Thank you to everyone who attended this years South Dakota Healthcare Coalition Interregional Meeting at Cedar Shores in Oacoma.

Our series of COOP training sessions with Nora O’Brien wrapped up with her presentation at the meeting, stressing the importance of having COOP plans and support in place.

Leacey Brown, Gerontology Field Specialist from SDSU Extension gave a very dynamic presentation about different ways healthcare facilities can connect to and interact with an aging population in South Dakota.

This years HCC Awards were presented to Avera Heart Hospital for Response, Avera McKennan Hospital for Partnership. Congratulations to all of you!

Great skill and prowess was once again evident in the interregional volleyball game. The ball stayed out of the river and no injuries were reported. However, some people, not naming names, (Gordon Dekkenga) thought diving under the net to tackle the opponent was allowed! We’ll work on clear rules for next year.

And we all owe a HUGE THANK YOU to Jan Clites for all of her planning and work on this years gathering of the minds. Jan is the greatest!

We hope to see you all at next years SD HCC Interregional Meeting.

Pictured with their HCC Awards are Steve Lee-Avera Heart Hospital, Julie Schultz-Avera Weskota and Kevin Schlosser-Avera McKennan.

The flower pots are filled with colorful blossoms and the early evening sky is lit up by fireflies. The lawn is looking great, and half of your fridge is occupied by a watermelon, as it should be. And by now, you’ve probably given up trying to defy the birdfeeder-emptying squirrels.

Now it’s time to just enjoy the summer! Weekends hanging out with family and friends at the river or lake, or just running through a sprinkler in the yard with the kids. And that grill should be fired up at least three times a week!

Make sure you take some time to enjoy these summer months. Before you know it, you’ll be swapping out that mower for a blower.

Have a terrific summer!  
   -Sam Hill– Editor in Chief
A few months ago Heather Messer from Douglas County Memorial sent me this link. It’s a “video game” put out by LA Children’s Hospital that deals with hospital surge, triage, mental health, safety issues, etc. Basically, as the player, you are the incident commander and you are overseeing an event with a large patient surge. When I say “large” patient surge, I mean LARGE!

As you begin play, you’ll hear the ambulances arriving with your patients. They have varying vitals and you are to triage and treat them. Some patients may need just simple first aid while others require ICU. And if you don’t get them quickly enough, they end up in the morgue.

As if that isn’t enough, you have nurses and doctors who need a break, so you have to manage staffing, mental health needs, spills on the floor, coding patients, etc.

It’s pretty nutty at first, but after awhile you get the hang of it. Make sure you turn on your speakers, and lock the door to your office. There is no pause button. So if you get distracted for just a few seconds, things can go very bad.

Click here to start playing! Ummm….I mean training.

On June 12th over 40 people gathered in Rapid City for an ESF 8 Table Top Exercise in preparation for this year’s Sturgis Rally. Participants included representatives from hospitals, EMS agencies, air medical services, state, county & local Emergency Management, SDDOH, county dispatch, SD Homeland Security, and Federal partners from HHS and the US Park Service.

The group worked two scenarios with the first being multiple incidents in the northern and southern hills, and Wyoming. They worked through patient movement, coordination between EMS and hospitals, issues of travel time during peak rally hours and communications with unaffected organizations including DOH, County EM’s and the Rally Operations Center (ROC)

In the second scenario they took on a concert venue bleacher collapse at a campground with initial reports being 30 injuries and 10 fatalities. This called for ramping up to a state-level mass casualty incident involving responses from EMS and hospitals in the Black Hills as well as activation of the National Guard and State and Federal resources.

This multi-agency exercise was a great opportunity to work through two of the potential events that the ESF 8 planning group has been preparing for. Special thanks to Dustin Willet and Mark Enright from Pennington County Emergency Management and Brent Kolstad from SD OEM for designing the TTX.

It’s not everyday that a South Dakota hospital gets a call from the Secret Service. But back in April of this year, Prairie Lakes Hospital in Watertown got the call.

With President Obama’s planned trip to deliver a commencement speech to the Lake Area Tech class of 2015, preparedness was a theme all around town. Including a visit from two Secret Service agents at Prairie Lakes.

Staff toured the two agents through the facility. They asked about Prairie Lakes capabilities such as, x-ray, surgery, how many beds, what different disciplines of physicians were on staff etc. They also noted entrances and checked the helipad in case they needed to use it for evacuation.

Shelly Turbak, Chief Nursing Officer at Prairie Lakes said “It was really pretty quick. They were only here for 30 minutes max.” Shelly added, “When they asked us about an Incident Command System and decon capabilities it was great to say we had those systems in place.”

Of course, the President did not require the services of Prairie Lakes Hospital, but through planning, training and exercise, the facility and staff were ready!
**REGION 3 - NEW MEMBERS**

Region 3 has added a few new members to our roster over the past few months.

