THE HPPO
The Hospital Preparedness Program Observer

USD DISASTER TRAINING DAY

On January 31st SD DOH joined the USD Sanford School of Medicine and the Yankton Rural Area Health Education Center to provide disaster preparedness training for 326 health science students. This is the fifth straight year the training has been funded by DOH’s Public Health Preparedness and Response Program. The purpose of the training is to provide students with the necessary disaster response skills so they can serve as deployable assets in a disaster, augmenting the medical community response efforts. With 8 hours of specific disaster training in the areas of triage, basic disaster lifesaving, immunization, psychological first aid, anaphylaxis and POD’s these healthcare students can provide a valuable resource to local response efforts.

Participants included medicine, nursing, nurse practitioner, physician assistant, clinical psychology, dental hygiene, medical laboratory science, medical social work, pharmacy, occupational therapy, and physical therapy students from USD and SDSU.

Instructors for the training included staff from DOH, Sioux Falls Fire and Rescue, and physicians interested in and involved in disaster preparedness.

BOB BARKER GIVES HIPOO A THUMBS UP!

Ok. That headline is a lie. Bob Barker has never read or even heard of The HiPPO. But doesn’t that picture just make you feel happy?!

I want to thank you all for taking the time to read our new publication. My hope is that it will be useful, interesting, entertaining and relevant for our coalition members. So please keep The HiPPO in mind and shoot me an email if you have something you’d like to share with your colleagues around the state.

And thank you to everyone who contributed to this edition.

~Sam Hill—Editor in Chief

We’ll see you again in May!
FORGOT YOUR PASSWORD?

EMResource system has a new feature. The “Forgot Password” link allows users to reset their own password. But first you there’s a quick setup process that needs to be done to make it work.

If you’ve already forgotten your password, please contact your Regional Coordinator to help you get back into the system.

Once you get logged in, click on Preferences at the top of the page. Click on Challenge Setup. Now you can set up a challenge question for yourself to answer like, first pet or “what was your high school mascot?” Then just click Submit.

So, the next time you forget your password you can click on the “Forgot Password?” button, answer the question and reset it! Tada!

According to password management company SplashData, in 2013 the most commonly used password was 123456.

Worth noting...

#17 was MONKEY.

REGION 1- PLANNING FOR STURGIS 2015

Planning has already started for the Sturgis Rally this summer. And planning is also taking shape for 2015.

The 2015 Rally will be the 75th Anniversary and is expected to be the largest rally yet as motorcycle enthusiasts rumble in from around the world.

Anticipating the influx of visitors, several planning meetings have been organized. Work is being done to explore the possibility of obtaining federal assistance for resource deployment during the event.

Response agencies including Region 1 hospitals, DOH, HHS Regional Staff, EMS, and Emergency Management have already been hard at work to ensure everyone stays safe while enjoying our state.

REGION 2- SPECIAL PROJECTS FUNDS AWARDED

During its January meeting, the Region 2 Executive Committee approved funds for special projects at eight facilities.

The projects will augment a wide range of preparedness activities including the 2014 Statewide Exercise, and facility-level training on the Hospital Incident Command System (HICS), first receiver decontamination, and workplace violence prevention. Additionally, the purchase of equipment for interoperable communication, hospital evacuation, and patient tracking was authorized.

All proposals received at least partial funding.

The Region 2 fiduciary will reimburse awardees upon completion of their project or projects.

We look forward to advancing readiness for our Region 2 facilities.
Saline Shortage

Since December, the Healthcare industry has been facing a nationwide crisis in the availability of IV fluids. Manufacturers have not been able to keep up with demand, and have been allocating out batches of fluids as fast they can make them.

As a result, some of our facilities are finding themselves shorthanded due to backordered supplies and delays in shipping. On a few occasions, our facilities have reached out to their coalition partners for a hand to get them through a few days while they wait for a delivery. Here is a link to the FDA if you would like to track the status of production. In the meantime, thank you to our coalition members for supporting and backing each other up to ensure our communities receive excellent healthcare.

Perfect Score!

