Greetings from the Office of Rural Health!

I hope all of you are well and enjoying the summer transition. It has been an amazingly busy year thus far and we are only half way into 2017. Several initiatives are currently in development within the South Dakota Office of Rural Health:

- Negotiating a new electronic Patient Care Reporting system
- Initiating the Administrative Rules process for EMR and EMT
- General clean-up of current EMS legislation
- Drafting proposed Administrative Rule changes for:
  - EMS definitions
  - Licensing
  - Personnel
  - Ambulance equipment standards
  - Air medical operations
- Rolling out dedicated air to ground digital radio communication frequencies
- Scheduling Regional EMS sessions for 2017
- Plus many more…

Stay tuned for the latest information at EMS.sd.gov.
EMS Communications
By Marty Link—EMS Director

In May, the EMS Program mailed all ambulance service directors a letter detailing the work of an ad-hoc communications group. The group’s purpose was to streamline air to ground digital radio communications so ground responders could effectively and efficiently communicate with a rotor-wing aircraft during an ambulance response.

The EMS Communications group worked with flight services, Public Safety Answering Points (PSAPs), State Radio, and various other key stakeholders to identify three dedicated air to ground digital radio frequencies. The frequencies are ALS West for responses west of the Missouri River and ALS East for responses east of the Missouri River. The third frequency will function as a backup. It is highly encouraged that all ambulance services program all three digital radio channels and use them in the event of a rotor-wing scene flight.

Please take the time as an ambulance service to fully discuss the details of this project amongst your crew, local dispatch centers, law enforcement, and hospital staff. As always, please feel free to contact the EMS Program with any questions or concerns.

Electronic Patient Care Report (ePCR) Platform
By Marty Link—EMS Director

For the past decade, the EMS Program has utilized an electronic Patient Care Reporting (ePCR) system based on various versions of the National EMS Information System (NEMSIS). As NEMSIS advances from one version to the next, it is important that South Dakota maintains compliance.

To that end, the EMS Program published a request for proposal soliciting a NEMSIS compliant ePCR system. Two companies responded to the RFP and after a thorough review and evaluation, the EMS Program issued a letter of intent to ImageTrend; we are currently in contract negotiations.

The new ePCR system shall have a go-live date no later than January 1, 2018. Therefore over the next six months, the EMS Program will be working extensively on developing the data dictionary, validation rules, and building the system to achieve our go-live deadline.

Training for ambulance services will more than likely be held during the October, November, December timeframe. There will be much more detail to follow.
South Dakota State Trauma Treatment Guidelines
By Rebecca Baird—SD Trauma Program Manager, Eastern SD EMS Specialist

The South Dakota Trauma Treatment Guidelines were adapted by South Dakota for use from the North Dakota State Trauma System. The manual can be found at https://doh.sd.gov/providers/ruralhealth/trauma.

It was created to provide a road map for providers in rural trauma centers to help guide them through stabilization of the severely injured trauma patient. Written in conjunction with this manual were validation quiz questions that can be used to provide education in trauma centers. Below are a few to test your knowledge!

Test Yourself!

1) Breathing is characterized by assessing the patient’s oxygenation and ventilation:
   A. True
   B. False

2) Which of the following is not clinical evidence of a potential pneumothorax:
   A. Asymmetric lung sounds
   B. Subcutaneous emphysema
   C. Muffled heart sounds
   D. Rib fracture

3) Priorities to stop bleeding include:
   A. Applying direct manual pressure
   B. Applying a tourniquet if arterial bleeding noted from an extremity
   C. Consider intraosseous IV insertion
   D. None of the above
   E. A & B

Answers: 1) A, 2) C, 3) E

The guidelines are not meant to substitute for appropriate clinical evaluation and the authors and contributors to this manual are not responsible for the actions of providers utilizing the manual. Please see manual on website for disclosure of authors and contributors.
Continuing Education Opportunities Through SD Trauma System
By Rebecca Baird—SD Trauma Program Manager, Eastern SD EMS Specialist

The SD Trauma System would like to advance awareness of their quarterly regional performance improvement webinars. The Trauma System has been conducting quarterly webinars since January of 2014 within each of the four hospital regions. These webinars represent an opportunity to review trauma cases within a multidisciplinary setting which includes South Dakota trauma surgeons, physicians, RNs, and EMS personnel. With participation, each EMS provider is eligible for one CEU per webinar. The webinars are held at each hospital and a confidentiality agreement must be signed. We have encouraged trauma coordinators to involve EMS personnel over the past two years, but this messaging has only reached a small pocket of EMS providers.