**Brent Garner** works for the South Dakota Air National Guard as a Public Health Manager. MSGt. Garner works with community partners on public health matters, while fulfilling his duty protecting the health of the men and women of the Air Guard.

**Jon Groen** with the South Dakota Fusion Center in Sioux Falls has also joined. The Fusion Center uses intelligence information from law enforcement, public safety, emergency response, public health, and other partners to prevent, protect against, and respond to crime and terrorism. Jon will serve as a liaison for the Fusion Center and the SD Healthcare Coalition.

**Corolla Lauck** with Emergency Medical Services for Children (EMSC) will also be bringing her input to the Region. Corolla works with EMS and hospitals around the state by providing training to increase skills and needed resources for providing emergency pediatric care.

Welcome to Region 3 and the SD HCC! Click on the logos to see more about these agencies.

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**REGION 4 - REMINDERS!!**

**Annual EOY Report Form Coming Soon!!**

The annual end of year hospital report will be placed on the HAveBED system soon for completion. We will notify all hospitals when that is ready and needs to be completed.

Hope everyone has a safe and enjoyable 4th of July holiday!

**It's EOY Funding Report Time!**

Please remember to submit your Award Year 13 Funding Reports by the end of July. You will soon be hearing about the Award Year 14 HPP Grant funding.

**Next Meeting**

The next Region 4 HCC meeting will be held on July 22nd at 1:00 p.m. This has been changed from July 15th due to conflicting meetings.

Hope everyone has a safe and happy 4th of July!

- Carol

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**FATALITY MANAGEMENT UPDATE**

MACKS, our mobile autopsy suite has been on the road! MACKS was at the 2015 SDHCC Interregional Meeting in June in Oacoma. Thank you to everyone who stopped by and took a look inside. MACKS was also set up at the 2015 SD Funeral Directors Association Annual Conference in Sioux Falls.

Many of the attendees took tours to learn more about this new asset our state has available to us in the event of a Mass Fatality.

The Mass Fatality Planning Committee will be attending a course in October at the National Transportation Safety Board (NTSB) Training Center in Virginia. The class, Transportation Disaster Response – Managing Transportation Mass Fatality Incidents: A Course for Emergency Managers, Law Enforcement, and the Medical Legal Community, will be a great class as we continue to develop a comprehensive plan for our state and counties.

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**The First Firecrackers!**

Between 600 and 900 A.D., Chinese alchemists—perhaps hoping to discover an elixir for immortality—mixed together saltpeter (potassium nitrate, then a common kitchen seasoning), charcoal, sulfur and other ingredients, unwittingly yielding an early form of gunpowder. The Chinese began stuffing the volatile substance into bamboo shoots that were then thrown into the fire to produce a loud blast. The first fireworks were born.

-Projections show US consumers could spend a record $725 million on sparklers, cones, fountains and other consumer fireworks this year!

- Washington Business Journal
Dear Healthcare Coalition Partners,

June 30th brought the 7th year of the Partnership Project to an end. Details were shared at the Inter-Regional meeting and will be continued agenda items at the Regional level. Making a decision about the organizational model for the Healthcare Coalition was a great achievement and now the formal Charter, By Laws, and other supporting documents will follow.

Regional funds were used to purchase Triage Cards and publications on Standards of Care, HICS, and COOP to support local planning and response efforts. If you have not received these items at meetings or within the next few weeks, please contact your Regional Coordinator. Also, watch for the COOP guides to be added to the eICS library.

The Partnership Project tasks established at the beginning of the year have been and continue to be in various stages of achievement. The progress we’ve made is the result of a collaboration among those in leadership positions and individual members who shared their talent and expertise with the coalition. And most certainly their time, which was often over and above the usual daily duties. I’d also like to recognize our fiduciary agents who have taken on the added responsibility for review and record keeping. Your additional work for the good of the coalition is appreciated.

It has been an honor and pleasure to work with each of you and your Regions through the Partnership Project and I can’t thank you enough for your time, input, support and friendship!

I hope you all have a wonderful summer,

Jan Clites
Clites Consulting

First Responder Guidance Released

The Department of Homeland Security (DHS), in coordination with the Departments of Defense, Health and Human Services, Justice, and Transportation, has released “First Responder Guidance for Improving Survivability in Improvised Explosive Device and/or Active Shooter Incidents.”

The DHS Office of Health Affairs led the development of this document at the request of the National Security Council’s working group on improvised explosive device (IED) situations and in response to first responders who have encountered mass casualties from IEDs and/or active shooter incidents.

This first responder guidance provides evidence-based response strategies based on best practices and lessons learned from civilian and military IED and/or active shooter incidents.