Congratulations to Brookings Hospital! In 2013 they had 100% response rate on HAN, HAvBED and Radio for each communications drill. Way to go, Brookings!

Region 4-Report From New Orleans Conference

NHPC

Four representatives from Region 4 attended the National Healthcare Coalition Preparedness Conference in New Orleans on December 11th to the 13th. All found it to be a very informative and worthwhile conference. Information was shared with the Region 4 Coalition at the January meeting and we are hoping to use some of the things we learned at the conference within the coalition in the future. The 2014 conference will be in Denver, Colorado December 10th to the 12th for those interested in attending and representing Region 4.

Our Next Meeting

The next Region 4 Coalition meeting will be held on March 19th in Mitchell. See you then!

Communications Drill

The most recent communications drill had some much improved HAN and HAvBED results. Communication Drill responses on February 19th were 85% response to HAN Alert, 75% radio response and 79% response on HAvBED updates. Good job Region 4! Let’s try to top these results on April 16th.

Mobile Autopsy Suite

The Minnehaha County mobile morgue will be ready and in service this summer. Members of Minnehaha County Emergency Management, SDDOH, SFDOH, Sioux Falls EM, SD Funeral Directors Association and the Minnehaha County Coroner have been developing a comprehensive Mass Fatality Plan for Minnehaha County. Part of the planning has included designing and purchasing a fifth wheel trailer to be retrofitted as an autopsy suite. The trailer, called “MACKS” will have all the tools and equipment needed for the medical examiner to provide full autopsies on site. By bringing this response activity to the scene, remains can be processed and released to families in a timely manner for burial.

Once complete, the plan will be formatted to use as a template for every county in South Dakota. As well, MACKS will be deployable to our entire state.

According to hospital insurance codes, there are 9 different ways you can be injured by turtles.

-Wall Street Journal
The status of the Partnership Project (Project) objectives for this year was pretty thoroughly 'covered' at the January regional meetings. So, in thinking about a contribution to the newsletter, taking a closer look at COOP (Continuity of Operations Planning) is important since this is and will continue to be a major focus of the Project.

We KNOW hospitals and medical facilities are not immune from disasters as we have seen the horrendous results of tornadoes, floods, and fires that have destroyed all or part of a hospital or other medical facility. Continuity planning is, quite frankly, a good business practice and ensures essential or critical business functions such as medical care needed in the community, continuing the use of electronic medical records, and sustaining revenue operations are executed in all circumstances. At the Leadership meeting in October, there was agreement that we need to understand the current status of continuity planning at healthcare organizations as a baseline for future training or other assistance. A survey is being developed with more details coming in the next couple of months. Your participation in the survey is extremely important. In addition, we would like to identify ‘best practices’ so if you/your facility are actively engaged in continuity planning, establishing a Subject Matter Expert (SME) resource list may be helpful to others.

It was apparent to many of us who attended the National Conference that the South Dakota Healthcare Coalition has MUCH strength. That strength is the result of regional and statewide planning, training, exercises and other activities that have been conducted over the past years. Thank you, in advance, for your participation in the Project survey and other activities.

Jan Clites, Consultant/Coordinator
Partnership Project
Jan.Clites@gmail.com

“Vision without action is a daydream. Action without vision is a nightmare”

IT’S MIDNIGHT...DO YOU KNOW WHERE YOUR PODS ARE?

It may be too cold to snow, but it’s not too cold to pass germs!

For years, South Dakota healthcare facilities have worked within communities to develop POD’s (Points of Dispensing). POD’s are designated sites throughout the state that would be set up quickly to dispense emergency pharmaceuticals such as vaccines, antibiotics and antidotes in the event of a widespread illness.

On the map to the left are the locations of established South Dakota POD’s.

If you have any questions about PODs, POD planning or exercises, please contact Chuck Kevghas at the SD DOH for assistance.

Chuck.Kevghas@state.sd.us
The Hungry, Hungry Hippo says, 
"Don't forget the bread!"

