District Board of Health

Officers & Employees

2002 District Advisory Council

Ivan Hoyle, Chair
Dolores Bennett, Secretary

Board of Health

Stephanie Dewar, MD, President
Leonard Perry, Vice President
Margot Baird, RN
Donald Somers
Michael Heber

Health Commissioner

Matthew Stefanak, MPH
Medical Director
Brian Gordon, MD

LABORATORY SERVICES DIVISION

Lee Benson, RS, Director
Janine DeJillo, Lab Technician
Ralph Widger, Lab Assistant
Marilyn Jeswald, Secretary

HEALTH PROMOTION AND ASSESSMENT UNIT

Jane Wurga, Med, CHES, Director
Health Education Specialist
Tracy Styka, MS
Nicholas Casarelli, MHHS
Lori Nestor, Secretary

ENVIRONMENTAL HEALTH DIVISION

Richard Sety, RS, Director
Karen Ahrendt, RS, Sanitarian
Eleanor Cegan, RS, Sanitarian
John Hallas, RS, Sanitarian
Kimberly Hobbs, RS, Sanitarian
Andrew Stefan, SIT, Sanitarian
Stephanie DeGenaro, Sanitarian
David Beaver, CPI, Plumbing Inspector
Charles Gilmartin, CPI, Plumbing Inspector

WASTE CONTROL PROGRAMS

Christine Frankford, RS, Chief
David Fetchko, RS, Sanitarian
Angelo Italiano, MA, RS, Sanitarian
Misty Koletich, RS, Sanitarian
Joseph Pink, RS, Sanitarian
Michael Rogich, RS, Sanitarian
Mary Helen Smith, RS, Sanitarian
Jessica Tyree, RS, Sanitarian
Wesley Vins, RS, Sanitarian
Anthony Veliz, RS, Sanitarian
Ronald Neff, RS, CPI, Plumbing Inspector

NURSING DIVISION

Diana Colianni, MSN, RN, Director
Linda Ewing, MSN, RN, CPNP,
Deputy Director of
Nursing for Clinical Services
Public Health Nurses
Marrina Borden, RN
Erica DiNello, RN
Marrame Evans, RN
Debra Moss, RN
Susan Springer, RN
Carol Komar-Vadino, RN
Denise Walters, RN
SueAnn Redano, RN

LABORATORY SERVICES DIVISION

Cynthia Bracaglia, Medical Technician
Laura Sealise, Secretary
Grayce Vuksta, Clerk
Adult Day Services
Rita Nolfi, RN
William Michael, Van Driver
Joyce Naymick, Activities Coordinator

Tuberculosis Elimination Program

Shawn Hunter-Little, TB Registrar
Kathleen Berry, RN, Outreach Nurse
Robert DeMarco, MD, Tuberculosis Control Officer

Lead Poisoning Prevention Program

Joseph Diorio, MS, RS, Director
Lynn Pomponio, MHHS, Outreach Educator
Stefano Napolitano, RS, Sanitarian
Kathleen Terrieri, RN, Pediatric Coordinator
Rosemary Totterdale, Data Entry Operator

FINANCE AND HUMAN RESOURCES DIVISION

Edward Janik, CPA, Director
Ronald Harvischak, Grants Fiscal Manager
Mary Moore, Grants Fiscal Manager
Patricia Murphy, Fiscal/Personnel Officer
Kathleen Swasta, Administrative Assistant
Michele Olin, Office Manager
Kathy Affagato, Account Clerk II
Tina Marie Schneider, Secretary
Julie Thompson, Secretary
Linda Zmith, Secretary

The District Board of Health is a public agency that provides public health services to the 154,000 residents of the Mahoning County General Health District. Health districts are political subdivisions created by the Ohio Legislature in 1919. The Mahoning health district comprises the townships and villages of Mahoning County and contracts with the City of Canfield. Board of Health members are appointed by representatives from each of the townships and villages. Ohio law requires the district health commissioner to make a public report on the health of the district each year.

You Drink & Drive. You Lose.

