

THE HPPO

The Hospital Preparedness Program Observer

MARCH 19, 2015

NEW DOH SECRETARY OF HEALTH

-BARB BUHLER

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Gov. Dennis Daugaard has appointed Kim Malsam-Rysdon as Secretary of Health.

Malsam-Rysdon has held the position in an interim role since December following Doneen Hollingsworth's retirement after 19 years as secretary.

"Public health has never been more important as we see the need to respond to emerging issues such as Ebola and a recent outbreak of contagious diseases like measles", said Gov. Daugaard. "Kim will not only be able to lead our state's response to these issues but also ensure we are doing all we can to address chronic diseases

and access to quality health care services across our state".

Malsam-Rysdon will continue to serve as senior advisor to the Governor and as a member of the Governor's Executive Committee. She previously served as Secretary of the Department of Social Services.

"I appreciate the ability to serve the state of South Dakota in this role and look forward to leading our state's health department," said Malsam-Rysdon. "Public health issues and access to health care are critical issues that impact individuals and families across South Dakota. I look forward to

working with stakeholders throughout our state to address these needs."



Kim Malsam-Rysdon
Secretary of Health

SHARING OUR STORIES

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eICS/911 Critical Access Hospital Notification Project
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Severe Weather Awareness Week in South Dakota

IT'S SO CLOSE, YOU CAN ALMOST SMELL THE DAFFODILS!

Spring officially starts tomorrow! The snow is gone and soon the trees will start budding.

Everyone knows dogs have a great sense of smell. However, did you know humans can remember 50,000 different scents.

So make sure you stop to smell the flowers as they start to bloom this year. You have plenty of memory space available on your olfactory drive!

Enjoy Spring!
Sam Hill-Editor in Chief



WELCOME ALEXANDRA LITTLE-REGION 2 COORDINATOR



The SDDOH is thrilled to welcome Alexandra Little to the team as the new Region 2 Coordinator.

Alexandra earned a Bachelor of Science in Business Administration with a major in Health Services Administration from the University of South Dakota. Prior to joining DOH she was employed with Sanford Aberdeen Medical Center as a Director Assistant / Volunteer Coordinator and provided support to the CFO and the Chief Nursing Officer. In addition to her regular duties she has been engaged with disaster preparedness representing the facility at regional Health Care Coalition meetings, POD meetings and

LEPC meetings.

Alexandra will be working out of the Aberdeen DOH field office where she shares her home with her husband Jared and their two dogs Lincoln and Lucy. In their off time Alexandra and Jared enjoy relaxing on the lake and winter ski trips.



Located in Dillon, Colorado, Arapahoe Basin Ski Resort has a top elevation of 13,050 feet.

The resort offers the highest ski slopes in the United States.



REGION 1-HCC PARTNERS PARTICIPATE IN RALLY TABLE-TOP

Region 1 participates in pre-75th Sturgis Rally Tabletop

The 75th Sturgis Motorcycle Rally this August is expected to be the largest in history bringing approximately 3/4 of a million people into the Black Hills area. In preparation for this major event, Region 1 members participated in a tabletop exercise hosted by the South Dakota Office of Emergency Management. Over 150 people attended from many different depart-

ments, including representatives from the Federal, State, County and City law enforcement, emergency management, health care, and multiple other agencies. Agencies such as the State Police and Department of Transportation routinely work together, but in a normal year Health and Human Services may never have the ability to discuss emergency response with Fire Department or Emergency Management personnel. The scenario

discussed multiple topics in response to a simulated disaster in which a large amount of casualties and fatalities occurred. The attendees broke into working groups to address initial response, available resources, mitigation techniques, and recovery efforts. Obviously health care needs and response are a large part of any disaster scenario, but this particular exercise required Region 1 participants to “think outside their box” and be able to see

the operational requirements that other departments deal with. As a whole, all members came away with a better understanding of gaps in staffing, resources, and training which will allow them to address any of these shortfalls prior to the event. Pre-planning exercises such as these are beneficial not only for this years “mega rally” but will ensure better DOH Region 1 preparedness in the future.

REGION 2-THANK YOU!

Region 2 Partners,

Thank you so much for your patience during the search for your new regional coordinator.

You’ve all been so wonderful to work with for the past few months. Whether it was budgets, planning, exercises or just some

simple password resets. Not to mention all of the Ebola work that has been done with training and exercising. You all kept the group on task and moving forward.