The objective for case review is performance improvement which is a continuous evaluation of the state’s trauma system. With the intention to improve outcomes, the care of the injured patient will be evaluated through a structured process beginning with prehospital care and concluding with the definitive care of the patient. The case reviews are conducted within a non-punitive discussion platform.

We encourage communication with your hospital’s trauma program coordinator regarding these webinars. If you are interested in taking part in this free education opportunity, please contact Rebecca Baird at Rebecca.Baird@state.sd.us or your local hospital trauma program coordinator.

A full listing of trauma coordinators can be found at https://doh.sd.gov/documents/Providers/Trauma/HospitalContactList.pdf

Newsletter Information
By Lance Iversen—EMS Program

We hope you find the PULSE SD Newsletter a valuable and useful resource to keep you informed of what is happening with EMS in South Dakota.

If you or your service/agency has an article you would like us to consider for upcoming newsletters, please send to Lance.Iversen@state.sd.us. We would love to hear from you and share your events, stories, and pictures.

If you would like to automatically receive this newsletter via email, as well as other announcements we send out periodically, you can subscribe/unsubscribe to our listserv by going to our website, EMS.sd.gov. Click on “Subscribe to PULSE SD Listserv” and then follow the instructions.

We also encourage you to visit our website regularly for the most up-to-date information, forms, and resources.
Regional EMS Sessions
By Marty Link—EMS Director

Last winter, the EMS Program held regional EMS sessions to discuss the results of an ambulance assessment, listen and learn about local needs/challenges, and provide a general update on current activities within the EMS Program. These sessions went over so well, we have decided to repeat the sessions in 2017.

The Regional EMS Sessions will be held at the following locations. Times and addresses will be updated on our website once finalized.

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<tr>
<th>Date</th>
<th>Location</th>
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<tbody>
<tr>
<td>October 16(^{th}), 2017</td>
<td>Sioux Falls</td>
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<td>October 17(^{th}), 2017</td>
<td>Watertown</td>
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<td>October 18(^{th}), 2017</td>
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<td>November 27(^{th}), 2017</td>
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<td>Mitchell</td>
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<td>Pierre</td>
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<td>December 13(^{th}), 2017</td>
<td>Mobridge</td>
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Please stay tuned to the EMS Program’s website for the most up to date information on the 2017 Regional EMS sessions.

EMR Legislation and Administrative Rules
By Marty Link—EMS Director

As many of you know, SB48, which introduced the Emergency Medical Responder (EMR) level of certification in South Dakota, successfully passed during the 2017 legislative session. The exact language of the Bill as passed reads, “‘Emergency medical responder,’ any person certified by the Department of Health trained to provide simple, noninvasive care focused on lifesaving interventions for critical patients. The emergency medical responder renders on site emergency care while awaiting additional emergency medical services response from an emergency medical technician or higher level personnel. An emergency medical responder may not make decisions independently regarding the appropriate disposition of a patient.”

SB48 created the EMR level and allowed for promulgation of Administrative Rules. As of this writing, the Administrative Rules have been drafted, circulated for public comment, and held for public hearing. The official rules’ hearing is scheduled for mid-July. The Administrative Rules detail initial certification, recertification, reciprocity, and scope of practice for the EMR. This Administrative Rules package also cleans up and provides clarity for the EMT certification, recertification, reciprocity, and scope of practice.

Please reference the EMS Program’s website for the most up to date information.
ALS Licensure Process
By Margaret B. Hansen—SDBMOE Executive Director

The Board of Medical and Osteopathic Examiners (Board) is the licensing and regulatory agency for Advanced Life Support Personnel (ALS) professionals in South Dakota. All ALS professionals at any level are required to be licensed by the Board in order to work in South Dakota. The application process is conducted in accordance with South Dakota codified law and administration rule. Application is a web-based online process. ALS students are also required to be approved for student status by the Board using the same application procedures.

