As most of you have heard, HPP has consolidated the eight capabilities we’re familiar with to four capabilities. These four capabilities were developed based on guidance provided in the 2012 Healthcare Preparedness Capabilities: National Guidance for Healthcare System Preparedness document. They support and cascade from guidance documented in the National Response Framework, National Preparedness Goal, and the National Health Security Strategy to build community health resilience and integrate health care organizations, emergency management organizations, and public health agencies.

The new Capability Goals are on Page 6.

**NEW HPP CAPABILITIES RELEASED**

They’re here all year long, but it’s during these cold, stark days of winter that we take notice of the Northern Cardinal. With the males’ brilliant red plumage they’re breathtaking in our snowy backyards singing their winter melodies.

Typically, cardinals move around in pairs, but in fall and winter they can form fairly large flocks of a dozen to several dozen birds.

Like the cardinal, we too choose to stick it out for the winter, up here in the cold North, singing carols and gathering with family and friends.

Of course our “winter plumage” is likely courtesy of Carhartt or Columbia, but it’s still colorful and gets the job done!

I hope you all have a wonderful holiday season with your flocks!

Sam Hill~ Editor in Chief
On September 4, 2016 severe storms rolled across South Dakota. A severe weather alert was sent out for the Springfield area putting the staff at Avera St. Michael’s in Tyndall on alert. Shortly after midnight on September 5th, a line of storms pushed through Tyndall and Springfield. Tyndall had some damage, but Springfield had definitely taken a direct hit. The nurses on duty were monitoring radio traffic and heard the Tyndall ambulances called out to aid Springfield ambulance service in response to a tornado. The staff immediately called the Director of Patient Services and activated the Emergency Operations Plan. Extra RNs, on-call lab and x-ray and an additional provider personnel were all notified and called in to the hospital. Avera eEmergency was notified of the event as well, and the potential need for their assistance. Staff also updated their HAvBED status as directed in the EOP.

In Springfield, first responders set up a triage station and went about the task of accounting for their citizens. Communications immediately became an issue as the dispatch center quickly became inundated with calls. A fast thinking staffer at St. Michael’s called her husband who was working as an EMT that evening. Continued on page 3
He was posted at the triage station and established communications with the hospital, as well as responding EMS units. Problem solved! “Ya’ gotta love small town America!”, commented Sharon Hauck, Disaster Coordinator at Avera St. Michael’s.

Though there wasn’t a tornado with this storm, it did produce winds over 100 mph as it tore through the town of Springfield.

A severe storm in the middle of the night is any emergency responder’s nightmare. The staff at St. Michael’s knew the potential for mass casualties and stood at the ready to take care of their neighbors. Fortunately, the people of Springfield heard the warnings and were able to take cover. While several homes were damaged and destroyed there were no serious injuries or fatalities associated with this storm.

Just after 2am, St. Michael’s staff received word from the scene that everyone was accounted for and doing well. Staff were released, equipment was returned to its place and the staff at Avera St. Michael’s stands ready for the next one.
December....almost the end of another calendar year and time for all of those New Year’s Resolutions!

It became official in 2016! South Dakota has a Coalition organized for the purpose of assisting healthcare organizations with emergency planning, response, and recovery. The documents outlining the organization (Charter, Bylaws, Governing Board, Executive Director, Regional Leadership etc.) were completed and hopefully there has been time for planning partners to review them. The work of the Coalition is much the same as in the past HPP years; however, the Coalition is a more formal organization.

There are several workgroups this year and the highlights of each group will be briefly summarized. The Executive Director workgroup has responsibility for conducting a search process for a Director to begin with the 2016-2017 grant year. The Executive Engagement workgroup is responsible for ‘reaching out’ to key organizations, to assist with CMS Regulations, and some marketing efforts as a new Coalition. The Patient Movement workgroup is tasked with identifying a regional/statewide process for triage, tracking, and transportation. The Special Pathogen workgroup is also working on a regional response in addition to addressing the Ebola grant funding objectives. The Inter-Regional Conference workgroup has a focus of making the June I-R Conference meaningful, informative, and fun!

The Partnership Project, in addition to supporting the workgroups, continues to address meeting the needs of individuals with access and functional needs or having disabilities (new terminology for at-risk, ‘special’ populations). Personally, I am so pleased to see the discussions, exercise tasks, and funding for equipment/supplies specific to children. It is also encouraging to see the expansion of the 211 Helpline in some of our communities as an organization that can connect resources with ‘needs’.

Can it be possible that we are into the 9th year of the HPP Partnership Project? My New Year’s Resolutions, in behalf of the Partnership Project, are for a smooth transition to the new Executive Director; that the workgroups, with representatives from each Region, complete assignments that truly meet the needs of the smaller to larger facilities (a huge task!); and that senior management recognize and support the efforts of all the planning partners (that’s you!).