**Andy’s Awesome Sauce** –Andy Klitzke Region 2 Coordinator

1 onion, medium, chopped
1 lb. Italian sausage (Spicy or Mild)
2 cans of diced tomatoes, 14.5 oz.
1 can of tomato sauce, 14.5 oz.
1 can of tomato paste, 12 oz.
2 cans of mushrooms, sliced, 4 oz.
1 tbsp. garlic Powder
2 tsp. chili Powder
2 tsp. black Pepper
1 tsp. oregano
½ tsp. basil

Brown sausage and chopped onion over high heat. Drain off excess grease/liquid.
Turn heat to medium, and add diced Tomatoes, tomato sauce, tomato paste, and mushrooms.
Stir in garlic powder, chili powder, black pepper, oregano, and basil. Simmer at low heat
Stir sauce occasionally and reduce heat if it bubbles. Serve over pasta with Parmesan cheese.

*A note from the Chef*– An old Klitzke-family recipe, circa 2004. Makes roughly 3 quarts of spaghetti sauce. Keeps very well. Sometimes better after it’s been frozen for 2 weeks. (This is the recipe that kept me alive through college!)

**WINTER – A SNARKY POEM BY SAM HILL**

The cardinals return, a brilliant red,
Cute little squirrels gather twigs for a winter bed.

The kids watch the news with great anticipation,
Will it just be a late start or a snow day vacation?

“School is closed!” announces Shawn Cable,
So we bust out the board games and head for the table.

But first a quick call, to let the boss know,
I won’t be coming in, on account of the snow.

Now a snowman takes shape as the kids play outside,
While I settle in for Days of Our Lives.

Ahh yes, that first snowfall in November,
A day that we all so fondly remember.

But now it’s March, and winter won’t go.
It’s been three freakin’ months of twenty below.

A polar vortex has replaced a crisp breeze,
Plunging the Midwest into an arctic freeze.

My car is filthy and covered in chemical,
If it survives all these pot holes, it’ll be a Christmas miracle.

Half downed twinkle lights hang from the eave,
As I toss another shovelful with a twist and a heave.

“Just six more weeks of winter”, says that stupid groundhog,
As I plead at the back door with my unwilling dog.

And oh hooray! My swing shift neighbor is just home from work.
Snow blowing at midnight! Man, what a jerk!

What? What’s that you say? Schools are closed for another snow day?
Great. I’m out of vacation, so now it’s leave without pay.

Even the kids are sick of winter’s wrath,
Instead of going outside they’re doing their math.

And sadly, our snowman has met his demise,
Those vicious squirrels ate his nose... and one of his eyes.

Cough. Sneeze. Oh no! What have I got?
It can’t be the flu! I was good! I got my shot!

As I lay in my bed with fever and chills,
Sucking on lozenges and taking my pills

I remind myself that spring is just around the corner,
And soon our days will be 80 degrees warmer.

The snow will melt and the grass will turn green,
The flowers will bloom and my car will be clean.

So I guess I’ll do what the doctor said,
Drink plenty of fluids and stay in bed.

But as I drift off to sleep I’ll think of the sun,
And dream of the day when this winter is done.

The Hungry, Hungry Hippo says,
"Don’t forget the bread!"
Douglas County Memorial Hospital, Armour, SD and the Armour Ambulance were asked by Pat Vanhunnik, SD Dept. of Health and Intermedix to participate in an Emergency Response Pilot Project. This project utilizes a web-based software program (HICS/EMResource) to enhance and study response times in a rural healthcare setting.

Rural healthcare in America is oftentimes limited not only by resources, properly trained personnel, but also by travel distance. Rural EMS faces unique challenges when responding to the emergent needs of community patients, treating them and transferring them to a healthcare facility. These healthcare facilities are generally staffed adequately 12 hours of the day, but minimally staffed during the remaining 12 evening and overnight hours.

Historically, when EMS is dispatched to a patient in need, the patient is stabilized and transferred to a local healthcare facility. If the patient arrives during the minimally staffed hours, the healthcare facility calls in a Provider to assess the patient. Once the assessment is complete, the Nursing staff calls in necessary lab, X-ray or respiratory therapy staff for further testing. This method is somewhat cumbersome and time consuming and, in some cases, can have a negative effect on the patient outcome. This negative effect can sometimes be attributed to the distances “call back” staff needs to travel to get to the facility. The goal of this project is to determine how a quickened response time from hospital “call back” personnel can affect patient outcome during the first “Golden Hour” of treatment.