During the holidays, from November 25, 2002 through January 5, 2003, area law enforcement agencies deployed additional patrols that targeted impaired driving.

The District Board of Health's Mahoning Safe Communities Program, which sponsored the *You Drink & Drive: You Lose* Campaign locally, presented the Traffic Bureau of Youngstown Police Department with a digital camera. The police department conducted over 266 hours of additional enforcement and made 27 DUI arrests. Unfortunately, three fatalities occurred within the city during the time-frame of the campaign. Two of them were alcohol-related.

The Boardman Police Department was rewarded for their efforts during the campaign. They reported over 162 extra hours of enforcement with 6 DUI arrests and as a result, saw 13% fewer motor vehicle crashes.

A total of 493 extra hours of enforcement was conducted during the campaign and 57 arrests were made as reported by the participating agencies.

The *You Drink & Drive: You Lose* Campaign will continue to be a focus with Mahoning Safe Communities and state and local law enforcement in the year to come. Alcohol was involved in 45% of the motor vehicle fatalities occurring in 2002 in Mahoning County.



Tracy Styka, Safe Communities Coordinator, pictured with Lt. Mark Milstead, Traffic Bureau, Youngstown Police Department (left) Captain Jerre Patterson, Boardman Police Department (right)

MCAT TOBACCO PREVENTION AND ELIMINATION PROJECT

The Ohio Tobacco Use Prevention and Control Foundation Board has awarded a \$225,000 grant to the District Board of Health in conjunction with the MCAT East End Prevention and Control Coalition.

“Although bioterrorism is on everyone’s minds, let’s not forget that tobacco is still Public Health Enemy #1,” said Mahoning County health commissioner Matthew Stefanak. “This grant will help our communities protect our children against Big Tobacco,” he said.

Two types of grants were awarded:

1. Implementation grants for those who proposed to implement tobacco use prevention and/or cessation programs.
2. Capacity Building grants for those who proposed to develop a local infrastructure.

Implementation grant proposals are expected to address at least three of the goals of the Ohio Tobacco Use Prevention and Control Foundation:



- ◆ Prevent youth tobacco use initiation
- ◆ Reduce youth tobacco use
- ◆ Reduce adult tobacco use
- ◆ Reduce tobacco use among pregnant women
- ◆ Reduce exposure to environmental tobacco smoke (ETS)

MCAT includes organizations from Ashtabula, Columbiana, Mahoning, and Trumbull counties. The coalition plans to implement a comprehensive strategy to prevent and reduce tobacco use among youth and pregnant women, and reduce exposure to secondhand smoke. This will be accomplished through a student advisory group to participate in planning youth-related activities, engaging school administrators to assess school smoking policies, conducting vendor compliance checks, training for law enforcement and judicial staff, cessation programming for pregnant women, and a community ETS prevention campaign.

HEALTH OFFICIALS NOTE INCREASE IN MOLD COMPLAINTS

In recent months, the District Board of Health has noticed an increased level of concerns and complaints about mold. Mold in homes seems to be of primary concern, according to Rick Sety, director of environmental health.

There’s nothing new about mold; it has been around for millions of years. Most indoor environments probably have mold spores floating around in the air. So why all of the attention? There are several noteworthy reasons. These include an expanding body of knowledge about health effects; ever-increasing amount of time spent in air-conditioned environments; an ongoing rise in cases of asthma and allergies; legal liability issues and a high level of media coverage. Of these, the last is perhaps the most significant, Sety said.

Whether or not these spores germinate and grow depends on four major factors—moisture, temperature, food sources and time. Excess moisture in the indoor environment is perhaps the most important. If these favorable conditions are present, it is just a matter of time before some mold growth appears.

So what should happen once you see or smell mold? Just get rid of it, Sety said. This sentiment is echoed by most public health officials. Once the source of moisture is identified and corrected, an appropriate clean-up method can be employed. Long-term moisture control is necessary. Is testing appropriate? In most cases, probably not. Investigate, but don’t test. Testing merely confirms what we already know that mold is present in the indoor environment. However, if family members suffer from asthma, allergies, headaches or have respiratory problems that could be triggered by mold, test results might be considered another diagnostic tool.