The recommendations presented—early, aggressive hemorrhage control; personal protective equipment (which includes ballistic vests, helmets, and eyewear); and greater first responder interoperability and incident management—will help to save lives by mitigating first responder risk and improving the emergent and immediate medical management of casualties encountered during IED and/or active shooter incidents.
Greetings of “You poor thing!” and sympathetic sighs
Had soon turned to jokes about lobsters and fries.
There they all stood with their healthy summer glows,
And me looking like Rudolph with my bright red nose.
After one accidental nap on a blanket by the lake,
I’m now peeling off skin like a molting snake.
I should have known better, that day at the beach,
SPF 30. It was right there! It was within my reach!
But as every mother will all too often do,
I forgot I needed to take care of myself too.
What was supposed to be three days of summertime bliss
Is now simply summed up with a spit-sucking hiss
So before you embark on your next weekend trip,
I offer to you this helpful little tip.
Rest and relax! Treat yourself like a queen!
But do yourself a favor...
PUT ON THE SUNSCREEN!!
In early June a pharmacist in eastern South Dakota reported a customer acting suspicious. The pharmacist stated that the customer comes in weekly and purchases multiple Benzedrex® nasal inhalers. The pharmacist also reported that the customer always appears fidgety and nervous. Benzedrex® has gained popularity as an over the counter high. Benzedrex® contains the drug Propylhexedrine which is a stimulant and can be purchased over the counter with no restrictions. Benzedrex® does not contain Sudafed® so purchases are not logged.

Open source research indicates Benzedrex® is abused by removing the cotton wick found inside the container. The wick is then soaked in a weak acid such as lemon juice and drank, or dried out to produce crystals. Some people are reported to have eaten the cotton to get high. Users describe the high as similar to that of methamphetamine, but state that the crash is very harsh. The high can last up to eight hours depending on the dose taken. It is sometimes referred to as “kitchen crank”.

Propylhexedrine can cause headache, tremors, chest pain, palpitation, rapid respiration, dilated pupils, tachycardia, myocardial infarction, psychosis, nausea, pulmonary edema, and sudden death.

**THE SIGNS OF HEATSTROKE**

As the hottest days of summer are still ahead of us, we’re likely to see more and more cases of heat related illnesses and injuries coming into our clinics and hospitals. Or even in our own homes.

With the elderly and children being at a higher risk for heat related emergencies it’s important for all of us to know how to recognize the signs and symptoms and begin providing treatment as quickly as possible.

**Click here** for The Children’s Safety Network’s info graphic on Peds and Heat Emergencies.

**Heat Cramps and or Heat Exhaustion:**

**Signs and symptoms:**
Skin is moist, pale, or normal-to-cool. Muscular cramps, weakness, rapid shallow breathing, weak pulse and heavy perspiration.

**Treatment:**
*Cool and pale - raise the tail* (feet)
Remove patient from hot environment
Loosen or remove clothing
Provide small sips of H2O
Call 911

**Heat Stroke:**

**Signs and symptoms:**
Skin is hot and dry. Rapid shallow breathing, full rapid pulse, generalized weakness, little to no perspiration, altered mental status, seizures.

**Treatment:**
*Hot and red - raise the head.*
Remove patient from hot environment
Remove clothing
Provide cool packs to neck, groin and armpits
Call 911
THE HOSPITAL PREPAREDNESS PROGRAM OBSERVER

SUSPICIOUS ACTIVITY REPORTING INITIATIVE

The Nationwide Suspicious Activity Reporting (SAR) Initiative (NSI) has developed SAR awareness training for key non-law enforcement constituencies, or “hometown security partners,” who are important to the SAR effort. The everyday duties and responsibilities of public health and health care professionals place them in a unique position to observe suspicious activity that, when viewed within the totality of circumstances, may indicate pre-operational planning of a terrorist-related incident.

This awareness training is designed to assist public health and health care professionals in understanding their critical role as homeland security partners; recognizing what kinds of suspicious behaviors are associated with pre-incident terrorism activities; understanding how and where to report suspicious activity; protecting privacy, civil rights, and civil liberties; and ensuring compliance with applicable patient confidentiality laws.

The integration of public health and health care professionals into the SAR process and the information sharing activities of state and local fusion centers will benefit the collective homeland security effort by enhancing the preparedness of public health and health care organizations across the country, while supporting the prevention, protection, response, and recovery efforts of all homeland security partners.

Click here to learn more or to begin on-line training.

OSHA AND NIOSH RELEASE HEALTHCARE TOOLKIT

May 14, 2014

WASHINGTON – The Occupational Safety and Health Administration and the National Institute for Occupational Safety and Health released the Hospital Respiratory Protection Toolkit, a resource for health care employers to use to protect hospital staff from respiratory hazards. “Appropriate respiratory protection is a vital line of defense against airborne hazards hospital workers might face on the job,” said NIOSH Director John Howard, M.D. “This toolkit is an important resource to help health care employers ensure their workers are out of harm’s way when it comes to respiratory hazards.”