During 2013, the call back of hospital staff (provider, lab, X-ray and respiratory therapy) was initiated by EMS personnel in the field. This method proved inconsistent and unreliable due to spotty internet connectivity in rural areas. Approximately 12 months into this project the Lake Andes 911 dispatch agreed to take over alerting call staff via the EMResource website. Having the 911 staff handle this portion of the project has helped tremendously and they have been using EMResource since 1/1/14. 911 will continue in this manner for the remainder of 2014 at which time, the web based alerting method will be compared to the previously utilized method. It is hoped that this study will prove that dispatching call staff via the internet will result in more efficient patient care rather than having the hospital Nursing staff calling hospital personnel individually once the patient assessment is completed at the healthcare facility.

Heather Messer, MT (ASCP)
Region 4
Disaster Preparedness Coordinator
Douglas County Memorial Hospital
Armour, SD

Canton Hospital Responds to Bus Crash

Six students were injured when a Canton school bus ran into the back of a garbage truck just before 8am on February 3rd. Five students were taken to Sanford Canton-Inwood Hospital. The Highway Patrol stated that the students, some needing stitches and others with dental injuries, were all treated and released.

Hospital Emergency Manager, Greg Briden, who was also a responding paramedic at the scene, stated that when he arrived at the ER one of the first things he did was update the hospitals status in HAvBED. This update from green to red sends an alert to DOH. Because of Greg’s readiness and a quick click of a button, we were able to monitor the situation and be prepared to bring in support from the coalition if needed.
**HICS NAME CHANGE**

The EMResource system has made some changes. Most notable is that HICS has been renamed. It is now eICS. The system is the same, just a name has changed.

Also, when creating an incident, you have been able to choose individual contacts to receive or not receive the voice notification of the event. With the next update, you will now be able to also select individuals to either receive or not receive the email and text notifications as well.

This will be beneficial when you’re running drill, having exercises or are just testing in the system. For instance, if you are running an exercise but maybe don’t want your administrators to be bothered because they’re in a meeting about the huge raise you’ll be getting. This will now allow you to uncheck the box for voice AND email/text so that they do not receive any notifications at all. (And you might just get that raise!)

**SERVSD THANKS VOLUNTEERS**

In January, SERVSD sent a thank you gift to 850 healthcare professionals registered with SERVSD.

Each volunteer received a pocket training guide that gives an overview of personal and family preparedness before, during, and after a volunteer deployment.

Healthcare professionals can find more information, including videos of how to register with SERV SD, by visiting our website at [http://serv.sd.gov](http://serv.sd.gov).

> “What we do for ourselves, dies with us - what we do for others remains and is immortal.”

~Albert Pike

**SPRING TO-DO LIST FOR YOUR YARD**

- **Check for signs of growth.** Did you remember to plant snow crocus last fall? If not, cut forsythia or magnolia branches to bring inside for forcing to get a dose of early spring color.

- **Prep the beds.** Remove winter mulch and freshen up beds with and new layer.

- **Prune.** Now is the time to trim fruit trees if you didn’t prune in winter. Prune before buds begin to break into bloom or you’ll stress the tree and get a tiny crop.

- **Perform basic maintenance.** Check stonework for frost heaves. Check and clean the deck now so you don’t have to do it later; make any repairs.

- **Plant veggies.** Hardy vegetables, such as onions, potatoes, artichokes, and some lettuces, should be planted in early spring.

- **Divide perennials.** Before plants have begun spring growth is a good time to divide many perennials. Share some divisions with your friends this year.

**The ugly side of spring.**
On January 5th, 2014, subzero temperatures and howling winds pummeled Tyndall, SD. Staff and patients at St. Michaels Hospital Avera were prepared for a cold night. But the evening would soon take a turn when they were suddenly faced with an HVAC failure that began pulling exhaust fumes from the boiler into the building. A maintenance supervisor was called to investigate and determined the boiler would need to be turned off in order to fix the problem. Thus, leaving the hospital without heat.