Keep in mind that at present, there is no scientific consensus and no regulatory standards that address a “safe” level of mold. In the absence of perceived health effects,

any money spent on testing would probably be better spent on clean-up. For more information concerning this emerging environmental health concern, contact the District Board of Health Environmental Health Division.

NEW CURRICULUM ORIENTS HEALTH WORKERS TO PUBLIC HEALTH

Do you remember how you felt on the first day of your new job? You probably wondered what exactly would you be asked to do, what were your benefits, and how you would receive the training you needed. All of these questions and more are answered in the new orientation curriculum developed for employees of the District Board of Health.

Development of a workforce competent in the essential public health services is a strategic objective found in the Mahoning County District Board of Health Infrastructure Improvement Plan and in Healthy People 2010 Objectives. Although the disciplines in a particular agency will vary according to the resources, policies, needs and population served, all public health employees must have certain competencies or levels of expertise. Their combined abilities enable an organization to provide essential public health services.

A survey of District Board of Health employees done in January 2001, found that new employees received no formal orientation to the mission or history of public health, epidemiology or public health terminology. In addition, over 35% of employees at the District Board of Health had been employed in public health less than 5 years and most workers had no formal training in the public health sciences. “New employee orientation has been an on-the-job process. We provide each employee with the training that is needed for his or her particular position,” according to Diana Colianni, nursing director.

An inter-agency work team was formed under the direction of the Mahoning County and Youngstown health commissioners to design and implement a new employee orientation plan.

The team adopted the name, NEOPHYTE: (New Employee Orientation to Public Health Yesterday, Today and Everyday). The core competency-based curriculum that was developed for new employees is also appropriate continuing education for current employees. Administrative staff will serve as faculty for some of the orientation sessions. On-line programming from the CDC and the Ohio Department of Health as well as videos, textbooks, lectures and group discussions will also be utilized.

The results of the NEOPHYTE Team project have been presented at meetings of the Ohio Department of Health, the National Association of County and City Health Officials in New Orleans, and the American Public Health Association in Philadelphia.

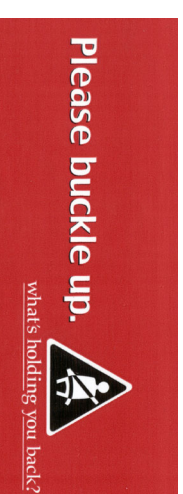
Boosters Are For Big Kids

Did you know most kids need to ride in a booster seat from about age 4 until at least age 8?

The 5-Step Test

1. Does the child sit all the way back against the auto seat?
2. Do the child’s knees bend comfortably at the edge of the auto seat?
3. Does the belt cross the shoulder between the neck and arm?
4. Is the lap belt as low as possible, touching the thighs?
5. Can the child stay seated like this for the whole trip?

If you answered “no” to any of these questions, your child needs a booster seat to ride safely in the car. Kids like boosters because they are more comfortable, too!



Health District Report Card

Mahoning County Townships, Villages, and City of Canfield
 1999 birth and death data is currently the latest available from the Ohio Department of Health

1999 BIRTHS	Low Birth weight Births*	Births to School-Age Teens(15-17)	1999 LEADING CAUSES OF DEATH	Ohio Rate*
Townships & Villages	1,395	102	Causes of Death Number	308.8
Canfield	45	2	Heart Disease	552
Total	1,440	104	Cancer	405
*less than 2,500 grams or 5.5 pounds		31	Stroke	138
			Lung Disease	98
			Flu/Pneumonia	68
			Diabetes	53
			Accidents	35
			Kidney Disease	29
			Septicemia	29
			Alzheimers	25
			*unadjusted rate per 100,000 population	19.6

1999 DEATHS	Total Deaths	Ohio Rate*
Townships & Villages	16	1,738
Canfield	0	56
Total	16	1,794

1999 YPLL	Ohio Rate*
Leading causes of death by age group and years of potential life lost (YPLL)	709.5
<1 Years Old	64.5
1-14 Years Old	64.5
15-24 Years Old	114
25-44 Years Old	270
45-64 Years Old	57
65-74 Years Old	45
75-84 Years Old	45
85+ Years Old	45