Alexandra is lucky to have such a strong and dedicated region. We know she is excited to get started in her

new position as the Region 2 Coordinator. We’re certain she will be a great asset to DOH and our SD Healthcare Coalition.

Thanks again for your support and teamwork!

Carol , Sam and Andy



REGION 3- SIOUX FALLS EBOLA EXERCISE

On January 28th Sanford USD, Rural Metro, the Sioux Falls Health Department and SD DOH had a drill to exercise their plan for receiving a potential Ebola patient.

It started with a traveler with symptoms walking into the Sioux Falls Health department clinic. The physician, in PPE, questioned the patient and determined she would be transported to Sanford USD. With a call to Rural Metro they draped the interior of one of their ambulances in plastic sheeting. The crew changed into PPE once they arrived at

the clinic. The patient was then transported to Sanford USD where she was received in the ambulance bay by ED staff. Once inside, two RN's, one in the room and one in the adjoining clean room, worked in tandem to gather information and samples to be sent on for definitive testing.

As intended, the four hour exercise identified solid protocols as well as gaps in the process. These items were addressed at the After Action for further follow-up and correction. Thank you to all who participated.



The official start of Spring 2015

Friday, March 20

5:45 PM CDT

4:45 PM MDT

-Farmers Almanac

Spring is nature's way of saying, "Let's party!"

-Robin Williams

REGION 4-EICS/911 CRITICAL ACCESS HOSPITAL NOTIFICATION PROJECT

Douglas County Memorial Hospital continues to work on the eICS/911 Critical Access Hospital Notification project.

The program involves 911 dispatchers using our Intermedix eICS program to send notifications to hospital staff when an ambulance has been dispatched. The message contains a few patient demographics such as age and gender, as well as the

chief complaint. The message is sent to the on call provider, xray staff, lab staff and the on-duty charge nurse. This extra time gives on-call staff a jump on getting to the hospital ahead of the patient. It also allows on-site time to get necessary equipment or procedures set up for the patients arrival.

Heather Messer, of DCMH has been leading this project and

has compiled a years worth of results and data. And now she would like to invite other CAH's to get involved too.

If your facility would like to learn more about this project, please contact Heather at messerhe@dcmhsd.org

MACKS IS READY!

After many months of planning, designing and building, the mobile morgue is complete.

MACKS is a 35 foot long mobile morgue trailer. It was designed to allow for all post-mortem activities to take place inside an enclosed mobile unit. Activities this suite can accommodate include photography,

dental x-ray, fingerprinting, DNA collection, full autopsy and embalming. The layout allows for two pathology teams to conduct operations at the same time.

Having a mobile morgue allows deployment of critical assets to a mass fatality event in any community in South Dakota.

Bringing MACKS to the scene can eliminate the logistics and expenses of moving victims to established fixed site morgues in Sioux Falls or Rapid City. Most importantly, use of this mobile morgue will expedite the identification process and return of decedents to their families.



Interior of MACKS



THE PARTNERSHIP PROJECT

COOP and Recovery

HPP Capability 2- Healthcare System Recovery

By the time of this HiPPO distribution, the COOP training will be underway. We understand COOP and Recovery planning is a time consuming endeavor and if someone should ask you the million dollar question, “*why do we need this?*” here are a few talking points gleaned from the National Conference, reading articles etc.

First of all, there is a **community or public expectation** that regardless of the emergency event, there will be some type of healthcare services available; even if it is for treating the ill/injured after an event that exceeds normal response and resources. More specifically, patient/residents/clients, your employees, vendors, and others will be relying on the organization to continue essential services. The planning is an **investment for long term benefits**; to me, it’s like buying an insurance policy that you hope you never have to use but it is there should something happen. COOP and Recovery planning is indirectly tied to **financial stability of the organization** which equates to services provided will continue to generate revenue, maintain a workforce, and there will be the presence of an organization consistent with the mission and vision. While there may be many other ‘reasons’ for COOP and Recovery Planning as part of the Emergency Operations Plan (EOP), if an event occurs that has major impact on the organization, the **returning to a more ‘normal’ state** is anticipated to occur more efficiently and effectively.

The SDDOH/HPP wishes to assist in any way possible to provide information and assistance to healthcare organizations in this planning. Thank you for your participation at a local, regional, or state level in this and all other activities!

Jan Clites

HPP Partnership Consultant/Coordinator

LIFESCAPE PANCAKE BENEFIT

When: Sunday, April 12, 2015- 7:30 a.m. – 2:00 p.m.