The toolkit covers respirator use, existing public health guidance on respirator use during exposure to infectious diseases, hazard assessment, the development of a hospital respiratory protection program, and additional resources and references on hospital respiratory protection programs. Appendix D is an editable document that each hospital can customize to meet its specific needs.

Click here to read full press release.

DID YA’ KNOW?

John Adams and Thomas Jefferson, the second and third presidents, respectively, both signed the Declaration of Independence and both died on the 50th anniversary of the signing.

ESSENTIAL TOOLS FOR A GREAT NIGHT OF GRILLING

Grill and fuel - No matter if you choose a propane or charcoal model, invest in a grill that fits your needs. And make sure you have plenty of propane or briquettes on hand.

Long-handled tongs - Grilling forks pierce the meat and causes you to lose flavorful juices. Instead, opt for stainless-steel tongs!

Long-handled Spatula - Those burgers aren’t gonna’ flip themselves! Silicone and metal spatulas work best on the grill.

Long-handled basting brush - For those last few splashes of your favorite sauce before you take it off the grill. Look for one with heat-resistant silicone bristles.

Instant-read thermometer – Safety first! Check your temps before serving.

Garbage can and paper towels – Even the best grillers drop a hot dog every once in a while.

Fire extinguisher – Just in case...

“Your blood test came back 80% prostate and barbecue sauce. May I ask just how often you grill out.”
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.

The Educated Hippo!!

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 contact Sam at the HiPPO!
Samantha.Hill@state.sd.us

Answers from page 10
1-B 2-G 3-A 4-E 5-H 6-D 7-C 8-F
MESSAGE FROM THE ADMINISTRATOR

Dear Partners in Preparedness:

Within a few weeks, bikers from all over the world will start to descend upon South Dakota for the 75th annual motorcycle rally. The August 2015 event is projected to be the largest ever with attendance estimates ranging from 500,000 to over 1,000,000. This one event effectively doubles our state population over a two week period. This huge influx of people adds significant patient loading to the Black Hills healthcare system. Many attendees are older now and aren’t quite as able to handle the heat and other stressors commonly associated with attending the rally.

Region 1 Healthcare Coalition members have been planning, preparing, and exercising specifically for the 2015 rally for over a year now. Local and regional emergency management, federal Health and Human Services representatives, and other local and state response partners have joined us in this effort. I want to highlight a few of these preparations.

South Dakota National Guard medical personnel and equipment will be conducting annual training in the Black Hills during the rally and have been included in mass casualty response planning. This includes both air and ground assets which could be quickly re-directed from their training mission. Wyoming hospitals and emergency medical services entities have also participated in response planning. North Dakota resources such as large capacity patient transport vehicles will be pre-positioned in strategic locations for quick response. Mass fatality equipment and mass casualty supply trailers will be pre-positioned for rapid response. Local air ambulance services are augmenting existing airframes with additional airframes located in critical areas of the Black Hills. Rapid response medical tents will be erected with critical supplies ready for mass casualty surge events.

Black Hills area health care partners have cancelled or curtailed leave, planned for additional reserve staffing, limited elective procedures where possible and in many other ways increased their normal capacity to respond. The South Dakota Office of Emergency Management will be activating a Regional Emergency Operations Center at Camp Rapid. This center will include state, local and federal personnel from many different agencies and will serve to maintain situational awareness for response partners as well as coordinate additional local, state, and federal resources should the need arise.

Andy Klitzke, our Hospital Preparedness Program Coordinator and Region 1 Coordinator has led these efforts and I applaud his leadership. Region 1 coalition members are also commended for the many hours of planning that were required to get us to this level of preparedness as well as for their knowledge and innovative thought. We are all hopeful these preparations will not be required for a mass casualty event, however it is re-assuring to know these efforts have taken place. Thank you all for your commitment.

Sincerely,
Bill Chalcraft – Administrator

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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 SEARCH - FUN ON THE 4TH OF JULY!**

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

AMERICA  
APPLE PIE  
BARBECUE  
BURGERS  
CAMPING  
FIREWORKS  
FLAG  
HOTDOGS  
INDEPENDENCE DAY  
LEMONADE  
PIC-NIC  
POTATO SALAD  
SPARKLERS  
US MILITARY

**Bonus Word**

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

**Happy 4TH OF JULY**

**WHO’S IN YOUR WALLET? CAN YOU MATCH THE NAMES WITH THE FACES?**

A. Andrew Jackson
B. George Washington
C. Benjamin Franklin
D. Ulysses Grant
E. Alexander Hamilton
F. Abraham Lincoln
G. Franklin Roosevelt
H. Thomas Jefferson

Answers on page 9

1. ___ 2. ___ 3. ___ 4. ___ 5. ___ 6. ___ 7. ___ 8. ___