The first step to apply for a South Dakota license or an ALS student status is to obtain an online account from the Board. The applicant may designate an authorized agent to assist them at any point in the process. Both the online account request form and the authorized agent forms can be found on the Board website. It is helpful for applicants and ALS program directors to review the Board’s General Guidelines for Criminal History prior to making application.

The Board is required to perform due diligence and investigate all applications by obtaining “primary” (meaning directly from the source) verifications. After an application is submitted, a checklist of applicant responsibilities is created. The current status of a license application can be viewed online by the applicant and the authorized agent at any time, night or day. The start date of the application is visible as well as any incoming items. By South Dakota administrative rule, all applications must be completed within 120 days and that date is also noted on the online status preview page.

The Board and the EMS Program are committed to working together to assist, communicate, and inform ALS providers. Please do not hesitate to contact either director at any time: Margaret.Hansen@state.sd.us (605-367-7781) and Marty.Link@state.sd.us (605-367-5372).

Al Johnson Retirement
By Lance Iversen—EMS Program

Al Johnson, EMS Specialist for the Western region of South Dakota, has retired as of May 25th.

Al joined the EMS Program in December of 2012, after serving many years in EMS as an EMT and Paramedic, practicing in Spearfish, Sturgis, and Bell Fourche, as well as many years in EMS education.

To thank Al for all his years of service, Shawn Fischer with Sturgis Fire & Emergency Services organized a surprise retirement party at their annual EMS Week celebration on Monday, May 22nd.

We wish Al and his wife all the best on his retirement and their move.
Recruitment Incentive for Paramedics
By Jill Dean – ORH Recruitment Program Coordinator

The Rural Healthcare Facility Recruitment Assistance Program (RHFRAP) provides a $10,000 payment to eligible health professionals, such as paramedics, who complete a three-year, full-time service commitment. The health professional must enter into a contract with the employing facility and the state. Ambulance services that are eligible for this recruitment program must be located in a community with a population of 10,000 or less. Applications must be submitted by the employing facility with a limit of three participants per employing facility.

Candidates are selected for RHFRAP beginning in July. Slots are limited and the program operates on a first come, first serve basis. Eligible health professional must be employed less than nine months at the time the application is received.

For more information, contact Jill Dean at the Office of Rural Health, 600 E. Capitol, Pierre, SD, 57501, 605-773-2706, Jill.Dean@state.sd.us, or visit our website at http://doh.sd.gov/providers/ruralhealth/recruitment/facility.aspx.

Continuing Education
By Lance Iversen—EMS Program

As all of you are aware, the SD EMS Program transitioned to the National Continued Competency Program (NCCP) beginning April 1st, 2017.

These changes allow a platform for evidenced-based medicine and provides a foundation for the EMS professional to embrace life-long learning.

Ambulance services can provide their own continuing education to their members, or contract with educational companies. If services would like to do their own education, the process is simple. The instructor or coordinator can go to our website and fill out a continuing education application (for BLS) and submit to our office. For ALS continuing education, you can go to the Board’s website and complete an online application. Once received by our office (for BLS), we will email the certificate to the instructor/coordinator to hand out to those in attendance after the training.

Our office does not keep track or log an individual’s continuing education hours. The EMR and EMT can log into their State account on our website to log their hours and also recertify online every two years, otherwise they will need to keep their records of continuing education and submit when time to recertify.

The State requires 24 hours of continuing education for EMTs and 16 hours for EMRs. If you are National Registry, they require 40 hours for EMTs and 16 hours for EMRs. To see what content/topics are required for each certification, please visit our website and/or National Registry’s website. If you have any questions regarding continuing education, please contact Lance Iversen at lance.iversen@state.sd.us or 605-773-4526.
For Questions or More Information, Contact:

South Dakota Office of Rural Health / EMS Program - please visit EMS.sd.gov or call 605-773-4031

SDBMOE - Please visit www.sdbmoe.gov or call 605-367-7781

SIM-SD - please visit www.sim.sd.gov or contact the South Dakota Office of Rural Health 605-773-3361