Where: Sioux Falls Convention Center

What: Pancakes by Chris’s Cakes – sausage- coffee – juice

Cost: \$5 per person in advance or \$6 at the door. Children under 5 eat FREE!!!

Why: Support People of all ages served by LifeScape!

Come join us for some fun & food!!

Tickets can be purchased through [Mary Clark](#) at LifeScape.

The Pancake Benefit is a very fun event that draws over 3,000 people together to enjoy delicious pancakes. This event is in its 23rd year and has become a tradition for many throughout the community.



THE HUNGRY, HUNGRY HIPPO

Corn Salad

Julie Schultz— Avera Weskota Memorial Hospital—Region 4

- 2 Cans whole kernel corn – drained
- 1 purple onion – chopped
- 1 red, yellow or green pepper – chopped (like the red pepper the best)
- 2 cups shredded cheddar cheese
- 1 cup of mayo
- 1 bag of Chili Cheese Fritos



Mix together and just before serving crush one bag of Chili Cheese Corn Chips and mix into salad. If your not serving the salad right away or if your expecting left overs, just crush the Fritos up and place in a bowl for guests to add as a topping. Then you avoid soggy chips!

** Can cut this recipe in half for smaller serving.



Hungry Hungry Hippo says,
"Chili Cheese Fritos rock!"

THE CONFERENCE CALL-A SNARKY POEM BY SAM HILL

"You are now joining your call",
Those six words are what starts it all.

Beep! Beep! "Hello?" B-Bee-Beep! "Did someone just join us?" Beep! Beep!

Ah yes. The dreaded conference call.
60 minutes of trying not to put your head through a wall!

"Ok everybody, we're just waiting for Jacquelin,
Once she gets here, we'll be ready to begin."

After a few awkward minutes and a general consensus,
Without dear Jacquelin, the meeting commences.

Ok, we'll start now with the agen-" **Beep!**
"Hi! It's me, Betty! Did the meeting start already?"

"Just a reminder to please mute your phones."
Prompts a three second flurry of mute button tones.

But it turns out, not everyone knows how a mute button works,
Thus begins the audio tour of your co-workers quirks.

It starts with the poor schmuck with a terrible cough.
Seriously, man. Just take the day off.

Then the stick-in-the-mud doubter, the unaware shouter,
And it wouldn't be a call without the woe-is-me pouter,

Beep! "Is that you, Jacquelin?"
"Nope. It's me, Sven."

The super high-strung, incessant pen clicker
Relax, spaz! You're gonna blow out your ticker!

As the call goes on that guys cough evolves into a hack,
For crying out sideways! Dude, get a Z-pack!!

And you know who you are, you annoying wrapper crinkler,
Hang on. Was that a toilet flushing? Oh my word! We have a tinkler!

Now it's forty five minutes in and I haven't taken one note,
I'm too distracted by the person chewing like a goat.

Beep! "Jacquelin, is that you?"
Nope. It's me, Stu.

Then there's everyone's favorite. The heavy breather,
Hey pal! Try moving your face away from the speaker.

Finally, there's the slacker who pretends he's always working,
Busted, buddy! We can hear your dog barking!!

Hey wait. Where'd the coughing guy go? Suddenly there's nothin',
Now I'm worried. Did he die or just find his mute button?

Unfortunately, I'll never know this poor mans fate,
As our call has come to an end, three minutes late.

But as the callers hang up, click after click.
I pause for a moment wondering about the man who is sick.

And that's when I hear it, **Beep!** One last call coming in,
"Hello? Is anyone there? Helloooooo"
It's me...Jacquelin."



NEW PASSWORD REQUIREMENTS FOR EMRESOURCE, EICS AND EMTRACK

Event: In an effort to comply with the IT industry's best practices for security and HIPAA/HITECH requirements, which are based on NIST security standards, Electronic ICS, EMResource, and EMTrack will be implementing a set of password policies, as described below.

Details:

The following password requirements go into effect for eICS, EMResource and EMTrack on March 2, 2015:

- Electronic ICS and EMTrack passwords automatically expire in 90 days. **Note: Automatic password expiration is not being enforced in EMResource at this time.**
- When you change your password, you are not allowed to reuse any of your last five passwords.

Select strong passwords. A password must be a minimum of eight characters in length and must include characters from three of the following four character sets:

- Lowercase letter
- Uppercase letters
- Numbers 0 - 9
- Any of the following special characters: - ! @ # \$ % ^ & * () { } []

After resetting your password, at least one day must pass before you can change it again.