The nursing staff took actions to improve the air quality, but the building was beginning to cool. They then initiated their Emergency Operations Plan (EOP). The Health Unit Coordinator on duty updated the HAoVBed status by changing the ER status from green to orange and a call was made to a senior administrative team member. Upon arrival to St. Michaels she assumed the role of Incident Commander and established an Incident Command Post at the nurses station.

The safety of staff and patients was of utmost importance and was continuously being assessed. Referring to the EOP, the team evaluated the potential to shelter in place and reviewed triggers for initiating an evacuation if need be. The IC then followed the protocols in the Evacuation Plan and contacted the Emergency Manager, EMS/911, fire, healthcare partners and appropriate in-house resources to notify them of a possible evacuation. Fortunately, the quick actions of the facilities team led to a successful repair and HVAC operations were back to normal within a few hours.

The staff of St. Michaels credits planning and preparedness for their unified response to this actual event. The hospital staff was trained and exercised on how to initiate the Emergency Operations Plan and how to execute the Evacuation Plan. The Health Unit Coordinator was trained in HAoVBed. The Incident Commander used lessons learned from the April 2013 statewide drill and was familiar with the expected progression of the event and the response, making her first run at Incident Commander less daunting. HPP funded training and exercises played a big role in their success. But it’s St. Michaels committed staff that is prepared to take action to protect their patients and their ability to serve their community.

Sharon Hauck, RN
Region 4
Disaster Preparedness Coordinator
St. Michaels Hospital Avera
Tyndall, SD

SMALL IOWA CITY EVACUATED DUE TO CHEMICAL FIRE

NORTHWOOD, Iowa (AP) — Authorities ordered the evacuation of an entire northern Iowa city Thursday, February 20th as firefighters battled a fire at a fertilizer plant. Iowa State Patrol spokesman Scott Bright said the fertilizer used for crop dusting contains sulfuric acid, and that the evacuation was necessary to prevent residents from breathing in that chemical. The fire broke out Thursday morning at the plant at Northwood Municipal Airport, about a mile east of the city.

Mercy Medical Center-North Iowa in nearby Mason City said four Northwood residents walked into the hospital seeking treatment. “Some of the general symptoms that we are expecting include vomiting, nausea and respiratory conditions,” said hospital spokeswoman Amanda Franzen.

The Mason City Globe Gazette reported several residents heard explosions when the fire broke out. Highway 105, a main artery in Northwood, was blocked off near the fire.

Northwood, with some 2,000 residents, is located on the Minnesota state line, about 130 miles north of Des Moines.
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.
MESSAGE FROM THE ADMINISTRATOR

Coalition Partners:
We all owe a round of thanks to the Coalition Development Committee for their time and expertise exploring options and alternative structures to best position our planning regions as long-term, self-sustaining coalitions. After extensive discussion and review of alternatives, the committee is recommending that we continue coalition development utilizing our current structure. The advantages of planning, training, exercising, and responding within this structure, over the last 10 years, far outweigh the potential benefits other structures offer.

It is our hope the federal government continues to realize the value a prepared hospital and even more, a prepared coalition of hospitals and response partners brings to a community, region, state, and nation. Realistically however, the funding outlook to support healthcare coalitions is not bright. In fact, we are anticipating a 30% reduction in hospital preparedness funding to South Dakota for the year starting July 1st.

It is even more critical now that each and every one of us continue to extol the benefits of planning, training, exercising, and responding as partner coalitions to our administrators, boards, councils or other decision makers. If they don’t see the value, we have small hope of continuing these important efforts. We really have had an impact over the years and continue to learn, improve and enhance our collective preparedness. Please visit with your Department of Health regional preparedness coordinator if you need concrete examples of how your facility, your coalition, or the state has benefited from these efforts. Thanks to the committee and to all of you for what you do to prepare, respond, and recover.