2001 COMMUNICABLE DISEASES	Ohio Rate*
Chlamydia	63
Gonorrhea	22
Aspic meningitis	17
Shigellosis	11
Salmonellosis	6
Campylobacteriosis	6
Giardiasis	3
Hepatitis A	3
Invasive group A streptococcal disease	3

MATERNAL HEALTH FACTS	Ohio Rate*
Births every day	4
Births in a hospital	99.5%
Perinatal care during 1st trimester	52.6%
Did not use alcohol during pregnancy	30.4%
Did not smoke during pregnancy	87.7%
	99.6%
	84.0%

Most Popular Names in 1999	Ohio Rate*
BOYS	
Nicholas	15-24 Years Old
Michael	1-14 Years Old
Zachary	25-44 Years Old
Jacob	45-64 Years Old
Tyler	65-74 Years Old
Jessica	85+ Years Old
	25-44 Years Old
	45-64 Years Old
	65-74 Years Old
	85+ Years Old

2001 COMMUNICABLE DISEASES	Ohio Rate*
Legionnaires' disease	3
Kawasaki disease	2
Tuberculosis	2
Animal rabies	2
Foodborne illness outbreaks	2
Infectious meningitis	2
Cryptosporidiosis	1
Haeemophilus influenzae	1
Hepatitis C	1

DISTRICT BOARD OF HEALTH EXPANDS HEALTH ALERT NETWORK

The District Board of Health has created a local Health Alert Network as part of Ohio's new public health readiness initiative. The network, known as HAN, serves as an electronic communications network among federal, state, and local public health agencies, physicians, hospitals, and emergency management officials.

"We learned from the 2001 meningitis outbreak how important it is to communicate timely information to health care providers in our community," according to Matthew Stefanak, Mahoning county health commissioner. The local HAN relies on e-mail and broadcast fax technology to provide information and guidance to more than 800 physicians, veterinarians, and other health care providers in Mahoning County and surrounding communities, Stefanak said.

Once it is fully deployed, the HAN will enable local public health agencies to:

- Have continuous high-speed Internet access
- Train the public health workforce about emerging diseases via satellite and Internet distance learning
- Send urgent health alerts to physicians and local agencies
- Expand Internet-based communicable disease reporting and tracking
- Create backup emergency communications among first responders

The HAN and Ohio public health readiness initiative are being funded by a \$34 million grant to the State of Ohio. The District Board of Health has received \$180,000 from this grant to improve public health readiness in Mahoning County.