After 10 unsuccessful attempts to access the system, you will be locked out. For security and verification reasons, local application administrators have the ability to unlock your account. When necessary, Intermedix Support can help administrators and users reset passwords and unlock accounts. Contact the Support Desk at 1-888-735-9559.

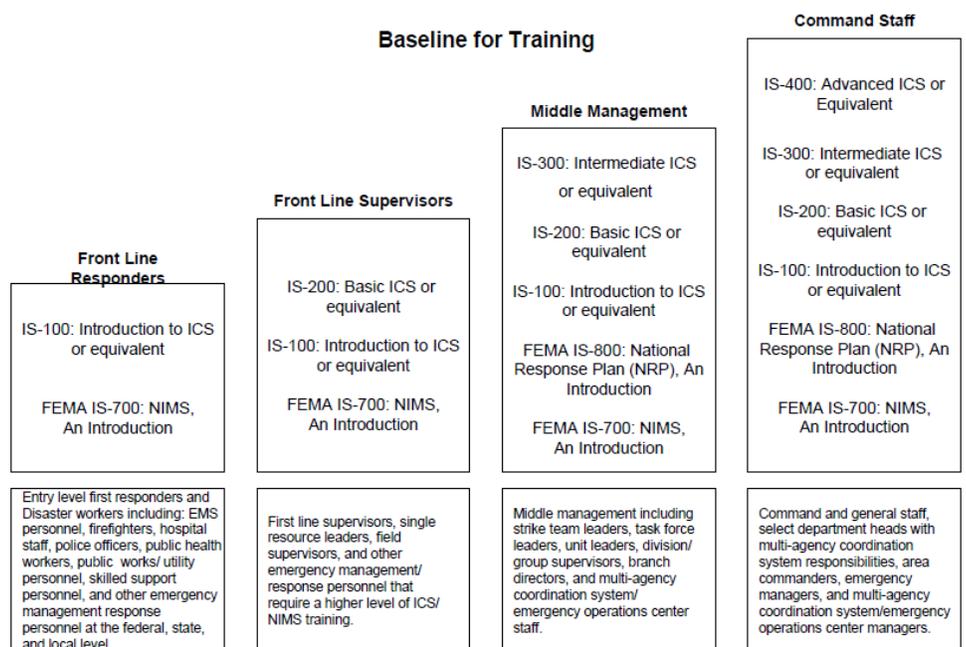
NIMS-WHO NEEDS WHAT?

Have you been wondering who at your facility needs to take NIMS training? And then the question of which training to take.

NIMS/ICS is a valuable tool to help your team deliver a successful response during an emergency. However, you're all very busy and your time is valuable too.

Here's a chart of suggested NIMS courses for all levels of your response team.

[Click here](#) for course descriptions and online training opportunities at FEMA.gov.



* ICS 402 for Executive, Appointed or Elected Government Officials

HEALTHCARE SYSTEM RECOVERY –ANDY KLITZKE

With the first Business Continuity Planning webinar in the books, now is a good time to discuss how the Continuity of Operations (COOP) project ties to the Hospital Preparedness Program (HPP). Underpinning HPP are eight capabilities which address different aspects of healthcare preparedness.

Each capability is fleshed out by key tasks, functions, and resource elements identified as best-practices during the 10+ years of HPP.

Capability 2: Healthcare System Recovery identifies key activities and processes that allow Healthcare Coalitions to support the healthcare system following a disaster and return it to pre-incident or improved capacity.

Healthcare System Recovery consists of two functions. The first function focuses on recovery processes for the healthcare system. Key tasks for this function are to identify and prioritize recovery needs based on likely

incidents and to encourage healthcare organizations to participate in community-level disaster recovery planning before and after a disaster.

The second function for Healthcare System Recovery focuses on assisting healthcare organizations implement COOP. Key tasks for this function are to identify healthcare essential services following a disaster, to encourage healthcare organizations to develop COOP plans, to assist a healthcare organi-

zation activate COOP, and to coordinate strategies for returning to normal operations.

Two years ago, the HPP Leadership Group identified Healthcare System Recovery as an area for improvement. The COOP Projects is designed to develop plans and processes from Function 2 to build recovery capacity at the organization level. The second step will strengthen Function 1 by developing coalition-level recovery plans that identify and address gaps common to organizational plans.