Bill Chalcraft
Administrator, Office of Public Health Preparedness and Response
South Dakota Department of Health

Contact Office of Public Health Preparedness & Response Staff

Administrator
Bill Chalcraft
Bill.Chalcraft@state.sd.us
605-773-3907

Assistant Administrator
Rick LaBrie
Rick.LaBrie@state.sd.us
605-773-7377

SNS/PODS
Chucks Keyghas
Chuck.Keyghas@state.sd.us
605-773-2792

Training
LaJean Volmer
LaJean.Volmer@state.sd.us
605-773-7593

Region 1
Pat VanHunnik
Pat.VanHunnik@state.sd.us
605-773-2791

Region 2
Andy Klitzke
Andy.Klitzke@state.sd.us

Region 3
Samantha Hill
Samantha.Hill@state.sd.us

Region 4
Carol Taylor
Carol.Taylor@state.sd.us
605-367-7496

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.
Severe Weather Training

Each year the National Weather Service offices in South Dakota provide community presentations on severe weather spotting, awareness and preparedness. To find out when one is happening in your neck of the woods, just click the links below.

Click here for the Aberdeen Weather Service schedule.
Click here for the Sioux Falls Weather Service schedule.
Click here for the Rapid City Weather Service schedule.

Is your family prepared to take care of themselves in an emergency?

With warmer weather around the corner, flooding, tornadoes, severe storms and the like are sure to make an appearance. As healthcare professionals, we all play a critical role in keeping our communities safe. We plan, train and exercise all year long on how we will respond to a variety of events that may affect our hospitals, clinics and other facilities. But we don’t always make the time to prepare our homes and our families.

Severe weather can happen anytime and anywhere. Often times, families aren’t all in the same place. Parents are at work or out running errands. The kids are at daycare, the park, or even at home alone while you make a quick run to the grocery store. We know can’t always be there in an emergency, so it’s imperative that your family is prepared. If you’re not home when a tornado sirens sound, do your kids know where to go for safety? Do they know where to go for reunification? Did your family build a kit and place it in a safe and accessible space? There are simple things that you and your family can do to ensure everyone is safe during an emergency. For more information on how to build a kit, make a plan and get trained just click the bReadySD logo.

Severe Weather Awareness Week—South Dakota
April 21-25, 2104

Statewide Tornado Drill—Wednesday, April 23rd.

Tornado Watch will be issued at 10:00am (CDT) 9:00am (MDT)
Tornado Warning will be issued at 10:15am (CDT) 9:15am (MDT)
Community sirens will sound.
The Happy Hippo!

WORD SEARCH

N B G S H L L C C H B J T C A
Z O N E K E O A N L E Y O N W
Q K I I V O A N T R I A W G A
X P N T P D N L A I L N F P R
L S I I A N L P T I P B I R D
P Y A L Y C E Z T H S Q C Y
R W R I N R I I D F C D O Y E
H T T B P X O N B F J A D H A
X K D A B N U L U J L U R H R
H I P P O P O T A M U S I E O
C M I A F A H M M H M H L J H
E S I C R E X E Y O A O L G K
N O I T A R O B A L L O C I R
Q Q V T T C A K R E G I O N S
F Q X W D N R I N E P E F P V

AWARD YEAR
CAPABILITIES
CLINIC
COALITION
COLLABORATION
COMMUNICATION
COOP
DRILL
EXERCISE
HEALTHCARE
HOSPITAL
PREPARE
REGIONS
TRAINING

Bonus Word
H _ _ P _ _ O _ _ M _ S

MEDICAL MIX-UP! — MATCH THE TV HOSPITAL TO THE CORRECT SHOW!

1. Seattle Grace Mercy West Hospital
2. Sacred Heart Teaching Hospital
3. County General Hospital
4. Seaside Wellness/St. Ambrose Hospital
5. Princeton-Plainsboro Teaching Hospital
6. St. Eligius Teaching Hospital
7. Eastman Medical Center

a. Scrubs
b. Private Practice
c. St. Elsewhere
d. Doogie Howser, MD
e. ER
f. Greys Anatomy
g. House, MD

Answers on page 11