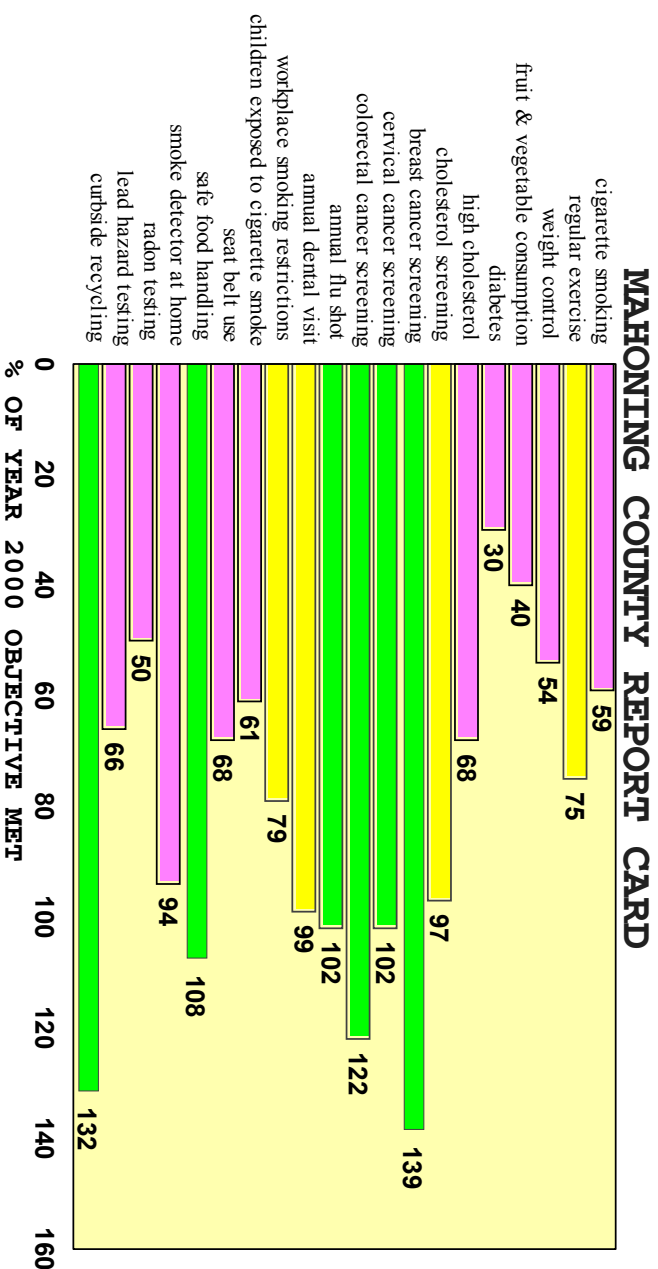
MAHONING COUNTY GETS "HEALTH REPORT CARD"

Behavioral choices such as tobacco and alcohol use, diet, and exercise underlie at least one-half of deaths in the U.S., each year. In 2002, the District Board of Health published the results of two surveys of Mahoning County adults designed to assess behavioral risk and protective factors for chronic disease and injury that contribute to these preventable deaths.

Telephone surveys of two disproportionate stratified samples totaling 591 adult Mahoning County residents were conducted by the District Board of Health and Ohio Department of Health in 2000. Researchers employed questionnaire items developed by the U.S. Centers for Disease Control and Prevention Behavioral Risk Factor Surveillance System (BRFSS) and by the District Board of Health to collect health risk and protective factor prevalence data. The weighted prevalence estimates in the report may be considered representative of the Mahoning County adult population.

Survey results indicate that Mahoning County's adult population met or exceeded six of the 20 Year 2000 national health objectives for which directly comparable local prevalence estimates were available, including breast and cervical cancer screening, colorectal cancer screening, flu immunization, safe food handling practices, and access to curbside recycling. In addition, Mahoning County achieved more than 90% of Year 2000 objectives for cholesterol screening, annual dental visits, and use of smoke detectors.

HEALTHY PEOPLE REPORT CARD*



monitoring well cluster

It takes approximately thirty years for the waste to stabilize and complete the decomposition process. During this time the surrounding area is monitored to detect methane gas migration. Surface water streams and ground water are checked twice yearly for contaminants. Keeping a well cap on a well and monitoring landfills improves the quality of our environment and promotes a safe environment.



passive methane vent

This "report card" shows the 20 Year 2000 national health objectives for which directly comparable Mahoning County estimates are presented in this report. Local performance measures ranged from a high of 139% of the Year 2000 objective achieved for breast cancer screening to a low of 30% of the Year 2000 objective for diabetes prevalence.

The District Board of Health and Ohio Department of Health plan to conduct behavioral risk factor surveys of Mahoning County adults again in 2006 to monitor progress toward Year 2010 national health objectives.

*Risk and Protective Factors for Disease and Injury in Mahoning County, 2000 Report. May 2002. Wen-Fang Chan, M.S., Robert Indian, M.S., Community Health Assessments Section, Ohio Department of Health. R. Scott Olds, Ph.D., Jon Jemmy, M.A Kent State University. Tracy Syka, M.S., Jane Wang, M.Ed., Health Promotion & Assessment Unit, Mahoning County District Board of Health, Matthew A. Stefanak, M.P.H. Mahoning County Health Commissioner.