PEDIATRIC DISASTER RESPONSE TRAINING –JAN CLITES

At the Denver National Healthcare Conference we were introduced to Indiana's work on preparing for ventilator-dependent children in the community. [Click here](#) to link to the video and Toolkit, available in English and Spanish that would prepare a family for sheltering or evacuation. As I have looked at this, there is application to adults and may be helpful to

your organization, discharge planners, home health, or others.

The Pediatric Disaster Response and Emergency Preparedness MGT-439 is a 2-day FEMA course that includes a 'to do' list. My list is at least THREE pages long! I gained valuable information on Sheltering (approved service animals include small

horses and dogs-could we accommodate?) and we were given a listing of supplies that would support 10 infants & children for 24 hours (local/regional cache?); Reunification Process; Pediatric Decontamination; and much more information than this short paragraph could include. But, two things are for sure;

that being prepared to care for children is relevant and can be included in our local/regional/state planning efforts; and, finally, if this course is available in the future, I would encourage attendance.



One of the best ways to enjoy wildlife in the comfort of your home is to watch birds at a feeder. You'll be amazed at the variety of birds that will come to your feeder throughout the year.

FEEDING OUR FEATHERED FRIENDS

When searching for that perfect feeder keep the following tips in mind.

Plastic, steel, or glass feeders are easier to clean than feeders with porous surfaces, such as wood or clay.

Small feeders empty quickly, leaving less time for seeds to get wet or spoiled.

Choose feeders with no

sharp edges or points; the design should allow birds to perch away from the food to keep it from becoming soiled.

Set up more than one feeder and allow ample space between them to avoid crowding.

Choose a feeder with drainage holes, and add a plastic dome to keep seed dry.

Birds are most likely to eat where they feel safe from predators. Place feeders twelve feet from a brush pile, evergreen tree, or bush. Birds can quickly fly twelve feet to reach the safe cover, yet predators cannot use it to hide within striking range of the feeder.



MASS FATALITY CAPABILITY DEMONSTRATION

March 9-13, the Mass Fatality Committee was set up at the WH Lyons Fairgrounds Expo building in Sioux Falls to demonstrate our states capability to respond to a mass fatality event.

The demonstration included a scene using manikins to explain the process of scene documentation and evidence collection. Stations were also set up for decon, cold storage for remains, dental xray and fingerprinting. Guests also had a chance to see MACKS, our mobile autopsy suite that is now fully stocked and operational. The tour also included discussion on the operations involved at the Family Assistance Center and the Victim Identification Center.

Over the course of the 3 day event, 289 people representing 68 different agencies made their way through the exhibit. If you didn't get a chance to make it to the Expo building, we'll have MACKS set up at the interregional meeting in Oacoma in June.

Mass Fatality Planning Committee

- Dr. Kenneth Snell—Minnehaha County Coroner/ME
- Lynn DeYoung—Minnehaha County Emergency Management
- Doug Blomker—Minnehaha County Emergency Management
- Sandy Frenz—Sioux Falls Health Department
- Regan Smith—City of Sioux Falls-SFFR
- Samantha Hill—South Dakota Department of Health
- Doug Nohava—South Dakota Funeral Directors Association
- Tom Welch—South Dakota Office of Emergency Management



Sandy tests out the MERC racks!



Sioux Falls School District Nurses get a tour of MACKS



Rescue manikins were used to simulate a mass fatality scene.



Dr. Snell leads a tour for Sioux Falls Fire Rescue.



State DOH and OEM leadership learn more about the process.

THE FUTURE OF SD HEALTHCARE COALITION-JAN CLITES

HPP Capability 1: Healthcare Preparedness

We have been discussing the 'future' of our SD Healthcare Coalition over the past months/years as HPP funding has decreased and is anticipated to further decline. I believe many of us attending the National Con-

ference in Denver thought we would hear from other States how they had developed their Coalitions; and this would provide direction for our State. While there are some established Coalitions, it became more apparent that what we have accomplished in SD (our Regions) is envied by others and that there is not a one-

size-fits-all model. The Leadership Subcommittee (Sandy Frenz, Vicki Lehrman, Jan Clites) prepared three governance options with a draft charter and bylaws to achieve a self-sustaining coalition. Leadership from the four Regions in January spent considerable time in discussion and will continue to work on identifying an

optimal outcome. What is the value of our Regional/State Coalition? If there were no/limited HPP funding would your organization continue to support your participation? There are many unanswered questions but we can view the challenges ahead of us as a glass half-full or half-empty. Your continued participation, feedback, and support are critical as decisions are made.