Finally, a huge Thank you to the Governing Board, Regional leaders, and all planning partners for your continued support and dedication to the Partnership Project.

Merry Christmas and a Happy New Year

Jan Clites, Consultant/Coordinator
HPP Partnership Project

---

**SD HCC EXECUTIVE DIRECTOR POSITION OPEN**

The South Dakota Healthcare Coalition is hiring for the position of Executive Director. The Executive Director works closely with four regional healthcare coalitions and Governing Board to enhance statewide relationships for healthcare emergency preparedness, response, and recovery.

The Executive Director will be an independent contractor. Minimum requirements include a master’s degree or relevant experience in public health or related field; or a bachelor’s degree and 5 years of appropriate experience; or any such combination of education, experience and training; and at least 2 years’ experience related to emergency planning, response and recovery within a healthcare organization or field. Certification in ICS 100, 200, 700, 800, with completion of 300 & 400 within one year if not currently certified.

Should also have knowledge of the Hospital Preparedness Program (HPP). Contractor fees for this position will be negotiated on an annual basis contingent on Federal/State funding for healthcare emergency preparedness administered by SD Department of Health.

Interested applicants should send cover letter and resume to sodakhcc@gmail.com
Hungry Hungry Hippo says, Bacon Brittle makes a great treat at holiday parties!

Bacon Brittle—Found at ohbitet.com

9×13" baking sheet  1 tsp. vanilla extract
1 1/2 cups sugar  1 tsp. baking soda
1/2 cup light corn syrup  1 lb. crispy and crumbled bacon
3/4 cup cold water  room temp butter, just to coat the baking sheet
Pinch of salt  A clean hammer!

- Brush a 9×13” Baking Sheet with butter and set aside.
- Combine the Sugar, Corn Syrup, Water and Salt in a medium saucepan. Bring to a boil over medium-high heat, stirring until the sugar has dissolved. Cook, swirling occasionally, until mixture reaches the soft ball stage on a candy thermometer (238 degrees). Stir in the crispy and crumbled Bacon, continue to cook, stirring often so the Bacon doesn’t burn, until the mixture is amber in color!
- Carefully stir in the Vanilla and Baking Soda. The mixture will foam up in the pan.
- Pour the mixture onto the prepared baking sheet and quickly spread it evenly.
- Set aside until it’s completely cool.
- Break with a hammer. Enjoy!

C R O C K - P O T  R O D E O - A  P O E M  B Y  S A M  H I L L

There’s something you can find at every celebration,
Office parties, birthdays and high school graduation,
The culinary spectacular, we’ve come to love and know,
An edible extravaganza, called The Crock-Pot Rodeo!

It’s really a marvelous sight to see,
This pageant of slow-cooker crockery.
Tall ones, short ones, oval ones too,
Shiny, stainless steel and 1980’s blue.

There on the counter, lined up in a row,
Giant spoons at the ready. Tiny orange lights aglow.

Behind the scenes, a tangled mass of cords,
Fighting for a plug, and a chance to feed the hordes.

Now, after 8-12 hours of simmering bliss,
It’s finally time for...the lifting of the lids.

A pillar of steam rises from each pot,
Revealing a dish so delicious and hot!

There’s barbecue ribs and creamy mac & cheese,
Hot tuna casserole with carrots and peas!

3 different kinds of meatballs! A crockpot trifecta!
Chili con queso! Now we’ve got us a fiesta!
Cocktail wiener in various sauces,
Worth every minute of heartburn it causes

They’ve gone all day without stirring or basting,
At last they’re all here, just for the tasting,
Now the pots are all empty, it’s the end of the night,
Just some left over sauce, they ate every bite.

As the party wraps up and the cords do too,
The chefs will assess the burnt on goo.
A broken handle and a missing knob,
Just a few hazards of the Crock-Pot’s job.
But after an overnight soak, they’ll be ready to go,
Primed for the next Crock-Pot Rodeo.
THE NEW HEALTH CARE PREPAREDNESS AND RESPONSE CAPABILITIES & GOALS

Capability 1: Foundation for Health Care and Medical Readiness
Goal of Capability 1: The community’s health care organizations and other stakeholders-coordinated through a sustainable HCC-have strong relationships, identify hazards and risks, and prioritize and address gaps through planning, training, exercising, and managing resources.

Capability 2: Health Care and Medical Response Coordination
Goal of Capability 2: Health care organizations, the HCC, their jurisdiction(s), and the ESF-8 lead agency plan and collaborate to share and analyze information, manage and share resources, and coordinate strategies to deliver medical care to all populations during emergencies and planned events.

Capability 3: Continuity of Health Care Service Delivery
Goal of Capability 3: Health care organizations, with support from the HCC and the ESF-8 lead agency, provide uninterrupted, optimal medical care to all populations in the face of damaged or disabled health care infrastructure. Health care workers are well-trained, well-educated, and well-equipped to care for patients during emergencies. Simultaneous response and recovery operations result in a return to normal or, ideally, improved operations.