The Educated Hippo!!

Mark your calendars!!

SD HCC Interregional
Meeting
Oacoma
June 3rd and 4th
Watch for more info!

Mass Fatality Incident Response (FEMA G-386)

WHERE: Chamberlain City Hall – 112 North Main Chamberlain, SD

WHEN: April 2-3, 2015 8:00 am–5:00 pm

CLASS LIMIT: 35

TARGET AUDIENCE: Personnel with a role in a mass fatality incident:

Coroners/Medical Examiners, Funeral Directors, Members of the Clergy, Law Enforcement, Fire Service/EMS, Healthcare, Emergency Management, Public Works

COURSE DESCRIPTION:

This course prepares local and state response personnel and other responsible agencies and professionals to handle mass fatalities effectively and to work with the survivors.

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 contact the SD DOH Training Coordinator LaJean Volmer at

LaJean.Volmer@state.sd.us

eICS Training

As part of the State Exercise, there have been several eICS training sessions offered. Below are the dates and times for upcoming trainings. Please try and have at least 3 persons from each facility attend this training.

March 19, 2015 9:00-10:30, 12:00-1:30

March 26, 2015 9:00-10:30, 12:00-1:30, 2:00-3:30

April 2, 2015 9:00-10:30, 12:00-1:30, 2:00-3:30

In addition, the final pre-event communications drill will be held on Tuesday, April 7, 2015 from 9:00am-11:00am.

Keep in mind that the primary communications process for the exercise on April 21, 22 and 23rd will be using eICS. End users should have a good deal of comfort in the use of the program by that point in time.



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.

Dear Coalition Partners,

Here it is March already, time to think basketball! It's also time to continue to think EBOLA. Active Ebola transmission area travelers #11 and #12 are arriving in South Dakota this week. Although travelers #1 through #10 have all remained healthy throughout their potential 21 day incubation / monitoring period, it is just a matter of time before one of these travelers begins to exhibit symptoms consistent with early onset Ebola virus disease (EVD). Odds are very likely that it will be another illness such as influenza or malaria but we can't afford to be complacent and risk it may be EVD. We must maintain a high level of preparedness until the West Africa outbreak is over.

I encourage all of you to continue to be vigilant in screening patients for recent travel from an active Ebola transmission area. Continue to train and educate staff on the proper response to a symptomatic patient who declares recent travel to a transmission area. Participate in drills and exercises. Verify your current inventory of PPE supplies. Continue to train and exercise your staff on donning and doffing PPE. If you have questions or concerns, please feel free to contact your DOH regional preparedness coordinator and they will be happy to steer you in the right direction.

So, please don't forget about Ebola when you're filling out those March Madness tournament brackets.

Enjoy the spring season,

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

Chuck Kevghas
Chuck.Kevghas@state.sd.us
605-773-2792

Region 1

Andy Klitzke
Andy.Klitzke@state.sd.us
605-773-4412

Region 2

Alexandra Little
Alexandra.Little@state.sd.us
605-626-2227

Region 3

Samantha Hill
Samantha.Hill@state.sd.us
605-367-4510

Region 4

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



SOUTH DAKOTA DEPARTMENT OF HEALTH

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.

SOUTH DAKOTA DEPARTMENT OF HEALTH

Office of Public Health Preparedness and Response
600 E. Capital Avenue
Pierre, SD 57501

Phone: 605-773-3361

Fax: 605-773-5683

<http://doh.sd.gov/>

The Prepared Hippo!!

Severe Weather Awareness Week—South Dakota

April 20-24, 2105

Statewide Tornado Drill—Wednesday, April 22nd.

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.



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 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 dates, times and locations of South Dakota Weather Awareness Training sessions.





The Happy Hippo!

WORD SEARCH

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

AZALEA

CROCUS

DAFFODIL

DAISY

HYDRANGEA

IRIS

LILAC

LILY

PANSY

PASQUE

PEONY

RHODODENDRON

SWEETPEA

TULIP

Bonus Word

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

MEDICAL MIX-UP! - MATCH THESE TV AND MOVIE NURSES

A. Carla Espinosa

B. Janice Rand

C. Jackie Peyton

D. Dixie McCall

E. Margaret Houlihan

F. Carol Hathaway

G. Mildred Ratched

H. Bobbi Spencer



1. ____



2. ____



3. ____



4. ____



5. ____



6. ____



7. ____



8. ____