Capability 4: Medical Surge
Goal of Capability 4: Health care organizations—including hospitals, EMS, and out-of-hospital providers—deliver timely and efficient care to their patients even when the demand for health care services exceeds available supply. The HCC, in collaboration with the ESF-8 lead agency, coordinates information and available resources for its members to maintain conventional surge response. When an emergency overwhelms the HCC’s collective resources, the HCC supports the health care delivery system’s transition to contingency and crisis surge response and promotes a timely return to conventional standards of care as soon as possible.

2017 Capabilities

2012 Capabilities
Introduction to the Incident Command System for Healthcare/Hospitals

This online FEMA course introduces the Incident Command System (ICS) and provides the foundation for higher level ICS training. This course describes the history, features and principles, and organizational structure of ICS. It also explains the relationship between ICS and the National Incident Management System (NIMS). This course uses the same objectives and content as other ICS courses with healthcare/hospital examples and exercises. Click here to begin this class.

Hospitals in Crisis

April 24-25, 2017
Sanford Center-Sioux Falls

Sure to be another great one, this year’s emergency management conference will be held on April 24th and 25th, 2017 at the Sanford Research Center in Sioux Falls. The conference will begin at Noon on the 24th to allow for morning travel and will end at 5PM on the 25th.

The spirit of the conference is “Culture, Community, Communications and Resilience”. Confirmed topics include the Pulse shooting in Orlando, The Fort McMurray wildfires, the Nepal earthquake and more. There will be a special session on the CMS rule and the panel discussion will be directly related to outcomes from the statewide exercise.

Registration will open in early January for coalition partners. Watch for more information coming soon.

Upcoming Webinar: Health Care Preparedness and Response Capabilities

To complement the newly-released 2017-2022 Health Care Preparedness and Response Capabilities, ASPR TRACIE has scheduled a webinar where speakers will share information about the capabilities, including how they have evolved over time and what that means for public health and health care. The webinar will be held on Wednesday, January 11, from 2:30-3:30 EST. To register for the webinar, click here.

Post it here!!

Is your facility hosting a training event?
Did you hear about a great webinar?
Do you have a suggestion for new classes?
If you have training opportunities that you would like to share with the coalitions, please Sam Hill at Samantha.Hill@state.sd.us

SAVE THE DATE!

HCC Inter-Regional Meeting
June 7-8, 2017
Cedar Shores Resort
Chamberlain

Merry Mix-Up 1-H, 2-E, 3-B, 4-G, 5-F, 6-A, 7-C, 8-D
Are you someone who stresses out each year about getting ready for the holidays? Decorating, buying gifts, wrapping gifts, hosting family and friends. And then you have to prepare a feast for everyone too! You might be thinking this chart looks a lot like your EKG from last Christmas. Actually, this is a 5 year timeline of Google search volume in the US for the following recipes: Turkey, Ham, Prime Rib, and Duck. The largest spikes in volume are at the holidays of course. The big red spikes are for Turkey and they occurred primarily each Thanksgiving morning. There is also another smaller spike each year on Christmas morning. Perhaps locating your favorite recipe a little sooner than Thanksgiving morning or Christmas morning might lower one’s stress level? And even though you may not follow the recipe exactly, it is comforting to know you have a basic plan for getting dinner on the table.

This is a lot like the work we do in preparedness. A little advance planning really does lower the stress level during a response (and Christmas dinner.) Even if you don’t follow the plan exactly, or even take it off the shelf, the planning process and the relationships you built will position you and your organization to respond more effectively. Keep up the good work, relax and enjoy the Turkey, Ham, Prime Rib, Duck or whatever you choose.

Happy Holidays,
Bill Chalcraft—Administrator

South Dakota Healthcare Coalition

**Mission:** To enhance statewide relationships for Healthcare Emergency Preparedness, Response and Recovery.

**Vision:** To significantly improve coordination of healthcare resources among South Dakota Healthcare Coalitions.
The Happy Hippo!

WORD

BLIZZARD          SCARVES
BOOTS             SHOVEL
CARDINALS         SLEDDING
HOT COCOA         SNOWBALL FIGHT
ICE SKATING       SNOWFLAKE
MITTENS           SNOWMAN
NO SCHOOL         SUGAR COOKIE

Bonus Word

H _ _ P _ _ O _ _ M _ _ S

MERRY MIX-UP MATCH THE NAME FOR KRIS KRINGLE TO THE CORRECT COUNTRY

1. Pere Noel  a. Italy
2. Julenissen  b. United Kingdom
3. Father Christmas  c. China
4. Weihnachtsmann  d. Poland
5. Kanakaloka  e. Norway
7. Dun Che Lao Ren  g. Germany
8. Swiety Mikolaj  h. France

Answers on page 7